5 Days A Month To Lose Belly Fat And Beat Type 2 Diabetes Transcript

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Introduction to reversing diabetes

Well. Hello, everybody. Welcome. Reversing heart disease. Naturally, summit is here again. But not just any interview. One of the world's experts on a disease you don't want to live.

You have. You want to get rid of diabetes mellitus. The official name type two. The most common. Type one less common and more difficult to really get rid of.

But we can control it. We have Doctor William Schuh, who is the medical director of El Neutra. You've heard of El Neutra, the company that we, you know, 30 years of research of Doctor Valter Longo, eight other, 18 other, excuse me, universities around the world and just multiple publications is changing our ability to actually reverse disease.

So why don't we talk about reversing diabetes on this interview? You know, that's got to be exciting. If you're listening right now and you have type two diabetes and you're on one, two, 3 or 4 meds and we're talking about reversing diabetes, let's talk to the experts.

So thank you so much for being here doc. Doctor Khan, thank you again for your invitation. So exciting to really talking about reversing a chronic disease.

Naturally. Yeah. And if we want to be a little conservative, we can talk about putting disease in remission as oncologist talk or putting a disease that if you check all the bloodwork, you can find it.

Then, of course, it could come back if, donuts, pizza, and, hot dogs come back into the diet instead of what we're going to talk about turning on, autophagy and a fasting mimicking diet approach.

But I was gonna always reflect. I wish, and I hope we'll have the day. We can actually talk about putting coordinated disease into a reversal mode that's scientifically accepted.

You know, I tell my patients, I see you're going to work on your heart disease for your whole life. And I think that's probably true of type two diabetes.

If we can get you into remission, you're going to have to keep doing the work. And you can't go back to OG habits and all.

How the fasting mimicking diet works

But tell us, first of all, you know, al-Nusra is a parent company that makes a product that most people listening have heard of the prolonged five day fasting, mimicking diet, as well as many other wonderful products like the protein shake and the fasting shake and the fast bowel.

But let's focus on the five day fasting mimicking diet. But your company modified the commercially available five day fasting mimicking diet box called prolong, and, adapted it to people with type two diabetes and tested it.

So just give us as a background for somebody that isn't up to date on that science studies that were done in the last couple of years, what can happen to a person that commits five days a month to a program you develop and you lead to, put diabetes type two into remission?

Tell us about that science. Yeah. It's fascinating. Is really, you know, 25, 30 years in the making, with fundings from the National Institutes of Health really looking at addressing the root cause of, of type two diabetes is, is I think that the con you're a such a strong proponent of this, that simply controlling sugar with drugs, it's almost like a putting a Band-Aid right on a when you got to really address what are the underlying causes.

And we will we have a fancy word called passive physiology that drives these things. For example, central obesity, right. That is fat around the organs.

Number one. Number two is the loss of muscle. Where the sugar have no place to go. Right. And the muscle is the largest thing for all these glucose to go.

So how do we build muscle? How do we lose the the weight at the right time? Also addressing the underlying cause of, of aging, sort of, you know, right.

Really driving how do we make cells rejuvenate. These are really fundamental issues that led to the development type two diabetes. So the new Tri has developed a technology to address all these.

But more importantly, I think we all know that lifestyle intervention works. We all know that exercise, eat right, sleep well, de-stress. Having a community really works.

But what's difficult is implementing it. So al-Nusra has put together a program that is a disease management program that has doctors like yourself, Doctor Khan, and supported by registered dietitian, to put these pillars of lifestyle medicine into a program.

And yes, we do include fasting as part of the regimen. But most people have difficulty with prolonged fasting. And we talked about in many other instances where fasting could be fantastic for metabolic health.

And therefore the company has developed what's called the SAS Significant Diet. That's a five day program which mimics many of the benefits of fasting.

While it takes away the burden associated with a not only fast for five days. So almost anybody could do it. So it's a comprehensive lifestyle medicine program, supervised by excellent physicians like yourself, supported by registered dietitian, and with products that help you to mimic the benefit of fasting.

