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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 health care 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.

[00:00:42] The use of any other products or services purchased by you as a result of this podcast does not create a healthcare provider-patient relationship between you and any of the experts affiliated with this podcast. Any information and statements regarding dietary supplements have not been evaluated by the Food and Drug Administration and are not intended to diagnose, treat, cure, or prevent any disease.

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

Terri [00:01:17] Welcome back to another episode of The Fasting Method podcast. This is Dr. Terri Lance, and this is a Bitesize episode that actually comes from a previous episode. We hope you enjoy being reminded of this or, if it's the first time you've heard this, you may want to go back and listen to the original episode, and that link will be shared in the show notes. Hope you enjoy.

Megan [00:01:44] "Is fasting more important than your diet?".

[00:01:48] I get this question very often, and I think it stems a lot, too, from hearing Jason and I talk about our clinic patients. When we had our clinic in Toronto, we did have a group of patients whose diets had to remain what they were for various reasons. And believe it or not, there are extenuating circumstances where people really can't advocate for the type of food that they're having. Maybe they're living in a retirement home or a nursing home. We had newcomers to Canada that lived with large households of other relatives and they were dependent upon their relatives for buying groceries. They had to eat what was purchased. We had other patients who had personal support workers that did their grocery shopping and cooking on an extremely, extremely tight budget. So we did have a lot of these patients with these truly unideal diets, next to no real food. Zero real food, to be quite honest, in some cases. We fasted them. We fasted these patients and we got some really great results. Are they going to be in optimal health? No, but an example of one woman who had a personal support worker (and I think the personal support worker was just not very happy in her own life), she had a fixed budget of \$75 for groceries for the month, in Toronto, which is one of the most expensive cities in the world to live in. That's not going to get you much of anything. So we're talking canned food, bagged food. And this woman was on insulin. She was on 110 units. She was on four, oral, diabetic medications. And we got her off insulin doing three 36-hour fasts a week. She was not allowed to snack. There was junk food, of course, but she had to eat her junk food with her meals. She couldn't eat it in between. She came off of two of the four oral diabetic medications, and she definitely impaired her A1C. She brought it down to the high 6s from over 13. So is this optimal? No. But is it a lot better than where she was? Absolutely. So fasting is so critical. Meal timing is so critical and can have that much of an impact.

[00:04:10] Now, the nutrients that you get from real, whole foods... For real health optimization, you've got to work your way towards eating a real-food diet, a real, whole-food-based diet without processed and refined sugars and processed and refined fats. You've got to eliminate both. You can't just ditch the sugar. You've got to ditch the garbage fats, like seed oils. So if you're looking for optimal health, you've got to do that. But Nadia and I see this all of the time in our Community - people who are coming to us doing these real, whole-food-based diets, low carb, paleo, ketogenic, and we see people that aren't filling up on the fake paleo and keto foods either, but they're just eating all day long. And like that patient I described who got quite a bit better but not all of the way better through meal timing, we're seeing the exact same thing for those individuals that are, say, on a real, low-carb, paleo approach. They will lose 50 of that 80 pounds but can't lose that last 30. They'll knock their A1C down from 9 to 6. But why the heck can't they get it to 5 or 4.7? Why can't they get it to more ideal ranges? And they'll come into consultations for a coaching program or come into our Community forum and say, "Hey team, do you think I'm just so broken?".

[00:05:32] So we see the opposite happen in people who aren't fasting and that are really focused on their diet. They reach their goals, like 70% of the way, 80% of the way, but they can't do that last 20-30%. So to really optimize one's health, you need to focus on both the fasting and the real-food nutrition, because neither one of them is going to get you there entirely. They're all going to take you a nice chunk of the way there, but they're never going to optimize your health and leave you insulin-resistance free, unless you do them both.

