Introduction and Dr. Fuhrmanu2019s Background

Hi, everyone. Welcome to the Reversing Type 2 Diabetes Summit. I'm your host, Dr. Beverly Yates, ND It's my distinct honor for this session that we're recording to interview Dr.

Joel Fuhrman, a medical doctor who has very much been a leader around nutrition and, you know, approaching things from the point of view that people can take charge of their health and that nutrition is the way to enact a lot of healing and recovery.

So Dr. Joel Fuhrman, MD, is a board certified family doc seven times in New York Times bestselling author and internationally recognized expert on nutrition and natural healing.

He has been on many television shows and has promoted through the common access of TV as well as in print and other forms of media. The point of view that nutrient density matters.

It's really important. He specializes in preventing and reversing disease through nutritional methods. He's the president of the Nutritional Research Foundation and on the faculty of Northern Arizona University Health Sciences Division.

He coined the term nutrition to describe a nutrient dense eating style. And for over 30 years, he's shown that it is possible to achieve sustainable weight loss and reverse heart disease, diabetes and many other chronic illnesses using targeted, specific, smart nutrition.

In his medical practice through books and TV specials, he also now has the Eat to Live retreat in San Diego, California, at a residential facility to help people from all walks of life from all over the world to continue on their healing journey.

So, Dr. Fuhrman, welcome to the summit. Thank you. Excited for our talk today. Yeah, same here, same here. I'm looking forward to this. You know, one of the things that always strikes me when I think of you and your work and its impact is the ability to really get people to understand the power of food and that what we are eating, what we are drinking, and how we engage with nutrition and nourishment makes a fundamental difference in our health.

I am curious what started you on this journey? Probably my father's illnesses. And then he started reading books from Herbert Shelton in the 1950s and sixties from the American Natural Hygiene, and my father lost weight and got healthier.

I think he dropped his weight from about 210 to 160. And then I started reading a lot of the books when I was a teenager and nutrition and got interested in that.

It took me years to really have an interest, of course, but seeing him transform his health was a was a major factor. And then I had that exposure to seeing many people, you know, as a teenager, which excited my interest in becoming a physician, specializing in nutrition.

Great, great, wonderful background. Glad your father was helped. And you could see with your own eyes, you know, that living proof right in front of you, right?

That's important. Sometimes people in the circle of folks they are closest to don't see examples of health and life and progress. And that can be so discouraging.

So when you see that this is helpful for someone you love, that makes that, I think, a lot more compelling, for sure. Yeah. Cool. All right. So, Dr. Fuhrman, why is it that we are seeing an explosion in diabetes, particularly type 2

diabetes and pre-diabetes in our population today?

Why is this so devastating? We even seeing type 2 show up in children, which should never happen. Well, it's never happened to anybody and we shouldn't have any heart attacks or stroke.

See there. And in this country, it's all the result of nutritional ignorance. You know, it's a shame that we have so many people suffering and dying needlessly.

And as many people know, diabetes is the leading cause of blindness, limb amputation, kidney failure and all types of morbidities that make people suffer before they just die prematurely.

Why Diabetes Is Rising

So it's and the diabetic, it's representative of a you could say, of the effect that a poor diet has able to deteriorate advanced disease in the body.

So we're we're having three or four factors going on simultaneously. One is the advent of the processed food and fast food industry. The wide access to to high calorie density food and the promotion from industry on restaurant food and processed foods and animal products.

But particularly this concept that oil is healthy for us has exploded the diabetes epidemic because oil puts fat on the body. So rapidly. But we have so much access to concentrated calories.

I make the joke and I say that half of what we eat feeds our needs and the other half feeds the needs of our doctor. And even though it's kind of funny, it's really it's really seriously and scientifically true because Americans consume about double the calories that humans need for optimal health.

They're consuming double. And the reason that they need to consume all those excess calories that create disease is because their diet isn't meeting their needs for micronutrients, phytochemicals and fiber.

So their diet is so low in nutrients that it produces metabolic waste products that then and other addictive type sensations in the brain that drives overeating behavior and then fat on the body, excess body fat makes you insulin resistance and also harms the structure and function of the insulin receptor and saturated fat in particular saturated fat from coconut palm oil, but mostly from animal products also has an enhanced effect that interfering with the activity in some receptor.

So the compensation to the combination of the high intake over overeating calories, the high intake of high glycemic carbohydrates like white bread, white flour, sugar, honey, maple syrup and sweets.

But of course I'm saying that white flour is a sugar equivalent, that it's cake, it's candy, it's sugar, it's addictive, it's not food, and it damages the body.

And then then you put on top of that animal fats and oils, and then you have all the which is cauldron of ingredients that fuels a diabetic epidemic. But added to that by these exogenous wastes, the word excite the word endogenous means waste produced by the body and the word exogenous means from the external world.

Like I can breathe and smoke from a forest fire from a cigaret. That's an exogenous waste. I can put pesticides on the food, but we're poisoning ourselves with extra exogenous waste by eating processed foods and things with nanoparticles and plastics and microplastics and other toxins in seafood and toxins.

And in from that, a runoff from from agriculture that contaminates the the waters and we're eating and you know, besides pollution and pesticides and insecticides and fungicides and plastics.