So as a part of a comprehensive lifestyle intervention, that that that is effective and that is safe. Yeah. So if somebody is intrigued and wants to go over and search is the al-Nusra health and finds a website, but maybe just tell us what's the proper URL?

Yeah. So would be URL neutral with a dash in the middle dash neutral health because this is health care right. So it's disease management program. This is a program versus problem that people may know, by the brand name.

Right. The program which you can buy for health wellness, for longevity okay. So el dash neutral health.com and they can read about a diabetes remission program.

And let's just say they sign up their type two diabetic, they're frustrated. They're on 2 or 3 medications. And they have to, you know, deal with all that and the expenses of those medications.

Clinical trial results and remission outcomes

And the doctor visits and they sign up and they're going to get monthly a box to commit five days a month to eating a specified diet program, which is a special diabetic proline, you know, box, along with, like you say, support from dietitians.

And you guys did, you know, and published the research study in humans. What would one from the literature say could happen to a person after doing that?

After several months in a row, what might data. Yeah, as part of, of a way to mimic what body will undergo with five day fasting, the study with fasting, mimicking diet for five days in a clinical trial, has shown that people experience around 22 pound weight loss.

But this is not just any weight loss. It's very important that we don't lose weight just indiscriminately, meaning that we got to lose the right way or lose, our weight correctly.

And that is driving the loss of the visceral fat, which is what we call, you know, the belly fat. And these are that fat fats that are around or organ system.

These are, Doctor Canyon experts. These are most affiliated with negative cardiovascular health. Right. These are not you'll love handle. The love handles are what's on the surface.

These are what we call subcutaneous fat. Now, certainly with the five day fasting mimicking, you're going to lose the surface fat. And for cosmetic the reason and so on so forth.

But it's certainly, you know, one of the most important feature of the weight loss associated with the fast moving die is losing that visceral central fat.

And the serve, result is that the muscle, the muscle mass that we work so hard to maintain is preserved during this weight loss. That is very, very different than a lot of the popular drugs or even a low calorie diet for a long stretch period of time.

So. So these are some of the, feature and not to mention the A one you drop by 1.41.4 is huge because every drop in a onesie is equivalent to almost like 30% reduction in a lot of the small vessel diseases like the eyes and the kidneys and the nerves.

And so this is a really good improvement, right? It's a total body improvement just with five days of that fasting mimicking. And again the data you quoted, which is unbelievable.

22 pounds average weight loss. Hemoglobin A1 C going down 1.4%. So maybe 7.4 down to six would be an example. And that is for how many months a committing five days a month.

In the clinical trial was six months and six months is cycles. So we talk about 30 days of effort. Right out of 180 days, really. And of course, we're not talking the other day slamming down pepperoni pizza.

There's going to be education and proper whole food, you know, nutrition to follow. But that's something that's really up to the participant. It's the five days they commit a month, five, you know, consecutive days.

Remarkable. In that hallmark study, what did you find about, medication dosing and medication needs? And this is the really the most unique aspect of our intensive lifestyle medicine program, like this one.

You know, people with type two diabetes, on average take their six medicine from, you know, from, from, blood pressure medicine to cholesterol medicine to diabetes medicine, on average, six.

There's also another study that looked at the number of diabetes medicines. So if you have any one secret of the seven, about 65% of you are taking 2 or 3 medicine.

So we're talking about polypharmacy. We're talking about multiple course. We're talking about interactions between drugs. And this program. A program was born out of folks who are just in really designed for folks who are, frankly, tired of taking so many medications, you know, and so what we saw with the six monthly cycle of FMD program, there was a, 67% of the people in the study.

Medication reduction and long-term cost savings

That's two thirds of the people in the arm that that had that took the fasting, mimicking diet, decreased their medication usage either by dosage or by the category of medicine.

To me, this is one of the fundamental ways of of restoring metabolic health. How do you define restoration of

metabolic health? And that means you're using the body's ability to heal right, with less reliance, procedures or medications.

