Free Alzheimer's Awareness Month Keto Webinar Transcript

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Opening Remarks and Book Launch

Hi everyone, those of you who can hear me we are going to officially get started in just a few minutes and I am so delighted to have Julie G from the Apollo team here with me this afternoon.

Here we I don't know, probably most of you who are here know that our book, my book came out this week. Hello, Julie G. Welcome. So good to see you. I'm so excited and delighted to have you here.

We're going to get started right at the top of that, or not at Bottom of the hour. And I just wanted to thank everyone those of you who bought the new book reversing Alzheimer's that was out just last week and thank you so much for the comments and the feedback and reviews are incredibly helpful on both Amazon and on Goodreads as well, that just helps with the momentum of the book.

So we heard this morning, we are a USA Today bestseller. That's also very, very helpful for the moment of a book to have it be a national best seller.

And so thank you, thank to all of you for your support with that. This, as I mentioned last time, this is not my book. I've never thought of this as my books.

This I have been the very privileged steward of the stories. And really this book belongs to the tireless caregivers and to that the patients who did the real work.

It was the people, the families who took on Dr. Bredesen's protocol, who put it into practice, who changed their diet, who got the exercise, went to get the sleep studies done and wore the CPAP and figured it out, swallowed all the supplements and did all of the work that it takes to put this into action.

Those are the people that this book belongs to. Without them, there would be no book. There would nothing to discuss. And so I'm so delighted to have you all here.

I am so grateful for your support. And really, the support of the book is the movement of getting Dr. Bredesen's work out there to more people so that they can take the insights and the information and put it into action and get the benefits.

So so so happy to have you all here. Please introduce yourself in the chat and put questions in The Q&A. We already have about 235 people here, oh it just keeps going up because we're getting closer and closer to our start time here!

This is so exciting, it's so much fun, It gives me energy to be here with you guys. It's incredible to see the engagement, to just have so many people excited, fired up, asking great questions, and tonight We have Julie G here.

I want you to introduce yourself. But Julie, your story is so incredible and so amazing that I also don't want to start before everyone arrives. And we told them they had until 430. So that's fine.

All right. You don' mind introducing? OK, it's 4 30. It's Julie, but just tell everyone, so you're on the Apollo team. So I'd love for everyone to understand your role there and your story.

How did you end up working with Dr. Bredesen and, and kind of being so involved and so crucial to the apollo team? Yeah, that's a great question. It's dream job.

Absolutely. So at Apollo, I'm the chief health liaison. And what that means is I help to write the educational material

for the participants and the practitioners.

What makes my job a dream is that I get to sit in on these medical team meetings with Dr. Bredesen and Dr Rao and Doctor Lashin Bledesen. Aida, Lachine, Bredesen and all these brilliant people.

Julie G's Role at Apollo Health

And we're constantly working on how to perfect the protocol every day and working with the people, the community of participants at Apollo Health is just so humbling and it's such an honor to be doing that.

So describe to everyone exactly what Apollo does. So if somebody is looking to sign up with Apollo, what's unique about it? What exactly should they expect?

So that's a great question. Apollo Health is basically disseminating Dr. Bredesen's approach, and they do it by providing step-by-step instructions, And they also have tons of resources for you.

We have a vibrant online community of people, I know a lot of them are here today, so thank you for joining. We've got tons of educational guides, recipes, town halls.

So Dr. Bredesen and Dr Hathaway and other subject matter experts take our participants' questions and answer them on a monthly basis. And it's just a ton of resources.

You can find Apollo Health at ApolloHealthCO.com. A great way to get started is take the free CQ cognitive quotient assessment. Lots of you may think, oh, there's nothing wrong with my cognition.

That's what I thought too. And I was shocked when I did my first round of cognitive testing. Cognitive decline comes on slowly and insidiously. So if you go to that website, it'll direct you to the CQ, take that assessment, you'll get your results.

It's all confidential. And if you'd like to, you can join the pre-code program for prevention or the recode program or reversal. Wonderful. And then tell everyone about your personal experience.

Yeah, so my journey started 12 years ago, almost exactly 12 year ago. So I was 50 at the time, and I learned I carried two copies of the APOE4 allele.

And for those who aren't aware, that puts me at very high genetic risk for developing Alzheimer's. At the I time I generally unwell. I was struggling with many health issues.

My doctors couldn't figure it out. I doing everything mainstream medicine told me to do to be healthy, but I wasn't healthy. But my cognition wasn t a primary concern.

So when I learned I had two copies of this high genetic risk, I did online cognitive testing And I was stunned. I scored in the mid 30th percentile for my age group.

It didn't even believe it. And when I knew I'd been struggling, but I wasn't attributing it to my fast paced lifestyle and stress and perimenopause and all those things.

Never in a million years did I think Alzheimer's. repeated the cognitive testing and I got the same score and thought, oh, this is real. And it was pretty terrifying as I began to dive into Alzheimer's.

At first I thought, okay, I'll take a pill, you know, modern medicine can fix everything. But then I learned there was no pill. It was progressive and curable and ultimately fatal, usually within 10 years of symptom onset.

So it really scary. Yeah, and I've heard you describe the symptoms so many people find terrifying, right? Being lost when you're in the car, driving, having extreme sensitivities to foods and just feeling like, basically, you are not

comfortable in your own skin.

Like you, it, your confused and the anxiety that comes with imagining that you going to go downhill with nothing really there to be able to support you.

Like you said, there's no medical intervention that provides any sort of meaningful impact. So I'm curious, how did you get started with Dr. Bredesen's approach?

How did learn about it? And then what were your first steps that you took? So I guess I'll kind of back up and tell you, you know, sort of the journey that I took.

I finally, I turned to the Alzheimer's Association and they're the ones who gave me the grim news that there was nothing out there, it couldn't be prevented, couldn t be treated.

So, got up my courage to see a local neurologist and I waited to And when I shared my high genetic risk and the symptoms I was having, I showed him the results of my cognitive testing.