So the average woman for a given example here, the average woman today in 20, let's say, and in 2020, compared to the her weight with the same amount of calories and the same amount of exercise compared to a woman for 50

years ago is 40 pounds heavier today from the same caloric intake a certain many 50 years ago, because we have more of these endocrine disruptors and more of the body holds on to fat and it makes it harder for the body to get healthy when the body is so long and it wasn't enhanced.

Xeno Toxic exposure, you know, toxins from outside the body so that the repair and how to repair the body is to eat a diet of mostly vegetables. You know, diet.

It's vegetable based high in nutrients and and remove or radically reduce both processed foods, hypoglycemic carbohydrates and animal products. And I'm saying and the animal products I'm talking about orange is the high saturated fat and cholesterol, ones like eggs and cheese and butter and meat.

I'm also talking about seafood, particularly bivalves like clams, oysters, mussels, shellfish and scallops, because the runoff and the dumping of plastics and dumping of garbage into the ocean, as Maine has led to explosion of microplastic invasion into seafood, which affects the body and also the rejection of BMA, which is a fat one, which is a toxin produced by cyanobacteria in the on the algae or an algae bloom from from fish farming and and commercial farming runoff.

So when we see, of course, higher incidence of Parkinson's dementia syndrome and Lou Gehrig's disease or ALS around lakes and around the Chesapeake Bay in areas where people are eating more of those foods from the coastal waterways or lakes.

So we have a real problem with the food across food access and food exposure in this country. Now, while that's going on, we have this unprecedented opportunity in human history to diet that's mostly organic, with a lot of home grown foods and sprouts and lettuces.

We have exposure to eating frozen berries all year round we can get with. It's the only population in the history of the world that we can actually get fresh lettuces and fresh green vegetables and eat a salad every day, even in the wintertime.

You know. So the the point is, is that even simple lettuce is a superfood because lettuce is the richest source of soil for one of those, you know, the nutrients that fuel the growth of good bacteria in the gut.

And you would add on to that our ability to expose ourselves to raw, cruciferous greens like kale and bok choy and arugula and watercress and brussel sprouts and, you know, things in a crucifix family.

That combination has the maximum effect to build a healthy immune system that surrounds the villa in the digestive tracts. We call those the Intraepithelial lymphocyte, and we also socially support the growth of these intraepithelial lymphocytes that build our immune system while at the same time with thickening the coating of healthy bacteria called the biofilm that covers the bely in the small intestines, which then slow this heavy and healthy biofilm of bacteria, prevents the absorption of glucose excursion from coming into the bloodstream too fast.

So it lowers the glycemic load of everything you eat. And scientists call that the second meal effect. And the second meal effect is enhanced by that, by those foods I mentioned in green vegetables, but also by scallion and onion and also by cooked beans and cooked mushrooms.

So these four foods, two raw greens and an onion, a scallion raw and two cooked mushrooms and beans cooked, give us a very healthy and robust microbiome with a thick biofilm that lowers the glycemic load.

So I have an oatmeal and mango in the morning. The glycemic influx into the bloodstream is going to be lowered because I'm eating those foods and have such a healthy microbiome.

So we're talking here about the effect of body fat, the effect of toxic exposure, how we can desire fewer calories when we eat a lot of nutrients, including the right kind of raw and cooked foods and, you know, and all the other things that make for a healthy lifestyle like adequate sleep and adequate exercise.

But basically, we can't have a normal body if a woman's body fat's above 25% of fat or a male's body is below 15% of calories from fat. In other words, as you go for a male from 15% to 20%, we see insulin resistance and inflammation goes up.

And from a woman going from 25% to 35% inflammation and insulin resistance goes up in the fat cells because they don't get a great blood supply. They also spew out pro-inflammatory compounds, suppress immune function, and we have more exposure of cytokines and lipoproteins that makes COVID more dangerous and starts the the dangerous effects of diabetes.

And then I'm saying something a little bit that people don't generally hear here. I'm saying that you can have diabetes, which is a dangerous end stage pathology, which is reversible, and you could have pre-diabetes, which is when you sugars start to go up, but not yet in the diabetes range.

But I'm saying something different. I'm saying all people that are overweight or pre-diabetic because all people that are overweight have insulin resistance.

And even before your sugars, sugars start to rise into the pre-diabetic range, you're already seeing more accelerating of aging and you're allowing chronic diseases to develop acceleration of atherosclerosis.

Nutrient Density, Toxins, and the Power of Vegetables

Just because you're overweight, you are already pre-diabetic because you have higher levels of insulin, and insulin itself is a hormone. The higher levels that are requested from the pancreas, from the active to accommodate the extra body weight, those are that extra circulating insulin promotes angiogenesis, allows cancer cells to replicate, promotes weight, weight gain, and also starts to make a person to become more food addicted.

Now, one more thing to insert into this package here is this idea of caloric concentration and caloric rush. Because what I'm saying here is that when you're eating white bread, white rice, French fries, sugar bread, fruit sans bagels, cookies you can't get the sugar enters the bloodstream so rapidly leading to a spike of calories that could not have been achieved had you had berries or an apple, because the sugar or the sweetener in the apple or the berries is more intracellular and takes a while to get and to go through the gut wall.

