Food Addiction, Cravings, and the Key to Sustainable Weight Loss – With Dr. Susan Peirce Thompson Transcript

(Transcripts are generated by AI and may contain errors)

Introduction to food addiction and Susan's background

Hey, welcome to the Thyroid Pharmacists Healing Conversations podcast. I'm your host, Dr. Isabella Wentz, and today we're going to be focusing on weight loss and specifically how to lose weight when you've been dealing with food addiction.

Today's guest is Dr Susan Pierce-Thompson. Susan, it's so wonderful to have you here today. Thanks, Isabelle. It's great to A little bit about Susan, if you're not familiar with her life-changing work, she is a New York Times bestselling author of Bright Line Eating, the official Brightline Eating cookbook, Rezoom and On This Bright Day.

She's a faculty member in Brain and Cognitive Sciences at the University of Rochester, a keynote speaker, and serves on the board of the Food Addiction Institute.

In 2014, She founded BrightLine Eating a worldwide movement dedicated to helping people achieve maintenance. Over 115,000 people from over 100 countries have taken her courses.

She lives in Rochester, New York with her husband and three kiddos. Susan, how did you become specialized in food addiction? um by having food addiction uh i actually started off as a drug addict not a food addict um and that was just i don't know a fluke i just started doing drugs when i was 14 experimentally and i liked them and I did more and, I got hooked and and some of that, was that they helped me to lose weight so the drugs i got, hooked on that i really liked were stimulants like speed cocaine and ultimately crack cocaine Um, that was obviously a progression, right?

I started on psychedelics when I was 14, but, um, I got clean and sober when i was 20. And so that means I haven't had a drink or a drug in 31 years. Like that part of my addiction story kind of, uh, was a nice clean, you know, happy, resolution or whatever.

But my addiction jumped right over to food and very quickly, you know, just coming from a very low bottom with drugs, prostitution and living in a loop from out to trick to get money into the crack house to smoke it up.

I had this like super intense understanding viscerally of what addiction was. And after I got clean and sober and I started eating and then binging late into the night, I could really see that it was addiction.

I was very clear that I wasn't just eating. And I knew what that felt like. At the age of 21, and so I didn't know what to do about it though. However, food addiction is way more, I don't know, like acceptable, functional than drug addiction.

And so I went to community college. I transferred to UC Berkeley. Got straight A's there. Started studying the brain and the mind. So I majored in cognitive science at UC Berkley.

Really wanted to understand how the minds and brain work. In particular I was curious why a brain like mine can go so far off the rails. So I graduated from UC Berkeley with straight A's and spoke at the graduation and academically I was doing really well but I still eating my way through all that.

Literally writing papers for classes, eating a box of brown sugar while I would write the paper. And I went on and got a PhD in brain and cognitive sciences, and I started gaining weight all through this time.

I gained a massive amount of weight just in the first year after getting clean. And then my weight gain continued till I was living with clinical obesity in my 20s.

a prescription kind of like what you do with a thyroid prescription, right? Like a way to make it work so that my eating problem went into remission. But it was very rigorous and it taught to me by a group that had rules and regulations that made it not really a good fit for most people.

Why some people become addicted

It did work and I lost my excess weight and learned from them to not eat sugar, to weigh and measure my food. And, and I kind of took to it like a duck to water I lost my weight really fast I've been, you know, in a right sized body for me for my frame for 23 years now, so very rare to go from obesity to slender and keep it off for decades.

And then I became a psychology professor, got tenure, and I started teaching a college course on the psychology of eating and the neuroscience of food addiction.

And, then, I founded Brightline Eating to help other people because the program that I had learned it from really, again, like, isn't a good fit for most people.

So something more accessible was needed in the world. And that's basically the story. Like, there's a lot of suffering in there that I kind of glossed over, like I made it sound like, oh, I just, you know, but it was very painful, is the truth.

It was Very, very, painful. And I found food like processed food, sugar, flour, harder to kick than crack cocaine. I'm not exaggerating about that. That was my experience.

Way harder. Oh, you've been through so much and you're such an inspiration to be here today and to overcome everything that you were able to overcoming.

Now you are taking that pain and making purpose out of it, helping other people. Well, that's what we do. That's why you did too, right? That is the formula.

