

Special Medical  
Limited Edition

For Physicians  
& Patients



## The No-Denial Strategy of Fabulous Food to Make You Lean-for-Life

“Physicians and patients around the world  
owe you a big thank you.”

-Angelo A. Della Pietra, M.D., D.O. (Family and Integrative Medicine)



Brian Scott Peskin, B.S.E.E., M.I.T.  
Founder: *Life-Systems* Engineering Science  
International Health Authority

With Stephen Cavallino, M.D., (Italy)  
Official Physician and Nutritionist  
La Piu Bella del Mondo Beauty Pageant-  
"The Most Beautiful Women in the World"



# Accolades

"Prof. Peskin takes the problems of obesity and food cravings back to root causes, **using understandable science to dispel the misinformation and confusion**, then **delivering a beautifully simple diet solution** which has literally been right under our noses.

**Best of all, the solution is easily applied by anyone, anywhere, and it works immediately!** You will especially like the Food Utilization Chart and great tasting recipes. **You'll be empowered as you become lean, fit, and more energetic."**

– Brian N. Vonk, M.D.

*Board certified: Internist, Cardiologist, and Radiologist*

"I'm a judge and I'm used to weighing evidence, so **I'm convinced your program and the science behind it are correct.** The evidence that you are right is certainly more than preponderance, even **more than clear and convincing**, and **likely beyond a reasonable doubt!**"

– Judge Mark Lambert

**"Amazing isn't the word for it.** Finally, a 'DIET BOOK' that **my patients can follow.** You can call it a diet; I call it a 'nutritional lifestyle.' **The science-validated principles give you control** over your nutritional destiny, the potential for long-term health, and success in becoming lean-for-life: **'one-day-at-a-time.'**"

– David Sim, M.D., F.A.C.C.

*Interventional Cardiologist*

“I had the great pleasure of both reading Professor Peskin’s *The 24-Hour Diet* and speaking with him via phone on several occasions last year. I was intrigued and fascinated at his research and various nutritional notions. **After applying the information on a personal level and with patients**, I am happy to say the *results have been exceptional*. I would (and continually do) **recommend his works to anyone interested in maximizing their health.**”

— *Dr. David Orman*

*Director, Orman Institute for Active Wellness*

*Acupuncture Physician, Master Herbalist, Nutrition Expert*

“I was born in 1961 and received the pre-diabetic diagnosis in 2009. When I was first diagnosed with pre-diabetes, I started a vegan diet based on a best-selling author known as an excellent resource for vegans. But it didn’t work for me. My sugars would skyrocket after eating shredded wheat for breakfast or split-pea soup for dinner ... it was frustrating to say the least. I would see glucose meter readings of 135–185 after meals; obviously that is not good if you are trying to manage your sugars.

“I then tried the ADA diet that was a “little” better but not ideal. I found that I had problems with wheat, many vegetables, and fruits. I stayed away from juices, cookies, sugar, etc. and still had glucose meter readings between 125–180 after meals.

“Finally (and luckily), I stumbled across two books by Brian Peskin. The first was his *24-Hour-Diet* book, which taught me that “low-carbing” was the smart and correct way to eat. After adopting his recommended diet, **I quickly normalize my post-meal sugars to a range of 85–105. It was amazing.** I also have a device that allows me to monitor my LDL, HDL, and triglycerides. Although my total cholesterol went up to 185 from 155, my HDLs went from 30 to 75 and my triglycerides went from 115 down to 70. **It was**

**amazing.** Based on those numbers, my LDLs appear to be the big, fluffy, harmless LDLs. Thanks Professor Peskin.

"The second book, *The Hidden Story of Cancer*, convinced me that I need to monitor my Omega-6: -3 ratio and probably the best way to do that is go on the **Peskin Protocol immediately, which I did. The protocol works – my sugar has continued to stay in a range of 85-105 and morning fasting sugars typically stay in the 85-95 range. What a difference from the vegan and ADA diets.**

"One funny note: my internist, six months ago, told me if I stay on those diets I would become a diabetic... but he didn't give me any other options except a slightly modified ADA diet that would have turned me into a Type II diabetic.

"Thank you Professor Peskin. Thank you very much."

– Ed Edgar

"Following your program is why my waist has gone **from 39.5 inches to 31.5 inches** and the lines of my abdominal muscles are now clearly visible with **no 'starving' or denial.**"

– David Macphail

"A couple of months ago, I purchased your wonderful *24-Hour-Diet* book. I already believed in high protein and medium fat way of eating when I first read it, but now that **I have re-read it and taken the time to highlight the really outstanding eye-opening points, I'm in total awe. Your information is incredible and I feel mighty annoyed that I've dieted wrongly for 41 years (I'm 53).** Since cutting the fruit and other carbs as per your suggestions, **what a difference to my energy levels!** *Despite not having any fibre to speak of, my bowels are actually functioning nicely – a complete rarity for me. Thanks for your exquisite life's work.*"

– Diana Tregoning (Program Follower)  
Melbourne, Australia

**Dr. Atkins' first book started me on this path and you provide the missing information—the missing links and scientific support—that eluded Dr. Atkins. I am strongly recommending this book to all my patients."**

— Angelo A. Della Pietra, M.D., D.O., A.B.F.M.,  
A.C.A.M. Family and Integrative Medicine

**"I have been vegetarian for many years and used to add fish oil as one of my supplements. Lately, I have noticed a rise in my blood sugar count to the high border line, which means pre-diabetic. I have been asking myself what was I doing wrong. Only when I read the book, *The Hidden Story of Cancer*, I got answers to so many questions that have been bothering me for so long. I was very impressed by the science behind the data in this book and by the way of thinking and drawing conclusions from well verified medical facts. I have started using the unprocessed, organic omega-6 and -3 in the ratio as Prof Peskin suggests. I also recommend it to my patients, friends, and family. Almost immediately, I felt a significant decrease in carb cravings, and could quite easily make the change in my nutrition (more protein), which was followed by losing weight, feeling energetic and satisfied."**

— Nurit Nitzan  
Clinical psychologist (Israel)  
Holistic health practitioner

**"As an endocrinologist specializing in diabetes, I am delighted to see this book. Finally, my patients can see what is making them overweight, based on science—not opinion. Peskin's program can be followed by even my most carbohydrate-addicted patients. This book offers an amazing solution to the obesity epidemic."**

— Amid Habib, M.D., F.A.A.P., F.A.C.E.  
Endocrinologist (Diabetes Specialist)

“We went to my neighbor’s house last night for dessert. **It was the best feeling to be able to sit around her table and talk – with the desserts right under my nose – and not have the desire to eat them!** You understand how it used to be – you take one plateful and then another and then another. I feel so free of that horrible “after dessert binge” feeling! **I left her house feeling great! Your program works.”**

– Jill Kostrinsky  
*Program follower*

“I am delighted to come across scientific work which is not only of excellent quality, but is applicable. **I have been on a low carbohydrate diet for approximately a year** now, but I have been aware that there was still something missing. **Your program has filled in the blanks.** I have seen for myself remarkable results with the Peskin Protocol and PEOs (Parent Essential Oils).”

– Carolyn Berry, M.D. (Ireland)

I am following the diet and nutritional recommendations now and it is AMAZING!! I have lost almost 25 lbs. (284 down to 262 and losing) *in less than 3 wks.* **I am not huffing and puffing when walking at work and numbness in my extremities is going away too.** I can flex my arms and see the muscles again and my face is not “chubby” anymore. I can’t thank you enough for the INCREDIBLE way you support the science in your easy to read book!!! Thank you so much!!! My girlfriend who hadn’t seen me in 2 months attacked me when I walked in the door too. **She said I looked incredible.** Thank you.

– Thomas Quirico  
*Program follower*

P.S. Another “side-effect” I’m noticing is reduced joint pain and more “spring” in my step at work also.





# LEAN FOR LIFE

## *ONE DAY AT A TIME*



FROM THE HIGHLY ACCLAIMED AUTHOR  
AND INTERNATIONAL AUTHORITY ON  
HEALTH AND NUTRITION, PROFESSOR  
BRIAN S. PESKIN.\*

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\* Brian received an appointment as an Adjunct Professor at Texas Southern University in the Department of Pharmacy and Health Sciences (1998-1999). The former president of the University said of his work: “...**His nutritional discoveries and practical applications through Life-Systems Engineering are unprecedented.**”

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Other books by Brian Scott Peskin:

*PEO Solution 2015* (pre-publication issue available now)

*The Hidden Story of Cancer*

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Editing by Daveda Lamont

Illustrations and cover design by Khanada Taylor

Interior design and layout by Maggy Graham

Indexing by Victoria Agee/Rose Ippolito

First paperback edition

Published by:

**Pinnacle Press**

POB 56507

Houston, Texas 77256

Printed in America.

**Science-based health and nutrition books, exclusively.**

# Dedication

**This book is dedicated to America's women. American**

women have phenomenal willpower and drive to do what they think is right. Yet frequent recommendations by nutritionists, personal trainers, and even misguided physicians about how to lose weight permanently while staying energized are often the exact opposite of what the world's leading medical textbooks state. As an example, the excellent women's magazine *Marie Claire* published in June 2004 a great-sounding article titled, "11 Low-Carb Myths That Will Make You Fat." However diligent the editors were in trying to present a first-rate article, their sources let them down: A prominent Yale physician and author was incorrect in his conclusion about what fulfills appetite best and a prominent New York endocrinologist specializing in women's hormone problems wrongly stated, "Glucose is the only thing the brain can use for fuel." As you shall soon discover, this is scientifically wrong.

When physicians don't understand human physiology yet insist on giving advice that is often wrong, we are doomed. You can't fault the magazine or the article's author. They can't be expected to understand the complicated physiology and biochemistry. They have to rely on physicians who may be incorrect. *The 24-Hour Diet* eliminates that need to rely on possible misinformation. **Wrong advice from seemingly credible sources is the cause of America's weight problem.**

If you are overweight and exhausted, it is not your fault. This book's goal is to allow you to have the body you've always wanted. *The 24-Hour-Diet™* is my personal gift to you.

*The 24-Hour-Diet: Lean for Life – One Day at a Time*

This book provides the first diet ever created that is based completely on state-of-the-art medical science. Its program lays out a scientifically sound, easy-to-follow method for becoming and staying lean-for-life and energized.

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## About Author Brian Peskin, B.S.E.E.–M.I.T.

**There is simply no one else working today who is** better than Brian Peskin at developing 21st century practical solutions to our health-related problems – like the obesity epidemic – based on the world’s leading medical and nutritional science. “Science – Not Opinion” is Brian’s trademark. When Brian is through explaining a topic it is “case closed!” When he says it, you can “take the information to the bank”!

Unlike most of his peers’ recommendations, Brian’s health and nutritional insights and advice have stood the test of time. Brian continues to lead the pack when it comes to what is best for your health and how you can have the body that you have always wanted and become lean-for-life. Brian has never had to reverse or significantly alter any of his special medical reports – reports that have tackled everything from the dangers of soy, to the wrongly popularized need for fiber in the diet, to his warning about the potential harm of supplementing with copious amounts of omega-3. In 1995 he published the report, “Fiber Fiction,” and finally, eleven years later, others in research are acknowledging the silliness of recommending fiber in the diet of a human being. Brian’s latest crusade has been to warn of the dangers of excess omega-3 (in particular, fish oil). The list goes on and on....

Brian received an appointment as an Adjunct Professor at Texas Southern University in the Department of Pharmacy and Health Sciences (1998–1999). The former president of the University said of his work: “...**His nutritional discoveries and practical applications through *Life-Systems Engineering* are**

**unprecedented.”** In addition, The Associate Dean of the College of Pharmacy and Health Sciences, Dr. Doris Jackson, stated, **“We are honored to have a scientist of Professor Peskin’s standing as a member of the faculty....”**

Brian earned his Bachelor of Science degree in Electrical Engineering from Massachusetts Institute of Technology (MIT) in 1979. Brian founded the field of *Life-Systems* Engineering Science in 1995. This field is defined as “the new science of maximizing desired results by working cooperatively with the natural processes of living systems.” To many, Brian is THE MOST TRUSTED AUTHORITY ON HEALTH AND NUTRITION IN THE WORLD.

Brian has been and continues to be a featured guest on hundreds of radio and television shows, both nationally and internationally. His sheer number of accomplishments during the last decade of the 20th century and into the 21st century are unprecedented and uniquely qualify him as the #1 authority in the world of what really works nutritionally and why. Don’t waste your precious time with the popular press or most so-called health magazines. Their editors simply don’t understand the complicated science that they write about – they merely “parrot” what everyone else says without independent scientific verification. Their recommendations often overlook basic human physiology.

Brian has thoroughly documented the fact that practical nutritional “solutions” often have little in common with the scientific theory they were supposedly based on – and these “solutions” don’t work much of the time, as evidenced by the American obesity rates. This book makes clear that Brian Peskin is one of the very few scientists working in the field who are able to clearly and forcefully present the unvarnished truth about the most important health and nutrition issue that concerns us today – prevention of obesity and its complications.



Like many forward-looking scientists working in the vanguard of their fields, Brian has crossed swords with the regulatory authorities. Consequently, he has even had the “honor” of being listed on “quackwatch” sites—along with Nobel Prize-winner Linus Pauling, Dr. Andrew Weil, Dr. Herbert Benson of Harvard Medical School, and Dr. Robert Atkins. None of this deters him, since his goal is to provide you with the world’s most advanced nutritional science.

Brian received the 1976 Geitz Award for Engineering Excellence, which reads:

“...These skills include an *insight into problems* and an *intuitive grasp of the principles that apply*. Such qualities are useless, however, without an *overwhelming desire to see the problem solved*.”

Brian used these skills to develop a new scientific field in 1995, *Life-Systems Engineering Science*, to which he attributes his success in great part. At the time the work was in progress, it was his unique advantage—a “secret weapon” that no research institute possessed. Universities are now making use of this concept, and Brian’s alma mater, Massachusetts Institute of Technology, published the following statement on its website four years later on January 17, 1999:

#### **BIOENGINEERING & ENVIRONMENTAL HEALTH:**

“**Combining engineering**, biological and chemical tools to reveal life’s secrets, improve health care technology, and bridge natural and synthetic engineering—BEH is about making **scientific breakthroughs** that change the way we live.”

Brian has dedicated his life to providing the truth – which unfortunately almost always proves opposite to what the “experts” have said. *The 24-Hour-Diet*<sup>™</sup> is the culmination of his work using state-of-the-art science to help readers around the world become lean-for-life, in possession of boundless energy and radiant health.

# About Stephen Cavallino, M.D.

**Since 2002, Dr. Stephen Cavallino has been the Official Medical Doctor and Nutritionist for the famous Italian beauty pageant, La Più Bella del Mondo – “The Most Beautiful Women in the World.”**

Dr. Cavallino has 20 years of experience in the research and practice of medicine. He graduated in 1989 from the University of Bologna, Italy, with a degree in Medicine and Surgery, with a specialty in Emergency Medicine.



Dr. Cavallino’s association with Brian began in 2000, while he attended a series of Brian’s lectures in the U.K. “What intrigued me was Brian’s unique view of parent essential oils (PEOs)<sup>1</sup>. His views were entirely different from everyone else’s and from those I knew and recommended. After I tried them, both I and my patients found Brian’s recommendations led to drastically increased energy and substantially decreased carbohydrate cravings. **Brian’s recommendations are truly miraculous for my patients and are a significant factor in eliminating fattening carbohydrate (sugar) addiction.**”

Currently, Dr. Stephen Cavallino is ALSO using Brian’s recommendations in another one of his passions, Sports Medicine. These proven *real-life* results now enable athletes to defeat the common lactic acid (muscle burning) and pain syndrome post-workout. The exercise component of any weight-loss pro-

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1 See page xli for an explanation of PEOs.

gram becomes much more enjoyable with this new discovery.

Dr. Cavallino is the official physician for the **Italian National Flag Football League**. He has participated in many world competitions, using and applying his nutritional knowledge in association with Brian's discoveries.

Dr. Cavallino is committed to spreading Brian's anti-obesity discoveries around the world. **This discovery isn't just for beauty pageant contestants anymore; it's for everyone!**

# Foreword

## What Makes This Book Unique?

This book relies upon science taken directly from the world's leading medical journals and medical textbooks. Using the source documents—the articles, papers and references themselves—instead of summaries written by journalists is essential, because it allows you to see the original research. Only then can you properly determine whether the article or study and its conclusions are accurate. Popular publications are notorious for using summaries that are filled with opinions instead of science. In contrast, this author relied on the Houston Academy of Medicine–Texas Medical Center (HAM-TMC), considered one of the nation's top medical libraries.

While researching his book, certain things became clear to the author:

- **Often, a news story headline did NOT accurately reflect what the medical journal article reported. Nor did the headline always accurately reflect the news story's conclusions; this is especially true in television broadcasts.**
- Even medical journal articles often drew conclusions that were incorrect. The incorrect conclusions are then repeated over and over again until they become “popular wisdom.”

So how do you determine what to believe and what not to believe? The answer to this question is essential in understanding the significance of this work. First, the way this diet was developed is crucial:

- **The author relied on complex systems analysis, which emphasizes the entire system, not merely an isolated effect or result. Unfortunately, too few medical researchers understand this systems approach. Also,**
- Brian Peskin's strong command of probability and statistical analysis goes well beyond that of most nutritional writers and medical researchers. The old saying, "You can prove anything with statistics," contains much truth. This is why most medical recommendations are reversed years later – because they were wrong from the start.

Stanton Glantz, Professor of Medicine at the University of California, has explained how **50% of top medical journals have used incorrect statistics and therefore reported WRONG CONCLUSIONS.** "Solutions" to weight loss and other health issues that don't work are therefore routinely touted. Medical journal articles almost routinely end with phrases like, "**Further study is required**" or "**More research is needed.**" Today's medical studies rarely "connect the dots" between their research and the existing medical science. This is not the case with this book. Brian's conclusions about the *prime* cause of obesity have been called "extraordinary" by physicians.

For the first time, you will understand exactly what to do, and the scientific reason behind doing it, to combat obesity and its complications.

Today's researchers don't understand even the basic reasons obesity occurs or why the *prime* cause of obesity is fundamentally the same regardless of culture or socio-economic class. Because they are still in the dark on these basic questions, obesity researchers' progress has been minimal when

compared with advancement in other scientific fields such as computer electronics. A truly correct scientific conclusion explains the results *each and every* time and its results can be consistently reproduced by others.

Exceptions must only rarely occur and when they do, be explainable. Since Brian's scientific conclusions are correct, he has been able to build upon these conclusions to accurately predict outcomes. Throughout his 20-year career in the *Life-Systems Engineering Science* field, each and every prediction has been correct. This is in stark contrast to other researchers in the obesity and nutrition fields, where time and time again we have read in the newspapers and magazines about their contradictory results that lead nowhere.

Over ten years ago, while evaluating the merits of a complex international project, I sought the insights of a very astute international investment banker. After explaining the project, I then posed what I thought were several well thought-out questions. His response shocked me. He said, "Ken you're asking the wrong questions. While your questions ultimately need to be addressed, at this point **focus on the simple questions. If you can't answer those, don't waste your time trying to get answers to the tough ones.**"

This story helps us understand why the majority of Americans are overweight and diabetes is an epidemic whereas, pre-1940, there was no Type II diabetes. That's right. In only 60 years a nonexistent disease has become America's Number 1 epidemic. If you are overweight, diabetes will likely be in your future. No one until Brian Peskin has been able to connect the dots between prior medical research and today's advanced understanding of the complex biochemistry of metabolism to clearly explain the world's obesity epidemic, along with its simple solution. Obviously, it is nearly impossible to solve a problem when you don't know why it occurs.

Brian, to the chagrin of the nutrition establishment, has never lost the child's ability to ask "why." Throughout this book I suspect you will repeatedly ask aloud, "How could Peskin be right, making all the others wrong?" What makes Brian different is that while he can discuss physiological processes in detail, he also has the capacity to ask the "simple" probing question, "Why?" I spoke to Brian's mother and she told me as a child everyone would call him "Mr. Why?" He'd irritate everyone but found answers that others couldn't. As he grew up, Brian didn't change. He possesses the rare combination of qualities of deep insight and clear thinking. He asks penetrating questions others haven't even thought of. All I can say is thank goodness for Brian, or this program would never have been discovered.

Brian also has a gift for asking the "right" questions. As he often explains: "When **wrong questions are posed**, the **wrong answers** *naturally* **emerge**. Therefore, the **intelligence of the answer** is *directly proportional* to the **intelligence of the question**." Much of this book's wonderful insights into becoming and staying lean-for-life and energized emanate from Brian's rare gift.

In the coming pages **you will discover** there is only **one simple *prime* cause to obesity**, along with **one simple solution**.

Solving the *prime* cause required discovering two "missing links." We had to discover why people had cravings for sweet carbohydrates even when overweight. And we had to discover what foods give us an appetite for more food, even if we are overweight. I'm delighted to say that both links have been discovered and this has allowed us to give you what I and many people around the world consider the easiest, most powerful weight loss and weight maintenance program ever developed.



As a result of Brian Peskin's scrupulous research, physicians around the world now rely on his insights and conclusions concerning diet and health issues. This book makes available for the first time a great deal of scientific information never before made known to the general public. Most importantly, this information is presented here in a cohesive and simple-to-understand format.

## **A Missed Opportunity**

Robert C. Atkins missed an opportunity to save the lives of many people by not properly defending his controversial, but ultimately correct assertion that people should live a low-carbohydrate lifestyle.

Dr. Atkins gained worldwide fame and notoriety with his low-carbohydrate, high-protein and high-fat dietary advice. However, he did not adequately defend his position when challenged by the medical and nutritional establishments. It is true enough that he was attacked with ferocity for challenging established, conventional medical dietary recommendations. Nonetheless, the science was known and available to him and he could have effectively countered the attacks with that science.

Since I am not clairvoyant, I am unable to answer the question as to why he didn't. I can only review what happened and sadly conclude that this is an excellent example of someone who was correct in his argument, but hurt his own cause by not mounting a vigorous defense of his position.

This is where Prof. Peskin parts company with Atkins. He has and will continue to successfully carry the low-carbohydrate torch with meticulous use of the world's state-of-the-art biochemistry and physiology. Professor Peskin has "connected the dots perfectly" and will continue to inform the public, as

*The 24-Hour-Diet: Lean for Life – One Day at a Time*

well as the nutritional and medical communities,  
until they finally come into the light and see the error  
of their ways.

– *Kenneth Sperling*  
*Health Care Advocate*

# Preface

**My father was a postman for 20 years, always thin, and** he walked extensively every day, too. Even with all of this daily walking, he still required a quadruple bypass because his arteries were so clogged up. How could this happen? It took almost a decade to discover the science behind this event, and I'm delighted to offer this information so you, unlike my poor father, won't get misled into thinking that walking or running or performing aerobics will protect you or even make you thin.

---

**More Exercise is NOT the Answer: The Answer is Nutritional – You DON'T Need to be a “Rat on a Treadmill” Everyday.**

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**I have always had a big problem with the notion that diet and exercise are co-dependent. What type of food *is* exercise, I asked.** Is it a carbohydrate, fat, or protein? Of course, the answer is that exercise is none of them.

---

**The great news is that becoming lean-for-life with boundless energy is *not* based on more exercise. Becoming *Lean-for-Life* is based on the science of nutrition.**

---

Isn't it great to know the answer to staying lean-for-life doesn't have to be exercise-based? Don't get me wrong. I like exercise and am a practicing black belt in Aikido. I dance

Argentine Tango and go to the gym twice a week, but I only need 15 minutes each time.

***The 24-Hour-Diet™*** is a remarkable five-part program showing you how to achieve a beautiful, lean body with lots of energy, and never suffer any denial.

1. Science has the answer. Science – not opinion – is the basis of this program. You discover what to eat based on human physiology and medical biochemistry.
2. Results are immediate and noticeable, starting in just 24 hours.
3. You discover how to fix a damaged metabolism, which is a common problem due to following prolonged incorrect nutritional advice.
4. You discover how to enjoy delicious meals based on desserts called Cook It Cool!™ There's also plenty of delicious "regular" food on this program.
5. You discover the very best in supplementation to give you optimum results.

With ***The 24-Hour-Diet™*** you achieve IMMEDIATE, noticeable results starting in just 24 hours. I am extremely excited to give you this information. I warn you in advance that most everyone will tell you why this method can't possibly work and how unsafe it is. They are wrong. Your *real-life* results will show them all.

Have you tried popular diets like South Beach™, Atkins'™, Sugar Busters™, a so-called "negative-calorie foods" diet, or a host of others, only to fail? Are you blaming hormone problems: low thyroid, serotonin, leptin or cortisol deficiencies? Are you blaming your genes? Are you blaming excess stress? Are you blaming your blood type, the glycemic index, or lack

of willpower required for their methods? Don't. You didn't fail them — those programs failed *you*. Everyone can successfully follow *The 24-Hour-Diet*<sup>TM</sup>.

You've likely heard "everyone is different." Perhaps you thought, "I'm one of the few the method won't work for because 'I'm different.'" Wrong again! Scientifically, we are each more alike than we are different, biochemically. How can I say this with such confidence? Because human biochemistry and physiology is a CONSTANT among all of us. If this wasn't true there would be multiple medical books with all sorts of different metabolic mechanisms depending on a variety of personal factors. There simply isn't. This isn't the problem.

The real problem is that most diets are NOT based on SCIENCE. Even though they appear to be, they aren't. My background is as a scientist with a degree from M.I.T. (Massachusetts Institute of Technology). What I am bringing to this subject is a decade of experience applying the highest standards of engineering science to biochemistry, biophysics, and physiology.

The results of this new science have been extraordinary. I have heard from physicians from around the world who have called my discoveries "earth-shattering," "brilliant," "amazing insight," "you provide the missing links," and "...among the most significant health discoveries of the 21st century," to name a few. These doctors rely on me for state-of-the-art science, because what I am doing with my research is distinguishing between what is scientific and what is merely pseudoscientific.

Here's how I discovered *The 24-Hour-Diet*<sup>TM</sup>. Years ago I developed the Body by Science Program<sup>TM</sup>. This is a science-based program that received accolades around the world from people raving about the weight they had lost and kept off.

I had had one "slight" personal problem — my abdomen was too big. It wasn't flabby, but I hated it. I went to the gym

and trained with weights for years, but the added muscle didn't correct the excess bodyfat. A walrus has lots of muscle and is very strong, but carries lots of fat (to keep warm). Needless to say, I was very upset that I couldn't solve this problem. I was eating low carbohydrates with few sweets for over a decade, but my stomach fat never diminished. I'd helped people lose in excess of 100 pounds, but a solution for my problem remained elusive. This was embarrassing, because I was the guy people turned to for optimum health and fitness and I couldn't solve my own problem. Even though many people would solve their "stomach problems" following my recommendations, I couldn't solve mine. A better solution was required.

One day, I was speaking with a colleague of mine in Italy, Stephen Cavallino, M.D. He said that my Body by Science™ method worked wonderfully over the long-term but that he needed a very fast method to help the contestants lose those last few pounds in a beauty competition whose contestants he worked with, **La Più Bella del Mondo – "The Most Beautiful Women in the World."**

After about a week of intense thinking, I took my "Body by Science Program" to the next level. I developed this system to maximize fat loss based on state-of-the-art medical science. I thought that it would be used as a short-term "secret weapon" by models and celebrities.

I already completely understood the biochemistry of what makes us fat and what doesn't. Yet something was missing. Then the science hit me over the head! This new discovery allowed me to complete the mission so you could lose those last pounds and also be in great health. This book is the story of my discovery – giving you the foods that make you run on your own bodyfat.

After more research, I realized that this discovery could form the basis of a long-term lifestyle for everyone: just 24

## *Preface*

hours at a time. Use the method when you need to and then don't use it for a few days, then use it again. You get the point. Personally I use it about five days a week. It's truly wonderful because there is NEVER any deprivation.

Dr. Cavallino marveled at the results and so did his patients, but would it work for everyone? I needed "test subjects." I had another colleague, Ken, who reached a plateau short of losing all the weight he wanted—he couldn't lose those last 25 pounds. He had already lost 25 pounds following my recommendations but he reached his "sticking point." Would my discovery solve my 10-year problem: my protruding stomach? And his problem, too?

The results? After just 4 days, we both lost 4½ pounds. My "stomach" was disappearing and Ken dropped a pants size. No muscle was lost and the weight loss wasn't "water-weight," because we have both already been following a low-carbohydrate diet for years. We were in a state of amazement. You'll soon discover "the secret."





# Introduction

**I wrote this book to save your life! While some might** argue this is hyperbole, I suggest you withhold judgment until you've read the entire book. To ensure every reader understands the essence of the book, I am using a format that is easy to read and understand: specifically, putting the supporting science for each argument at the end of each corresponding chapter. Also, I use the BBI (Brian's Bright Idea) symbol to highlight IMPORTANT POINTS. Many of these facts have never been released to the general public. You need to discover them.



I tried to write this book as though I were speaking on one of the many radio shows where you may have heard me as a featured guest. *The 24-Hour-Diet™* has been created in a format that I hope will make reading it both effortless and entertaining. If you have heard me during a guest appearance, then you already know that I have no interest whatsoever in being “politically correct.” I care about the truth that will make you lean-for-life with boundless energy, wherever it may lead.

The science I used to figure out the fastest, safest, most productive way for anyone to lose weight is complicated. I've used the world's leading medical, biochemistry and physiol-

ogy textbooks, many over 1,000 pages each. But I've done all the analyses for you and "connected the dots" in a way that no one else has. What I have done reminds me of an analogy to using electricity. Do you need to know how electricity works to use it? Do you need electrical engineering courses in field theory? Heck no. You just need to know how to flip the switch! That is precisely what I have given you in this book.

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**You will easily and effortlessly flip your fat-burning switch "ON" 24 hours a day, even when sleeping!**

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Most chapters have two sections: What you need to know, and the "Scientific Support" at the end if you want the details. The "Support" section is included specifically for physicians, nutritionists, nurses, and for anyone wanting to give their physician or nutritionist the last word on why *The 24-Hour-Diet*<sup>™</sup> is scientifically correct.

Follow *The 24-Hour-Diet*<sup>™</sup> and your energy will skyrocket. You won't be tired after eating, and losing those important inches off the waistline and thighs will finally be achievable.

Have you ever tried a diet, only to fail because you lacked willpower? If so, I have a secret to share.

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**If you can follow a diet for just one day, a mere 24 hours, then you will succeed with The 24-Hour-Diet<sup>™</sup>, because all you need is one day of willpower at a time.**

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That's it. The science that you are about to discover ensures it.

For over 10 years, my goal has been to “not make myself sick” looking in the mirror while wearing a bathing suit! This may sound familiar. With *The 24-Hour-Diet*™ I can always guarantee looking great, especially when it really counts, like during the summer or at a special event. What you are about to discover is probably unlike anything you have previously heard regarding your health, your weight, and your good looks. My goal is to give you the scientific facts that you weren’t aware of before reading this book. Once you have discovered them, you can make your own conclusions and dietary choices. You will soon discover a very specific and unique system for becoming lean-for-life with boundless energy. I have spent many years of research to bring you state-of-the art science from the world’s leading medical textbooks.

## **The Results Even Beat Starving!**

Can there be certain foods that actually cause you to lose more fat than attempts at starving would? Surprisingly, the scientific answer is yes, and as a scientist, no one was more surprised than I. The science of how to put this understanding to work making you lean-for-life is fully presented in this book. My mission is to reverse America’s and Europe’s epidemic trends in obesity. I take this mission very seriously and that’s why so much science is presented here (in the special “Scientific Support” sections at the back of the chapters), compared with most other diet books.

To reach this discovery, it took over a decade of connecting the dots between the world’s leading medical biochemistry and medical physiology textbooks. Time and time again the science was clear but the popular press and the popular nutritional recommendations contradicted it. The deplorable health of Americans and now Europeans is predictable be-

cause everyone is following bad advice, even from supposedly credible sources. You can choose to skip the science and just follow my method, but I encourage you to understand how the science works and why this program is different, so you can UNDERSTAND for yourself its soundness.

Most of us, including me, have tried many diets and failed, typically gaining more weight over the following year than was lost during the diet. This led me to comprehensively research the medical science to bring you the fastest, easiest, and most medically sound method to lose all the excess weight you want. Nature designed us to be lean-for-life, effortlessly.

Italian physician Dr. Cavallino – **official physician and nutritionist for La Più Bella del Mondo Beauty Pageant** – “The Most Beautiful Women in the World” – had specific questions about weight-loss and demanded answers that challenged me to research and verify my conclusions to ensure their correctness. Men and women around-the-world, in particular in Italy, applaud its success and now *The 24-Hour-Diet*™ can work just as well for you, too.

## **Important Note**

This book is intended to direct the attention of both the physician and patient to scientific research. **It is for educational purposes only and it is not intended to replace the physician-patient relationship.**

With your newly gained knowledge from the information provided by this book, you can work towards the resolution of your weight problem with your physician. This book is intended to bring you the truth about obesity – its prime cause and prevention. The viewpoint is a scientific perspective based on *real-life* results, not biased theories. **This viewpoint is my opinion and others may vehemently disagree.**

**I have no interest whatsoever in being “politically correct,” because truth should be blind to outside influence.** I warn you in advance that what you are about to discover and the conclusions that I have drawn will likely be different from everything you have ever read or heard about on this subject. Prepare to be amazed at the depth of information *already known, but not previously publicized*.

I am confident that you will find the strength of the conclusions overwhelming. Some may say that they don’t like them. However, that is not sufficient; they must show why the conclusions are incorrect. I doubt that they will be able to, because the science presented makes so much sense. Furthermore, if people find fault with these conclusions, then they should be able to offer a better solution. They won’t be able to, because we would have already found it. The puzzle that we have been able to piece together took years of clear thinking.

Additionally, reaching these conclusions required researching the best medical textbooks and medical journals. Their information is presented so that you may draw your own conclusions *directly from the science*.

Every effort has been made to ensure the correctness of interpretation of the references and the conclusions made. We are confident of these conclusions and encourage you to perform your own independent analysis of them.

As you read this material and discover for yourself this new information, make sure that you look at the references. We want you to see exactly where the information comes from and be aware of its scientific sources.

## **Why Don’t More Physicians Use This Information?**

I am frequently asked how come the docs don’t know this information. The best reason that I can offer is that most physicians

are overwhelmed treating patients' symptoms. Think about it: Years ago there was no type II diabetes; years ago men in their 30s didn't get heart attacks; today it is common. Over 50% of us contract cancer – the average person contracts cancer today. Over 60% of us are overweight. The list goes on and on. Almost everyone we know is sick. Physicians are overloaded with patients, and they can't be expected to adequately understand this information; physicians simply don't have time for it and it isn't their fault, so you have to learn the correct information on your own or suffer the dire consequences.

## **Physicians are the “Repair Shop”—NOT the Engineer**

Physicians have had very difficult educations. They had many medical textbooks to read quickly. Many of these I have also read. The difference is that it may have taken me a year to review and understand a textbook, whereas doctors in training had just three months to study the material and were tested with questions that emphasized treatment of symptoms without adequately understanding the body systems. Many people think physicians understand much more than they do, but that is not their job. Physicians treat symptoms. Think of the physician as the REPAIR SHOP, not the engineer who designed and understands the system. A repair shop can fix a problem based on what the design engineers tell them. But without the engineer to clarify the way the systems function and interrelate, the car breaks again and again and will never run correctly.

In contrast, my education was in physics and engineering. Beyond learning the engineering within my discipline, I understand the *general principles* of engineering. Engineers are 100% accountable. We can't make mistakes or buildings would routinely collapse, televisions would sporadically blow up, and mobile telephones would never work at all. With

this understanding I am able to apply these same principles to nutrition and the human body. My goal has always been to understand why a system is breaking and how to permanently fix it and prevent it from breaking again. Therefore, I collaborate with physicians who understand that if I do my job, I will ultimately help them do theirs.

## **Physicians Can't Fix It — Everyone is Becoming Overweight**

### ***Life-Systems Engineering Science* —the “Secret Weapon”**

In 1995 I founded *Life-Systems Engineering Science* (L.S.E.). M.I.T., my alma mater, has even adopted its principles in their course.<sup>1</sup> L.S.E. is my “secret weapon” into the mind of the design engineer, allowing me to connect the dots between our complicated biological systems in a way that the typical physician never would.

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Doctors mistrust medical journals, right or wrong.

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## **Drug Companies Mislead Doctors**

Medical journals should be most doctors’ *main* source of information about scientific advances and new or changed treatment methods. **However, the physicians often don’t be-**

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1 My alma mater, Massachusetts Institute of Technology, published the following statement on its website on January 17, 1999, “Bioengineering and Environmental Health”: **Combining engineering**, biological and chemical tools to reveal life’s secrets, improve health care technology, and bridge natural and synthetic engineering – BEH is about **making scientific breakthroughs that change the way we live.**”

**lieve what is published in their own journals.** The *Wall Street Journal* article, “At Medical Journals, Writers Paid by Industry Play Big Role,” by Anna Wilde Mathews (13 December 2005), helps answer why physicians often don’t believe their own medical journals:

**“It’s an open secret in medicine:** the bylines of prominent academics are actually **written by ghostwriters in the pay of drug companies.** These *seemingly objective articles*, which doctors around the world use to guide their care of patients, are **often part of a marketing campaign by companies to promote a product or play up a condition it treats.”** (Emphasis added.)

Another reason doctors mistrust their own medical journals was pointed out by Lawrence K. Altman, M.D., in his June 2002 article in the *New York Times*, “When Peer Review Produces Unsound Science.” The peer review system, which has been used for 200 years, has made some serious mistakes. One of its most infamous failures occurred as early as 1796, when “...a peer reviewed journal in England rejected Dr. Edward Jenner’s report of his development of the world’s first vaccine against smallpox.” The horrifying result was that it took almost *two more centuries* before this vaccine was finally used to eradicate this deadly disease!

Dr. Altman tells how there is “...considerable evidence that many statistical and methodological **errors were common in published papers** and that **authors often failed to discuss the limitations of their own findings.**” He ends by quoting Dr. Rennie, a medical journal editor, who stated, “**there is still a massive amount of rubbish in the journals.**” Is it any wonder physicians often don’t believe articles published in their own journals?



We all suffer because the truth often gets buried and remains hidden.

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In scientific research, “to know” means to know *all*. “Not to know all” means *not to know*. This is the strict standard of thoroughness that is required of true experts. Unfortunately today, too many supposed experts in the health and nutrition fields simply repeat the latest nutritional theory with no understanding of whether the theory does or does not stand up to rigorous scientific analysis nor make sense from a *Life-Systems Engineering Science* perspective.

An especially noteworthy definition of “scientist” appears in the out-of-print book, *On Love*, by A.R. Orage:

**“Ordinary scientist: one who possesses an assortment of information *not verified by personal experience*, and which is often *disproved by another ‘scientist.’*”<sup>2</sup>**

When these experts’ recommendations fail, they blame *you*, not themselves, for their failure. This should make you mad. You can rest assured that everything in this book is validated by personal experience.

I practice a martial art called Aikido. Its principles are based on the laws of physics — specifically, centrifugal acceleration. Because I possess knowledge and understanding of these physical laws in a *personal capacity*, I appreciate these laws in a different way than most people or other scientists who lack this kind of intimate connection. Our team’s understanding of the benefits of the science in this book is more than theoretical. Knowledge without *first-hand, personal* understanding is often incomplete.

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2 *On Love*, A.R. Orage, The Janus Press, London England, 1966, page 57. (Out-of-print)

Unbelievably, science today is often too preoccupied with “how” rather than “why.” The ability to discover the truth or real relation of things is part of what distinguishes humankind from the animals. The entire cholesterol issue illustrates this perfectly. Almost nowhere in the literature is the question discussed – or even raised – of why cholesterol is deposited in the first place: what specifically causes the initial “break” in the artery lining that triggers the body to send cholesterol to help in the healing? Why do these tiny “cuts” keep happening, calling for more and more cholesterol to be deposited? Reams of studies are devoted to “how” plaque builds up, but they ignore “why” it starts in the first place!

Approximately 2,000 gallons of blood flows through any section of artery each day. A tremendous amount of material is carried in this huge volume. Each of us would die within a few days (if not within a few hours) if *any* blood component caused a serious problem in and of itself. Because this blood flow is so essential, any arterial obstruction would *have* to be specifically initiated by the body for some purpose.

*Life-Systems Engineering Science* makes great strides compared to other researchers because we understand that one must always be aware that the human machine, whether functioning regularly or irregularly, is always in mechanical equilibrium. Consequently, any change in one direction, such as a no-fat diet, is bound to bring about a change in another direction. In this case constant hunger. **It is absolutely essential to foresee this new change.**

Effective researchers **MUST DISTINGUISH** between what is more important and what is less important. Everything does *not* have the same level of influence on a result.

Many nutritional studies have been incomplete because they have not considered the *whole system* – as we do in *Life-Systems Engineering Science*. There are specialists in the

biological functioning of salt, specialists in the metabolism of fats, specialists in protein metabolism, and so on. Because these “experts” have little understanding of other biological areas outside their main area of expertise, their results are often contradictory to other researchers’ results — because they are all based on **incomplete knowledge**. That’s why one researcher’s results often contradict another researcher’s — and no one gets anywhere, circling on an endless merry-go-round of incorrect and incomplete results:



With the information in this book, you can rest assured that you will learn what to do and how to do it to become lean-for-life and energized.

### **New Ideas—Even Nobel Prize-winning Ones—Are Rejected**

At least two Nobel Prizes have been awarded to scientists whose scientific studies had received rejection slips from medical journals: Stanley Cohen, the 1996 Nobel Prize-winner in physiology or medicine regarding cellular growth factors

and Kary Mullis, the 1993 Nobel Prize-winner in chemistry for modernization of DNA analysis. Even the system that awards these prestigious prizes permits not only good science to be ignored, but bad science to be published, as you will soon see.

## **Weasel Words**

Researchers have another bad habit that has long been widespread. Journal articles about nutritional developments and recommendations are littered with words like “may,” “possibly,” “associated with,” “suggests,” “likely,” and “could.” They rarely seem to use words like “absolutely” or “conclusively.” By using words that leave all kinds of wiggle room for indefinite conclusions, exceptions and failures, no one is ever “wrong.” Because they never actually told you conclusively that the method *would* work, you can’t hold them accountable. You will recognize these same “weasel” words in commercials. Be aware.

But even if you tried to hold them accountable, they wouldn’t take the blame for giving you misleading or incorrect advice. That’s why you always hear, “*New research shows....*” Very rarely does anyone ever answer why the *old* research was wrong, or take responsibility for publicizing the reversal. Indeed, the nutrition field has become so unsure of itself that if it were asked what two plus two equaled, the published answer would be, “It is possible that the answer might eventually prove to be associated with four.” Don’t worry, *The 24-Hour-Diet*™ doesn’t use “weasel words.”

## **Disproven Treatments, Recommendations and Scientific Facts**

The medical profession has a long history of issuing recommendations that have later turned out to be incorrect. Even facts widely considered to be known “by everyone” are

occasionally disproved. In many cases these wrong recommendations have produced harmful outcomes for people. Yet even today, the practice of issuing recommendations based on inconclusive evidence, or sloppy research and analysis, has not decreased.

*"Cause and effect"* has been replaced by *"associated with."* Nutritional "science" has often forsaken studying *cause and effect* in the laboratory. Laboratory experiments are what textbooks of medical physiology and medical biochemistry are based on—not mere association. This standard of requiring cause-effect relationships has been replaced with sloppy statistical studies that reach erroneous conclusions through mere association that is termed "epidemiology"—this is *desktop* versus *laboratory* science. It's a lot easier to perform such "studies," but a huge price in quality is paid. Here's an example that illustrates the difference:

**Epidemiology:** You wake up at 6:00 a.m. and the sun rises. In fact, everyone in your study regardless of age, nationality, religion, or sex who wakes up at 6:00 a.m. has the sun rise right along with them. The conclusion? YOUR ARISING is associated with the sun coming up! As you can see, this association is meaningless. Yet this association would be published in the medical journals and cited by everyone. Then the popular press, the nutrition magazines, etc., would likely state mistakenly that your arising caused the sun to come up!

**Scientific experiment:** The above study is performed. However, in addition, you have the subjects wake up at 6:15 a.m., 6:30 a.m., 6:45 a.m., and 7:00 a.m. It is quickly seen that if you wake up at a different time than 6:00 a.m., the sun has already arisen and that your arising *caused nothing*.