So you get a you can't spike the sugar that high by eating, let's say, a piece of fruit as you can by eating a piece of a bagel or a piece of bread. So and you can't get fat into the bloodstream that fast either.

When you're eating nuts and seeds, it takes three or 4 hours or beans. You can't get glucose beans that the calories to extract is so slowly. And with fats from nuts and seeds, the calories are extracted from the just tracks so slowly that you can't put too many calories in the bloodstream at one time only.

These processed foods like oils and fast food and commercial baked goods and fried foods and and can get so much of a spike of calories in the blood and the high spike of calories in the blood acts like cocaine on the brain because you couldn't get that cocaine to the brain.

You could. But now we can spike the calories in the blood by palm oil in the food, and the oil goes in the lips to the hips in like 3 minutes flat. It sucks right into the bloodstream rapidly.

And the high excursion of calories in the blood makes us, over time, addicted or desirous of a high caloric load. And it makes our brain become dopamine insensitive.

And then we become more desirous of more dopamine stimulation, which is only then supported to get stimulated sufficiently by the overconsumption of calories and the overconsumption of concentrated calories in the blood.

So people then aren't satisfied with having a salad and a bowl of vegetable bean soup and two pieces of fruit. That's not a lunch for them. There's enough.

Doesn't have enough of caloric concentration and doesn't have enough calories at one time in the bloodstream. And those things take too long to digest.

So they can't handle that. They have to go after something more calorically concentrated. They're not going to be satisfied unless they have a candy bar, unless they have some bread, some pasta, some salad, some some oil, some greasy food.

They got to have that high concentrated calories. They have to overeat calories. And then because they get so accustomed to overeating, their body has more toxic waste products and they try not to eat now and digestion is ceasing or they try to diet, they feel wasted, fatigued, shaky, irritable, stomach cramping, headache.

They don't feel comfortable when they're not eating food all the time and they're not feeling comfortable unless they're overeating food. What I'm saying right now is that the body goes through a detox withdrawal like you didn't smoke cigarets or you're off your alcohol binge and you feel worse coming off the cigarets are coming off the ten cups of coffee.

When you're trying to get off of a substance, your body tries to detoxify, detoxify from that substance, and we moved waste products and a body removes waste and detoxifies it heels best in the non digestive state when we're not eating and digesting.

And because you feel worse when you're detoxifying or healing people who are not healthy, when they try not to eat between meals or try to eat a little the right amount of calories eat less, they're going to feel too uncomfortable and too poorly because they're going to excite detoxification.

So they have to keep eating all the time and eating too frequently. They can't say, Oh, I'm going to eat well, I won't eat, I'll skip, I'll skip dinner tonight, I'll just go to bed after a while.

I'll just each stop eating for the day at 2:00. They can't do that because they're too uncomfortable and feel too sickly. By the time it gets to be six or 7:00, they got to eat and maybe they feel ill at 12:00 at night and have to snack because they start to feel too ill from their body.

Going into that detox phase of the digestive cycle when they're not constantly putting calories in their stomach. So all these things interrelate and, you know, we're interrelated in like the fibers of a cloth and why it's almost impossible for people to to lose weight or get their health back and get rid of diabetes.

We put people in a healthy food environment and they fully understand all the factors leading to their leading to the disease causation and their inability to lose weight.

And we start to clean out the diet they find and find, well, wow, my taste buds are enhanced. I'm enjoying eating more. And then I'm saying this now because a lot of people listening and think that, oh, who wants to give up all healthy, all delicious food and who wants to eat live on carrot sticks and celery?

I'd rather be dead and have diabetes. But it's not like that. The people learn great tasting recipes. They eat the appropriate amount of calories, and they're the piece.

They're satisfied with the appropriate amount of calories and their taste muscle improves and they start to enjoy natural foods and they get, well, the fat.

And so I say a new territory in that term I've coined is a person eating a super healthful diet to maximize human longevity at their ideal weight. Or they're a person that's overweight, eating healthfully and moving in a direction of their ideal weight.

But if they're overweight and they're not moving in that direction, then they're not doing it right and not on a healthy diet. And the parameters, these parameters we're talking about that measure for health, the eight inflammatory markers like HSC, RPE, your oxidized LDL, your higher estrogen levels, your higher insulin levels, your higher

triglycerides, the all the the the higher rate of, you know, more you could say shorten telomeres, more methylation defects in the DNA.

We can list all these factors that mark a person's poor health and shorten life span. Now these factors immediately improve when a person starts to lose weight and eat healthily.

You don't have to wait a year to have low risk of heart attacks. You lower risk of having a heart attack or a stroke within two weeks of moving to a healthy diet.

Even while the person is overweight. We see these numbers and the risk factors start to go down precipitously. So a person, let's say, comes into my retreat and they stay for two months and they lose £50 and reduce their risk.

Huge amount of diabetes is gone and they go on a cruise ship or a vacation or a binge die and they gain back £10, right. The the gaining back of £10.

They're still £40 down to where they started. Well, the thing at higher risk now than they were when they were £30 heavier. They're at high risk now.

