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Megan [00:00:06] Hi, everyone. It's Megan Ramos here with my lovely co-host, Dr. Nadia Pateguana, and we're back for another episode of The Fasting Method podcast. Today's episode is a Hot Topic. We are going to be discussing type 2 diabetes and we have a very special guest - one of our very own Community members from The Fasting Method, Wende, who has what I hear is an incredible story with her type 2 diabetes journey. Now, for those of you listening, I am also hearing this story for the very first time. I've heard through the grapevine that Wende recently had surgery and blew her doctors away, but I don't know the details, so I'm going to throw it over to my incredible co-host, Nadia, to help us unravel the story that is Wende's and kick off the discussion on type 2 diabetes.

Nadia [00:01:01] Well, thank you, Megan. I am, I was just telling the two ladies here, Wende and Megan, that I am, as usual, I love to talk, I am going to take over a little bit today because I almost feel like Wende is all mine and I've been keeping her all to myself this entire time. And I now am so incredibly honored and grateful to Wende for letting us share her story with as many people as we possibly can. It's a pretty amazing story. And the way Wende and I actually met in our Community (like Megan said, she is one of our Community members, she has been since September of 2021), but the way that Wende came into our Community was just, it was mind blowing. And it just so happened that I accidentally recorded that meeting.

[00:01:48] Let me tell you how incredibly amazing, Megan, this story was. I know you recall this because I, right after that meeting, ended up talking to our team and asking them all to watch this. I was recording it for internal purposes for Rachel and I to go over some stuff. It was just a regular, everyday meeting and this person comes in and starts telling her story. And I start bawling, myself and about 20 other members start bawling, just listening. And this was in September. Since then, Wende has become a huge and amazing part of our Community. And just like you said, Megan, not too long ago, just a few weeks ago, Wende had a pretty serious surgery. And yet again, she just kind of blew us away, including her doctor.

[00:02:36] So I'm going to stop talking now and sort of introduce Wende and hear a little bit from Wende. Wende, do you remember our meeting and when you first came into our Community?

Wende [00:02:47] I do, Nadia. Thank you, Megan and Nadia, for giving me this opportunity to speak to you both.

[00:02:57] I basically started fasting September 17th, 2021 on my own. I was quite upset with my endocrinologist that I was seeing for a good 15 years. He basically told me that it was my fault that my blood sugars were so high, it's my fault because I'm just overeating. He didn't know me. He didn't know how I felt. If I looked at food, I gained weight. And that's so crazy, but in reality, with my diabetes story, a lot of people walk around without even knowing that you have diabetes.

[00:03:58] I think I had diabetes at a young age, a teenager, and it went on until my mid-twenties. And I had surgeries, no one checked. I asked medical doctors, "Can't you run a blood test to tell me?" I had cousins, my mom's side of the family it ran. So she had two sisters. My mom passed at a young age, so we didn't really know her medical history, but her two sisters, we did. And their father, my grandfather, I did not know. He died when I

was a baby of diabetes complications. So it was him who passed the gene down to the sisters.

[00:05:00] My mom, like I said, passed at a young age. But my aunt, I watched her, as a child growing up, watching her struggle with type 1 diabetes. She was hit by a car and the family [unintelligible] diabetes showed up and she was on insulin. I remember her giving herself shots. I watched her with amputations, mastectomies - it was just awful. It just destroyed her body. So as a child, seeing this, and a young adult, a young adolescent, visiting her in the hospital, seeing all the destruction that insulin and diabetes caused to her body, to her death. I had many family members die of complications of diabetes.

[00:06:07] What got me going was I was tired of being blamed for my disease and making it worse, when, in fact, I put two and two together to equal four and told my endocrinologist, "Something is very wrong. I don't eat a lot. My blood sugars are in the 200s, sometimes 300." I told my sister and brother when I was first diagnosed, I cried in the doctor's office. I was mid-twenties. There was no internet. I've just turned 68. So I headed right from that doctor's office to the library, and I took out every book there was on diabetes. I was going to learn about my disease. And the endocrinologist, basically, I said to him, "I'm not taking this anymore. It's not me. Every day we're increasing the insulin shots. Every day we increase the pills that I had to take. No! Something's wrong. I know my body." As a young adult, I was quite athletic. I was in very good shape. I was labeled not obese, but big-boned. That was the terminology that they used in my day.

