

## thefastingmethod\_113.mp3

**Megan** [00:00:06] Before we get started with today's episode, I would like to quickly read you our podcast disclaimer.

[00:00:13] This podcast is for educational purposes only, and it is not a substitute for professional care by a doctor or other qualified medical professional. You should always speak with your physician or other healthcare professionals before doing any fasting, changing your diet in any way, taking or adjusting any medications or supplements, or adopting any treatment plan for a health problem.

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[00:01:13] All right. And now we'll get started with today's episode.

**Nadia** [00:01:19] Hi everyone, and welcome to another episode of The Fasting Method podcast. My name is Dr. Nadia Pateguana, and I am here today to do another fun Q&A for all of you. I love doing these because it's a great way to clarify some information. It's a great way for me to get to repeat myself. I'm a big fan of repetition, and so if you've heard some of these questions, if you know the answers to some of these questions, I'm actually very happy for that. I think that we learn by repetition. And I love, love your questions, so let's get started. So I think I have six questions for you guys today. I think a lot of these questions are a good follow-up to one another or they're somehow related, so I'm glad for having chosen these six ones for you guys today, all right?

[00:02:04] So let's have a look at the first one. "I get heartburn in the afternoon or evening when I'm doing an extended fast of 24 to 48 hours. Any suggestions on what might help?"

[00:02:16] Okay, so this is a good one for me to answer because I think it's a very common thing. I, myself, felt heartburn during many fasts, and I think that a lot of times people get confused about this, right, because, of course, we associate heartburn with a lot of discomfort. And also, you know, it probably makes you wonder whether fasting is good for you or bad for you. You know, and I think that this is related to to a couple of other questions that we're going to talk about today. So I think it is very common for people to get heartburn when they go long periods of time without eating, and it isn't because the fasting or going long periods of time without eating is actually what's causing the heartburn. What is happening, most likely, is that, because you are not eating constantly, you're not suppressing that feeling, that symptom. So it's not the cause of the problem, but constantly eating, for many people, suppresses the symptom of heartburn, which of course is caused by an underlying condition, like gastritis, right? Inflammation of the stomach, reflux, GERD and things like this. So very common symptom, happens often in people with different conditions - hernias and pregnancy and whatnot - and one of the ways to suppress it, people find, is if they eat all the time, right, every couple of hours. You know, that food and whatnot will sort of push that acid down and you get less of a symptom.

[00:03:37] What is most likely to happen is that these foods that you're suppressing the symptoms with, and the fact that you're constantly grazing and eating, is actually creating a bigger problem down the line. That's why the heartburn in and of itself doesn't actually

go away. Again, you just keep on putting a Band-Aid over that bullet hole, as Dr. Fung would say. So our experience with fasting, long-term therapeutic fasting, continuous, consistent fasting of, you know, alternate days and even some extended fasts, is that, over time, people actually report the heartburn going away over time, although I would say that, as you start to fast, if you have heartburn (and again, it's caused by a preexisting gastric inflammation caused by something), then, at the beginning when you first start fasting, you're going to notice it more than you did while you were eating all the time. So basically, the fasting is not causing the problem, right, the condition, but you no longer have the food there masking the problem. So it's more obvious.

[00:04:37] My suggestion-- and this is used very often in our Community with great results. My suggestion is, if you are one of these people that gets either heartburn or something else like loose stools (some people do get loose stools when they first start fasting), one fasting aid that I find has helped in both of these situations is chia seeds in water. Now, be warned that not everybody could do chia seeds. If you have conditions such as diverticulitis or intestinal obstruction, tendency for intestinal obstruction because of gastric bypass or something else, you know, chia seeds may not work for you, but for most people they work very, very well. There isn't an absolute recipe for how to take chia seeds, although you have to be cautious because too much chia seeds can not only help bulk up stools, if you have loose stools, but it can, in very high doses, create obstruction. So most of the time it's really not an issue. It's a really great aid for heartburn because what it does, when you make a pudding of chia seeds in water, as you're fasting, if you take a little bit of this pudding throughout the day, two or three times a day-- and I'll give you better instructions on how to do that. But as you're drinking this chia-seeds-in-water pudding, you know, it's helping to, again, mask that symptom of that acid reflux and that heartburn but without creating further inflammation, like most foods that you may be grazing on during your regular eating days or previous eating days, okay?