I asked him what I could do to turn things around. And he said, good luck with that.

Julie's APOE4 Discovery and Recovery Journey

Good luck. That's all that mainstream medicine had to offer me. So it was a very dark period for me, questioning if I even wanted to go on and fight. I mean, it was a very dark period for Alzheimer's disease, comparatively speaking.

Right now is a wonderful time to be alive because we know all that we now, but back then it very was dark. When I finally decided I was gonna ignore them, I was 50 years old, for goodness sake.

Surely I thought there was something I could do to turn this around, something that I can do with diet or lifestyle. So I banded together with other carriers of the APOE-4 gene from all over the world.

I learned from 23andMe. and they provided online forums. So there's nothing like people working together with skin in the game, trying to save their own lives.

And together we consulted every expert we could find. We read every paper we can get our hands on and we put it all together. As we learn this information, I began to apply it.

I changed my diet pretty radically, the way I exercised, made myself a priority for the first time in my life. I made sure I got enough sleep every night.

Like many moms, I was busy taking care of my family, my community, My son's school, our church, it was volunteering. It was just spread, working full-time, spread very thin.

And I finally realized, The time has come for me to make myself a priority. I also began meditating for the first time. And I was very competitive with myself.

If I didn't beat my score from the day before, I stuck with it till I did. And, and I don't recommend that because I would sometimes spend hours saying I'm going to beat score.

I also began taking targeted supplements as I learned about them. And I should say that we took all this information that were collecting. We recognized we were sitting on a treasure trove of APOE4 information.

I founded my own nonprofit called APoE 4.info and all these amazing people followed from 23andMe and went there. I don't know how many members we have between our Facebook group and our online group, 8,000 or more.

And these are just the most wonderful, dedicated people that are really fighting to save their lives and the lives of their families. After I applied all those strategies for about a year, I repeated my cognitive testing and I was in the mid 90th percentile.

And once again, I didn't believe it. I repeated the testing, got the same score. And I have to tell you, I felt amazing at that point. My brain was on fire.

All the symptoms I'd been experiencing had gone away. I'd be dealing with lots of chronic illness. All that went away and so I've never been healthier in my life.

And about that time, it's 2014 now, I read Dr. Bredesen's seminal paper, Reversal of Cognitive Decline, a novel therapeutic program. And I was just blown away because he was essentially describing the protocol that my community had put together that I had to put myself on.

to understand the scientific underpinnings. I certainly didn't at that point, but I was doing what I called the kitchen sink approach. If I read a paper that said this could help, I tried it.

And everything that seemed to make sense, just tried. So I reached out to Dr. Bredesen like a crazy fan girl. I'm very shy and very private, never had written to a celebrity like this before, but I was so impressed with what he had achieved and the humanity that he showed for each of those 10 case studies.

that were featured in this paper. And something about his grasp of understanding, these are people that just want to get back to work. They weren't just a data set to him, but he reached out to me that same day.

We began a conversation that we've maintained ever since. I was honored to help him and his wife, Dr. Aida Lachine Bredesen write the end of Alzheimer's program.

I help them write the handbook portion of the book, which is the how to actually reverse Alzheimer's step by step. And I've ordered your book and I can't wait to get it because who better to be writing this than you?

I'm so excited. Well, there is so much, you know, I think that Dr. Bredesen has built this incredible foundation. He obviously has been, so generous to write the forward of my book and to support my career.

And my goal is to increase accessibility and a lot of it through the stories, right? Through my experience clinically, through coaching and through Marama, the residential care facility.

where we've offered an immersive experience in this. And so that's what I hope to add to this is basically just to increase the ways that we can do it.

Tonight we wanna talk about diet. For those of you just joining us, we have well over 500 people here and this so fun. It just makes me so excited. I saw a patient today who I've been seeing for a while and many of your heard the story of her because she went from a mocha score of eight to a moca score 15 over the course of about six or eight months.

And a big part of it had to do with getting her on a CPAP. Well, I met with her today and she continues to even better. Her family has noticed, and I think they've struggled a little bit with like, why isn't she a hundred percent better?

And I'm like oh my God, she's a walking miracle. Like she is so much better, is it not enough? And there, I think that there's this kind of, you know, we want, We want people to go back to a hundred percent.

And when you start with a mocha of eight, it's so much harder. It takes more work, but they are proving. I told Dr. Bredesen this at one point is even two, three years in people continue to get better.

spiraling up, I sort of thought they would plateau, like she might go from an amoka of eight to amok of 15, but never

get to an 18 or 19. Now I'm like, she may get even better because that's what her family is reporting.

And these incredible stories are part of why we're here today. because I think they're so inspirational. They show that there is hope and there's possibility for those who are suffering with Alzheimer's and dementia.

And our goal is to get you the science, the resources, things to put it into action. So thank you for being here with us, Dr. Excuse me, Julie G. The incredible Julie who has gone through this experience herself is here and she is one of the crucial team members over at Apollo where Dr.

Bredesen, his work is put into practice as a step-by-step guide. There's a program there that you can all look into and have access to. Very, very supportive of patients who are struggling with this, either in that pre-code, the prevention phase, or in the reversal phase.

So I know that there are, we have Tyler here who is my right arm who's helping us in the chat and I see Lance popping it as well helping, us get those links to you so that you can all look into that for more information.

And then my goal is for us to talk about diet. In the Q&A, please add your questions. Please introduce yourself in the chat. We love the community here.

And what I want to do is just, let's start this conversation with like kind of general recommendations. Then if you don't mind, I think I'm just going to want like interview you.

I also want highlight in this conversations some of the confusing aspects. Let's jump into Meet and Siri and all of how much protein and how do I count my carbs or this or that.

And so I want to get into all of those pieces. I wanna hear from everyone who is here about what is most of interest to them. But Julie, does that sound like a plan?

We'll just jump into it. Sounds wonderful. Yeah. Many people, this is where they have the most questions is how do I get into ketosis? And also this where I think the biggest benefit comes from is when we switch our diet, particularly when start with more of a standard American diet.