I feel like that is the formula and many people, like you said, it's socially acceptable to have food addiction. It's not necessarily socially accessible to be addicted to drugs and there are people who might experiment with drugs.

and they tend to become more addicted. When I was going through pharmacy school, we pharmacists do have a higher rate of addiction compared to other healthcare professionals and definitely a lot of healthcare professional's dental disciplines and veterinary disciplines that physicians can be affected as well.

But one of the professors and we had a speaker talking about addiction. He talked about when he was exposed to a certain drug, it was like a missing part of him had become activated, right?

And he would think like his receptors just turned on from that exposure. And I believe he wasn't addicted to opiates. In my experience, I don't work a lot with people with addiction, but I will notice patterns where somebody might start off being addicted to drugs and they become a workaholic or addicted.

I'm curious if you can talk about what are some of those drivers of why a certain person might experiment, not become addicted, another person, might experience, become, addicted whether it's to food substances, work, Yeah, you've brought up so many things in that I'd like to touch on all of them if I can, but the primary question you asked is why do some people become addicted and others don't, right?

Like, alcoholism exists, we all know that, But lots of people drink moderately successfully, and some develop alcoholism. Why? So essentially it's nature and nurture both.

There are genetic components, there's no one gene for addiction. there are genes for things like novelty seeking, A love of intense stimulation sort of having what I call a dopamine dominant brain is genetic and people whose dopamine receptors are more sensitive to to dopamine and will will down regulate more regular, more readily in the face of an intense flood of dopamine.

This is what what we call drugs do is they deliver a far more intense, flood-of-dopamine than you would get through, you know, eating blueberries. Eating donuts is very different than eating And it's basically a dopamine difference.

And some people's receptors thin out and become less numerous and less responsive more readily. They're more sensitive to that dopamine flood. That thinning out process is fine as long as you plan to keep eating donuts regularly.

But if you stop eating doughnuts, then all of a sudden, the lack of dopamine at baseline makes you feel restless and irritable. uncomfortable, not okay at baseline.

So some of it is genetic. Some of its environmental, like there have been studies on rodents where they take the addictable ones and mate them together, always giving birth to baby-addictable little pups, right?

And if you take non-adictible rats, though, and make them, together you get non addictible pubs. But if uh adverse upbringings right without a parent insecure food environment that sort of thing shocks being delivered to the little feet not to hurt them but just to scare them and make them feel like things are unsettled like maybe simulating divorce or um eviction or things like that right um some percentage of them will go on and become So not all of them.

So it's a combination of nature and nurture. And you've probably heard of the ACE score, the Adverse Childhood Experiences Questionnaire, which just gives you a score from zero to 10 on basically how rough was your childhood, how many instances of abuse, neglect, etc.

Did you experience and a scores correlate lockstep with addiction? That said, my score is zero. So go figure, right? Like I really have looked back at my childhood and concluded, yeah, I didn't really need a hit.

I just wanted one. But if you look through my family tree, oh, yeah, addiction, murder, suicide, depression, entrepreneurship, the person who invented the game that became Wheel of Fortune was my grandfather, you know, people's, my uncle's paintings are all over our house.

All of these things are correlated with dopamine dominant brains. Christopher Columbus, dopamine-dominant brain, Joan of Arc, dopamine dominant brain.

We don't need brain scans to know these things. Not everybody would engage with life in that way. They didn't have the crack house next door, but if they had had one, they might have ended up there.

Recognizing food addiction symptoms

Yeah. It's a brain that is perhaps seeking novelty and finding it in a substance. Yeah, novelty and the hit, right? The, whoosh, the brain goes, oh yeah, that'll do.

And then it starts to remember, well, what preceded that? How do I get back here again? And this is how the brand wires up to addiction in a certain domain, like I'm not addicted to shopping.

I am sure I could be, but I just not. But if I spent enough time feeling like, I needed a little something, something and finding that a one click on Amazon or a trip to the mall, provided that thing that I was seeking, I could become addicted to shopping.

It's a matter of wiring up the brain in that domain. It definitely sounds like a slippery slope and I feel like some people struggle with weight challenges because they might have hormonal imbalances or perhaps they are not eating the correct diet or are are necessarily educated about nutrition.

But there's also a subset of people who really struggle food addiction. How would you know if you have food addictions? Yeah, great question. Well, there's a quiz you can take in 30 seconds.