[00:06:06] So chia seeds will help mask the symptoms as you are healing with your therapeutic fasting throughout the course of the next few weeks, months, etc.. So the idea is not that chia seeds is going to cure the heartburn. It's helping to relieve that symptom while not creating further inflammation, and while not creating a further insulin response because chia seeds, of course, have an insignificant insulin response.

[00:06:31] So the way that I do this is I take a little bottle of water, I put two tablespoons of chia seeds, I mix it. You kind of let it sit for about 15 minutes, mix it again. It makes this pudding. This pudding doesn't taste like anything. It's not supposed to taste like anything, right? It is very jelly-like and you can keep it in the fridge for a couple of days. Of that mixture, you take one or two tablespoons of that mixture. So that whole pudding has about one or two tablespoons of chia seeds. So when you take one or two tablespoons of the mixture, once the water is sort of soaked into the chia seeds, you're consuming a much smaller amount of chia seeds than what you originally put in it. And that little pudding will probably last you, as I said, two or three days in the fridge, okay? I find that that's very helpful when people have heartburn or when they have very loose stools during fasting. So it's two tablespoons of that pudding. It's just chia seeds and water, okay? I don't recommend that you put this into some type of coconut milk or something else. Save those type of chia puddings for your eating days. For your fasting days, use it as a fasting aid to help with this particular fasting side effect, okay? It's not supposed to taste like anything. It's just something that's supposed to help you with that particular symptom.

[00:07:47] All right. Let's get to the second question. "I've always had a lot of charley-horse type of leg cramps and abdominal muscle cramps. Usually these happen more when I'm

doing a low-carb diet. However, when I'm fasting, these muscle cramps happen far more frequently. The cramps seem to improve and not be as frequent if I am well-hydrated, but they get worse if I drink a lot of coffee and also if I drink wine on my eating days. Should I be adding more salt perhaps?"

[00:08:16] This is a great question and the absolute answer to that is yes. You definitely need more salt if you're doing a low-carb diet, and particularly if you are fasting, we talk quite a bit about this, but I want to talk a little bit more, and again, repeat, repeat, repeat, okay? So definitely, I think that when you do a low-carb diet and fast, you need to learn how to take salt and how much salt, more or less, to take, so I'm going to give you some general recommendations for that. But you also need to be aware that you need magnesium as well. Now, the salt is imperative because salt, I call it an electrolyte-sparing agent.

[00:08:54] So if you fast or do a low-carb diet, as your insulin starts to decrease-- which is what you want, right? Our objective here is to reverse insulin resistance or significantly improve insulin resistance. It's to reverse hyperinsulinemia (high levels of insulin in your blood). So as you start to do therapeutic eating (like low-carb diets) and therapeutic fasting (like the alternate-day fasts and the extended fasts), your insulin is going to drop consistently and continuously. And as your insulin starts to drop, this sends a signal to your kidneys to release. And so of course you release fluid, you release inflammation, but you also release these very important electrolytes like salt and magnesium.