[00:07:52] So, getting to Nadia's question, I most certainly know when I met you. I most certainly remember our conversation because when I was walking out of my endocrinologist's office, I said, "I'm through with you. I can't do this any longer. It's not me."

[00:08:16] He said, "Sit down!"

[00:08:18] I sat down.

[00:08:19] He said, "Do you have the internet?"

[00:08:23] I said, "Yes."

[00:08:25] "Do you have YouTube?"

[00:08:27] "Yes."

[00:08:29] "Okay." And he starts writing on a piece of paper. I still have it. I can't read his handwriting so I rewrote it and it was Dr Pradip Jamnadas. He's a well-known cardiologist in Orlando, Florida. So I started watching. I mean, I am jumping all around timeline-wise, but...

Nadia [00:08:54] You're doing great, Wende. We're following.

Wende [00:08:57] Thank you. After I watched all the YouTubes, he said, Dr Pradip, he says, "There is this doctor in Toronto. He is doing fabulous work with intermittent fasting," and here I am. I just started fasting on my own. So I'm, you know, I'm watching every video this doctor has made. He says, "I would like to tell you about this doctor. His name is Dr. Jason Fung." I'm writing it down as quick as I can. I get off that and I immediately go search in YouTube, "Dr. Jason Fung."

[00:09:48] I watched every YouTube video that Dr. Jason Fung put out. I was so impressed. I bought The Diabetes Code, The Obesity Code, The Complete Guide to Fasting, the summary of The Obesity Code. And I was like, "Who is this Megan Ramos that he speaks about?" YouTube! [search] "Megan Ramos," Diet Doctor, found your, you know, some podcasts. I was blown away.

[00:10:31] Now I see a podcast [conference] in Denver, Colorado. I live in Arizona, so that's just a hop, skip, and a jump from me. It's Dr. Jason Fung and Dr. Nadia Pateguana. Who is *this* doctor? I was so impressed with Dr. Nadia. And I'm sorry, I know you don't like me to call you that, but it's out of respect. I'm like, "Who is this? I need to find this person, along with Dr. Fung." Dr. Fung immediately told us about the IDM program. So that's how I found you. I went to the website and there everyone was. And I was like, "Here they are. Oh, my gosh." I was like a kid in that kind of shop that we once used to go to when we were young. I don't go there anymore, but I was so happy. I said, "Let me see this. Okay, all right, let me join. Okay, all right, let me do some searching. Oh my goodness, here's Dr. Nadia. She's having a session. What's Zoom?" Now I'm a software programmer by trade. I retired, I worked for a Fortune 500 company, and I'm like, "Eccles, you ought to be able to figure this out." So I'm clicking on links and I'm like, "There she is. Oh, my goodness. I found her!" I was so excited. I'm clicking, and that's how I found Nadia.

[00:12:26] And yes, I do remember our talk. I don't have a problem talking in front of people. I do have a problem sometimes talking about myself, but you - TFM Zoom meetings, coaches, Megan, Nadia, all your staff, Dr. Fung - you've made it so easy for people like me to reach out, speak. And the Community, oh my gosh. I can't talk enough about what a fantastic group of people we have. I was a part of social media - Facebook. But sometimes Facebook can be tough, I'll just put it that way. And I said, "I don't need this in my life. I'm going to get out of here," and I'm now a member. I think whatever the free trial period was, I signed up right away. I was so impressed with your Zoom meetings, Nadia. I did go to other coaches, other Zoom meetings, and I've learned so much, so much.