They gain back £10 because the direction of travel, of the weight means your body is undoing all the beneficial parameters you get by eating right and losing weight and you're putting on fat at a rapid rate as the speed of direction of travel, of the fat that determines the risk if you dressed.

So most people are aware of some people are aware that most heart attacks and strokes occur around Christmas time. New Year's, when people come back from vacations and cruise ships and going to Vegas and pick it out, picking on buffets when they could gain weight over even a short period of time.

The risk of having a cardiac event increases tremendously. So we have so and so. In other words, we have to have a person who's interested in great health and losing weight, see this as a change for the rest of their life.

And they have to learn these habits they can incorporate and stay with forever because it's only there's only a benefit if you maintain it, If you're not going to maintain it, it did not benefit you to temporarily lose weight, gain it back again.

And it could even make things worse because the rapid regain of weight makes the fat stores more saturated and can put on more vulnerable, fat, more vulnerable plaque in your heart.

So this is a lot of information and it just kept sweating people's appetite. But to let them know that they can definitely reverse their heart disease and get their blood pressure back to normal and become non-diabetic with the right approach.

If they do, if they're willing to make this radical change we're talking about. That's all great information. Thank you for walking us through it and peeling back the layers.

I want to circle back for a moment to a topic you brought up here that I think is not commonly understood. If we could just revisit it for a moment. This issue of palatability, the fact that some of the are in fact, many of the maybe all of the highly processed, ultra refined foods are often designed by armies of food scientists to make them incredibly tasty in a way that really traps people, that they wind up in these cycles of just a wild amount of overeating and they're not in control of the eating.

I know when I was a kid, if people had chips, they had a handful, you know, five or six chips. They did not eat two bags of chips in one sitting, etc..

And you see now this situation where people are just stuffing in so much food, you know, that a lot of things about that have changed. So this palatability.

So if I'm hearing what you're saying, I want to make sure the audience is getting this because we have health professionals who come to these summits as well as the general public.

This issue of palatability, a food that is super tasty, is part of the problem. So when someone goes to a healthier diet, a simpler diet, a diet that is more nutrient dense and not artificially manipulated to be wildly tasty, part of the journey is they have to let their tongue, their brain, their relationship to dopamine.

You know, all of those things reset. And that might mean they're going to be uncomfortable for a while and feel not so good. It's obviously worth getting inside of the journey.

But what is your experience been around getting people through that moment? Because I personally think that's a very important moment. That's what you're saying, of course, is absolutely true.

There's two issues here. One is the fact that a person feels poorly, feels worse, not better. The first week of the chain, they improve diet, they're going to feel worse.

But that doesn't give them back the taste. Muscle to make healthy food tastes great. That takes months, not a week. Your headache and your fatigue and your shakiness will go away in a week.

That part's gone now. And you're feeling okay. But you still don't enjoy eating this way as much as your old diet That takes a few months. And we even see taste improvements up to six months after the diet change.

So and then avoiding salt in highly sweetened substances or critically even how even hot spicy foods, all those things too hot, too salty. And you know, of course, too much sugary deadens the taste for sugar, but people don't recognize it's that salt thing that's so damaging.

And, you know, salt is an independent risk factor for heart disease, irrespective of its effect on blood pressure.

Palatability, Food Addiction, and Taste Reset

Salt also causes microvascular hemorrhages and hemorrhages in the endothelial lining of blood vessels, leading to a weakening of the interior lining of blood vessels over a lifetime, exposure to high salt intake, increasing the propensity of the vessels in the brain to break open and crack and cause a hemorrhagic stroke.

I'm saying salt is independently associated with both stroke and heart attack. Erosive activity, its effect on raising blood pressure. And I'm also saying that that salt intake can damage the in trip, the the tight junctions in the gut, leading to more leaky gut and leading to and enhancing chronic inflammation and promote autoimmune disease and sensitivity to xeno toxins which is, you know, toxic in other words, sensitivity to toxins in our external environment.

So and salt eating perpetuates a weakening of the taste buds. So it's better to get all this stuff out of the diet, the salt, the sweeteners and let food taste blend, you know, and then and the sweet and things with natural you know, we use tremendous ways to flavor things.

Of course we using, you know, you know, tarragon and caraway seeds and toasted sesame seeds and all kinds of different, you know, dill and oregano. And we're using all different flavorings, you know, tomato sauce and sun dried tomatoes and all types of fig vinegar mixed with sun dried tomatoes and lightly toasted almonds in a dressing.

We're making an ice cream with, you know, a few macadamia nuts and frozen bananas with real vanilla bean powder and making a Thai curry sauce with, you know, a curcumin, a human.

But of course, with a real, real lemongrass and a little coconut and and the hemp seeds mixed in with some little date. And and so we have all these delicious flavors and sauces to make things taste great that aren't relying on salt or getting things too hot or too sweet.

And these more moderate flavors that people can enjoy leads to them develop things a heightened enjoyment for food. Because now the simplest foods have more flavor and you and people lose their addiction to the to the high bliss.

Point foods that they've been indoctrinated to by the food industry. You know, to get them to eat more food. You can take an animal in a cage and get them to stop eating their natural diet to just eat processed foods.