**Don't laugh.** This is the state of nutrition in America, and it is also spreading across the rest of the planet as other countries follow America's dietary and nutritional bad advice. **It**

**gets worse** because our physicians who are in charge of these studies often don't have sufficient command of the statistics. The conclusions they make are frequently incorrect. Here is what Professor Stanton A. Glantz, Professor of Medicine at the University of California, San Francisco, has to say in his book, *Primer of Biostatistics*:

"...most readers assume that when an article appears in a journal, the reviewers and editors have scrutinized every aspect of the manuscript, including use of statistics. **Unfortunately, this is often not so.**

"The fact remains, however, that most journals still do not provide a complete secondary statistical review of all papers, so the ***fraction of published papers containing statistical errors is probably still about 50% for many journals.***

"In practical terms this boils down to increasing the chances of **reporting** that some therapy had **an effect** when the **evidence does *not* support this conclusion.**

"...you and other responsible individuals **can rarely take what is published or presented at clinical and scientific meetings at face value.**" (Emphasis added.)

Professor Glantz's statements say so much. He explains why so many nutritional recommendations are reversed years later – they were **WRONG to BEGIN WITH!** A correct analysis is often not used in medical research because the reviewers don't understand statistics themselves. Then, they "force" the illogical conclusion they desire with elaborate discussions. The readers (including other researchers) never know of the statistical mistakes. **The reported effectiveness of drugs can rarely be taken at face value.** And most importantly,

**the treatment can be reported to be effective when it *isn't* effective.** Physicians can't be blamed for not knowing what to believe in their own medical journals.

## **Recommendations Not Based in Science**

"Technology Follies," was published in America's premier medical publication, *New England Journal of Medicine*, and it will shock you:

"As noted by Pickering, **medical education in the United States is, to a large extent, worship at the improbable shrine of worthless knowledge.** We produce 'scientific illiterates' ... who are **not scientific in their approach** to clinical questions or new technologies!

"Twenty years ago, the well-being of the fetus late in pregnancy was measured by analyzing the woman's urine. **This was ultimately shown to be worthless.**" (Emphasis added.)

Is it any wonder that we don't get proper science-based advice that really works under *real-life* conditions?

Don't worry, *The 24-Hour-Diet*™ is 100% scientific with no guesswork!

In questions of science the authority  
of a thousand is not worth the humble  
reasoning of a single individual.

Galileo Galilei, 1564-1642

## **Facts, Not Myths, Will Make You Lean-for-Life**

As you read the following chapters, you will learn everything you need to know about fat, proteins, and carbohydrates. There have been many fine books written about them, but I assure you that you will discover new information and many facts that you haven't seen before. But first, I want to completely destroy the Number 1 food myth: that "it's *only* about calories." For decades we have been told:

**Calories in minus calories used equals how fat I get.**

This is scientifically WRONG and it was disproved by medical physicist Dr. Aldoph Fick, M.D., back in 1893! There is much more to the picture, and that will be the topic of chapter 4. You will find that virtually none of the physicians, nutritionists and trainers you encounter or whose material you read understands this, even though it was disproved over 100 years ago!

And let me be clear: belief in me or what I am about to present isn't required. We will discuss in detail how a protein, fat, and carbohydrate affect your health and your weight and how the science of their metabolic effects can firmly place us on the path to becoming energized and lean-for-life.

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**"Belief without understanding is stupidity. Mere generalized statements (like eat everything in moderation) without sharp, specific conclusions are meaningless." —Brian Scott Peskin**

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## Supplementation?

For those concerned they may not be getting all the nutrition they require from today's processed foods, I believe, based on years of research, that a "must have" in your supplement regimen is a unique combination of omega-6 and omega-3 oils. Along with other research scientists, I have concluded (and it is now explained in the medical journals), why "PEOs" will fortify you against a multitude of commercial food processing-related ills that have a common cause. Aside from providing essential nutrition for your body as explained below and more fully in other chapters of this book, their benefits include helping to naturally fulfill your appetite and reduce cravings, helping us all to become lean-for-life and energized.

PEOs are *unprocessed*, natural, parent essential oils – commonly called "EFAs" – that your body can't make on its own, but that every one of your 100 trillion cells requires. These special fats make it possible, among other important functions, for oxygen to reach the cells. We emphasize that you must get the PEOs (Parent Essential Oils) – not the mistakenly termed EFAs – because stores sell oils they call "EFAs," including fish oils, which are *not* the vital parent forms. Science is exact in its prescription for optimal health, so "sort of" following the correct path can often be worse than not trying at all. While most people – and too many supplement manufacturers – don't distinguish the parent EFAs from the "derivative" EFAs, it is vital for you to know the difference.

"Parent" means the *whole* form of the essential oil as it occurs in nature before it's broken down or built up into any of its component derivatives. Your body doesn't need or want to consume many of the derivatives, because it makes its own out of the PEOs you consume *as necessary*. Taking fish oil and

other health-food store “EFAs” can overdose you with derivatives and harm your health.

For the above reasons, PEOs should be a significant part of your diet. A second important point is that it is imperative to make sure that you are taking *more unprocessed*, natural, parent omega-6 than parent omega-3 – **more than** one part parent omega-6 to one part parent omega-3 and **less than** 2.5 parts parent omega-6 to one part parent omega-3 – and **no fish oils**. This recommendation is based on the physiology of your body, not the erroneous opinion that is leading everyone to “overdose” on omega-3! Of course, you can and do need some parent omega-3, but a relatively small amount. Personally, I’ve found at least 3,000 mg. of PEOs in the above proportions can make a noticeable difference in reducing my carbohydrate cravings and in energizing me too. (By the way, in the store, the labels won’t read “PEOs,” so you will have to look for “EFAs” or “EFA oil” meeting the above description.)

I also recommend the following:

A supplement with conservative amounts of at least eight essential minerals: magnesium, manganese, iron, chromium, boron, copper, selenium, and zinc. These minerals may be missing from your food. Also be certain the mineral supplement you take contains “truly chelated” minerals. **True chelation** is a process that ties the minerals to amino acids in the correct form for full utilization by your body. Minerals are coenzymes. This means they work in conjunction with the vitamins in your food to assist all of your important biological processes. Minerals can help your body to function up to a million times more efficiently than without them. Many vitamins are still found in our food, so taking a mineral supplement is even more important than taking a vitamin supplement!

I also highly recommend a gentle herbal optimizer based on the long-standing Essiac<sup>®</sup> concept formula. Versions are available with Cat's Claw Bark and even Fulvic.

These three vital supplements work amazingly well together, along with my dietary recommendations. Ask your local health store.

I DON'T recommend overdosing on protein-powder supplements. Your digestive system is made to work by eating REAL FOOD, not predigested food. Heed my warning, or later in life you will pay a big price for teaching your system to be lazy.

## **One last thing—Carbohydrate Addiction**

Everywhere I travel I hear the same thing; women complaining that they will never be able to lose their addiction for sweets—a carbohydrate addiction. But if *I* can do it, anyone can. I USED to crave two large pizzas a week. I would bring them home and eat them all by myself at 10 p.m. before going to sleep.

I would also crave hot fudge sundaes and vanilla cake with chocolate frostings galore. Banana splits were my favorite and I needed plenty of them. Things are different now ... carbohydrate-laden foods simply no longer have appeal. Following my program has solved the carbohydrate addiction for me and for people around the world. Two secrets are revealed that make being lean-for-life easy. It makes no difference how much you currently weigh, your sex, your nationality, your religion —nothing! All you need to do is trust the science behind the program for a mere 24-hours at a time.

For your sake, keep an open mind and read on....

*— Brian Scott Peskin, July 2007*

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Note: This book started at the request of physicians for me to make a strictly science-based medical “report” they could give to their patients, with confidence the information was solid. I am delighted to expand the original material and make it available to physicians, their patients...and YOU.

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**Brian welcomes your  
comments and questions.**

He can be reached by e-mail at

**prof-nutrition@sbcglobal.net**

and will answer your  
questions as his schedule permits.

Discover more at

**www.24-hour-diet.com.**

**Visit us for a wealth of  
information about how  
best to stay lean-for-life  
and energized.**



# SECTION ONE









## Some Questions & Answers About the Program

**Prepare to be shocked at how we are being misled** by nutritional “experts.” If your weight-loss advisor doesn’t know the following essential ideas, you can kiss becoming lean-for-life and energized goodbye.

*Q: My nutritionist insists that lots of fruits and vegetables are the gateway to good health. Why do you recommend minimizing them? Can I get a vitamin deficiency from not eating enough of them?*

A: Their recommendations, while they sound good, are not based on medical science. I get numerous calls from vegetarians who become overweight by following this harmful advice. Excessive sugar consumption from fruit juice and excessive starchy carbohydrates from vegetables, grains and legumes are all not good for you. Did you hear of anyone suffering

from scurvy recently? No, I didn't think so. An "apple a day" is fine. However, drinking a quart of apple juice a day will keep you overweight. Enzymes, which are proteins, are broken down by the low pH of your digestive system. Your body makes its own enzymes. You will soon discover why fiber irritates your delicate colon. (See chapter 5 and appendix VIII.)

**Q: *My neighbor told me that I would produce too many dangerous ketones from a low-carbohydrate diet. Is this true?***

**A:** No. Contrary to popular opinion, ketones are vital to your heart, muscles, and brain. Because ketones are required for fat-burning, understanding them is essential in your quest to become lean-for-life with boundless energy. (See chapter 6.)

**Q: *My cardiologist strongly advised me to stay away from foods containing fat because my mother died from a heart attack. Should I avoid butter, cheese, and meat so I don't follow in her footsteps?***

**A:** Once again, well-intentioned advice is wrong. Your physician needs to distinguish between adulterated fats like hydrogenated fats and trans fats versus healthful essential fats containing fully functional PEOs such as those I recommend in the **Peskin Protocol™**. Enjoying saturated fat is one of the secrets to becoming lean-for-life. There is no saturated fat in clogged arteries. That's right, none. Adulterated, processed fat – NOT saturated fat – is the major component in the killer clogs responsible for many heart related deaths each year. When you eat refined baked goods you are getting trans fats, hydrogenated fats, and adulterated oils, too, from the Crisco®, margarine and processed cooking oils (See chapter 6.)

**Q: *I've been taking fish oils for years. You are the only one I've heard of who doesn't recommend them? Who do I listen to?***

A: Don't listen to anyone; instead follow the science and see where it leads. Superbly performed experiments tell us fish oil is worthless at best and harmful at worst because it overdoses you on omega-3 derivatives. Science also tells us that parent omega oils in the correct ratio that your body demands are the answer. Top medical journals have recently reported the hazards of fish oil, but you probably haven't seen them. (See chapter 6 and appendix XIV.)

**Q: *Why don't you recommend drinking at least 8-10 glasses of water a day?***

A: Like other ill-conceived recommendations, this was reversed years ago but never reported by the popular health and nutrition media. "Force-feeding" yourself water *when not thirsty* is one of the worst things you can do if you want to stay lean-for-life. You need to keep your body hydrated, and this is naturally accomplished with a normal diet. There is significant water in most foods. For example, even steak is over 50% water AFTER COOKING IT. That's right—I'll bet you can't find even one nutritionist who understands this critical fact. (See chapter 10.)

**Q: *I am intrigued by the statement that more exercise isn't required to get lean and stay lean. If running and aerobics don't help most of us to lose weight, then why is everybody doing it? Isn't "heart health" important, too?***

A: Extra exercise isn't working to keep America thin. Your heart is naturally "healthy" and 100% oxygenated with the proper diet. The heart beats 100,000 times a day. Anyone suggesting that your heart needs more aerobic work needs to have their

head, not their heart, examined. Excessive exercise actually makes many of us get fatter faster because of the increase in appetite and food cravings all that exercise causes. It stimulates us to eat more of those fattening foods than the exercise can counteract. Recommendations for Americans to get more and more exercise have failed miserably. As a nation, we have never been more exhausted or fatter in spite of exercising more than ever before.

**Q: *Won't eating six small meals a day boost my metabolism?***

A: Wrong question. “Boosting your metabolism” is only part of the picture and a naïve approach to the problem. Increasing your metabolism is a systemic effect (it affects your entire body) and no one has looked at all of the possible effects of this recommendation on your body *as a whole*. Your goal should be to maximize fat burning AND at the same time decrease your cravings for fattening foods. Without both parts working together, you can't become lean-for-life and energized. (See chapter 2.)

**Q: *I've always heard that too much protein is harmful to the kidneys and leaches calcium out of the bones. How much protein should we be eating daily?***

A: This is another common mistake made by those with a woefully inadequate understanding of human physiology and biochemistry. Nutritionists made a fundamental mistake in analyzing why protein was found in their patients' urine. It turned out only *uncontrolled diabetics* not taking enough insulin had protein spillover. For virtually everyone else, including diabetics taking sufficient insulin, protein can't even enter a kidney. Also, protein DOESN'T leach calcium from bones. Daily consumption of *animal-based* protein – such as cottage cheese, eggs, poultry and meat – makes becoming and staying lean-for-life easy. (See chapter 7.)

**Q:** *I feel so great while eating carbs. How could they be bad?*

**A:** Think about what it is you like about carbs. Would you eat pasta or rice or a plain bagel without something on it like butter or sauce? Of course not. So it isn't really the carbohydrate that you want. Instead, it is what you put on it or in it that you desire. Furthermore, because of the insulin response, the more carbs you eat, the more food you want. This response short-circuits Nature's natural fat-burning mechanism and makes you overweight-for-life. (See chapter 5.)

**Q:** *Carbs give me so much energy before my workouts. Is this the best source of energy?*

**A:** IF weight-loss is your primary exercise goal, this is the WORST thing you can do. This ill-conceived recommendation is the number one reason for America's failure to achieve significant weight loss in spite of constant exercise. Most people exercise to lose body fat. With this goal in mind, stay away from carbs before you exercise. (See chapter 5.)

**Q:** *The best way for me to diet is to count calories. Why do you say that calories don't really count?*

**A:** What you refer to is called the "calorie theory" of weight-loss. It was **disproved in 1893** by physician and medical physicist, Aldoph Fick, M.D. Humans aren't heat engines; we are chemical engines, so just analyzing the calorie content of foods is overly simplistic. Much more insight is required to make use of the calorie theory and you will have it shortly. (See chapter 4.)

**Q:** *What is the best way for me to get rid of my flabby stomach?*

**A:** Unfortunately, scientifically there is no such thing as "spot reducing." When following *The 24-Hour-Diet™* you will lose

weight proportionately everywhere. But keep in mind that every ounce of carbs takes three ounces of water to process. This is why many people notice that their stomach bulge quickly disappears when they reduce their carbohydrate intake.

**Q: *When I've tried to go on a low carb diet, I feel weak and tired, not energized. How can I avoid this?***

**A:** Two issues: First of all, most low carb advocates have you remove too many carbs at once, much too quickly. I'm a "systems guy" – and I understand the essential insight that "When one thing changes, everything changes." Therefore, I always recommend shifting to fewer carbs over 2-4 weeks; NEVER instantly. That is too much of a shock to your system. Second, most of us have an impaired metabolism from being on what I call the 50-year carbohydrate-eating *experiment*. Fortunately for most of us, this can be fixed (See chapter 5.)

**Q: *Do I need a lot of fiber in my diet?***

**A:** No. You want less fiber in your diet, since it irritates your delicate colon and recent studies show it actually increases your risk of colon cancer. Think of fiber as a drug which stimulates you to artificially eliminate waste products. Cats don't eat any fiber because they are obligate [restricted to a certain method of eating] carnivores. Do cats need daily enemas because they get constipated? Of course, not. We keep getting misled, don't we? Let your body naturally tell you when it's time to evacuate the system. (See chapter 5 and appendix VIII.)

**Q: *I keep hearing about the "fat gene" and the hormones leptin and cortisol. What are they? Are they the reason I'm overweight?***

A: Because everyone is looking in the wrong place, the “hormone” solution is wrong. In 1996 Dr. Robert Considine thought he had found the “fat gene” in mice. This area of research has proved worthless in humans! Nor does becoming and staying lean-for-life have anything to do with leptin, since obesity is all about what’s on your dinner plate, PERIOD. Cortisol is a stress-released hormone and a lot of hoopla has been made about those under a lot of stress increase their body fat as a precaution for hard times ahead. I am embarrassed at such a silly notion that there is more stress today than in the 1800s. Utter nonsense. (See chapter 6.)

Q: *Is there any science behind the recommendations about not eating different foods at the same time? I think they call it food combining based on the food’s acid or alkaline measure.*

A: No. Because your stomach is extremely low in pH, only protein is broken down there; not much happens in your stomach to fats and carbohydrates. These continue to the small intestine where the real action takes place for them. Don’t fall victim to this silly recommendation. The problem isn’t combination of foods, which we all do *naturally* when dining; the problem is overdosing on the wrong food, period. (See Chapter 2.)

Q: *What about “eating right for your blood type?”*

A: If you are interested in science, forget this theory. The very concept that you need to understand 50 or more foods that are good for you but not for me is lunacy. Think about it—do animals get different diets based on blood type? Don’t embarrass yourself by asking your veterinarian this question.

Q: *I can’t digest protein and one of my symptoms is a stomach ache. Why?*

A: With the 50-year carbohydrate-eating *experiment*, many of us, particularly women, have restricted their protein because they have been told it was harmful. You will discover that nothing could be further from the truth; protein is wonderful. The reason for the problem is simple. Digestive enzymes are made from protein. If you minimize protein intake, then your body would be very foolish to manufacture excess enzymes for a food you eat sparingly. Therefore, when adding more protein to your diet, do so GRADUALLY. After 30-45 days, your protein digestive enzymes will once again be manufactured in the quantities Nature intended.

Q: *I have friends that eat lots of carbohydrates and they stay thin. Why?*

A: This is easy. They are either starving much of the time, exercising constantly, or are “diabetic time-bombs!” Exercising lowers blood sugars, and you need to know that ONLY UNDER INTENSE EXERCISE can muscle even use sugar (carbohydrates). If they are thin and not constantly exercising, they are on the verge of becoming diabetic. Their resting blood sugar levels will be elevated. If you are a good friend, you will advise them to have their blood sugars checked.



## 2



# **“Not Gaining Weight” vs. “Losing Weight”—A BIG Difference**

## **Keys to Staying Lean-for-Life**

**My friend and colleague, cosmetic care physician**

Dr. Robert Nemer, told me:

“Brian – **First** make sure the people understand that they need to **stop gaining weight**. After stopping the gain, concentrate on losing more weight, if you think it is required.”

This is brilliant advice. Maintaining your ideal weight requires a different approach from losing weight. If you can’t stop

the weight gain, you have already lost the battle of the bulge. Dr. Nemer insisted that I make sure I convey how important and great an accomplishment it is for an overweight person to stop gaining weight.

Two-thirds of Americans are now overweight. One-third of our children are now overweight. America needs a weight loss and weight maintenance system that everyone can and will follow. This book gives you the delicious tools to accomplish this feat.



**Stopping the weight gain should be everyone's #1 goal.** Once we understand how to stop weight gain we can concentrate on losing those unwanted pounds.

### **Lean-for-Life Issue #1: How do I stop gaining weight?**



By following this program, you will discover that you can eat lots of protein and natural fats such as fish, cheese, eggs, full-fat cottage cheese and yogurt, chicken, and delicious meats, WITHOUT gaining weight!

### **Lean-for-Life Issue #2: What is the most effective scientifically-based method to lose weight?**



This question is much more difficult and has eluded physicians and nutritionists. The problem's solution requires scientific understanding of human physiology and

biochemistry. Let’s look at three important considerations to accomplish our goal:

- a) To lose weight (excess body fat), we must understand how to enhance our body’s natural fat-burning system. Unfortunately, because of decades of misusing caloric information, nutritionists and physicians have often unknowingly caused us to gain body fat even while starving us, because they mistakenly gave the same importance to calories regardless of source: whether they were from carbohydrates, fats, or proteins.
- b) To lose weight (excess body fat), you must have a plan to satisfy your appetite without developing constant cravings. Starving yourself is not an option for healthy living.
- c) The body will either first use the fat in the food you’ve just eaten for energy, or use it for body structure or in numerous biochemical reactions like cell membranes and hormone manufacture.

We must fully understand and address each of these three scientific facts before any weight loss program will work.

### **Lean-for-Life Issue #3: How do I ensure that the weight lost won’t come back later?**



Answering this important question is a key to your success. You can’t have constant food cravings and easily lose weight and keep it off. The key to elimination of food cravings is to incorporate nutrients that *naturally* fulfill the appetite and give your body the nutrition it requires while it is, at the same time, burning excess body fat for energy.



To help you stay full, I recommend taking EFA-containing oils with more parent omega-6 than parent omega-3, as recommended with Peskin Protocol PEOs (Parent Essential Oils).

With the breakthrough science you are about to discover, starvation, willpower, and deprivation are eliminated. You need to understand that human beings are not designed to eat throughout the day like a goat or a cow, but nutritionists and physicians have overlooked our physiology when crafting their recommendations and have contributed to America's obesity epidemic. When you choose the "right" foods, you will be amazed at the amount of delicious food you can eat while still losing those unwanted pounds.

I frequently eat in restaurants, often 4-6 times each week, if not more, and I love food as much as anyone. Most of the week I am in fat-burning mode and a few days a week, like weekends, I change to non-fat-gaining mode while indulging myself. Either way I win, since I choose when I will either maintain or lose weight. Having the flexibility to choose between "not-gaining fat" and "fat-burning" modes is a relief, because you are in control all the time.

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The only choice is which mode you want to be in: fat-burning or "non-fat-gaining" mode. For the first time, with science, weight gain can be eliminated.

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# 3



## ***Fiction to “Fact” in just a Generation (30 years)***

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“A new scientific truth does not triumph by convincing its opponents and making them see the light, but rather because its opponents eventually die, and a new generation grows up that is familiar with it.”

Max Planck—Nobel Prize-winner: physics

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**The information you are about to read is the opposite of “popular wisdom.”** Many won’t believe it, even though this information is scientifically correct. Regretably, these same people are doomed to suffer obesity, chronic exhaustion and cancer and I can’t help them because they *“already know what to*

do.” I pondered how fiction in the medical and nutritional fields often replaces truth.

Nobel Prize-winner Dr. Planck was a brilliant physicist and his quote is one I have often referred to in my written work and lectures over the past decade. I have used this quote to explain why it so often takes good, verifiable science such a long time to be accepted and acknowledged as correct. However, Dr. Planck’s insight explains how both right and wrong ideas take root in our society.

Dr. Planck focused on the reasons it often takes at least a generation for new, somewhat radical scientific advances like quantum physics to be accepted by the mainstream physicists and the public. My question was, “Can this explanation also describe how wrong ideas take hold in a society?” Surprisingly, the answer is yes.

This is the reason that it is “common knowledge” that a healthful diet consists of fruits, vegetables, whole grains, and a minimum of red meat and saturated fat—even though each of these “pseudo solutions” to staying lean and healthy has been scientifically shown to be wrong numerous times in the world’s leading medical journals. Tragically, it still doesn’t change society’s, or most physicians’ mistaken opinions, so they keep recommending what doesn’t work.

It took over a generation (thirty years) for the concept of making protein the foundation of your diet, complemented by natural dietary fats and only limited quantities of carbohydrates, to be recognized as truly healthful rather than the path to self-destruction. With tragic consequences everywhere, complex carbohydrates became, and to some extent still are considered, the “wonder food” for a lost generation.

Mistakes are made so frequently in the medical and nutritional fields because of our body’s resiliency to illness from eating nutritionally bankrupt foods—it often takes decades to see their

ill-effects. Contrast this with other scientific fields where mistakes quickly become apparent and corrections are made equally fast. For example, if an engineer designs a TV poorly or a programmer develops software that frequently crashes, it is immediately corrected. The only ones who have the luxury of being wrong for decades are those in the medical and nutritional fields, because their mistakes take decades to manifest. This is because the human body is such an incredibly well made machine.

However, if you follow their pseudo-scientific silliness (statements and recommendations may sound scientific but aren't based on science), you will be on the path to self-destruction.

Luckily, if you are reading this, you are one of the fortunate few to have the required insight. After you've immersed yourself in this material, you'll possess the essential knowledge necessary to lead yourself, your loved ones, and your generation out of the nutritional darkness and into the light – becoming lean-for-life, energized, and disease-free.

## **Something is Wrong**

You may have asked yourself this question before. How can Americans be exercising more than ever, spending more money on supplements, eating more conscientiously, and still be more overweight and sicker than ever before? Two-thirds of us are overweight. Everyone you know is becoming diabetic, too. You may have asked yourself these questions over and over again, just like I have. The bad news is that we have all been nutritionally misled for the past 50 years. Don't be fooled by those telling you that we are all overeating because of plentiful food. That is NOT the cause of overeating and it bears repeating. House pets routinely have unlimited food in their bowls, yet, when fed properly, they stay lean and healthy. They don't overeat because they are not hungry. We eat mainly because we are hungry, and once full we stop. You will soon discover that, based on my research, even

a “carbohydrate addiction” is a symptom of your body’s desire for a missing nutrient. Fulfilling hunger is the solution to becoming lean-for-life. But how do we actually do this? It’s time to start feeling good about yourself, because you’ll soon have the answer.

## **Who do I believe?**

There is so much contradictory information about food and diet bombarding people from all directions that most people I speak with say that they believe no one. I can’t blame them. However, there is a better answer. **Believe the science, not the person.** It is common to see books by celebrity trainers with results that you can’t duplicate. They become famous because of the people they work for, not the advice they give. The correctness of their programs may be lacking, and much of the success they enjoy comes because they make their celebrity clients follow a very strict regimen that turns out to be impossible for others to follow without the guidance of a trainer who has made supervising weight loss his or her highly compensated job.

Books advocating the strict consumption of only one category of food at a sitting have sold many millions of copies, yet aren’t based on science. All foods can be eaten together and digested just fine, because they are absorbed in different ways by the digestive system—a critical fact their authors overlook. An analogy would be in listening to music. Different tones can be played at the same time—they DON’T COMBINE into a blur, do they? In physics this is termed “linearly independent.” Thank goodness, the same thing—independence of whatever you eat—applies to enjoying our food.

We have books by physicians that don’t contain source references, or are not based in reality. All of these books have one thing in common: opinion, not science, reigns supreme.



Are you starting to get the feeling that we’re talking about “the blind leading the blind?” No one can agree on anything and conventional wisdom advice like “avoid fat” doesn’t help, either. We now have pet food companies pandering to current trends. Cat food now comes with rice. Dog food is composed of grain and vegetables, advertised as “healthy.” No one bothered to review the physiology of a cat or dog; cats can’t process carbohydrates. A lion eats only meat, no grass or grain. Don’t you think it would make sense to look at the physiology of the animal before making dietary recommendations? Because this obvious fact is overlooked we now have an epidemic of diabetic cats! Ask your vet. Years ago, this never happened. Who should you believe? This is the prime question. I repeat, there is only one correct answer — **believe no one. Believe the science, period.**

## **Science takes front stage and comes to the rescue**

The great news is that this book will give you all of the science needed to become lean-for-life with boundless energy with very little effort. For the first time, you will understand that almost everything you have learned regarding health and nutrition from television, magazines, the radio, health books, and “experts” is incorrect. At best they offer a half-truth. At worst, they are plain wrong, and can cause you great harm when you follow their advice.

My idol, Nobel Prize-winner Richard Feynman, said it best:

“It does not make any difference how smart you are, who made the guess or what his name is — **if it disagrees with real-life results, it is wrong. That is all there is to it.**”

As you can see, Professor Feynman states it wonderfully. We've had over 50 years, during which the "experts'" theories HAVE NOT predicted the real-life results. They couldn't work, because none of them are based on science. They are based on opinion that sounds good but was and still is wrong. Actually, that situation occurs a lot in science. But a good scientist changes his views when they don't work. Unfortunately, lack of adherence to this Nobel Prize-winner's undeniable truth hasn't stopped numerous physicians, nutritionists, and other "experts" from giving us wrong recommendations based on opinion, not science. As a scientist, I am saddened that the public has been convinced to follow a dietary road map that lacks any scientific basis.

Because Americans have such strong willpower, we followed correct-sounding but wrong recommendations over the past 50-years, becoming bigger and sicker by the decade. I founded the field of *Life-Systems Engineering Science* to help solve certain problems in human health. The inroads were phenomenal. I discovered that the science in the medical textbooks and medical journals clearly said one thing, but what got published, became "popular wisdom," and was repeated by everyone, often said the opposite. I was shocked to see, in many cases, that **the so-called "solution"** to our weight and health problem **was actually the cause of the problem**. The cause of the problem being touted as its solution explains precisely what went wrong in America. That's why we are the most overweight and sickest nation in the world. We are causing our own demise but don't know it. Nations around the world are following our wrong advice. Notice how sick and overweight these nations have also become.

Scientists already know how to keep us lean-for-life but the popular press misinterprets most of what they say!



## #1 Problem:

The *cause* of the weight and health problem is given as its *solution*! Although there have been attempts by nutritional authors to give you the full story about what is required to become lean-for-life and energized, most of their plans lack critical insight. By following incorrect nutritional recommendations, many of us have harmed our metabolisms. Improper nutrition has made us ill and overweight. We've become perpetually sick, overweight, and exhausted as a result.

Did you realize that when your body stores excess carbohydrates (sugar) as fat it is saving your life? It's true. Your body is removing the sugar from your blood, since the sugar in your blood is regulated to very tight tolerances. Unfortunately, once removed from the blood, the sugar is stored as body fat. You're fatter but still alive.

Look closely at these facts about what you "believe" is correct concerning eating habits, diet, and exercise, compared to the scientific facts. I warn you in advance that you may be shocked at the results on the next few pages.

## **Are you in disbelief?**

In nutrition, science and "conventional wisdom" are at odds. Other fields like physics, engineering, or construction would never allow "conventional wisdom" to trump science. If what sounded right was used as fact, buildings would routinely collapse, televisions would blow up in your face, and telephones would never work. There would be public outrage. But when it comes to our health, we seem to get absolutely nowhere. We are deluged almost daily with information on how sick, diabetic, and overweight everyone is, yet the "solutions" provided are damaging our health or are just plain worthless. Once you discover the science of how you really work, based on simple human physiology and biochemistry, becoming lean-for-life and energized is very easy.

To make it even simpler, I'm developing a cookbook filled with easy-to-prepare, wonderful-tasting foods. My delicious companion cookbook – *Cook It Cool!: Rapid Recipes for Becoming Lean-for-Life* – will make staying lean-for-life easy.

Popular Opinion “Expert” Advice	Scientific Fact
1. Eat small meals and snacks; 6-8 times a day. This is the best way to lose weight and not be hungry.	The more often you eat, the hungrier you are. If you eat more than 3 times a day, you’re on your way to becoming overweight and/or diabetic. The pancreas is designed to produce insulin just twice a day.
2. Carbohydrates are your body’s preferred energy source. You need lots of them.	Carbohydrates are non-essential. Your body makes the carbohydrates required from your own body fat and the protein you eat. No one ever suffered from a “carbohydrate deficiency.” However, there are protein and essential fat deficiencies – unlike carbs, these must come from food, your body can’t make them.
3. We require at least 8-10 glasses of water each day.	Wrong. This overdose dilutes your blood chemistry, and causes you to be constantly hungry and over eat.
4. Aerobics and running burn lots of fat; are heart-healthy and wonderful for my cardiovascular system. You need to exercise at least an hour a day.	Wrong. It can take up to 40 days of running an hour a day just to lose 1 pound of body fat. Aerobics and running do nothing to improve your cardiovascular system or longevity. Marathon runners routinely die of clogged arteries.
5. Eat plenty of carbohydrates for energy before working out.	Wrong. Consuming carbo before workout completely short-circuits fat burning and stunts production of human growth hormone that makes muscle.
6. Protein harms kidneys and causes osteoporosis.	Wrong. Protein is great for kidneys and decreases osteoporosis.
7. Bodybuilding to increase muscle is extremely time consuming and difficult. Running and aerobics is best.	Wrong. The <i>Exercise-Less™</i> Program gives you exceptional muscle growth, and takes just 15 minutes, twice a week. Increasing muscle is the best way to minimize fat and reshape your body.

<b>Popular Opinion “Expert” Advice</b>	<b>Scientific Fact</b>
<b>8. Fats like butter and eggs make you fat and clog arteries.</b>	Natural fats like butter and eggs keep you lean and prevent heart disease.
<b>9. Calories are all that count. It makes no difference what food they come from. All that matters is: Calories in – calories “burned up” = fatness.</b>	Wrong, again. Dr. Adolph Fick disproved the calorie theory in 1893! Calories DO count, but not in the way they’re telling you. The human body is NOT a heat engine like a furnace that burns fuel (food) for heat. We are eating for structure – to make muscles, hormones, enzymes, antibodies, cell membranes, nerve structure, etc.
<b>10. Everyone is different. Physically, we all require something different from everyone else.</b>	Wrong. We are much more alike than we are different. Humans all have the same essential biochemistry and physiology.
<b>11. Everyone needs to take a multi-vitamin supplement.</b>	Wrong. Vitamins are still in our foods. What you need is a supplement to replace the healthy essential oils your body can’t make on its own, no longer in many foods. Also, supply 8 essential minerals your body can’t make on its own, missing in the soil due to modern farming methods. Most Americans have been “magnetizing out” critical minerals because of harmful phytates from overdosing on carbs! Diabetics require additional minerals because high sugar levels deplete them. And a daily cleanse is needed because of the barrage of pesticide residues, hormones, steroids, and preservatives in our foods.

Fiction to “Fact” in *Just a Generation* (30 Years)

Popular Opinion “Expert” Advice	Scientific Fact
12. Everyone needs to take more calcium to prevent osteoporosis.	<i>Textbook of Medical Physiology</i> lists 6 causes of osteoporosis and lack of calcium is NOT on the list. Overdosing on calcium supplements can cause calcification of plaque - the last stage of artery blockage. Excess calcium makes bones more brittle and doesn’t improve interior bone matrix.
13. Everyone needs more fish or fish oil caps.	Fish and fish oil do nothing to prevent heart disease. Fish oil supplements actually lower your immune system and can contribute to cancer risk.







## **The “Calorie Theory” Is Incomplete: How and When to Count Calories**

**For decades, we have all been told that “calories”** consumed minus “calories” expended equals the amount of weight gain or loss. But this overly simplistic view has caused widespread suffering, because when it fails, the dieter feels responsible for the failure. I want to make it very clear that the “experts” have failed *you*, and this chapter explains how.

### **The “Calorie Theory” Was *Disproved* by Physicians Over 100 Years Ago, in 1893!**

It’s hard to believe, but many nutritionists and physicians have an incomplete understanding of how food is used by your

body. That's right. This misunderstanding leads to a variety of problems. The "calorie theory" of weight gain and loss has led everyone down the wrong path because it is incomplete. But a real understanding of how calories work will allow you to make practical use of this misunderstood theory and become lean-for -life.

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**Calories DO count, *but not the way* they're telling you.**

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There is much more to how you become overweight than just "more calories consumed than burned up." Physicians, nutritionists, and the popular press all promote the idea that the calorie content of food is the whole story. Unfortunately, they do not fully understand how your body distinguishes among carbohydrates, fats, and proteins. Each of these three different food groups has a different role in the human body. Therefore, the body treats each food group very differently. Let's investigate the science that the calorie theory of weight loss is based on.

Most nutritionists believe in the heat engine analogy. Engineers call this field thermodynamics, and I studied it. But humans are *not heat engines*, burning everything we eat like wood in a fireplace. Calorie theory proponents ignore the fact that humans eat for structure — making muscles, hormones, enzymes, antibodies, and bones — not merely to generate energy by "burning" the food. If we must make a comparison, a body is much more like a *chemical factory* than a *heat engine*. As a *chemical factory*, we *convert food* into complex substances and structures. Furthermore, our body maintains the same temperature throughout. If the heat engine analogy was correct we would measure a vastly different temperature between our feet and our head. We don't.

The great news is that certain foods can be eaten that will NOT make you fat—regardless of calorie content.



Here's a novel concept: eat when you are hungry; but when hungry, eat foods that your body wants and needs for structure.

## **No One Eats “Calories”**

No one is eating “calories.” We eat food. “Calories” are merely a measure of *possible* energy available from burning each food. This measurement *doesn't* take into account what that particular food is being used for by your body. To make the calorie theory useful, we need to explore its inner workings and be able to answer some very interesting questions.

## **The Calorie Theory FAILURE—A Real-Life Example**

In April 2003, Harvard University found people on a low carbohydrate diet could **eat 25,000 more calories** than those on a high-carbohydrate diet and at the end of the 12-week study they **gained zero pounds!** That's right, no weight gain. The director of the study was mystified because she too had believed that a calorie is a calorie, regardless of what food it comes from.” She, like all of us, had been taught that “calories in minus calories burned equals how fat we get.” This researcher is more than 100 years out of date. There is much more to becoming overweight than this overly simplistic idea.

Let's investigate the calorie theory in more detail, because it is interesting and you really need to understand it to become lean-for-life. If it were true that "Calories consumed minus calories expended EQUALS net calories STORED," then for every 3500 calories an individual had eaten that hadn't been expended for energy (net calories), they would gain one pound.

Conversely, if the person had eaten fewer net calories than they expended for energy, then the individual would presumably lose weight using the same 3500 calories per pound. It may sound right, but bodies don't actually work this way.

In 1893, a remarkable, renowned medical physicist and physician named Aldoph Fick, M.D., disproved the calorie theory. Any physicist or engineer will be familiar with Dr. Fick's famous "diffusion equation," which quantified flow through thin membranes. Physicians should know of it, too. But they won't know about the rest of his important work – the part that puts us firmly on the path to becoming lean-for-life.

**We will make great use of Fick's discovery soon.**

Many of the machines used in industry are heat engines. An engine driven by steam produced by the burning of coal in a boiler is a familiar example of a heat engine. However, heat is not a useful way of transferring or storing energy in *biological systems like humans*. Living organisms are basically isothermal (equal-temperature) systems; there is no significant temperature gradient—that is, difference in temperature—among the various parts of the cell or the various cells in a tissue. *Cells cannot act as heat engines, for they have no means of permitting heat to flow from a warmer to a cooler body.*

As we have already discussed, the reason why the "calorie theory" is wrong is because you aren't a simple furnace burning coal for heat. Hans Krebs, a Nobel Prize-winner, mentioned this

in his book about another Nobel Prize-winner, Otto Warburg, M.D., Ph.D.:

“Fick **made it clear in 1893** that *living cells cannot be heat engines...*”<sup>1</sup> (emphasis added)

Can it be any clearer? No. What that means in simple terms is that it is an unscientific oversimplification to just convert all foods to a caloric equivalent and think that is going to dictate how much of your food is burned as energy, versus how much is stored as fat.



The **type** of food has everything to do with how the food is utilized by the body. **Not all foods are simply burned for energy.**

## **Everyone Knew the “Calorie Theory” was Wrong in 1961 but It’s Been Forgotten Today**

The “theory” was further discredited by Herman Taller, M.D. in his masterpiece (now out of print) titled *Calories Don’t Count*, published by Simon and Schuster in 1961.<sup>2</sup> The amazing information on pages 32-37 and 116 confirms my belief that too often physicians either don’t read or don’t believe the results

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1 Hans Krebs (in collaboration with Roswitha Schmid), *Otto Warburg: Cell Physiologist, Biochemist, and Eccentric*, translated by Hans Krebs and Anne Martin. (1981: Clarendon Press- Oxford University Press, New York). Note: Book is now out of print.

2 Herman Taller, M.D., *Calories Don’t Count* (New York: Simon and Schuster, 1961) pp. 32-37, 116.

published in their own medical journals. Just like the rest of us, physicians often don't know who or what information to believe. Because so much information published in their medical journals is later reversed, they are as lost as the rest of us when it comes to understanding how to stay lean-for-life. Here's exactly what was published back in 1961:

- ***“If the body took in more calories, these physicians believed, the extra calories would be converted into fat. Many still hold this belief. Entrenched medical theories, however erroneous, are a long time in dying.***
- ***“For the biochemistry of the body all calories are not the same.***
- ***“To say that a specific number of calories will make you fat is as silly as it is to say that a certain number of microbes will make you sick. What kind of calories? What kind of microbes? The calorie theory became the rage ....***
- ***“[B]ut physicians and scientists were so deeply involved in the calorie theory that many were determined to protect it at all costs – [even if it defies all logic!].***
- ***“[O]ne could assert with absolute certainty that the calorie theory had no scientific basis whatsoever.”***  
(Emphasis added.)

Dr. Taller states, “No scientific basis whatsoever.” That's pretty clear-cut, isn't it? It is refreshing to see an anti-obesity solution that fits the facts—to see the science of biochemistry actually being utilized by these researchers, as well as deductive reasoning. Today, sciences like biochemistry and physiology are

overlooked because opinion and politics have replaced science in the fields of human health and nutrition. What a tragedy.

Rather than looking at “calorie content” of food, it makes more sense to understand how a food affects your metabolism and ultimately, weight gain and weight-loss. Let’s call this measure the food’s “**utilization factor**.” We explore this new concept for staying lean-for-life in Chapter Eight. Armed with this knowledge, you can then make better choices.

## **Today, They Still Don’t Get It—The Truth Was Forgotten**

You already understand more about the limitations of the calorie theory than most physicians and nutritionists today. Understanding why a nutritional concept is wrong will enable you to become lean-for-life faster. With so many nutritional experts offering conflicting views, separating right from wrong is fundamental. Armed with this new knowledge, you will begin to understand when and why a nutritional concept is right. The 2003 *Houston Chronicle* article, “Low-Carb Dieters Can Eat More,” about the Harvard study I mentioned earlier, concluded:

The low-carbohydrate group consuming 25,000 extra calories than the high-carbohydrate group *did not gain the expected 7 extra pounds* that “calories consumed” predicted. The Harvard researchers admitted that this finding “**strikes at one of the most revered beliefs in nutrition: A calorie is a calorie. A lot of assumptions about ‘a calorie is a calorie’ are being challenged.**”<sup>3</sup>

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3 “Study: Low-Carb Dieters Can Eat More,” [directed by Penelope Greene, Harvard School of Public Health], *Houston Chronicle* (14 October 2003), p. 9A.

Even though experiments and studies reinforce the *real-life* results that have repeatedly disproven the calorie theory, today's "experts" haven't caught up.

It is astounding that these scientists were still referencing a belief that "a calorie is a calorie" rather than Dr. Fick's over-100-year-old proof that human bodies are not heat engines! Since when do we require any "belief" or opinion at all when it comes to human physiology and biochemistry? Facts and *real-life* results are all that matters. Nobel Prize-winning physicist Richard Feynman reminded us that the *real-life* results of a theory are what really count in scientific inquiry:

"It does not make any difference how smart you are, who made the guess, or what his name is – **if it disagrees with *real-life* results, it is wrong. That is all there is to it.**"

This quote is from my idol, Nobel Prize-Winner in Physics, Richard Feynman. Unfortunately for millions of us trying to do what we think is right; today's obesity researchers don't follow this mandate and often lead everyone down the wrong path with their wrong nutritional advice.

## **Portion Control Takes a Hike!**

As the above mentioned article clearly states, "**A lot of *assumptions* about 'a calorie is a calorie' are being challenged.**" The prime focus and number one recommendation in most diet programs consists of eating smaller portions, which translates to lower caloric content in a meal. However, you have already discovered that the "calorie theory" is incorrect, so the great news is that portion control is *not* an issue with *The 24-Hour-Diet*™. Incidentally, we also do not recommend eating many meals throughout the day and night, because it is foolish to needlessly stress your pancreas (a primary digestive organ).



Just ahead, you'll see the results of one of my American client's on three different diets. It is illuminating to carefully examine the diet that helped Jill lose the weight she desired. At the same time, you will see the two unsuccessful, yet lower-calorie regimens that Jill tried, and ultimately abandoned.

## **Jill's Real-Life Results with Three Diet Plans**

"The first diet plan is representative of the food I ate when I kept gaining weight. The second plan is the food I ate years ago when I was dieting. The third plan is a sample of what I eat now. I'm thrilled because I am now 'lean-for-life,' as you like to say!"

(See next page.)

**Jill's Diet Plan #1:  
Low-Calorie**

	<b>Calories</b>	<b>Fat (gm)</b>	<b>Carbs (gm)</b>
<b>Breakfast</b>			
2 cups raisin bran	340	2	82
1 cup skim milk	90	0	13
<b>Lunch</b>			
turkey sandwich	70	1	13
mayo	90	10	0
2 slices wheat bread	100	2	20
grapes	87	0	23
<b>Snack</b>			
2 cookies	120	5	17
<b>Dinner</b>			
boneless chicken breast	154	1	0
rice 3/4 cup	136	0	33
salad	30	0	5
Italian dressing	120	14	1
<b>Dessert</b>			
frozen yogurt, low fat, 1 cup	179	2	32

<b>Totals</b>	<b>1,516</b>	<b>37</b>	<b>239</b>
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**Results:**

- Couldn't stop gaining weight
- Tired constantly
- Hungry all the time
- Got sick easily.

