Feed Your Gut, Turn On Your GLP-1 Transcript

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Summit Introduction and Guest Welcome

Welcome everyone to the Gut Health and Longevity Summit. I am so glad you're here, and I want you to genuinely pause for a moment, because what you're about to hear over the next five days could genuinely transform the way you think about your weight, your hormones, and your health.

Most people have never been told that the gut is a command center for nearly every chronic disease we face, including obesity, the science that has never been so much more clear, and our experts are here to translate that into action.

So today's conversation is one I've been especially excited about the remarkable connection between your gut microbiome, the GLP hormone your body already makes, and how a plant based diet can activate your own natural weight loss biology.

So my next guest is spent over three decades doing something most physicians still aren't doing. He is treating obesity as a nutritional problem with a nutritional solution, and he has the clinical outcomes to prove it.

Please welcome Doctor Joel Fuhrman, a board certified family practice physician and seven times New York Times bestselling author. He has spent over 30 years reversing obesity, heart to disease and a diabetes through nutrient dense eating, something he coined the term nutritive, a science backed approach to design designed to prevent cancer, slow aging and extend lifespan.

His books include Eat to Live, eat for life, Fast Food, genocide, and Super Immunity. Through his books, television specials, and online health programs, he has brought his message to hundreds of thousands of patients worldwide.

And it is my pleasure to welcome Doctor Fuhrman today. I've been waiting to have this conversation for a long time with you, and I know our audience is already at the edge of their seat waiting to dive in.

So welcome. Thank you. Great to be here. Sounds like a lot of fun. What you're we're going to be talking about. All right. So let's start with the first question.

Is that something maybe most people have never considered? We've been hearing a lot about gee, LP as a drug, but it's actually a hormone that your body makes naturally.

So could you explain, like since you work with an obese population, they come out to your retreat how you're looking at what GP1 is. Where does it come from?

Why does it matter for weight and metabolism? Right. Well, first of all, these drugs and these hormones work in conjunction with and synergy with other factors and other hormones, other neuro neurological signals, dopamine, leptin, liver function, glutathione and all these things work together.

And when you eat a diet that's healthy, that's when you achieve nutritional excellence.

How Gut Health Drives Natural GLP-1

Your body's making, as you mentioned, GOP one on as much as it needs the right amount it needs. The problem is, is that people don't eat healthfully. They don't have a healthy gut.

They don't have the healthy bacteria built up in the gut. They don't have the not producing enough short chain fatty acids like butyrate. And they're not and they're not getting the feedback loop from the from the appetite in the brain.

So there. So there's everything's off. And they think though that giving them GLP now can fix things. So about ten things are off right. And they're going to fix one of these things.

And that's why if with ten things being off they fix one of the things you only get about 10% benefit of weight loss. They get about 10% of their extra body fat is lost, but they still have if they're hundred pounds overweight, they still have now 90 pounds of fat.

That's not going to come off their body just from using a GOP1. We have a lot of let's talk about these ten things that you're mentioning then. So I think that that would be the next logical thing is what are these ten things?

Since you're the expert in this space that they should be aware of, that it's not just GLP one, right? The first thing is that it's the intrepid lymphocytes that surrounded villi in the small intestine, that whose activity is governed by green vegetable intake.

And the green vegetable intake, has the biggest effect on the activity of your gut Galt gut associated lymphatic tissue. Our green cruciferous vegetables as the most effect so and sprout so like chewing arugula in and broccoli and things like that were we're immune system is green vegetable dependent and we're a green vegetable dependent animal.

So the lack of green vegetables is going to shut down your galt your gut associated lymphoid lymphatic tissue. And that also in those those those immune cells interact with the bacterial byproducts in the gut as well.

So now so you have you shut that down and then people start putting all into their diet. They eat all. Now when you eat an oil, it gets absorbed in the proximal part of the small intestines and exorbitantly rapidly it causes a like load in the blood.

Now when you have fats and that's all, or animal fats are absorbed very proximally, it doesn't bathe the whole gut with fat, with fibers and fats that allow the growth of healthy bacteria, that the whole small intestines.

When you eat fat from nuts and seeds and even avocado, the fats are in a mechanical matrix that ease into the bloodstream very gradually. So the facts are now coating the whole small intestines, and they're absorbed over a 3 or 4 hour period.

So we're talking about the American use of fats that is orbiting fat over 3 to 4 minutes, versus a neutral or person eating an excellent diet, getting their fats primarily from nuts and seeds and avocado.

The fats are absorbed 3 to 4 hours, not 3 to 4 minutes. That's 60 times slower absorption, and the absorption is now taking place not in one spot in the early in the early part of the small test, but coats the whole but coats these beneficial fatty acids over your whole small intestines.

And there's more to the story too, so that Russia fat into the bloodstream then causes transmutes bacterial byproducts to come in like lipopolysaccharide, to go into the bloodstream, causing inflammation that shouldn't be in there.

So fried foods and even olive oil is not the same thing as eating up a statue nut or a sesame seed, or even a whole olive. It's different biological effects.