Of course, the animals will go get sick and die, but but they won't even eat the foods they're adapted to in nature. They'll stop eating because they'll go for the foods that have a higher caloric density and then a higher concentration of flavorings.

They call it, you know, highly palatable, you know, ultra, ultra processed foods. And people in the animal just eat that until they eat themselves to death.

And so what we're doing, we're animals and we just go for the more caloric a child will stop eating any vegetables and pineapple and they won't eat any string beans and snow pods and they love to eat tomatoes and carrot sticks and snow pods and pineapple and nuts and snack on all kinds of healthy stuff when they have no exposure.

But once you expose their kid to goldfish, you know, to add to pretzels into April's, into pizza, into sweets and cookies and chocolate chips and cookies and donuts, then they're not going to want to eat.

Of course, they're not going to even have any they're not a touch healthy food anymore. So it's the parents that train that child not to eat healthily because they expose them.

And so now we've got to undo it. Yeah, and that means enforced abstinence. And just to clarify this, that when you're a food addict and you've developed this this addictive relationship with food for the last, you know, 30, 40, 50 years of your life, but you wouldn't become diabetic then dabbling in trying to cut back and trying to baby step your way to healthy eating doesn't work because even a small exposure to chips and bagels and cookies and fruit science and these things and just a small exposure makes the person want to want more of it and it makes them feel a never develop the taste muscle to enjoy eating healthily.

So they're always stuck with a foot in both worlds under stress, deciding what to do with mostly the primitive brain which which is run by their addictive brain, addictive centers of the brain wins.

That's who's going to win. But once you abstain within four steps and staying away from those that illicit that illicit love affair that you have with dangerous food, stay away from them.

And eventually that attracts and for them lessens over time. And then you can enjoy eating healthily. Oh, so that was a great journey. You know, it's just real, right?

We are driven from things we don't always understand that we have any kind of control over. And unless we understand this, we can't help and feel like, why do people seem to seesaw between these things?

This is why anybody who is here, who is listening to this, who's vibing with it, who understands without informing, is talking about please share this with people, because we all know folks who struggle with I want to eat healthy, but I know this stuff tastes good and this is a struggle you cannot win unless you make that commitment to the healthy side and just stay there.

Let your body heal, and then eventually you'll develop that flavor muscle, that case, versatility. You can get there. It's totally doable, but you can't bounce back and forth between the highly processed foods and super amazing healthy foods.

You really do have to make that commitment. And if you're on a tight budget, you can still do it. It doesn't have to be super expensive. It's true. You know, dried beans are not a lot of money.

And, you know, I used I used to, you know, before I went to medical school when I was a student, we used to buy a lot of food at the at in the Bronx, at Hunts Point Market in bulk.

And like big and we split it up between like five families and we'd like, buy our food wholesale and split it up, you know what I mean? Yeah, we did that in college too.

We'd go to the health food co-ops. You know, I was M. I. T. across the Back Bay there in Boston, and there were all these health food co-ops, and it was just so much cheaper than the school food plans.

The food was terrible in school phobia. The school food plan was just if. And sometimes we go to some Asian markets, but we actually went to the place where the restaurants and supermarkets bought their food from in the docks.

When we had the big trucks and we'd buy it in bulk, you know all this. But anyway. Yes, it was a simpler time. But yeah, you could buy in bulk that way and make your college dollar stretch a lot further so you could actually get to school.

Of course, college cost less too, but that's a different conversation. All right, cool. You have expressed many things over the course of your work and publishing's and other things that you've done.

So I'd love to get your take on this. You say that the conventional treatments for diabetes don't work and actually worsen the disease, which is an important distinction to make.

Right. So how can this be? And if prescription drugs aren't the answer, what is? That's right. I think that many of the drugs doctors use are dangerous for diabetics because they lower the glucose, but they make the beta cells in the pancreas produce more.

Insulin is the mechanism which they're trying to lower the glucose and the beta cells already overworked, producing too much insulin. So forcing them to make and they're pooping out and that's why they can't make all that insulin.

So your glucose level starts to rise. So giving you drugs to make them work harder just makes them poop out faster so you lose. So over a years of taking the drugs, you've lost the ability to produce insulin by the pancreas.

Make making a type one become a type one and a half over time of taking medications. The medications are accelerating the progression of diabetes, and they also cause weight gain. We're talking about insulin.

So it really is. And many of the newer drugs, too, you know, metformin doesn't cause weight gain. And, you know, some of the newer drugs don't. But besides, even the ones that don't necessarily have a lot of weight can still push the beta cells to work harder.

Why Conventional Diabetes Treatment Falls Short

Metformin doesn't, though, but in any case, the point is, is that most of the drugs can make things worse. And the Harvard study demonstrated that people with more medical care measuring their finger sticks more frequently, adjusting the medications to keep their blood sugar in better lower numbers and better control, had a higher morbidity and a higher mortality, and the government had to come in and stop the study.

We had better life span of people who weren't using medications as much because the medications are dangerous. Medical care is not the answer to diabetes.

It makes things eventually worse. It doesn't. It's an okay, it's a permission slip. It's it's an enabler. They enable people by giving even blood drugs for blood pressure.