Nadia [00:13:45] Wow, Wende, you blow me away every time. You are a storyteller, for sure, but I'm going to pull out even more from you. I do want to say that, at some point, we definitely want to refer to Megan because, as all of you guys listening in, all our friends and listeners, know, of course, Megan and Dr. Fung ran IDM for many years in Toronto. And as you know, Dr. Fung, of course, is a nephrologist, which is a kidney specialist. And Megan Ramos started quite young, her interest in her... She started her professional journey as a kidney researcher. So at some point today, although we're dying to hear more, because there's a lot more to hear from Wende, a lot more to this story, guys. But at some point, we will have to hear from Megan, and her expertise, because type 2 diabetes, I think, is something that we would love to forget, but Megan often reminds us that type 2 diabetes does not wait, it does not take a vacation. And the damage that we're talking about to our body and, as you've heard Wende describe, the amount of damage that her, unfortunately, her family has suffered at the hands of diabetes is something that we must be aware of. Because you're right, Wende, there are kids, teenagers, being diagnosed with type 2 diabetes.

[00:14:59] And it sounds like your journey has not been an easy one. You were diagnosed in your twenties. And it also sounds like you were not, definitely not, lazy or shy to try to find help. You were at the library right away in your twenties, way before the internet, trying

to do the research. And if the information had been available to you at the time, I have no doubt that you would have beat this thing many, many years ago.

[00:15:26] So you were diagnosed in your mid-twenties and 40 years later you were still fighting with this diabetes beast. And then somehow an angel came into your life and told you to look this cardiologist up on the Internet. And through this you were able to find us. And then you found us. Then what? Please tell our friends and listeners, what did you do? So you bought every book. All, you know, I just saw four right there on your screen. You bought every book. You are a sponge. This I've learned, you just soak up information. And then what did you do? You were on insulin. Feel free to tell us how much insulin you were taking when you first started. And really, because we cannot (Megan and I and our team) provide medical advice, it's sometimes so useful for people to hear how people dealt with their own diabetes and how they were able to heal and how they were able to deal with their medications. So feel free to share what you did, even though it's not medical advice. It's your own personal experience, what you did for you, Wende.

Wende [00:16:29] Yes, I started off with glyburide - it's a pill. That didn't do anything for me. I was on metformin, 500 milligrams, I think. I can't remember what I ended up with, I think it was that amount. And pill after pill, after pill and my numbers were going up and up and up, you know, 200s. I'm exercising. I'm riding a bike ten miles a day, three times a week. I have a Total Gym. I work out. I do weight-bearing... I do any exercise that can be done in a gym.

[00:17:15] "During meals, before meals, try and carb count, Wende." Okay, that was a learning experience for me. So, depending on how many carbs I was eating, there was a formula that I followed for my NovoLog, which is the fast-acting insulin. And I must tell you that the most that I took, it started off low, one unit. And for me to stick myself, that right there. I know people are afraid. I was afraid. I was like, "How am I gonna do this?" And then the memories of my aunt just coming back. She used to give herself insulin in her thigh. Well, I'm loading up the syringe and I'm squeezing my belly cause that's where I injected my insulin. I would try and get some belly fat and, boom, inject! Well, okay. That didn't help.

[00:18:27] I kept on saying, "Why am I taking insulin?" My sugars. And I check. I check my blood sugars, my blood glucose, six times a day. When I woke up, before all meals, and a few hours after meals, and then I may have checked at bedtime. I am an A-type person. I am very data structured. I create logs. So I had my diabetes log with the time, the date, how much insulin you injected yourself, what were your readings? And I'd take it to my endocrinologist and I would show them. "Here! Here's the data. Look! Look at my numbers."

[00:19:24] "One unit. Oh, well, I want you to raise the units of insulin. I want you to follow this new formula." And they would come up with a formula that I did not understand. Now, okay, I may not be the smartest cookie on earth, but I'm not dumb. So I came up with my own formula. His formula, I was raising 5 units, 10 units, 15 units. The most NovoLog I took was 26 units before each meal. 26 units!

Nadia [00:20:08] And that's just your short-acting stuff. Then you've still got the long-acting stuff at night. Right, Wende?

Wende [00:20:15] Yes.

Nadia [00:20:17] So let's... I don't even know if I want to hear this number, but tell me, how many units in total did you end up taking? Do you remember?

Wende [00:20:24] Yeah, it was over 80 units. 80!