And I do believe that's really the goal of of whatever you call a functional medicine, lifestyle medicine is to restore your body function with less reliance or dependance on procedures and medications.

So that's fantastic data. And of course, if a type two diabetics and 2 or 3 medications and over the course of six months and of course a person could continue, every five, every month giving five days to this Al Neutra health program for their health.

But that's gotta save a lot of money. And I think if you reduce or eliminate a medication, I think your team just published an actual research paper on, data and projected data over the course of ten years.

Share with us a little bit. Of course. You know, not everybody listening is a health care administrator. But, you know, individually, we're paying a high co-pay, and we're dealing with pharmacy benefit managers and a whole topic that a lot of people are hearing a lot about lately.

What might one anticipate over the course of ten years and cost savings, if they'll just commit to a food based food medicine, program for diabetes remission?

You know, I think the you hit it on the nail here, you know, while you may you may not viscerally feel the pain of paying for medication because some of us.

Right, many of us have insurance, we just pay a co-pay. But it is a huge burden on our society, right? Every innovation today, not only does it have to be effective, people have to want it, but also it has to save costs.

Right? These are the kind of the triple bottom line for innovation that it has to do the job better than that. People actually have to want to do them right and it actually has to cost less.

So what we've, we've done through this publication was was looking at a cost savings for those who are taking 2 or 3 drugs, with type two diabetes. And it turns out that by month ten, we actually will save money for the payers for the insurance company, for you, for the society in general, because instead of driving better, a onesie with more medicine and very expensive medicine today, for example, the ozempic, of of the world today us almost $1,000 a month.

So when we are able to reduce that, then the utilization of these medications, we're saving money right away. So the net saving is about $3,000 in the first year.

Net saving is about 10,000 in 3 years, and net saving just from a cost of medication in alone is about 45,000 in 10 years. Now, thankfully, you know, people with diabetes are living longer and longer.

We're talking about massive savings when we, when we have almost 40 million people with type two diabetes today, Powerful numbers. And I know at the present time, people listening.

Perhaps you're a type two diabetic and you're going to go over to L dash Neutra health.com, read about and perhaps sign up either through your own practitioner or, l neutral will provide proper medical and dietitian guidance.

You know, you may be paying for this program monthly, but that's such important data that at the end of the year, you may be net ahead and net economically, but maybe you should and are more concerned about net ahead metabolically and health wise, that you'll actually be in better shape, you know, perhaps be thinner if you match the research studies, perhaps have better, you know, numbers on your labs and we didn't say it, but I mean, I've studied the data on hemoglobin A1, C and survival.

And it's a very powerful marker of survival. In fact, all the way down to hemoglobin A1 seems like 4.5 in this super normal range. But boy, when you're in that 6.5, 6.8, 7.2, it's a curve that is a little bit uncomfortable to look at.

And hopefully, you know, people listening won't be part of the statistics, but the statistics are not pretty. So let's wake everybody up and say, let's get rid of type two diabetes.

Let's try and put it in remission and get off the couch and do some work. Okay, I'll give it a little co-chair like Vince Lombardi, but, you brought something up in a few earlier comments that, you know, not all weight loss is the same.

The idea of weight loss would be visceral fat around the organs, the belly fat inside, and hopefully accompanied by some of the love handle and butt fat, which we call subcutaneous fat for cosmetic and happiness reasons.

But you sure don't want to lose muscle. Maybe you've been doing some push ups or lifting some, weights. And just doing some yoga, something that puts strain on your muscles and hopefully is creating, sustained, body of muscle.

So the ideal weight loss would be fat, not muscle, particularly visceral fat, not muscle. But with ozempic and one zero, these hard, hard, hard drugs that everybody hears about all the time, you can buy them online.

You know, what have we seen in some of the studies? Well, where the weight loss is coming from? Yeah, I think finally it's getting the attention of of sort of the medical world.