It's at foodaddictionquiz.com. And that'll give you a number from one to 10. It's just five questions. And what it's asking is things like, you know, do you spend more time than seems reasonable thinking about what you've eaten or not eaten, whether you're on your plan or off your plans, how many miles, calories, pounds, right?

These days with GLP-1s in the mix, it is called food noise. That's the term that scientists have come up with, and I think it could also be food and weight and exercise noise, because for a lot of people, that's one big ball of yarn, So that's one thing.

Do you find that you lose control over how much you eat once you start sometimes? Do find yourself not being satisfied by eating a regular amount of food and wanting more?

do you yourself having intense cravings that might manifest as scrolling through a food delivery app and just looking for the thing that is going to hit the spot or walking up and down the aisles in the grocery store looking at the things that are going hit a spot, or knowing what is gonna hit that spot and going way out of your way to get the right food, like looking in the cupboards and going, oh, there's food there.

But you're like, no, There's nothing to eat here. I got to go get that thing, right? That's a craving. And do you have intense cravings? Would you go way out of your way to get something specific that you really wanted to eat?

All of those are signs. As always with addiction, we're talking about a clinically significant level of distress and or impairment. Most people who get a limb amputated from type 2 diabetes will have the second limb amputated within two years.

At that point, they know. and they can't stop eating that way, right? So that's a significant level of impairment. They may or may not experience a significantly level The drugs majorly impaired me, the food not yet, right?

But it was incredibly distressing to be eating the way I was, painful in the extreme, crying in a fetal position, writing letters to God saying, take this from me.

I'm so messed up, I can't do this thing with food anymore. My food and my weight, you've got to help me." So yeah, that's addiction. You know, addiction is not just being excited to go do something or experience something.

That's enthusiasm. Addiction is hurting yourself and knowing you are. It's almost like willpower isn't enough and you lose control. Yeah. Basically, yeah.

Powerlessness, out of control in 12 step programs, they call it powerlessness. And then also your life starts to become unmanageable around it, right?

It can be quite a scary place to be. Yeah, despairing, scary, horrific, horrifying. Yeah, it's hard to even put myself in that spot now. I'm just doing so well these days, but it was I mean, I keep getting addicted to things.

My brain is so addictive. Um, i was, on a merry-go-round with caffeine and decaf recently, like de-caff. i would pick up decap and then i'd be having six of them a day.

But the Keurig in my house doesn't have enough caffeine in the decaf, so I would be going to Starbucks at 5 a.m. before my day would start, ordering four de-caff Grande Americanos.

Why decap? Because I was in a personal growth group where you couldn't through the day, I'm insane. Like that is not a person with a perspective on what's reasonable.

I couldn't help it. Then I gave up decaf again, you know. It sounds like it's something that you have to really become self aware. when you have this and you really have to figure out how to manage that.

And you've actually done that with your right line eating program. It's been super successful, more successful than standard weight loss programs. I know I have a few people that I work with and I speak to on a regular basis who

love you, who loved your work, and who have found you and your working completely life changing for them.

But why do you think that is and how do teach people differently?

Bright Line Eating and why it works

Yeah, well, bright line eating is so different, right? Every other weight loss program that I'm aware of says basically eat all things in moderation. Just here's some strategies for eating less of the things that aren't great to have in your diet.

But of course you wouldn't ever dream of giving them up altogether because who could ever just not eat dessert ever? And I'm like, yeah, actually, for some of us, it's easier to not to eat desert ever.

I do so much better not eating dessert, ever, than trying to moderate. As soon as I have some it, I am not one of those people that has a bite of chocolate cake at the end of a meal and goes, that's all I wanted.

Oh, so good. That one bite hit the spot. like, are you crazy? Give it to me, I'll finish it. Like, so, um, yeah, So I teach people about bright lines, which are clear, unambiguous boundaries that you just don't cross.

And I, you know, did this when I was 20 years old, i put up a bright line for drugs and alcohol. A year later for cigarettes, You know? I just Don't engage with certain things.

Even the whole concept of moderation is interesting, like like really most people haven't thought about it that deeply, but a wise and true definition of moderation has to include the two entities involved, right?