Convenience foods, processed foods things like that. So just describe, what do you think is the brain healing diet generally and how you recommend people get started?

So we like to think Keto Flex 12.3 is the most brain healing diet. We're very humble though. And we're always collecting new information and evidence that it works.

Nutritional science is really difficult. So, we have Dr. Bredesen's clinical trial, We have your clinical trials. Dr Bledesen is doing a much larger clinical trail now.

but its diet is one of many aspects that have changed.

Introducing Keto Flex 12.3

We think Keto Flex 12.3 is the ultimate brain health diet because we're trying to harness multiple mechanisms. We're reducing inflammation, we are healing insulin resistance, improving metabolic health, and we provide all the raw materials for for brain health.

So we think we've put it all together and we're seeing amazing results. And I agree with you. I think ketosis for so many people, it was for me, that is the turning point.

I think so many people on a standard American diet go weeks, months, years burning glucose exclusively because our diets are so high in sugar and starches, processed foods, refined foods.

and I know that was true for me. And I was on this blood sugar roller coaster. So I'd feel great when my blood Sugar was high, but then it would crash for Me and i would get really severe hypoglycemia.

And it wasn't, yeah, until I got into ketosis that I began to heal, easily heal the insulin resistance and my brain just lit up. It was on fire. it was like this alternative fuel was working.

So let's go into what is the Keto Flex 12.3. so there's four parts to this, keto. Let's start there. So it's a mildly ketogenic diet. You can get into ketosis by burning your own body fat or from the dietary fat that you're eating.

Research shows that there's this reduced ability to effectively use glucose in the Alzheimer's brain. And for those of us with ApoE4, this starts as early as age 20. So our brains can very effectively use ketones.

That's why we're trying to create this mild state of ketosis to fuel our brain. And this requires carbohydrate restriction. Usually takes about 72 hours for most of my patients to get into ketosis after they start reducing and really restricting those carbohydrates.

And so keto, that's the keto part. It's where we switch from burning glucose for fuel to burning fat or ketones for a fuel. This requires carb restriction and enough fats as that backbone of those ketons.

Number two is flex. What does the flex part mean? So FLEX stands for metabolic flexibility, and that's what we're trying to restore. So lots of us are very good at burning glucose, but not very at creating or burning ketones.

We were born metabolically flexible. And our bodies had this built-in mechanism to burn ketones when food wasn't available. And healthy people, metabolically healthy, people go into ketosis at night.

It's very natural to be metabolical flexible. So that's our goal. The goal isn't chronic ketoses, although some people are going to need that, depending on their state of cognition, maybe for the first few months.

But the goal is to create metabolic flexibility to optimally fuel your brain. So Keto Flex 12, what does the 12 refer to? So 12 is a minimum overall fast.

So you can fast any time of day that works for you. Some people do extend it longer to 16 plus hours, but we want people to shoot for a maximum of 12 hours a day of fasting to create autophagy.

This is the state of cellular housekeeping and it essentially It's an anti-aging effect and it's a way of supporting brain health. And it helps us get into ketosis as well, this long fast.

And then I think I know where you're going with the three, and then maybe we can get into particulars about what that might look like. Like when would you fast, what the hours might like, but tell me about three.

So Keto Flex 12.3. Right, so three is a minimum amount of hours we want you to stop eating before bed. That helps to create that state of autophagy. We don't want to be digesting food.

when you get into bed. I've eaten too late and it's a horrible feeling. You just, it is hard to sleep and there's, It's not healing in any way, harder to get in to ketosis.

So we really want people to try to that three hours before bed Great. So a really practical experience of this would be fasting from seven to seven or eight to eight, depending on what time you go to bed, right?

If you to go bed by 10, then your last bite of food should be before seven, so you have a full three hours before going to bed, lying down and then getting that great sleep.

I use an aura ring, I track my sleep and I notice if I have something to eat in those three hours before bed I don't get as much deep sleep, i don t get much REM sleep I dont feel as rested in the morning.

We can all I think relate to this and so that seven to seven tends to be good or maybe it's six to six and a lot of people will be able to even go a little bit longer like 13 or 14 or 15 hours if you stop around six stop eating around 6 or 7 and then don't start again until maybe eight, nine, 10 in the morning.

Do you have recommendations on the ketogenic diet on a Keto Flex 12.3? What kind of meals, like it's simple. Can you describe some simple meals and how people can go in this direction?

Basically, what would you suggest to somebody who's kind new to this idea? How would start them going in that direction. Right. I think it helps to visualize what your plate should look like.

And so I like to have everyone imagine the round plate and imagine about three quarters of that being vegetables, lots of beautiful, delicious, low glycemic non-starchy vegetables.

from every color of the rainbow, preferably organic, local, and seasonal. About a quarter of that plate should be protein. And it's important to target enough animal protein every day.

I'm not describing fat, but there's Lentiful fat, because in the diagram we have at Apollo Health, there's this ramekin full of fat that we show with our plate diagram.

We love high polyphenol extra virgin olive oil, every bite of your veggies. should be dipped into that. Your salad dressing should made from it. You sauces should feature extra virgin olive oil.

Um, you need as much healthy fat as possible to help you get into ketosis. We love avocados, potentially coconut oil. We can talk, let's talk about coconut while we're talking about fat.

So there's, there is a little bit of controversy around coconut oils, especially for the APOE4 community because coconut contains MCT or medium chain triglycerides.

that are saturated fat. Now it's a medium trained triglyceride because it is shorter. This only has 6, or excuse me, 8, 10 or 12 carbons. And so these shorter saturated fats, we metabolize differently.

But there's still this question mark around people who are APOE 4, 4 positive. there can be dysregulation in lipid or fat metabolism. And so for sure, absolutely without a doubt, if you are ApoE44 positive, reducing particularly grain fed animal protein or non-organic animal We definitely want to keep those processed fried fatty foods to an absolute minimum.