Yes. You, you know, with a lot of the approaches of addressing diseases with medications, we often have one endpoint, right? Either way, loss or a monkey drop, but almost at the expense of everything else.

And this is this is one of the downfall of not addressing health holistically.

Muscle preservation, GLP-1s, and body composition

Right. So let me give it for for example, if you were to take. Ozempic, you lose 20, 20 pounds, but 30% of 30% of their weight loss is actually, muscle loss.

The what happens nobody takes almost nobody takes, these kind of medications, indefinitely. Studies at two years. Real world evidence shows that, you know, GLP one class by two years, only about 35% of the people are still taking it.

So that means majority 65% of the people have already stopped. Once you stop the medicine, what happens? Well, either because of cause or side effect, what happens now?

You regain those weight back when you regain those, but way back, what happens to your fat to muscle ratio now, since you lost that muscle, you don't regain those muscle when you regained your weight.

Now your body composition is even worse than what you started out with, right? So it's very important. There is a place for medications that as a, as an endocrinologist, a cardiologist, there is a role for medications.

But we need to be aware of some of these side effects. And what are also the alternatives. If you're going to use GLP ones as a class, make sure you gotta work on your muscle.

You got to strengthen your muscle. Make sure that there is enough protein consumption of the right kind of protein plant based proteins that will support the muscle.

But make sure you give that stress resistance exercise. So you mean you can minimize the weight loss or the muscle loss. But in contrast with a lifestyle medicine means of, fasting, mimicking fasting with the SMD, you're losing the visceral fat, you're losing the love handle.

But you know, preserving lean body mass is only five days out of the month and you're repeated cycles. And so that's the comparison. I think every consumer, every patient needs to to think through as they're making their, their, medical choices.

Now, if somebody is listening right now and they have type two diabetes and they're on Ozempic, actually it would be, I will go away. There I'm going to go B for diabetes.

And they're intrigued. It's not a contraindication to contact l-neutral.com and inquire about the diabetes remission program of the fasting mimicking diet.

If they're on a GLP one agonist like we'll go. Is that correct? That's absolutely right. In fact, every diabetic patient will be assigned a physician.

They can work with their own doctor to, like your case, doctor, can't they? You supervise your patients in the program, but they are, patients out there that says, well, you know, I want to work with your doctor.

And so we have provided a means to do that as well. So appointment with the doctor. The doctor will look at the medication choices and will reduce that medication appropriately.

Right. Because if your glucose comes down your weight comes down. You don't need as much medicine. But I think, you know, the medical practices as physicians we are learn to increase medication.

We call up our titration of medicine. We are often we actually we never have been taught how to de-escalate, do prescribe medicine. But I think that's the future of medicine.

You know, as we address the root cause, we're able to rejuvenate, recover, our metabolic health. Then we actually need less meds. And so this is what lifestyle approach is all about.

You know, this to reduce our dependance on medicine appropriately addressing the root cause of these metabolic health issues. Well, you know, that's about as exciting as it gets when you have a disease that's so common.

As we talk about maybe, you know, over half of Americans have prediabetes and diabetes and anybody listening right now that perhaps their doctor told them that they have, a condition called prediabetes is maybe their hemoglobin A1.

C is 6.2. It's not quite the official diagnostic criteria for type two diabetes, but it is still a risk. And it's a significant risk to health and longevity.

They can also participate, in using the fasting mimicking diet to augment their health and decrease that belly fat, visceral fat, and not sacrifice their, necessarily their muscle mass, which is so key.

I think I did misspeak, of course, it's ozempic for diabetes. And what going for weight loss? There's so many, you know, and of course, jar over diabetes and jump bound for weight loss.

So I just wanted to clean up something I believe I, called out incorrectly, but, now we got that cleaned up. And the point is, you know, people potentially need an exit strategy.

Okay? I've been taking these injectable drugs. I've lost whatever the number is 24 pounds, 26 pounds, whatever. But wouldn't it be great if I could, as you say, de-escalate and find a program that I can, you know, overlap and work with dietitians and clinicians?

