Doctor Explains: Why Your Gut Is Blocking Weight Loss (And How to Fix It) Transcript

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Why diets fail (it's not willpower)

You've cut calories. You've exercised You've cut calories. You've exercised more. You've tried keto, intermittent more. You've tried keto, intermittent fasting, low carb, and the weight won't fasting, low carb, and the weight won't budge or it comes right back. What if budge or it comes right back. What if it's not your willpower? What if it's it's not your willpower? What if it's not your diet? What if it's the bacteria not your diet? What if it's the bacteria in your gut? In this video, I'll show in your gut? In this video, I'll show you how your gut bacteria controls what you how your gut bacteria controls what you crave, how many calories you pull you crave, how many calories you pull from the food, and where your body from the food, and where your body stores fat. And the last one is the same stores fat. And the last one is the same hormone the weight loss shots are hormone the weight loss shots are copying right now. Because if this is copying right now. Because if this is your gut, every new diet you try is your gut, every new diet you try is going to fail the same way, and you're going to fail the same way, and you're going to keep blaming yourself. I had a going to keep blaming yourself. I had a patient, I'll call her Lisa, in her late patient, I'll call her Lisa, in her late 40s, eating 1,200 calories a day, 40s, eating 1,200 calories a day, exercising. Her thyroid was normal, her exercising. Her thyroid was normal, her blood work was normal, but she gained 30 blood work was normal, but she gained 30 lbs in 3 years. I'll tell you exactly lbs in 3 years.

How your gut controls your cravings

I'll tell you exactly what we found [music] and how she lost what we found [music] and how she lost 22 lbs without counting a single 22 lbs without counting a single calorie. But first, let's talk about calorie. But first, let's talk about your cravings. I want to tell you about your cravings. I want to tell you about how your bacteria can control your how your bacteria can control your cravings. This is going to change how cravings. This is going to change how you think about food. The bacteria in you think about food. The bacteria in your gut produce chemicals and signals your gut produce chemicals and signals that influence what you [music] crave.

that influence what you [music] crave. Certain bacteria thrive on sugar. When Certain bacteria thrive on sugar. When their food supply runs low, they start their food supply runs low, they start producing signals that your brain producing signals that your brain interprets as cravings. The sugar interprets as cravings. The sugar cravings may not be weakness. [music] cravings may not be weakness. [music] They may be the bacteria sending you to They may be the bacteria sending you to the kitchen. Research shows that when the kitchen. Research shows that when the microbiome is disrupted, when the the microbiome is disrupted, when the wrong bacteria dominate cravings for wrong bacteria dominate cravings for sugar and processed food will increase.

sugar and processed food will increase. And when the microbiome is restored, And when the microbiome is restored, those cravings often decrease without those cravings often decrease without the willpower struggle, without that the willpower struggle, without that white knuckling it. [music] And it just white knuckling it. [music] And it just drives it so it doesn't it makes it drives it so it doesn't it makes it simple. makes it so it's not so simple.

Same meal, different calories

makes it so it's not so challenging because [music] you change challenging because [music] you change the bacteria that were creating those the bacteria that were creating those cravings by using a more natural cravings by using a more natural approach. So now let me tell you about approach. So now let me tell you about how the gut bacteria affects your how the gut bacteria affects your [music] weight. It goes even deeper than [music] weight. It goes even deeper than the cravings. It goes deeper than the cravings. It goes deeper than calorie extraction is there's different calorie extraction is there's different bacteria that extract different amounts bacteria that extract different amounts of calories from the same food. That's of calories from the same food. That's why two people can eat the identical why two people can eat the identical meal and absorb different amounts of meal and absorb different amounts of energy from it based on their gut energy from it based on their gut bacteria. That's why you see people, bacteria. That's why you see people, they're saying, "I'm eating less than they're saying, "I'm eating

less than that person. That person overeats and that person. That person overeats and they don't ever gain weight." And I can they don't ever gain weight." And I can just look at the food and [music] gain just look at the food and [music] gain weight. So, we're going to go more into weight. So, we're going to go more into this and talk about this, why this this and talk about this, why this happens, and what you can do about it.

happens, and what you can do about it. Research on lean versus obese Research on lean versus obese individuals consistently shows different individuals consistently shows different microbial profiles. The bacteria are microbial profiles.