The seed oils, the oleo or margarines, we want just cut those out entirely, especially trans fats, but also saturated fats. And then MCT oils, these coconut derived medium trained triglycerides, These are a great backbone for producing ketones or beta hydroxybutyrate, which the brain loves to burn.

And so how do you navigate this coconut oil conundrum? I know Mary Newport is a big fan, even for people with ApoE4 for positive. In my clinical practice, I've seen people who are APOE-404 positive do just really well.

Their lipids get better and actually improve. But I know that Dr. Gundry, Dr Kometter, and Dr Bredesen have concerns about that. Can you speak to that from your experience?

Right. So coconut oil and MCT could be considered an exogenous ketone supplement.

Meal Structure, Fats, and Coconut Oil

And I think there's a role for that. In many ways, Alzheimer's is about reduced energetics. When you're trying to get someone into ketosis, they're extending, their fast, or having less carbohydrates.

and we're reducing energetics even further because we are trying to get them over the hump. And I think at that beginning, it's a fabulous place to transitionally use an exogenous ketone supplement.

But you're specifically asking about those that are high in saturated fat. You're right, in the APOE4 community, we tend to steer clear of that. There was a recent study, however, on MCT that just came out and said it had a very small effect on cholesterol overall.

So it's one of those that can be used by ApoE4 carriers, but check the effect that it has on your lipids for sure. That's what I recommend, too, is watch it closely with a provider.

Make sure that you're looking at your cholesterol levels so that have that chance to course correct. Because with APOE-44, we're not just worried about Alzheimer's, of course we are, but also cardiovascular risk.

So these are things that we want to make sure we keep track of. And you might be doing your labs more frequently than your partner or your spouse or neighbor who is APoE33.

Julie, we're getting some really great questions about vegan or vegetarian diets. And Dr. Dean Ornish just a couple of weeks ago published the first randomized control trial.

We were of course disappointed that he did not refer to Dr Bredesen's work in his references, but Be that as it may, we're still celebrating the fact that the first randomized control trial has been published.

And the conclusions of this trial are, I mean, they just gave me goosebumps. I was so delighted to see that this is really hitting the mainstream. Many of you may have seen the CNN docu-series that Sanjay Gupta did that highlighted some of Richard Isaacson's patients and some Dr.

Dean Ornish's patient. The conclusions that these randomized controlled trial drew was that comprehensive lifestyle changes may significantly improve cognition and function after just 20 weeks or five months in many patients with mild cognitive impairment or early dementia due to Alzheimer's disease.

Now, one of the big differences between this trial and the ones that Dr. Bredesen's group did and that we did in my practice is that they use a vegan diet instead of a ketogenic diet in Dr Ornish's approach.

And so, I'm curious just generally your thoughts about vegan or vegetarian diets and if you think that there might be a role for them in treating or addressing Alzheimer's.

You know, we have to wonder what diet these folks were eating before. So if they went from the standard American diet to a healthy vegetarian or vegan diet, I think it could be a big improvement.

Our concern with vegan diets especially, and vegetarian, some vegetarian diets as well, is that they can lead to macro and micronutrient deficiencies that can predispose you to Alzheimer's disease.

So we have a guide at Apollo Health that I hope somebody will put in the chat. I think somebody did, Keto Flex 12.3 for vegans and vegetarians. And it kind of walks you through certain precautions that you have to take.

We have so much respect for our vegins and vegetarian. We have respect for carnivores, those using the Mediterranean diet, and those who use the MIND diet.

Everyone deserves brain health. And we don't want to be a part of the diet wars. We want bring people together. So I celebrate Dr. Ornish's paper. That's wonderful.

I do warn people though about certain precautions that they have to take. And we go through that in the guide and there's just certain supplements you need to take so that you can offset some of these deficiencies.

Yeah, I know people are asking about vegan keto, and I think that that tends to be very challenging because we're restricting not only carbohydrates, which to get into ketosis, you have to restrict carbohydrates.

One of our macronutrients. And then when we add vegan to it, now we are resticting all animal protein, And I feel

like it can be overly restrictive. To do that for more than a couple of weeks, You can end up with nutrient deficiencies very quickly, I'm a fan, I've mentioned this to you recently, that when I think about ancestral diets, you know, the diets that we were designed to eat that our ancestors would have eaten, That is really, like the direction that I want to go back to, away from processed foods, a general overarching umbrella recommendation is avoid processed food and in particular run from ultra-processed foods.

And then what you want to do is, when I think about ancestral diets, the consistent thing was inconsistency. We didn't have berries available 365 days a year.

Our ancestors had a lot of variety in their diet, not because they wanted to, but because had to. That was what was available. And so I you mentioned eating seasonally.

You mentioned organic. I think whenever we can go back to non-processed organic so that we're not getting the toxins associated with pesticides and herbicides, and then we're eating whole foods, I think we should get improvements.

And then along with Dr. Bredesen's group, getting it metabolically into ketosis and going in and out of that. I might find that the best diet is going back and forth between keto with more of the animal protein and a vegan or plant-based diet, as long as we are on a diet that is not full of processed junk.

that we see brain health benefits. And then that flexibility I think is also pretty crucial, that metabolic flexibility. Okay, there are some incredible, wonderful questions.

One of the things that comes up is ease. How do we do this, right? This is a new way to cook. It's a way new to shop potentially. And I know you guys have gone to a lot of trouble.

You've done a LOT of work to make it easier for people to get into ketosis through some meal delivery programs. Can you talk about that and your partnership with Nutrition for Longevity?

Right, we're very honored to have partnered with them and KetoFlex 12.3 is now available on a subscription basis, delivered to your doorstep. We've made it so easy.

There's two different options. You can choose to do the meals alone, there's 10 meals delivered every week, or you can chose the bundle, which is 10 Meals a couple of bottles of olive oil, a few bins of cruciferous vegetables, and then a half a dozen pastured eggs for choline, which is really important for brain health.