Nadia [00:20:28] Wow! 80 units. Although we've met people, and I know there's people listening in right now, that are taking even more than that. So then, let's jump forward, because I know that how many people can relate to what you're saying and how frustrating that is. Then let's jump forward ahead to when you started fasting and, I mean, I know you were totally absorbed by the information and you started doing it yourself because at that point when you started, you still weren't part of TFM, right?

Wende [00:20:58] Right. I started fasting on my own. My mother's cousin lives in Florida. In the 60s, you know, hippies, they always fasted for whatever reason. And she said, "Have you tried fasting?" And I said, "No, but I am at the point where I'll try anything." Like I said, I looked at food and my sugars went up or I gained weight. I gained so much weight. So I started fasting September 17th. My first fast was like and 18/6. No problem! I'm like, "Wow, this is awesome." And I noticed my blood sugars were coming down. No more 300s, but they were still high. I did that for a couple of days. Let me try a 24-hour. No problem! I was like, "Jeez! What's going on?" And my sugars, when I'm checking, still six times a day, coming down. I'm like, "All right, Eccles, you're doing something wrong." [laughter] "This is too easy." I'm even calling my cousin and I said, "Something's wrong. It's too easy. I'm doing something wrong. But I found this group -The Fasting Method - and I'm going to check around. I'm going to go to the Zoom classes. They have this Community board. I'm going to go in there and I'm going to ask questions. Maybe just see."

[00:22:44] I watched so many videos, past webinars. I was like blown away. "Look at all this information. Oh, my goodness. What can I do? I need to find Nadia." [laughter] So that's why I found your Zoom class that day and joined the meeting. I laughed to myself because when I got in the meeting (I have a Mac) it looked like the Brady Bunch. [laughter] There's Nadia on top of the screen and all these people, their faces. Oh, look, there I am with The Brady Bunch. And I was blown away.

[00:23:36] And all the information that everyone has put out, all the coaches, I have learned so much. And my first goal... I have to share with people, I am very goal orientated and I write short-term goals, and I journal, and I have a gratitude list that I do. Like I said, I'm an A-type personality. I'm data-driven. I have all these logs. My number one goal was to get off insulin shots, get off all medicine. That was my number one goal.

Nadia [00:24:23] And when did that happen, Wende? So you joined us. You were already doing this on your own, thinking it was way too easy. But you did have, of course, some questions and you wanted more information. So let's not make... And people are probably dying here like I was. Tell us, when did you get off the meds? Because I know you did. And then I want to talk, sort of, about, and ask Megan a few questions about, the damage, you know, unfortunately, that was done to your body from all those years of diabetes. But tell us, how did you get off the meds and are you off the meds? I know you are, but I want to hear you say it.

Wende [00:24:57] I am off all medicines, all insulin shots. I take a baby aspirin in the morning. That's all I do. I got off all medicines in four weeks. Four weeks! Four short weeks.

Nadia [00:25:19] And how long has that been now? It's been eight months.

Wende [00:25:22] October. I started fasting September 17th. October, I'm off insulin. My numbers... Now I have a [Freestyle] Libre, 14 days sensor. And instead of pricking my fingers, even though I'm off all medicine and I control my numbers, I don't need insulin anymore. I still check it. I knew my A1C was back then.

Nadia [00:25:58] How did you know that was going to be my next question? So tell us, because I know these are the wow moments. So what was your A1C when you first joined us in and go on there?

Wende [00:26:08] Can I tell you what it was prior to joining? The A1C, I never knew out of the 40, 50-plus years of having diabetes. I never knew how high it could go. Mine was 15 - one five. I was headed for death. I was headed like all, not all, many of my cousins, my aunt, and I said, "Whoa, Eccles, stop! Back up. This is not happening. You need to make some serious changes." So I did. On my own, I stopped eating sugar and I exercised like a fiend. I rode my bike, I rode my stationary bike, I did the Total Gym, I walked, I did all kinds of things. And my A1C went from 15 (one five) down to 9. And for me, doing this on my own, I wanted just to run up and down the street screaming, "Are you kidding me?".