[00:06:05] So is it better to fast than to not do fasting? Absolutely. I mean, if you can knock out the insulin and half of your medications, that's great progress. Your quality of life is going to be much better. Is it better to eat real, whole foods? Yes, absolutely. You know, you're getting all of the nutrients that you need, you're preventing a lot of disease, preventing a lot of other health issues. But without the fasting, you're never going to fully reverse that insulin resistance. It's important to understand that, once you have insulin resistance, the insulin resistance itself drives the body to produce insulin. So you can eat no carbs, but if you have insulin resistance, your body's going to be producing insulin anyways. So this is why those individuals on these great diets are unable to go that last mile and reach their health goals. So you've really got to do both. In either regard, if you're not going to change your diet, you're absolutely better off doing some fasting. If you're not going to fast, then you're absolutely better off changing your diet. But to really optimize your health and get rid of disease, you've got to do both.

[00:07:12] Nadia, anything you'd like to add there?

Nadia [00:07:15] [laughs] Again, hard to add to that because it's basically it, but it's because of your last point that I've often been asked-- and a long time ago I created my Five Pillars to Metabolic Health. And so I did categorize. If I had to put things in a-- because, ideally, you do both. That's it, right there. But if I had to categorize these and prioritize them (because that's what this question is asking), then I say that *how* you eat and so how often you eat (because of that insulin resistance that drives insulin resistance), how often you eat is going to be my first pillar. I joke that it's the Beyoncé of the show, it's the main event. [laughter] It is the epitome of intermittent fasting, right? If the problem is insulin and insulin resistance, as Dr. Fung would say, then the solution is to lower insulin by eating less often. So I do prioritize that.

[00:08:01] Secondly, what time you eat. Again, because a lot of nighttime snacking, regardless of what you're snacking on-- and because the majority of people, probably at this point coming to us, are people that are coming from a, quote unquote, 'healthy' diet, keto diet, you know, you realize that eating too often, eating too late, is really just going to be that obstacle to your success. And then number three, of course, is what you eat. And four and five for me is stress and sleep management. Funny that you mentioned sleep in the last question.

[00:08:33] And so, again, you need both. But if I had to prioritize, which is what this person is asking, that's what I would say. How often you eat, second pillar is what time you eat, and number three, what you eat. But these three together, of course, with stress and sleep management, is what's going to get you there, which is what you want. You want to get there. You don't want to get halfway there, like Megan said.

Megan [00:08:54] I'm 37. So when I think about my grandmother's generation. My grandmother is no longer with us. She died in her early 80s, but when she was growing up, the foods were not perfect, right? There was sodas and there was processed bread, but she grew up in an era when people didn't eat all of the time. They had three square meals a day, mostly cooked at home. So you were avoiding a lot of processed and refined junk, but there was still something at every meal or a little bit of dessert with every dinner. Rates of obesity were so much less. Rates of diabetes were so much less. Cancer was almost a rare condition, not something that's the norm. Like people nowadays just expect to get some form of cancer in their lives. They're living with that fear and that's totally abnormal. So the meal timing, it's just critical.

[00:09:44] And whenever I'm on any podcast, as a guest myself, people always ask me for like my top tip or three tips. And honestly, if we just did daily, 14-hour fasts, if everybody in the world did a daily, 14-hour fast, didn't snack, we wouldn't have this epidemic of type two diabetes, of obesity, of cardiovascular disease. So the meal timing-- you know, for those of you out there who are hesitant to fast and who have been working on the nutrition, you don't need to fast for days on end. Yes, you hear Nadia and I talk, and you come into our Community and hear us talk about these therapeutic fasts, and they sure can get you disease-free in a shorter period of time, but even the cumulative effect of doing daily 14-hour fasts over the period of year is going to leave you significantly healthier. It's not necessarily going to get you these super, crazy result metrics at the end of every week, or at the end of every three months when you do blood work but, at the end of the year, you're going to be a lot healthier.

[00:10:46] And so if we just went back, even if society started to go back to how things were in North America when my grandmother grew up, I mean, we would see rates of obesity and diabetes fall. Anyways, I'm very passionate about meal timing, so I'll stop talking now. [laughs]

Terri [00:11:01] We certainly enjoyed bringing you this episode and look forward to bringing you another one next week. In the meantime, if you enjoyed this episode or any others, please take this opportunity to share them with your friends or loved ones. Take good care, everyone.