A moderate amount of cyanide for a human being is actually zero, and so know thyself. If the one cookie, one piece of pizza experiment isn't working, try a bright line, try actually going a month without having any a week.

We have a 14 day challenge. Try going 14 days without any, right? And see how it goes. So that's one thing we do differently. And we encourage people to have bright lines, clear boundaries.

and what happens is the structure produces so much freedom. I mean, at the end of our bootcamp, which is a two month program, people's peace and serenity with food has gone way up.

their cravings have gone way down, their hunger has gone down. They've lost twice as much weight as they would have if they'd have started on a GLP-1, like literally twice this much.

And their energy is way up, they're depressed mood is down their days of poor mental health are way. Their feelings of being loved, supported and connected in the world are up.

We have published papers on all of this. Um, and six years later, they're still maintaining significant weight loss on average, even if they are not even doing Brightline Eating anymore.

Even if I said, Oh, that was interesting. Thanks very much. Not for me. And they go on their merry way. On average people are still, maintaining, significant, weight, loss.

It's a really, really powerful thing to try for a bit. and for some people, it really is, you know, the golden ring that they've been reaching for their whole life.

And I think like that makes so much sense because if a food is bad for you, let's say for myself, gluten, I'm very gluten sensitive and it was causing a lot of autoimmune flare ups and my thyroid antibodies to increase a a of pain and brain fog, so on and so forth.

And for me, there was no such thing as just having moderate amounts of gluten or just a little bit of it here and there, right? Because I would feel bad.

Then sometimes when we don't feel good, we don't make the best choices, right? It's actually so common. The bright line idea, if you're smoking three packs of cigarettes a day or your uncle is or whatever, and then the lung cancer diagnosis comes in, nobody's saying go on a nicotine moderation program.

Everyone's, saying you got to throw up a bright light for cigarettes. They don' use that term, but that's what they mean. Zero puffs of cigarette, Uncle Harry, from now on.

Yeah, it's true. As a psychologist, would you say that certain foods are more addictive than other foods? Oh, yeah. And there's good data on that, for sure.

So, you know, fruits, vegetables, whole grains, legumes, nuts and seeds, and whole protein products like chicken and beef and lamb and shrimp have incredibly low levels of addictive hit, right?

Processed foods, are up a notch. So, for example, vegan beyond burgers, right? More addictive than chicken breast, okay? But still not that high. There are some natural foods that have higher addictive potential, nuts, nut butters, bacon steak and hamburger but where you start to get into the really high levels of addictive susceptibility is where are you take carbohydrates that are highly refined and you combine them with trans fats and stuff so now we're talking cookies cakes ice cream Right.

Pizza seems to be in the top three most addictive foods. I think it's the there's some sugar and the sauce, but also cheese has case of morphins, which delivers a bit of an addictive hit.

And then the flower people really underestimate the addictiveness of flour, bread, pasta, you know, pizza dough, potato chips, popcorn. Those are all under the flour.

sort of moniker, right? They're not exactly flour, but molecularly, they're identical to flour. And yeah, so basically, if you strip sugar and flour out of your diet, you take the addictiveness of our diet from, revenue high down to extremely low with no other changes, sugar, and flower, that's what you got to take out your dietary, essentially.

Um, I feel like a lot of the foods, the processed foods have been engineered to actually get us to eat more of them. I know chips, for example, like I can't necessarily, just eat one chip.

Like I get a bag of chips. There's a good chance that I'm going to go through it for. for people with thyroid issues and gluten sensitivity, do you find flour, like wheat flour?

Or do find things like rice flour or some of the processed gluten-free foods? Where would they land in that category? Yeah, great question, Isabella, and especially for your audience.

Yeah. So for the addictive piece, Flour is flour is flower. It's not about gluten, it's about flour. And what I mean by that is it is the refining and processing that causes the issue.

So if you think about deeply, what is a drug? Where do drugs come from? Interestingly, cocaine comes from the coca leaf, which is, you know, there's these bushes in the Andes Mountains and hikers commonly pluck these leaves and put them in their cheek, common practice, and chew them, suck on them.

It makes their cheeks a little bit numb. Gives them a tiny little of a lift, kind of the equivalent of drinking half a cup of caffeinated tea. There's actually a scientific paper that's been published showing that chewing cocal leaves is not addictive.