**Jill's Diet Plan #2:  
Very Low-Calorie**

	<b>Calories</b>	<b>Fat (gm)</b>	<b>Carbs (gm)</b>
<b>Breakfast</b>			
1 cup wheat/rice flakes	100	0	25
3/4 cup milk	68	0	10
1/2 banana	50	0	13
<b>Lunch</b>			
1/2 turkey sandwich	70	1	6
mustard	0	0	0
1 slice bread	50	1	10
cantaloupe, 1 cup	60	0	14
<b>Snack</b>			
diet cookies	111	3	20
<b>Dinner</b>			
salmon	190	10	0
brown rice 3/4 cup	144	1	30
salad	30	0	5
low fat dressing	50	2	7
<b>Dessert</b>			
peach sorbet, 1/2 cup	130	0	33
<b>Totals</b>	<b>1,053</b>	<b>18</b>	<b>173</b>

- Results:**
- **Starving all the time**
  - **Diet is NOT maintainable**
  - **Weak and tired**
  - **Irritable**

**Jill's Diet Plan #3:  
High-Calorie**

	<b>Calories</b>	<b>Fat (gm)</b>	<b>Carbs (gm)</b>
<b>Breakfast</b>			
1 cup organic oatmeal	160	3	27
1 tsp brown sugar	15	0	4
10 raw almonds	90	7	3
<b>Lunch</b>			
grilled chicken on salad	154	1	0
2 Tbs olive oil &			
1 Tbs bals vinegar	265	28	2
2 flatbread crackers	71	1	13
1 Tbs organic butter	100	11	0
organic cheddar cheese	110	9	0
1 1/2 Tbs coconut oil			
for grilling	187	21	0
<b>Snack</b>			
cantaloupe	60	0	14
49 pistachio nuts, raw	158	13	8
<b>Dinner</b>			
flank steak, 6 oz.	360	19	0
broccoli w/ 1 Tbs olive			
oil/garlic	180	15	11
roasted potatoes			
w/onions	165	7	26

No Dessert - *Not Hungry*

<b>Totals:</b>	<b>2,075</b>	<b>135</b>	<b>108</b>
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**Results:**

- Lost excess body fat easily
- Easy to keep weight off
- Energetic and not tired all day
- Not hungry all the time
- Rarely sick
- EXCEPTIONAL blood chemistry!

The specific reasons for Jill's success — which “conventional wisdom” can't explain, but science easily *can* explain — will be well detailed in the following chapters. Understanding why the calorie theory failed will give you the foundation to succeed in becoming lean-for-life without suffering denial of your favorite foods.

## **Do I Need to Increase My Metabolism to lose weight?**

No, a “slow” metabolism is not making you fat. This fact bears repeating because everyone incorrectly makes calories the fundamental issue when nothing could be further from the truth. A Formula 1 race car has a “fast metabolism.” The car also has a CORRESPONDING “appetite increase.” That's why it gets only about 3 miles per gallon of fuel — the car eats a lot of fuel because it is hungry all the time.

If your metabolism increases, the typical corresponding human response is that you are also hungry all the time. That's why bodybuilders are forced to eat all day long. A fast metabolism alone is not “the answer” to becoming and staying lean-for-life. The answer to becoming lean-for-life is to stay in *fat-burning* mode longer (you'll soon discover the secret to making this happen), yet *not* have to eat all day long. You will also discover the secret to staying full and content throughout the day while your body is in maximum fat-burning mode, even while you sleep.

## **The NO Denial Strategy**

Jill's *real-life* results highlight the shortcomings of the calorie theory of weight-loss. There is plenty of fabulous food we can eat, including delicious ice creams and chocolate brownies that fill you up — not out. How to naturally fulfill your appetite is the fundamental question with certain types of

*natural* fat being the solution. When we don't get enough of them our appetite switch is always "ON." You will discover in the following chapters the keys to staying full and satisfied, while enjoying plenty of fabulous food – and while pulling the plug on pounds.

## **One Last Time: Our Bodies are Analogous to a Chemical Factory**

This bears repeating. Humans are *not* heat engines – we have the same temperature gradient throughout the body (98.6 °F). A car engine works because the bottom of the engine is much cooler than the top area where the gasoline explodes at the piston. This science is called thermodynamics. In contrast, humans have the same temperature throughout the body. Everyone is making an improper analogy between humans and automobiles and leading them astray in the field of weight loss and human physiology. We are *chemical* engines – not simple furnaces.

Next we will begin our discussion of carbohydrates. We will use our new discovery about how the body really works and apply it so we can understand the difference between "not gaining more weight" and "losing weight." We will start by giving you the full story about carbohydrates. Prepare to be amazed.....

# SECTION TWO







**Carbohydrate Addiction:** Everywhere I travel I hear the same thing, women complaining that they will never be able to lose their addiction for sweets—a permanent carbohydrate addiction. I am sympathetic to the carb addict, in the same way I am sympathetic to the drug addict. My comparison is not meant to be funny. Both addictions will kill you. With one you'll die with a needle in your arm, while with the other your loved ones will find you face down in a tub of ice cream. (OK, a little humor doesn't hurt.) Seriously, in both cases your body is craving a substance we know is harmful. When it comes to drugs, would anyone suggest continuing this devastating addiction? Of course not. In the same way no one should suggest feeding your carb addiction. I understand what being a carb addict feels like. I USED to require two large pizzas a week and I'd eat them myself at 10 p.m. before going to sleep.

I also REQUIRED hot fudge sundaes and vanilla cakes with chocolate frostings galore. Banana splits were my favorite and I needed plenty of them. Now it's another story... these sweets simply don't hold their appeal. In this section, you are discovering how awful carbs are to your wasteline and to your health.

Following The 24-Hour-Diet™ may cure you of this addiction. It already has for people around the world. It makes no difference how much you currently weigh, your sex, your nationality, your religion, nothing. All you need is a small amount of desire to trust the science you're discovering for just 24 hours. Trust me. You can do this.

My friend Jill says it best. "We went to my neighbor's last night for dessert. It was the best feeling to be able to sit around her table and talk (with the desserts right under my nose) and not feel held captive by the desire to eat them! Because you know how it used to be for you—you take one plateful and then another and then another. I feel so free of that horrible "after dessert binge" feeling! I left her house feeling great! Your program works."



# 5



## Carbohydrates: Sugar in Disguise

### **“Good” Carbs—“Bad” Carbs**

We’ve all been correctly told that there are “good” carbs and “bad” carbs. That concept is scientifically correct. However, once again, the nutritional field gets close, but ultimately goes awry. Let me now briefly explain the difference between the good and bad carbs.

### **“Good” Carb:**

- 1) Does not make you fat.
- 2) Does not significantly raise blood sugar levels,  
AND very importantly
- 3) Satisfies your cravings for sweets.

## **“Bad” Carb:**

- 1) Makes you fat
- 2) Significantly raises blood sugar levels, AND very importantly
- 3) Does not satisfy your cravings for sweets

In general the “Good” carbs are primarily whole fresh fruits (not juice or dried fruits) and the “Bad” carbs are primarily starches and grains. While there are exceptions to this, you will discover that eating fresh fruit is generally far better than eating pasta, rice, and bread.

I know what you are thinking, but as you shall soon discover, the so-called “glycemic index” (GI) is not the answer – GI has nothing to do with any of these requirements.

## **Carbohydrates Make You Fat**

I’ll never forget how, as a schoolboy, I took flour and water and mixed it up to make paste to create papier mâché. This is also how you make pasta. So whenever you see the term “carbohydrate,” think *paste*. It dries hard and sticks to everything in sight – so if paste accidentally gets into a machine or mechanical operating system, it messes up the works.

You will soon discover why carbohydrates are the enemy of your most important operating system, your body.

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Carbohydrates are the #1 reason for acid reflux and “burning stomach.”

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## **What is a Carbohydrate?**

If it isn’t protein, like meat, fish, chicken, or eggs, and it isn’t fat, like butter, cheese, cream or oil, then it is a carbohydrate.

Carbohydrate foods are composed largely of sugars and starches. They include bread, cereal, juice, fruit, certain vegetables, pizza, candy, soda, ice cream, milk, popcorn, rice, pasta, and potatoes. Carbohydrates are everywhere.

But regardless of whether the carbohydrate is “simple” (sugar) or “complex” (starch), sweet, salty or bland, it is still glucose (sugar). All carbohydrates derive from sugar. Fruits and many vegetables are loaded with carbohydrates, while grain foods are almost entirely made up of carbohydrate.



**Carbohydrates are NOT Your Body's Preferred Energy Source!**

That's right. Everyone mistakenly thinks that carbohydrates are your body's preferred energy source—its number one fuel. This is completely **WRONG**. Yet, I have never once heard the truth from any athletic trainer, physician, or nutritionist. This tragic mistake is the primary reason Americans are overweight. We have been misled into making the wrong food the basis of our diets. If the people we trust and follow have such a faulty understanding of one of the most basic nutritional concepts, how can anyone listen to anything they say with confidence?

Here's what *Basic Medical Biochemistry* clearly states on pages 358-359:

**“The body oxidizes [burns as fuel] more fatty acids each day than any other fuel (table 23.1).**

**“Fatty acids [fats] are the major fuel in humans; 540 calories are used in a 12-hour period in the basal [resting]**

state versus 280 calories of glucose [carbohydrate] or 80 calories [an insignificant amount] of amino acids.

*“...So, although there is more glucose in the blood than fatty acids in the blood at any given time, the glucose is not used or replaced as rapidly as the fatty acids.” (Emphasis added.)*

Here’s what the *Textbook of Medical Physiology* (9th edition) states, buried on page 866:

“...[A]lmost all the energy requirements of the body can be provided by the oxidation of the transported free fatty acid **without using any carbohydrates** or proteins for energy.” (Emphasis added.)

### ► Lean-for-Life Commentary

These medical textbooks make it crystal clear that *carbohydrates are NOT the body’s preferred energy source; your OWN body fat is SUPPOSED to be but, as you shall soon discover, Nature’s natural mechanism keeping you lean-for-life is being short-circuited.*

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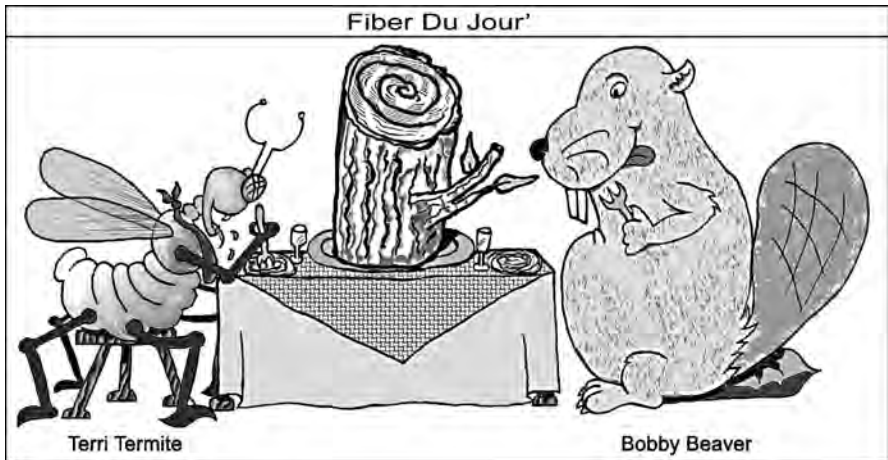
## Carbohydrates are everywhere.

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There’s more that you need to know.

In the chapter, “Something is Wrong,” we will show the physiological similarities between a cat and a human. When a cat, a carnivore, eats grass (fiber) it throws up! Cats are obligate carnivores (100% meat-eaters), which means **a cat shouldn’t eat any carbs**. Throwing up from eating grass exemplifies what happens when a species is given improper food. Humans become overweight and diabetic following incorrect nutritional recommendations. It isn’t your fault. Once you understand the science, becoming lean-for-life is easy.

Let's look at the facts behind the fiber recommendation trumpeted by so many nutritionists. We have had years of "fiber fiction." If only the nutritionists and physicians would have thought through their recommendation before making it, they would have realized fiber is not a food for a human and WON'T satisfy you because there is no nutritional value in fiber for human beings. It may give you the *temporary* sensation of fullness but it doesn't last long.



I went on the record over a decade ago saying fiber is not food for a human being and that it irritates, rather than helps, the colon. I predicted fiber eaters would develop the most colon cancer, and they did! The Cancer Institute finally issued a retraction concerning their recommendation to eat fiber as part of a healthy diet, but that doesn't stop "experts" from heaping praise on a piece of wood as the miracle food for people. The Cancer Institute was forced to admit that colon cancer increased after people included lots of fiber as part of their diet.

Cereal commercials tell you how much weight you can lose by eating "just two bowls a day." You will learn that a meal of two bowls of cereal is not nutritious and will not accomplish your weight loss goals. The ONLY reason for the weight loss is

because you are starving and nutritionally deprived, living on a couple of bowls of cereal a day. They also tout cereal as being heart healthy. Nothing is further from the truth. Having to starve ISN'T an acceptable solution for me, and with the world's most advanced nutritional science, you won't have to starve to accomplish your weight-loss goals.

The *New England Journal of Medicine*, America's premier medical journal and *Lancet*, the world's premier medical journal, published in London, reported the "fiber fallacy" in 1999 and again in 2000.

These medical journals published the truth that those people eating the **most fiber** get the **most colon cancer**! The fiber was found worthless in protecting against colon cancer.

## **This Won't Stop Them**

Because it is so profitable, food manufactures can't resist taking advantage of our desire to do what we believe is right. We are wrongly told that we need lots of fiber. Here's their new additive to ensure you get fiber. I hope you wouldn't use this new "condiment."





That “**dust**” is *irritating* **SAWDUST**! Don’t fall for this. I can’t even blame the food manufacturers for producing a product like this. Years ago ground-up oyster shell was the rage, too. Can you believe it? Of course, they gave it the fancy name called chitosan. Please don’t fall for it again.



**Fiber = Sawdust!**

## **Why Don’t Cats Need Daily Enemas?**

Cats are true carnivores (meat eaters). They don’t want any carbohydrates in their diet and will never eat them on their own. If fiber is required to “remain regular” like your nutritionist will tell you, then why don’t cats require daily enemas? I have two house cats who eat no carbohydrate because I buy them correct food and they eliminate their dietary waste without a problem. Not only are we destroying our own lives with hair-brained ideas on nutrition, we are now hurting our feline friends. Today’s cat food manufacturers put rice and vegetables in their food because people think it is good for them; it isn’t. Also, it’s much cheaper to use inexpensive carbohydrates rather than protein. Regardless of why they make this tragic mistake, we now have an epidemic of diabetic cats, too!

As you see, we’ve had decades of “fiber fiction.” Unfortunately, too few of us heard about the reversal of that recommendation. But if causing cancer by following this wrong advice isn’t bad enough, it gets worse. You can be throwing your hard-earned money for minerals down the drain if you don’t know this:

Natural sources of fiber, such as cereals and fruits, generally have a *depressing effect* on absorption of minerals such as calcium, iron, zinc, and copper.

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This fact was reported by *Albion Research Laboratories*, the world's leading researchers on minerals. But too few of us saw this important paper. Fiber “magnetizes out” the important minerals—in other words, it binds them tightly to itself so they can't be utilized by the body.

Next, let's discuss problems with a diet high in carbohydrates.

## **Carbohydrate “Irritability”**

If you are around a diabetic with high blood sugar, then you already know how irritable and irrational overly “sugared” diabetics become. That awful condition will be a thing of the past when their blood sugar is minimized. Unfortunately, not all health care providers have realized that diabetics *must* reduce their intake of carbohydrates to regain control of their blood sugar. This is covered in detail below.

## **Special Note for Diabetics**

I want to make it very clear that much of what follows applies only to non-diabetics. If you implement these suggestions early enough, you may never become diabetic. If you are diabetic, discuss the recommendations with your physician because insulin requirements or oral medication requirements will likely decrease.

## **Blood Sugar Levels are Balanced Automatically**

I want to make this very clear. Nature designed us to have correct blood sugar levels **AUTOMATICALLY UNLESS you**

*are already diabetic.* We don't need to control our breathing or heart rate, do we? Blood sugar levels are automatically controlled just like breathing and heart rate. This is VERY IMPORTANT to understand.

We learn from *Basic Medical Biochemistry* that:

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Nature doesn't rely on us to have to control blood sugars. Our body does this automatically from stored glycogen and stored fat reserves.

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*Textbook of Medical Physiology* also makes it clear: NOTHING has to be done to maintain normal blood sugar levels in a non-diabetic person. Anyone eating many times a day because they think that they are balancing bloods sugars is harming their delicate pancreas, too. Insulin must be manufactured by your pancreas – insulin isn't stored like we are led to believe. Your pancreas requires lots of resting time.

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Your pancreas is designed to produce insulin (a response to eating carbohydrates) just twice a day, not 4-6 times a day.

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Nutritionists and misled physicians often aren't aware of this critical fact about your pancreas. That is a major reason for the diabetes epidemic.

## **High Carbohydrate Diet Overworks Your Delicate Pancreas**

The medical textbook *Scientific Foundations of Biochemistry in Clinical Practice*, makes it clear: Just 1% of your pancreas is capable of treating all that sugar (carbohydrates).

That's right, a VERY SMALL portion of your pancreas is designed to treat carbohydrates. The remaining 99% – almost the entirety – of your overworked pancreas is *supposed* to treat fats and proteins so you can digest them. But a high carbohydrate diet overloads this 1%, making it do the majority of the work. This medical fact is rarely published.

If you stop insulin generation by decreasing **carbohydrate consumption**, then fat storage will be blocked. **In other words**, all you need to do in order to stop fat from being stored is to stop your body from constantly producing insulin. The only way to do this is to reduce your carbohydrate consumption.

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**Less insulin = less fat storage.**

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Clearly, we aren't designed to be eating a high carbohydrate diet. Are you shocked at how clear this information is?



**Insulin, a response to carbohydrates, makes you fat!**

That's right, and the *Textbook of Medical Physiology* makes it very clear that

- **Insulin causes fat to deposit.**
- When insulin is not available, fat storage is blocked.
- **Absence of insulin causes fat BREAKDOWN – a wonderful consequence and key to becoming lean-for-life.**

Minimize the insulin production and you AUTOMATICALLY minimize fat production and you also reduce existing bodyfat.

## **Carbohydrates Must be Eaten for Fat to be Stored**

Medical textbooks get quite complicated, so the details are at the Scientific Support Section at the end of this chapter. While “everything” is already in the medical textbooks, it isn’t always easy to understand. However, *Harper’s Illustrated Biochemistry* (26th edition) makes it clear:<sup>1</sup>

**“Glycerol 3-phosphate **MUST** be supplied from [dietary] glucose [from carbohydrates] via glycolysis [breakdown of sugar].”**

This complicated sentence means that carbohydrates **MUST** be eaten to supply the critical substance **REQUIRED** for fat storage (a substance called glycerol-3 phosphate).

What this means is that glycerol-3-phosphate only comes from carbohydrate consumption and excess bodyfat can’t be stored without it. Case closed.

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**Carbohydrates = Insulin Production = Fat Storage  
= Heart Attack.**

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## **Carbohydrate Diet Clogs Your Arteries, too.**

As the *Journal of the American Medical Association* makes clear:

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1 *Harper’s Illustrated Biochemistry* (26th edition) “The Provision of Glycerol-3 Phosphate Regulates Esterification: Lipolysis is Controlled by Hormone-Sensitive Lipase (Figure 25-7).

“Elevated **insulin** [generated from eating carbohydrates] causes blood clotting, which **blocks arteries**.”<sup>2</sup>

There you have it: the science clearly shows that overweight and obesity are caused by excess carbohydrate consumption.

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**Excess carbohydrate is your #1 enemy in your quest for becoming Lean-for-Life and energized.**

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Anyone telling you to make carbohydrates the basis of your diet needs to go back to school and learn medical science. In addition to making you fat, carbohydrates prematurely age you and contribute to diabetes. In spite of this undeniable science why do most nutritionists and physicians still say to make carbohydrates the basis of your diet? Because as bad as carbohydrates are the nutritional experts wrongly believe fat and protein are even worse. Otherwise, how could they tell you to follow such an unhealthy recommendation?



Contrary to popular belief, carbohydrates make you fat, period. There are no “good” carbohydrates.<sup>3</sup> ALL carbohydrates are bad to a greater or lesser degree. How little “poison” do you want to take?

## **Minimize the Insulin Output**

The answer is always the same: the human body responds to carbohydrates by releasing insulin. The insulin amount

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<sup>2</sup> *Journal of the American Medical Association*; 2000; 283:221-228.

<sup>3</sup> You shall soon discover an under-publicized BIG EXCEPTION in Appendix IXX.

generated is a critical factor that is often overlooked. Whether the carbohydrate is absorbed “slowly” or more “quickly” into the body is inconsequential, as you shall soon discover. **My standing joke is that, on a carbohydrate-based diet, by eating a complex carbohydrate like brown organic rice instead of candy or soda, you get just as fat – only 15 minutes later!**

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### You Get Just as Fat Eating “Complex Carbs”— Only 15 Minutes Later

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This simple explanation plays havoc with a popular notion that some carbs are better than others, the so-called “good” versus “bad” carbohydrates. Many followers of this approach distinguish between carbs using the glycemic index (GI). This index assigns a value to different carbohydrates based on their *supposed* absorption rate into the human body. There is much controversy concerning the “glycemic index” and its relationship to simple and complex sugars.

But even if you think that there is merit in using the glycemic index, there are other significant problems with using this measure. Professor of Nutrition Julie Miller Jones, Ph.D., at the College of St. Catherine in St. Paul, Minnesota (past holder of the 3M Endowed Chair in Science), has reviewed the current research and tells us of some important Glycemic Index drawbacks. The following excerpts are from her publication “Contraindications and Challenges: A Look at the Glycemic Index”:

**“...Surprisingly, the day-to-day variation in the same subject [person] is often greater than [the] variation between subjects [people].**

**“The food eaten at the previous meal can also affect the glycemic response at the current meal....”**  
(Emphasis added.)

We could devote an entire book to debunking this myth, but instead we will continue to arm you with the information you need to successfully win the war on obesity.

Popular nutritional and diet books tell us that low glycemic index foods, like brown organic rice, have a delayed blood sugar response compared to high glycemic index foods, like soda – this ASSUMED relationship is described by the following graph. These books also tell us that a high glycemic food will abnormally lower your resting sugar level, too. **Both of these statements are WRONG as the ACTUAL experiment shown in the second graph on the next page clearly portrays.** I want you to see the truth for yourself.

I have had women tell me of their success in losing weight by avoiding high glycemic index foods in favor of low GI foods. On further questioning, they admit that they simply stopped eating the high GI foods. **They Did NOT replace them with low GI foods.** Therefore, the bottom line is that the weight-loss came from **decreased total carbohydrate intake, not from substituting one for the other.**

The respected *British Journal of Nutrition* confirmed this upsetting finding:

**“...No association was found between predicted and measured GI.**

**“...There was no association between GI and II [Insulin Index – the amount of insulin generated].**

**“...In conclusion, the present results show that the GI of mixed meals calculated by table values does not predict the measured GI....”** (Emphasis added.)





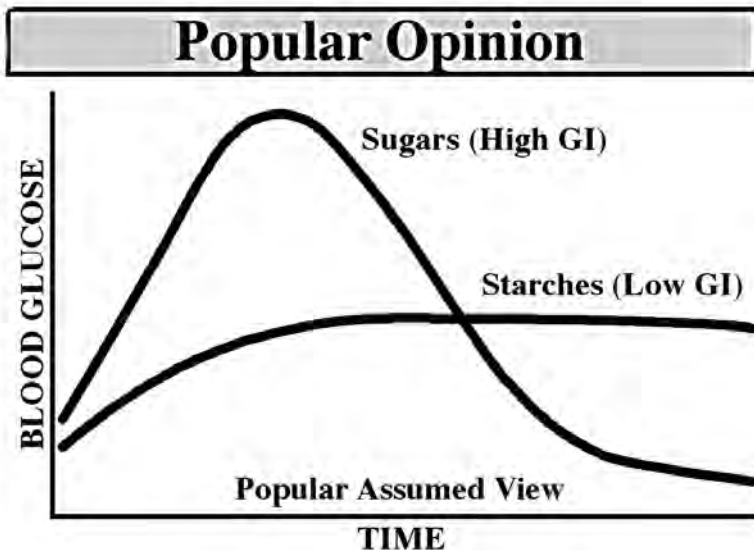
Ice cream has a lower GI than a baked potato implying that ice cream is better for you. There is something **DRASTICALLY WRONG** with this picture.

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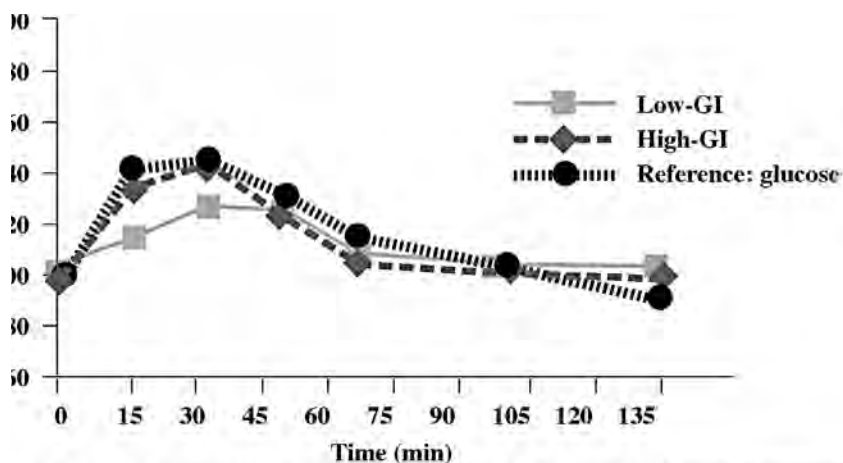
All that matters is the net reduction of **ALL** types of insulin-generating carbohydrates. The type of insulin-generating carbohydrate doesn't matter. Don't be fooled by the real reason for weight loss on a GI-based diet. If you replaced high GI foods with low GI foods in the same amounts you would get just as fat ... a whopping 15 minutes later. Big deal. The **SECRET** of **FRUIT** will be discussed in Appendix XIX.

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Next is a graph of what many people think is the difference between low GI and high GI foods.



Here is the truth:



one Nutritopics (France) • N°28/ October 2003, page 6 by Thomas Wolever, Ph.D., Department of Nutritional Sciences, University of Toronto

In the second graph, people were given 50 grams of various carbohydrates. This is equivalent to approximately ten (10) teaspoons of sugar. (Reference: “Slowly digestible carbohydrates,” Danone Nutritopics (France), No. 28, October 2003, page 6—example of glycemia curves.)

As you can see, from the second chart’s real-life result:

- The “low” vs. “high” GI designations both generate increased glucose levels for approximately 30 minutes—the difference in peak concentrations of the lower GI food is just 0.15 grams/liter—a somewhat insignificant amount. It may look like much more, but it isn’t.

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**Newsflash:** There is only one teaspoon of sugar in your system!

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Because there is only one teaspoon of sugar in your system, this difference is **less than just one-sixth the amount of sugar** in your system, about 15% of the total, which is hardly worth speaking about.

- From the bottom of the chart at 70 to 135 minutes after eating the carbohydrates, **the lower GI food ends with a higher glucose level than the high GI food – the OPPOSITE of what we desire.**



This shows that diet books are written based on a concept that is entirely **WRONG**, and when their plan doesn't work, **YOU** get blamed. How disappointing and unfair!

Reviewing the second graph, it is as though the body ultimately prefers a higher GI indexed food because the *lower* GI food terminates with a *higher* blood sugar level – a bad outcome. A complex carbohydrate and lower GI carbohydrates take just 15 minutes to start entering the bloodstream in the form of glucose, as the chart shows. Furthermore, regardless of GI measure, your pancreas, blood stream, and tissues are forced to deal with the same amount of sugar – period. **Fasting blood sugars in a normal person should only be 1 teaspoon (70-90 mg/dl)**, so don't be fooled into thinking that high GI foods will somehow lower resting blood sugars – they won't. The steady state pure sugar level is just 0.9 at 135 minutes after ingestion of carbohydrates, as the second chart shows.

This information is easily gleaned from authoritative textbooks and scholarly articles. But instead of relying on hard science as the basis of nutritional recommendations, nutritionists

and doctors have followed popular opinion down the sugar-coated path to morbid obesity and diabetes.

What you need to know is that your body makes glucose. Your own bodyfat COMBINED with amino acids from the proteins you eat automatically keeps blood sugar at perfect levels.

The body uses insulin to tightly control blood sugar levels—**less than one little teaspoon of sugar is in your entire bloodstream.** I nearly fell out of my chair when I calculated the number of teaspoons worth of sugar that should be in your entire system—it's almost nothing!<sup>4</sup>

As *Textbook of Medical Physiology* makes clear, even after five weeks of complete starvation, and only drinking water, blood glucose levels in the average, healthy adult will remain stable!

This is how simple it is. We get all the sugar we require by burning our own excess body fat and from the protein we eat. The medical term for this wonderful system nature *automatically* provides is called *glucogenesis*. You will soon discover how vital protein is and how you can eat as much protein as you want and still not gain weight!

## **Carbohydrate NOT NEEDED for Fat Burning**

We are often told by nutritionists and even physicians that to burn fat, carbohydrates are required. But is this true? No, and nothing can be further from the truth.

*Stryer's Biochemistry* makes this quite clear with this quote:

"Fat does **not** burn in the flame of carbohydrates."

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4 A "ballpark" calculation shows that normal blood sugar concentration is about one gram per liter—just about one part per thousand. (A gram is approximately one-fifth of a teaspoon and a liter is a little more than a quart.) Adults have about five liters of blood, so we have about five grams of glucose in our bloodstream. One teaspoon has about one-hundred-twenty drops, so a typical adult has about just one hundred (120) drops of glucose in their bloodstreams. I was shocked at this small amount, too.

On the contrary, carbohydrates stop fat-burning cold – the complete opposite of what we desire!

## **Carbohydrates SLOW Your Metabolism Rather Than Speed It Up**

Have you heard that carbohydrates increase your metabolism? Many trainers and nutritionists have told me this over the years. But is it true? Once again, just like the fallacy that fat-burning requires carbohydrates, this “fact” is completely wrong, too. If you follow their wrong recommendations, you certainly won’t wind up lean-for-life.



And if anyone cared to take the time to look, they would have discovered these facts. The analysis in *Textbook of Medical Physiology* makes it quite clear:

**Carbohydrates slow the metabolism in contrast to what happens through consumption of natural fats and proteins.**

We've all heard that our precious muscles will be "cannibalized" (burned for energy) if plenty of carbohydrates aren't consumed. Wrong again, and it's *Textbook of Medical Physiology* to the rescue.

## **Muscle isn't "Cannibalized" for Energy in the Absence of Carbohydrates**

*Textbook of Medical Physiology* gives us the truth on page 866:

"...One can calculate that at this rate, almost **all the normal energy requirements** of the body can be provided by oxidation of the transported free fatty acid *without using any carbohydrates or proteins for energy.*"

There you have it. NO carbohydrates are required for energy. Protein won't be "stolen from your muscles" for energy. And carbohydrate doesn't help burn fat, either. These three scientific truths reverse decades of wrong popular opinion, giving us three more strikes against carbohydrates. The carbohydrate requirement for fat-burning is OUT and with this new understanding, we can achieve our goal of becoming lean-for-life much more quickly and easily.

## **Carbohydrate Diet AWFUL for Diabetics**

A carbohydrate diet is awful for a diabetic, too. The *American Journal of Clinical Nutrition* makes this fact clear:

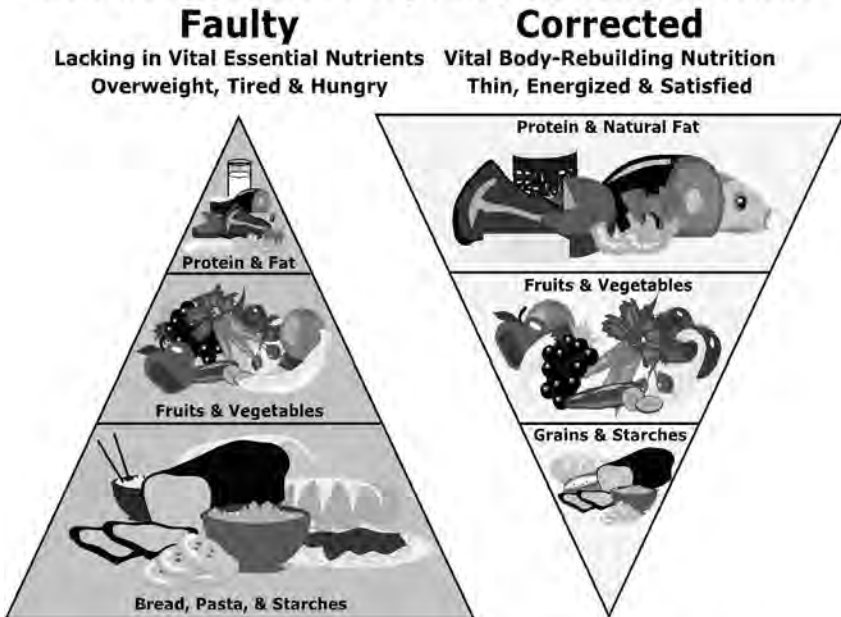
"In type II diabetics, the **carbohydrate diet** caused **harmful** blood sugar and harmful insulin response. The carbohydrate diet also caused **high triglycerides.**"

If this result wasn't bad enough, a high carbohydrate diet is also a dieter's WORST nightmare because it causes you to stay hungry, too. The more candy, cakes, or ice cream I eat, the

more sweets I want. Once we start, we can't stop eating sweets because of the insulin response, which makes you crave an ever-increasing amount.

## The Faulty Food Pyramid

You're familiar with the food pyramid (left), but did you know that it was directly influenced by the *cereal manufacturers*? It stresses lots of carbohydrates and very little proteins and natural fats.



*The "solution" turned out to be the cause of the problem!*

When you learn how your body *really* handles food, you will see that in order to be a proper guide to great health, the familiar food pyramid should be *flipped upside-down!*

*This information is based on scientific fact not opinion.*

## Insulin Production<sup>5</sup>

*Under normal conditions there is very little continuous insulin produced. However, under carbohydrate load the insulin*

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5 Textbook of Medical Physiology (9<sup>th</sup> edition), pages 977 and 982.



production rises 10-fold, decreasing significantly after a few minutes. After about 15 minutes, insulin secretion occurs a second time reaching a maximum in 2-3 hours reaching an even higher rate of insulin secretion.

This second secretion occurs from stored insulin AND activation of new insulin production. The insulin response time is about 3 hours.

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**WARNING:** There is not enough stored insulin to handle continuous carbohydrate overloads.

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A simple carbohydrate like a soda hits your bloodstream as sugar in a couple of minutes. A so-called “complex” carbohydrate (a starch) takes just 15 to 30 minutes to enter the bloodstream as glucose. Simple sugar and complex sugar are both recognized by your body in exactly the same way. Each five grams (20 calories) of carbohydrate is the equivalent of one teaspoon of sugar – or look at it this way: **each five grams of carbohydrate that you eat results in the addition of another teaspoon of sugar to your blood!** This gives you a clear idea just how hard you are making your pancreas work to reduce the sugar back down to one teaspoon each time you consume carbohydrates. Start checking the food labels. Below, we list the sugar equivalents of common foods.



20 calories of carbohydrate = 5 grams =  
1 additional teaspoon of sugar that your  
system has to deal with.



**REPEAT:** We are often told that carbohydrates are your body's preferred energy source and that you need lots of them. Nothing can be further from the truth as *Textbook of Medical Physiology* makes clear:

“Almost all the normal energy requirements of the body can be provided without using any carbohydrates or proteins for energy.”

We will soon utilize this little-known fact that carbohydrates aren't required for energy to make becoming lean-for-life even easier and faster.


## **Hunger-Inducing Food Additives**

Many physicians claim addictive “designer chemicals” are now being added to food, and that they cause us to be constantly hungry so we eat more. I can't say this is correct but it makes business sense. What they are taking out to increase shelf-life is enough to turn us into a nation of human billy goats eating all day long. However, if this is a concern, eat less processed carbohydrate-based foods. Processed foods are where those “designer chemicals” would be found.

## **Just One Teaspoon of Sugar is the Level Maintained in Your System Compared to the 60–100 Teaspoons of Sugar Many of Us Eat Each Day!**

*Basic Medical Biochemistry – A Clinical Approach* makes clear that your entire bloodstream (about 5 quarts of blood) contains **only one teaspoon of sugar**, or you are diabetic. This small amount is maintained throughout the day **even when you are not eating**.

*The 24-Hour-Diet: Lean for Life – One Day at a Time*

			
	Cream Cheese (Full-fat)	4 oz	<1 tsp
			
	Strawberries	8.8 oz	2 1/2 tsp
			
	Yam (Large)	1	13 tsp

How many teaspoons of sugar are you unknowingly consuming each day? **Over the last 50 years, the average American has been consuming at least 60-100 teaspoons worth of “sugar in disguise!”** That’s right. Are you in disbelief about this? Don’t be, because this fact is the number one reason we are overweight. Eating too many carbohydrates, because you were told by an “expert” that they were good for you, short-circuits you from becoming lean-for-life.

## **Your Pancreas is Attempting to Save Your Life by Making You Fat!**

Because there is so little nutrition in carbohydrates compared to their great potential harm, and because there is only one little teaspoon of sugar in your system compared to the 60-70 teaspoons the average person eats each day, your pancreas signals (triggers) your body to convert all that excess sugar to stored fat. If all that sugar was kept in your system, you'd quickly perish because all kinds of harmful substances flourish in high sugar environments. Women are often plagued by yeast infections. Yeast grows rapidly in a high sugar environment so women can also reduce their risk of yeast infections by minimizing carbohydrates.

As crazy as it may sound, making you fat beats having you die immediately. Your body has no other choice when you overdose on carbs. Either make you fatter or kill you are Nature's only choices. Making you fat is also a signal that something is metabolically wrong. The problem is that few of us are told the truth about how to cure the overweight problem and we end up often following misguided recommendations, often making us fatter.

## **Water Weight Takes a Hike**

Every ounce of carbs requires at least AN ADDITIONAL 3 ounces of water in order to process them. Water is very heavy. A gallon weighs close to 9 pounds, which means a quart of water packs on 2 pounds. If I overindulge on the weekend from too many carbs, I can easily pack on another 4 pounds. The great news is that you will soon discover how to lose it all quickly. A high-carbohydrate diet should be renamed the "Bloating Diet." I always feel like a water balloon when eating too many carbs, and it doesn't feel good to be bloated 24 hours a day.

## **Starved into Obesity...**

That's right. Millions of Americans and now the rest of the world has been starved into obesity because of the great 50-year carbohydrate eating experiment. Because there is so little nutrition in a carbohydrate, part of Nature's response is to keep you hungry in the hopes that you will eat something beneficial. The problem with the high carbohydrate diet is that the more of them you eat, the hungrier you get. Give your body what it REALLY WANTS and your appetite is fulfilled. It's that simple.

Now that you have learned to associate carbohydrates with sugar, the next stop in our journey to becoming lean-for-life is to show you how few carbs you need each day.

## **How Many Carbohydrates Do We Need Each Day?**

None. That's right, none. The book *Nutrition for Fitness and Sport* by Melvin H. Williams answers this. From what the nutritional experts, the government, and physicians have told us for decades, we would expect the answer to be "lots of carbohydrates," but it isn't. In fact, the answer is shocking: **"The body can adapt to a carbohydrate-free diet and manufacture the glucose it needs from parts of protein and fat."** Dr. Williams uses the word "adapt," to a minimum carbohydrate diet. I maintain a minimum carbohydrate is your body's natural state and it's unnatural state is carbohydrate overload. Everyone has is backwards. We will make good use of this scientific fact later.

## **How Much Carbohydrate is in You?**

*Student Companion for Stryer's Biochemistry* makes it clear: **only a mere 1% of tissue weight** is carbohydrate. Almost nothing!

A high carbohydrate diet makes no scientific sense unless you want to fatten yourself up like cattle before the slaughter. Always

remember, science relies on facts, not feelings. While it may sound good to have a diet high in fruits, vegetables and whole grains, it makes no scientific sense, given how our bodies operate.

## **Aren't There Low-Sugar Carbs and Needed Enzymes in Carbs, too?**

Yes and no. Vegetables have enormous variations in carbohydrate content. All carbohydrates are NOT created equal. For example, celery is mainly fiber whereas many varieties of beans are excessively high in carbohydrates. Regarding enzymes, you need to know that all natural enzymes in food are broken down in the highly acidic environment of your stomach. Your body's job is to make its own enzymes from the protein you eat. Fruits and vegetables are not required for enzymes in the least. We have been misled again.

## **Carbohydrates = Sugar**

The critical point to remember when looking at a carbohydrate, whether it is a bowl of corn flakes or a soda, is that all carbohydrates are recognized by your body as sugar. Many would have you believe the rate of absorption of this sugar into your body will make a difference in how your body responds (a fact erroneously given importance in some popular nutritional/diet theories). While this is an interesting argument, it is the wrong question. The correct question is, "What is the human body's response to the ingestion of *any* carbohydrate?" The answer is ALWAYS to store more bodyfat. The only exception is when you are strenuously exercising. How often are you strenuously exercising? If your answer is "not often enough," you had better minimize those fattening carbohydrates.

## **Physicians Still Don't Get It!**

An article titled "Fat Fallacies" by a medical doctor shows a misunderstanding of the GI fallacy:

“On the other hand, the same amount of sugar from kidney beans enters your blood slowly. Because the sugar is absorbed over time, your insulin levels remain stable and more of the calories are burned and fewer are stored.”<sup>6</sup>

This may sound fine EXCEPT it DOESN'T make SCIENTIFIC sense! You have already discovered all that matters is the total amount of insulin, not the timeframe. How could more calories be “burned?” How can there be less stored fat? He then goes on to praise carbohydrates as “the single most important food you can eat for long-term health and weight loss.” The ignorance displayed in this statement makes me speechless! You'll soon discover how important natural fats and proteins are, but first let's get back to showing scientifically why carbohydrates are the WORST FOOD you can eat for long-term health and weight loss. If experts did more thorough research and then *thought* about what they recommend, we'd all be much better off, wouldn't we?

My wife is a Type I diabetic; her pancreas produces very little insulin naturally. Over a decade ago we performed an experiment: She consumed two pieces of organic “sprouted” whole-grain bread. This was supposed to be a wonderful complex carbohydrate that released the sugar slowly into her bloodstream – nothing could be better for her, according to the GI proponents. Taking no insulin, she measured her sugar level 15 minutes later. To her amazement, her sugar level had skyrocketed. Back then, I knew that the Glycemic Index was incorrect, but I had no idea why. **Now we know why – there is no correlation between the GI and insulin output.**

The “insulin load” or “insulin index” effect (abbreviated “II”), NOT the GI, is the critical measure we must minimize to stay lean-for-life and not become diabetic. Never forget that each five

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6 *Bottom Line-Personal*, Vol. 27, Nov. 1, 2006, pages 9-10.

grams (20 calories) of carbohydrate is approximately the equivalent of one teaspoon of sugar. Start checking the food labels. For decades, the average American has unknowingly consumed over 60-70 teaspoons of disguised sugar (in the form of carbohydrates) **each day in items such as:**

- juice
- oatmeal
- fruit (there are exceptions)
- so-called “heart-healthy” cereals
- rice
- bagels
- spaghetti
- food bars, etc.<sup>7</sup>

## **Diabetes Association Downplays Glycemic Index**

As reported in the January 2002 issue of *Diabetes Care*, “New Diabetes Nutrition Guidelines Play Down Importance of Carbohydrate Source”:

- “...De-emphasize the importance of the glycemic index of foods.
- “The source of the carbohydrates is not as important as the total amount....”

In 2002 the Diabetes Association warned of the GI fallacy and too few listened.

Next, we need to find the connection – and science – linking obesity and carbohydrates.

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<sup>7</sup> The recommended 60% carbohydrate diet comprising 2,000 calories translates to 60 teaspoons of sugar. Every 20 calories carbohydrate = 1 tsp. sugar. Therefore:  $60\% \times [2,000 \text{ calories} / 20 \text{ calories/tsp}] = 60 \text{ teaspoons of sugar!}$  Americans have unknowingly increased their diabetes risk for decades!