It's giving you the message. Just keep living the living, the lifestyle. Of course, the high blood pressure. If you've ever had any drugs for it, then people would have to cut out the salt and eat, lose weight and exercise more and

sleep more and and do the right and live healthily.

So lifestyle is where it's at. And the disease markers are a measurement of how bad your lifestyle is. So if you're pre-diabetic or diabetic, it means you're not living within the framework of your body's needs.

And if you're still going to live out of that framework, your disease, you degeneration and chronic disease is going to keep getting worse to cause morbidity and pain and suffering and drugs isn't going to change that trajectory towards pain, suffering, and whether it's kidney failure or leg amputation or blindness or death, it's going to track along with the still in that direction while you're controlling your blood glucose with the drug, because you're still living on the same diet that caused the problem to begin with.

I'm not looking to cover the cover it up. It's it's the medical doctor is doing people a disservice because they have to get to the cause. And the cause is not the lack of the drug.

Exactly. The root cause issues here are just front and center. It is so super lifestyle centric, and I've always thought that that's the gift that can be had with type 2 diabetes.

Pre-diabetes is the fact that you absolutely can take charge of it and reverse things and put it into remission with a clear eye on the lifestyle side.

But by the same token, if people are using drugs and abusing them and misusing them and it's not just to buy them time while they get the lifestyle pieces in place, a lot of people get lost because, frankly, you know, let's be real.

They don't get the support they need on those lifestyle things. They there's just so much confusing and conflicting information that's available. The conventional medical system does not support the lifestyle side of this.

It's just drugs. Drugs get more drugs, so you get so sick, you're on something even more expensive and then you die a miserable, awful death. It's a terrible way to handle this. Right.

Okay. So my so I have two books on this subject that I recommend. One is called The End of Diabetes, which is obviously a book I wrote, and the other one of my New York Times bestsellers and the other book is called Eat for Life.

And I'm mentioning Eat for Life because it's such a it's written recently and is upgraded with a lot of recent studies that are, you know, irrefutable.

And the amount of evidence that's accumulated has been so profound. There's so much curable reading evidence today that a person can't deny the effectiveness or the science behind this approach compared to a conventional medical approach where people are taking medications or even something like the Mediterranean diet, which is a step in the right direction, but not going to get people totally well.

Yeah, yeah, yeah, I you know, it's so interesting culturally and not just here in the U. S., but other parts of the world, too. I noticed this trend where people very much seem to want a prescription of some kind that is a one size fits all approach that doesn't allow for bio individuality, for how people respond to foods, to sleep, to stress.

And I just think we have to stop being so rigid and silly and acknowledge meet people where they are, help them get to where they need to go, and let them understand that, you know, hey, in the beginning few weeks, a month, you might be feeling really different.

It's worth it. What's on the other side. But don't expect that something that's been a problem for years will be gone in days or weeks. I kind of think that conversation needs to be had.

Well, I'd like to add something to that. Sure. Being in the in this practice of reversing diabetes for more than 30 years, I find that most of the type 2 diabetics are completely their diabetes is completely reversed within four weeks time.

Number two, it's rare that it takes more than a month to get them off their drug. But the important caveat here is that if they don't start cutting back on medication pretty soon, in the first couple of days, they can become hypoglycemic and have a dangerous episode.

So the warning here is don't underestimate the effectiveness of nutritional excellence to reverse diabetes and cut your medications back appropriately and get some advice to do some professional help if need be.

You know, I've had people come in to the retreat on, let's say, 80 units a day of long acting insulin as a type 2 diabetic, 80 a day. And on their day of arrival, I've cut out all their insulin yet because they were using long acting insulin the next not the next day, but the following morning, the second morning after they've been here, they have a hypo glycaemic event where their sugars are 60 or or they're feel or they're one time I had to actually I actually I became, you know, mentally confused and combative and I had to call 911.

And I had stopped as insulin upon arrival. That's how fast the sugar dropped. So it's but I gave him some I got some made some date sirup and I got it under his tongue and I got him back to get back lucid and okay before the ambulance got here and I was able to cancel the ambulance call so we don't ever get in the ambulance.

I still called the ambulance thinking I would have to get I. V. access or something, you know, as sugar was too low. But I'm just making it clear right now that with both blood pressure medications and with diabetic medications, it's important to air on the side of taking to air, on the side of cutting back on medications a little more aggressively than you.

And you would think don't underestimate how effective this can be, because we don't want to see the sugars get too low. We'd rather than run a little higher if we had to rather than get too low and have somebody in a hypoglycemic coma or something because of the overuse of medication.

Same thing with blood pressure. We want a person dropping a blood pressure too low and fainting and smacking their head on the ground when they're eating a diet with oil.

You know, with such a degree of healthy food, they their blood pressure goes down, their glucose goes down, and they immediately should start diminishing and following their blood pressure and blood glucose closely to make sure they are properly reduce their medications and don't overmedicated themselves great things.

And thank you for bringing that forward. Sometimes people get confused about these things and I always, you know, encourage people to be in partnership with their doctor.

Whoever prescribed a medicine, and to take charge of their health and to understand what are the consequences.