[00:09:32] It's really important that you should not be replacing potassium and any other electrolyte unless your doctor has specifically given you a prescription for this, but salt and magnesium is something that you're going to have to tweak and individualize for yourself. If you're somebody who exercises more, who sweats more, who's out in the warm weather more, you're going to be somebody who's going to need more salt and more magnesium. So keep that in mind when I'm giving you some general recommendations here. But every single person on a low-carb diet, including children that are put on a ketogenic diet for epilepsy, need to have a very specific electrolyte and rehydration protocol, all right? Most of us adults that are doing low carb and fasting do very well with taking some salt outside of our meals and during our fasting periods, and taking magnesium every evening on both eating days and fasting days, particularly in the evening, because magnesium is a muscle relaxant, and, like you said, many people will often feel some cramps overnight on their legs. I think this is part of the next question, okay, so I'm going to jump to the next question that's very related to this one.

[00:10:40] It says, "I get restless legs and arms most nights when I'm trying to get to sleep. Someone suggests taking magnesium. Might this help?"

[00:10:48] So I wanted to bring question number three in here, because I think-- I'm talking about salt, but I'm also talking about magnesium here. I am going to go over my personal recommendations on how you should take salt and, generally, how much salt you might want to consider taking, but I'm also going to talk a little bit about magnesium here, okay?

[00:11:07] So for restless legs, specifically, there is a syndrome called restless legs syndrome. And I think that if you suspect that you have that, I would recommend that you get some medical advice, that you speak to your PCP, your nurse practitioner, your PA (physician's assistant), or whoever else takes care of your health for now, because you may or may not have this syndrome. And I do know that some people with restless legs syndrome are sometimes prescribed other things, such as potassium, which I do not

recommend that you take unless you've been prescribed by a doctor, unless you've actually had some bloodwork done and your electrolytes tested. Otherwise, if what you're calling restless legs and arms is what we call leg cramps, right? Most people that do low carb and intermittent fasting, like the person asking in question number two, then taking an adequate amount of salt and magnesium is probably going to resolve that.

[00:12:01] If you're fasting and doing low carb, I call salt an electrolyte-sparing agent. If you take enough salt, in a normal situation, right, in somebody who's healthy and doesn't have any other deficiencies, any other electrolyte deficiencies, taking that salt properly outside of your meals and during your extended fasting periods is actually going to help retain or maintain or keep your other electrolytes in its appropriate dose. The magnesium is something that, any time you go on a low-carb diet and intermittent fasting, you need to take. Most of us are already deficient in magnesium. We may not realize it, but a lot of this cramping that you're describing, irritability that people often have, you know, trouble sleeping, constipation and other bowel symptoms, may be related to some magnesium deficiency. It is very common to have a magnesium deficiency and not know about it. So I do think it's adequate that most of us would and should take a magnesium supplement daily, particularly if you're on a low-carb diet and, for sure, if you're doing intermittent fasting or therapeutic fasting.

[00:13:06] We do have a great resource in our app, under our Resources, under our Quick Guides, you can get access there to a really great magnesium guide, different types of magnesium, because there's going to be quite a few. And when you're choosing the type of magnesium, you kind of want to look out, you know, what your symptoms are. So if people are constipated, they tend to take a certain type of magnesium. If they tend to have loose stools when they fast and they cannot take that type of magnesium, they have to choose another one. So then you're probably talking about, you know, should I take magnesium citrate? Should I take magnesium glycinate or bisglycinate? There are some people taking magnesium threonate, and this has often been talked about for brain clarity. It's a magnesium that people often take in the morning, not so much in the evening like the other few. There are some magnesi- um, like magnesium oxide, that Megan has often talked about and is in our resource that it's probably not the best choice for you to take.

[00:14:00] Most of these magnesium supplements will have a recommended dose on the bottle, and the recommended dose for magnesium is usually around 400 mg. But most people on a low-carb diet, or doing fasting, or people that already have a magnesium deficiency to begin with tend to need to go a little higher on that dose. So there are people within our Community that are taking upwards of 1000 mg, maybe even more. What happens if you take too much magnesium? Well, if your kidney function is good and if your kidneys are functioning appropriately, as they should, you just release it, okay? You get rid of it. It's not something that's toxic in higher doses, but you also don't want to take more than what you need. So my recommendation is that you start with the lowest dose and you just kind of go up a dose every day or so and just see how you feel.