## **Misinformation About Carbohydrates vs. the Science Behind Obesity**

We told you previously that every 20 calories of carbohydrate is a teaspoon of sugar in disguise and it makes no difference whether that carbohydrate is termed “simple” as found in a sweet soft drink or “complex” as in brown organic rice.

Unfortunately, misinformation in the nutritional world reigns supreme. Here’s a quote from luminary scientist and my personal idol, Nobel Prize-winner Richard Feynman, regarding how misinformation keeps getting “parroted”:<sup>8</sup>

**“Experts were quoting data based on inaccurate research. I never pay attention to ‘experts.’”**

One bit of advice that I can give you is if the statement or conclusion sounds ridiculous, there is something wrong with it. For example, I saw published in a medical journal a study “conclusively showing” the Number One satisfying food was a plain baked potato. Does this make sense? No. Is this “conclusion” correct? Certainly not and everyone knows it. This “study” was commissioned by the Australian agriculture committee.

Look what was said back in 1966 (well before the Atkins’ diet) in a book titled *Martinis and Whipped Cream* (now out of print):

**“The carbohydrate calorie is more fattening than any other kind of calorie. This is scientific fact that is now revolutionizing the eating habits of millions. Only the villain carbohydrates need to be watched.”**  
(Emphasis added.)

They “got it” back in 1966! Isn’t it tragic that most people today, including nutritionists and physicians, have never heard of this book and certainly don’t follow its recommendations?

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8 Richard Feynman, Nobel Prize-winner: physics, *A Life in Science*, pg 167.



In contrast, the caloric content of a steak stores virtually no fat! You will discover in the chapter “All About Fat” that *there is no mechanism in your body to store dietary fat as excess body fat!* I expect you be be shocked at discovering this.

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Even if carbs were known to be a problem, fat and protein were believed to be even bigger problems. Contrary to popular opinion, protein and natural fats are wonderful and extremely healthful for you.

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As early as 1944, Dr. Blake Donaldson at New York City hospital used radioisotope tagging to prove that carbohydrates were rapidly converted to body fat – significantly more body fat was added to your frame from carbohydrates than from eating fat or protein. Now, many years later, university professors of nutrition often aren’t even aware of this. Therefore, their “expert” recommendations are often harmful and should embarrass them.

A Harvard University Professor of nutrition was quoted in 2004 as stating that, “a calorie is a calorie is a calorie is a basic tenet of nutrition.” **She is only 110 years behind the science**, which shows this is not true when applied to a human being! If even a Professor at Harvard isn’t up on the science, what can you expect from the average nutritionist, personal trainer, or physician in this area? Not much.

## **Repeat: Carbohydrates are NOT NEEDED for Fat Burning**

Another nutritional myth is that lots of carbohydrates are required in order for fat to be “burned for energy.” *Stryer’s Biochemistry* makes the falsity of this statement quite clear with

their quote, “Fat does not burn in the flame of carbohydrates.” Your body will burn fat for energy automatically IF there is no overdosing on carbohydrates.

We are told that to increase metabolism and burn fat, one must consume lots of carbohydrates. This is incorrect. As the *Textbook of Medical Physiology* states, **carbohydrates slow the metabolism compared to consuming natural fats and proteins**. Furthermore, **no carbohydrates (or proteins) are required for energy production, just your own body fat**. **Here’s the truth:**

**“...Almost all the normal energy requirements of the body can be provided by oxidation of the transported free fatty acid without using any carbohydrates or proteins for energy.”** (Emphasis added.)

There you have it. NO carbohydrates are required for energy AND protein won’t be “stolen from your muscles” for energy, either.

## **How much carbohydrate is “too much?”**

How much is too much carbohydrate? There is a simple answer to this question.

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**If you ever eat and soon afterwards become tired and sleepy, you have eaten too many carbohydrates. It’s that simple.**

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Also, if you wake up during the night and need to drink lots of water you have overdosed on carbs. This is a symptom that you are becoming diabetic, too! Watch out! Indigestion and acid reflux are often caused from overdosing on carbohydrates.

These conditions NEVER occur as a result of eating protein and natural fat.

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## **Carbohydrate Energy Not Used IMMEDIATELY Makes You Fat!**

If you can't use the carbohydrate energy IMMEDIATELY you have just made yourself fatter! *Textbook of Medical Physiology* makes this clear:

“Whenever a greater quantity of **carbohydrates enters the body than can be used *immediately*** for energy or stored in the form of glycogen (an insignificant amount), the **excess is rapidly converted** into triglycerides and stored in this form in the **adipose tissue [body fat]**.”

An 8 oz. glass of orange juice contains enough energy for you to run a mile. As you are discovering, contrary to proteins and fats, carbohydrates are either stored as body fat (discounting a tad stored as glycogen) or used immediately as fuel for muscles. That's essentially all they can be used for.

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If you don't run that mile right away, guess where that excess “carbohydrate energy” went? That's right, to your belly, rear-end, or thighs.

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There is no question that all diabetics need to reduce their intake of carbohydrates. Dr. Habib, a colleague of mine, and an extraordinary physician located in Florida specializing in pediatric endocrinology and child's diabetes, concurs totally with

the requirement to minimize carbohydrates for diabetics and everyone else, too. Unfortunately, your local physician is likely unaware of these essential nutritional facts.

## **Carbohydrates Cause Auto-Oxidization**

Are you spending money on antioxidant vitamins and minerals? Most Americans spend lots of hard-earned money every month on nutritional supplements like these. But if you are eating too many carbs, it is money down the drain. Here's why. An article in *Diabetes Interview* (page 1, May 1997) **clearly tells us:**

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**Glucose (generated from carbohydrates) auto-oxidizes, producing free-radicals all by itself.**

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Oxidation damages blood vessels, etc. Later in the article Keith Campbell, RPh (pharmacist), states that, "diabetes is now defined as a condition that speeds up the aging process."

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**Insulin = Fat Storage: It's That Simple Because Insulin is a Fat Storage Hormone**

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You should know that your body's production of insulin occurs almost exclusively as a response to carbohydrate (not protein or fat) consumption. The more carbohydrates that are consumed, the greater the insulin release and fat storage. Therefore, insulin is a fat storage hormone. Without insulin production, there is no mechanism for the body to store more fat. The fewer carbohydrates you eat, the less fat storage. It's quite clear. As the *Textbook of Medical Physiology* states on page 870:

“When **no insulin is available** [response to carbohydrates]...**fats are poorly**, if at all **synthesized** [**you don’t get fat**]...” (emphasis added)

*Textbook of Medical Physiology* references this fact numerous times.<sup>9</sup> Anyone who is overweight is always consuming too many of those fattening, diabetes-causing carbohydrates! It’s that simple.

## Carbohydrates Make you Fatter

Here’s another quote from *Textbook of Medical Physiology*:

An excess of **carbohydrates** in the diet **not only acts as a deterrent to fat-burning** but **also increases the fat in the fat stores** [**making you fatter**]. (Emphasis added.) A double negative whammy!



High Carbohydrate Diet **CAUSES**  
Saturated Fat Increase

Eat too many carbs and, as the medical textbook *Basic Medical Biochemistry* clearly tells us, lots of saturated fat will be *made from them*. Few of us understand that carbohydrates make saturated fat *right in the body*. That’s right, your body makes saturated fats from the carbohydrates you eat. However, eating saturated fat **DOESN’T** go to stored saturated fat in your body or even in your arteries. You’ll soon discover all about this mechanism and how

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<sup>9</sup> *Textbook of Medical Physiology*, pgs. 974, 975, 977.

we use it to stay lean-for-life.

## **Carbohydrate Summary:**

Here are 15 important facts that you need to know about carbohydrates:

1. Overeating is caused in large part by the positive feedback mechanism that carbohydrates cause. The more carbohydrates you eat, the more you want. That's where the phrase, "bet you can't eat just one," came from. You just can't eat one cookie, can you? Of course not. Protein and natural fats do not cause this "bet you can't eat just one" response.
2. **Just 1% of your pancreas is capable of treating sugar (carbohydrates) so you don't die.** But a high carbohydrate diet overloads this 1%, making it do the majority of the work. The remaining 99% of your overworked pancreas is *supposed to* treat fats and proteins so you can digest them. This medical fact is rarely published.<sup>10</sup> Since we are designed this way, it makes sense that we should be eating 99% protein and natural fat to coincide with our pancreas' structural function.
3. **There is less than 1 teaspoon of sugar (glucose) in your bloodstream**—or you are diabetic. That's correct. Of course, the medical textbooks don't state it in this fashion. They use 5 millimoles per deciliter—nice and scientific and indecipherable. I've translated

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<sup>10</sup> *Scientific Foundations of Biochemistry in Clinical Practice*, David L. Williams, Vincent Marks, Butterworth-Heinemann, 1994.

the number into teaspoons so a non-scientist can understand. With the 60% carbohydrate-based diet nutritionists, physicians, and our government has recommended over the past 50 years, we have overloaded our systems with at least 60 times too much sugar.<sup>11</sup>

Physicians will allow closer to 1.25 teaspoons of sugar in your system before they call you diabetic. This little bit of extra sugar may not sound like much, but to your system it's deadly. In my opinion doctors are too liberal in what they consider a "normal" range for sugar in the bloodstream. If they accepted reality, half of America would be considered diabetic as a result of the great 50-year carbohydrate eating *experiment* that was never based on science.

4. As *Basic Medical Biochemistry* makes clear: Glucose [from carbohydrates] is NOT the body's preferred energy source; fatty acids are.<sup>12</sup>
5. You need almost no carbohydrate in your diet. The fact is that we are supposed to burn much more energy from our own body fat and from dietary fat consumed, but by overdosing on carbohydrates, we short-circuit Nature's natural fat-burning process and instead keep adding more body fat from carbohydrate's insulin response. Carbohydrates are automatically manufactured

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11 The calculation is as follows: 2,000 calories a day recommendation @ 60% carbs = 1,200 calories of carbohydrate. Each 20 calories (conservatively) is a teaspoon of sugar. Therefore,  $1,200/20 = 60$  teaspoons of sugar consumed each day. Many people consume MUCH more sugar than this.

12 *Basic Medical Biochemistry - A Clinical Approach*, pgs: 29, 45, 203, 272, 357.

from your own body fat combined with the protein that you eat! It's called *glucogenesis* and it's described in the *Textbook of Medical Physiology*. How much dietary carbohydrate is required each day? NONE! That's right. Your body makes it all, as needed, to keep the blood sugar level constant.

6. Elevated **insulin** [generated from eating carbohydrates] causes blood clotting, which **blocks arteries**.
7. Insulin production, a response to consuming carbohydrate, raises cholesterol levels.<sup>13</sup>
8. A 60% carbohydrate/25% fat diet COMPARED TO a 40% carbohydrate/40% fat diet resulted in incredible differences Dr. Gerald Raven of Stanford University School of Medicine published in *American Journal of Cardiology* 2000 85:45-48:
  - "Elevated triglyceride levels persisted through high [60%] carbohydrate diet.
  - "High [60%] carbohydrate diet associated with increases in both fasting (when not eating) and postprandial (after eating) triglyceride concentrations.
  - "Substituting carbohydrates for saturated fat leads to higher cholesterol in the blood.
  - "It is appropriate to question wisdom of replacing dietary fat with carbohydrates." Carbohydrates raise the risk of heart disease.

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13 *Basic Medical Biochemistry*, pgs: 475, 566.



The last two statements from Dr. Raven and published in one of America's top heart journals tell it all. Carbohydrates cause a worse blood chemistry than a saturated fat.

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**Carbohydrates RAISE, not Lower Cholesterol  
&  
Carbohydrates are WORSE than Saturated Fat**

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9. Glucose (sugar from carbohydrates) causes diabetes! In the medical journal *Diabetes*, the authors state that carbohydrates are a cause of killing your pancreas. This was reported in 2001 but few physicians and likely no nutritionists or personal trainers are aware of it.
10. New Diabetes Nutrition Guidelines published in 2002 discount the relevance of the carbohydrate type or source. They are correctly distancing themselves from relying on the glycemic index in determining “good” versus “bad” carbohydrates. No matter what the glycemic index tells you, all carbohydrates turn to sugar, whether it's brown rice or a candy bar! All carbohydrates are bad! **Minimize glycemic (raising blood sugar) carbs** at all costs.
11. Women eating the lowest fat and most fiber had 20% less calcium retention (*Journal of Clinical Nutrition*, 2000, 71: 466-471.) If you are eating lots of carbohydrates to “get your fiber,” then you are leaching out calcium from your body, and other important minerals, too.

12. America's top medical journal, *New England Journal of Medicine*, Aug. 21, 1997, Vol. 337, published an amazing article: "How the truth becomes distorted in high-carbohydrate diets." (How we are misled: the real results compared with the published "conclusions.") This article details how we have been misled into believing a carbohydrate-based diet is best. Did you see it? Not likely.
13. High fiber does not help "colon efficiency." Did you ever see this "fiber fiction" fact published before? Fiber is worthless in protecting your colon; it is even harmful because it unnecessarily irritates your delicate tissues. Look in the mirror: You aren't a cow with four stomachs or a termite are you? So why accept nutritional recommendations suitable only for these animals.
14. Protein (muscle) is not cannibalized by lack of carbs. The *Textbook of Medical Physiology*, page 881, makes it quite clear there have to be "several weeks of starvation" BEFORE there is any issue. Once again we have been misled by the "experts" into believing that carbs are required at every meal "to spare your muscle." This is completely incorrect. The Food Utilization Factor Chart on pg. 166 will give you more insight into the nutritional values of foods.
15. Carbohydrates are *not* the "feel good fix"; moods are *not improved by eating carbohydrates*: *International Journal of Obesity and Metabolic Disorders* makes it clear in their article, "Psychological and

metabolic responses of carbohydrate-craving obese patients to carbohydrate, fat, and protein rich meals.” Moods are NOT improved by eating lots of carbohydrates. Rather, carbohydrates cause a massive rise in blood sugar (unlike proteins and fats) so your heart beats like crazy. Your body is saying “get this sugar out of me so you don’t kill me.” This is termed a “sugar high.” There is no increase in energy. It is a toxic overdose condition you created and your body is working overtime to fix the problem. Later, you become exhausted and need to sleep.

Here are a few more facts that you will likely be shocked at.



Anyone wanting more muscle or muscle tone needs to know that **sugar (carbohydrate) stops the body from producing growth hormone.** (*Basic Medical Biochemistry—A Clinical Approach*, pg. 702.)

## **An Interesting Fact: Vitamin C Deficiency—It’s NOTHING to Worry About!**

When have you last heard about a case of scurvy in America? The truth is that only very small amounts of fruit are required to prevent the disease—just a couple of pieces of fruit a week—that’s all. Dr. Gabe Mirkin goes even further. Gabe Mirkin, M.D., has been a radio talk show host for 25 years and a practicing physician for more than 40 years; he

is board-certified in Sports Medicine and three other specialties. Dr. Mirkin's daily features on fitness have been heard on CBS Radio News stations since the 1970's. He has written 16 books including *The Sportsmedicine Book*, the best-selling book on the subject that has been translated into many languages. Here's what he states:<sup>14</sup>

"What about the Eskimos? Most animals, except humans, make their own vitamin C and **it's possible to get enough vitamin C to sustain you from fresh meat**, especially liver."

There's more. From *British Journal of Dermatology*, Volume 109 Page 45, July 1983:

"One would expect vitamin C deficiency to occur in indigenous populations in **arctic regions**, where **fresh vegetables and fruit are not available**. In the sealing communities in Greenland the daily **intake of meat** and entrails from sea mammals is still high. Most important is the ringed seal, of which the **fresh meat** and liver contains 20 and 180 mg of vitamin C per kilogram respectively. In addition, the traditional diet includes various plants, seaweeds and the **skin** of the narwhale, all of which are rich in vitamin C."

## **Heart-Pounding after Eating Carbohydrates**

If your heart is pounding after eating lots of carbs it is because your adrenal glands are in overdrive and your body is trying to get the overdose of sugar out of you. It isn't a pleasant feeling, is it?

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14 <http://ezinearticles.com/?Scurvy:-Vitamin-C-Deficiency&id=153119>.

## **Concerns about constipation**

Don't forget that fiber is an artificial "stimulant," forcing you to go to the bathroom much more often. Without excessive carbohydrates, this unnatural stimulant is gone. It takes 30-45 days for your body's natural function to return. Also, be sure to see The Food Utilization Chart. Protein and natural fat are utilized by the body so efficiently that there is very little left for elimination; your trips to the bathroom may be fewer. This does not mean you are constipated. There should never be a need to use fiber (wood cellulose) if you are eating the correct foods in the proper balance.

## **REPEAT: Increased water consumption on high carbohydrate diets**

The reason why you are so thirsty (if you aren't sweating water out of your body) is because of the carbohydrates. **You need to know that every ounce of carbs requires *three* ounces of water to process it. This means that you are constantly bloated. Ladies lose the "water-weight pudge" very quickly.** That is why after eating a bagel or pizza you are extremely thirsty. NEVER force-feed water. Only drink when you're thirsty. Otherwise, by diluting your blood chemistry, you'll stay constantly hungry!

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A tip to help rid you of annoying carbohydrate cravings. I've found that taking an EFA-based oil supplement with more parent omega-6 than parent omega-3, without harmful fish oil, significantly lowers the "carbohydrate cravings." Dr. Stephen Cavallino uses my recommendations in his medical practice in Italy. You may wish to give it a try.

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## **How Much Carbohydrate is Stored in Your Body?**

*The Student Companion for Stryer's Biochemistry* gives us the answer and it is much less than you may think. The normal 150-pound person stores about 250 grams, or just a half **pound** of glycogen [hydrated storage form of carbohydrate in your body] and another 25 grams [about 4 teaspoons of sugar], just **1/20<sup>th</sup> of a pound**, of plain glucose. Compare this small amount to the significant amounts of stored bodyfat we have! These figures make it evident that humans can rely on stores of carbohydrates for only a short time for energy. The bottom line? We simply don't require much carbohydrate at all compared to the vast amounts we are eating because of wrong recommendations.

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Nature designed each of us to “run on our own bodyfat.” It is the incorrect “parroted” information from nutritionists, misled physicians, trainers, etc. that have short-circuited Nature's natural fat-burning mechanism.

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## **Warning: Excess Fructose is Toxic!**

Nutritionists, health stores, and misled physicians often tell their customers and patients that fruit provides us lots of fiber and vitamin C, and that fructose is better than glucose. But you may be amazed to learn that there is a dark side to processed fructose. Claiming that fructose is good for you – in particular, processed fructose in any form, alone or contained in food – is wrong; nothing could be further from the truth, as *Principles of Medical Biochemistry* makes clear on page 349:

- “Excess **fructose** is **toxic**....

**One last important thought that warrants repeating.** We mentioned that the more carbohydrates you eat, the more carbohydrates you want. That’s why you can’t “eat just one” cookie, one piece of pizza, one tablespoon of ice cream or one potato chip. The **snack** manufacturers understand this. Scientifically, this response is called *positive feedback*. You don’t get positive feedback with either a natural fat or a protein; the more of those I eat the LESS I WANT. Scientifically, this response is called *negative feedback*. This is the way your appetite *should* work. *Many – but not all – fruits elicit this proper response.*

Furthermore, fructose (in its unheated, natural 5-ring form) is sweeter than table sugar or even high fructose corn syrup by about 70%.<sup>15</sup> However, if you heat fructose, it leads to formation of the 6-ring form, losing its additional sweetness!<sup>16</sup> Therefore, natural, unheated fructose as Nature provides gives you the most sweetness with the least raise in blood sugar or potential of getting fat. Natural fructose in WHOLE fruit is the secret, especially for diabetics!

The next chapters will give you the scientific truth concerning fat and protein, and dispel the fallacy that protein and natural fats are harmful. In chapter 6, you will be delighted to find that eating fat won’t make you fat ...

**See Appendix XIX NOW for the Amazing Weight-Reducing Secret of Fruit Smoothie/Protein Powder Combos.**

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15 *Journal of Clinical Nutrition* 58: 724s-732; <http://food.oregonstate.edu/sugar/sweet.html>; archived May 16, 2008 at the Wayback Machine.

16 [http://www.medbio.info/Horn/Time%201-2/carbohydrate\\_metabolism.htm](http://www.medbio.info/Horn/Time%201-2/carbohydrate_metabolism.htm).

## Scientific Support for Chapter 5

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Humans can't digest fiber.

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Here is what the *Textbook of Medical Physiology*, 9th edition, page 834 states:

“However, **no enzymes** capable of hydrolyzing [breaking down] cellulose [fiber] are secreted **in the human digestive tract. Consequently, fiber cannot be considered a food for the human being.**” (Emphasis added.)

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Fiber/Colon Cancer—those people eating the most fiber get the **most** colon cancer!

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The *New England Journal of Medicine* (Jan. 21, 1999, Vol. 340, No 3) reported that:

- **Fiber did nothing to improve “colon efficiency.”**

The following year *Lancet* (October 14, 2000; 356:1286-1287, 1300-1306), the world's premier medical journal, published the same finding again:

- **Those people eating the most fiber get the most colon cancer! The fiber found worthless to protect against colon cancer was the highly promoted soluble fiber.**



Nutritionists and too many physicians didn't see this information. Don't let them or cereal manufacturers mislead you into thinking fiber is healthy.

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### **Albion Research Laboratories Agrees *Fiber Leaches Minerals***

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*Albion Research Notes – A Compilation of Vital Research Updates On Human Nutrition*, Albion Laboratories, Clearfield, UT (Vol. 6, No. 2, June 1997) stated:

**“Natural sources of fiber, such as cereals and fruits, generally have a *depressing effect on absorption of minerals* such as calcium, iron, zinc, and copper. Imagine taking *mineral supplements* and *still going into a negative balance for the very minerals that are being supplemented!*”** (Emphasis added.)

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### **Women Eating the MOST Fiber Get LEAST Calcium Retention**

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Once again, the fiber fallacy is presented in the *Journal of Clinical Nutrition*, 2000, 71:466-471:

Women eating the most fiber and the lowest amount of fat had 20% lower calcium retention.

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### **Body AUTOMATICALLY Converts Glycogen and Stored Fat to Sugar AS NEEDED**

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*Basic Medical Biochemistry* tells us on pages 28-29, 394, and 428:

The **body can convert** glycogen (stored **carbohydrate** in the liver and muscles) into glucose **whenever needed** AND can **also convert** our **fat** reserves to **glucose** (blood sugar) **as needed** in a special process called *glucogenesis*.

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## Blood Sugar AUTOMATICALLY Balanced

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*Textbook of Medical Physiology* on page 863 states:

“The normal blood glucose concentration in a person who has **not eaten a meal within the past 3 to 4 hours** is about **90 mg/dl.**” (Emphasis added.) Note: This amounts to less than 1 teaspoon of sugar – the **NORMAL** amount of sugar we desire.

Don’t be fooled by anyone telling you that “blood sugar balancing” for non-diabetic has to be maintained by eating carbohydrate-based foods, multiple times each day.

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## Insulin, a Response to Carbohydrates, Makes You Fat!

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It’s all in the *Textbook of Medical Physiology* on pages 974-975:

“...[I]nsulin promotes deposition of fat in these cells.

“**Insulin promotes glucose transport** through the cell membrane into fat cells [**making fat cells larger**]....

“Therefore, when **insulin is not available** [caused by the response to carbohydrates], even **storage of large amounts of fatty acids** transported from the liver in the lipoproteins is almost **blocked**.

“**All aspects of fat breakdown** and use for providing energy are **greatly enhanced in the absence of insulin** [generated from carbohydrates].” (Emphasis added.)

Minimize the insulin production and you AUTOMATICALLY minimize the fat production, too.

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### Carbohydrate Diet Clogs Your Arteries, Too.

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As *Journal of American Medical Association*; 2000; 283:221-228 makes clear:

Elevated **insulin** [generated **from eating carbohydrates**] causes blood clotting, which **blocks arteries**.

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### Carbohydrate Diet AWFUL for Diabetics

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A carbohydrate diet is awful for a diabetic. The *American Journal of Clinical Nutrition*, October 1997; 66:4(S) states:

“In type II diabetics, the **carbohydrate diet** led to **impaired** glycemic [**blood sugar**] and insulin responses. As well as to hypertriglyceridemia [**high triglycerides**].” (Emphasis added.)

## No Carbohydrate Required in Human Diet

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*Nutrition for Fitness and Sport* by Melvin H. Williams, Brown and Benchmark Publishers, Chicago, 1995, answers this on page 87. From what the nutritional experts, the government, and physicians have told us for decades, we would expect the answer to be “lots of carbohydrates,” but it isn’t. In fact, the answer is shocking:

“However, the National Research Council has **not established an RDA for carbohydrates**, probably because the **body can adapt to a carbohydrate-free diet** and **manufacture the glucose** it needs from parts of protein and fat.” (Emphasis added.)

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## Carbohydrates Eaten vs. Tissue Weight

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*Student Companion for Stryer’s Biochemistry* makes it clear on page 321:

“**In the human diet, carbohydrates** constitute approximately **half** the total caloric intake [closer to 60% now], **yet only 1%** of **tissue weight** is carbohydrate.” (Emphasis added.)

What has eating a 50-60% carbohydrate diet done to us, given that only one percent of our bodies is composed of carbohydrate? World-wide rampant obesity and **diabetes** epidemics!

## **Carbohydrates INSIGNIFICANT for All Biochemical Functions**

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The carbohydrate present in nucleic acids, glycoproteins, glycolipids, and cofactors, although functionally essential, contributes relatively little to the weight of the body. An insignificant amount of carbohydrate is required for these components. Only some carbohydrate is stored as glycogen, but the amount is relatively small compared to the storage of adipose tissue (fat) and protein as muscle mass. Don't be misled.

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## **Glycemic Index Definition**

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The glycemic index (GI), developed in 1981, uses glucose as a standard of comparison with other carbohydrates as a measure of how quickly they enter the bloodstream. Glucose is given a value of 100. There are many problems with this method; in particular different food combinations raise havoc with the system. The GI system is misleading, too. The results are inconsistent. A much better system is the absolute glycemic LOAD – the amount of carbohydrate eaten.

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## **Glycemic Index (GI)—A Worthless Measure**

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Flint, et al., *British Journal of Nutrition* 2004 Jun; 91(6):979-89, confirmed this upsetting finding and published in 2003:

“...**No association** was found between predicted and measured GI.

“...There was **no association** between GI and II [Insulin Index – the amount of insulin generated].

“...In conclusion, the present results show that the **GI of mixed meals** calculated by table values **does not predict the measured GI...**” (Emphasis added.)

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## Carbohydrate NOT NEEDED for Fat Burning

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*Stryer's Biochemistry* (4th edition) pages 612 and 638 makes it quite clear with their quote:

“Fat **does not** burn in the flame of carbohydrates.”  
(Emphasis added.)

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## Metabolism DECREASED, not increased, with Carbohydrates

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*Textbook of Medical Physiology* page 908 makes clear:

**Carbohydrates slow the metabolism compared to consuming natural fats and proteins.**

Never forget this important scientific fact. *The Textbook of Medical Physiology* makes it quite clear on page 866 that **no carbohydrates (or proteins) are required for energy production, just your own bodyfat:**

“When the **fat that has been stored** in the adipose tissue is to be used elsewhere in the body, usually **to provide energy**, it must first be transported to other tissue. It is **transported mainly in the form of free fatty acid**.... Despite the minute amount of free fatty acid in the blood, its rate of “turnover” is extremely rapid....

“One can calculate that at this rate, almost **all the normal energy requirements of the body can be provided** by oxidation of the transported free fatty acid **without using any carbohydrates or proteins for energy**.” (Emphasis added.)

There you have it. NO carbohydrates are required for energy AND protein won't be “stolen from your muscles” for energy, either.

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Never Forget the Number “One”—your entire bloodstream contains only 1 little teaspoon of sugar

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*Basic Medical Biochemistry – A Clinical Approach* on pages 472-473 makes clear:

Blood glucose levels are kept at approximately 80 milligrams per deciliter – about 1 teaspoon (actually 0.8 teaspoons) in the bloodstream (actually just  $8/10^{\text{ths}}$  of a teaspoon) **throughout the day when not eating, AUTOMATICALLY.**

If your body allowed more than this in your system the toxic by-products would kill you, as they do uncontrolled diabetics. High blood sugar levels also encourage rampant yeast infection in women.

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**IMPORTANT NOTE:** Blood sugar levels are controlled to 1 part in 1,000—a **VERY TIGHT** tolerance in everyone, or you are diabetic!

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**Carbohydrate Energy Not Used Immediately  
Makes You FAT**

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*Textbook of Medical Physiology* makes this clear on page 869:

“Whenever a greater quantity of **carbohydrates enters the body than can be used immediately** for energy or stored in the form of glycogen (just an insignificant bit), the **excess is rapidly converted** into triglycerides and stored in this form in the **adipose tissue [body fat]**.”



**No Insulin (response to carbohydrates)  
= No Fat Storage**



As the *Textbook of Medical Physiology* on page 870 states:

“When **no insulin is available** [response to carbohydrates]...**fats are poorly**, if at all **synthesized** [**you don’t get fat**]...” (emphasis added)

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## Carbohydrates STOP Fat-burning COLD

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*Textbook of Medical Physiology* references this fact numerous times on pages 974, 975, and 977. Anyone who is overweight is always consuming too many of those fattening, diabetes-causing carbohydrates! Here’s another on page 871:

“Thus, an excess of **carbohydrates** in the diet **not only acts as a fat-sparer** [**you won’t burn you own bodyfat**] but **also increases the fat in the fat stores** [**making you fatter**]. In fact, all **the excess carbohydrate not used** [immediately] for energy or stored in the small glycogen deposits of the body is **converted to fat and stored** as such.” (Emphasis added.)

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## Specific Sugars NOT Required—Your Body Makes Them

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Excess carbohydrates (more than a mere 4 ounces a day) prevent the body from burning fat, and increase stored body fat because as *Basic Medical Biochemistry – A Clinical Approach* on pages 24 and 394 and *Textbook of Medical Physiology*, pages 869, 871, 936, state:

“Specific sugars [**carbohydrates**] **ARE NOT REQUIRED** in the diet.” Note: This is because **your body makes them**.

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## Fat is stored **ONLY** When You Eat Carbohydrates

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As *Basic Medical Biochemistry – A Clinical Approach*, pages 476, 510-12, makes clear, Adipose tissue (fat) is stored **ONLY** when carbohydrates are eaten. From *Principles of Medical Biochemistry*, page 372:

“...[F]atty acids [from eating fat] cannot be converted into carbohydrates. **Carbohydrates, on the other hand, can be converted** into triglycerides [**excess bodyfat**].” and

“...[E]xcess **energy from dietary carbohydrate** is stored away as triglyceride in adipose tissue [**bodyfat**].”

(Voet’s) *Biochemistry*, second edition, published by John Wiley & Sons, 1995, gives more insight into carbohydrates and excess bodyfat (adipose tissue) on page 790, in the chapter titled “Adipose Tissue”:

“Adipose tissue obtains most of its fatty acids from the liver or from the diet as described in Section 23-1. Fatty acids are activated by the formation of the corresponding fatty acyl-CoA and then esterified [for storage] with **glycerol-3-phosphate** to form the stored triacylglycerols (Section 23-4F). The **glycerol-3-phosphate** arises from the reduction of dihydroxyacetone phosphate, which **must be**

glycolytically **generated from glucose** because adipocytes [bodyfat] lack a kinase that phosphorylates endogenous glycerol.”



This is complicated biochemistry explaining why excess fat can **only be stored when a person eats carbohydrates** and is one of the reasons why nutritionists don't have a clue about it and why most physicians get misled.

The quote continues:

“Adipocytes hydrolyze triacylglycerols to fatty acids and glycerol in response to the levels of glucagon, epinephrine, and insulin through a reaction catalyzed by hormone-sensitive lipase (Section 23-5). If **glycerol-3-phosphate is abundant [from carbohydrates]**, many of the fatty acids so formed are **reesterified** to triacylglycerols [**bodyfat**]. Indeed, the average turnover time for triacylglycerols in adipocytes is only a few days. If, however, **glycerol-3-phosphate is in short supply**, the **fatty acids** are released into the bloodstream [**used for energy**]. The rate of glucose uptake by adipocytes, which is regulated by **insulin** [response to carbohydrates] as well as **glucose availability** [from food], is therefore, also a **controlling factor** in triacylglycerol [**bodyfat**] formation and mobilization.”

Do other medical textbooks confirm this fact? Yes. *Harpers Illustrated Biochemistry* (26th edition), page 214, states in the section titled “The Provision of Glycerol-3 Phosphate Regulates Esterification: Lipolysis is Controlled by Hormone-Sensitive Lipase (Figure 25-7)”:

“Triacylglycerol is synthesized from acyl-CoA and **glycerol 3-phosphate** (Figure 24-2). Because the enzyme glycerol kinase is not expressed in adipose tissue, *glycerol cannot be utilized for the provision of glycerol 3-phosphate*, which **MUST be supplied from [dietary] glucose [from carbohydrates] via glycolysis [breakdown of sugar].**” (Emphasis added.)

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## High Carbohydrate Diet CAUSES Saturated Fat

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*Journal of Biological Chemistry* and *Lancet* tell us that cholesterol is normally combined with a special type of fat called an EFA (Essential Fatty Acid). On a high carbohydrate/low fat diet these EFAs are in short supply so saturated fats MADE FROM carbohydrates are tied to the cholesterol INSTEAD of what is suppose to be there – the healthy essential fats.

“Cholesterol is **normally esterified with unsaturated fatty acid** [you will learn about these in the next chapter]<sup>17</sup> and **when** – as in our experiments – these are extremely **deficient** in the body it is **esterified [combined] with much more saturated fatty acids synthesized in the body from carbohydrate.**”<sup>18</sup> (Emphasis added.)

Eat too many carbs and lots of saturated fat is made from them. Few of us understand that carbohydrates make saturated fat.

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17 Kelsey, F.E., Longenecker, H.E., *Journal of Biological Chemistry*, 1941, Vol. 139, page 727.

18 H.M. Sinclair, “Deficiency of Essential Fatty Acids and Atherosclerosis, Etcetera,” *Lancet*, April 7, 1956.

Here's what *Basic Medical Biochemistry* on page 503-504 has to say:

“When an excess of **dietary carbohydrate is consumed**, glucose is converted to acetyl CoA , which provides the 2-carbon units that condense in a series of reactions on the fatty acid synthase complex, producing palmitate [**a saturated fat**]....”

Therefore, it is quite clear that carbohydrates produce the saturated fat that everyone complains about.

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### Carbohydrates are NOT Body's Preferred Energy Source

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As *Basic Medical Biochemistry – A Clinical Approach*, pages 29, 272, 357 and 359, make clear, glucose [from **carbohydrates**] is **NOT the body's preferred energy** source; fatty acids are.

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### Carbohydrates Raise Both Insulin and Cholesterol Levels

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*Basic Medical Biochemistry*, pages 475 and 566, make clear that:

**Insulin** production, a response to consumption of carbohydrate, **raises cholesterol** levels.

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### Glucose (Sugar from Carbohydrates) Causes Diabetes!

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*Diabetes* 2001; 50:1683-1690 makes this quite clear:

- “Our results underscore the importance of tight glucose (sugar) control in limiting beta-cell [insulin producing] destruction...”

The authors are stating here that carbohydrates are a cause of the destruction of your pancreas.

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Carbohydrates are **Not** the “Feel Good Fix”; Moods are **Not Improved by Eating Carbohydrates**:

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*International Journal of Obesity and Metabolic Disorders*, Oct. 21, 1997; (10):860-864, makes this clear in the article, “Psychological and metabolic responses of carbohydrate-craving obese patients to carbohydrate: fat, and protein rich meals.” Their findings:

Moods are NOT improved by eating carbohydrates.

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How Much Carbohydrate is Stored?

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*The Student Companion for Stryer’s Biochemistry*, page 624, gives us the answer:

The normal 150-pound person stores about 250 grams—just ½ **pound** of glycogen [hydrated storage form] and 25 grams—just 1/20<sup>th</sup> **pound** of glucose. Compare this small amount to the significant amounts of stored bodyfat we have! These figures make it evident that humans can rely on stores of carbohydrates for only a short time.



Carbohydrates are NOT Your Body's Preferred Energy Source! Never forget this crucial fact.

If you think that you have already heard about all the evils of carbohydrates, think again. Here's another dreadful consequence of carbohydrates that, in addition to making you fat, will significantly impair your health.

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### Carbohydrates Contribute to Cellular EFA Deficiency and Insulin Resistance, Making Your Diabetes Even Worse!

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For years I knew that somehow, in addition to overdosing on carbs, diabetics were deficient in essential parent omega-6 (EFAs) in the cell membranes. This would impair insulin effectiveness and cause insulin resistance (insulin doesn't work effectively). We have a worldwide diabetes epidemic and must do everything possible to stop its proliferation. I thank Patricia Kane, Ph.D. for directing my attention to this vital information.

You know that carbohydrates generate an insulin response, provoking fat storage, since insulin is a fat storage hormone. The more fat you have, the more of a certain chemical, called Lp-PLA(2), is generated. Studies show that Lp-PLA(2) REMOVES precious parent omega-6 from cell membranes! If the cell membrane is deficient in EFAs, insulin transport into the cell is compromised and **your risk of insulin resistance significantly increases**. Who needs this additional diabetes risk factor?

Minimize those fattening, diabetes-causing carbohydrates and you'll be on the path to radiant health!

Here is how the journals report it:

"Phospholipase A2 (PLA(2)) hydrolyzes [removes] fatty acids from membrane phospholipids [the cell membranes comprised mainly of parent omega-6].<sup>19</sup>

The *Journal of Diabetes Complications* confirms that PLA(2) is **higher in overweight people** and diabetics:<sup>20</sup>

"Lipoprotein-associated phospholipase A(2) production is **significantly increased in diabetics**.

"Lp-PLA(2) was **significantly correlated with waist-hip ratio**.

"Lp-PLA(2) was **significantly higher** in subjects with the metabolic syndrome [diabetic] than in those without it." (Emphasis added.)

Furthermore, as the recent article titled, "Elevated Lp-PLA2 levels predict incident CHD independent of traditional risk factors," in *Journal of American College of Cardiology* (2008; 51: 913-919), makes clear, the Lp-PLA(2) enzyme is higher in diabetics than in non-diabetics. As would be expected from the decreased parent omega-6 in cells, heart disease would soon follow and it does:

"Elevated levels of lipoprotein-associated phospholipase A2 (Lp-PLA2), an enzyme involved in the proatherogenic [heart disease] process, are associated with coronary

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19 "Essential fatty acids in the brain," Haag, M., *Can J Psychiatry*, 2003 Apr; 48(3): 195-203.

20 "The role of lipoprotein-associated phospholipase A(2) in the metabolic syndrome and diabetes," Noto, H., Chitkara, P., Raskin, P., *J Diabetes Complications*, 2006 Nov-Dec;20(6): 343-8.



heart disease (CHD) events independent of traditional risk factors...

**“Lp-PLA2 was a strong and independent predictor of fatal and nonfatal CHD events over and above other traditional risk factors.**

**“After adjustment for age and gender only, elevated Lp-PLA2 levels were significantly associated with risk of incident CHD...**

**“In 2003, the Food and Drug Administration granted market clearance to an Lp-PLA2 test for coronary heart disease [yet few cardiologists use this marker]”**

(Emphasis added)

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**\*\*\* IMPORTANT NOTE \*\*\***

If you've been eating lots of carbs prior to starting your lower carb regimen, be sure to gradually reduce your carbohydrate intake. Don't suddenly change your diet. A sudden dietary change can shock your body, negatively affecting your digestion and could cause a sugar low that can last a week or so. To avoid this, start reducing your carb portions to about half for about a month. Then each subsequent week reduce them a little more. For increased fat burning reduce carb intake to **20-30** grams—for maintenance or with vigorous exercise, keep carbs at **60** grams (12 tsp) or less.

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**See Appendix XIX NOW for the Amazing Weight-Reducing Secret of Fruit Smoothie / Protein Powder Combos.**





## **Fats: Everything You Haven't Heard But Need to Know**

**Question: Which of the following statements are true?**

1. Carbohydrates best fulfill your appetite.
2. Eating saturated fat makes you fat.
3. Eating saturated fat causes heart disease.
4. A higher cholesterol level leads to more heart disease.
5. Ketones generated from a low-carb diet are dangerous.

**Answer: None! Let's find out why.**

### **Fats—Not Proteins—Not Carbohydrates—Fulfill Your Appetite**

I want to make it clear—it is fats that fulfill the appetite, not carbohydrates or proteins. Let's try an experiment. Prepare,

and then eat, six egg whites. Fifteen minutes later you will still be hungry. Shocking but true. Now try the whites with a few yolks added. Their appetite-fulfilling power is enormous because the yolks have lots of *natural* fat and they have 50% more protein than the whites, too. We aren't told these facts. While the fat satisfies your appetite, the protein is used for structure in your cells. (We will cover the importance of protein for your body in the next chapter.) Nature is very smart by coupling fats with protein. Think about it: the egg white is coupled to the egg yolk. The protein in the best steaks (prime grade) contains lots of marbled fat. The list of naturally occurring foods containing this combination goes on and on ....

## **Natural Fats Provide Healthy Flavor**

This fact is essential if you want to become lean-for-life with boundless energy. "Fat-free" is food industry code meaning that *sugar has been added* to replace the flavor lost by removing the fat. In our example with egg whites, you find that by themselves they are tasteless, but by adding the yolk they become delicious. The fat marbling in the steak is what makes it "prime" and tasty. Cheese is loaded with flavor because of its high fat content. Take out the fat and you are left with tasteless "no-fat cheese." (How this product can legally be called cheese escapes me!)



There is no food in nature that contains significant bio-available protein that contains no fat! Only man trying to outsmart Nature has unnaturally ripped the fat out of foods and the results have been disastrous!

Natural fats come in many varieties. There are saturated fats like those found in butter and coconut oil. There are mono-unsaturated fats like those found in olive oil. And there are polyunsaturated fats like those found in sunflower oil, evening primrose oil, canola oil, and flax oil. There are only two particular types of fat that the body *can't* make, called parent omega-6 and parent omega-3. They are called the healthy essential oils, meaning that your body can't make them on its own; we must get them on a regular basis from foods.

Much of my research focuses on these Parent Essential Oils, which I term "PEOs." Because so many foods have been adulterated and had their nutrients destroyed through food processing, many people choose a supplement to obtain these unadulterated essential fats. PEOs play an *essential* role in this diet—see the full explanation below in the section called "Importance of Special Fats Called PEOs."

## **The 100 Trillion Cell Membranes in Your Body Contain 50% Fat.**

That's right. Natural fat is critical to every cell in your body. In order to remain healthy, you need to eat fat daily and the medical science below proves it.

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**1997 Announcement:** *Natural* fats not harmful—total amount of *natural* fat irrelevant.

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In her *New York Times* health column, Jane Brody wrote an article titled, "Women's Health Risk Linked to **Kinds of Fats, Not Total.**" In it she quoted from Dr. Willett from Harvard University's School of Public Health, who stated that:

**“The total percentage of total fat in our diet probably doesn’t make much of a difference. It’s about time we discard that recommendation altogether and focus on what is really important: the type of fat.”**  
(Emphasis added.)

Unfortunately, too few heard about or acted on this insightful message. The problem with nutritional recommendations regarding fat is that all types of fat are lumped together and incorrectly termed “bad.”

### **Only Man-made, Unnatural, Transfats, Hydrogenated Oils, and Preserved Oils are Harmful.**

It is only a particular type of fat, the harmful man-made processed *transfats*, including partially hydrogenated oils, which need to be minimized. These types of “infinite shelf life” fats are the ones we have heard about in the news and which are being banned in various states. *Transfats* are found in margarine, hydrogenated peanut butter, and thousands of foods, including many frozen entrees, etc. While it is good news that *transfats* are being banned, they are being replaced with adulterated fats that are as bad, if not worse. Remember, as long as the fat has been altered to possess “infinite shelf life,” it will harm your body when eaten. Contrast this with the natural parent essential fats (PEOs) that these harmful fats started out as and that we require every day if we want to be healthy. Since this essential distinction has been lost on most people in the nutritional field, too many of us have become overweight and exhausted.

The low-fat, high-carbohydrate eating *experiment* that has been perpetrated on the entire American population over the past 50 years has caused most Americans to obtain completely

inadequate amounts of the parent essential oils the body requires and craves from food. Ladies need to know that their delicate hormones are made from the required *natural* fats. On a low-fat diet you compromise your health.