It's when you take the inner essence of those coca leaves and you refine and purify it down into a fine white powder, now you've created a drug. It is that extraction, refining, processing, factory process that does it.

The same with heroin. As I was getting clean, I knew that before a drugs test I couldn't eat poppy seed bagels. because poppy seeds will make you test positive for opiates, right?

Because that's where heroin comes from is poppies, the poppie plant. poppy seeds, right? But nobody's, you know, jonesing for poppies seeds. Nobody cares about the poppie seeds!

It's only when you take the inner essence of that plant and you refine it and purify it down into, in this case, a fine brown powder or a thick syrupy sludge, think high fructose corn syrup, the thick, syropy, sludges also sometimes the output of that refining process, that you create the drug called opium or heroin.

And it's the same thing, rice flour, like rice is fine, almonds are fine. Chickpeas are you take the inner essence of those plants and you refine and purify it down into a flower, now you've got a drug.

Our mutual friend, Dr. Alan Christensen, I believe, is the one who says that if you think of digestion and the way it works, Eating a whole real food like garbanzo beans or, you know, uh, farro or something like that, like a, whole, real, food is metabolically, it's the equivalent of taking a block of ice.

That's a that's, a cube, one foot by one, foot, by, and putting it out on a hot Arizona blacktop driveway in the summertime to melt.

Which foods are most addictive

It'll melt, but it'll take a couple hours, few hours. Right. versus eating waffles or something is the equivalent. The flour is equivalent of taking snow cone shavings and sprinkling them on that driveway and they'll melt on contact.

So very, very different for digestion. Very different from the brain. What's happening in the brains in those cases is when you eat the whole real food, dopamine does not flood.

When you the refined food the dopamine floods into the nucleus accumbens and the the thinning out process happens and the brain starts to wire for addiction.

Wow, that makes so much sense how you explained it. It's like you get an instant hit of all of that into your system rather than the digestive process breaking things down slowly.

When I was on my healing journey, I went through the specific carbohydrate diet and one of the foods that was allowed in that diet was actually a lot of nuts and almond flour.

And I feel like I became addicted to nuts an almond flower. Why are those addictive? I don't know that we know, to be honest. Like with cheese, we now casomorphins.

There's a molecule in there. But nuts seem to addictive in a way that I can't explain. If you look at them compared to like seeds, for example, Nobody in my community is breaking their bright lines on seeds, but people are breaking the brightlines on nuts and nut butters a lot.

Nuts are actually a food that is allowed in brightline eating. It's on the food plan. But a lotta people have to give them up because they just trigger them.

And I do not think we have any reasonable explanation for that, to be honest. I think that's an open question. That's interesting. You brought that up and I was wondering myself, but I find for me, I know nuts for a while on my healing journey, would have like mood swings when I had too many nuts.

And I would be like, nuts make me nuts! I don't know what would happen about them. I'd have hormonal imbalances and menstrual cycle abnormalities when having them and skin breakouts.

So, to your point, it's really important to understand how a food impacts you, whether it's giving you a dopamine hit or whether its causing inflammation in your body and really tailoring accordingly.

Because if something is constantly making you feel bad, probably not something that you should be enjoying in

moderation, right? It's probably something you may want to stay away from whether that's short term or long term.

Yeah, it's just easier to give it up. I know a lot of the whole food plant based doctors, Dr Joel Furman and Caldwell Esselstyn and all these folks, they've got people coming to them in droves, trying to lose weight, try to get healthier.

And what they find is they say, well, if you just eat these foods, these plant foods right, the foods that we tell you to eat, you'll be fine. Then people are absolutely sitting down in front of the TV with a jug of cashews and a Jug of raisins and Mowing and staying overweight and going what gives I'm eating my plants, right?

So yeah, I mean I agree It's know thyself know myself and know that a bright line might be easier, you know, just give them up and yeah Yeah, yeah I find them and they're they are very like calorically dense so you can absolutely Consume a lot of them in one sitting and consume a lotta calories that way.

So the GLP-1 medications, I have not done an interview in like the last two years without somebody asking about GLp-one medications because they've just become such a hot topic in today's health and wellness space.

And we've got integrative practitioners, conventional practitioners. Everybody is talking about GLP-ones. Weight loss results of Brightline eating actually mirror the results from GLP-1s.