Nadia [00:27:41] Mm hmm.

Wende [00:27:42] I still had a ways to go. And that's where you all come in. My A1C when I joined, went from 9 to 8, then I started with TFM.

Nadia [00:27:55] I don't even know the answer to this myself because, in the meantime, lots has happened. Right, Wende? And we're going to talk a little bit about that. I would like Megan to talk to us a little bit about the diabetes and the unfortunate damage that it does to someone's body, especially when you've had it for so many years and have taken insulin for so many years. But before Megan fills us in on the reality of what diabetes really is and does and even the damage that you suffered, Wende, over all those years, because I would love to say that you were untouched, but you weren't. Diabetes did affect you, but there's there's a very happy ending to the story. So I don't want to put a cloud over your story because your story's beautiful and full of sunshine. But what was the lowest A1C that you've had? And I know that just recently you've had...

Wende [00:28:46] 7.

Nadia [00:28:46] 7. Did you say, "Seven"?

Wende [00:28:46] Yeah.

Nadia [00:28:47] So from a 14 to a 7. Okay. So before we get to talking about your surgery and how you blew the doctors completely away, in spite of having some pretty serious complications, I'm going to throw it over to Megan, the expert, who has been sitting here so patiently and attentively and I think in awe of everything that she's just heard. But I think we do need to, just for our friends and listeners' sake, to fill them in a little bit on the topic of type 2 diabetes.

Megan [00:29:17] This story never gets old. Ever. I've had the privilege of working with so many thousands of patients, especially our clinic patients, who were really quite sick. And it was not uncommon to have someone on 1, 2, 3, 4, 500 units of insulin, believe it or not,

in addition to other diabetic medications. But these transformations, they totally shake me to my core every time. So, Wende, thank you so much for being so brave and coming here and sharing your story.

[00:29:54] You know, I get so angry at the health care profession. Jason and I were actually talking to a very powerful woman in the field of type 2 diabetes in Canada several years ago and she didn't believe people actually wanted to be healthy. But when we think about it, all of the advice she's giving is just making people feel more sick and more defeated, and then being told by the doctors that they're liars. Even being diagnosed myself with diabetes, I remember sitting across from my dietician and she just accused me of lying. I said, "Wow, this is what it feels like to be convicted of a crime that I didn't commit," because that's exactly how this woman is making me feel right now. I've seen the tears and I've seen people like Wende trying to go out there trying to do what they could with, at the time, the resources available to learn as much about their disease and really have to take it into their own hands as much as possible, but not everybody has the good fortune that Wende does to have been directed by that doctor towards Jason and the stuff that we do.

[00:31:03] Now, Nadia mentioned that I am kind of infamous for saying, "Diabetes doesn't wait." It doesn't wait for you to figure out your relationship with food. It doesn't wait for you to have a good week. It doesn't wait for you to get back from your summer vacation in Italy. It destroys you. And as a researcher, I started when I was 15, we barely had any patients on dialysis. We had this tiny little room with a handful of people that came in a few times a week. Ten years later, we had tens of thousands of people in just our area of Toronto being dialyzed 24/7. We had centers upon centers, and even then we didn't have enough space. I'd walk by a utility closet and I'd hear someone shout, "Hey, Megan," and I'd look and there's a patient, being dialyzed in the utility closet. We would all of the time be trying to airlift people from Toronto to places like Ottawa, which is a five-hour car ride away, if there is dialysis space available for them. All of this was due to the rise in type 2 diabetes.

[00:32:09] Wende's story, for those of you out there who struggle with diabetes, is the same. There are more and more medications. They give it to you. It doesn't even feel at some point they understand how they're prescribing you the various combinations or dosages of insulin. And I've heard, just like from Wende, from so many of you that, at the end of the day, you end up kind of taking it into your own hands because you realize that this person you see every six months is just playing a guessing game too. And who knows your sugars better than you?