So now you have this flux of oil in the blood called the light load. Now that light load affects the brain, the appetite and the hypothalamus, and it has the surge that you'd surge of calories in the blood from a combination of the light load with the glycemic load.

Right. The glycemic load is eating sweets that are naked or eating starches that are naked, meaning white flour or sugar or honey, even apple juice or orange juice.

It's naked because in its native state that any sweet substance you consumed would have a lot of fiber and

polyphenols associated with that fiber. And like apple juice, can be digested again in 3 to 4 minutes.

But you have a whole apple that takes 90 minutes to the apple to come in. It's completely different biochemistry, a different effect on the microbiome of the bacteria that live in the gut.

And so in any case, now we have this person in American diet eating white flour, eating pizza. And even, you know, even twice a week can ruin the gut even two times a week of having or, or or processed foods.

And people have it, you know, two times a day, four times a day, right? Couldn't damage the gut. There's studies that show that once or twice a month doesn't really damage the gut.

When you start to go to more than once a week, you start to cause damage, you know? So it's not just the food in itself, is what I'm hearing, because we know the standard American diet is an ultra processed diet with a lot of refined grains as well as animal products.

Why Processed Foods Disrupt Satiety

But it's also what is happening from a biology standpoint that these are all quick foods that are breaking down and they're not reaching lower down to our GI tract, which is also why when you eat this kind of food, you don't feel full and you tend to eat a lot more.

Contributing to that obesity problem is what it sounds like you're saying. Yes. You don't feel full. You stimulate the brain with an opiate like an adult.

Mine centers of the brain to get habituate to that. So you feel empty unless you have the caloric rush. And then you did not grow the healthy bacteria in the gut because things were absorbed so proximally and the healthy bacteria in the gut fueling their growth produces these fat, short chain fatty acids that also send a negative feedback loop through butyrate, through the hypothalamus.

Because the shortening fatty acids feed on fiber and resistant storage. Right. And and when you get used of fiber and resistant starch as a percent of total calories, then you produce a lot of things that help the appetite and the appetites down here.

And the APA starts up there. Then they can communicate with each other properly through short chain fatty acids enable the gut microbiome to communicate with the brain.

But I'm saying that we didn't talk about GLP one yet. What really we can jump over there, but this isn't. Before we even get to talk about G LP one. We've disconnected the communication between the gut and the brain.

So you're messing up your appetite and you're driving overeating behavior. And then it's the combination of green vegetables, beans and nuts and seeds.

Those that maximally produce CLP one activation and also give you, you could say, more than adequate protein on a plant based diet. You get both, you get both things wrapped in one.

So the combination of the because obviously you can imagine why the green vegetables supply these phytochemical compounds and other and the nuts and seeds supply both protein and fat and a mechanical that's packaged in fiber.

So that when you're so you feel like you wait 150 calories when you eat 150 calories, but you don't absorb 150 calories, because 40 of those calories don't even get broken down to be absorbed as fat.

It passes through into this toilet bowl, and it causes like a negative and a heightened effect on a satiety. So you're actually getting almost a 100 calories.

You're feeling you want to eat even less, and because they take four hours to digest, you're not hungry between meals. And then the beans put a further topping on the ice cream cake.

They put a further topping because they supply a huge amounts of very slowly digestible carbohydrates and very high in resistant starch, and also very high in polyphenols and bio flavonoids.

So this is how the GLP one naturally gets maximized. And also but it's not just PLP one because in the feedback loop was going to involve leptin and dopamine and bacterial products.

We talked about butyrate and other. And you know, I'm even oversimplifying when I talk about the dopamine center in the brain because there's other neural hormones involved, the sites dopamine.

But but you can imagine it's the opiate center of the brain that gets stimulated. And people are using food like a drug, and therefore their addicted to overeating, and they feel empty and uncomfortable and agitated and fatigued if they don't overeat and cause this huge flux of calories in the blood.

Okay, so now that leads me to my next question. Because you just said thinking about food. Well, we are using food as a drug, right? So obesity has been called a willpower problem, but an a calorie problem and a hormonal problem.

But what is it actually? What is driving the epidemic and what do conventional approaches keep failing people like when it comes to obesity? It's true. It's it's crazy what's going on.

You have conventional doctors only no drugs. Right. That's all they know. And then you have the functional doctors who are using hormones as drugs. It's like they're giving anabolic steroids to weightlifters.

You know, they can't control a person's weight if they're eating and sweets and not having enough nutrients and fibers in their diet. So instead, what they've involved is, is, okay, we're going to give we're going to treat thyroid hormone.

We're going to give raise T3 to a dangerous level to cause cardiac arrhythmias, mix it with estrogen and testosterone for more muscle building and then give a GLP one on top of that.

So they have another. Everything's trying to trick Mother Nature, and it's always about, well, there's something wrong with the human body. We need either we need hormones from functional medicine, doctors only, drugs from regular doctors.