Insulin, blood sugar and fat storage

The bacteria are literally determining how much energy literally determining how much energy your body pulls from the food. It also your body pulls from the food. It also determines insulin signaling. Your gut determines insulin signaling. Your gut bacteria produces short- chain fatty bacteria produces short- chain fatty acids like butyrate that directly affect acids like butyrate that directly affect insulin sensitivity. When the microbiome insulin sensitivity. When the microbiome is healthy, insulin works properly.

is healthy, insulin works properly. Blood sugar stays stable. Fat storage is Blood sugar stays stable. Fat storage is regulated. When the microbiome is regulated. When the microbiome is disruptive, insulin signaling [music] disruptive, insulin signaling [music] breaks down. Blood sugar spikes then breaks down. Blood sugar spikes then crashes. Fat storage increases, crashes.

Leaky gut, cortisol and belly fat

Fat storage increases, especially around that middle section. especially around that middle section. Also, inflammation and cortisol. Gut Also, inflammation and cortisol. Gut inflammation from leaky gut drives inflammation from leaky gut drives [music] systemic throughout the body [music] systemic throughout the body inflammation. And that systemic inflammation. And that systemic inflammation raises cortisol. [music] inflammation raises cortisol. [music] Cortisol directly causes fat storage Cortisol directly causes fat storage into the body and directly in the center into the body and directly in the center part around the belly. So the pathway is part around the belly.

Lisa's story: 22 pounds without counting calories

So the pathway is leaky gut, inflammation, cortisol, belly leaky gut, inflammation, cortisol, belly fat. And that's exactly what was fat. And that's exactly what was happening to Lisa. When I evaluated happening to Lisa. When I evaluated Lisa, I could tell that she had Lisa, I could tell that she had significant gut dispiosis. We measured significant gut dispiosis. We measured her stool and found out that she had a her stool and found out that she had a low diversity in her microbiome. That low diversity in her microbiome. That [music] means she was the balance of her [music] means she was the balance of her microbiome. The gut bacteria were not microbiome. The gut bacteria were not diversified well enough. With this low diversified well enough. With this low diversity of her microbiome, [music] she diversity of her microbiome, [music] she had elevated inflammatory markers.

had elevated inflammatory markers. Insulin resistance that standard labs Insulin resistance that standard labs actually missed measuring food actually missed measuring food sensitivities to three foods. She was sensitivities to three foods. She was eating these same foods every day. No eating these same foods every day. No wonder she was having inflammation. We wonder she was having inflammation. We addressed the gut first. We removed the addressed the gut first. We removed the inflammatory triggers, rebuilt her inflammatory triggers, rebuilt her microbiome, microbiome, microbiome, supported her insulin sensitivity, and supported her insulin sensitivity, and restored her nutrient absorption. Six restored her nutrient absorption. Six months later, 22 lbs down without months later, 22 lbs down without counting a single calorie. Her cravings counting a single calorie. Her cravings significantly reduced, her energy significantly reduced, her energy restored, and her bloating was gone. She restored, and her bloating was gone. She didn't need another diet. She needed didn't need another diet.

The GLP-1 your gut makes on its own

She needed someone to look at her gut and look someone to look at her gut and look deeper. [music] And remember the deeper. [music] And remember the hormones I said that the weight loss hormones I said that the weight loss shots copy? Here it is. Here's something shots copy? Here it is. Here's something most people don't realize. GLP1, the most people don't realize. GLP1, the same hormone that medications like same hormone that medications like semiglutide mimic, is naturally produced semiglutide mimic, is naturally produced in your gut. Your gut cells make GLP1 in your gut. Your gut cells make GLP1 when they're healthy and functioning when they're healthy and functioning properly. It signals fullness. It slows properly. It signals fullness. It slows the stomach emptying down. It supports the stomach emptying down. It supports insulin release. When your gut is insulin release. When your gut is inflamed, when the lining is damaged, inflamed, when the lining is damaged, when the microbiome is disrupted, your when the microbiome is disrupted, your natural GLP-1 production suffers. So the natural GLP-1 production suffers. So the question is, and always, should I take a question is, and always, should I take a GLP-1 medication? Sometimes the question GLP-1 medication? Sometimes the question is, why has my body stopped making is, why has my body stopped making enough of its own? So we start, we say enough of its own? So we start, we say fix the gut, and you may restore some of fix the gut, and you may restore some of the natural signaling. If you watch my the natural signaling. If you watch my peptide series in week three, I covered peptide series in week three, I covered in the peptide series about the GLP1s in the peptide series about the GLP1s and muscle loss. That video is linked in and muscle loss.