[00:14:47] You can also take not just oral magnesium, but you can take topical magnesium. And this is something that people do quite a bit in our Community. I recommend it a lot, especially for full fasting days and for extended fasts, that you do some Epsom salt baths or Epsom salt foot baths in the evening. These are great of course for relaxation, but Epsom salts are full of magnesium salts and that's a really great, nice self-care type of way of increasing your magnesium topically. Your body absorbs it and that's something that will help to prevent these leg cramps and it helps you sleep better, etc., etc.. So if you are already taking an oral dose of magnesium or if you find that you're

very intolerant to magnesium because maybe it causes you loose stools, no matter which magnesium salts you take, you can just do the topical, but I would recommend doing both. This is my personal opinion, especially on fasting days.

[00:15:41] I have recently purchased a really great magnesium oil bar from the store Lush. Now, I'm not promoting anything here. It was recommended to me by one of our Community members and I'm absolutely in love with this thing. It wasn't very expensive. There are many topical magnesium products out there like magnesium sprays, rubs, lotions, and this was just one that I found recently that I really, really liked. And it's very easy. It's a bar, like a soap bar, but it's magnesium oil infused with lavender. It is absolutely lovely and very affordable, and it's something that you can rub on your legs and arms before you go to sleep. And you can be assured that not only is that soothing, but it's a great way to get some magnesium into your body. Your skin does absorb it, it does go into your system. It is really, really great.

[00:16:30] Okay, now let's talk about salt. When you are eating on an eating day, you are getting a certain amount of salt, whether you're getting too much salt or not enough salt, but you are getting some salt. All right? Some people get more. Some people get a little bit less. If I could say, on average, most people are getting about 1 to 1.5 teaspoons of salt per day on their eating days. Actually, I'll say many people, because I actually think that most people might be getting a lot more than that. Now, I know there's a lot of fear around salt because we think that, you know, salt will cause hypertension or salt is the cause of hypertension. And for that, I, of course, would take up the whole podcast talking about this, but we have a really great resource and reference for you guys here. If you have ever heard of Dr. James DiNicolantonio, he's the electrolyte guy. He wrote a book with Dr. Fung called 'The Longevity Solution', but he does have his own books, particularly on electrolytes. He wrote the book 'The Salt Fix'. I think it's really important for you to read that book, especially if you're fearful of taking salt while fasting.

[00:17:38] What I want to ease your fears about here is that remember that on your eating days you're getting at least a teaspoon of salt on your eating day. Besides salt, of course, you're getting nutrients, you're getting some amount of protein, fat, and maybe sugar, and you're producing insulin when you eat, right? So when you eat, not only are you getting salt, but you're getting some amount of insulin response. That amount of insulin response is going to cause retention. So the salt that you actually consume with your meals gets absorbed, gets retained, in part, because of the insulin reaction. Insulin sends a signal to your kidneys to retain, to conserve, to keep that salt in. Of course, if there's too much insulin, then you're going to retain a lot more salt. And if you read Dr. James DiNicolantonio's book, you will then understand that it's the insulin that's causing the hypertension and the other retention problems and not so much the salt.

[00:18:36] Now, the complete opposite happens when you are fasting, because when you're fasting, not only are you not consuming any salt, but you're also not eating, and the act of not eating, the act of fasting, is causing a drop in insulin. And as I said earlier, that drop in insulin will signal to your kidneys to release instead of retain. So instead of retaining salt, which you need, by the way. We need salt for all of our chemical reactions and for every tiny little thing that your body has to do. It needs salt, particularly to retain those other electrolytes that we talked about that are very important for other functions. When the insulin drops and it signals to your kidneys to release, not only are you not retaining some salt that you need (because, number one, you don't have any from food, you're not eating), but you're releasing some of those stored electrolytes that you need, like magnesium, potassium, and the fluid, and the inflammation, and whatnot. That's why

fasting is so great for releasing fluids, for swelling and inflammation, but it's not great in the sense that we're not eating, we're not getting enough salt (and we need salt), and we're releasing our stored electrolytes. So we dehydrate.