But what about the body's own and native bility to make its own substances and do the right job? And you know what? Both ways never succeed. Because the more you go to the functional route and take these all these substances to try to lose weight, you're still not supplying the body with this biological needs, and you're still consuming foods that are damaging, and you're making it more damaging.

Now you made a pact with the devil because now you can eat your Oreo cookies. So let's say you let's say your basal milk requirement is 1300 calories a day.

That's what you need without, you know, for moderate amount of activity, without without with exercise. Maybe you burn another couple of hundred calories.

But in any case. But this person doesn't want to eat within that caloric window.

Food Addiction, Hormones, and Obesity

They don't want to have to eat 1400 calories a day to be fit, and to live a long life with eating vegetables and mushrooms and onions and berries. They want to be able to eat pizza when they want to, and Oreo cookies and lots of restaurants and tap and stuff like that.

So they want to push their caloric requirements up to 2000 a day and still not be overweight. It's not going to happen unless you over medicate. And then if you over medicate, you pay a price. Now.

So when I'm using these hormones, especially combining GOP one with thyroid medication and testosterone, which is a functional medicine doctors are using, then what you're doing is you're speeding up the metabolic rate to burn more calories, and you speed up the metabolic rate to burn more calories.

You're aging faster and you're increasing the risk. You're burning out your heart. You're burning out your you're burning out your immune system. We have a certain degree of we can say our body ages and our microbiome ages, and our brain shrinks and our bones shrink and our immune system shrinks.

All these things shrink with aging and the ability of the hearts with sand arrhythmias. And when you do it that way, you're speeding up the rate at which everything is going to deteriorate.

So you're like trying to have a quick fix. You're trying to have something that enables you to eat unhealthy and eat more calories and still maintain your and still feel okay for now, but it's not going to work as good as really living.

Learning to live within your proper caloric window, and not hormonally and over medicating yourself to lose weight. And that doesn't just take discipline or willpower.

It takes actually eating the right foods and not eating the wrong foods. And sure, there's an initial phase in the first month or two where the person just feels like they're giving things up and feeling restricted.

But once they adapt this way of eating, that's the whole point. They feel satisfied with the right amount of calories, and their body instinctually now adapts to feeling comfortable with a lower caloric load and feels well.

And the taste muscle improves. And they learn the recipes. And it's just it's a healthier way to skin the cat. And that's what I'm doing. I realize a lot of people are doing it differently, but I'm trying to do it as natural as possible with nutritional excellence to minimize the use of exogenous substances.

It's different, but it's better as healthier long term for the person. Yeah, there's truly no shortcuts in being healthy. I think that's been proven again and again that the shortcuts at some point that you're weighing whatever's going to come after that.

So let's tie in for our gut health audience how the gut microbiome. Because you mentioned that. How does it directly influence GLP production? And what does it mean for somebody who might be trying to lose weight without a prescription?

Like what? What are we talking about with the relationship between the gut microbiome? And I know you already mentioned a little bit of short chain fatty acids.

And let's get into that a little bit more. Any specific gut bacteria that you might want to mention that can help stimulate GLP production? Fermentation.

Let's talk a little bit more about that to help people connect to the importance of this nutrient dense diet to really be the key to influence GLP production naturally, right?

Okay. Number one, the there's been a lot of studies that have been culminating now in 2024, 2025 and the health of the microbiome and resisting aging of the microbiome, which causes more information, more damage to the gut lining, is most closely linked to the diverse the amount and diversity of fiber types.

That's the nuts number one. So we're talking about you lead to the right balance of the fibers and the bacteria in the gut that work together. And they communicate with the brain and with the gut associated immune system are all communicating with the microbiome and feeding off of those products produced.

When you eat a variety of plant substances and include all the g bomb list and have multiple types of green vegetables in your diet, which include lettuce, which is the richest source of sulfur, which is very helpful for the gut microbiome, particularly if one production is to have a baseline of eating lettuce every day.

You know, so so we're talking about lettuce and arugula and sprouts and then solid vegetables like broccoli and string beans and zucchini. And then we're talking about multiple types of mushrooms onion, onion family berries, pomegranate cherries citrus fruits.

There's six poly methylated flavonoids just in citrus fruits alone and in the citrus fruit skins. But whatever we're talking here about. So we're not eating just rice all day.

We're not eating just tofu all day. We're not eating one food. We're not we're not eating kale and strawberries. We're trying to strive for a variety of type of green vegetables, a variety of mushrooms, different types of of fruits, including the and different types of nuts and seeds, including particularly the ones that are rich in the richest ones of lignin, which are really good for the gut microbiome, are flax seeds.

She seeds and sesame seeds are the 3 to 4 flax seeds. She and sesame seeds. Flax and Shia have omega three. She is not high in omega three, but it's pretty.

But it has a good amount of lignin, you know, and getting an assortment and not trying to do it all with flax seed and having a mixture of flax, chia and Cecily has to be on hold.