So you can do the bundle that is kind of your full kit for the week, or you can do the meals alone and supply your own extra veggies and leafy greens and eggs and things like that.

But we're so grateful to Nutrition for Longevity. When you eat a whole food diet, it can get boring really quickly and their chef is world-class and she has put together amazing salad dressings and sauces.

And she's done it all with whole food and they're just absolutely delicious. She's restricting carbs. All the ingredients are super clean. So it's a fun thing to try.

Vegan Diets, Flexibility, and Meal Delivery

Even if you try it for a week or two, just to help you get into ketosis, we ask people to include up to four tablespoons of the high polyphenol extra virgin olive oil in each meal and in the each salad.

So it really helps people to get into ketosis quickly. It's delicious, it's simple. I love it. Vicki, a couple other people mentioned in the chat how delicious the foods are.

We have a few people asking about fruit. So fruit, now there are some fruits that you can have on a ketogenic diet. And I'm going to share my personal experience getting into to ketoses and fruit now.

Now we're not saying that fruit is unhealthy for you, but fruit raises blood sugar. And so if your goal is ketosis, it's probably gonna keep you from getting there.

And temporarily, restricting fruit is important. So when I get into ketoses, I have really enjoyed using a continuous glucose monitor because I struggled for a while to get in to ketose.

One of the things that happened was I was having this lovely, Dr. Andrew Weil makes these wonderful adaptogenic matcha blends, and I got his organic ceremonial match, drink it every day, but he had this adaptogenic one.

I usually have a lot going on and some stress in my life. And so I was using his wonderful powder that said it had zero grams of carbohydrates. Well, then I had the continuous glucose monitor on and sure enough, it was spiking my blood sugar.

Now it might not have for someone else, but it did for me. Another thing that I found as I getting into ketosis and was wearing the Continuous Glucose Monitor.

is that I could eat blueberries that would fit in the palm of my hand, and I would stay in ketosis, but if I did the same thing with raspberries, my blood sugar shot up.

And so everyone's a little bit different and this fruit conversation is really, I think, in that category, where I have had a husband and wife sitting in my office across from me here and one person will be able to eat zucchini, stay in ketosis, the other person has zucchini and falls out of ketoses, their blood sugar goes up.

So much of this is individual and also part of it happens as you keto adapt. The longer I'm in Ketosis the more flexibility I had with a little bit of fruit.

I can have a quarter of an apple with some cheese. The other thing that can allow you to eat more carbohydrates is having high fat right before. So if I have a coconut yogurt, like a big thing of coconut, yogurt that's full of fat.

And then I. Have a few raspberries, I can stay in ketosis. I don't fall out. There's some nuance to this. We have a keto diet guide that I'm sure Tyler has already put in the chat, but there's tons of resources out there.

Find the one that works for you. Chapter seven of the book is all about ketosis. It's the longest, biggest chapter because this is where we get the most questions, and I am so delighted.

to have Julie G here. I mean, you are just an expert. You have lived this. From the most challenging stages of realizing that you had cognitive decline in APOE 4.4 to now being here, one of the executives at Apollo teaching other people how to live this, So I want to be conscious of time, because I think that we scheduled this for an hour, and it's been over an our.

We usually go about 90 minutes, so we'll go to 530 Pacific time. But I wanna make sure that you have that, Joey. Oh, sure. Are you gonna keep going for another 25 minutes?

We have so many questions, we've got 600 people here. I'm so excited to get your expertise. So Deb has asked, what is the difference between precode and recode at Apollo?

So pre-code is designed for people that are working on prevention. So there's no signs of cognitive decline currently, but you could have a family history, you can have subjective cognitive impairment.

You could a copy of APOE4, so that is design for that group. And for folks that already showing symptoms, we've got the recode program. Got it. Perfect.

From Debbie, I am my husband's caregiver. He has dementia and his doctor doesn't think he should go on a keto diet. And I'm afraid to do it without support locally.

What should I do? Yeah, that's, really hard. Are you working with a practitioner? I wonder Debbie who's helping you apply the program. If you're using your primary care physician, you might get pushback and that's hard to kind of veer outside that lane.

Ideally, you'd be working with a practitioner who's been trained in Dr. Bredesen's approach. You might even want to start with the health coach or a nutritionist who has been training the approach who could help to support you with this.

Yeah, and there are considerations. I know some people are concerned if they have high cholesterol and they a high fat diet, is that going to be an issue?

We often see that people's cholesterol improves. What if I've had my gallbladder out? What If I have kidney issues? what if i've Had an eating disorder?

That's actually one of the ones where I suggest a lot of caution because it can trigger With restriction, it can trigger eating disorders. Working closely with a coach or a provider, I think it's an important part of this conversation, particularly if you have any concerns.

Many people will come to this and say, oh, i've tried keto in the past and it was phenomenal. I did so well. i'm so glad you're inspiring me to get back to it.

But if have hesitations, if You have extra questions, Apollo has a wonderful team. Dr. Bredesen has trained over 2,000 providers around the world. Sheila is asking, how can I connect to a coach to help my mom in Canada?

Right, so if you're a part of the Apollo Health community, we've got a resource where we can help you find your coach or your practitioner. And if your not, Dr.

Bredesen has a Facebook group called the official, I think it's the Official Bledesen Protocol Facebook Group. It's a very active community and people can make recommendations there as well.

And Tyler, my right arm who is joining us here. She is also a recode a coach. And so if you want to reach out to her, if there's simple questions, we can also get you lined up with her connected with Her and in enrolled in the Apollo program as well.

So from anonymous attendee I'm a buoy for for part of recode for four years and can comply with everything but the ketogenic diet. I've been told by some doctors that research supports the mind diet or the Mediterranean diet, can one be successful without adopting keto and achieving regular ketosis?

Right, so that's a really good question, especially for a 4-4, because we show that deficit in being unable to use glucose effectively from a pretty young age.

So as a four-four, I think ketosis needs to be a part of your program. And if you're struggling with it, i would encourage you once again to work with a co-jury nutritionist, because the great thing about KetoFlex 12.3 is it's not diet alone.