Starting the Eat to Live Approach

And so when you make these big lifestyle shifts because your body can respond so quickly, you got to stay on top of the meds and your metrics, right? Your blood pressure, just like and. The doctors don't know it.

The problem is, is that conventional doctors don't know how effective or how quick this could work. They don't believe in. The conventional doctors screw people up.

They really do mess people up because they have. I did a study on I think it was about 450 people with blood pressure medications. And within six months, the average person dropped their systolic blood pressure 26 points.

But in looking at all the blood, going through all the medical records from all the doctors and everything, it was amazing how doctors did not take medication that way and how people was able to do blood pressure dropped so low.

That could have been a danger zone and it was so late that they matched the two responded appropriately. So for some, it's good to reinforce that. Yeah. Yeah.

It's just ironic and I'm hopeful that we can continue to get our conventional medical colleagues more educated and more aware about these things so they can be a better partner because there's just an education gap and well, there's just work to do.

I think we're getting knowledge on that. All right. So you've talked about some of the key elements of your end of diabetes plan. What can someone do to at least get started on this?

Well, I think to get the place to get started is possibly lunch is lunch is the most important meal of the day. And so if everybody ate a large salad for lunch with rats or vegetables, including cucumbers and tomatoes and red onions, scallions, lettuce, cruciferous greens and the dressing not made from oil by blending up some hemp seeds and walnuts, let's say with some, you know, with some tomato sauce or sesame seeds and cashews with an apple peeled orange and a splash of vinegar, you know.

So in other words, not de-stressing a bowl of vegetable bean soup, why not make a big bowl of vegetable bean mushroom soup on the weekend and you can add a quarter ounce like ten different containers and you have a bowl of vegetable bean mushroom soup and a salad and a piece of fruit for dessert.

And if everybody across America had that lunch, you know, then we'd see, you know, we'd save 60% of health care costs and we'd see it from saving millions of lives.

That's the first place to start. Yeah. You'd also get rid of the line of people at the coffee shop at 2 p.m. because they're having that blood sugar crash. Right?

Right. The fast food restaurants, the coffee shops, the pizza places, too. All the at lunch, you know, they do all this. People eat fast foods at lunch.

They and they make lunch a dangerous meal instead of making lunch a healthful meal. That's why I start with lunch, because the most important meal of the day.

Because you're not supposed to eat a heavy dinner anyway, supposedly too light and early dinner and lunch. You want to eat a more substantial meal, and that's the meal where you're eating all these healthy foods at lunch.

So that sustains you for the afternoon because you had the beans in the soup and you have the vegetables and you have the nuts in there and you had all these healthy foods and you can maintain yourself and you could go home and have a lighter dinner and go to, you know, and beef and be great.

I agree. I totally agree about this. You know, as a kid, I realized one of the blessings I had was we could go home from school lunch and my family lunch was our biggest meal of the day.

It's what most people would consider dinner. And I realized what a great substrate. Lucky me, right? But that isn't necessarily everybody's experience.

So I hear you about that. All right. Let's touch on this topic of weight loss. You know, there are so many drugs right now that are targeted, whether it's peptide therapies, whatever it may be for weight loss.

So why is it that people have such a hard time and fail at weight loss? And in particular, how do you remove the obstacles that get in the way so that people can actually do this, sustain it and get back to that healthy weight?

Yeah, they need you know, they need more support. And right now as they don't have the right knowledge information at their fingertips so they can't lose weight and doctors don't give them the right information.

They don't even know themselves, you know, So it's difficult for people and, you know, so yeah, you have to learn a lot. And I've also studied this and found that I can test people's knowledge and if they're not highly educated in the field of nutrition, then their chance of succeeding is nil.

They have to have a lot of knowledge base. So that's where, you know, like watching the videos and buying the books and coming to summits like this. That's why learning first is important and they got to be very well educated.

And the thing is, of course, we're talking about the idea that most diets fail because they don't pay attention to the quality, the nutritional quality of what they're eating with goal of having a high nutrient density in the cell.

If your cells are not nutrient dense, you're going to create you can't control your appetite. And so you have to get the nutrients in. So unless you're going to start to eat green vegetables and green vegetables are the key.

That's we're a vegetable dependent animal. So unless you're going to eat a lot of green vegetables, you can't control your you're addictive drive. So people's diets are going to fail in this.

They try to get enough nutrients into their body so they have to eat enough volume and enough high nutrient foods in which I talked about those foods already.

Weight Loss, G-BOMBS, and Type 1 Diabetes

But I have this acronym called G Bombs, G Bombs B O M B S, and that acronym stands for Greens, Beans, Onions, mushrooms, berries and seeds like flax seeds, chia seeds.

And these six foods are the most anti-cancer foods that work synergistically. But if we include all those foods in our diet each day, you know, an adequate amount of all of those foods, it has a market effect, not just making us live longer, but suppressing the desire to overeat and making us satisfied with the right amount of calories.

And you can't just willy nilly die and cut back on calories and your body's craving so many calories, you have to make it crave less. And that means you've got to put some good, healthy food in there.

Yeah, absolutely. Absolutely. So then if someone switches to a nutrition way of eating, and I hope people do because it just makes sense, right, that nutrient density is just critical for human health and viability.