Sesame seeds. You have to get to Heaney with the that are made with the whole seed. If you want to make it into a tahini or hummus or something, or you blend the whole sesame seeds in the Vitamix machine, you don't buy those commercial tahini and commercial hummus that are made with whole sesame seeds, you know what I mean?

I think at the. Yeah. So we're going and the question is, once you have such a high degree of fiber diversity, and then is there an added benefit to taking probiotics or taking fermented foods.

And and these are really tough questions to answer because the study is showing the benefits of fermented foods. Have done it. People who don't eat a healthy diet. Right.

So it's hard to you know, so the and and it's a comparison of which is better for you. Now we got to put this in perspective because most fermented foods that are AI and salt and salt shortens lifespan and is the big and is the Achilles heel of the vegan diet because of people, because vegans are more sensitive to the hemorrhagic stroke potential for meaning salted foods.

So now the question is we and soft is the lining of the rack. It leads to more leaky gut.

Microbiome Diversity and GLP-1 Support

You could eat plant based yogurt, which would not tend to have salt in it. Exactly. That's exactly. That's where I would go with that. That's where I would go to.

I was just I was going to say that you put the words in my mouth, the fermented foods without salt and without high glycemic or fermented yogurts like soil, yogurt, nomine yogurts.

That's exactly how you can do it. Well, I will tell the audience that I've been to your house. I've seen how you eat. I see, like, how you're growing all your plants on your property and everything.

And the day that I was there, you had this, like, big salad with all this stuff in it. Exactly what? You're telling us to eat this big bowl with all this stuff mixed in and sprouts and, you know, all the leafy greens and the nuts and seeds and everything like that.

So for the audience that's listening, Doctor Freeman is not just telling you something. He's actually lives this every

single day. It's like just second nature to him to like, put this in his mouth and like, like be doing this.

So when when he's working with his patients and working through obesity, it's a matter of people re lining the importance of how healing food can be. But what is really food. Right.

And that's where that new diet really comes in. You kind of built this foundation around that. So can you explain since you coined the term nutrition diet, what does the research actually show when it comes to a nutrient dense, plant rich eating and GOP levels compared to the standard American diet?

Like, what is the research actually saying when you eat this way? Well, we don't have research on the whole dietary and the whole diet put together with all its forms, but on individual sections of the diet we have, like for example, we have research on beans just on beans.

Right. And we have research shows that when you eat a lot of beans, it's just as effective for weight loss or more effective than GOP one just eating beans. Then we have research on nuts.

Hold on. Before you go on from beans, what kind of beans should people be eating? Oh, a variety of beans, including lentils and soybeans, but also a lot of beans.

But also, you know, different types of beans, chickpeas. I usually make my soups from one type of lentil, a red lentil Greenland to a black lentil, and I mix it with some type of being.

And I usually choose the SUV being because it's a smaller red bean and it disperses the flavor better through the soup. I'm using onions and celery and carrots as I'm juicing them to put in the fruit, but I'm also then putting green vegetables and leaks and onions.

A lot of mushrooms in the soup. Mushrooms are particularly powerful for the microbiome too. But in any case, I'm saying when we look at each one of these, when we're looking at mushrooms or beans or nuts or some of these food categories, and I have the I have those six categories labeled through the acronym G bombs, which gives you five rough categories to cover the different styles of foods that have the maximum anti-cancer effects that work synergistically to have the healthiest microbiome.

And the G bomb stands for greens, beans, onions, mushrooms, berries, and seeds. Each one of them has studies showing any one of these foods eaten in large amounts and induces weight loss by multiple mechanisms.

But I'm saying when you put it all together into a dietary portfolio, all the G bombs together. My clinical expertise over the last 30 years, and particularly over the last five years of the retreat, is that this becomes at least four times more effective than GLP one because the average person loses all the body.

Couldn't keep the our comfortable eating fewer calories, they can figure out their caloric window and they lose weight. They, the women usually lose about 12 to 16 pounds the first month, and then they start to go lose about 8 to 10 pounds a month, and the men usually lose about 16 to 20 pounds the first month.

Then they settle into losing about 10 to 12,000 a month. But when we measure these biological parameters on people eating properly now, their when they hit the when they continue to lose at 2.2 pounds a week, at least one kilogram a week of weight loss.

That's the weight loss myth. Speed via which we see the HSC or the insulin resistance, the production of hormones. In other words, then we see the metabolic parameters that give you the right hormonal signals for the body not to desire calories anymore.

We see that and also to stop the protests of the blood to clot obsessively, leading to a heart attack. So we see that they're not leading their blood pressure medications anymore.

They're not in their diabetic medications anymore. When they're eating a diet that's closing 1 pound a week of

weight loss, it's not sufficient to reset the abnormalities.

There's still overshooting their chloride windows. So a woman who weighs 200 pounds and her ideal weight is 120 pounds, she might lose weight from 100 pounds to 106, from 200 pounds to 160 pounds.

And then she stops losing. She'll stop losing because she was still overeating calories that whole time. She was losing weight because she was eating more calories than she needed to support 120 pounds person.