We're putting diet together with daily exercise and this long daily fast, all three of them help you reach a state of ketosis. All three have them helping you be metabolically healthy and flexible.

So it is easier than it would be if you're using diet, alone, but it getting over that hump. And maybe at the beginning for a 4-4, you might want to consider ketone salts or esters just to help you get into that ketosis, feel how amazing it is.

But ideally, would be doing it endogenously or naturally by combining diet, fasting, and exercise. And just so you know, my experience, I'll just share a little bit more of my personal experience with ketosis is that those first couple of days when I'm trying to get into ketoses, not quite there yet, but I am restricting carbs.

I will often do it after I get back from a trip because it's a good reset. It was in Japan in March, April, and I wanted to have sushi, And I want to enjoy mochi.

And wanted enjoy my trip and people will go to Europe and they want have a croissant in France and pasta in Italy. And then when you come back, getting back on track, I will think about donuts for about 24 hours.

Now I have not eaten a donut in 15 minutes, but in my brain, all I can think of is donuts. So you're not alone if you struggle to get into ketosis. But if you can get up over that hump, what I experienced is I'm out of bed at 5am and I feel ready for my day.

I am better rested. My mood is more stable because I go off that blood sugar spike and drop. The clarity that we see people just kind of like turn back on you described having this experience yourself, Julie.

And I, you know, I hope I don't suffer with cognitive decline yet.

Fruit, Dairy, and Ketosis Tips

But I noticed the benefits and many, many people experience that like life is better in ketosis. That is motivation to keep coming back to it. Certainly it is for me and for many of the patients I talk to.

So we get that it's hard. What we're asking you to do, especially in this day and age where there's sugar everywhere. It's advertised to us. That's what's easy.

But still we encourage you, even hard things are worth it often. And this is one of those. And you know, the longer you're in ketosis. So at the beginning, you might want to stay in Ketosis for a month or so to reteach your body how to get there.

But then you are going to naturally cycle in and out like you did when you were metabolically healthy and young. And it's easy and it is natural. I don't consider it a hardship at all.

Recently it was my mom's birthday and my sister-in-law made this cake. And she promised me it was sugar free, dairy free and gluten free. And I thought, oh my gosh, you're a goddess.

I'm so excited. Oh my gosh. I felt the blood sugar. And then I sent her a text and I said, what kind of sweetener did you use? And she used agave nectar, which is still pretty high glycemic.

But in her mind, it was sugar-free because it didn't have sugar, but I wouldn't want to go back on that blood-sugar roller coaster for nothing tastes as good as ketosis feels.

And the longer you're on it, the more carbs you can eat, The more fruit you eat because your body naturally knows how to go in and out of it. I noticed when I've been in ketose for a while, if I fall out for A week or two, I can get back in within about a day, 24 hours.

If I go on vacation and I'm enjoying a lot of sushi and mochi and things in Japan, it takes a little longer to get Back into it so But your body at just I have that exact same experience and on page 296 in the book is a keto celebration cake, which is the chocolate cake that you can use.

I know you guys have tons of recipes as well, but we've got lemon popsicles that are creamy lemon Popsicle. So it's not that. You have to avoid all sweet things.

I often recommend, and what I do at my house is when I want to get into ketosis, I make sure I have a bunch of stuff for a sugar craving, right? If I get that hankering, I have chocolate fat bombs that are keto friendly that I can easily grab and snack on.

And so that way I am set up for success. I don't have cupcakes and cookies sitting around the house because I'm

going to grab that if I think about donuts all day.

And it's just part of that addiction, right? We have physiological addiction to sugar and we have to get up. We go through the withdrawal and get over that hump.

Okay. Dairy. You mentioned dairy free. So let's chat about dairy. Tell me your thoughts. Can we do dairy? If we can? Are we cheating? Can have a little bit?

How do you do this? I'm so glad that you asked about this because I think our messaging is confusing. So, let set the record straight. So conventional dairy is one of our what we call just say no foods, and those include sugar, simple carbs like cakes and cupcakes and pasta and crackers and rice.

grains, which is confusing and hard for some people, and conventional dairy. And the reason we include this in our Just Say No group is because these foods all create inflammation to some extent or another.

Conventional dairy is by far composed of A1 dairy. So there's a whole story here. About 8,000 years ago in Europe, there was a mutation. Up until that point, all mammal dairy, including human breast milk, it was A2.

8000 ago, a new mutation occurred for what reason we don't know. And now all dairy that's used in the Western world is this combination of A1 and IE2, primarily A-1 dairy.

And this research has found can be inflammatory. It's been linked to heart disease. Its been link to diabetes, GI issues, neurological deficits. Not to mention that 65 to 70% of the world's population is lactose intolerant.

So it's the conventional dairy that we're asking you to abstain from. If you're lactose intolerant, you may have to have abstained totally. Many people don't know that they are because lactose intolerance can present as GI issues, a headache, joint pains, skin rash, and you may not associate it with the dairy.

So you can splurge in dairy and see if you have symptoms. I recently did that and I had some really severe GI symptoms because I thought, oh, it's okay, I can splash.

That's one way to find out if your lactos intolerant. But yeah, so right. And so, I mean, there's many reasons we ask people to refrain from conventional dairy.

But on the top of our food pyramid, we do include A2 dairy, and so this is dairy that is from goats, from sheeps, And we recommend it in small amounts.

So like on a salad, sprinkle goat cheese or sheep cheese. Manchego is delicious. You can do goat or sheep yogurt or kefir. The butters from goat and sheep are amazing.

So you can definitely enjoy dairy, but we prefer that it's A2 dairy and in smaller amounts. super helpful. I think dairy can be one of those things that can help you kind of get over that hump because it's satisfying, it has high protein, high fat, and it is very practical.

It's an easy, quick snack when you're on the go. And so I thing using it that way, but not as, you know, this is not a bacon and cheese diet. Like, I want that to be a real takeaway today, right?