[00:19:49] This is the one thing that everyone needs to know about fasting is that if you're going to fast, you have to fast adequately and you have to replace your electrolytes, particularly salt and magnesium. My preferred way to get salt into you is to take tiny amounts of salt, like rock salt, pink, Himalayan rock salt - one rock under your tongue about every hour. If you were to measure that from morning to night, you're getting about a teaspoon of salt, maybe a little bit more throughout the day. Now, remember, you're not getting any from your food and you're releasing. So you are at a negative when it comes to salt on your fasting days, and that's not great. You don't want too much insulin and too much salt on eating days, but you don't want a negative salt situation on your fasting days either, because not only is it going to feel like all this cramping and headaches and irritability and possibly dizziness and nausea, but it will make your fasting extremely difficult. If you take the adequate amount of salt throughout the day on your fasting days, you'll be able to function properly because not only are you able to get fuel from your fat stores, but you'll have enough electrolytes to go on with your day without causing dehydration. Okay, so salt under your tongue every hour. That's what I prefer. Some people put tiny amounts of salt in their water as well, especially if they're very active throughout the day or if they're about to go exercise.

[00:21:14] Okay, so I answered question number two and three there. All together, I believe. Let me get to question number four. All right. This is a fun one. "I get really bad breath when I am fasting. I'm now a bit paranoid about kissing my partner. Help!"

[00:21:29] That's a very common question. I think I get asked this question quite a bit. Even this week I had somebody ask me about this. I think it's very, very common that when people switch to a ketogenic diet and/or intermittent fasting, they notice the keto breath, as it's called. In my experience, we either get used to that or it tends to get less and less over time. I think the reason why that happens, in both the ketogenic diet and when you're doing intermittent fasting, is because, of course, your body starts to burn fat for fuel and that releases these ketones, as you know. And particularly during the initial period of time when you're not, your body is not yet fat adapted, it's not used to utilizing those ketones for fuel, you release some of it, if not all of it, if not most of it, initially. So that release can be through your breath. Many people-- and I think there's a question about this later today, if I'm not mistaken. Yes. And so I'm going to talk about question number six here at the same time. But many people find that they get body odor from armpits, etc..

[00:22:34] I personally-- I've told this story before, but when I started fasting and doing a ketogenic diet, I had keto pee. So whenever I went to pee (and my kids were little at the time, so they of course would all come in the bathroom with me), they could smell ketones in my pee and they would comment because it was, you know, it was very, very obvious. Now the only thing that follows me, the only being that follows me into the bathroom is my pug, Potato, and I'm not sure what Potato thinks about my pee or if I still release ketones in my pee at this point! But I do think it is very common, as you start to burn fat for fuel, that you're going to release the smell of this odor, right, from your breath, sometimes other parts of your body like your armpits, and, many times, myself included, you may sense a different odor in your pee.

[00:23:25] So, what do you do about this? Well, I think that the most important thing is to remember that, number one, this is common (it happens to many, many people), and I do

think that, as your body starts to utilize that fuel better and not just release it, you start to utilize it and you start to feel more energy, I do think that that decreases quite a bit. When it comes to the odor when you pee, I think that's no big deal. You just pee it out. Make sure you go to the bathroom by yourself. Don't take your little kids or anybody else with you.

[00:23:54] When it comes to question number six, I'm going to read it out first. And this person says, "I have terrible body odor coming from my armpits when I fast. I've had to buy special odor-eliminating laundry detergent to get rid of the smell from my clothes. Do you think it's just part of fasting and losing weight? I've heard of fat-holding estrogen. Is it releasing that IVF estrogen, finally (from approximately five years previously), or is it just a perimenopausal, changing-hormones thing? I don't think the latter because it began when I started ADF again and I don't smell on eating days."