When the person weighs 120 pounds, they only have about 95 pounds of lean body mass. The rest of it's fat, even 120 pounds. Our calories we consume should be to support our lean body mass.

She needs to eat calories to support the 95 pounds of lean body mass, which is only 1300 calories a day, not the 1700 she was eating. So the 1700 can't support a 200 pound person.

That's why she stops losing at 160, and that's why she shouldn't lose that speed. But what I'm saying is that these people, as they're losing, they're still eating more calories.

And nobody really requires for that optimal health because for their optimal health, they should be in the window. That would have caused weight loss to continue until they reach their ideal weight.

All humans should be at their ideal weight. Not too thin, not too heavy like they all were through human history for many hundreds of thousands of 50,000 years.

We only recently we have obese people and overweight people because we're over consuming calories. And when you go back to eating all these, all the fiber, 50g of fiber or the variety of g bombs, then we see people.

They can only eat so much roughage, fiber, healthy food. They start to feel that they're instinctually connected and feel more most comfortable eating within their proper caloric window that now has them gravitate towards their ideal weight.

G-BOMBS, Fiber, and Sustainable Weight Loss

So it's not 10% of fat being lost, it's it's 90% of being body fat being lost. And it's at least four times more effective than taking a GOP one or mixing GOP ones with the source and high T3 levels which drive cardiac.

So we're talking here about this is the most effective for for a healthy long term weight loss. And it causes more weight loss and weight loss. That's exciting for the person to feel enthused with staying with a diet because it's really working for them, you know?

So you've mentioned now a couple of times this caloric window, if somebody wanted to calculate that, how would they calculate what their correct caloric window is?

Do you have some method that you use to help people calculate this? Well, usually we when they if they come in they you usually doing a like a in body test.

What we're seeing their body fat percent their visceral fat. What's their nonfat skeletal what's their nonfat mass. You know if a person it's okay for a woman to be 20% fat and b 80% skeletal mass.

So a person weighed 120 pounds, 10% is 12 pounds, 20% is 24 pounds. It's okay for it to have 25 pounds of fat and 95 pounds of lean mass. That's no perfectly normal.

So ideally, fat for a woman is probably between, you know, 20% fat and 24% fat. That's probably ideal. As a woman gets to 26 and 27, we start to percent body fat.

We start to be metabolic parameters start to increase, negatively affecting her lifespan. Right. So we're saying,

okay, now, since the machine is measuring your lean body mass, it calculates how much calories is needed to support that lean body mass, whether you a 400 pounds or whether you're 120 pounds.

Your basic metabolic requirement is sit on your how to support the lean body mass. Right. And an overweight person is going to have more. Body is going to have more extra muscle mass that they needed to develop to carry around the extra weight anyway. So they need to lose.

They need to lose weight and muscle mass to they need to lose some muscle mass with lowering fat. This is the mistake other people make. They, the doctors tell them to eat high protein so they can lose fat mass without losing muscle, and it's sabotages their weight loss and puts them on a dangerous diet to try to keep their protein up to like, you know, 30g per meal or 40g of 50g of protein per meal.

Much higher than that nowadays. Yeah, yeah, they're telling you to go real high protein so you can lose weight and not with the drugs. So it's another way to their hurting people, dangerously hurting people.

So what I'm saying is that yeah we don't want to lose our we you know, we want people to be we want women to be below 25% body fat. But the eventuality of eating a diet that's designed with a plant based with, with these, when you put greens and nuts and seeds and beans together in a meal, even with fruit and other foods, you're still hitting about 25g of protein per 500 calories.

That means if you're eating, if you're 1500 calories a day, you getting 75g of protein. But even if anyone had calories a day, you're still getting about 60g of protein on 1200 calories a day.

You know what I mean? So it's it's adequate. If you need more protein, you could, you know. But in any case, the little bit of you could add a little bit of tofu to your diet.

But so it's not, proteins not the issue. And don't and people should not be trying to maintain all their lean body mass if they're overweight. Because now you have this person who weighs 200 pounds and they should have 95 pounds of lean body mass and less than about 25 pounds of fat, ideally, or 20 pounds of fat.

And instead now they have 110 pounds of lean body mass. Right. Because they're carrying they have more they have more muscle mass on their body because they're carrying extra muscle, all the extra fat on their back all the time.

So their legs and the muscles and bones are large, too. And I'm saying that it's better to be your ideal weight and lose the fat with some of that muscle, and you may as long as the percent saves good and keep staying.

You're proving your body fat percent. Your body 5% is getting lower, and you're staying lean and you're staying working to stay strong. But don't try to push the protein to try to maintain all that lean muscle.

It's not going to work. You can prevent the weight loss, and you're going to increase the risk of cancer. You're not going to lose the weight. Yeah. So no don't push animal proteins people.

So it's another thing they're doing in functional medicine. They try to push protein to maintain lean body mass as they drop a person. It's like going to it.

It's like the guys who want to get like, who do powerlifters by taking steroids and using protein shakes, they're sacrificing their health just for the for the how the body looks.