This is a lot, like you mentioned, three quarters of your plate should be veggies. One of the things people don't realize about milk, Lactose is half glucose, half the lactose.

And so it's half sugar and especially skim milk you take all the fat out you're basically drinking sugar water and so itself can raise your blood sugar.

So you want to be careful around milk. Cheese, you're taking out a lot of the sugars as that becomes processed. Now it's not a highly processed food, but cheese is kind of like the original processed It's more the fat, more of the

protein.

It doesn't raise your blood sugar. So the yogurts also kind of go in that direction. Sometimes some cottage cheese, now always organic with animal protein, eggs.

I haven't, so you have a lactose issue, I have an egg issue. And so I, you know, and people will ask, what if I'm lactose intolerant? Can I get into ketosis?

Yes. What if i'm allergic to AIDS? can I Get into Ketosis. Yes, And what I want to do, I think that our goal is to make sure that you have plenty of variety so that this is practical, doable, You're able to achieve ketoses.

We've got a great question from Carol Prentice, she's a health coach and she also has Alzheimer's in her family. She's been studying dementia and following Dr.

Bredesen for a while, and uses a lot of what we offer to her coaching clients. she wants to understand how to better support people who don't have a ton of financial resources to follow the protocols.

So that's a great point. And we actually, Kate and I, my collaborator, she was a big proponent of making sure that we had resources in the book that were no or low cost.

I'm going to take this opportunity to share. We had a woman named Barbara in one of our health coaching programs. And she came up with her daily dozen.

And I think it's on page 317 in the back of the book if you've got one at home it Barbara's daily doesn't in meal plans for a month for weeks at a time.

So lots of ideas about how to get started here. But Barbara's Daily Dozen included reaching out to a loved one outside of our immediate family unit. These are all no or very low cost things that you can suggest your coaching clients or that any of you here can get started today doing.

Pray or meditate at least once daily. Get outside was number three. Number four, brush teeth twice a day, floss teeth once a Day. number five, declutter.

Cook a meal at home and sit down to eat it. And number seven, get some exercise. Number eight, garden, get my hands in the dirt. Number nine, open doors and windows for an hour each day to let in fresh air.

10, do one act of kindness. 11, read for at least 20 minutes. 12, Get to bed by 9pm. Sorry, go ahead. Oh, those are beautiful. And, you know, Carol, I'm not sure if you were asking about diet specifically, but there are ways you can follow Keto Flex 12.

Budget-Friendly Resources and Practical Support

3 in a budgetary, keeping budget in mind. One thing I like to do, we like say get everything organic, but every spring the environmental working group comes out with their dirty dozen and their clean 15. That doesn't mean all the fruits and vegetables on there are low glycemic, so use your common sense.

But you don't need to buy organic if these are falling on the clean-15. On the other hand, if they are particularly dirty, high in pesticides and herbicides, that's where you want to put your money.

Another thing I like is a website called eatwild.com. And that helps you find farmers near you that are raising their poultry to be 100% pastured, that have 100 percent grass-fed beef, bison, and so on.

It's wonderful you can get eggs from them. A lot of these farmers deliver directly to your house. And it's wonderful to ask them questions, visit the farm, see what the animals are eating.

We like animal protein, but we think clean animal is so important. And we want people to eat animals that are eating a diet as close to what nature intended as possible.

In this day and age, that's very hard to find. But if you go to the farmer directly, cut out the middleman, it's much less expensive. One other thing, Sam's Club in Costco, you can get amazing 100% grass-fed beef, You can a lamb there, a low mercury wild-caught seafood there.

You buy the flash-frozen Alaskan sockeye salmon, cod, and so on. I mean, if you buy them in bulk, the price is terrific. So you CAN follow the diet on a budget.

Say the name of that website again for the local farmers. Oh, sure. It's Eat Wild, E-A-T-W-I-L-D dot com. And it's amazing. Awesome. Tyler put it in the chat.

Thank you so much for that. So from Susan, my mom is 88 years old and has been diagnosed with Alzheimer's last November. She's been implementing the Bredesen protocol since February.

Well done. And she's doing pretty well. Yay. But lately has not been sticking with the diet as closely as she should. Her practitioner says she needs to be in ketosis forever.

What kind of cycling on and off would you recommend for someone like her? You know, I think initially you and I have spoken about this. She may need to be in chronic ketosis for a month or so, but I thinks once her body learns how to do it, it's wonderful to kind of cycle in and out on a daily basis.

Dr. Bredesen's goal, and it depends upon your state of cognition, is for folks only to reach ketoses once a day. You're not meant to chronically be on ketose.

So the goal could be to reach a beta hydroxybutyrate, that's when you check your finger sticks, between 1 and 1.5, or if you're using Biosense to get an ACEs reading between 10 and 15, once a day.

So for most people that is right before you break your long fast And then you can still eat within the diet parameters, but don't worry so much about restricting carbs and all that.

As long as you're eating whole food, lots of non-starchy vegetables, clean proteins, Lots of healthy fat. You're going to be able to get into ketosis the next day.

So I think it's a natural thing where we're cycling in and out every day, What I tend to tell them, which is from my perspective and clinically, what I tell patients is if you're struggling with cognitive decline, at first, if can get into ketosis for three to six months, I think that's ideal.

There's a lot of brain healing benefits for sustaining ketoses for a while. Now it's, I don't think that's sustainable forever. And so, allowing yourself that grace and kind of planning around going in and out.

We might add seasonal fruits or we might start your veggies and do that intentionally. We'll back off some of the animal protein, add more of that veggies, and then now we're getting more nutrient variety.

And for our palate, if we get bored, we more variety in our diet. Generally, We have the ability to celebrate something maybe and switch it up a little bit.

And so that's another potential way to do it. Now, what I've noticed is that if you add sugar, if You add seasonal fruit, If you get some of those starchy or veggies, it can take, again, you're not fully keto adapted, It can Take a good two to three days to get back into ketosis.