[00:24:26] I definitely think that this question number six is related to question number four. I do think that when we go on a ketogenic diet, I do think that when we start intermittent fasting, like you said, there is a lot of release that happens, right? Possibly, including the-- you know, if you've had IVF, if you have a lot of toxins in your body. I know Coach Larry talks about this a lot. I do recommend that you guys go to our resources. Coach Larry is a fountain of information. He talks quite a bit about how to help people, quote-unquote, 'detox' as this is happening, so he does talk about detoxing agents. So when it comes to help with supplementation, I always refer to Coach Larry, okay? So that's another resource there for you guys in our Forum and in our Community meetings. Please do hit up Coach Larry and ask him more about this, because I do think that there's a lot of truth in what you're saying here about this release of toxins and, possibly, if you've had an accumulation of toxins in your body from previous health concerns and medications and whatnot. So I do think that that's part of this picture.

[00:25:38] I do think (of course, I'm going through perimenopause myself) that there's a lot that happens with your body and change of hormones, and even change of body odor, during that phase of time. But I think coming back here to question number four, the keto breath, the keto pee, the keto body odor, I think it's very real. I think it's something that people do have to deal with. My recommendation is that yes, you should look up some detoxing mechanisms, lots and lots of fluids, exercise, yes, you know, get that stuff out properly. But I do believe in utilizing some detoxification mechanisms to help speed up this process of, quote-unquote, 'detoxification' that we're going through if you are fasting and if you are switching to a more ketogenic/lower-carb diet, but I think it takes some time. It takes some time for your body to adapt. It takes some time for your body to deal with this particular release of ketones and how to utilize them properly. Lots of fluids, lots of water (by fluids, I usually mean water), some salt and magnesium, like we talked about before.

[00:26:41] I found that, even though I didn't have a lot of keto breath (for me it was more the keto pee), I found that, with my clients, recommending peppermint tea or mint tea (and I grew that in my own garden), I found that that was quite helpful. And I do think that your body odor also can change (not just your breath) when you're drinking or eating things. Like, for example, I come from a culture (and many of you guys do too) of people that eat a lot of curry, for example, right? Like, in my culture, we eat a lot of curry and it's a very nice but strong smelling spice, and I find that my body odor will change depending on how strong the spices that I eat are. So I think if you drink a lot of mint tea, that might really help change the smell of your breath, of your pee, and even of your body odor. So that was something that I found, for me, to be very useful. You know, of course, there are many other things that will change the smell of your body odor and pee, like asparagus, right? So I think that it might not be a bad idea to investigate, for example, if drinking loads of

mint tea during this transition-- and I do think it's a transition until your body finally eliminates, especially if you're doing other things in combination to help with that elimination.

[00:27:54] Number five, and this will be the last question for today because I sort of brought in number six to number four - "I have rosacea that is managed by diet (not eating certain things) and careful skin care. When I hit 24 to 26 hours into my fasts, my rosacea goes crazy. My face is red hot and my skin is bumpy. It's as bad as if I had eaten hot peppers. It usually lasts 2 to 3 hours and then goes away. My esthetician says that maybe it's an allergy to the green tea I drink in the evenings, but I switched out teas (and even cut it out) and it still happened. Fasting is the only consistent thing that causes this flare up and it can't be a coincidence. Any idea why this happens?"