Can you speak to why Bright line is so similar? Yeah, almost exactly mirror. It's eerie, right? Ozempic and Wagovi in particular. So yeah, here's why.

Because Bright Line Eating is doing exactly what those drugs do just naturally. There's three things that are needed for successful weight loss. You've got to handle appetite, you've gotta handle hunger, And you've got to handle the willpower issue of like, you know, will power doesn't show up for us when we're trying to lose weight.

Or really at all. Willpower is a tragically situated little part of the brain called the anterior cingulate cortex that is just completely tapped out in modern life and you just got assume your will powers not going to show for you.

at all and figure out how to live despite that. Well, Bright Line Eating does that by wiring in eating using the basal ganglia, which means that we create habits around eating that are so ingrained you end up eating your meals like you brush your teeth.

not because of willpower, but just because that's what you do at this time of day. Now, back to the GLP-1 question. GLp-I's handle appetite through slowing digestion and changing your hormonal balance, flooding way higher levels of GL p1 than you would get.

It's not real GL P1, it's an agonist, for all intents and purposes, and with the trisapatitis, GIP as well. So that's how they handle appetite. In Brightline Eating, we handle appetites as well by prescribing a way of eating that produces a lot more satiety, in part by raising GLP-1, which you can raise naturally through lots of mastication, lots chewing, quite a bit of fiber, a quite bit protein.

but also we correct people's leptin resistance.

GLP-1s, maintenance, and identity shifts

Now the GLP-1 medications aren't touching lepton because they can't because the only way to heal lepton resistance is by actually making someone healthier through lowering inflammation, lowering triglycerides, and what's the third one?

Oh, and insulin levels, baseline insulin level. So you've actually got to get people eating really, really well to restore leptin. But we bring lepton back on board and lepton is far more powerful than GLP-1.

Leptin is the mac daddy satiety hormone. It is THE hormone that makes you feel like I am done eating. Thank you. And in Brightline Eating, we bring it back on board by helping people get way healthier through no sugar, no flour,

lots and lots of vegetables, eating a really, really healthy diet.

So we handle satiety just as well as GLP-1s. Um, so that's one thing. And then so, that is the hunger issue. Um and then cravings, we handle craving by eliminating the highly intensely sexy, you know, uh, not just delicious, but enticing foods that are constantly stimulating those reward centers in the brain.

We take them out of the diet, bringing the reward value of food way, way down, resulting in meals that're delicious but that you're not really craving any more than you crave your hot shower.

You're loving them, you are not spending all day thinking about it and you aren't obsessing about. It's just a nice part of your day and that's how meals become in Brightline Eating.

So hunger, cravings, and willpower, Bright Line Eating handles all of those things. And because we address addiction, I mean, the short answer to your question is, GLP-1s and Brightline Eating are the only programs out there, or the options out that address addictions.

GLPs do it by modulating dopamine in the nucleus accumbens. They literally take away the hit, which for some people isn't great. It makes them feel, honestly, like there's not enough juice in their life anymore, anhedonia, a little bit.

But for most people, it's fine. And Bright Line Eating does that naturally. So basically, we're the natural GLP-1, essentially. A lot of people use them in concert.

Brightline Eating and GLp-I's work really, really well together. Most people on a GL p-one aren't getting 100% of the results that they want on that alone.

They need to pair it with something, and BrightLine Eating is a good thing to parent with. That's really helpful. I know that hunger can really sabotage.

like any kind of eating plan. Like if you're trying to cut off some processed foods and you are trying eat in a healthy fashion, but you still hungry, like your body's gonna be like, okay, I'm gonna go back and just eat something that I know is not good for me, But I need to keep the hunger down.

And so I love that bright mind eating actually addresses hunger and appetite and willpower because those three things can just really sabotage like the best intentions, right?

They do, and our food environment is so potent these days that honestly, for a lot of people, I think the combination of Bright Line Eating and a GLP-1 is gonna be the magic formula because it is hard living in our current food, environment.

If you have ever been overweight, the brain fights to get back there. It's turning the dials deliberately to try to, get you back up to that weight. And it takes a whole lot to keep that way off long-term.

So I love that Brightline Eating can actually be used along with GLP-1s. And do you have any kind of recommendations for combining the two? So we, I would say, yeah, do the boot camp, because we have, uh, give specific coaching calls for people who are combining them.