[00:32:40] But why diabetes doesn't wait is a big reason with sort of the structure of sugar for... Let's get started there. So sugar is like a spiky little ball that circulates through your body. And our blood vessels, we have blood vessels throughout our body, not just our arteries and veins, but all of the different parts of our body have their own network, like our liver, like our kidneys. Our kidneys have millions and millions of little vessels and they're so intricate and so delicate and the sugar circulates through everything. And so what you have are these tiny, tiny little vessels. Not everything's like those big vessels you see coming out of the heart. The majority of the vessels in our body are super tiny, super thin. And you have these spiky balls of sugar just scratching the heck out of them everywhere, just scratching, scratching, causing leaks, preventing those vessels from being able to expand and contract. When they can't expand and contract anymore, then we're at risk for all kinds of unwanted cardiovascular events. And when they cause damage like leakiness, for example, in the kidneys, you get all this protein spilling out and causing a lot of damage. The more sugar that we have, the more often that we have it, which is exactly

what the guidelines are telling us to do here in North America, Canada, the US, and even outside North America, like the UK. Sugar, naturally-occurring sugars, they're at the top of our food pyramid and we're told to eat them, eat lots of them, and eat them several times throughout the day. And oh my goodness, if you're diabetic, you need to eat even more of them, more often. So we've got these bodies with these spikes just constantly, they're sitting on top of our red blood cells. The red blood cells are the surfboard and they're flying through these vessels, destroying them left, right, and center.

[00:34:37] And let's talk about these medications, for example, and what do they really do, and do they even really help? Jason always uses this analogy, and I think it's so helpful for people out there without a medical background. If you have a messy kitchen, we're talking super messy, you take all the garbage out of that kitchen and you put it in your basement. Is your house any cleaner at the end of the day? No. But if you don't learn the skills and don't keep up with your dishes and don't know how to sanitize your kitchen, it's just going to get messy again. So then you just take the mess in the kitchen and put it back in the basement. Eventually, the basement fills up, the basement bathroom fills up, the guest bedroom fills up, your bedroom fills up. But if you don't tackle your issues with keeping the kitchen clean, your house is just going to become condemned. And all of that mess that you take out of the kitchen is just poisoning and damaging all of the other parts of the house.

[00:35:40] That's exactly what these medications are doing. Sure, they'll take the sugar out of your blood vessels, which are the equivalent of your kitchen in this analogy, but then it's going to store it elsewhere - in the liver, in the kidneys, in the brain, in the eyes. It's going to store it everywhere. And so you'll end up having really messy kidneys, for example. But over time, those kidneys are going to become contaminated. They're going to become more and more and more saturated, more damage is going to be happening. So all the medications are doing are simply just tidying up the blood to make the lab results look nice.

[00:36:18] So just imagine you're having company over. Surprise! And you look in your kitchen and you think, "Oh, gosh, I'm having company over. I mean, there's no time for a deep clean." And this has happened to me, too. Stuff goes in drawers, it doesn't matter. Actually, I had people in my house this morning and I had a small pile of paper sitting on top of my placemat at the kitchen table, and I was like, "Crap, I don't have time to deal with this right now. Oh, junk drawer, here you go! Hopefully, I'll remember it's in there to deal with later."

[00:36:48] And that's exactly what these medications are doing. So they're not helping the problem, they're perpetuating the disease to keep the lab results looking nice and clean and tidy. But over time, the body just fills up, fills up, fills up, fills up, and it becomes this toxic, contaminated zone. And there's no more medications that are going to help. There's nothing that is going to help at this point because the medications truly do not target the root cause of the issue.

[00:37:19] Now, there are a couple of medications, they're called SGLT2 inhibitors by the broad classification, and brand names for them would be like Invokana, Jardiance, Forxiga or Farxiga, depending on what country you live in. These medications do cause you to urinate out the sugar, but they put you at risk for potential complications. Yes, there are some benefits because they are getting you to eliminate the sugar through your urine, but there are consequences. There are always consequences and [unintelligible] that when the sugar comes in that it's not going to be doing damage until it's on its way out either.