[00:28:42] Actually, I think this is such a great question and I do have some ideas about this, somewhat even related to what we were just talking about, about the elimination and about this idea of releasing an odor or other chemicals when you fast and are doing a low-carb diet. I have worked with many people with rosacea and people that have had other autoimmune conditions. In my past life, when I was still in school studying to become a naturopathic doctor, we did a lot of courses that talked about conditions that seemed to get worse. We call this 'aggravation of symptoms', whenever you started a treatment plan. So you won't be surprised to hear, or you might be surprised to hear, that rosacea is not the only condition that seems to get aggravated when you start with a treatment plan. We used to call this 'aggravation of symptoms', like if you started an acupuncture treatment or a homeopathic treatment and people got slightly worse for the first few days, then, according to traditional Chinese medicine and other alternative medicines, this is called 'aggravation of symptoms'. And it's actually a sign that that condition is going to get better, if there's consistency and if you continue with the protocol.

[00:29:55] Of course, you know that we call therapeutic fasting fasts that are longer than 36 hours. So what I hear you say is that you likely have this, quote-unquote, 'aggravation of symptoms' around 24 hours, which I think is very, very common. And the likely reason for that, if it is caused by the fasting, is that, as you know, at around the 20/24-hour mark, fasting is this mild stressor on our body. It's this mild stressor, but stress isn't necessarily a bad thing. It's this mild stress that is going to cause your body to, of course, start burning fat for fuel and start to lose weight, okay? So we do know that fasting is this mild stressor that occurs in everyone, and that's actually what causes your adrenals to release these counter regulatory hormones that make everything else happen. What is likely happening to you, to your particular situation, again, is this slight aggravation of symptoms that will last for a few hours. And just like I was talking about earlier today (the first question, heartburn), the rosacea, as you know, is a preexisting condition. So it isn't actually caused by the fasting and the fasting is not making it worse, but it is creating this aggravation of symptoms or, like we were talking about heartburn, it isn't getting suppressed by eating and by keeping your counter regulatory hormones down. As you fast, these counter regulatory hormones (including cortisol, the stress hormone) go slightly higher and, as that happens, you notice the slight aggravation of your rosacea.

[00:31:34] I can tell you, based on anecdotal evidence and clinical evidence, that I've had many clients with rosacea because rosacea is such an obvious symptom, one that people are often concerned about because it is on their face and very obvious, very red at times. People that have done therapeutic fasting (not necessarily for the rosacea but because of diabetes, obesity, etc.) have reported their rosacea (and this particular inflammatory, very obvious symptom, concern) having gone into complete remission.



[00:32:08] So my thought on this is that I would really love to hear from you, but I'd really love to help you, encourage you to continue with your fasts. When you're ready and when you've worked on that fasting muscle, move on to more of an alternate-day fasting protocol, if that's your goal. If your goal is, of course, to, let's say, lose weight-- you didn't mention it here. I'm not sure why you're fasting, but let's say your goal is to burn some fat and lose weight or reverse diabetes. I do advise you to move on to the therapeutic fasting which, in turn, will help you-- likely over the course of the next few weeks and months as we were talking about the heartburn. It will help you have a better understanding and idea of what happens to your rosacea once you actually go into therapeutic fasting.

[00:33:00] So therapeutic fasting (the specific protocol I'm talking about here) looks like two meals on an eating day, followed by a day of fasting (which is usually 36 to 42 hours), followed by a day of eating, so an ADF (alternate-day fasting) protocol. And although I do believe that for the first few fasts, maybe even a week or two, you may find this aggravation of symptoms or these first couple of hours of aggravated rosacea. I do believe that it will then go away, as you said, and they will become less and less frequent and less and less severe until, eventually, you may notice and find that your rosacea goes into complete remission. I would love to hear from you if that's the case, but I do believe, and I hope that my explanation makes sense-- I do believe that this is a case of aggravation of symptoms when a particular treatment or therapeutic protocol is starting to take effect. In this particular case, it's caused by a slight increase in the counter regulatory hormones, the stress hormones.

[00:33:59] All right, guys. Well, this was a load of fun. Thank you for your six questions today. I can't wait to talk to you guys very, very soon. I hope you guys enjoyed this episode. Please do subscribe and give us a like if you can, okay? Take care, everyone. Happy fasting.