And of course, that's where, again, nutrition outcome comes in.

Supervised program support and lifestyle guidance

What has your experience been with people with type two diabetes that perhaps are wearing continuous glucose monitors? They're on 2 or 3 drugs. Maybe they, you know, a little concerned that they're going to be eating 800 calories a day for the last four days of the fasting mimicking diet health nutrition program.

You know, have you advised that if you had any comment on that as part of the, you know, monitoring of such a patient? Absolutely. And this is why we don't let people do it on their own.

This is why you're part of a comprehensive program. This is why we only we not only emphasizes on the five days of SMD, but what you do for the rest 25 days.

This is why we have a physician supervising this. That's why we have laboratory every three months. This is also why you have a dietitian coach that's by your side biweekly.

It's every two every two weeks you meet with a dietitian to really coach you through what happens during the fasting period. What happens, after the fasting period, for the rest 25 days.

We also, emphasize that the, sort of, what you eat for the rest of 25 days, it's also, Professor Walter Longo's, so genius in describing what's called the longevity diet.

It's a modified Mediterranean diet, but not only focuses on what to eat, but also the timing of your meal, incorporating time restricted eating for the rest of of 25 days. So.

So you're never alone. You're always there, supervised by a doctor, coached by a dietician, and truly a lifestyle medicine program. Well that's exciting.

And I think one of the key points you said a few minutes ago was, and I don't think people appreciate this, you know, you have a meal and your blood sugar goes up.

That's totally normal, but it's your muscle mass that helps, reduce your blood level of blood sugar over time. And so many people, as we age, we are not focusing on strength training and squats and light weight.

So of course, you don't have to train for, you know, a beginning competition. You just have to do some weights and some push ups and bands. And I think there's been a general trend in the fitness field to, at least half your time, of exercise should be converted over to some kind of strength training.

Right. Talking is a wonderful activity. Swimming is a wonderful activity. And there sort of combinations. But get yourself a few light weights, get yourself a couple videos, get yourself maybe a trainer, and don't hurt yourself.

But, you know, maintain or build your muscle mass because that's where the glucose goes when you have insulin in your body. And that's what keeps your blood sugar down after a meal.

So yeah. So that continuous glucose monitor I don't have any stock in the company called Abbott. But I was very pleased that they came out with a direct to consumer website called Hello lingo.com.

Strange name, but anybody can purchase a continuously glucose monitor with a very user friendly app and some coaching to understand while they're doing, you know, their five day fasting mimicking diet and the other 25 days to what's going on with certain meals.

And from a safety and caution standpoint, because it does alarm you if your blood sugar falls. And that might be something you want to know. So, more and more, my patients have decided just to purchase because it's not through insurance, but it's actually very, very low cost.

So I hope people, you know, do that. So, I think we can agree. Everybody goes over to WW w dot l dash new health.com. And you try and at least read about the diabetes remission program.

And you certainly can through that website. Contact the company or speak to your primary care doc endocrinologist cardiologist. Of course in my office I make the referrals.

But that's not always routine. And I think there's muscle mass. I know you can't talk about papers that are in press.

It's sort of the standard of medicine, but I'll just tease this wonderful and educated audience and look forward to some upcoming data.

But the power of the five day fasting, mimicking diet and preserving muscle, but losing the kind of fat you want to lose for health. So any parting, comments, doc?

Doctor Carr just really love this conversation because it's it's all about empowering, our listeners, you know, you talked about the continuous glucose monitor.

We're talking of lifestyle medicine programs. And it's all about leveraging these to support your metabolic health. So so don't wait. Let's get started.

Take control of your health. Okay. I think that's a wonderful place to conclude that. Thank you for your time, doctor. You're so involved in so many different activities from your former position at the Joslin Diabetes Center and now, medical director of al-Nusra.

Thank you for all you do. And to the audience, you've learned a lot tonight, but you got to act on it. So go learn, go order, go get started. Go register and your house will bloom. Thank you.