[00:37:57] So the solution just doesn't work. You all know, who are listening out there, that you just can't keep throwing stuff in your junk drawer or in your basement. That's not going to help. So on a very simple level, for those of you who want to understand but don't necessarily understand the deeper science of it and feel a little bit lost reading books out there like *The Diabetes Code*, it's essentially what these medications are doing. And some of the medications are even worse because Wende noticed she was on a medication called glyburide. Glyburide is a sulfonylurea. This class of medication, it's like it's beating off your pancreas. As I make punching movements towards Nadia and Wende here, which you can't see [laughs], but it beats up the pancreas, "Produce more insulin! Produce more insulin!" And that can't be good. We all know we can only deal with being beaten so long before we're unable to function anymore. That's exactly what a lot of these medications are doing and it's so unnecessary.

[00:39:01] We've got to treat the root cause of the condition. And to Wende's point, I hear it time and time again, "It can't be that easy. It can't be that simple." Wende didn't know whether she could trust her results because it was too easy and she was seeking out to her community, asking, and then coming into our Community to say, "Is this for real because I've been suffering with this so much? I've been given all these medications and they've done nothing. They've made it worse. I tell my doctors I'm doing all the right things. They're just telling me I'm lying like I committed a crime and I'm lying to them." It's just this whole nightmare when it really is that simple.

[00:39:39] So I'm going to throw it back over to Wende and Nadia because I know that Wende just recently had surgery and is really quite remarkable.

Nadia [00:39:48] Wow. Okay. So hearing transformations and stories like Wende's never gets old. Wende has a super special and, like I said, there's still more to come, but I've got to tell you guys, and I'm sure you'll agree with me, you can understand diabetes a little bit, but I still haven't met anyone that can explain this as well as you can. And I love hearing, I can never get tired of hearing you, Megan, explain this the way that you do. And for those of you that are hearing this for the very first time, I know you will agree with me that that was pretty amazing. So thank you, Megan. You know, it's real nice to hear stories, of course, we have the privilege of working with so many people and seeing these amazing reversals, but still, it's a drop in the ocean compared to the amount of people out there that are suffering with diabetes and suffering the consequences of the diabetes and the medications.

[00:40:42] So we need you, Wende. We need your stories and more people to hear. So I know that you, although you are pretty amazing, Wende, to say the least, I know that you, as well, suffered some damage from having diabetes for so long. And I don't want to harp on it too much, but I know that over the last month, few weeks, you just went through a very serious surgery. If you don't mind telling us a little bit about that? What I wanted to highlight was, of course, that I believe the serious injury that you had that had to be fixed through surgery was caused from the metabolic damages and having this disease for so many years. So tell us a bit about that.

Wende [00:41:25] Sure. When my A1C was 15, there was damage. There was big-time damage. My primary care doctor thought I had a heart attack. I was like, "What?".

[00:41:41] She said, "You need to see your cardiologist immediately if you have any chest pain whatsoever. You need to call 911 and get to a hospital."

[00:41:54] "Okay." I was devastated, "Okay." I was also diagnosed with cardiac artery disease, stage, I don't know the stages, I thought it was 3. But not only that, the damage to my kidneys - I have stage 3 kidney disease. My kidney doctor is Dr. Mandip Kang. He wrote a book about the kidneys, a very good book. I went to his clinic. I went for classes. I saw these people who were on dialysis. It broke my heart, but I knew if I didn't make changes to my A1C, I was going to be in that room getting dialysis and I didn't want that. I'm sorry I had to back up, and that was a big eye-opener.

Nadia [00:43:01] That was part of what I wanted to hear, Wende, so thank you. The main reason why I want to talk about your surgery is because, and based on Megan's explanation of diabetes, whenever diabetics go through surgery or have even the most minor of infections, even the flu, their blood sugars just go through the roof. And so your surgery was not a minor surgery, it was a pretty serious surgery. And then it led to a pretty serious infection. But yet your blood sugars not only stayed down, thanks to you and your effort, but you did not have to go back on insulin. And *that's* what shocked your doctors, including your head of surgery. And that had a pretty serious impact on their hospital. So that's what I want to hear. So tell us, first and foremost, I know we don't have a lot of time left and I won't take up too much more of your time, Wende. But tell us, first and foremost, if you, I know you want to, you've agreed to and I appreciate it. The surgery that you had, just, just had, the infection. And how did you keep these blood sugars down and not go on any medication? So let's hear that.