Does this also apply to people who have type 1 diabetes? And a reminder to our audience, type 1 diabetes is a different root cause. Onset is because of an autoimmune attack on the pancreas.

The pancreas no longer makes that person has to take insulin. It's a prescription medication for the rest of their life until we figure out some other options.

Well, I actually published a study on that, too by the way. And I even some I even had some young kids who had either a reversal or near reversal of their type 1 diabetes because we caught them so early in life when they were first diagnosed.

But in any case, yes, the type 2 diabetics or have a tremendous reduction in their potential lifespan, they have increased morbidity and mortality, major heart attack risk, high risk of all these diseases, not because of their type one diabetes, but because the way they manage their type one diabetes and the way conventional medicine manages type one diabetes.

Oh, so your whole statement here is about type one. You start out with type 2, is that right? The last minute, I've only been talking about type 1. Okay, got it. Last minute. I'm only talking about type 1.

I'm saying that the type 1 diabetics are using usually two, three or four times as much insulin as person on a healthy diet would require. That's the high amount of insulin use that that ages them and it's the bad foods that they're trying to.

So the conventional doctor is trying to keep their sugar. Well controlled with insulin and adjust their insulin appropriately. And and they can adjust their insulin to what they're eating.

And I'm saying, no, let's focus on what we're eating to be right. And let's not adjust the insulin. Let's set the insulin and it just the foods that require more insulin than that.

So, you know, and so my so for example, I had a medical student here who had to quit medical school because he felt so poorly with his uncontrolled type 1 diabetes.

And when he was done here for a few months, he only required 12 units of insulin a day. When he came in, he's requiring 80 instances. I had an anesthesiologist, my local hospital, who was still was thinking of quitting his job because he couldn't stay focused during surgeries and got rid of his.

He went from a from using about 70 and it's been a slow day down to using about 15 minutes of insulin a day with better control, more alertness, no highs and lows.

And his body became really fit and ripped. And he so in other words, he really got pretty health. And here's my point I'm making. I'm saying that a type 1 diabetic can have a normal life span with an expectation of living to be 95 to 105 years old, just like everybody else.

If they eat a healthy diet with the use insulin appropriately, with the amount an insulin a normal person would need. But on the American way of eating and you and you get insulin resistance in a type 1 diabetic they're they're not just type 1.

They're overweight type 1 who are now have type 2 and interchangeable. They're type 1 because they're insulin resistant type ones. So they require excess amount of insulin and they're eating too much and the amount of so their diet is glycemic unfavorable.

The diet is nutritionally unflappable. They damage their instant receptors. They have to overuse insulin and they overuse of insulin accelerates aging and causes the type one to have an early death.

So it's it's the diet the type 1 are given and the obvious events in causing the problem. So this is not just as important, but more important for type 1, just because they're not going to get rid of it completely, it's still going to require some insulin.

They're still requiring a safe amount of insulin now, not an unsafe amount of insulin. All right. Those are strong distinctions. Thank you. Yeah, I think that for people who have type 1 diabetes, the need is every bit as urgent, if not more urgent, than for a pre diabetes type 2 diabetes.

Frankly, for anybody's health. I know it's amazing how the type 1 things will say. The type 1 will say, Oh, I don't have type 2, so I don't have to worry because it's not a dietary induced disease.

So it's just about me using drugs and I can eat like everybody else and just take the medications. No, that's totally wrong. They've been given all that bad information that brainwash to think this is not their diet is not important is the diet and a type 2.

And so it's critical here that they convert reverse this this false brainwashing. Yeah absolutely. I know people who will, in my opinion, abuse and misuse insulin cover eating lots of pizza and ice cream and candy.

And I'm like, no, no, just like you said. Right. It's the wrong it's the wrong trend for sure. Okay. Well, that's really great. These are wonderful things, as I'm sure everybody who's watching this can benefit from it, just to have clarity around what's normal, what's healthy, what it is that promotes us to live long and live well and not suffer as we age.

Right. And flour, wheat flour is not food. It's a drug. It's like cocaine. It's dangerous. It's a drug. And the bread comes into the body as it enters the bloodstream as sugar, the same as if you eat cubes of sugary candy, white flour, crushed science, bagels, pizza, donuts, all these things.

They are candy and they are dangerous and they're a drug. So when you're going through the airport and you

inhaling the bagels and the chocolate chip cookies and the pretzels and all these foods, it's they're enticing you with the drug centers of the brain and everybody's an addict around you.

So it's hard not to be. No, you don't have to do what everybody else does. We are humans and we are social, that's for sure. That makes a difference, right?

The environment, we are around matters and we just have to have clarity about what are healthy choices, Right. Dr. Fuhrman, it's been delightful to interview you.

Thank you so much for your knowledge and wisdom. If people would like to connect with you, where can they find more information? The best place is at drfuhrman.com D R F U H R M A N.com, Thank you so much.

Friends. Please be sure to share all these wonderful sessions especially this one with anyone you know who either is on this path and wants to live a healthier life or is in need of some correct accurate information and not in general gibberish that can be found by just Googling around.

All right. Thank you so much, Dr. Fuhrman. Thank you. Good luck to everybody. Bye bye.