The tests that explain weight that won't budge

That video is linked in the description. But I want to tell you the description. But I want to tell you when someone comes to see me and they're when someone comes to see me and they're having weight resistance, [music] I do a having weight resistance, [music] I do a comprehensive stool analysis and I say, comprehensive stool analysis and I say, "What does the microbiome really look "What does the microbiome really look like? Is there diversity? Is there like? Is there diversity? Is there inflammation markers? Are they elevated?

inflammation markers? Are they elevated? I like to check insulin and blood sugar. I like to check insulin and blood sugar. I check the fasting [music] insulin, I check the fasting [music] insulin, fasting glucose, hemoglobin A1C, and the fasting glucose, hemoglobin A1C, and the insulin resistance score. Sometimes a insulin resistance score. Sometimes a glucose tolerance test or using a glucose tolerance test or using a continuous glucose monitor helps. Also continuous glucose monitor helps. Also check [music] inflammation like the CRP, check [music] inflammation like the CRP, homocyine, ferotin, is it too high or homocyine, ferotin, is it too high or too low or they're showing systemic too low or they're showing systemic inflammation?

inflammation? inflammation? Hormones. I like to check thyroid, not Hormones. I like to check thyroid, not just the [music] TSH, but the full panel just the [music] TSH, but the full panel with five or six markers. I'll look at with five or six markers. I'll look at the cortisol patterns, not just one the cortisol patterns, not just one measurement, but especially the first measurement, but especially the first morning one to see how their stress is morning one to see how their stress is [music] first thing in the morning. But [music] first thing in the morning. But I can also run the cortisol patterns I can also run the cortisol patterns throughout the day. I also like to check throughout the day. I also like to check estrogen and progesterone and estrogen and progesterone and testosterone, those sex hormones among testosterone, those sex hormones among some others like DHEA [music] some others like DHEA [music] or any other like resistant type panels.

or any other like resistant type panels. food sensitivities. I want to know what food sensitivities. I want to know what foods are driving the inflammation. I'd foods are driving the inflammation. I'd like to check and see if there's like to check and see if there's intestinal permeability. Is there leaky intestinal permeability. Is there leaky gut? Weight resistance is a symptom, not gut? Weight resistance is a symptom, not a character flaw. And it deserves a real a character flaw. And it deserves a real investigation. Don't let your first investigation. Don't let your first symptom be your last. And don't let eat symptom be your last.

What actually works (5R action steps)

And don't let eat less, move more be the only answer that less, move more be the only answer that you're given. There's more to it. So, if you're given. There's more to it. So, if you're stuck on weight loss, address the you're stuck

on weight loss, address the gut first. [music] gut first. [music] Follow my five R protocol from week Follow my five R protocol from week five, the remove, replace, five, the remove, replace, reininoculate, repair, rebalance. You reininoculate, repair, rebalance. You can check it out in my previous video.

can check it out in my previous video. It's linked [music] below. Prioritize It's linked [music] below. Prioritize microbiome diversity. Eating 30 microbiome diversity. Eating 30 different plant foods per week really different plant foods per week really helps this out. Fiber feeds the good helps this out. Fiber feeds the good bacteria and fermented foods support the bacteria and fermented foods support the diversity. We want to stabilize the diversity. We want to stabilize the blood sugar. Eat protein with every blood sugar. Eat protein with every meal. Healthy fats like avocado to slow meal. Healthy fats like avocado to slow the absorption so that [music] you get a the absorption so that [music] you get a stay full for longer. Avocado, nuts, stay full for longer. Avocado, nuts, olive oil from quality source. Of olive oil from quality source. Of course, reduce refined carbs. We want to course, reduce refined carbs. We want to reduce the [music] inflammation. We want reduce the [music] inflammation. We want to reduce the foods that are causing to reduce the foods that are causing that the sensitivities in your body. We that the sensitivities in your body. We want to support the gut lining with want to support the gut lining with targeted foods, targeted supplements, targeted foods, targeted supplements, and manage stress. And get tested, not and manage stress. And get tested, not just standard blood work, the just standard blood work, the comprehensive evaluation that I've comprehensive evaluation that I've described. Next week, the gut test I'm described. Next week, the gut test I'm going to talk about that I like to do going to talk about that I like to do that your doctor should be running but that your doctor should be running but isn't. And it's the final episode of isn't. And it's the final episode of this series and the most actionable one this series and the most actionable one yet. [music] So, if you've been blaming yet. [music] So, if you've been blaming yourself for weight that won't budge, yourself for weight that won't budge, it's not you. It's your gut. Share this it's not you. It's your gut. Share this with someone who's been told just eat with someone who's been told just eat less or move more. They deserve a better less or move more. They deserve a better answer. And take my free assessment. The answer. And take my free assessment. The link is in the description below.

link is in the description below. [music] [music] [music] Everything I do runs through one belief. Everything I do runs through one belief. Your symptoms are not random. They are Your symptoms are not random. They are your body talking to you. I'm Dr. Myra your body talking to you. I'm Dr. Myra Reed. Don't let your first symptom be Reed. Don't let your first symptom be