## **Women's Hormones Altered by Carbohydrates and Transfats**

*Harrison's Principles of Internal Medicine*, 13th edition, makes it clear that carbohydrates and harmful transfats alter women's hormonal systems:

Polycystic ovary disorder, running rampant in young women, is strongly associated with insulin resistance caused by the hormonal disruption of overeating *carbohydrates and transfats*.

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**Women—A low-fat or no-fat diet often causes monthly hormonal irregularity!**

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Dr. Frank Hu, also of Harvard, is quoted in the same Jane Brody article:

"Here we're talking **total fat being almost irrelevant to heart-disease risk** and emphasizing the **type of fat**. I think it's going to be **very controversial** in that respect." (Emphasis added.)

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**Newsflash:** The nutritional field doesn't change recommendations based on the latest scientific findings.

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## **Label the Finding “Controversial” and Do Nothing About it**

This is another amazing fact that few paid any attention to. More importantly, Harvard, like Stanford University, has a huge endowment so that no special interest group can influence their views. You can count on the accuracy of research from these universities, especially if the research is controversial. This story was published back in 1997. How many nutritionists, physicians, or anyone in government changed their outdated nutritional fat recommendations based on this new information and told you eating butter was nutritionally fine and the appropriate way to become **lean-for-life**? On the contrary, physicians, nutritionists, and the heart association recommended margarine!

It is tragic that nutritional recommendations are NOT updated based on the latest scientific findings. In physics the science FOLLOWS experiments; if the experiment shows a certain outcome, the “theory” changes and is updated to account for the new finding. This philosophy is not shared in the nutritional field and the 1997 Harvard-directed study’s findings DID NOT change the nutritional recommendations being given.

## **Organic Cooking Oils are Best**

We recommend getting organically produced oils at your health food store for cooking and avoiding all the commercial cooking oils found at your local supermarket. The exception is extra virgin olive oil, because no chemical additives, harmful extreme heating, or chemical preservatives are allowed in its manufacture – and non-organic is fine. But remember, use olive oil for low-heat cooking, not for frying, because high heat will ruin olive oil, butter, or any other oil containing unprocessed unsaturated fat. For high temperature cooking like deep frying, use coconut oil, palm oil, grapeseed oil, peanut



oil (almost impossible to find organic); even lard is ideal – as long as it is real lard – which is not made from vegetable oil (like Crisco), but from animal fat, heated and strained to form a semi-solid at room temperature. These oils and fats contain lots of SATURATED/MONOUNSATURATED fats so they don't alter their structure when heated.



Natural fat is healthful. Natural unadulterated fat is your friend. Only fats naturally fulfill the appetite—they are more “calorie dense.” Nature did this on purpose. I suggest a blend with more parent omega-6 than parent omega-3 PEOs<sup>1</sup>—the OPPOSITE of what nearly everyone recommends!

Why don't more people eat cheese and bacon for breakfast? Because the nutrition “experts” have scared them into thinking that eating fat causes heart disease. Fats have an “energy content” of 9 calories per gram compared with an energy content of just 4 calories per gram for proteins and carbohydrates. Fats are more calorie-dense, hence more appetite-fulfilling. That's why Nature made fats the number one appetite fulfiller!

Nobel Prize-winner Richard Feynman stated that, in science, if the *real-life* results do not match the theory, then *the theory is wrong*. That is all there is to it. Once you perform the “egg test,” comparing the appetite-fulfillment from egg whites alone vs. whole eggs, you will experience *real-life* results for yourself. Or if you prefer steak, compare the flavor and texture of a very lean steak with a richly marbled prime cut.

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1 Parent Essential Oils. See page 114, “Importance of Special Fats Called PEOs.”

## **Natural Fat Prevents Cancer—the Opposite of What We Are Told**

That's right. A major study published in *Journal of the American Medical Association* stated there was **no evidence that lower intake of total fat, or of a specific type of fat**, was associated with a **decreased risk of breast cancer**. And, contrary to the prevailing wisdom (in other words, the prevailing *guess*), the overall trend was *the more fat eaten, the less breast cancer contracted*.

What this means is that eating unprocessed natural fat is NOT the cause of breast cancer. You will discover later that natural fat is NOT the cause of heart disease, either. There was **no increase in cancer** from eating **saturated or unsaturated fat**. In fact, **the more fat, the less cancer**. Natural unadulterated fat is your friend.

This finding was confirmed again in the February 8, 2006 issue of *Journal of the American Medical Association*, which showed that a low-fat diet does NOT reduce the risk of cancer (or heart disease either).

Wrong nutritional recommendations not based on science can make choosing delicious tasting *and* healthful foods difficult. When the truth is known, eating becomes fun again. And you can stay on the path to becoming lean-for-life, too.

## **Importance of Special Fats Called PEOs**

Our bodies require special fats that make it possible, among other important functions, for sufficient oxygen to reach the cells. These special fats are highly oxygen-absorbing, and are called EFAs. However, the PEOs (Parent Essential Oils) — *not* the commonly termed EFAs — are what's important. PEOs

consist of parent omega-6 and parent omega-3. "Parent" means they are the *whole* form of the essential oil as it occurs in nature before it's broken down or built up into any of its components, which are called "derivatives."

Why are the parent forms — PEOs — so important? Many of the EFAs sold in the stores consist of manufactured EFA derivatives. Your body doesn't need or want many of these derivatives, because it makes its own derivatives out of the Parent Essential Oils (PEOs) you consume *as it needs them*. Taking fish oil and other health-food-store "EFAs" often overdoses you with derivatives, which can be very harmful. However, PEOs *are* essential and *must* be supplied from outside the body every day, from foods and certain oils. Your body can't manufacture PEOs (commonly termed EFAs) on its own — **they MUST be consumed daily**. You should also make sure you're getting more parent omega-6 than parent omega-3. I recommend more than one part *unprocessed*, natural, parent omega-6 to one part parent omega-3, and less than 2.5 parts parent omega-6 to one part parent omega-3. And *don't use fish oils!*

Every one of your 100 trillion cells is surrounded by a membrane (a thin enclosure). The cell membrane is half fat — it contains virtually no structural carbohydrate. A portion of the fat making up the membrane is saturated. "Saturated" means chemically nonreactive — in other words, it doesn't easily react with, or absorb, the oxygen that comes into contact with it. The other portion of the fat in the membrane is, however, "unsaturated" — it **DOES** easily absorb oxygen. The function of unsaturated (also called "polyunsaturated") fats in the cell membrane is to help the inside of the cell absorb oxygen. The saturated fats in the membrane function as a barrier to help protect the delicate, highly reactive, *oxygen-absorbing, energizing*, unsaturated fats in the membrane.

A blend of organic “parent” omega-6 and omega-3 is ideal because you get the appetite-fulfilling oils, and you also get nutrition that may be missing from your food as a result of commercial food processing.

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Here’s what *Principles of Biomedical Chemistry*, 1998, page 226, has to say about the importance of polyunsaturated fat:

“Therefore a high content of unsaturated fatty acid residues [EFAs] in the membrane lipids **makes the membrane more fluid.**”

More fluidity means easier oxygen flow into the cells as well as other biochemical transfers.

## **Ladies: Better Breasts and Hormones with PEOs**

Women need to know that breast tissue is over 85% fat. That’s right. A low-fat diet will ensure your breast tissue doesn’t develop to its fullest because breast tissue is SUPPOSED to be loaded with PEOs not the saturated fat your body makes from overdosing on carbohydrates! Another great fact about PEOs is that biochemically, your important hormones are made from them. PEOs are women’s best friend.<sup>2</sup> *The 24-Hour Diet™* enables women around the world to be lean-for-life, at the same time gives your body the fuel and essential nutrients it needs to do its job.

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2 Harper’s *Illustrated Biochemistry*, pages 117, 118, 123, 438. *New England Journal of Medicine*, 337: 1491-99. “Essential Fatty Acids in Perspective,” Sinclair, HM, *Human Nutrition: Clinical Nutrition*, July; 38(4):245-260. “Postprandial Lipid Oxidation and Cardiovascular Disease Risk,” Bowen, Phyllis, et al., *Atherosclerosis Reports*; 6:477-484, 2004.

## **Men: Better Endurance and Stamina with PEOs**

PEOs aren't just for women. Men report increased stamina and endurance during physical activity. Men need to know that PEOs are the building blocks of our natural testosterone, too.<sup>3</sup> In addition to keeping you healthy, PEOs can give you that “extra edge,” the athlete's advantage we can all use.

## **Your Supermarket's Cooking Oil Section Can Kill You!**

It's the *processed, adulterated* oils found in the cooking oil section of the supermarket that cause the majority of the problems blamed on cholesterol. The cholesterol is the transporter of a “poison” — that poison is the defective cooking oils found at your local supermarket!



Stop heart disease at its SOURCE—adulterated oils of all types—not just trans fats! Use coconut oil, palm oil, peanut oil, and even lard for high-temperature cooking.

## **Unadulterated Parent Omega-6 is Required in the Diet**

Parent omega-6 “rides” with cholesterol to every one of your 100 trillion cells that make up all of your tissues and organs. Because so much of the omega-6 on the market has been ruined by food processors, *The 24-Hour-Diet™* strongly recommends addressing the problem by doing the following:

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3 See note 2 above.



Use an unprocessed, unrefined and uncooked oil supplement containing more parent omega-6 than parent omega-3, without fish oil. Your health store carries these.

## **Experiment Shows PEOs Eliminate Carbohydrate Cravings, Reduce Appetite and Increase Energy and Alertness**

EFA's have many other wonderful properties. Dr. Cavallino, official physician and nutritionist to **La Più Bella del Mondo Beauty Pageant** – “**The Most Beautiful Women in the World**” – performed an experiment confirming some of these properties, especially how they cause fewer carbohydrate cravings and provide us with much more energy.

Dr. Cavallino conducted an eight-week experiment with a group of his patients who were already following a higher protein/lower carbohydrate diet. The experiment compared certain physical manifestations among these patients, both prior to taking EFAs and during EFA supplementation, based on the guidelines I have recommended. All patients were initially self-described “carbohydrate addicts.” Four weeks prior to starting their EFA supplementation, all patients were told the value of a higher protein/lower carbohydrate diet based on the information in this book. All patients were on this higher protein/lower carbohydrate diet for a minimum of four weeks *before* EFA supplementation. Here is what Dr. Cavallino wrote:

## Experiment in Italy for Overweight People with Carbohydrate Addiction, Conducted by Stephen Cavallino, M.D.

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- All patients were on a higher protein/lower carbohydrate diet **before** and after **EFA supplementation**.
- Patients were given an EFA formulation based on Professor Peskin's\* recommendations consisting of a blend with **more parent omega-6 than parent omega-3**.
- All patients suffered from carbohydrate addiction.
- Total patients – 10, consisting of eight women and two men.
- All patients agreed to collaborate, knowing that many foods were not permitted for the entire eight weeks (four weeks without the PEO supplements and four weeks with them). They agreed not to consume fruit, pasta, pizza, rice, sweets, soda or soft drinks. They all orally took 1,450 mg PEO formulation twice a day (3-gram total) using Professor Peskin's PEO recommendations<sup>4</sup>. Patients were asked to rate their responses to the regimen using four criteria, indicated by 1-4 asterisks:

One \* = poor/no response;

Two \*\* = fair response;

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4 Brian Peskin earned his Bachelor of Science degree in Electrical Engineering from Massachusetts Institute of Technology (M.I.T.) in 1979. He received an appointment as an Adjunct Professor at Texas Southern University in the Department of Pharmacy and Health Sciences (1998-1999). The former president of the University said of Brian's discoveries: **"His nutritional discoveries and practical applications through Life-Systems Engineering [Science] are unprecedented."**

Three \*\*\* = good response; and

Four \*\*\*\* = excellent response.

*Without the PEOs*, all patients (100%) suffered from **intense carbohydrate cravings** and had *little energy*. Eighty percent (80%) of patients suffered from **constant hunger**. After PEO supplementation began, these results were observed:

- The average patient **felt well** and **more at ease** with the higher protein/lower carbohydrate diet.
- **Overall appetite reduced in all 10 patients**; all noted a GOOD to EXCELLENT response, with 50% rating an EXCELLENT response.
- **Carbohydrate cravings were reduced in all 10 patients**; 9 people rated this reduction EXCELLENT – huge 100% success.
- **Energy and alertness increased** in all 10 patients: this was an EXCELLENT response – huge 100% success.
- **Weight loss goal was reached** in all 10 patients.

*Real-life* results were achieved. I am positive about and thankful for Professor Peskin's assistance in showing scientifically that most carbohydrates are bad in relation to promoting obesity and diabetes, and that EFAs are essential for good health with the objective to help us all to **lose weight without suffering**. I was able to obtain **excellent results adding the EFA supplementation program** as specified in this book.

*Stephen Cavallino, M.D.*

*October 22, 2005,*

*Ferrara, Italy*



## **Life-Systems Engineering Recommendations Require 80% or Better Success Rates to be Considered Meaningful**

With EFAs, the weight-loss goal of everyone participating in the experiment was accomplished. *Life-Systems Engineering Science* demands at least an 80% success rate for protocol effectiveness. Utilizing the miraculous power of these exceptional fats called EFAs, *in particular* PEOs (Parent Essential Oils), a high level of effectiveness was achieved in decreasing carbohydrate cravings along with decreasing overall appetite. Within just 30 days, **energy increased in 100% of the patients**, demonstrating PEOs' capability to increase energy, decrease carbohydrate cravings and help naturally fulfill the appetite.

## **Lack of Energy: America's Number One Complaint Solved—Energy “Lows” Take a Hike!**

Lack of energy is the Number One complaint of Americans. Physicians don't know what to do except recommend more sleep. Now you can throw that recommendation out the window and enjoy **MORE** of your life, not less.

Only fats give you natural energy without the corresponding “sugar-low” and exhausted feeling afterwards.

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**Newsflash:** Even a reed-thin person has 2-4 weeks of stored energy in their body fat

**YET**

only 12-18 hours of stored energy in their carbohydrate (glycogen) reserves (100 times less than from their own body fat).

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I know what you may be thinking. The nutritionists will tell you that carbohydrates provide lots of energy. My standing joke regarding carbohydrates is that if you want to be “**energized for sleep**,” then I’ll agree. Carbohydrates give you a huge sugar low and exhaustion. We’ve all had the sickening feeling. Fats NEVER give an energy low. We keep being told how unhealthy natural fats are, but nothing can be further from the truth, as these world-class medical journals and medical textbooks make clear:

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### **Newsflash:** Replacing Saturated Fat with Carbohydrate Found Worthless.

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One of the world’s leading heart journals, *Journal of Cardiovascular Risk*, accurately reported:

**“Low-fat diet has been considerably less effective in lowering total or LDL cholesterol than predicted.”**

It gets even better because the next finding should shock you.

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### **Newsflash:** No Saturated Fats are Found in Aortic Plaque!

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That’s right, none!

Eating saturated fat did not cause heart disease. *Lancet*, the world’s premier medical journal, presented the truth back in 1994. Few saw it. Even most cardiologists don’t know this. **Saturated fats do not clog arteries.** If you understand biochemistry, this is obvious. Apparently most cardiologists missed this class. So you can now enjoy prime steaks, real cheese, butter, bacon, and whipped cream again.

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**Newsflash:** Eating 1/10th the Fat Equals 15 Times MORE Heart Disease!

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That's right. *American Journal of Clinical Nutrition* gives us the truth.

Persons from southern India eat only 1/10th as much **natural fat** compared to northern Indians, yet have **15 times more heart disease**.

Amazing, isn't it! The people eating the least fat (1/10th as much) have 15 times MORE heart disease—the opposite of what you have been told.

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**Newsflash: Butter** is used **directly for energy**. *Textbook of Medical Physiology* tells us that the energy in butter CANNOT be stored as body fat!

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Has your nutritionist or physician told you to stop eating delicious butter and switch to margarine? They are incorrect. You can't beat the taste and healthfulness of organically produced butter.

**Arterial Plaques—It's Not the Saturated Fat!**

As I have already covered, it is not the saturated fat you eat that clogs your arteries! How do I know this? Because I carefully read the 1994 *Lancet* article which reported the components of arterial plaques. In an aortic artery clog, they found over ten different compounds in arterial plaque, but

**NO saturated fat.** There *was some* cholesterol in the clog. This is explained by the fact that cholesterol acts as a protective healer for arterial cuts and bruises.

So what is the predominant component of a clog? *Adulterated omega-6 polyunsaturated oils*—those oils in your supermarket cooking oil section that start out containing good EFAs but get ruined during commercial food processing. These adulterated oils can withstand the high temperatures in baking and deep frying, and are sold at the supermarket in thousands of products. These oils have been the focus of my research over the past 10 years. The key is understanding the major difference between untainted, good Omega-6 (a PEO) that your body requires on a daily basis and adulterated Omega-6 which will, over time destroy your health.

Many analyses have been published in the medical journals regarding the truth about the fat/arterial clogs connection, but few physicians have seen them. The average person has little, if any, chance of ever seeing the truth. In addition to the 1994 *Lancet* article, other journals published the truth, too. Two of these medical publications are listed below, one published in 1992 in the medical journal, *Eicosanoids* and another published in *Annals of Biochemistry* in 2001. They both stated the same thing, if anyone cared to look before giving recommendations. It's almost unbelievable that not one nutritionist or physician I have met in the past decade knew of this critical scientific fact in the search to keep everyone lean for life, energized, and heart-healthy, too. I'll bet that your physician, nutritionist, gym manager, or personal trainer won't know it, either.

## **Why Don't Cats Suffer Routine Massive Heart Attacks?**

Contrary to what we have heard, it is not the cholesterol itself that is clogging your arteries. A cat, a true carnivore, lives on a

diet of 100% meat. They consume lots of cholesterol, saturated fat, and meat. By “popular wisdom” cats should be suffering massive heart attacks on a regular basis, but they don't. What does a cat have to do with us? Contrary to popular belief, humans are much closer to carnivores such as cats or wolves, with 4-pint stomachs and the capability of eating once every few days, than to herbivores — grass eaters like cows or sheep with their 8½-gallon stomachs and the need to eat constantly.<sup>5</sup> You'll soon see the detailed comparison on page 9 of *Protein: Nature's Building Blocks*.

## **The Myths About Cholesterol Exposed — We Have Been Misled About How Eating Cholesterol Affects Our Blood Cholesterol!**

Just like we are being misled regarding the dangers of saturated fat, we are also being misled about cholesterol. You'll soon be on the path to enjoying guilt-free delicious foods again, like whipped cream, chocolate, eggs, and butter because now you are being given the truth about cholesterol!

### **➤ Myth 1—The Effect of Eating Dietary Cholesterol (from Food) is Significant!**

**TRUTH:** When test subjects increased their dietary cholesterol from 319 mg to 941 mg per day (close to a **300% increase**), the blood LDL **only increased a mere 6%!** That's right, a mere 6%. This is insignificant. Everyone expected a 50% or more increase but this wasn't the case. Are you amazed at the truth? If you have been avoiding steak, chicken, and eggs because you were scared, rejoice! Now you can once again eat foods that taste good since they are good for you. Knowing the truth will set you free and put you on the path to becoming **lean-for-life**.

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5 [http://www.second-opinions.co.uk/carn\\_herb\\_comparison.html](http://www.second-opinions.co.uk/carn_herb_comparison.html)

The daily television and print advertisements bombard us with doomsday comments about “bad cholesterol” coming from your genetics and the food you eat. But LDL cholesterol is not bad in and of itself. If it was, we’d all be dead and the human species would have ceased to exist eons ago. Contrary to what we are told, LDL cholesterol isn’t “bad,” and HDL cholesterol isn’t “good.” LDL brings those important PEOs into each of your 100 trillion cells and without plenty of LDL transporting these precious PEOs you’d be dead. Any potential problem with cholesterol lies elsewhere.

➤ **Myth 2—There is a Clear Correlation Between Cholesterol Levels and Heart Disease.**

**TRUTH:** One of America’s premier heart surgeons published the truth decades ago in *Journal of the American Medical Association*:

- Study reports that “cholesterol levels in and of themselves are meaningless.”
- 1,700 patients analyzed with heart disease *clearly show more heart-related disease with cholesterol between 1 and 250 than between 300 and 400 or higher.*

It is amazing that the truth is lost. Truth is replaced by popular opinions and recommendations that sound nice but are completely incorrect.

➤ **Myth 3—Artificially Lowering Cholesterol Works as Reported**

**TRUTH:** The *Journal of the American Medical Association* published a shocking article stating that cholesterol-lowering drugs do not significantly prevent heart disease. In 1993, a

report titled “Cholesterol Screening and Treatment” was released by the University of Leeds in England. Drugs for lowering high cholesterol levels were given to a study’s participants. The patients whose cholesterol was artificially lowered with drugs developed heart disease just as frequently as the drug-free cholesterol group. Also, there were more health problems in general among the group taking the drugs! In addition, the study discourages general cholesterol screening. **Despite these findings**, England’s estimated number of prescriptions for cholesterol-lowering drugs is increasing by 20% per year.

➤ **Myth 4—Cholesterol is Not Chemically Tied to Parent Essential Oils (PEOs)**

**TRUTH:** The medical community doesn’t yet understand that the real problem with cholesterol is *what the cholesterol is transporting*—adulterated fats and defective oils—not the cholesterol itself! **Don’t let anyone ever tell you that natural fats are “bad.”**

**Food processors have ruined our food and made LDL cholesterol into a “Poison Delivery System.”** The real problem with cholesterol is the huge number of molecules in the omega-6-based cooking oils that are ruined by commercial food processing. Bacon, cheese, steaks, or eggs AREN’T the problem. Of course, they get blamed, and we avoid these delicious foods based on wrong recommendations. Here’s what’s happening.

Because chemical food processors create transfats in the hydrogenation process and in so doing, ruin healthy oils—all in an attempt to prevent spoilage—the body incorporates these adulterated oils into its LDL cholesterol. With the consumption and transport of defective, artery-blocking processed oils, LDL cholesterol acts like a “poison delivery system,” bringing deadly transfats and other ruined oils into the cells. **It is primarily the**

**oxidized (altered) parent omega-6 fats that clogs the arteries, NOT the saturated fat!**

In 2004, the medical journal, *Current Atherosclerosis Reports*, made it quite clear:

**Parent omega-6** is one of the most **abundant** substances in **cholesterol**.

In 2006, *Free Radical Biology and Medicine* discussed this concept in detail, but the magazines, newspapers, and television shows rarely report this simple truth.<sup>6</sup>

Interventional cardiologist, Dr. David Sim, uses a great analogy:

**“It’s like building a wall without having enough bricks. You use another material and ‘fill the hole,’ but it doesn’t work correctly. The same thing happens when cholesterol doesn’t have enough *unprocessed* parent omega-6 to incorporate.”**

With the consumption of organic, unprocessed PEOs rather than adulterated oils and trans fats, LDL cholesterol will be made up of significant amounts of properly functioning “parent” omega-6, linoleic acid (LA). Now you understand why you can eat all the *natural* fat you desire and rest very easy at night.

### ➤ **Myth 5 - The Body Has a Cholesterol Sensor**

**TRUTH:** The body contains no natural “cholesterol sensor” in the bloodstream. Unlike critical substances like sodium,

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6 Gerhard Spiteller, “Peroxyl radicals: Inductors of neurodegenerative and other inflammatory diseases. Their origin and how they transform, cholesterol, phospholipids, plasmalogens, polyunsaturated fatty acids, sugars, and proteins into deleterious products,” *Free Radical Biology and Medicine*, Volume 41, Issue 3, August 2006, pages 362-387.



calcium, and glucose levels, your body does not need to maintain a strict cholesterol level. For example, glucose levels are held to an amazingly tight 0.1% (just 1 teaspoon of sugar per every thousand teaspoons of blood) in each of our bodies! Nature implements biological sensor mechanisms only if required. There is no need for a cholesterol sensor because the absolute cholesterol number is irrelevant – what matters is what the cholesterol is carrying.

➤ **Myth 6 - The Total Amount of Cholesterol, Not Its Structure, is Important**

**TRUTH:** This is THE REAL REASON the medical profession has offered us no insight into why, with ever lower cholesterol numbers, heart attacks continue to increase and cardiologists' offices stay full. LDL cholesterol is improperly blamed for a myriad of health problems when the real culprit is defective (adulterated) Omega-6. LDL cholesterol has no alternative but to transport these killers throughout our body since we have inadequate amounts of properly functioning PEOs (parent EFAs) in our diets as a result of widespread food processing and wrong nutritional recommendations.

Now, perhaps for the first time, utilizing the biochemical and physiological properties of cholesterol and the cholesterol/omega-6 connection, cholesterol's role finally makes sense.

## **The Truth about Ketones and Ketosis<sup>7</sup>**

Many nutritional experts warn people about the danger of going into a state of “ketosis” (harmful over-acidity or acidosis) as a result of eating too few carbohydrates and burning fat

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<sup>7</sup> Only severe diabetics [type I] without access to insulin and those with other metabolic disorders should monitor the acetoacetic acid and the  $\beta$ -hydroxybutyric acid, which can cause severe acidosis and coma.

too fast. But we have been misinformed about this important topic. The fundamental point to understand is that ketones are a **required and necessary byproduct of burning our own body fat**. Ketones are mandatory when you burn your own body fat for energy! Generating ketones through burning your own body fat is NOT the same thing as ketosis, and is quite healthy. The high-carbohydrate advocates are unable to make this distinction.

Here's what Dr. Lubert Stryer, Professor of Biochemistry at Stanford University and author of a highly rated biochemistry textbook used at medical schools, says about the importance of ketones:

**"Ketones are normal fuels of respiration and are quantitatively important sources of energy."<sup>8</sup>**



**"Ketosis" (harmful low-pH) is almost impossible in a normal person.**

Most of us don't need to waste money on "ketosis strips." Adapting to a higher fat, higher protein diet will almost never produce ketosis. We have been misled once again.

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**We advocate a slower change than most diet programs in shifting to a lower carbohydrate diet. A two-week timeframe works perfectly.**

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8 *Protein Power*, pages 195-196.

Nature is great. She lets us use our own body fat for energy in a superb metabolic system. You need to know that just like there are water and fat-soluble vitamins, your body uses two types of fat-burning mechanisms: *fat-soluble* fats and *water-soluble* ketones. Most nutritionists and many physicians don't understand this. For the average person, ketones are nothing at all to fear. In fact, **ketones are your best friend in your quest in becoming lean-for-life and energized.**

Staying on the lean-for-life path requires you to burn your own fat. There is so much *misinformation* in this area that I have prepared an entire paper on the subject at the end of this chapter in the Scientific Support Section.

## **Can Eating Fat Make You Fat?**

No, no, no, no!!! There is no insulin response to fats and an insulin response is required for fat storage. And the reason the fat can't be stored as fat is because fat can't be made into body fat without a chemical from carbs.

## **The Real Enemy: A Chemical from Carbs**

Everyone says that it's just about calories. "Calories in, minus calories burned up = fat storage." You've already discovered this is scientifically incorrect. It's not about fat at all—it's about a body chemical called *glycerol-3 phosphate*, which we'll nickname "G3P" for simplicity's sake. A basic medical textbook gives us the key to becoming and staying lean-for-life. Page 790 of *Basic Medical Biochemistry—A Clinical Approach* spells it out:

**ONLY IF** glycerol-3 phosphate **FROM EATING CARBOHYDRATES** is **abundant** will any of the **fat** you eat get **converted into body fat!**

Where do we get G3P? Let me repeat it – G3P is derived from carbohydrates, and *only carbohydrates contain it*. This means that the fatty acids from eating fat CAN'T be converted into body fat. They get used for energy, cellular and tissue structure, and in many other biochemical pathways. Simply put, only if you're eating lots of carbohydrates can consumed fat turn into body fat. Period!

## **Once More: Eating Fat Will Not Make You Fat!**

To the best of my knowledge, our explanation about the G3P-bodyfat connection is **the first appearance in plain English of the reason that eating fat won't make you fat**. Another renowned medical textbook, Harper's Illustrated Biochemistry (26th edition), clearly states:

- **A high intake of fat *inhibits* creation of more body fat.**

Can it be made more simple? How can nutritionists and physicians not understand this?" Probably because "opinion, not science," has become their mantra. But if you look to the science, it is all there. Of course, it's often complicated to understand and it is certainly not politically correct. But wrong opinions and guesses about the way the body works have ruined the health of generations of Americans, especially women. If you want to become lean-for-life you'll have to stop listening to wrong recommendations.

### **► Lean-for-Life Commentary**

There you have it: dietary fat *stops* the creation of more body fat. Excess body fat is generated *only* in response to insulin, which has to come from dietary carbohydrates. Case closed! In the coming chapters we will make great use of this discovery.

There are always many more “pound-packing” carbohydrates in low-fat or no-fat foods. Always try to avoid them.

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**WARNING:** “Low-fat” or “No-fat” is a food industry code that sugar has been added. Therefore, never purchase low-fat type products for yourself or your family. It's not nice or safe to try and fool Nature when it comes to our diet.

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## **Portion Control Not Needed!**

Watch any television show about healthy eating or dieting and the number one recommendation is to eat smaller portions. Of course, this translates to lower TOTAL caloric content of the meal. But you no longer need to starve to get lean-for-life. You have already discovered that the “calorie theory” is incorrect and incomplete. The great news is that portion control is *not* an issue:

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**Newsflash:** *The 24-Hour-Diet™* allows you to eat until full. That's all there is to it. No measuring, counting calories, or weighing food. Who has time for that?

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## Scientific Support for Chapter 6

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### 1997: Natural Fats Not Harmful—Total Amount of Natural Fat Irrelevant

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Dr. Walter Willett, of Harvard University's school of Public Health, in an article titled "Women's Health Risk Linked to Kinds of Fats, **Not Total**," (*New York Times*, Nov. 20, 1997, page A1), stated that:

**"The total percentage of total fat in our diet probably doesn't make much of a difference. It's about time we discard that recommendation altogether and focus on what is really important: the type of fat."** (Emphasis added.)

Dr. Hu, in the same article states:

**"Here we're talking total fat being almost irrelevant to heart-disease risk and emphasizing the type of fat. I think it's going to be very controversial in that respect."** (Emphasis added.)

Dr. Hu's comment signifies how resistant the nutritional and medical professions are to change; even where they are dead wrong! How many people needlessly torture themselves by restricting fat? Too many.

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### Natural Fat is Healthful

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**"Association of Dietary Intake of Fat and Fatty Acids with Risk of Breast Cancer,"** was published in *Journal of the American Medical Association*, 1999; 281:914-920:

**“We found no evidence that lower intake of total fat or specific major type of fat was associated with decreased risk of breast cancer.**

**“Contrary to the prevailing hypothesis [guess] the overall trend was inverse [the more fat eaten, the less breast cancer] and statistically significant.”** (Emphasis added.)

The researchers found the exact OPPOSITE result from that which the nutritionists preach. This finding was confirmed again in the February 8, 2006 issue of *JAMA*, which showed a low-fat diet does NOT reduce the risk of cancer (or heart disease either).

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### **Dietary (from Food) Cholesterol Insignificant.**

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*Metabolism* 2001 May; 50(5):594-597, makes clear that eating lots of cholesterol causes an *insignificant* rise in blood cholesterol level:

- **With even a 30% fat diet, significantly increasing dietary cholesterol from 319 mg to 941 mg per day (close to a 300% increase), the blood LDL only increased a mere 6% (18 points)! This is insignificant given the vast increase in dietary intake.**
- **Even insulin resistant women did not experience a significant cholesterol increase.** (Emphasis added.)

The article, **“No clear correlation between serum (blood) cholesterol levels and the nature and extent of atherosclerotic (heart) disease,”** (emphasis added) from *Journal of American Medical Association*; Vol. 189, No. 9, Aug. 31, 1964, makes it clear:

- **Study reports that “cholesterol levels in and of themselves are meaningless.”**

- 1,700 patients with heart disease analyzed clearly show “**more heart-related disease with cholesterol between 1 and 250 than between 300 and 400 or higher.**” (Emphasis added.)

Once again, cholesterol numbers in and of themselves are shown to be meaningless!

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## Replacing Saturated Fat by Carbohydrate Found Worthless

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*Journal of Cardiovascular Risk*; No. 1, June 1994, reported:

“HDL/LDL ratio **does not improve** when saturated fat is replaced by carbohydrate. Low-fat diet has been **considerably less effective** in lowering total or LDL cholesterol than predicted.” (Emphasis added.)

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## Vegetarians in India Develop Massive Heart Disease

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*American Journal of Clinical Nutrition*, 1967, 20:471, gives us the truth:

Persons from southern India **ate only 1/10th as much natural fat** compared to northern Indians yet got **15 times more heart disease.**

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## Butter is Used Directly for energy

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*Textbook of Medical Physiology*, page 843, tells us that butter does NOT get stored as body fat!

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## Arterial Plaques—It’s Not the Saturated Fat—It’s the Adulterated Parent Omega-6 that Clogs Arteries!

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"Dietary polyunsaturated fatty acids and compositions of human aortic plaque," Felton, CV, et al., *Lancet*; 344:1195-1196, 1994, makes it clear:

No saturated fat in an aortic artery clog. There are over ten different compounds in arterial plaque, but NO saturated fat.

Two other medical journals reported that there is no saturated fat in arterial clogs, if anyone would care to look: Waddington, E., et al., "Identification and quantification of unique fatty acid and oxidative products in human atherosclerotic plaque using high-performance lipid chromatography," *Annals of Biochemistry*; 292(2):234-244, 2001; and an article from Kuhn, H., et al., "Structure elucidation of oxygenated lipids in human atherosclerotic lesions," *Eicosanoids*; 5:17-22, 1992.

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## Cholesterol—Necessary, Not Evil—if Its Structure is Correct

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As the medical textbook, *Molecular Biology of the Cell*, makes clear on page 481, cholesterol is necessary for the structural integrity of the lipid bilayer (the structure in each of our 100 trillion cell membranes). *Student Companion for Stryer's Biochemistry* clearly states cholesterol's importance in each of your 100 trillion cell membranes on page 201:

**"Cholesterol modulates the fluidity of membranes.** By inserting itself between the fatty acid chains, cholesterol prevents the 'crystallization' at temperatures below  $T_m$  [melting point temperature] and sterically [structurally] **blocks large motions of the fatty acid chains** at temperatures above  $T_m$ . In fact, high concentrations of cholesterol **abolish phase transitions**

**of bilayers.** The modulating effect of cholesterol **maintains the fluidity of membranes** in the range required for biological function.” (Emphasis added.)

“LDL [**cholesterol**] contains up to **80% lipid [fats and oils]**, including polyunsaturated fatty acids and cholesterol, mainly esters. Linoleic acid [parent omega-6], one of the most abundant fatty acids in LDL...”<sup>9</sup> (Emphasis added.)

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*Newsflash:* It’s the *processed, adulterated* oils found in the cooking oil section of the supermarket that cause the majority of the cholesterol problems. The cholesterol is the transporter of a “poison”—those defective oils!

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## **The Truth about Ketones and Ketosis<sup>10</sup>**

Another thing the high carbohydrate proponents will try to scare you about is ketones and ketosis. They will try to tell you that consuming a low carbohydrate, high protein and high fat diet will harm you by putting you in a harmful metabolic state that lowers blood pH, etc. They won’t use any science in their argument because they don’t understand the complicated biochemistry behind basic nutrition. They will use pure emotion to attempt to scare the dickens out of you. But rest assured that this section contains everything you need to

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9 “Postprandial Lipid Oxidation and Cardiovascular Disease Risk,” Bowen, Phyllis, et al., *Current Atherosclerosis Reports*; 6:477-484, 2004.

10 *Only* severe diabetics [type I] without access to insulin and those with other metabolic disorders need monitor the acetoacetic acid and the  $\beta$ -hydroxybutyric acid which can cause severe acidosis and coma. Any normal functioning person need not worry.

know about ketones and ketosis that result from the burning of our own body fat.

As I lectured around the world, I got so tired about hearing this misinformation from attendees that I finally wrote a paper about ketones. This paper took nine months to write and is based on the information from four of the world's leading medical textbooks including: *Textbook of Medical Physiology*, *Basic Medical Biochemistry*, (Stryer's) *Biochemistry (4th) edition*, and *Essentials of Biochemistry*. It was also reviewed by a leading endocrinologist specializing in diabetes. I have included the most pertinent information below. Rest assured you can take this information "to the bank."

The science will astound you. Here's what Dr. Lubert Stryer, Professor of Biochemistry at Stanford University and author of a biochemistry textbook used at medical schools, says about ketones:

**"Ketones are normal fuels of respiration and are quantitatively important sources of energy."<sup>11</sup>**



**Translation:** Ketones are needed by your body, are very important, and are very useful, contrary to what you may have heard! There is almost as much misinformation regarding the health threat from ketones and ketosis (leading to metabolic acidosis) as there is misinformation about the benefits from eating carbohydrates.

(Voet's) *Biochemistry* on page 679 gives us further insight into ketones:

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11 *Protein Power*, pages 195-196.

“Ketone bodies are *water-soluble equivalents* of fatty acids.”

Nature is great. She lets us use our own body fat for energy in a superb metabolic system. Just like there are water-soluble and fat-soluble vitamins, your body uses two systems of fat-burning. For the average person, ketones are nothing to fear. In fact, ketones are your best friend in your quest to become lean-for-life.

More than 33% of our children are now obese and more than 65% of adult Americans are certified obese. Here are the most pertinent facts that you need to know about ketones and ketosis:

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**Surprise #1** – Carbohydrates are either aldehyde or ketone compounds.

#### ► *Lean-for-Life Commentary*

Even the carbohydrates we are told are so good for us are loaded with the building blocks of ketone bodies, which everyone says is bad (although they aren’t). This inconsistency proves the high carbohydrates proponents understand little medical science. Carbohydrates directly generate a problematic insulin response; ketones don’t.

.....

**Surprise #2** – Biochemically, **ketones are the number one preferred fuel** of the following organs: the skeletal **muscles**, the **heart**, and the **liver**.

#### ► *Lean-for-Life Commentary*

These organs don’t want sugar (carbohydrate). Are we doing great damage by not giving these vital organs the fuel (from natural fat-burning) that Nature designed them to run on?

.....

**Surprise #3**—Ketones are natural products of fat burning. When body fat is oxidized, ketones are produced.

► *Lean-for-Life* Commentary

Unless you want to keep all the excess body fat you have and want to keep adding more and more of it, you can't prevent your body from generating ketones.

.....

**Surprise #4**—We have been led to believe that the medical condition called “ketosis” (leading to metabolic acidosis—low blood pH) happens very quickly. This is incorrect. Only after 3-5 days of virtually complete starvation (fasting), do ketones in the body rise. Contrary to popular misinformation, running on ketones is the body's preferred and most efficient state, and the leading biochemistry and physiology textbooks support this fact.

► *Lean-for-Life* Commentary

We have been misled into believing that the body's preferred fuel is carbohydrates. We have been tricked into forcing our bodies to run on a diet of harmful sugar (carbohydrates). Nature never intended this, and the real-life results are terrible.

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**Surprise #5**—We've even been (mis)advised to eat many times a day. We have become accustomed to cravings. But we know that many religious sects fast for prolonged periods of time (weeks), and have safely done so for thousands of years.

### ► Lean-for-Life Commentary

Real-life results and Nature's time-tested wisdom offer more valuable guidance than the most popular unsupported theoretical guesses by those defending biased positions. The diabetes epidemic is accelerated by this bad advice.

.....

**Surprise #6**—We are told that inducing ketosis by minimizing carbohydrates will cannibalize our muscle tissue. *Medical Fact:* After just 3-5 days of fasting, our body re-adjusts to what I consider its NATURAL SETPOINT, requiring only 1/3 the amount of glucose it has been forced to tolerate daily during “the great 50-year carbohydrate eating experiment” — we could eat less than 1/3 of a bagel a day and maintain superb health. The brain and nervous system start to use ketones, because they finally get them from fat burning. **Our muscle is spared.**

### ► Lean-for-Life Commentary

If you have spent much time in a gym, then you know how difficult it is to add muscle. Do you really think that Nature would allow that precious muscle to be so quickly wasted?

.....

**Surprise #7**—Protein and ketones are NOT “hard” on the kidneys and liver. Most of the nitrogen from the protein is automatically and harmlessly converted to urea in the liver and excreted by the kidneys (a normal process), and the carbons are oxidized to carbon dioxide and water. The **ketones are used as primary fuel** by the liver, skeletal muscles, and heart.

.....

**Surprise #8—Carbohydrates**, not protein, are **hard on the kidneys**. High blood glucose levels place excessive stress on the kidneys. That is why diabetes—caused from consuming carbohydrates—is the single greatest cause of kidney failure in the U.S. Too many nutritionists and physicians continue to “parrot” outdated misinformation.

.....

**Surprise #9—Ammonia**, generated as a natural by-product from digestion of protein, is NOT harmful. Before (carbon skeletons of) amino acids can be oxidized (metabolized), the nitrogen must be removed. When this is done, ammonia is formed and converted to harmless urea, which is nontoxic, water-soluble, and readily excreted in the urine.

.....

**Surprise #10—**Perform a Medline Internet search on “kidney, high-protein diet,” and you will find article after article attesting to the scientific FACT there is no problem. An example is “The concomitant increase of renal net acid excretion and maximum renal acid excretion capacity in periods of high protein intake appears to be a highly effective response of the kidney to a specific food intake *leaving a large renal surplus capacity for an additional renal acid load.*”

### ► *Lean-for-Life* Commentary

The body's natural *life-systems* perform perfectly as Nature intended. In contrast to the body's preferred protein response, its carbohydrate response is strongly associated with renal (kidney) failure.

.....

**Surprise #11** – Have you heard the unfounded and scientifically incorrect claim that excess protein “leaches” calcium from the bone and causes osteoporosis? Then why does *The Textbook of Medical Physiology* state, “...**protein** functions in ... these cells to **transport calcium into the cell** cytoplasm... The rate of **calcium absorption** seems to be directly **proportional to the quantity of this calcium-binding protein.**”

► **Lean-for-Life Commentary**

**Calcium is transported into the cell via protein. Along with the protein,** the calcium is actually going *into* the cell – not being taken away! The “experts” couldn’t have made **a worse mistake than saying the opposite was true – but they did!** More on this topic in the “Protein-Nature’s Building Block” Chapter.

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**Surprise # 12**— Nature designed three *life-systems* to prevent any of the so-called “problems” with which the high-carbohydrate promoters continue to scare us: respiratory system, circulatory blood pH buffering system, and renal (excretory) system. Often, there is a lack of insight by nutritionists into how the various *life-systems* work together:

- **Before ketosis COULD EVER BECOME A PROBLEM** (in an extreme case, ketosis could lead to ketoacidosis – whereby low blood pH would cause severe complications – see Surprise #4), your respiration would have to increase to almost double your normal rate. Has this ever happened? Unlikely.
- Sufficient salt is required for the circulatory buffer system to work properly – could America’s obsession



with restricting salt intake result in lack of sodium bicarbonate ( $\text{NaHCO}_3$ ) in the body? Could Americans' obsession with reducing dietary salt be the real reason that this critical *life-system* is compromised and unable to do its job? Salt is critical to proper functioning. (Also, salt doesn't raise blood pressure, as we have been misled into believing! They know this medical fact at Cornell Medical School's Hypertensive Institute, and the famous "Intersalt Study" with over 10,000 participants around the world confirmed it.) Your physician probably won't have a clue that he is misleading you on high blood pressure's cause!

- Our renal system automatically responds to what we eat and stabilizes our system's pH (similar to increased breathing when exercising to increase oxygen).

.....

**Surprise # 13—** Protein does not cause kidney failure (high carbohydrates are the likely culprit). This book discusses nutrition for healthy people, not ones with diseased kidneys. Unless you are eating too many carbohydrates and have a diabetic glucose level, a normally functioning kidney REPELS excess protein in the blood.

### ► *Lean-for-Life* Commentary

Recommendations intended for those with kidney disease have no bearing concerning healthy people. If you have an injured back, you should allow it to heal by resting it—but a healthy person could exercise for hours—so don't be fooled by incorrect applications. If the kidney is diseased

or malfunctioning, it may make sense to restrict protein somewhat – not cut it out entirely.

## **Some Important Notes:**

**Note #1:** If you exercise by running, you produce lots of “extra” carbon dioxide – a waste product – because respiration increases. If you eat more protein, you automatically produce more ammonia. Your body is made to easily handle this, just like your body is made to easily handle the stress of exercise, with its associated systemic oxygen deficiency.