Right. It's just yeah, testosterone protein shakes and. Yeah. Absolutely. All right. So let's talk a little bit about fiber okay. So when we're thinking about these nutrient dense diets are some plant foods more dramatically better when it comes to fiber like is all fiber equal or others better to kind of help us make more of our GLP one?

Well, I what I'm saying right now is even though some might be better, like beans and greens, it's still and it's still best to have a variety. It's still best long term.

It’s a full variety of foods for other reasons as well. So yeah, eat the full G bombs. Eat the full rainbow was saying to get the most effects, even though there are some foods that are particularly effective and you’re still going to have a little bit of flax seeds or chia seeds, even small amounts are better than none, right?

You know, and mushrooms are really great to for all. So so yes, eating this all together. And I wanted to say that the end of feeling growth factor plays an important EGF and the growth factor produced in saliva.

It’s not just amylase digesting starch. Your saliva does more to support the growth of bacteria in the gut, and to make sure the gut doesn’t become leaky and to regenerate the healthy interaction between the bacteria and the ville and the cell and the endothelial lining there.

Right. So we’re saying here that having a smoothie or a juice is not the same thing as chewing, that when you’re chewing these foods you’re mixing it with saliva.

And the better you chew them, the more and the growth factor is secreted into the China, into the food, especially when you’re eating a nonstarter vegetable, you know, or a nut, you still are liquefying in your mouth and mixing with saliva.

So now you have the coating of the frack is coated with endothelial growth factors, because that’s the fastest growing cells. Well, because they’re the fastest growing cells in the body.

They the fastest turnover, you know, your hair and your when you take chemotherapy, your hair falls out and your gut and your gut falls out and you can’t adjust food.

And you could build the gut so that the gut is a high turnover of the cells there, and it prevents the gut from becoming inflamed, leaky. So and the gut cells interact with the bacteria and the gut feed the bacteria and the gut and feed you.

Let me say that one more time, that the cells that line the gut slough off and mix into the food and become part of the food sources for the bacteria and for your own protein reabsorption.

So you recycle protein through the gut, through the villa, and through recycling slept off amino acids from the gut lining. So all these mechanisms are in action that that will stable your protein content from meal to meal, even though you may only more protein in one meal and less protein or another meal, it stabilizes. So it gives the.

So we have the substrate always with the fiber, with slow digestion and with the cells that mix in with that, that line the gut when there’s when the cells are fed properly.

So the cells have to be fed properly, that line the gut. And the way those cells are fed properly is a combination of food fiber, the bacteria in the gut, and the endothelial growth factor from the saliva all work together.

Okay. All right. And I now have asked this question and you’ve kind of answered it.

Caloric Windows, Protein, and Body Fat

You definitely have answered it. But I want to kind of bring it around to like a little bit of a summary just to really drive in the point here. So the GOP one drug conversation is impossible to ignore right now between which mongering all of that, but you have managed to achieve these metabolic outcomes through food for over 30 years.

What is your honest clinical take on these medications? What did they get right? What did they get wrong? Like give us the full like so if people are listening to this and they’re like, well, I don’t know.

My doctor told me it was okay. Like, let’s kind of summarize it for them knowing that there is another option. Okay. My summary is that they’re not effective enough. But the good thing about GLP one is that it’s making the population and the doctors recognize that fat on the body is dangerous, and even losing 10% of body fat has

beneficial effects on survival and lows, cancer rate.

And so and maybe even though his heart attack rate. So even though you're doing it in a biochemical means that's in balance and not life's maximally lifespan favorable.

I still agree with the idea that losing body fat is not a cosmetic issue. It's a biochemical lifespan shortening issue. And even if you have to lose body fat, the only way you can do it is with a GOP one.

You probably better off getting a 10% body fat off than leaving the 10% body fat on. It's just not as beneficial as what we're describing here, because losing 10% and getting a little bit of benefit is not as enough as losing 60% or 80% or 90% and getting traumatic, getting tremendous benefit and real protection against cancer and cardiovascular death.

Why not extend your life span 25 years, 2025 years of great health? Why send your life span six months with a GOP one? So I'm not saying GOP ones are deadly or harmful.

They may. I'm not sure about that, because my thoughts are that even though they have some harm, the fact that they do cause some fat loss is a larger benefit than the hornet causes from an from an exaggerated source of hormone.

But you but you can't compare that to a neutral diet which gives you ten times the benefits. Right. Yeah. I have a patient I just saw this week and she was on one of these GLP for about a year before coming to me and I was like oh why.

And she was like, well I needed to lose weight. I'm like, how much weight did you lose? 15 pounds. And her nutrient deficiencies, because not only did she lose weight, she wasn't eating the nutritious way.

Even though she's plant plant based, she wasn't getting in enough nutrients and calories to sustain herself. So her body was just, like, totally depleted.

So I think, you know, when we're trying any of these medications and we're doing stuff, it's not just do this and then go on and just eat nothing and expect your body to work.