Wende [00:44:08] Sure. January 10th, I fasted for the last time. January 11th, I had dislocated my foot and had multiple fractures from a fall. This happened three years ago. So between my health being bad, the virus for two years, the hospitals here stopped essential surgeries. They stopped everything. And even though my foot was dislocated and required surgery, I had to wait. July 8th of this year would be three years. So once I got my A1C down, I went through three foot doctors, an orthopedic surgeon, and then finally my foot doctor recommended this foot doctor surgeon to me. I went and saw him January 11th. Because I had diabetes so long, and neuropathy, I developed Charcot in my left foot. My brother and sister are four years younger than I. We all have diabetes. He had the same surgery - Charcot - in his foot. Well, because I had to wait, my surgeon said, "Okay, there's a time slot. I'm putting you into a surgical facility that has no emergency room and we're going to perform a reconstruction of your foot." I have so much titanium in my foot. I've shared X-rays, I've shared pictures. It's unbelievable. So I stayed in that facility for two days and then I came home.

[00:46:17] My first blood work showed I had an infection. I even said, I think I got on Nadia's Zoom and said, "My blood sugars are going up and they're dropping crazy because I'm fasting." Thank God I started fasting again. Actually, it was time-restricted eating. I wasn't fasting because they put me on so many different kinds of antibiotics that when I got into Nadia's Zoom, I said, "Something's happening. My blood work's not right." My sugars were somewhat stable, but because I was doing time-restricted eating, I was like in maintenance and I was able to keep the weight where it was and my blood sugars were normal. I never had my blood sugars normal with an infection. They always jumped to 2, 300 whenever.

Nadia [00:47:31] And that's the amazing part about this whole story. This is what I want, and Megan and I when I share this with her, this is the take-home message that we really want to leave with people. Not only, Wende, have you reversed your type 2, but then you were put in a situation where every other diabetic that I have ever worked with, even if, you

know, they have somehow managed to control their blood sugars through medication (because they haven't reversed diabetes), any time they have even the slightest flu or, in your case, a very, very serious, post-surgery infection, their blood sugars go through the roof and they have to be put on higher and higher amounts of insulin.

[00:48:16] So all of this happens to you. Then this amazing doctor walks into your room and says to you, "How are you not on insulin?" And this is where I would really love to end this story for today. I know Megan and I could talk to Wende for another 3 hours, but everybody's got to go - we have a team meeting starting and we have kept Wende for way too long. So if you want to sort of send us off, Wende, with just this amazingly powerful message, which is, it kind of comes full circle. I know, and you're so funny because you said to her the same thing that that first doctor said to you, "Do you have the internet, and do you have YouTube?" That was beautiful.

[00:49:03] And I know that you've made such a powerful impact on that surgical team and on that hospital. They were amazed. They could not argue this story. This is one story you cannot argue. And this is, whenever people wonder, can you really reverse type 2 diabetes? Think of Wende and Wende's story.

[00:49:22] I want to thank you, Wende, from the bottom of my heart, not just for today, but for everything that you've done and brought to our Community. And you know this because you know how many people just within our Community you have affected personally and because of you, how many people you've motivated. You came into our Community and you got us to cry that first day we met you. You had your surgery, you came back this week into our Community and, Megan, God, I don't know how many emails from people saying what a powerful impact you had on their life and journey. So from the bottom of my heart, I would just like to say thank you.

Megan [00:50:05] Thank you so much, Wende. We really appreciate you being here with us today. And thank you for being such a valued part of our Fasting Method family.

Wende [00:50:15] Thank you for this opportunity. You both, and Dr. Fung, and the Community have meant the most to me. You are my family. My family still thinks I'm crazy, but that's okay. Thank you.

Megan [00:50:33] Thanks, Wende. Thanks, everyone, for listening. And Nadia and I will be back next week with another Q&A episode. Bye for now, everyone.