**Note #2:** Glycosylation is when proteins acquire a “sticky” sugary coating from carbohydrates. This condition occurs spontaneously without the aid of enzymes in proportion to the amount of carbohydrates consumed. This process causes clogged arteries and cellulite, too. The more carbohydrates consumed, the greater the arterial problems.

**Note #3:** This is VERY IMPORTANT to understand! Even after *five* weeks of complete starvation (with water still being consumed), blood glucose levels in the average, healthy adult only drop to 65 mg/dl whereas normal is 70-90 mg/dl; not much of a difference. Never forget that when eating sufficient protein we *automatically* get all the sugar (glucose) we require by the process termed *glucogenesis*. **The consumption of carbohydrates aren’t required by the body because they can be manufactured as needed *by* the body.**

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I hope this section completely annihilates the nutritionists’ and physicians’ comments designed to **scare you with opinion** – not science. I urge you to confirm any of this information using the medical textbooks referenced in this book.

I also suggest you use some “ketone strips” and convince yourself that you aren’t spilling ketones on this diet. You can also have your physician measure your bun/creatinine ratios. Your physician can also measure the  $\beta$ -hydroxybutyric acid and acetone during your next physical. Your physician will likely be impressed with the lower blood glucose levels. I routinely eat lots of protein and fat with no ketone spillover.



**Eating fat can't make you fat.**

Here's what *Basic Medical Biochemistry – A Clinical Approach* on page 510 has to say:

**“Adipose tissue [body fat] lacks glycerol kinase and can produce glycerol-3 phosphate ONLY from glucose dihydroxyacetone phosphate [from eating carbohydrates]. Thus, adipose tissue [body fat] can store fatty acids ONLY when glycolysis is activated, i.e., the fed state [after eating].”** (Emphasis added.)

Note: Body fat LACKS glycerol kinase, as seen above, to make more body fat. Therefore, the glycerol-3 phosphate from EATING dietary carbohydrate is required. You can't get it any other way.

Page 790 gives us further insight into staying lean-for-life:

**“If glycerol-3 phosphate is abundant [from carbohydrates], many of the fatty acids so formed**

are reesterified [**converted back into**] to triacylglycerols [**more body fat**]..." (Emphasis added.)

Here's another from *Student Companion to Stryer's Biochemistry*, page 610:

"Adipose cells [body fat] constantly break down and resynthesize triacylglycerols, but synthesis [of **more body fat**] **cannot proceed without an external supply [from food] of glucose**. Thus, **externally supplied glucose is required.**" (Emphasis added.)

*Harper's Illustrated Biochemistry* (26th edition) states:

- "A high intake of fat *inhibits* lipogenesis [**creation of more body fat**] (page 231).
- "The products of lipid [fat] digestion enter the circulation as triacylglycerol-rich chylomicrons (chapter 25). In adipose tissue [body fat] and skeletal muscle, lipoprotein lipase is activated **in response to insulin** [a response to carbohydrates]; the resultant free fatty acids are largely taken up to form triacylglycerol reserves, while the glycerol remains in the bloodstream and is taken up by the liver...." (page 232)
- "Fatty acids (and ketone bodies formed from them) **cannot be used for the synthesis of glucose.**" (page 232) (Emphasis added.) Note: Again, this means that eating FAT CANNOT make you FAT.

The medical textbooks are quite clear about how we get fat, and how we can stay lean-for-life, if anyone cares to look.

Appetite-fulfilling oils are one of the "secret weapons" that *The 24-Hour-Diet™ Program* uses to help fulfill everyone's dream of becoming lean-for-life and energized.

**NEWSFLASH:** “Ketosis” (harmful low-pH) is almost impossible in a normal person! Adapting slowly to a higher-fat, higher-protein diet will almost never produce ketosis. From the *Textbook of Medical Physiology*, page 869, we learn the truth:

“On changing SLOWLY from a carbohydrate diet to an almost [even] COMPLETELY FAT diet, a person’s body adapts to the use of far more acetoacetic acid than usual, and in this instance, ketosis normally does not occur.

“For instance, the Eskimos, who sometimes live almost entirely on a fat diet, do not develop ketosis. Undoubtedly, several factors enhance the rate of acetoacetic acid metabolism by the cells. Even the brain cells, which normally derive almost all of their energy from glucose, after a few weeks *can derive 50 to 75 percent of their energy from fats.*” (emphasis added)

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## **Protein: Nature's Building Blocks**

**For years we have been told by medical and** nutritional experts and health writers to eat less protein and replace it with more carbohydrates. The nonstop repetition of this recommendation by doctors and nutritionists for decades has led everyone – “experts” and the public alike – to believe it had to be true. But a major study was finally concluded in 2005 which laid bare the truth about this long-standing harmful recommendation.

### **2005 OMNIHEART STUDY Shows Protein and Natural Fats are Superior to Carbohydrates in Reducing Blood Pressure and Improving Blood Profiles**

The following results were published in the online medical journal, “theheart.org,” a publication for cardiologists, in

December 2005.<sup>1</sup> This conclusive evidence supports a diet rich in protein and fat over a diet high in carbohydrates.

**“Turning conventional dietary wisdom on its head,** results of the OMNIHEART study indicate that substituting **proteins** or unsaturated fats for carbohydrates within the context of a healthy diet can **reduce blood pressure and improve lipid profiles.**

**“...Compared with participants eating the carbohydrate-rich diet,** those eating the **protein-rich diet** had greater **reductions in blood pressure, LDL, and triglycerides...**

**“... [Dr. Barbara] Howard also took issue with the study’s focus on monounsaturated fats, saying she would have preferred a study emphasizing polyunsaturated fats [EFAs], which are known to have a better effect on cardiovascular risk than monounsaturated fats.”**  
(Emphasis added.)

Once again, however, these facts are also found in the medical journals and medical textbooks. The results reported in this article are scientifically accurate, but not popular in today’s climate of “political correctness.” But if you follow popular opinion and “conventional dietary wisdom” INSTEAD of following SCIENCE, you will end up fat, dumb, and dead.

Some might find this commentary flippant and insensitive, but I will use whatever I can to get you to listen to the science

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1 <http://www.theheart.org/printArticle.do?primaryKey=601763>, ref: Appel, JL, et al., “Effects of protein, monounsaturated fat, and carbohydrate intake on blood pressure and serum lipids.” Ref.: *Journal of the American Medical Society* 2005; 294:2455-2464.



rather than “popular opinion.” In this study the researchers used olive oil (a monounsaturated oil). Olive oil is fine because it won’t harm us, since it isn’t processed like most of the other cooking oils in your supermarket. However, because olive oil contains very few of the essential fatty acids (PEOs) we discussed in the last chapter, the study’s results would have been even stronger if a PEO-containing oil had been used.

Any way we look at it, carbohydrates are a far inferior food when compared with proteins (and natural fats). The rest of this chapter will show you why.



Keep an open mind when discovering new information. Look to science to answer your questions in your search for the truth on how to become lean-for-life.

## **Protein Can't Make You Fat!**

Prepare to be amazed. Because protein can't be stored as fat, protein can't *make* you fat. Athletes and their trainers already know this and consequently are told to eat lots of protein. Here's why. The medical textbook, *Biochemistry of Exercise and Training*, clearly states:

**“There is no mechanism for storing excess dietary protein in the body, and any amino acids that are ingested in excess of the immediate requirements are oxidized [burned for energy, not stored as fat] and the nitrogen excreted.”**

That's right. Regardless of what you have been told, **protein can't be stored in the body or turned into fat.**

Protein can't be stored as fat or excreted because it is too critical a substance to be wasted! That's right—a significant amount of protein is required and used for body structure—such as for your muscles (which constitute half your body-weight)—and in biochemical processes, in which a tremendous number of critical enzymes and antibodies—all made from protein—are needed.

You need to understand this fact: you could eat protein until you passed out from overeating and you still would not gain weight. Have you ever come across a nutritionist, personal trainer or physician who was aware of how great your body's need for this key component is? I haven't. It's just the opposite; they will often tell you how LITTLE protein you require.

## **Protein is Required for Fat-Burning**

That's right. It warrants repeating that the medical textbook, *Essentials of Biochemistry*, page 220, tells us that carnitine, an amino acid from protein, is *essential for fat-burning*. A deficiency in protein automatically means a deficiency in fat-burning capability and a roadblock to becoming **lean-for-life**.

## **Animal-Based Protein Reigns Supreme**

Animal-based protein is best for our bodies because it is fully digested and is highly concentrated. With vegetable-based foods, the protein is "in there," but *not* fully digestible by a human being. To obtain just eight ounces of bio-available,

muscle-building protein, you would have to consume staggering amounts of the non-animal-based foods shown in the following table—for example, 19 pounds (8,700 grams) of brown organic rice, 6 pounds of kidney beans, or 2.3 pounds of almonds! Disregard the advice of the well-intentioned nutritionist who tells you rice and beans are perfect foods because they have complementary proteins. You can't eat *enough* of them to get sufficient protein for your body without “ballooning” to the size of a house and becoming diabetic, too. India is one of the most diabetic countries in the world because of improperly practiced vegetarianism.

Examples of amounts of various non-animal foods required to provide one-half pound of usable protein are shown in the table on the next page. Follow those nutritionists' uninformed advice about using vegetable foods for protein at your own risk, but make sure all of your clothes have an elastic waist, since you'll be expanding at a very rapid rate. And, because of these foods' enormous sugar (carbohydrate) content, you will have put yourself firmly on the path to becoming diabetic.

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For those who wish to remain vegetarian, but also want to obtain the health and dietary benefits of the higher-quality animal proteins, you can obtain animal-based proteins from animal *products* such as eggs, hard cheeses, cottage and ricotta cheeses, and unsweetened yogurt, without eating animal flesh itself.

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Type of Food	Quantity Providing Half-pound (227g) Protein	
	POUNDS	GRAMS
Peanuts	1.9	885
Pumpkin	2.0	931
Almonds	2.3	1,067
Brazil Nuts	2.5	1,135
Sunflower Seeds	2.5	1,158
Sesame Seeds	2.7	1,248
Hazel Nuts	3.5	1,611
Whole-meal Bread	4.7	2,165
Whole Lentils (dried & boiled)	5.7	2,588
Chickpeas (dried & boiled)	5.9	2,701
Kidney Beans (dried & boiled)	5.9	2,701
Whole-meal Spaghetti (boiled)	10.6	4,835
Spinach (raw or boiled)	16.5	7,500
Brown Rice (boiled)	19.2	8,739
Lettuce (romaine)	33.0	15,000
Lettuce (iceberg)	50.0	22,700
Apple (raw)	166.0	75,666

Ref.: The Vegan Society:

<http://www.vegansociety.com/html/food/nutrition/protein.php> and US

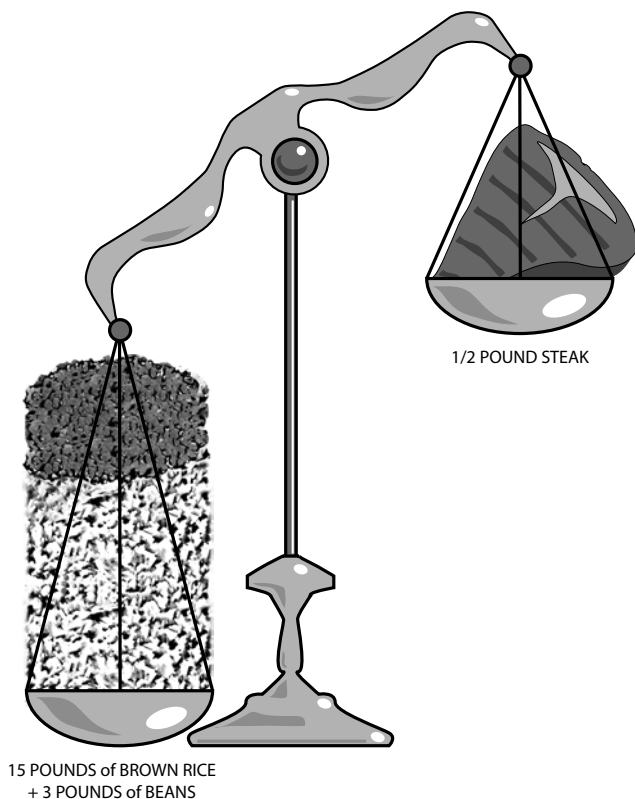
Department of Agriculture: <http://www.ars.usda.gov/Main/docs.htm?docid=4451>

**The Value of Carbohydrate-Rich “Traditional Diets” Has Been Overstated.** We have often heard from nutritionists and misled physicians that third-world and developing countries eat a better, more nutritious diet than we do because their foods are produced with far less refinement and food processing and they eat more soy, whole grains and legumes. While this may be true when it comes to eating unprocessed oils, it isn’t true when it comes to critical protein requirements. The following excerpts from a 2005 report by the Association of Official Analytical Chemists International (AOAC) concludes that traditional diets, as observed in developing countries, have

serious deficiencies. Although some of the terms are technical, the point is clear: vegetable-based protein is inferior to animal-based protein.

- **“Digestibility of protein in traditional diets from developing countries such as India, Guatemala, and Brazil is considerably lower compared to that of protein in typical North American diets.”**
- **“The presence of less digestible protein fractions, high levels of insoluble fiber, and high concentrations of *antinutritional factors* in the diets of developing countries, which are *based on less refined cereals and grain legumes* [soybeans, peanuts, beans, lentils, chickpeas, etc.] as major sources of protein, are responsible for *poor digestibility* of protein.**
- **“Antinutritional factors may occur naturally, such as glucosinolates in mustard and rapeseed [Canola] protein products, trypsin [required for digestion] inhibitors and hemagglutinins [causing heart attacks] in legumes, tannins in legumes and cereals, phytates in cereals and oilseeds, and gossypol in cottonseed protein products.**
- **“The presence of high levels of dietary trypsin inhibitors [impeding digestion] from soybeans, kidney beans, or other grain legumes can cause substantial reductions in protein and amino acid digestibilities (up to 50%) in rats and pigs.**

This study shows that the high-carbohydrate “traditional diet” common in developing countries is often insufficient to meet the protein and other nutritional needs of their people. It is important, however, to differentiate *which* traditional diet we are



talking about. When we compare diets from developing countries to those prevalent in America pre-1940, we find few health issues of cancer, heart disease, and diabetes resulting from Americans' "old" way of eating. Clearly, America's pre-1940 diet, which was still largely unrefined and provided ample animal protein was working well before food processing destroyed vital nutrients in our food and well-intentioned nutritionists interfered by issuing wrong recommendations.

Today, protein deficiency has become a significant issue as we lose the war on obesity. Many of our experts have been giving us their opinions, not science. We must heed Nobel Prize-winning physicist Richard Feynman's warning against being given *pseudoscience* under the auspices of real science.

## *Protein: Nature's Building Blocks*

<b>Teeth:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
incisors:	both jaws	both jaws	lower jaw only
molars:	ridged	ridged	flat
canines:	small	large	absent
<b>Jaw:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
movements:	vertical	vertical	rotary
function:	tear & crush	tear & crush	grinding
mastication:	unimportant	unimportant	vital function
rumination:	never	never	vital function
<b>Stomach:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
capacity:	4 pints	4 pints	8 1/2 gallons
emptying time:	3 hours	3 hours	never empties
interdigestive rest:	yes	yes	no
bacteria present:	no	no	yes - vital
protozoa present:	no	no	yes - vital
gastric acidity:	strong	strong	weak
cellulose digestion:	none	none	70% - vital
digestive activity:	weak	weak	vital function
<b>Colon &amp; Caecum:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
size of colon	Short/small	Short/small	Long
caecum size:	tiny	tiny	Long
function of caecum :	none	none	vital function
appendix:	vestigial	absent	Caecum
rectum:	small	small	capacious
digestive activity:	none	none	vital function
cellulose digestion :	none	none	30% - vital
bacterial flora:	putrefactive	putrefactive	fermentative
food absorbed:	none	none	vital function
volume of faeces:	small/firm	small/firm	voluminous
gross food in faeces:	rare	rare	large amount
<b>Gaul Bladder:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
size:	well-developed	well-developed	often absent
function:	strong	strong	weak/absent
<b>Digestive Activity:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
from pancreas:	solely	solely	partial
from bacteria:	none	none	partial
from protozoa:	none	none	partial
overall efficiency:	100%	100%	50% or less
<b>Feeding Habits</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
frequency:	intermittent	intermittent	continuous
<b>Survival without:</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
stomach colon & caecum:	possible	possible	impossible
microorganisms:	possible	possible	impossible
plant foods:	possible	possible	impossible
animal protein:	impossible	impossible	possible
<b>Ratio of Body Length to</b>	<b>MAN</b>	<b>WOLF</b>	<b>SHEEP</b>
entire digestive tract/small intestine:	1:5 1:4	1:7 1:6	1:27 1:25
	<b>Huge difference!</b>		<b>4 times Longer!</b>
<i>As you can clearly see the science tells the story of what we should be eating!</i>			

## **Usable Protein Contained in Eggs Versus Rice and Beans**

An egg white is an ideal protein with a rating of 100% digestibility. On the other hand, the protein in brown rice is ONLY 59% usable and that in beans is ONLY 49% usable because of their fiber and other anti-nutritional factors such as those

mentioned in the AOAC report quoted from above. Therefore, the *usability* of the protein in rice and beans is approximately *half that of an egg*!

Now, couple this with the fact that the rice and beans contain only about *half the quantity of protein* that is in a comparable quantity of eggs. So rice and beans have half the protein of eggs, and THAT protein is only half as usable as that in eggs. This means that rice and beans have **AT MOST** a mere **one-fourth** ( $\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}$ ) **the usable protein amount** of eggs. No problem, you say – I'll just eat more of the rice and beans! Wrong. To get a pound's worth of animal-based protein, you'd need four pounds of rice and beans! This poses three problems.

First, you could not eat four pounds of rice and beans daily. Your stomach couldn't handle the immense volume and you'll be unbelievably bloated all the time. Second, rice and beans contain huge amounts of carbohydrate, which will make your blood sugar levels soar! Ultimately, eating so much of these foods will make you "balloon" up to the size of a house due to insulin's fat-storing response. Lastly, you won't get your B vitamin requirements (like niacin) from non-animal protein sources like cereal or rice, either. Clearly, increasing your consumption of animal-based protein and reducing the carbohydrate-rich foods is the way to stay lean-for-life.

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Forget the outdated notion that "rice and beans" make ideal proteins.

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## **What Were We Designed to Eat? Herbivore vs. Carnivore**

We are often told that the human digestive system is closer to that of a sheep or a cow than to a wolf's. This is completely



incorrect and not based on the science of human physiology, which makes clear that our digestive system is almost identical to that of a wolf. We are NOT designed to eat multiple meals throughout the day like cows, goats, and sheep. This wrong recommendation has turned us into a nation of human billy goats, “grazing” all day long. You will never stay lean-for-life and free of diabetes doing something so unnatural to your physiology.

**The chart on the next page illustrates the physiological FACTS which compare the digestive systems of humans, wolves and sheep.** When you review these scientific characteristics, you will understand that we are closer to carnivorous wolves, dogs, and even cats than to vegetarian sheep or cows with four stomachs. The comparative physiology is not new; it has been known for decades. So the next time someone tells you a human's digestion is closer to that of an herbivore like a sheep, give them this chart and point out the sheep's enormous 8½ gallon stomach compared to our little 1 quart capacity!

As you can see clearly from this table, humans are *much closer to carnivores such as wolves than to herbivores such as sheep*. The science tells us the story of what we should be eating!

## **Early Scientific Proof Humans Need Diet of Animal Protein**

Daniel Munro, M.D. was an early proponent of the high protein diet and wrote a book titled *Man Alive, You're Half Dead* in 1940. The jacket of his book stated,

“Authoritatively, **scientifically, convincingly** [this book] shows you how to eat your way to **glowing health and stay there**. The celebrated doctor explains

the **advantages of the high-protein diet** and cites case after case that responded with **exceptional results** to this diet.”

In his book, Dr. Munro stated:

“Herbivorous animals, such as the cow or sheep, eating only vegetable food, have specialized digestion. They are equipped to eat large quantities of food in proportion to their size, **compared to humans**. They all first alkalize their food by much chewing (their saliva being alkali), and **they all re-chew their food** for a long time (chewing the cud). **They all have a large sack or pouch** where **man has a tiny appendix**.

“**Man**, with his small appendix, seems **plainly in the class of meat-eating animals**, rather than the herbivorous **animals with their large pouches**. **We cannot chew our cud**.

*“Physiology of digestion was ignored. Let’s begin to think about it now ....”* (Emphasis added.)

This was many years prior to Dr. Atkins. Dr. Munro’s book drew its conclusions about the proper diet of humans from science, not opinion. Unfortunately, barely anyone did begin to think about it, as Dr. Munro recommended. Even back in 1940, it wasn’t politically correct to extol the virtues of red meat. We can trace the unfortunate birth of politically correct nutritional science to this period, and widespread obesity and bad health have been the result – a nation bursting at the seams, overweight, exhausted, and susceptible to a myriad of illnesses.

## **What About Eating Every Three Hours? Don't!**

We SHOULDN'T have to make eating a full-time job. Your time can be much better spent than being a slave to constant hunger and food cravings. Some current diets suggest that an individual should eat 5-6 times a day, or every three hours, as well as significantly limit their intake of fats, proteins, and carbohydrates. No wonder these diet "gurus" have to tell them to eat constantly – their clients are starving all the time on their incorrect dietary recommendations! I am saddened every time I see another diet book or magazine article recommending you eat 5-6 times a day, grazing like a cow or billygoat.

**The idea that you will burn essential muscle instead of useless bodyfat if you don't eat 5-6 times daily is silly.** This would mean muscle is less important to the body than fat. This statement is FALSE. Anyone going to the gym knows how hard it is to build muscle. From the medical physiology texts, we know that your body won't destroy precious muscle unless you starve for weeks on end. It only happens as a "last resort." The *Textbook of Medical Physiology* makes clear on page 881 that there have to be "**several weeks of starvation**" BEFORE muscle will ever be cannibalized. It is simply not true that carbs are required at every meal "to spare your muscle." If the human physiology (or that of any living thing) had preferred burning precious muscle to using worthless, excess bodyfat for energy, the entire human race would have died out eons ago. As hunter-gathers, humans never could and never would eat every three hours.

Nature supports the concept that the fittest survived – not the dumbest. The esteemed individuals who put this crazy concept forward should never advance dietary theories without rock solid science to support their ideas.. Of course they do anyway.

It is easy to understand why so many people are confused as to how to lose weight, when we are all under constant assault from so many diets based on “fluff” and personal opinion.



Nature supports the concept that the fittest survive—not the dumbest.

## **Wrong Recommendations for Daily Amounts of Protein**

What amounts of daily protein have been recommended for the last 20 years? Far too little. One of America's current leading physicians has recommended in his newsletter just a few ounces (as low as 2-3) each day. But this recommendation is at odds with the biochemical functions that occur within every human body. Did you know that the majority of consumed protein, an enormous 60-70%, is “magically vaporized away” in fueling the body's own digestion? The remaining 30-40% of the protein is used for its other needs. The medical textbook *Basic Medical Biochemistry*, tells us this:

Following the ingestion of a high protein meal, the **gut and liver utilize most of the absorbed amino acids**.  
Glutamine and aspartate are **utilized as fuels by the gut**.

In addition, other processes occur (discussed in Section Three) that further reduce the net protein left to take care of all the remaining protein needs of the body. Taking these facts into

consideration is essential in order to deduce the correct amount of protein we need to eat each day.

How much protein is required for maximum health? *Basic Medical Biochemistry – A Clinical Approach*, pages 648–649, gives us a clue. A 150-pound man requires a full pound of protein a day for normal bodily processes<sup>2</sup> – and even more is required for maximum health. Your body is highly efficient and can recycle about half of the daily protein requirement for the next day.

This means at least **8 ounces of animal-based protein** needs to be consumed each day. *Animal-based* protein means protein from sources like eggs, cottage cheese and full-fat yogurt, as well as protein from meat, poultry or fish. Now, it is likely you have been told that eight ounces of animal-based protein is excessive. Understand there is much more to the protein story. When we start with 8 ounces of protein, we are left, after its digestion, with just 2-3 ounces to support tissues like your muscles, as well as many biochemical reactions. So the “experts” are correct in the NET amount of protein required, but completely mistaken as to how you get there.

*Principles of Medical Biochemistry*, pages 442-447, confirms this incredible simple truth about protein metabolism. If you consumed just 3-4 ounces of protein a day, as some ill-informed “experts” suggest, then the net *bio-available* amount to your body would be a little over an ounce. This tiny amount would have to keep all of your muscles – half of your bodyweight – fully functional, your antibodies at full strength for maximum immunity to disease, and all of your hormones and enzymes plentiful

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2 **Note:** This amount is a **theoretical maximum** requirement. 0.8 gm protein/day per kg of bodyweight is the quoted minimum protein requirement. This means for a 220-pound man about 80 grams – 2.8 ounces. However, **this amount would keep you alive, but not provide radiant health**. Personally, I want to be on the upper side of protein intake.

and potent. That's 50 pounds of muscle tissue to support for a person weighing 100 pounds. And, as if this wasn't enough, this tremendous job is in addition to the requirement that all of your 100 trillion cells need lots of protein to remain structurally sound. Of course, hemoglobin, the oxygen transporter in blood, requires lots of protein for its manufacture, and maintenance, too.

Two medical textbooks, *Essentials of Biochemistry* and *Basic Medical Biochemistry – A Clinical Approach*, explain that amino acids (proteins) are used in cellular structure and play many additional important roles in the body. Like the healthy parent essential oils (PEOs) discussed in the last chapter, proteins are extensively used in cell structure and biochemical processes. Eating a mere 2-3 ounces of protein a day is not enough! Everyone, and especially women, have been told to eat less protein over the past 50 years – advice that has misled us into removing essential body-rebuilding nutrients from our diet.

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Every one of your 100 trillion cells requires its cell membrane to be 50% protein. Over half your bodyweight is protein! Contrary to popular opinion we need LOTS of protein in our diets!

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These facts demonstrate why The 24-Hour-Diet™ makes protein our number one food choice for staying lean-for-life.

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**Newsflash:** Protein Repairs Tissue.

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*That's right. Vitamins without protein are insufficient to repair damaged tissue. Ask any medical physiologist.*

## **High Protein and Osteoporosis: There is No Connection**

Even though protein is critically important in our diet, I am always asked, “Will I risk osteoporosis by consuming too much protein?” No, nature doesn’t work this way. The body requires lots of protein for metabolic structures like hemoglobin, which makes oxygen transfer possible so you don’t suffer a stroke, tissue structure like muscles, antibodies to fight infection, and all of our enzymes making chemical reactions occur at up to 1,000,000 times faster. It would therefore be self-destructive for this essential material to then be harmful to you for a different reason. Nature is very consistent, encouraging positive behavior and penalizing bad behavior. This fact frustrates the nutritionists and those people telling you to minimize protein. Their recommendation, besides being wrong, doesn’t make sense given that so much of the human system is protein-based. Anyone telling you such contradictory statements needs to reevaluate their reasoning and also visit a medical library.

We already told you about the 2005 OMNIHEART study proving how inferior the carbohydrate-rich diet is compared to the protein-rich diet, and how the protein-rich diet produced

better blood chemistry. Here's what happened when people tried to replace animal-based protein with vegetable-based protein. This information was published in the medical journal, *American Journal of Epidemiology*, in 2002:

- **The more animal-based protein consumed the LESS osteoporosis.**
- **Bone loss resulted from vegetable-based protein.**

**Vegetable-based protein is substantially inferior** to animal-based protein in preventing bone loss. **Animal-based protein helped stop bone loss**—period. Consume plenty of animal-based protein each day for maximum bone health.

### **2006 Study Shows High Protein Diet *Did Not* Increase Bone Loss<sup>3</sup>**

- **"A strict low-carbohydrate diet had *no effect* on bone loss for adults following an Atkins-type diet for weight loss, a three-month study by rheumatologists at the University of South Florida found."**
- **"Patients on the low carbohydrate diet **did lose weight**, but the diet **did not** appear to **compromise bone integrity** or lead to bone loss."**
- **"I was surprised by the results," Dr. Carter said.**
- **The difference in bone turnover between the low carbohydrate dieters and the non-dieters was insignificant after three months. But, the dieters lost significantly more weight—an average of 14 pounds**

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3 <http://www.medicalnewstoday.com/medicalnews.php?newsid=43987>. The clinical study was published May 26, 2006) in the online issue of the journal *Osteoporosis International*.



—than the patients on unrestricted diets. (Emphasis added.)

Remember, let the science lead you —not politically correct but often wrong opinion. When the opinion is later shown to be wrong, the popular diet books and press frequently don't publish the correction.

The *Textbook of Medical Physiology* gives us insight about what osteoporosis *really* is:

**Osteoporosis** is the most common of all bone diseases in adults, which **results from a diminished organic bone matrix rather than from poor bone calcium.**

Virtually everyone, including your doctor, implies or promises outright that adding calcium to your diet will benefit your bones. But it won't, because lack of calcium has *nothing to do with* osteoporosis; that's a completely different disease called rickets. **Osteoporosis stems from bone matrix deficiencies, not lack of calcium.** Bone matrix means the bone structure, and this is built from the *protein* we eat. At my seminars and on radio shows, I've had person after person, usually women, tell me how eating and drinking loads of calcium rich foods for years didn't prevent them from getting osteoporosis. That's because dumping more calcium on a defective structure won't fix the problem. Unfortunately, many doctors have a simplistic, nonscientific understanding of nutrition and its relation to body structures. If they had looked closely into the scientific literature, they would understand this.

## **Bone Matrix is Composed of Protein and Natural Fats**

The bone matrix is composed of protein-based collagen, and it needs those PEOs, too—those healthy essential oils you

discovered in the last chapter. This is another reason that we have constant cravings until our daily EFA requirement is met. In addition to helping *naturally fulfill* your appetite, they are used throughout our bodies.

If the “experts” are confused about the cause of the number one bone disease in adults, don’t expect any insight from them into eventually solving obesity in America and around the world!

## **Protein Adds, Not Removes Calcium from Bone**

Scientifically, the more protein the better. Protein does not leach out calcium from your bones – surprisingly, it’s just the opposite. That’s why *Textbook of Medical Physiology* states,

“...**protein** functions in ... these cells to **transport calcium into** the cell cytoplasm... The **rate of calcium absorption** seems to be directly **proportional to** the quantity of this calcium-binding **protein**.” (Emphasis added.)

Calcium is transported via protein. Along with the protein, the **calcium is actually going into the cell – not being taken away! Therefore**, lack of protein is one of the significant causes of osteoporosis, yet we are foolishly told to consume more calcium. It bears repeating. **More calcium cannot correct a protein deficiency**. That’s why I receive numerous letters from people with bone issues stating that increased calcium doesn’t help.

## **Protein from meat Stops Bone Fracture!**

A few months ago, my wife fell forcefully face-first onto the pavement, slamming both legs and arms onto solid concrete. All I could do was look at her in terror because I was at the other side of the car, too far away to catch her! The parking lot was very wet from intense rain. Miraculously, Debbie didn’t

fracture anything. Of course, she was bruised with black-and-blue marks, but unharmed. She was amazed, because at her subsequent visit to the physician, he gave her the “thumbs up.” I showed her the 1999 study with 32,000 women in *Journal of Clinical Nutrition* (1999; 69:147-152) confirming the fact that **proteins stops fractures**.



That's right. The study of 32,000 women showed the **women eating the most meat were 68% LESS likely to break a hip. Protein helps bones heal 50% faster**, too. (*Prevention*, October 1998, page 143).

## **Vitamin B12 Can Only Come from Animal Sources<sup>4</sup>**

Make sure you eat enough animal-based protein every 24 hours or you will be deficient in this essential B vitamin.

The critical B<sub>12</sub> vitamin cannot come from any vegetarian sources. If you don't have this critical vitamin, you can never reach your natural size because you'll be deficient. **This deficiency will keep your APPETITE SWITCHED "ON"** constantly in search of the nutrition that you are lacking.

## **Confirmed Once Again: Protein is Good for Kidneys**

How many times have we heard “protein harms your kidneys?” Wrong again. Uncontrolled blood-sugar levels harm kidneys. That's why diabetics have the number one rate of

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4 *Essentials of Biochemistry*, page 348.

kidney failure. *Basic Medical Biochemistry*, page 653, makes this clear: glutamine (an amino acid from protein) removes all of the ammonia, a normal by-product of protein metabolism, from your bloodstream. It's the same normal action of biochemistry as the way carbon dioxide is removed from your blood with each exhalation of breath so that you don't die. It's your body's normal job to effortlessly perform these tasks.

Another mistake that led to this conclusion was that diabetics with high sugar levels were given protein and the sugar glycosylated it (surrounded it) so the protein was excreted in the urine. This abnormally high sugar level is what caused the protein to spill over into the urine. Without the excessive sugar, the protein can't enter the kidney. **The researchers didn't understand what they were measuring.**

Protein on its own can't enter a kidney. It NEEDS LOTS OF SUGAR to carry it in! Your kidneys love protein, and protein can't harm them. It's carbohydrates that cause kidney damage.

## **Proteins are Important Acid Buffers**

Contrary to popular belief, as the *Textbook of Medical Physiology* makes clear on page 521, proteins are required to keep blood pH from becoming too acidic.<sup>5</sup> Furthermore, proteins are important intracellular (inside the cell) buffers, as *Textbook of Medical Physiology* makes clear on page 390.<sup>6</sup>

Proteins are also important in assisting blood clotting when needed, as well as performing many other important tasks. Any

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5 "Most of the hydrogen ions then combine with the hemoglobin in the red blood cells because the *hemoglobin protein* is a *powerful acid-base buffer*."

6 "*Proteins* are among the most plentiful *buffers* in the body because of their high concentrations, especially *within the cells*.... For this reason, the *buffer systems within the cells* help to prevent changes in pH of extracellular [outside the cell] fluids...."

“expert’s” recommendation to restrict protein is not based on science, and because of this you must resist listening to their wrong advice if you want to become lean-for-life, energized and *healthy*.

## **Does Eating Meat Cause Cancer?**

We keep getting conflicting studies linking meat to cancer. I want to make this extremely CLEAR. **The risk of cancer and other disorders linked to meat is NOT with the meat itself.** Rather, it is from the hormones, pesticides, and other additives associated with it. That is why we recommend “natural” or organic meat, cheese, eggs, etc. You also need to know that the hormones added are ESTROGENIC. The same is true for any pesticides in the feed. Let’s be very clear what the problem is – it ISN’T the meat itself! (See Appendix III.)

## **Protein Does Not “Build Up” in the Colon**

Misinformed nutritionists and physicians frequently state that there is a problem with how long protein and fat take to digest versus how quickly carbohydrates are digested.

Carbohydrates digest quickly because there is so little essential nutrition in them, whereas fats and proteins possess lots of essential nutrition and are much more complicated to break down into essential nutrients. The great news is that your body is designed to process protein in the same way Nature designed your lungs to work 24 hours each day without a problem. By the way, your heart also works continually with no special maintenance required.

Remember, as the medical textbooks make clear, protein isn’t stored or excreted – it gets used in the body’s metabolic processes and is converted into cellular structure and tissue, like the 60 pounds of muscle that even a small 120-pound person has! Consequently, there cannot be a buildup from protein.

## **No, You are Not Constipated...**

When following a higher protein diet, many people mistakenly think that they are constipated because there is very little elimination. There is no pain, just no volume. Why? Because protein is so nutrient dense, there is little waste. Likewise, there is little waste with fats, either. But carbohydrates are significantly different. Because they are nonessential in the body (as you will soon discover), and much of their bulk must be eliminated from the body, it is only the carbohydrates that generate significant waste.

Eat a big steak and nothing else. You will be shocked at how little elimination is required because humans make use of nearly all of it.

Anyone wishing to improve their digestion and elimination through nutritional supplementation should also consider an essiac-concept tea with fulvic.

## **Eating Carbohydrates—Not Proteins and Fats—More Often than Three Times a Day Makes You a Diabetic Time-bomb**

As discussed in the Carbohydrate chapter, but worth repeating, your delicate pancreas should not be forced to continually produce insulin throughout the day. It stores a very limited amount of insulin and takes many hours to manufacture more. If you eat carbs every 3-4 hours, your pancreas simply can't keep up with the insulin requirements and you are on your way to becoming diabetic. See the Scientific Support Section for the details.

Delicious protein is a wonderful food and the majority of it is “magically vaporized away,” fueling its own digestion and **not generating any significant insulin response. Protein cannot make us fat.** We need lots of protein every day to keep us lean-for-life.

## **I'll Eat Less if I Chew More, Right?**

There are two reasons that I learned to eat rapidly. First, I grew up with two brothers. When dinner was served, if I didn't eat quickly, the food was gone. Second, when I was sixteen, I worked at a fast-food restaurant. Breaks were short, so I had to learn to eat quickly. When I became a manager I didn't have time for a formal break, so I had to eat even quicker (and they called it a promotion!). With me, as with most people, eating patterns are a learned behavior.

Is eating quickly bad for your health? If I learned to chew thoroughly, would I enjoy my food more because I'd appreciate the taste? Would I eat less because I would get more benefit and nutrition from the food, since it gets partially digested before it enters my stomach? Let's look at the science by way of a story from my youth.

As a young man, many years ago, I always tried to chew (masticate) thoroughly before swallowing. Once I was on a trip with a group. We had stopped to eat at a restaurant where we met an old man originally from Persia. When this old Persian saw the way I was chewing, he said, "Tell me, young man, why do you eat like that?"

I was embarrassed for the man and surprised by his question. Wasn't it obvious that food must be chewed thoroughly?

Repeating verbatim what I had read, I replied, "I chew thoroughly so that the food's value will be better assimilated in my intestines. Properly digested food gives all the food's value to the organism."

Slowly shaking his head, the old Persian shared the following saying, which I'll never forget:

**"Let God strike him who does not know yet, and yet presumes to show others the way to the doors of His Kingdom."**

When I heard this, *my opinion of the old man changed and I listened intently to the rest of his comments.* He continued.

**“If you chew your food in this way** as a means to health or for the sake of other attainments, then I shall have to say, if you would like to know my sincere opinion, that **you have chosen the worst possible way.**”

“By chewing your food so carefully, you **reduce the work of your stomach.** Now you are young and everything is alright, but you are accustoming your stomach to do nothing; and when you are older, owing to the lack of normal work, your muscles will be to a certain extent atrophied. And that is bound to occur if you continue this system of chewing. You know that our muscles and body get weaker in old age. Now, in addition to the natural weakness of old age, you will have another form of weakness brought on by yourself, because **you are accustoming your stomach not to work.** Can you imagine how it will be then?”

“On the contrary, it is **not at all necessary to masticate carefully.** At your age, it is better not to chew at all, but to swallow whole pieces, to give work to your stomach. I can see that those who have advised you practice this mastication, and also those who have written books about it, have, as is said, **‘heard a bell without knowing where the sound comes from.’**”

I was devastated. I had relied on the wisdom of the “experts” in these matters. I decided to take advantage of the opportunity to ask this old man what he thought about controlled yoga-style breathing, because I had practiced this for years, too.

This wise man explained that “yoga-style” breathing, which he termed “artificial inflation,” would be very detrimental. **Only**



**if one knows every small screw and every pin of our machine** (the human body) could one know what to do. He said I risked a great deal because **the machine is very complicated**. He asked me, **“Do you know yourself so well?”**

He ended our conversation by saying:

**“I repeat, our body is a very complicated apparatus. It has many organs with processes of different tempos and different needs. You must either change everything or change nothing. Otherwise, instead of doing good, you might do harm.”**

The authority with which he spoke, and his depth of insight gave me the impression he was a true student of the human body. In retrospect, this old Persian helped me on my path to developing *Life-Systems Engineering Science*.

### ► *Lean-for-Life Commentary*

Both the old man and Dr. Munro, whose 1940 book advocating a high animal-based protein diet was quoted earlier in this chapter, are correct. Biochemically, **chewing does nothing to digest fats or proteins for humans**. As *Basic Medical Biochemistry* makes clear, carbohydrates are merely marginally digested by chewing. It is insignificant.<sup>7</sup> *Essential Histology* makes clear that the notion that chewing your food slowly and carefully in the hope of releasing more nutrients, as suggested by many “experts,” is worthless at best.<sup>8</sup> As Dr. Munro makes clear, we must understand the physiology of digestion. *The 24-Hour-Diet™* is based on exact science.

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7 *Basic Medical Biochemistry*, pages 405-406.

8 *Essential Histology*, page 287, 291.

**Most of what we “know” about nutrition is  
WRONG.**

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Next, we'll discuss food utilization, where you'll see how many pounds are packed on from those fattening carbohydrates you eat, in sharp contrast with what happens when you eat protein. Once again, prepare to be amazed at what you discover....

## Scientific Support for Chapter 7

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### Carbohydrates, Not Proteins, Destroy Good Blood Chemistry

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Dr. Raven's experiments of **increasing carbohydrates by only 20%** shows their **deplorable result in altering blood chemistry** (Stanford University School of Medicine: *American Journal of Cardiology* 2000 85:45-48, (Dr. Gerald Raven)).

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### Dietary Protein Alone Can't be Stored—Protein Goes to Structure or Biochemical Functions

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*Biochemistry of Exercise and Training*, page 112 clearly states:

**"There is no mechanism for storing excess dietary protein in the body**, and any amino acids that are ingested in excess of the immediate requirements are oxidized [burned for energy] and the nitrogen excreted."

Both *Essentials of Biochemistry*, pg. 220, and *Basic Medical Biochemistry – A Clinical Approach*, pg. 7, state that amino acids are used in the cellular structure and many important roles in the body. In fact, carnitine, an amino acid, is required for fat burning. Like EFAs, proteins are used in cell structure and biochemical processes.

## Most Protein “Burned-up” in its Own Digestion

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From *Basic Medical Biochemistry – A Clinical Approach*, page 660:

“Following the ingestion of a high protein meal, the gut and liver **utilize most of the absorbed amino acids** (Fig. 42.15). Glutamine and aspartate are utilized as fuels by the gut, and very little enters the portal vein. The gut may also use some BCAA [branched chain amino acids]. The liver takes up 60-70% of the amino acids present in the portal vein.”

The article “Animal Protein Consumption Associated With Bone Density in Elderly Women,” published in *American Journal of Epidemiology* 2002; 155:636-644, makes it very clear that we require animal-based protein:

“Multiple linear regression analysis adjusted for standard osteoporosis covariates showed a **positive association between animal protein consumption....**

“**Vegetable protein was negatively associated** [bone loss resulted from vegetable-based protein].” (Emphasis added.)

**Vegetable protein is shown to be substantially inferior** to animal-based protein in preventing bone loss. **Animal-based protein helped stop bone loss** – the opposite of what you may have been told. *Textbook of Medical Physiology* on page 991 gives us more insight into osteoporosis:

“**Osteoporosis** is the most common of all bone diseases in adults, especially in old age. It is a different disease from osteomalacia and rickets because it **results from**

**a diminished organic bone matrix** *rather than from poor bone calcium."*

If the "experts" are confused about the cause of the number one bone disease in adults, don't expect any insight from them into solving the number one problem of obesity in America and around the world.

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### **Eating Carbohydrates—Not Proteins and Fats—More Often Than Three Times a Day Makes You A Diabetic Time-bomb**

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Page 999 of *Textbook of Medical Physiology* has this shocking information:

- **"If the blood glucose concentration is suddenly increased to a level two to three times normal [from just 2-3 teaspoons of carbohydrate or sugar] and kept at this high level thereafter, insulin secretion increases markedly in two stages...**
- **"Plasma insulin concentrations increases almost ten-fold within 3 to 5 minutes after the acute elevation of the blood glucose: this results from immediate dumping of preformed insulin from the beta cells ...**
- **"Beginning at about 15 minutes, insulin secretion rises a second time, and reaches a new plateau in about 2 to 3 hours, this time usually at a rate of secretion even greater than that of the initial phase.**
- **"This secretion results both from additional release**

**of preformed insulin and from activation of the enzyme system that synthesizes and releases new insulin from the cells.”** (Emphasis added.)



Remember, protein has an insignificant insulin response so the above problems don't apply. The culprit is carbohydrates.

There you have it. The 2<sup>nd</sup> phase of insulin output **REQUIRES** new insulin production; there isn't enough preformed insulin to complete the job. If you eat again three hours later, there won't be any preformed insulin left, nor is there enough time for new insulin to be manufactured. Anyone telling you to eat more than three times a day is tragically putting you on the path to diabetes because of their ignorance of the insulin output curves.



## Food Utilization Explained

**We've already discovered that and virtually none** of the dietary fat, like cheese, gets stored as fat – fat is primarily burned for energy. Carbohydrates at best should be eaten sparingly.