The GLPs affect people so differently, affect people so differently. So there's no blanket one size fits all prescription, but I will say if you're on a GLP one, you'll probably find that the amount of vegetables that we're telling everybody else to eat doesn't work for you.

You're not going to be able to stomach that many vegetables. That's fine. Cut them in half. cut it by 80% if you need to, right? Fine. You might need more meals, maybe not.

Some people can do some bigger meals on GLP-1, some people need eat five little meals a day. There's a lot of

flexibility there in Brightline Eating, but I would say it's gonna really vary.

Have you been on the medication for a month or for two years, because people's experience really changes as the brain and the body acclimate to the medications.

So I'd say get into the bootcamp and you get GLP-1 coaching as a part of that. Okay. Yeah, that's helpful to make sure that you're utilizing the plans correctly.

I know that some people have had like muscle atrophy from using GLPs ones when they're not using them correctly as well. So it's important for patients to be educated.

Unfortunately, a lot of conventional medicine practitioners might not do the due diligence, they might just somebody on a prescription without really educating them about the lifestyle things that are important.

Like you don't want to be on GLP ones and still eat a bunch of junk, right? You want make sure that you are eating a nutritionally dense plan, like Brightline Eating, that can provide you with vitamins and nutrients and protein and fats and all of these important micro and macromolecules, Now, you actually have a new book coming out.

I'm super, super excited about that. And it's called Maintain. It talks about deep identity shifts that people have to go in order to keep their weight off long term.

A lot of times I have seen friends and colleagues and a lot clients where they will lose the weight and they know how to do that, but then they gain it back.

And they're like, I remember one of my girlfriends saying, like I lost 100 pounds. I know how to lose, but I don't know to maintain. Yeah, that's right.

That's really what my expertise has morphed into is weight loss maintenance. we have three courses in our Bright Lightning membership on maintenance. We have an initial course on the psychology of maintenance, a course, on how to transition from a weight loss phase to a maintenance phase because you're going to need more food and maintenance you can't keep losing weight forever, you'll get too thin by definition.

There's actually a practicality of how do you transition. Then a third course that's all about how you live in maintenance long-term, And this book Maintain came out of those three courses and then takes it even further.

It turns out that There are three deep psychological shifts that are needed for someone to maintain their weight long-term. I've been maintaining for 23 years, and we have people in our community who started Bright Line Eating when I first started it in 2014, who are now maintaining massive weight losses for 11 years.

We have 11-year maintainers in the community already. And we do maintenance like nobody does. What people don't realize is You know, look, the average person in America who is dieting is trying four or five new attempts each year.

And it takes up the whole rigmarole of what they've eaten or not eaten, all of that, their exercise, they're weight, plan, program, food, it, takes about 50 to 70% of their focus.

It's a lot. And the people in Bright Line Eating who are maintaining their Brightline Eating program and their food and weight and exercise and all of it takes up 15% of their focus, 10 to 20%, right in that range.

So you might think, oh, well, that's an amazing bounty to reclaim that much time and focus. I would love that, you would that to get 40% of your time in focus back, amen and hallelujah.

But actually, if you've been spending your whole life fixated on your food and your weight, maybe to the detriment of you marriage or your career or you got grown kids that you're estranged from and it's really painful, you might actually subconsciously not be so keen to have this big gaping vacuum of time and focus in your life, it actually

might be uncomfortable and unsettling.

So this is I've kind of cut to the third identity shift now, which is to allow yourself to be liberated. To be someone who has moved on from the food and the weight struggle.

What happens if you don't allow your self to liberated is you might lose a lot of weight and then stay fixated on the last five pounds or the 10 pounds, tinkering with your plan, going out to eat a big meal, now feeling like you have to spend all week losing them.

You can still maintain that 50 to 70% focus even having lost, you know, 90% of the weight that you need to lose, but you're not liberated. You're done.

you haven't actually declared the war over and you won and your moving on now to life, right? So that's one of that identity shifts. The first and foremost one is to be devoted.

So this is like a vegetarian is devoted to not eating meat. You need to be someone who's devoted, to work in your plan. Whatever it is, whatever your program is.