So you wanna be intentional about getting back there if you start adding some of the higher sugar foods, even if they're just fruits and veggies. I see a lot of questions about milks.

So oat milk, almond milk. Milk milk we talked about that a little bit, but also raw milk goat milk what are your thoughts about the different types of milks that are out there?

So definitely if you're gonna do a real milk, we want you to do the full fat. Ideally we prefer that you get it from sheeps or goats. Even if have the A2 dairy from cows, We worry about cows because of their size.

So cows are feeding little baby calves that grow up to be as big as the mother or the father. and they're passing along a whopping amount of hormones.

So even if it's A2 dairy, you're still getting all those hormones that have a carcinogenic potential. If you are doing conventional dairy you also getting antibiotics and steroids and all kinds of horrible things.

We definitely want to avoid that. we like a lot of the non-dairy milks. Almond milk is fine. not oat milk, it's a little too high in carbs, not rice milk.

Macadamia milk cashew milk there's lots of different milks. If you do all right with soy, you could do soy milk There's great website called cornucopia.com Oh, I wish I knew maybe plant milks calm, but it helps you find the cleanest version of these because some of the commercially prepared.

Ketosis, CGMs, and Omega Fat Balance

If you're not making it from scratch and a lot of people don't have time for that can have some really nasty additives in them. So we have to be careful about that.

Yeah, the carrageenan. And so read those labels. Look for the guar gum and the Carrageenans. As much as possible, there are brands, typically in the health food stores, they tend to be a bit more expensive, but they are just a few ingredients.

Oh, Cornucopia Institute, thank you for somebody. I really appreciate that. So I couldn't agree more. Sometimes it's deceiving, right? People don't notice the unsweetened because you want to get the un-sweeten version.

The regular or the vanilla has added sugar almost 100% of the time. So be sure, and sometimes I'll even make the mistake. I get up to the counter to pay and I realize that I grabbed the regular version and not the unsweetened.

And I've got to go back and switch it out because those will raise your blood sugar. It's really, really important to check that you're getting the un-sweeten version.

And then I think we'll take one more question. Here we are at 5.30 Pacific time and it's been so phenomenal having everyone here. But Julie, especially you, it just such a privilege and a delight to get to go deep on diet with you and clear up some of these misconceptions and really make this doable for people.

Make sure they know where the resources are, make sure that they that there's food delivery available and these nuances. And I really encourage everyone to not, don't overthink it, right?

Just get started. The, one of the best things I ever did was that continuous glucose monitor. Those are available through Costco with the prescription, although the Dexcom is rebranding and they're going to have an over-the-counter version available.

I'm so excited because those, the two weeks that I first wore a continuous Glucose monitor, I think I learned more in those two about my health than I did in four years of medical school.

I mean, it is just so enlightening for your own individual metabolic health to know when your blood sugar is going up, whether it has to do with stress or exercise or sleep or diet.

And so I highly encourage people use the tools and use that because I think a lot of these questions are like, what

about this food? What about that food.

really, ultimately, it comes down to how your individual metabolism interacts with that particular food choice that you make. And so the ultimate answer to many of these questions is what happens to your CGM?

What happens your blood sugar when you consume that? So let's take one more question from Gunilla. Is ketosis, or is it… as a ketosis or that this diet is allowing us to cut out the stored omega-6s, which are blocking important omega 3s.

Okay, I'm not fully understanding that, but I think it's a question around, you know, what's the benefit? Is it maybe anti-inflammatory because we start using up those omega 6s?

Maybe that's part of it, But what, What's going on there with these omega sixes versus omega threes and this So we're definitely trying to achieve a healthy balance.

I think the standard American diet, you've probably heard some statistics. People have a much higher ratio of omega-6s than they do omega 3s. What are some of the stats that you have heard?

Yeah, so I understand that in our ancestors, they were having about a one-to-one ratio of consuming omega-6s to omega 3. So omega 6s are not all that, right?

We need some of them. These are important parts of our fats, but our standard American diet has gone up to 200 to 1 ratio. That's crazy numbers, Crazy, crazy.

I mean, fiber is another one of these, right? Where we used to consume hundreds of grams of fiber a day, and now people will consume very little fiber.

And so our gut, just our bodies are not designed for that. and I think this ketogenic diet goes back into this direction of a more balanced ratio of omega-3s to omega 6s.

We see that, that it's anti-inflammatory. It's also detoxifying. we start up regulating the metabolism of fats, whether they're stored as omega sixes or whatever version.

and we get rid of the toxins, the fat soluble toxins that were in our system. So we start changing our body composition and get the benefits of anti-inflammation, of better resource utilization, detox, so many things.

Dr. Gundry talks about the mitochondrial function that upregulates so we have more resource production, more ATP production. There's so many things to talk about, so much exciting stuff to share.

A lot of it is in the book, Reversing Alzheimer's, and I would be so grateful to all of you who post a review, who pass it on, you know, gift this to other people, take notes in The Margin and then send it onto a neighbor.

What we are trying to do here with Julie I feel so fortunate to be in this with you, changing hopefully changing the narrative around Alzheimer's and what's possible for families who are suffering whether they're afraid of developing it in the future they are traumatized because they've lost a loved one.

or they are currently struggling to care for someone with dementia, wherever you are, if you have been affected by this awful disease, we are here doing this to change the story about what is possible.

It doesn't have to be this way. Our goal is to make Alzheimer's rare and optional. And so thank you for joining us in this pursuit. We are so, so delighted to have you here.

Julia, any final words before we say goodbye? I just want to say it's an honor to be here. I followed your career and I'm in awe of all that you've accomplished.

You are showing the world what is possible. that we need for assisted living. We want people to come in and go out. And my story is an example that it's possible.

There's hundreds of stories like mine. Yeah, it takes a little bit of work, but it so worth it. So congratulations to you on the book and for all of your work.

Thank you. Happy Alzheimer's and Brain Awareness Month. But thank you so much for being here. Good night. Bye. Take care.