For our original research to produce the following FOOD UTILIZATION chart, we searched science and nutrition websites and diet books but could find absolutely **no calculation** of the amount of fat stored by the body when carbohydrates are eaten. We were shocked because there was no information to be found. Instead we consistently found wrong information on how the body utilizes foods. In order to create the following chart we had to search the medical textbooks. We are proud that we are able to provide the correct numbers that explain what your body really needs to be healthy.

Although the biochemistry of carbohydrate to triglyceride (fat) conversion is quite complicated, we can skip lots of the

technical details by utilizing the concept of energy conservation. Engineers make advances quickly because we get to the root of the issue quickly. We know from the fields of physiology and biochemistry that carbohydrates cannot be used for much else but body fat, unless you are engaged in strenuous exercise, which is infrequent at best. See the footnote below for the details.<sup>1</sup>



At most, just **3 pounds** (about 1300 grams) of **carbohydrates** need to be eaten to gain a full **1-pound of body fat** (about 450 grams). This number includes any carbohydrate used throughout the body for any biochemical process or structure.

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**Newsflash: A whopping one-third of the carbohydrate you eat goes DIRECTLY to body FAT!**

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NEVER forget carbohydrates' drastic conversion to bodyfat. A slice of bread contains approximately 10 gm of carbohydrates,

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- 1 (1) A maximum of 30% (very conservatively) of carbohydrate's digestion energy is generated as heat (*Textbook of Medical Physiology*). Some medical textbooks state a lesser amount, which means even more fat storage!
- (2) There are 4 calories per gm of carbohydrate available for energy.
- (3) There are about 3,600 calories in a pound of stored body fat.
- (4) There are 1800 calories per pound of carbohydrate (4 x 454 gm/lb).
- (5)  $3600 / 1800 \text{ calories} = 2 \text{ pounds carbohydrate energy go about to 1 pound of body fat.}$
- (6) There is, conservatively, at most, only 70% efficiency of this conversion (from #1 above). So  $2 \text{ lbs} / .7 = \text{about } 3 \text{ pounds of carbohydrates need to be eaten to gain 1 pound of body fat.}$  No wonder so many Americans are overweight!



so the loaf is about 240 grams. Eating a **loaf of bread (even whole wheat bread) a week makes you fatter by 10 pounds a year!** Add **a few desserts and sodas**, and you **double it to a belt busting 20 pounds fatter a year!** This is why frequent, time-consuming exercise is mandatory for anyone who is on a high carbohydrate diet. But few of us can exercise enough; we don't have time to make exercise our second job!

As you already know, your body keeps *just 1 teaspoon* of sugar in your system at all times. This is accomplished *either* by your body taking a portion of your own body fat and combining it with the protein you eat, or from the excess carbohydrates you eat.

In order for this process of running on your own bodyfat (glucogenesis) to occur, **12 times more protein** needs to be eaten **than the stored body fat portion used to make the glucose.**<sup>2</sup> You have already discovered that the majority of the protein you eat is used in its own digestion, so keep eating lots of protein!

Note: The percentages are net, **AFTER DIGESTION**. For example, virtually all of what is left of the baked potato, after digestion, goes to body fat. *Percentages are estimates based on generalized comparisons of different food groups.*

A few tips for becoming lean-for-life and energized:

- **Never use soy as a meat replacement.**
- "Protein" bars or "powder" are NOT recommended as food replacement. A small amount — ½ ounce to 1½ ounces a day — of (organic) protein powder is fine. **That's what I do for my fruit smoothies.**
- Never use liquid meal replacements if they are loaded with carbohydrates, and/or adulterated fats because they are a highly processed food.

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2 Student Companion For *Stryer's Biochemistry*, page 616.

## *The 24-Hour-Diet: Lean for Life – One Day at a Time*

### **Food Utilization Chart\***

\*\* Smart Replacement for the Erroneous “Calorie Theory” & Faulty Food Pyramid! \*\*

Type of Food	%Used to Fuel its own Digestion	%Used in Body Structure & Processes*	%Eliminated as Waste	%Stored as fat (not used as energy)	%Used as energy (not stored as fat)
Animal Based Protein	60-70%	30-40%	5%	<b>0%</b>	0-100% (as needed)
Natural Fats & Oils	40%	30-60%	5%	<b>0-5%</b>	as high as 50%
Cheese	40%	10-20%	5%	<b>5%</b>	40%
Soy* Bar	40%	10%	10%	<b>30%</b>	10%
“Protein” Bars (not recommended)	40%	10%	10%	<b>30%</b>	10%
Protein Shake	45%	(limited)	20%	<b>20%</b>	15%
Nuts/Seeds	45%	20%	10%	<b>10%</b>	15%
Grains/Cereals	25%	10%	10%	<b>50%</b>	5%
Bread	25%	10%	10%	<b>50%</b>	5%
Baked Beans	30%	5%	20%	<b>40%</b>	5%
Green Leafy Vegetables	40%	5%	55%	<b>0%</b>	0%
Potato	30%	5%	15%	<b>50%</b>	0%

\* % used in body structure and processes such as: brain, muscles, bones, organs, hormones—NOT excess body fat. Accounts for evaporative water. Values are approximate.



**READ the FOOD LABELS!**

## **Food Fueling Its Own Digestion:**

Foods require energy to fuel their own digestion. **Proteins use 60-70% of themselves in “fueling” their own digestion. Fats use about 40% and carbohydrates typically from 15% to never more than 30%.** This process leaves less of the food available for body structure and fat storage. This is why it is vital to get sufficient *animal-based* protein in your diet – since at least 60% of it “disappears” in its digestion. As you can see from the Food Utilization Chart above, protein from animal sources has the highest level of body-rebuilding nutrients.

## **Food Used in Body Structure:**

This is where our bodies get what they need to remain healthy. You cannot maintain the integrity of a building without regular maintenance. When it comes to maintaining your body, this is accomplished by eating the right foods. This is why, as you can see from the chart, animal-based protein is vital for the health of the cell, tissues, and organs and should be the foundation of every meal. Fats are critical, too. It’s the carbohydrates that are unnecessary and virtually nonexistent, amounting to a mere 1%, of your body’s structure.

## **Food Stored as Body Fat if Not Burned Immediately for Energy:**

Remember, when your body uses carbohydrates for direct energy, it can’t and won’t burn its own body fat. Whatever carbohydrate is not burned immediately (most of the time, unless under tremendous physical stress like bodybuilding) will be stored as additional body fat. If you want to lose excess fat, you minimize foods with a high fat storage rating (carbohydrates).





## Soy Fiction: What You Don't Know Can Kill You!

### Soy—Food for a Pig

**I warned you I have no interest in being “politically correct.”** Americans have unknowingly damaged their health by using lots of soy. Every day the properties of soy are touted by nutritionists, physicians, and popular health and beauty publications extolling its virtues. While it sounds good, this advice is not based on science which paints a very different picture.

Until recent years, soy was used almost exclusively to feed farm animals. What better way to expand sales than to tout it as the new “miracle food”? Based on this marketing ploy, soy has become the second largest cash crop in America, selling over \$14 billion per year. This has happened while the evidence against the use of soy by humans has been available since the 1960s.

*The New England Journal of Medicine*, in their article “Soybean Goiter: Report of Three Cases,” Thomas H. Shepard, et al., 262 (22), June 2, 1960, pages 1099-1103, *JAMA*. July 18, 2007;298:289-298, 335-336, details three cases of infants developing goiter while they were consuming soybean “formula.” The condition was rapidly eliminated in two of the infants when the soy formula was terminated. The third child was cured when iodine was added to the diet.

## **Foundation and Government Consumer Alerts**

The non-profit Weston A. Price Foundation ([www.westona-price.org](http://www.westona-price.org)) in Washington, D.C. has a publication titled “Soy Alert.” They, too say that soy is anything but a “health food” as we have been led to believe.

An excellent book published in 2005 titled *The Whole Soy Story, The Dark Side of America’s Favorite Health Food*, by Kaayla T. Daniel, PhD, CCN, provides valuable information facts about soy.<sup>1</sup> Her book is described on the Price Foundation’s website:

**“A groundbreaking expose that tells the truth about soy that scientists know but that the soy industry has tried to suppress. Soy is *not* a health food, does not prevent disease and has not even been proven safe. Epidemiological, clinical and laboratory studies link soy to malnutrition, digestive problems, thyroid dysfunction, cognitive decline, reproductive disorders, even heart disease and cancer.”** (Emphasis added.)

Today, the FDA, America’s Food and Drug Administration, Department of Health and Human Services, lists over 270 records

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1 New Trends Publishing, Inc., Washington, DC, 2005, ISBN 0-9670897-5-1, pg. 31

of soy in a database at “**FDA PLUS Plant Database**”<sup>2</sup> (November 2004 Revision). This database contains references to the scientific literature describing studies of the toxic properties and effects of plants and plant parts. Scientists in the field know the awful truth about the hazards of soy, but the public is still being misled.

It is tragic that the science behind the biochemistry of soy remains so underpublicized by the mainstream press. Here are just a few of the **scientific articles listed** on the FDA website:

1. “Presence of a *growth inhibiting* substance in raw soybeans.”
2. “Perspectives on human health concerns arising from *natural toxicants* in feeds and poisonous plants.”
3. “*Toxic* constituents in some legumes [beans] for human consumption.”
4. “The antithyroid factor in soya.”
5. “Feeding of soybean products and development of goiter [*enlargement of the thyroid*].”
6. “Plant induced dermatitis [eczema].”
7. “Pseudotumor cerebri [*increased intracranial pressure and ventricle size*] an allergic phenomenon? A discussion of 17 cases including two of infants manifesting pseudotumor cerebri while receiving soybean feeding.”
8. “Trypsin inhibition [*protein-digesting enzyme inhibition*], hemagglutination [*excessive blood platelet clumping together*], and intraperitoneal [*membrane lining the intestine*] toxicity in extracts of *Phaseolus vulgaris* and *Glycine max*.”

This is a partial list of the articles that cast grave doubts upon and call into question the efficacy of using soy as food for

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2 <http://www.cfsan.fda.gov/~djw/pltx.cgi?QUERY=soy>

humans with many of these papers having been published decades ago. The truth about the hazards of soy is not hidden and can be found with minimal research. The picture is clear how bad soy is for humans.

Unfortunately, advertising-shaped opinion – not science – reigns supreme when discussing soy. Here is **the last sentence** from the medical journal article titled “Fractions Derived from Soy Beans and Navy Beans Which Retard Tryptic Digestion of Casein,”<sup>3</sup>

“...Its presence [trypsin inhibiting fraction] may account **for the low nutritive value of raw soy** and navy beans.”

**The dismayingly truth about soy was known in 1944.** The following information about the hazards of soy is based on a private paper I wrote in 1999, also titled *Soy Fiction*. During six months of research, I did not find a single trustworthy medical reference (medical or scientific article) stating that soy was a beneficial food. Quite to the contrary, nearly 100 medical and scientific articles all said the same thing – **don’t eat very much soy, because it is harmful to humans** and can actually increase your risk of developing cancer.

Soy marketers were brilliant when they persuaded retailers to put it in the refrigerated section along side real milk. **Soy “milk” is NOT milk**, it is bean juice with some added flavoring – read the ingredients. You may be surprised to discover that **soy “milk” does NOT require refrigeration. We are fooled**

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3 *Proceedings of the Society for Experimental Biology and Medicine*, Donald E. Bowman, from the Department of Biochemistry and Pharmacology, School of Medicine, Indiana University, Volume 57, October-December, 1944, pages 139-140.



**into thinking the stuff is similar to milk.**<sup>4</sup> Unfortunately, and not surprisingly, the popular press gets its stories from those promoting soy and does not verify the marketers claims with anyone who knows the science.<sup>5</sup>

## **Chinese and their love of soy?**

The Chinese are not advocates of lots of soy in the diet. On average, the Chinese eat a mere 10 grams each day—only one-sixth the amount Americans are encouraged to eat! I traveled to both China and Thailand to observe their respective diets for myself. Thailand doesn't consume much soy either. However, the Japanese consume more soy than Americans and their cancer incidence rates are worse than Americans! How does the *traditional* Asian diet use soy? Only as a condiment—a seasoning, such as in soy sauce. In America, tofu is being sold as a meat replacement, but it is not used this way traditionally in Asia.

Women, have you been told that soy prevents cancer? I wish it were so. In 1996, researchers found that women consuming soy protein isolate had increased hyperplasia, a **condition often leading to malignancy—cancer—of the uterus**. A year later, in another study, dietary genistein (found in soy) was found to **affect women's breast cells negatively**, leading the authors to conclude *that if women want to prevent breast cancer, they should not consume soy products*.

The food industry touts the “cancer-preventing” properties of soy. While it is *possible* that the “aglycones” in *fermented* soy products may have an anticancer property, **it is impossible that**

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4 “They hailed it as a wonderfood,” Anthony Barnett, *The Observer*, November 7, 2004, [www.observer.co.uk](http://www.observer.co.uk).

5 *Life-Systems Engineering Science* has nine key factors that must be correct before a study's results will be considered valid.

**an unfermented soy product, like tofu or soymilk, has these anticancer properties.** The fermentation is what makes the aglycones effective. The end result? No possible anticancer properties in an *unfermented* soy product.

Let's look at the most common questions about soy with additional technical information about soy appears at the end of this chapter.

**Q:** Is soy a good source of protein—can it replace meat?

**A:** No. No vegetable or grain has amino acid bioavailability effectiveness close to that of animal-based proteins like eggs, cheese, or meat. At best, vegetable or grain sources are only 25% as protein-effective as animal-based protein. Vegetable and grain sources have about half the amino acid content of meat, but those amino acids are unusable by humans since they are bound with cellulose (making them indigestible). Furthermore, soy protein (like any plant protein) is “incomplete,” meaning that it does not contain the nine essential amino acids (*Textbook of Medical Physiology*) that humans must obtain from food sources. Soy alone cannot meet the protein requirements of human beings and must be combined with other foods that supply the missing amino acids. The British government's report on phytoestrogens (soy) did not find conclusive benefits and actually warned against their adverse effects. Without a complete review of soy, America's Food and Drug Administration came to a different conclusion. They decided to allow soy proponents to claim that soy protects your heart and bones without any meaningful scientific support. Additionally, in 1975, the *Canadian Journal of Biochemistry* reported that **soybeans actually weaken your immune system.** Obviously, anyone with the capacity to reason would conclude that anything leading to a weakened immune system is not beneficial. Yet, because of bad advice, many women

have decreased the amount of animal protein they consume. The rest of the technical highlights from this report appear at the end of this chapter.

Q: Are soybeans and soy products good for my thyroid? I've been told they are a good source of isoflavones.

A: No. Soybeans disrupt the production of thyroid hormones. This can contribute to thyroid problems, and not surprisingly **infants on "soy formula" have experienced thyroid problems**. There is an 18% higher incidence of autoimmune thyroid disease in infants who are fed soy formula than in those who are not fed it.<sup>6</sup>

Q: Is soy good for children?

A: No. In addition to the possible thyroid problems noted above, the average estrogen equivalent taken per day by a child on soy-based formula is the same as four birth control pills!<sup>7</sup> You do not want a child receiving that amount of estrogen. Additionally, a study showed that soy-formula-fed infants went on to become diabetic twice as often compared to breast-fed infants. Ladies, please don't feed your infant soy. Use mother's milk, or goat milk, because goat milk is much closer to human milk than cow's milk.

Q: Is soy good for the blood?

A: No! Soy contains *hemagglutinin*, which causes red blood cells to "clump" together. Soy promotes increased adhesion (sticking) of red blood cells to each other! In this study, hema-

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6 *J Am Coll Nutr* 1990, Apr; 9(2): 164-167.

7 "Isoflavone content of infant formulas and the metabolic fate of these early phytoestrogens in early life," by Setchell, KD, et al., *Am J Clin Nutr*, 1998 Dec; *Bulletin de L 'Office Federal de la Sante' Publique* (Swiss), No 28, 20 July 1992, 68 (6 Suppl): 1453S-1461S.

glutinin made the platelets 5% “stickier.” You do not want this effect, because it contributes to arterial blockage and heart attacks.<sup>8</sup>

You have learned that carbohydrates cause slow blood flow from glycosylation; while soybeans have the same effect of causing slow blood flow, but for an entirely different reason. The greatest biochemist of all-time, Otto Warburg, M.D., Ph.D., advocated making venous blood flow as fast as possible for maximum oxygenation. He showed that anything blocking this effect contributes to cancer. Therefore, contrary to what you may have been told, soybean consumption has a cancer-causing effect in addition to making you exhausted from slowing down your oxygen-carrying blood.

Q: What about the *claimed* anticancer properties of soybeans?

A: This virtual *guess* as to soy’s “anticancer” properties may be related to the demonstrated ability of genistein and daidzein (both found in soy) to bind estrogen. Estrogen is an important hormone. Estrogen is naturally produced and regulated by a woman’s body. It has been suggested that too-high levels of estrogen alone (without Nature’s corresponding hormone, progesterone) cause cancer. While the levels of estrogen – especially during or after menopause, when estrogen levels naturally drop – *may* contribute to or aggravate cancer, that is not the basic cause of the cancer. Therefore, adjusting the level of estrogen cannot bring about a cure since natural estrogen levels do not cause cancer – the cause of the cancer lies elsewhere.<sup>9</sup>

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8 *Thromb Haemost*, Nov. 1999; 82(5): 1522-1527.

9 Tamoxifen is another example of an “anticancer” guess; it is a drug developed on the hypothesis (guess) that binding the estrogen sites will decrease cancer risk. It did NOT reduce cancer among Europeans who took

Additionally, in July 2002, the investigators in a major health study announced that hormone replacement therapy (with synthetic hormones, *not natural bio-identical* hormones) in post-menopausal women has been conclusively shown not to reduce the risk of heart disease and increases your risk of contracting cancer and will likely be discontinued.

Misleading statements such as the following could help explain how so many people have become convinced that soy could prevent some forms of cancer.

“There is much evidence **suggesting** that compounds present in soybean **can** prevent cancer .... The **evidence** for **specific** soybean-derived compounds having a suppressive [negative] effect on carcinogenesis [causing cancer] **is limited**, however.”<sup>10</sup>

Translation of previous statement: Soybeans *may* possess anticancer properties; however, we researchers cannot find anything specific in the soybean that fights cancer. I hope you're angry at this point.

## **Soy has never attained GRAS (Generally Recognized As Safe) status**

Soy protein did have approval for use as a binder in cardboard boxes. FDA officials typically call for safety specifications and monitoring procedures before granting of GRAS status for foods. These were never performed for soy.

To this day, use of soy protein is codified as GRAS only for this limited industrial use as a cardboard binder. This means that

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it. In fact, articles published on July 11, 1998 in the highly prestigious journal, *The Lancet*, reported no evidence of breast cancer prevention by tamoxifen in two major European trials guessing that binding the estrogen sites will decrease cancer risk.

10 *Journal of Nutrition*, Mar. 1995; 125 (3 Suppl): 733S–743S.

soy protein must be subject to pre-market approval procedures each time manufacturers intend to use it as a food or add it to a food.<sup>11</sup>

### ► *Lean-for-Life* Commentary

Given the above answers and the scientific information starting on page 175, we see why **soy can't be considered a safe food**. The hypothesis that soy prevents cancer remains unproven and is in direct contradiction to its many negative physiological effects on your body. Do not expect soy to protect you from cancer. The frequent substitution of flawed statistics for good science has led to a consistently awful state of affairs. Too often, you aren't getting science; instead, you are getting misapplied statistics. With soy, this is certainly the case.

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11 FDA ref. 72/104, Report FDABF GRAS: p. 258.

## Scientific Backup For Chapter 9

### Soy and the Immune System

In 1975, the *Canadian Journal of Biochemistry* (1975 Dec; 53(12):1337-41) reported that “soybean trypsin inhibitor was found to inhibit transformation of human lymphocytes....”

Translation: the soybeans actually weaken your immune system. Here's why: Trypsin is an enzyme used in digesting protein. An inhibitor is something that disables the trypsin. So a trypsin inhibitor prevents the protein you eat from being fully utilized, and this in turn weakens your immune system. Anything leading to a weakened immune system is not beneficial in the war against cancer. Yet, because of bad advice, many women, especially, have decreased the amount of animal-based protein they consume. (When you reduce dietary fat, you often reduce protein along with it.)

### Soy and the Thyroid

The following comes from *Biochemical Pharmacology*, Vol. 54, 1087-1096, 1997:

“Soybeans contain compounds (genistein and daidzein — the ‘active ingredients’) that *inhibit* [interfere with] *thyroid peroxidase* (TPO) — which is essential to thyroid hormone synthesis [production].”

### Isoflavonoids are Hormone Disruptors

*Genistein and daidzein* are the active **endocrine-disrupting compounds in soybeans**. A biochemical journal stated that TPO in the presence of hydrogen peroxide (hydrogen peroxide is always present in the body from normal reactions) causes

“... *irreversible inactivation* of the enzyme [TPO] unless iodide is in the reaction. In this case the TPO is inactivated [but only temporarily].... The active ingredients were not destroyed by boiling for 2 hours or by digestion.... **Any compound that inhibits TPO production is a potential thyroid carcinogen** [it could cause or contribute to thyroid cancer].”

As you can see above, the active compounds in soy *do inhibit* [interfere with] TPO and could therefore cause or contribute to thyroid cancer.

“The levels of total isoflavonoids observed in human plasma [blood] following consumption of soy foods approach the concentrations required for *inhibition* of the thyroid enzyme TPO [that is essential to thyroid hormone production].”<sup>12</sup>

Soybeans’ isoflavonoids block the binding of iodide. We cannot see how we can be sure that iodide (derived from iodine) is always present in sufficient quantities to stop this potential blocking. Eating “iodized” salt doesn’t necessarily prevent the TPO disruption. TPO inhibition contributes to thyroid problems. Furthermore, it doesn’t take much soybean to cause these effects – 50% TPO inhibition results from eating just a few ounces of soybean.

Occasional small servings of soybean should cause no problem, but many Americans are eating far too much. Excessive soybean consumption, even with normal iodine intake, may lead to *hypothyroidism* (underactive thyroid).

## **Warning: Infants At Risk**

**Infants on “soy formula” have experienced thyroid problems.** There is an 18% higher incidence of autoimmune thyroid

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12 *Biochemical Pharmacology*, Vol. 54, 1087-1096, 1997.



disease in infants who are fed soy formula. Isoflavenoids will contribute to high TSH (thyroid-stimulating hormone) levels. Over time, this constant stimulation could increase the likelihood of developing thyroid disease.

There is now an epidemic of thyroid dysfunction. Perhaps even worse is an **18% higher incidence in autoimmune thyroid disease in infants who are fed soy formula** (*J Am Coll Nutr* 1990, Apr; 9(2): 164-167). Furthermore, a study showed that soy-formula infants went on to become diabetic twice as often compared to breast-fed infants (*J Am Coll Nutr*, 1986; 5(5): 439-441). Use real human mother's milk, or goat milk, because goat milk is much closer to human milk than cow's milk.



# SECTION THREE







## **“The Secret”—A Review of the Diet’s Main Points and Why It Works, Plus a Great Surprise**

**As my dear friend, Dr. Robert Nemer, says, “First** make sure people understand they need to *stop* gaining weight. After they stop the gain, they should concentrate on *losing more weight* if required.”

The simplicity of this advice gives us the insight necessary not only to initially lose weight, but to achieve long lasting, sustainable results. The secret to losing excess body fat is to keep fattening carbohydrate consumption low while remaining completely satisfied. Knowing the simple program in this book gives you the power to lose or maintain your weight **AS YOU SEE FIT**. Having this option should be a great relief to those who follow this program.

In this chapter we'll review the fundamentals of my program so you can make the rest of your life lean, energized, and full of promise, not despair.



**This is the key:** Eat when you are hungry. Remember, those PEOs will help satisfy you. But **when you eat, eat primarily protein and natural fats.** As my research has shown, **you will only want to eat a couple of times a day** because you won't be constantly hungry.

As an added bonus, by following my program you will gain at least an hour of free time each day!

A few important insights:

**YOU have already discovered** the reality about how proteins, fats, and carbohydrates work in our bodies:

- **To lose weight (excess body fat), we must have a method to satisfy our appetite without constantly eating all day. Science tells us what nutrients we need to stay full. Natural fats fulfill the appetite – nothing else does. That's why you must include natural fats from foods like meats, poultry, eggs and cheese to satisfy your appetite while keeping you in constant fat-burning mode. But note that you'll want to minimize eating lots of very high-fat foods like cheese and bacon while in maximum "losing mode." So less fat is correct, but NOT for the reasons health writers say. Natural fat is heart-healthy and your hormones require it, too.**
- For optimum energy and health, PEO-containing oils that have *more parent omega-6 than parent*

**omega-3**, as verified by Dr. Cavallino, are wonderful. This advice is in contrast to virtually all EFA recommendations being publicized today. Follow the science verified by forward thinkers like Dr. Cavallino and you’ll have the results that you have desired for so long. You deserve them!

- **Natural fats** won’t pack on the pounds **because they are burned for energy or used in cellular structure**. Your body will use the fat in the food you’ve just eaten for energy.
- You simply can’t burn much excess body fat if you continue to indulge on carbohydrates (unless you starve yourself, too).
- **The 24-Hour-Diet™** automatically gives your over-worked pancreas a much needed break while you stay on the path to becoming lean-for-life.

Recipes taken from my forthcoming book, ***Cook It Cool! Rapid Recipes for Becoming Lean-for-Life™***, are dedicated to bringing back the pleasure of eating. Breakfast, lunch, and dinner become a delight. In addition, I give you many wonderful-tasting snacks to enjoy throughout the day. In *Cook It Cool!*, I not only guide you through the entrées, I also give you drop-dead terrific recipes for desserts that everyone will want more of. In this case they can have more, since I’ll show you how to eliminate or reduce those body-fattening carbs. I also take delicious tasting, formerly carbohydrate-laden desserts and transform them into delicious, nutritious meals. Your children will think they are eating a dessert when, in fact, they will be getting a nutritious meal. They will delight in eating nutritionally fulfilling eggs in a delicious vanilla or chocolate pudding – all with very low carbohydrate value and natural, not artificial, sweetening.

You and your family will really enjoy these healthy desserts. I've included a few sample recipes in Chapter 11.

## **Precious Protein Revisited**

You've already discovered:

- **Protein is an ideal food for many reasons based on science. It has the unique property that it *can't be converted to body fat*, AND the majority of the protein eaten is “burned up” in its own digestion, forcing Nature to use MORE OF YOUR OWN BODY FAT for energy – precisely what we desire. But the good news about protein doesn't stop there. Nature ties protein to appetite-fulfilling *natural* fats. These *natural* fats are your friend and are critical to keeping you full while becoming lean-for-life.**
- Just 30-40% of the protein we eat (the minority) gets used in vital functions by the body. The majority of consumed protein “fuels its own digestion.”

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Surprise: Water is muscle's main component (70-80%).

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## **Most Experts Don't Understand that the Majority of Protein is No-Calorie Water!**

That's right. **Human muscle is 80% water.** This is right out of *Basic Medical Biochemistry*, page 7. This water is chemically tied to the muscle structure. After careful analysis, I realized all animal muscle has about the same water content. This watershed discovery (pun intended) has many favorable consequences for you.



This means that if I eat a pound of sushi or fish, such as sock-eye salmon, it has 70% water content. Yes, that means that 70% of the salmon has *no calories!* **This ISN’T water that evaporates away by cooking. This is water MOLECULARLY coupled to the amino acids, the building blocks of proteins, themselves. And this is the key.** The vast majority of the water in the protein is still retained when cooking. The bulk of animal-based proteins are water and this is right out of the USDA’s website at <http://www.nal.usda.gov/fnic/foodcomp/search/>.

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Protein’s water isn’t cooked away. The water is  
**MOLECULARLY BONDED** to the amino acids.

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## **Why Does Eating Protein Make You Burn Fat Like Crazy?**

Follow these numbers with me: After eating one pound of fish, at most there is only 40% of the protein left after fueling its own energy for digestion. This means only 6.4 ounces. We only have about 30% of that protein left once we discount the molecular bonded water, or 2 ounces. This means from a one-pound piece of fish, we have a scant 2 ounces of protein left for uses like enzyme manufacture, antibody manufacture, muscle manufacture, **and** incorporation into each of your 100 trillion cells. So we end up with little net precious protein. Under drastic conditions, protein can be directly used for energy, but this is rarely required – protein is too precious a commodity.

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**Eat 1-pound dietary protein = 2 ounces left over  
for use by the body!**

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Therefore, when you eat protein, where does your body get the 1,500 calories worth of energy it needs to keep you running all day long? You've already guessed it, **FROM YOUR OWN BODY FAT or from the natural fats in your diet**. It can't be from the net protein, because there is so little left. By following *The 24-Hour Diet*™ we have perfectly accomplished our goal of becoming lean-for-life and staying there.



**Great news! Amazingly, you can lose about one-half pound of body fat eating one pound of animal-based protein a day. You can verify this amazing fact for yourself just like I did.**

But what about the remaining fat in the fish? That fat **WOULD** be used as energy and stop you from running on your own body fat, except that it is an **INSIGNIFICANT** amount, and that is a key insight. Unlike the water being molecularly tied to protein, a lot of fat **DOES** get cooked away during preparation. **There is no need to “remove all the fat” from your food as the nutritionists advise.**

There are minor variations in water content among protein sources: dry-cooked salmon is only 60% water compared to raw salmon's (sushi) 70% water content. But this is an insignificant difference, so eat as much as you enjoy. Below we've provided a table showing the water content of some common protein-based foods. The differences aren't significant, so **I suggest eating the proteins you really like** and not just the maximum water-containing proteins in order to gain a tad more fat-burning. You will find the results of this approach very, very satisfying (at the table and on the scale).

## **A Small Sampling of Protein-Based Foods That Make You Lean-for-Life**

(organized by decreasing water content)

<b>Protein</b>	<b>Percentage Water</b>
Egg white	88
Cottage cheese, creamed	79
Cod, baked	76
Shrimps, raw	75
Haddock, baked	74
Turkey breast	74
Ham, lean, cooked	73
Eggs, whole	73
Salmon, canned	70
Swordfish, broiled	69
Hamburger, 90% lean, broiled	69
Turkey, light and dark meat, roasted	68
Pork, fresh, braised	68
Chicken (breast meat, roasted)	65
Sausage, turkey, cooked	65
Sirloin, roasted	65
Salmon, cooked with dry heat	62
Chicken (dark meat, roasted)	59
Sirloin steak, broiled	58
Lamb, roasted	58
Sirloin steak, pan fried	56

Protein	Percentage Water
Hot dog	56
Hamburger, 80% lean, broiled	56
T-bone steak, broiled	55
Sausage, beef, cooked	51
Duck, roasted	50
Hamburger, “Fast-food” burger only	42

### Notes:

1. Sausage and bacon usually have a high fat content, so they are not recommended as a daily choice for maximum weight loss. Enjoying them a few times each week, especially if well cooked for maximum fat removal, will work fine to keep you on the lean-for-life path.
2. Turkey sausage is great, although not as flavorful because it contains more water, more protein, and less fat than other sausages.



**Recall that fat, NOT protein, fulfills the appetite, so we always suggest adding some of those amazing PEOs when eating your protein-based foods to make sure you stay full while encouraging maximum fat-burning.**

## **Newsflash: Protein Raises Metabolism 30%**

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There is one more fact that makes becoming lean-for-life by emphasizing protein even easier. As the *Textbook of Medical Physiology* on page 908 makes clear:

**By eating protein, your metabolism is raised 30% for up to 12 hours. This effect is called the *specific dynamic action of protein*!**

This means that if you normally need 2,000 calories of energy each day for metabolic processes, then by eating lots of protein you will now require 2,600 calories just to maintain yourself. Guess what fuels the additional energy requirement? You’ve probably guessed it—**more of your own body fat. Mission accomplished.** Naturally, you don’t want your appetite to increase when burning your extra body fat or you won’t lose more weight. One of the benefits of the PEOs is to help control your appetite. Isn’t Nature wonderful when you understand how She works? If you’d rather eat meat instead of fish, go ahead. I do.

## **The Key to Long-Term Success is to Alternate: Primarily Protein with Anything You Desire**

Given the fat-burning power of protein, you will soon be in the wonderful position of choosing to either *not gain* weight or to *lose* weight each day. That’s right. It is YOUR CHOICE EACH DAY.

The great news is that science shows us the way to completely control our bodyweight. Eating fat won’t make you fatter, but it will inhibit burning body fat, meaning it will inhibit weight

loss. Eating protein causes the most fat-burning. Therefore, we combine these two properties to decide where we want to be during the day. What could be easier?

Your decision will be accomplished by your DAILY CHOICE of eating either foods providing **a combination of protein and fat (weight maintenance mode) with minimal carbohydrates**, or eating **primarily protein (weight and body fat loss) with some PEOs**.

If you desire a piece of cake, you can eat it, because your next meal can be all protein to compensate. If you want to enjoy a pizza while watching the football game, it's not an issue because the next day you can easily consume no carbohydrates, since the Parent Essential Oils really help eliminate those fattening carbohydrate cravings.

Personally, I prefer to eat mainly protein during the week and on weekends eat whatever I want. My carbohydrate cravings are virtually zero, but I like some jelly beans (especially while writing—peach are my favorite), and pizza with extra cheese and pepperoni. It's not a problem anymore because I know the "secret" ....

## **Great Protein Foods**

### **Full-fat Cottage Cheese and Full-fat Yogurt are Great.**

Two cups of *full-fat* (not low-fat) cottage cheese contains about 2 teaspoons of sugar, even though it isn't sweet, and only 20 grams of fat. It's a great food to help keep you lean-for-life.

### **Fish is wonderful.**

Fish is an outstanding choice—not because there is so little fat, but because it contains lots of water *and* protein. With all the wonderful varieties of wild-caught fish, no one needs to be eating exclusively "red meat," unless you choose to.

## **Steak / Hamburger**

Ground sirloin burgers are my favorite food. I cook two half-pound burgers in a fry pan and top them with ketchup at least 3 times a week. To accompany them, I have a small portion of green beans sautéed in butter, and a glass of water. That’s all I need. It’s quick, delicious, appetite-fulfilling, inexpensive, and keeps me on the path to staying lean-for-life. What more could anyone ask for?

## **Dessert**

You probably won’t want many sickeningly sweet desserts after implementing this program. Personally, I now am so fulfilled from *real* food that sweets have lost their grip on me.

## **Protein —Your #1 Bedtime Snack<sup>1</sup>**

When snacking at night, make protein your #1 food and you can eat right up to bedtime. DON’T attempt this with carbohydrates, because you will be up all night needing lots of water, sweating like the dickens as your body tries to get that poisonous sugar out of your system, and you’ll feel like you have a baseball in your gut. NONE of this happens with protein and a bit of natural fat. That means you can have celery “stuffed” with cream cheese or a handful of organic nuts, like pecans or almonds, with some freshly made whipped cream (use only a teaspoon of sugar for a few cups of whipped cream). You can even have a big steak.

I **used** to enjoy milkshakes until I realized how fat they were making me. Now, with the **discovery of the Fruit Smoothie /**

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1 If you suffer from hiatal hernia or reflux then going to bed with an empty stomach is best because the advantage of gravity **decreasing reflux** is lost while **lying down**. (Thanks to Brian Vonk, M.D. for this important tip.)

**Protein Powder Combo**, I get even more fulfillment of the cravings and none of the weight gain. Read Chapter 5 and Appendix XIX to understand the secret of fruit + protein powder smoothies. I mix 1 scoop (approx. ½ ounce) of organic protein powder with 5–8 ounces of frozen fruit with enough water for a fluid consistency. If using the smaller fruits like blueberries or blackberries, I use less because they are more concentrated sugar. I always chose to make a “smoothie” because of the creamy consistency created by the protein powder and its ability to increase the smoothie’s volume – it’s much like a milkshake – without the weight gain or bloating. **I use pieces of frozen fruit so ice is not required** – covered with **just enough water for the ideal consistency**. My favorite fruits are sliced, frozen peaches, cantaloupe, strawberries, watermelon, and blueberries. I buy them either fresh or frozen. Sometimes I’ll cut the fruit myself and put in freezer-proof zip-lock bags and freeze them. That way I always have plenty ready – just take a bag from the freezer, add some water & one-two little measures of protein powder (I personally created the most delicious chocolate cocoa and natural flavors @ [www.24-hour-diet.com](http://www.24-hour-diet.com)). I use a Ninja® 1100 watt blender. It has suction cup feet so you can start it and come back 30-60 seconds later to a perfectly blended smoothie. (Make sure the fruit is cut in small pieces for this particular blender.)

There you have it. The easiest, and most scientific method of becoming and staying lean-for-life with *The 24-Hour Diet™*.

## **One Last Tip: Weighing Yourself**

We all know how quickly those pounds can creep up on us and all of a sudden we have a weight problem. To ensure this never happens again, I encourage you to weigh yourself DAILY.

Here is the proper way to do that:



- **Purchase a scale accurate to at least 0.2 pounds. Weight Watchers® makes a good, widely available scale.**
- **Weigh yourself first thing in the morning before eating.**
- **Wear the exact same clothing (or none at all, since you’ll have a dynamite body) each time.**

## **MY Favorite Days: Friday Night and Saturday**

Friday night and all Saturday there is NO DIETING! Eat whatever you want. You’ll be pleasantly surprised how what you want changes. Just a little bit of cake or ice cream goes a long way toward satisfaction and fulfillment. Then, starting Sunday, I eat more protein. I like starting the week off right and looking my best on Monday. Try it and you’ll agree. Nothing beats an energized, great Monday morning in which you feel and look great.

## **Holidays**

I have one thing to say about holidays. Enjoy them! Indulge. You can do this because regardless of how much you eat, even including lots of carbs, any excess weight will be easily lost once you return to this program.

## **Carbohydrate and Sweet Addictions Take a Hike!**

By making protein your number one food choice, along with those miraculous Parent Essential Oils, you won’t be addicted

to carbs; instead, you'll be addicted to feeling great ALL THE TIME.

## **Help is Always Here**

If you'd like personalized assistance we are here. Please see [www.24-hour-diet.com](http://www.24-hour-diet.com). We can help you in many ways, from seminars in your area to help over the phone. There is now no longer any reason not to become lean-for-life and energized!



## YES, Vegetarians Can Follow The 24-Hour Diet, Too

**I thank my dear friend and colleague, board-certified internist Soram Khalsa, M.D.,** for suggesting a chapter specifically for vegetarians. While I have focused on animal-based protein throughout this book, please understand that consuming meat is not a requirement for you succeeding in becoming lean-for-life and energized using my 24-Hour Diet Plan. With this evolutionary approach, *instead of eating meat* you can use other *animal-based* protein foods like cottage cheese and eggs.

**For those of you who may have jumped to this chapter without reading the preceding chapters,** I will reference the important sections for you to review and also give you some expanded information here in order to dispel a few nutritional myths. The *Food and Nutrition Encyclopedia* and *Bowes & Church's*

*Food Values* give little-publicized information that vegetarians need to know.

### **Myth I: Eaten Together, Rice and Beans Make a Complete Protein That Works Perfectly**

**Truth: Nothing could be further from the truth**

Before we can evaluate this incorrect but widely publicized statement, we need to understand a few important points.

- There are nine essential amino acids that each of us needs every day in sufficient quantities.
- An excess of one of the essential amino acids won't take the place of a deficiency in another of the essential amino acids.

Total daily “complete” protein consumption must include all the necessary amino acids, since an abundance of one essential amino acid will not offset a shortage in another.

- Rice and beans have “complementary” proteins because rice is low in lysine and beans are much higher in lysine. Yet, overall, this combination of amino acids is insufficient in total essential amino acids in comparison to animal-based food combinations.
- “Complementary” does not mean adequate amounts.
- Three-quarters of a cup of rice (even organic brown rice) and three-quarters of a cup of black beans conservatively gives you less than 20% of your daily protein requirements, but it does give you a whopping 800 calories of carbohydrates, which translates to 40 teaspoons of sugar. This method will firmly place you on the road to diabetes, heart disease from the insulin release, and obesity.

## **Myth 2: Soy Makes a Great Meat Replacement**

### **Truth: No, It Doesn't**

Chapter 9 gives information about soy that you need to know. Here are some of the chapter highlights:

- Contrary to what we commonly hear about the virtues of soy, soy is an *endocrine disruptor*, meaning that soy is known to contain anti-thyroid factors that are damaging your delicate thyroid gland.
- Soy inhibits trypsin, which is an enzyme produced by your pancreas.
- Soy “milk” is not milk and needs no refrigeration, contradicting what we have been led to believe. As a marketing ploy, soy milk is being sold in the refrigerated section of the grocery store near cow’s milk. Actually, soy milk is “bean juice” that infants cannot thrive on when it is used in place of mother’s milk. In fact, soy “formula” has the estrogenic equivalent of 4 birth control pills a day!
- Soy “protein” is incomplete.
- Soy lowers your immune system function.
- Soy encourages red blood cells to stick together, which can lead to a heart attack.
- The Chinese eat a mere 10 grams of soy a day and never consider soy for use as a “meat replacement.” The Japanese use more soy than Americans and interestingly enough, Japanese cancer rates are higher than American cancer rates.
- Tofu is only used as a condiment in the East, not a meat replacement. Tofu is a highly processed product.

### **Myth 3: Protein Shakes and Bars are Healthful Diet Foods**

**Truth: Not necessarily.**

Many people use protein shakes and bars in an effort to lower fat intake. There are a few important issues to consider before you follow this method:

- The protein used in these foods may be highly processed and possibly harmful depending on the protein they are based on. There is no natural protein food that contains no fat, unlike the way protein “powder” is formulated. The protein in fish is tied to natural fat, as are eggs, meats, cottage cheese, yogurt, etc. All naturally combine protein with fat. Only humans try to outsmart Nature. Removing all the fat and leaving just protein doesn’t work to fulfill your appetite because only natural fats fulfill your appetite and only fruit naturally fulfills your sweet tooth. You can have a reasonable amount of protein powder — 20–30 grams (0.7–1 ounce) per day. Just don’t overdo it.
- Given that there are 454 grams to a pound, and protein is measured in grams on food labels, check the labels of bars and protein shakes to get a real idea of how much “protein” is *actually* in the product. You may be surprised that it is often not a significant amount.
- Look at the additional ingredients, especially those contained in protein bars. Often, bars are loaded with soy “isolates,” composed of the worthless soy residue (inferior protein) left AFTER all nutritional value has been removed (and sold elsewhere). This product is used because it is inexpensive and often misunderstood by the general public. The bars can also contain lots of carbohydrates, placing you on the road to diabetes and obesity.

- There is no natural protein food that contains no fat, unlike the way some protein “powders” are formulated. The protein in fish is tied to natural fat as are eggs, meats, cottage cheese, yogurt, etc. All naturally combine protein with fat. Only humans try to outsmart Nature. Removing all the fat and leaving just protein doesn’t work because only natural fats fulfill your appetite.

If you are a vegetarian strictly because you think fruits and vegetables are the only foods that humans are supposed to eat, then I ask you to review the “Herbivore vs. Carnivore” physiology chart in Chapter 7, titled “Protein: Nature’s Building Blocks.” This information shows that physiological science firmly backs the consumption of meats and other animal proteins.

However, if you wish to avoid meat for moral reasons, I have empathy for your decision and will assist you with helpful information in an effort to accomplish this goal.

Please review Chapters 5 through 10 so you fully understand the differences in how your body reacts to the intake of carbohydrates, fats, and proteins. Those who decide to follow a vegetarian diet still have a number of good choices, though fewer than meat-eaters, if they also want to remain healthy.

Here are the food choices I suggest vegetarians eat to obtain sufficient animal-based protein without eating meat (food values courtesy of <http://www.nal.usda.gov/fnic/foodcomp/search/>):

1. **Full-fat Cottage Cheese** (organic is best). 1 cup contains about 30 grams of protein, so you can have 1-1/2 cups of cottage cheese to keep you on the path to radiant health.
2. **Eggs**, including the yolks, since there is 50% more protein in the yolks than in the egg whites. There are about 13 grams of

protein per each large egg, so **4-5 eggs are a great way** to get 50-60gm of protein. Cook them in real butter, ghee (clarified butter), or olive oil.