Whether it's Bright Line Eating plus GLP-1, or it'S GLp-one plus CrossFit, you know, your thyroid pharmacy protocol of the things that you don't eat, right?

And the ways that move your body and live your life and structure your live. Everyone who loses a big amount of weight or a small amount has a plan that does it for them and you need to be devoted to working it.

I tend to not see people succeed who lose their weight one way and now think they're going to go back to doing whatever else, right? That's the very definition of a diet.

If you're gonna just go to eating whatever whenever after you are done losing your weight. This is the fairy tale that that our society perpetuates that weight loss is a thing, but maintenance is in the thing.

You get to just go back to eating what the crap they used to eat before. It doesn't work that way. The people who maintain keep doing it, whatever worked to lose the weight.

But maintenance, is it a little different than that too? It's not exactly the same. So devoted. and liberated. The middle one is resourced. You've got to be someone who does their work, who doesn't their inner work so that you're not needing to eat over emotions anymore.

At least not regularly, not intensely. Food can't be your number one solution when it's time to celebrate, you know, and not be bored anymore, find comfort, Ah, a moment of respite, you have to have other tools and strategies to meet those moments other than eating.

So yeah, devoted, resourced and liberated. Those are the three shifts. And the book is all about them. How do you do that? How Do you find a plan that works for your brain that's strong enough for whatever level of addiction you've got on board?

how do You become devoted to it? Wow. I feel like the resource really hits hard for me. And I know I used to be a smoker when I was younger, and that was my way of dealing with everything.

At a certain point, I got in a fight with my fiance and I had quit smoking, but I didn't know what to do about that. pain and I had to develop a brand new set of coping strategies and it can be quite uncomfortable to do that but if you really want to be committed and maintain you, really do have to that emotional work and figure out your coping patterns and how you've been doing things this way might not work anymore for you if want a different kind of life, right?

That's right. That is so true. Now, being liberated from the food and weight struggle, why is that so hard? Well, like I

said, it's odds are, even if it didn't start out that way, the Food and Weight Struggle has become a distraction and a crutch to keep you from facing other things.

It actually is not trivial at all to take maybe 40% of your life focus away and then fill that void with other things. Some people find it delightful and easy.

They've got hobbies that they love and they're happy to spend more time and focus on. they've Got relationships in their life that They love to Spend more Time and Focus on they are happy To figure out something to do career wise that maybe is a little bigger and bolder and more and They're Happy to have the ability to Do it For other people, it's really scary and hard.

They never realized how much of their identity was wrapped up in struggling with their weight. they just didn't know that. But when they find Bright Line Eating or whatever plan that they get on a GLP-1, and suddenly that struggle is lifted to a significant degree or maybe entirely, It's okay at first because they're losing weight, and that is exciting and they've lost weight before.

They know the, oh, I'm losing the weight thing, they feel on top of the world. But maintenance is a steady letdown after weight loss. It is not exciting to step on the scale and have the number be the same or maybe half a pound or a You have to learn how to rock and roll with that.

And so when you're not getting those dopamine hits from the scale going down, and now it's just day in and day out, And you've got a part of you that's thinking, well, now we get to go have an ice cream Sunday, right?

You know, we're thin now, Right? Well, you know, it actually is really hard to settle in for the long haul. It's not something our society does and it's something dopamine wants.

Dopamine doesn't want steady eddy every day, dopamine want new shiny exciting and actually regaining weight and then having to lose it again is way more new, shiny, exciting.

Wow, that makes so much sense. And I think you explain it so well. I know that this conversation has been very transformational for me, I've learned a ton.

i'd hope that people listening that This has Been incredibly helpful on their healing journey. If they wanted to connect with you and learn more about your work, can you tell us where to find you?

Yeah, I think the easiest place is just at Brightlineeating.com. And that's spelled the classical way, no fancy shenanigans in there. So B-R-I-G-H-T-L- I-N-E- E-A- T-i-n-g, Brightlineneating dot com.

Then if someone wants to learn their food addiction susceptibility, because that information will be very helpful no matter what you do for the rest of your life, go to foodaddictionquiz.

com and take that quiz. Those would be the two things I would say. Okay, fantastic. I so appreciate you being here with us and the work that you're doing in the world.

You're really changing lives and helping so many people. Thank you so much for coming on the show and everybody listening.