The body does not work that way. The body actually needs nutrients. So let's do a question. Maybe if you can give us an example, since you have worked with so many patients with obesity without breaking any privacy, where did you find that the gut, the diet weight connection was the turning point for them in their journey?

I'm sure many people have walked through your doors that that you've helped them realize that. But do you have an example for the audience where it was really like, okay, this is what they needed because they might have already tried so many things.

Yeah. It's like, you know, I had 1500 people come to my retreat over the last five years, 1500 obese people. Right? So a lot of obese people and there are they're so similar.

There are hundreds of them, maybe even thousands of them have the same complaints. They're following a diet. They're cutting back on their calories. They're trying different diets. They lose a little weight.

They gain it back again. They stop losing. They get fed up and they quit. They just can't. It's not sustainable. It doesn't work. So I think that and they can't sustain their not being comfortable eating.

And then they try to eat a neutral diet like I'm recommending. And they don't feel satisfied enough. They don't feel satisfied enough. So they go off it.

That's the major complaint. So that's why this information is so critical, because when they start eating enough food volume, like you were saying, they have to actually true enough vegetables and we start to increase the size

of their salads and this and mixed a big a whole plate of green vegetables with the salad and the and the for lunch.

Then they start feeling because the volume, the fiber and the nutrients all make them feel satisfied while they're still in the favored caloric window.

They weren't eating enough of these lower calorie foods. They weren't even enough vegetables. They weren't enough green vegetables. They weren't enough salad. Right?

So they start eating zucchini and cucumbers and mushrooms and onions and tomatoes. They started eating more of these foods. They find they're more there and more becomes more sustainable.

And it actually leads to more weight loss. And their brain fog clears and they start thinking more clearly. And the thing we didn't touch on was the fact that this thing I call toxic hunger was that their what they thought was hunger, that was driving their overconsumption of food, which was primarily fatigue and weakness and eating for more energy.

That's the most common thing. As they said, I felt too tired and I have to keep to keep my energy up. And I can't do my hiking and I can't do this. I can't go to the gym.

That's to me. And that goes away because the fatigue they think is not enough calories and the fatigue is the detox is the circulation of toxic metabolites that people get when they still consuming unhealthy substances.

And they keep that detox going for a few weeks when they switch to a healthy diet, and they have to be instructed that it's normal to feel fatigue and weak.

And till you get your body's level of exogenous of waste products down low enough, and you're going to get going to feel full energy and more and more clear thinking.

So it's more so yeah, I can give specific examples, but everybody's so alike. I can give one example of this woman who came to me, who weighed about 380 pounds and she was forced to come versus a parent.

She was a college student, and her parents wouldn't come here or go somewhere else. They wouldn't pay for a college anymore, that she was going to do something about it.

And she, right up the front, told me that there's no way I'm going to do this. I'm not going to sustain this. I enjoy going to places with my friends.

That's just recreation. I'm here because my parents are forcing me to be here. I'm never going to continue to eat this way.

Saliva, Gut Repair, and Food Volume

This is a waste of time and money. And this is like putting me in prison, right? So she was right up the front and saying, there's no way she could do this and would do it.

Okay. So she was there for a few months. And what happened was she over time, she learned to like the food. She dropped 80 pounds in three months. She went from 380 to 303 months.

And she became so excited about it because she was she almost had attention to Sauder, where she couldn't read and concentrate and think straight. She got so much ability back in her brain's capacity for learning and for concentration and for happiness that she felt she was a new personality changed, and she was now helping out the chefs and taking people on hikes in the woods.

And almost like she was one of our staff here. She was so excited about what we do when she went home and she lost another and she lost, I think, another 150 pounds when she went home and stuck with the program.

So the thing is, she thought she would never be willing to do this, and she decided that she really wants this for her life. And she started to wear makeup, and she started to feel better about herself.

And she started to have some hope that she could be a normal person again, which it just opened up a whole new door to her life over again, you know? Yeah, yeah. No, that's a great story.

It's amazing when that brain fog lifts and you can think clearer just from changing what you eat. So now for our audience, what are the three most important things they should start doing this week after listening to this conversation?

What do we want them to start doing? And let's be concrete about it. Let's just give them three specifics, okay? One is have a big salad every day that's made possibly for lunch.

And that salad should include lettuce and also something cruciferous like arugula or sprouts or baby box or something like that. So and then they and then the dressing.

Since it shouldn't be an oil based dressing, they have to learn how to make some dressings from nuts and seeds as opposed to using dressing. So I'll use a little bit of nuts.

Maybe I'll mix cashews and sesame seeds with appeal, navel orange and a splash of lemon and a little blood orange vinegar and make an orange, you know, sesame dressing.

Maybe I'll make a hemp seed dressing, hemp cashew, and I'll put in tomato paste and soaked organic dried tomatoes and roasted garlic and a little black fig vinegar or balsamic vinegar.

They have to learn some delicious salad dressings that are not putting all of sugar on there. Right. Tomato, onion. So number one is salad with the nut pastries. Okay.

I think you would approve of my salad. I've been eating this week. I've really gotten into wedge salads where it's literally an entire wedge of lettuce.

And then I surround it with shredded purple cabbage, shredded cucumber, red onions, pumpkin seeds. I always put tofu in my salads and then and then tomatoes, little baby tomatoes.

I think you would approve of that. That's great as long as you didn't put oil on it. No, there was no, it's all wrong. Good, good. And a green dressing.

Usually my dressings are made from, like, herbs. Like so like either taking an avocado and putting basil or avocado with cilantro and making a green sauce.

Sounds good with lemon juice. Right. Good. All right, so number two is at least once a week, make a giant pot of soup because the soup has you going to put the beans and the lentils in the soup.

And you put lots of mushroom and onion in there. So now you have the soup in a big in two big glass jars in your refrigerator. So dinner could be half your plate should be cooked green vegetables like asparagus, chini artichokes, string beans, broccoli and garlic, you know.

And then you can have a, you know, some soup with some fruit. So the soup because you got to get those mushrooms and onions in and the mushrooms will be predominantly cooked.

So if you're not going to have the soup then put some beans on your salad. So for me I mostly don't even like beans myself. I prefer to have a the beans in my soup separate either at the meal or meeting my salad or the beans.

The soup is back dinner and the salad was my lunch, you know. So so those are the two main things. One is make

the salad. Two is make the soup.

Clinical Take on GLP-1 Medications

Okay. That's it. All right. Anything that we haven't talked about that you want to make sure we mentioned before we close out this conversation. Anything else on your mind or you think we've covered it?

I think the third element that has to be mentioned the sides nutrient density, the cells toxicity, body fat. The fourth thing is the omega three index that has to be mentioned, especially in lieu of the Advantage Health Study two showing that the vegan is compared to non vegans, had 37% increase risk of Parkinson's and 13% increase risk of dementia.

And we know that that the we know and we know for a fact that we have here we have 38. Let's see, 48 longitudinal studies show that the use of omega three supplements reduces Alzheimer's.

And here we have a review of that 38 trials showing that EPA and DHA supplementation enables the body to detoxify toxins that cause Parkinson's disease and on a vegan diet or plant based diet, which I recommend.

The Achilles heel is people should have they have to know their omega three index. And if they're not going to eat any seafood which has omega three and seafood very toxic and, you know, with poisons and plastics and forever chemicals and, and BMA and so we're visiting use a clean the h a supplement which I do obviously for I do sell one that's in glass.

But I'm mentioning that just for clarity here. But the science is overwhelming. Not saying this because I'm pushing sales of supplements. I'm saying it because I don't want people to get Parkinson's or dementia.

That's why I eventually had to make this supplement, because I had, you know, I had to do what was best for my clients who needed a clean source of DHA because I really the science is overwhelmingly non-controversial, that watching your omega three index to push into favorable range is the important factor to make a plant based diet protective against neurologic deficits later in life.

The last thing to be aware of is salt intake. Because salt intake doesn't just raise blood pressure, it also weakens the blood vessels, damages nitric oxide production, and could lead to a hemorrhagic stroke.

Even on an otherwise excellent diet, though, salt still can cause strokes. Among vegans, there are two types of strokes. There's an Bolick stroke, which is the same as a steam stroke that's caused by a clot.

Practical Steps: Salad, Soup, and Key Nutrients

And then there's the hemorrhagic stroke caused by a bleed, and people with lower cholesterol more prone to bleeding. People with higher cholesterol clung to clotting.

And salt makes you more prone to bleeding. And that's what we have in Asian countries where they eat more salt. Such a high rate of hemorrhagic stroke.

And in the event of cell study two, the vegans had a 17% interest of stroke from hemorrhagic stroke compared to the non-vegan, because salt becomes more damaging to a person with less cholesterol in the basement membrane of the brain.

So the two things just to clarify, to make your plant based diet protective for longer life, it's easy to do. It's easy to understand. We've covered a lot, and I just want not to leave anything unturned here.

Any factors so that we can still be plant based. We just may need to make sure we get our omegas. We want to stay away from salt because that is not well, that's not good whether you're plant based or not, plant based, salt and all and eat as many fruits, vegetables, legumes, nuts, seeds as that.

Your caloric window kind of fits. So that's kind of where I'm summarizing it. Yes. Awesome. All right. Thank you, Doctor Fuhrman. This has been Eye-Opening, the idea that our bodies are wired for metabolic health and that the food we choose either turns that system on or off.

That is a message that I want everybody to carry with me, with them. So, Doctor Furman, where can people find you if they want to learn more about your work and find your books and your programs?

Where is the best place to reach out? Thank you for the drfuhrman.com so drfuhrman.com. Perfect. All right, so the key takeaway for the audience is your body already makes the hormone that the weight loss industry is selling you.

The question is are you feeding the bacteria that turn it on. You've already listened to what's going to turn it on. So that's what I suggest you do. And stay tuned.

Because coming up, we have another episode that I'm sure is going to take you further in your journey. So thank you very much.