3. **Full-fat Yogurt** (organic is best) is another source of protein, but unfortunately 1 cup of full-fat yogurt contains just 8 grams of protein. Greek yogurt has much more protein and much less carbohydrate – a winning combination!
4. **Milk** (organic, higher-fat milk is best), contains just 8 grams per cup.
5. **Full-fat Cream Cheese.** One 3 oz package contains just 7 grams of protein.
6. **Cheddar Cheese:** 1 oz contains 7 grams of protein
7. **Blue cheese:** 1 oz contains 6 grams of protein
8. **Feta cheese:** 1 oz contains 4 grams of protein

The above-mentioned foods are representative of the USDA's National Nutrient Database, where you can find other foods as well to ensure that you get enough healthy protein.

As you have learned here, while there are several popular foods which have been reported to be good sources of protein, in reality they turn out to be insufficient to meet your body's needs *if* you want to be lean-for-life and energized with radiant health.

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**Because so many people, including physicians, are misinformed that protein causes excess acidity, I repeat the important following section so you get the truth.**

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## Proteins are Important Acid Buffers

Contrary to popular belief, as the *Textbook of Medical Physiology* makes clear on page 521, proteins are required to keep blood pH from becoming too acidic.<sup>1</sup> Furthermore, proteins are important intracellular (inside the cell) buffers, as *Textbook of Medical Physiology* makes clear on page 390.<sup>2</sup>

Proteins are also important in assisting blood clotting as needed, as well as performing many other important tasks. Any “expert’s” recommendation to restrict protein is not based on science, and because of this you must resist listening to their wrong advice if you want to become lean-for-life, energized and *healthy*.

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1 “Most of the hydrogen ions then combine with the hemoglobin in the red blood cells because the *hemoglobin protein* is a *powerful acid-base buffer*.”

2 “*Proteins* are among the most plentiful *buffers* in the body because of their high concentrations, especially *within the cells*.... For this reason, the *buffer systems within the cells* help to *prevent changes in pH of extracellular [outside the cell] fluids*....”





## **Cook It Cool!™ Recipes for Becoming Lean-for-Life**

**This is a sampling of recipes from my forthcoming** cookbook. I start with everyone's favorite course, desserts, and show you how to transform them into delicious meals that will amaze you and your loved ones.

My cookbook recipes will be divided into two sections: Weight-Maintenance (low carbohydrate) and Weight-Reduction (low carb & slightly lower fat). Since I love desserts, we'll start with a favorite of mine that also shows you how easy it is to stop gaining weight without sacrificing enjoyment. Dr. Nemer always says to stop the weight gain first. These recipes accomplish that and more.

## **“The Professor’s” Chocolate Pudding**

4-6 ounces<sup>1</sup> bittersweet chocolate broken into small pieces  
(85%+ cocoa content)

2 cups (organic) heavy cream (whipping cream)

2 cups (organic) half & half

1/3 total cup sugar

7 (organic) egg yolks plus 3 egg whites

(Optional) chopped or diced almonds

(Optional) top with whipped cream

1. Melt the chocolate<sup>2</sup> (a double boiler works best because it is very gentle).
2. Heat the cream, half & half and sugar over medium heat, stirring gently until warm.
3. Whisk the eggs together.
4. With a beater on medium speed, or by hand, whisk the eggs into the cream mixture. Keep stirring over medium-low heat about 10-12 minutes until the mixture coats the

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1 Note: 16 ounces = 454 grams, so 4 ounces equals about 110 gm. I like more chocolate, so I always use 6 ounces.

2 If you can find small chocolate pieces or chocolate bits, then you don't need to melt the chocolate. You can simply add the hot cream mixture to the chocolate and it will melt perfectly.

back of a spoon. (I use a wooden spoon.) Note: Pudding won't chill and thicken if not well-cooked.

5. Optional but strongly recommended: Strain the egg/cream mixture with a strainer to remove any small egg particles and ensure a perfect texture.
6. Whisk the cream mixture into the melted chocolate and mix until the chocolate has blended well, making sure to stir from the bottom of the bowl.
7. Pour into bowls and chill at least 4 hours (if you can resist) for the best flavor.
8. If desired, top off with whipped cream and chopped almonds before serving.

You can also turn the same mixture into a delicious frozen treat. At your kitchen supply store, get individual serving molds or popsicle molds made of silicone. You can fill it with the pudding and freeze. Now you have individual ready-to-eat treats. They are great for nighttime snacking, too.



If you want your children home at a particular time, just tell them “the pudding” will be waiting for them. I **assure** you they won't be late!

## **Breakfast Brownies**

8 ounces unsweetened chocolate – 70%–99% chocolate content

12 tablespoons (3/4 cup) organic butter (that measurement is correct!)

1/3 cup sugar

1 teaspoon vanilla

6 large (organic) eggs

3/4 cup **almond flour or coconut flour** – available at health stores and better supermarkets

1/2 cup chopped walnuts or chopped pecans

(optional) 2 tablespoon real safflower (not canola) mayonnaise<sup>3</sup>

1. Preheat oven to 350 F.
2. Grease an 8 inch square (or something close) pan with butter.
3. Melt the chocolate and butter in a double boiler.
4. Add the sugar, and vanilla. Mix together.
5. Continue beating.
  - Add eggs.
  - Add the almond or coconut flour and the nuts.
6. Pour batter into the greased pan, and bake approximately 25–30 minutes.
7. Let cool, then cut in chunks and enjoy!

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3 Adds a unique creaminess.

### ► *Lean-for-Life Commentary*

**About Eggs:** how much protein is in an egg? Surprise – the yolk contains 16% protein compared to the white’s 10%! No one tells us that the yolk has more protein than the white, they simply naively complain about the yolk’s fat content.

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**These brownies are unlike any others. You can eat a few of them without experiencing the sugar roller coaster afterwards.**

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### ► *Lean-for-Life Commentary*

Mayonnaise adds a delightful creaminess to cakes. Almond flour has very little carbohydrate – **3 teaspoons of sugar (carbohydrate) per cup vs. 20 from regular flours!** That’s why almond “flour” *won’t* give you the toxic “sugar high.” Isn’t science grand!

## Whipped Cream Soda

Next is a perfect, appetite-fulfilling snack without sugar. No one will want store-bought soda after you make them one of these.

1. Half fill a large cup with ice. Half fill with heavy whipping cream.
2. Fill remaining half of cup with soda (carbonated but unsweetened) water to top.
3. Add 1 tsp natural vanilla extract, chocolate extract, etc. Mix.



Your children will adore you when you make this drink for them or, even better, when you show them how to do it themselves. It has virtually no sugar. You use cream because it is both filling and won't make you hungry a few minutes later like a soft-drink.

### ► Cook It Cool! Comment

This drink has virtually no sugar and since you are using cream, it is most filling! Want a Coconut Cream Soda? Omit the vanilla and add about 5 tbsp. of “full fat” coconut milk instead.



## **Lemon Roasted Chicken**

Debbie really enjoys chicken, so here's a simple "roast the whole bird" dish that I "cooked up" just for her.

1 whole fryer – giblets removed (organically raised birds taste best)

1 whole lemon – cut in quarters

2 cloves garlic – sliced

salt and pepper

olive oil

1. Preheat oven to 325F.
2. Rinse the chicken with water. Rub olive oil over skin. Rub garlic over skin.
3. Fill cavity with the quartered lemon and the garlic slices.
4. Salt and pepper the skin.
5. Bake about 1-1/2 hours for a 7-pound bird. Remove lemon, carve and enjoy.

You'll really enjoy the unique flavor the lemon imparts.

### **► Cook It Cool! Comment**

If you bake at 250° F for close to 3 hours the bird is more tender, more flavorful, and healthier for you because the fats are less damaged. I use a thermometer to tell when the meat is precisely cooked to my liking.

## **D Lean-for-Life Commentary**

The olive oil helps the garlic flavor “transfer” to the skin because the garlic is soluble (dissolves) in oil. The oil also makes the skin more flavorful. This is the ultimate no-carb/high protein dish.

### **“Light as Air” Fried Chicken**

If you enjoy fried chicken like I do but wish to minimize the carbs, then you’ll appreciate the following recipe. You get all the flavor and crunch with virtually no carbohydrate, so you can eat as much of this delicious chicken as desired. For the coating:

1 cup white flour

1 tbsp. garlic powder

1 tbsp. dried oregano

½ tsp salt

½ tsp ground black pepper

2-3 pounds of cut-up chicken

In a plastic bag combine ingredients. Add chicken a few pieces at a time, shake well to thoroughly coat.

Heat coconut oil, palm oil, or lard in a cast iron skillet to medium high and cook chicken until browned and crispy. Enjoy.

## **Oil and Vinegar Dressing à la Brian**

For those that like salads here's a wonderful dressing.

½ cup extra virgin olive oil

Juice of 2 lemons

¼ cup shredded Parmesan cheese

1 tbsp. balsamic vinegar

Salt and pepper – to taste

Mix everything together in a stainless steel bowl (non-reactive) with a whisk or shake it up in a container.

### **► Cook It Cool! Comment**

I like extremely mild tasting oil so I choose an olive oil with acidity <0.5 on the label. One of the mildest tasting olives is the Arbequina species. "Extra virgin" means the 1<sup>st</sup> pressing. I'd rather use omega-6 containing oils like walnut oil, grape seed, & pecan oil – the top 3 – with the next best being sunflower or safflower oil it, so it doesn't solidify as much in the refrigerator. The reason is that it contains an extra double bond compared to olive oil and the more double bonds the lower the freezing point. DON'T use flax oil as its taste is not acceptable for a salad dressing. Organic/cold-pressed oils are best.

## Steamed Green Beans

1 package of frozen green beans (it's easy to find organic brands)

Butter

1-2 shallots or ½ an onion, chopped or sliced

1. Add onion and salt\* to the frozen beans and cook in a steamer per package instructions.
2. Serve with butter.

.....

### ► *Lean-for-Life* Commentary

\*Always add some salt to vegetables *before* cooking them. They'll cook, and taste better.

Look for **Cook It Cool! Recipes for Becoming Lean-for-Life**, available soon.

# Appendix I

## Artificial Sweeteners: Beware

### **The artificial sweetener business is big, really big**

... BILLIONS of dollars each year. A large portion of this is from soft drink sweeteners. Are people getting thinner as a result? No, it's just the opposite. In spite of increases in artificial sweetener usage, we are getting fatter by the day. Something is very wrong with this picture. Even though these artificial sweeteners don't generate an insulin response which makes you fat, they can lead to other complications such as cravings for sweets and higher resting blood sugar levels which *will keep you hungry, especially for those sweet, fattening carbohydrates!*

In our desire to lose weight, many of us use these artificial sweeteners.

While you should limit your sugar consumption, we still recommend REAL SUGAR over the manufactured substitutes. Following *The 24-Hour-Diet™*, your sweet cravings should decrease automatically. For assistance regarding artificial sweeteners, I wish to thank endocrinologist Dr. Amid Habib.

Additionally, much of the following material comes directly from the information about sugar and fat substitutes from "Something Fishy Website on Eating Disorders" at [www.something-fishy.org](http://www.something-fishy.org):

**Newsflash:** In spite of using artificial sweeteners we are becoming more overweight. They may even stimulate your appetite to eat more!

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## **Saccharin**

The tell-tale pink packets of Sweet 'n Low™." The oldest artificial sweetener and probably the "safest" of all of them but we can't recommend more than one serving per day.

## **Aspartame**

Nutrasweet™ or Equal™. This is a very popular sweetener, but considered one of the most dangerous food additives. Aspartame is in part methanol or wood alcohol, which is a poison. Although this substance doesn't generate an insulin response, many people actually gain weight when using it—the opposite of what we desire. Metabolites of aspartame include formaldehyde.

## **Sucralose**

Splenda™ is a chlorinated sucrose derivative. Most people think this is safe to consume. However, there have not been enough long-term studies to vouch for its safety. Therefore, stay away from it for now.

## Appendix II

### Cholesterol—It's Not What You Think!

**You have already discovered much about cholesterol** in the Fats section (pages 110-114). I know that with the huge amount of advertising about everyone needing to lower their cholesterol, believing the actual science is still difficult. The following is technical information so if you are the “need to know” type of personality like I am, you’ll love what follows. If not, you already understand more about cholesterol than most physicians do, so you can skip this with no problem.

Biochemical information can get rather technical because our bodies are very complicated machines. I thought it worthwhile to show you the technical information we have analyzed to bring you the most advanced nutritional science. Don’t expect your local nutritionist or even physician to know any of this, because this is state-of-the-art medical science, not parroted misinformation.

Following is wonderful information about cholesterol from a colleague I consider to be the top biochemist in Germany and one of the best biochemists in the world, Dr. Gerhard Spiteller. This information is reprinted from *The Hidden Story of Cancer* with permission of Pinnacle Press.

#### **Top German Biochemist Gets It Right!**

Dr. Spiteller understands the real reason cholesterol can be dangerous. He is the Chairholder of Biochemistry, Institute of Organic Chemistry at the University of Bayreuth. He discovered urofuranoic acids and has published over 100 scientific

papers.<sup>1</sup> Since 1986, Dr. Spiteller has investigated fatty acids (EFAs) and their degradation products, specifically, the influence of these substances in the physiology of mammals and plants:

- **“Oxidized cholesterol esters were recognized to be toxic. In addition, it has been detected that cholesterol oxidation products are incorporated into LDL in the liver. It is assumed [correctly] that LDL carries the toxic compounds into the endothelial walls where they contribute to cell damage. In agreement with this deduction is the observation that the brain was found to be injured not by an increase in free cholesterol but by an increase in cholesterol esters.”<sup>2</sup>**

#### ► *Lean-for-Life* Commentary

Dr. Spiteller tells us *oxidized cholesterol esters are toxic and this toxic substance is incorporated into the LDL structure*. An ester just means what the cholesterol is chemically attached to. Furthermore, he explains “free cholesterol” in your body is not the problem; instead, it is the defective cholesterol esters, NOT the cholesterol itself. I applaud Dr. Spiteller in his efforts to get the truth out.

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1 Professor Spiteller also attended my alma mater, Massachusetts Institute of Technology, as a postdoctoral fellow in 1960-1961.

2 Gerhard Spiteller, “Peroxyl radicals: Inductors of neurodegenerative and other inflammatory diseases. Their origin and how they transform, cholesterol, phospholipids, plasmalogens, polyunsaturated fatty acids, sugars, and proteins into deleterious products,” *Free Radical Biology and Medicine*, Volume 41, Issue 3, August 2006, pages 362-387.



## **In 2005 Dr. Spiteller Also Understood the Relationship Between the Oxygen/PEO Connection and Heart Disease: The Story You Haven't Heard...**

Professor Dr. Gerhard Spiteller was also right about the true cause of heart disease. These excerpts are from his article titled "Is Atherosclerosis a Multifactorial Disease or Is It Induced by a Sequence of Lipid Peroxidation Reactions?" published in the *Annals of the New York Academy of Sciences*:

- **"Consumption of oxidized PUFA-cholesterol esters seems to be responsible for the initial damage to endothelial cells.**
- **"It has been recognized that consumption of butter and other mammalian derived fats present, for example, in meat possess a strong atherogenic [heart disease causing] risk. Butter contains large amounts of saturated fatty acids. Therefore, it was deduced that saturated fatty acids induce atherogenesis.**
- **"On the other hand, a diet of fish was recognized to be antiatherogenic. Compared with other foods, fish contains higher amounts of n-3 fatty acids. Therefore, n-3 fatty [omega-3 series] acids have been regarded and are still assumed to be antiatherogenic, in spite of the conflicting reports.**
- **"Although saturated fats can withstand oxidation, n-3 fatty acids are PUFAs and, like all other PUFAs undergo LPO [oxidation] as shown experimentally. The deduction that fats rich in saturated fatty acids is a risk factor in atherosclerosis is therefore in disagreement with experiments demonstrating that**

the oxidation products of LDL are derived mainly from linoleic acid and partly from arachadonic acid [omega-6 derivative]. The fact that all PUFAs undergo LPO equally well is in **disagreement with the conclusion that n-3 fatty acids are protective.**" (Emphasis added.)

### ► *Lean-for-Life* Commentary

Dr. Spiteller makes it quite clear that oxidized EFA esters are the culprit in heart disease, NOT SATURATED FAT like we have been told. He explains how it was incorrectly "deduced" that saturated fats were artery-clogging when an elementary understanding of biochemistry disproves that possibility. Then he shows why omega-3 oils can't be "artery protective" like is so often claimed. Recall Nobel Prize-winner Richard Feynman's requirement that experimental results tower over opinion. Dr. Spiteller understands and publishes these truths. His article continues.

- "[C]holesterol is transported to cells in esterified form by low-density lipoprotein (LDL). LDL is recognized by an endothelial cell receptor and induced into the cell by endocytosis. There, the esters are cleaved [removed]. The resulting free cholesterol is transferred to cell walls. The overall process is strictly regulated.
- "In atherosclerotic patients LDL is altered by oxidation. This altered LDL is taken up in **unlimited amounts by microphages**. Dead microphages filled with **cholesterol esters are finally deposited in arteries**. The fact that LDL is rendered toxic by oxidation raises the question, which constituents of LDL are prone to oxidation?...."

- “Thus, atherosclerosis seems to be a **multi-step** sequence of LPO reactions, but *not a multi-factorial disease*.<sup>3</sup> (Emphasis added.)

### ► *Lean-for-Life* Commentary

Dr. Spiteller also makes it clear that parent omega-6 is transferred to the cell wall in a **strictly regulated process**. However, once the cholesterol becomes oxidized, the process of removing the defective material **becomes unregulated and it ends up in large part in your arteries!** It is the parent omega-6 that is the most significant altered substance of LDL, *not saturated fat*. He **ends with the statement that there is but one prime cause of heart disease, the defective parent omega-6**. Our conclusion, therefore, is that you can eat all the cottage cheese, eggs, bacon, lamb, hamburger, fish, and steaks you wish, to your heart's content (pun intended), because as *The 24-Hour Diet*<sup>TM</sup> makes clear, these protein-based foods are best for weight loss, too. Dr. Spiteller's article ends with a comment that shows why olive oil cannot be very effective in human tissues (and, we deduce, cannot therefore be effective in preventing heart disease):

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### **Newsflash 2005: Olive Oil Isn't Heart Protective, but it WON'T HURT YOU.**

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- “Phenols [certain plant compounds in olive oil], excellent scavengers in plant tissue, are *not*

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3 Gerhard Spiteller, “Is Atherosclerosis a Multifactorial Disease or Is It Induced by a Sequence of Lipid Peroxidation Reactions?,” *Annals of the New York Academy of Sciences*, Volume 1043, 2005, pages 355-366.

**readily incorporated into human tissues and their strong antioxidant properties cannot be expressed after consumption and digestion of plant-derived food.”(Emphasis added.)**

Many health “experts” claim the virtues of olive oil are due in large part to phenols. Although we find nothing wrong with the consumption of olive oil (extra-virgin organically pressed with low acidity is best), we now see that it isn’t the “anti-heart disease answer” because our tissues can’t make use of its antioxidant properties.

I, too, am sick and tired of *misinformation* from so-called “experts” that is based on faulty science. That’s why, instead of getting healthier and lean-for-life with energy, Americans have become a nation of overweight, exhausted shadows of themselves in spite of everyone trying to do the right thing nutritionally.

# Appendix III

## ***Fat-Free Was Known to Kill You in 1945***

**You need to know this. The following excerpt** illustrates in gruesome detail the potential dire consequences of eliminating fat from your diet. The following is from page 396 of the remarkable book, *Endgame, 1945: The Missing Final Chapter of World War II*, by David Stafford:<sup>4</sup>

“Obsessed with notions of racial purity and physical perfection, the Nazis began killing the handicapped – or ‘Life Unworthy of Life,’ as the phrase had it – in the late 1930s....

“Eventually, the news leaked out and in August 1941 the Catholic Bishop of Münster delivered a blistering sermon denouncing the murders.... But this merely applied to the particular method of killing, which was by gas. A public outcry followed....

“The asylums and hospitals reverted instead to murdering the handicapped through lethal medication and deliberate starvation, and the killing of children went on throughout the war. The director at Kaufbeuren,

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4 Thanks to Wayne Bell for sharing this book’s vital information.

Dr. Valentin Falthammer, was an **especially keen and energetic supporter of the program**, and proudly **introduced a carefully crafted *fat-free diet that guaranteed death to his patients and conveniently economized on pharmaceuticals***. The death rate rose so high that the asylum authorities forbade the ringing of the church bells at burial, so as not to alert the local population.” [Emphasis added.]

### ► *Lean-for-Life* Commentary

By 1945 it was known that *a FAT-FREE DIET would kill you*. After reading this excerpt from Stafford’s book I was both repulsed and baffled. Clearly, I was repulsed by the sheer inhumanity practiced by the Third Reich, but at the same time I wanted to understand their purpose in withholding fat from their prisoners’ diets. Why didn’t they simply starve these hapless souls? Why give them any nourishment at all?

I have concluded Dr. Falthammer’s intent was to maximize the usefulness of his prisoners (for either diabolical experiments or slave labor while they still had some strength left) and at the same time end their miserable lives economically. Once I came to this conclusion I was struck by the profound irony that we have willingly implemented the failed Nazi plan on ourselves through decades of medical recommendations to remove most of the fats from our diet—presumably to improve health and reduce weight.

Perhaps, for the first time, with the true, practical information contained in this book, you can avoid committing “dietary suicide” and become lean-for-life, energized, and disease-free.

# Appendix IV

## Cellulite Explained and Minimized

**Ladies need to know this. With the advent of the** high carbohydrate diet, you may have noticed the epidemic of increasing cellulite levels. Now let's see how carbohydrates can set up one of the prerequisites for the development of cellulite—a plague in many women—even those who are **reed-thin**.

What do carbohydrates and sugar have to do with this? The glucose from carbohydrates “adheres” to your blood protein. This sticking of glucose to your blood protein is technically termed “glycosylation” in the medical textbooks. Imagine honey in your arteries. It would travel slowly due to its high viscosity and sticking ability. The honey sticks to everything. Imagine that the blood consists of tiny, smooth marbles rolling past each other. Then imagine that, instead, the blood contains tiny spherical magnets sticking to each other and to everything. This is the real reason why lots of massage, lots of running, or even dieting to “stick-like” slenderness has little effect on eliminating cellulite.

A secondary cause of cellulite is the consumption of unnatural *trans* fats and other adulterated fats. These man-made fats, now finally achieving deserved notoriety in the press, are incorporated into your 100 trillion cells and allow an improper “magnetized-like” effect between the skin and underlying col-

lagen (protein). When you stop consuming the magnetizing *trans* fats, your problems will start to disappear. Women around the world can benefit from application of this science by replacing unnatural fats with proper natural fats and oils. Women know that lack of cellulite deposits can be even more important than size. Now you have the method to minimize cellulite by minimizing carbohydrates and trans fats! It is really that simple. Results often start to occur in just a few months and cellulite should be significantly decreased starting in just 90 days.



# Appendix V

## “Red” Meat Does NOT Promote Cancer

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Newsflash 2007: Studies Dispel Myth of Cancer-causing Red Meat

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**Medical News Today reported on June 5, 2007 that “red” meat does NOT promote cancer.<sup>5</sup>**

“Recent studies published in the journal *Cancer Science* have **disproved the myth** that consumption of **red meat increases colorectal cancer**.

“Researchers have run a large case-controlled study in Japan, examining associations of meat, fish and fat intake with risk of colorectal cancer...

“...[F]ound that intake of **beef/pork**, processed meat, total fat, **saturated fat** or n-6 PUFA [**parent omega-6**] showed **no clear association** with the overall or subsite specific risk of colorectal cancer.

“Our findings **DO NOT SUPPORT** the hypothesis [guess] that **consumption of red meat increases colorectal cancer risk...**” (Emphasis added.)

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5 Ref.: Kimura, Yasumi, et al., “Meat, fish and fat intake in relation to subsite-specific risk of colorectal cancer: The Kukuoka Colorectal Cancer Study,” *Cancer Science*, 2007, Apr. 1998; (4):590-7.

*Lean-for-Life Analysis:* I have reported for over 10 years that the science is very clear that “red” meat, without added hormones or chemicals, could not be cancer-causing. Furthermore, I have been advocating meat as a first-class protein source. “Red” meat’s natural saturated fat is burned for energy and its PEOs are used in numerous biochemical reactions. Meat’s protein is required to maximize hemoglobin’s oxygen binding capability. Without question, “red” meat and its associated saturated fat content are not cancer-causing—the OPPOSITE of what most physicians and nutritionists have led us to believe for decades. Their *misinformation* was based on opinion, not science.

Additionally, the study showed that fish and fish product consumption *was not statistically significant* in decreasing cancer.

So eat all the steak you want without guilt (I recommend “natural” or “organic” with no hormones or steroids used), knowing you are eating the protein and natural fats your body needs to remain healthy.



With science, we can get off the nutritional merry-go-round.

# Appendix VI

## Fruits and Vegetables Alone Do NOT Stop Cancer

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Newsflash 2007: “More veggies not the answer”:  
No Cancer Shield Found in Fruits and Vegetables  
or “Low Fat”<sup>1,2</sup>

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**If you are amazed at the recommendations in this** book and how they are often at odds with what the “experts” have told you for decades, then you need to know of the landmark study published in 2007 in *Journal of the American Medical Association*. Fruits and vegetables offered no cancer protection at all! Don’t think that this will be told in the popular nutrition and health journals.

Although there has never been a scientific basis (no metabolic pathway) for the claim that fruits and vegetables are cancer protective, it **hasn’t stopped physicians**, nutritionists, the government, and virtually everyone **from simply assuming they were**. Anyone utilizing this silly notion in the hopes of protecting themselves against cancer would be wise to reserve a bed at

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1 *Houston Chronicle*, July 18, 2007, page 1,3.

2 *The New York Times* (International Edition), A14, July 18, 2007. Ref.: *Journal of the American Medical Association*.

M.D. Andersen Cancer Center! Here is what the doctors doing the study had to report:

“Hopes that a *diet low in fat and full of fruits and vegetables* could prevent the return of breast cancer were dashed Tuesday by a large seven-year experiment in more than 3,000 women.

“We *always assumed* we’re not eating enough fruits and vegetables and that the more we ate the better.

“The findings are *a setback* to the hope that better diets can prevent breast cancer recurrence.

“It sends us *back to the drawing board....*

“...a daily diet that included *five vegetable* servings, *three fruit* servings, 16 ounces of *vegetable juice*, and 30 grams of *fiber....*

“**Researchers emphasized such nutrient-dense vegetables as dark leafy greens,** sweet potatoes and carrots and didn’t count iceberg lettuce and French fries.

“The women were allowed to eat meat, but were told to get *no more than 15 to 20% of their calories from fat.*

“During the next seven years, *the cancer returned in about the same proportion of women in both groups.*

“‘In addition to exercising regularly [**even though it fails**], eating a diet that has plenty of fruits and vegetables [**even though it failed**] and is moderate in fat [**even though it failed**] is still one of the best ways [**failure again**] we know to maintain health,’ said Caan

(senior epidemiologist at the Kaiser Permanente Division of Research in Oakland, California.)”<sup>3</sup>

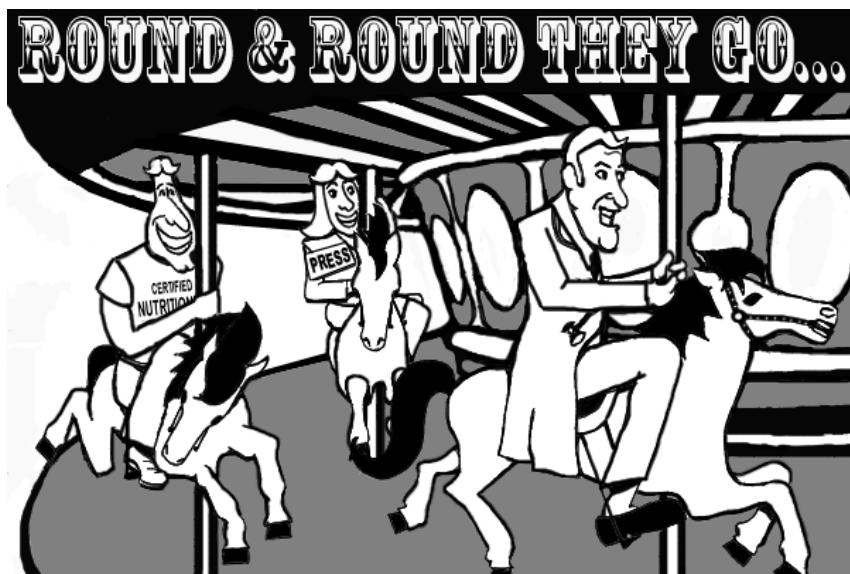
► *Lean-for-Life* Commentary

Cancer researchers’ incredible *lack of understanding* of what causes and what prevents cancer is deplorable. You have already learned that vegetable’s fiber sucks out precious minerals, including those precious minerals critical for oxygen transfer. You have already discovered fiber is an irritant, so it is cancer-causing, *not* cancer protective. **Their diet had 65% more vegetables and 30% more fiber.** You have already learned that glycemic blood sugar-raising carbohydrates make you fat. **Their diet had 25% more fruit,** which is good ONLY IF the proper fruits — producing minimal blood sugar rises — are consumed. You have already discovered that a fat-restrictive diet will minimize the vital PEOs (*unprocessed* omega-6 in particular) so cellular *de-oxygenation* is ensured, guaranteeing constant exhaustion. **Their diet had 13% less fat.** Their “brilliant” no-fat advice will help everyone stay exhausted, starving, and not energized! Protein was also restricted because the fat was restricted, so once again, oxygen transfer is impeded because plenty of protein is required for maximum oxygen-transferring hemoglobin. Did your health professional qualify his advice to eat more fruits and vegetable, less protein and less fat with “I think this might help?” NOT likely. Apparently, when it comes to your health, guesses are good enough. They actually state exercising (which does nothing to prevent cancer) and *eating plenty of fruits and vegetables* and moderate fat, is still one of the *best ways we know* to maintain health.

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3 *Medical News Today*: <http://www.medicalnewstoday.com/articles/77103.php>. Ref.: *Journal of the American Medical Association* 2007;298(3):289-298.

They are “back to the drawing board” after decades of giving wrong harmful advice based on opinion, not science. The researchers really need to read this book. If they can’t get it right with a major disease, don’t expect them to understand how to keep you lean-for-life and energized, either. If you’re not enraged I give up. What a sad state of affairs.



With all the money, time, and brain power dedicated to supposedly keeping us healthy, instead of finding a solution, the “experts” are like little children on a merry-go-round. Blindfolded, they pick a health recommendation out of a hat, then use it for several decades until it is disproved, then pick another and get back on the merry-go-round until that one is disproved. They go round and round and round in a fantasy world and end up in the same place where they started....

Isn’t it nice to know that the science you discovered in this book is state-of-the-art, and keeps you off that awful merry-go-round of obesity and exhaustion by eating fabulous foods.

# Appendix VII

## Fiber Does NOT Prevent Cancer

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Newsflash from 2002: Fiber KNOWN NOT to Reduce Colon Cancer Risk

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**Once again, the truth was published in the medical journals**, but you never saw it — because no one in the popular press wanted to admit being wrong. Recall that in 1999 and 2000 the world's best medical journals published the revelation of "fiber fiction," stating that those who ate the most fiber got the most colon cancer — the *opposite* of the desired result! Well, here's what was clearly stated in *Cancer Epidemiology Biomarkers & Prevention*, a cancer journal published by the American Association for Cancer Research, Sep;11(9):906-14<sup>4</sup>:

"...[The researchers administered the patients a] cereal supplement of either 13.5 or 2.0 grams per day.

**"No protective effect for adenoma [benign glandular tumor leading to cancer] recurrence was observed for**

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4 Jacobs, E.T., et al., "Intake of supplemental and total fiber and risk of colorectal cancer adenoma recurrence in the wheat bran fiber trial," *Cancer Epidemiology Biomarkers & Prevention*, Sep;11(9):906-14.

those randomized to the **high-fiber** group **as compared to** those in the **low-fiber** group.

“Patients in the **high-fiber** intervention arm of the WBF trial reported **side effects** such as **nausea, diarrhea and abdominal bloating** more frequently than those in the low fiber group.”

“The results of this study show that neither fiber intake from a wheat bran supplement nor total fiber intake affects the recurrence of colorectal adenomas, thus lending **further evidence** to the body of literature indicating that consumption of a **high-fiber diet, especially one rich in cereal fiber, does not reduce the risk of colorectal adenoma recurrence.**” (Emphasis added.)

### ► *Lean-for-Life* Commentary

1. Once again, the fiber-fiction truth was published in the cancer journal back in 2002, but few of us saw it.
2. **Six (6) times more fiber in your diet makes no difference in cancer protection;** in this study the number of polyps were NOT reduced, and the poor patients **eating the most fiber** “reported side effects such as *nausea, diarrhea and abdominal bloating.*” Nature is telling us how stupid an artificial high-fiber diet is by making us sick, and we still don’t listen!
3. **Recommendations** to include plenty of fiber **have NOT changed even though fiber is worthless** for preventing tumors leading to colorectal cancer, and even harmful to general health and well-being.



The fallacy of “fiber fiction” was started back in 1971 by Irish physician and surgeon Denis Burkitt when he visited Africa. Burkitt *postulated* (*guessed*) that the increase in Western diseases among Africans was due to a reduced consumption of plant foods containing dietary fiber. However, heart researcher and physician George Mann’s work is conspicuously absent from Burkitt’s *Western Diseases*. Dr. Mann studied the Masai tribes and came to the politically incorrect conclusion that their high fat diet from animal sources did not predispose them to heart disease – the opposite conclusion and the correct one.

But Burkitt was firmly committed to the McGovern Committee’s dietary goals, namely the replacement of animal products with grains, as a way to “prevent cancer and heart disease” and to “forestall world hunger.” Burkitt’s writings on dietary fiber led to calls for increased amounts of whole grains in the American diet in order to supposedly prevent colon cancer and other diseases of the intestinal tract. Dietary fiber soon became a household word, and America embraced the oat bran fad. Dr. Burkitt was dead wrong about this association. No matter that he had the best of intentions – too many people have been harmed by this silly fallacy.



# Appendix VIII

## Avoiding Nitrates is Unnecessary

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Newsflash: Avoiding Nitrates in Foods Such as Hotdogs and Lunchmeats is Unnecessary

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**For years, even I thought that nitrates and nitrites** were bad, because “so many “experts” said they were. Once again, they were wrong, but you were never told. There is no reason to deny yourself delicious lunchmeats and hot dogs — they are fine to eat. Of course, I always prefer the organically raised and processed ones if I can get them.

This long-standing nitrate scare is another **incorrect recommendation**. Nitrate is a preservative used in hot dogs, bacon, and lunchmeats. Its consumption has been said to comprise a “possible” link to stomach cancer, because nitrate derivatives (N-nitrosamines) have caused cancer in rats and farm animals. For decades we have lived in fear of nitrate-containing foods.

But these recommendations were made even though numerous studies in humans showed no negative effects! And no one mentions that nitrate is **naturally occurring in greens such as**

**lettuce and spinach.** The article, “Bad Rap for Nitrate: Infamous Preservative May Help Defend Against Bacteria,” by J.R. Minkel, *Scientific American*, Biochemistry Section, September 2004, page 24, details that “they” were wrong again and sets the record straight. Here are some key points from the article:

“... [D]ietary nitrate is actually part of the body’s **inherent defense against infection**....

“Bacteria in the mouth convert nitrate to nitrite, which gets swallowed, so the stomach *can naturally* produce nitric oxide....” [Note: Nitric oxide helps lower blood pressure. The 1998 Nobel Prize was awarded to co-recipient professor of pharmacology Louis Ignarro for work relating to this compound.]

“‘We’ve **gone from considering all of these things to be toxic and carcinogenic to realizing that [nitrates are] playing a fundamental homeostatic role** [safe and required, and NOT cancerous],’ says microbiologist Ferric Fang of the University of Washington.” (Emphasis added.)

It was already known in 1994 that the stomach contains lots of nitric oxide, and that nitric oxide is helpful in killing germs in the bloodstream. Therefore, it is obvious that nitrate is a helpful substance. **Why this took ten years to be publicized is astounding.** The nutritional “experts” mistakes make me mad and should make you mad, too.

# Appendix IX

## Increased Glucose: Beware of Cancer and Its Recurrence, Too

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Newsflash 2007: Increased glucose [carbohydrate] is a strong risk factor for colorectal cancer

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**Once again, the ugly truth about the evils of** carbohydrates appears, but few would ever see it if not for reading this book. That's right. Instead of looking to fiber as our colorectal savior, let's look at the real culprit, CARBOHYDRATES. The following conclusion was recently published in the medical journal, *Gastroenterology*<sup>5</sup>:

"Over the course of 4-year follow-up evaluation:

- "For both *insulin* and *glucose*, we found higher risk [for polyps] for subjects in the high quartile compared to the low quartile.
- "The association for glucose [carbohydrates] was most apparent for advanced carcinomas...

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5 Flood, A., et al., "Elevated serum concentrations of insulin and glucose increase risk of recurrent colorectal adenomas," *Gastroenterology*, 2007 Nov; 133(5):1423-9.

- **“Conclusions: Our findings suggest that patients with increased insulin and glucose [diabetic and overweight] are at higher risk for adenoma recurrence, and for those with increased glucose, the risk for recurrence of advanced adenoma is even greater.” (Emphasis added.)**

### ► *Lean-for-Life* Commentary

More polyps occurred in the group with the highest blood insulin and glucose levels. The greater the increase in blood glucose and insulin (caused by carbohydrate consumption), the greater the cancer risk. The more aggressive the cancer, the more deadly carbohydrate consumption is. You have already learned that carbohydrates are the fuel of cancer and this finding confirms it again. Once again, the evils of carbohydrates and high insulin levels are made evident.

# Appendix X

## The Power of Parent Omega-6

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Newsflash: Parent Omega-6 Increases Weight Loss: Known in 1973!

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**You have already read about Doctor Cavallino's** experiment with “carboholics” in Italy. I have long been aware of the remarkable power of the correct *unadulterated* parent omega-6 to -3 ratio in decreasing carbohydrate cravings. However, even I had never seen the following medical journal article. I sincerely thank Canadian David Macphail for sending it to me. All the way back in 1973, physician H. Kasper proved there is an effect of greater weight loss and better blood chemistry, too, when parent omega-6 is added to the diet — REGARDLESS of CALORIES.

Here's what the study states<sup>6</sup>:

**“Despite a higher total caloric intake,** the weight-reducing effect clearly equals that of a standard clinical reducing diet of 1,000 kcal [even though patients consumed significantly more food].

**“...A maximal weight loss** was achieved in cases 1, 2, and 15 when they were **taking fats high in linoleic acid [parent omega-6]**.

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6 Kasper, H., et al., “Response of body weight to a low carbohydrate, high fat diet in normal and obese subjects,” *The American Journal of Clinical Nutrition*, 26: February 1973, pages 197-204.

“It was **striking to observe** that the **weight gain did *not* correlate with the caloric intake**. Particularly if fat was given in the form of corn oil [high in parent omega-6], a distinct discrepancy between the caloric intake and the response of the body weight was detectable.

“This phenomenon was less conspicuous if fat was taken in the form of olive oil.

“If **fat was exchanged** isocalorically **for glucose [carbohydrates]**, the **weight loss ceased**.

“The **cholesterol and triglyceride concentrations** in the serum, which had been raised at the beginning of the experiment, invariably showed a **tendency towards normalization** under this dietary program.” (Emphasis added.)

### ► *Lean-for-Life* Commentary

1. This experiment proves that the “calorie theory” is incorrect and that there is much more to the picture than merely “calories in minus calories used equals weight gain.”
2. The parent omega-6 oil has a natural weight-loss property, whereas olive oil does not.
3. When carbs were switched “calorie-for-calorie,” for fat, weight loss STOPPED. Once again, we clearly see the “low-fat/hi-carbohydrate diet” failing!
4. Triglyceride and cholesterol significantly improved with the low carbohydrate/parent omega-6. We have a home-run!



# Appendix XI

## Adulterated Fats and Oils: Food Processors' Tricks

**Food processors require a long shelf-life in their products.** The only way to accomplish this is to stop oxygen transfer in the foods. It is the oils in foods that go bad (oxidize); fish goes bad (oxidizes) in just a couple of days because of its high oil content.

Now imagine the problems the large vats of frying oil can cause fast-food restaurants. They don't want to replace gallons of frying oil each day. Of course, they wouldn't have to if they used plenty of naturally saturated fats like palm oil and coconut oil—these are oils whose oxygen transfer is naturally lower, meaning that they last longer than other unprocessed oils and can withstand the high heats needed to fry foods. But rather than take this logical course of action—perhaps because they were ill advised by their food consultants and staff scientists, who believed conventional wisdom based on opinion rather than science—the saturated fats were replaced with unsaturated fats that couldn't withstand the high heat and had to be “modified” so they could.

How could food processors STOP this reaction with the oxygen in the air to give cereals, frozen foods, fried foods and baked goods a long shelf-life? Here are a few of the possibilities:

1. Chemically change the oil in the foods via *hydrogenation*. The result is those harmful transfats that don't react

with oxygen. That's why margarine lasts for years but causes heart disease, cancer, and chronic exhaustion. The oils start out in the form Nature designed us to use, but are ruined and adulterated by hydrogenation. Their use is one of the reasons people suffer constant hunger – our bodies are searching for a nutrient we aren't getting in sufficient quantities (*unadulterated* parent omega-6).

2. *Preservatives.* Preservatives also stop the oxygen transfer.
3. Other modified fats. Food processors resort to other awful techniques like *interesterification*. This destructive man-made process adulterates the oils and causes abnormally high blood sugars, making you hungrier and fatter, too.

You can see that just eliminating trans fats by itself, as New York City did with its restaurants, without understanding the actual requirements of the human body and what essential nutrients are still missing that must be supplied, isn't a complete solution to becoming lean-for-lean and energized.

## Appendix XII

### The Evils of Food Processing

**You will often hear that the problem today is** nutritional. Then the expert's answers abound with needing vitamin supplements, calcium supplements, or miraculous potions from the sea. Most of us have tried these. Unfortunately, most of them don't work.

Modern-day food processing either reduces, or in some cases, even completely strips away nutrients that still occurred in our foods in years past. EFAs have been stripped out or altered by food processors to prolong shelf life, while essential minerals are missing from our soil due to the widespread use of synthetic fertilizers. It is vital these important nutrients be supplemented in our diets to make up for them missing in our food. For example, we've all heard about the dangers of harmful trans fats, which were known to cause cancer way back in 1939 and to cause heart disease in 1956. These are man-made processed fats and oils that won't turn rancid like a natural food does. Fish spoils in three days; margarine easily lasts a year or longer. In spite of these findings, our government, your physician, and nutritionists all proclaimed the "virtues" of margarine and the harm of butter. This was a tragic mistake and once again, the "experts" failed us. As is often the case, the truth is published in the medical journals, but no one listens – the physicians are too busy treating patients, the government rarely changes its recommendations even in light of medical findings, and the nutritionists typically

merely “parrot” whatever they think is correct with no scientific basis. With this scenario, no wonder listening to so-called popular recommendation is hopeless and so is listening to most advice when it comes to your health. You need to learn it on your own.

Furthermore, these man-made foods (*trans* fats) **won’t fulfill your appetite** like a natural fat such as cheese or eggs do. Consuming these harmful, man-made foods over the past decades has also harmed many of our delicate metabolisms. Stop eating anything with harmful trans fats or hydrogenated oils (another name for trans fats). You’ll never reach your **natural size** if you don’t stop.

We are constantly told to lower cholesterol and avoid saturated fat. The facts are that there is **no saturated fat in an arterial clog**. Shocked? If you know any biochemistry, you will understand that saturated fat doesn’t combine with anything and is used first for energy by the body – hardly a problem. *The Lancet*, the world’s premier medical journal published this amazing fact in 1994 and no one noticed! It is nothing less than shameful.

Another problem with our modern foods is the harmful substances in our environment. Because of this, it is very important to take a gentle herbal cleanse to aid your body in its fight against these harmful agents.

# Appendix XIII

## Supplementation?

**For those concerned they may not be getting all the** nutrition they require from today's processed foods, I believe, based on years of research, that a "must have" in your supplement regimen is a unique combination of omega-6 and omega-3 oils. Along with other research scientists, I have concluded (and it is now explained in the medical journals), why "PEOs" will fortify you against a multitude of commercial food processing-related ills that have a common cause. Aside from providing essential nutrition for your body as explained below and more fully in other chapters of this book, their benefits include helping to naturally fulfill your appetite and reduce cravings, helping us all to become lean-for-life and energized.

PEOs are *un*processed, natural, parent essential oils — commonly called "EFAs" — that your body can't make on its own, but that every one of your 100 trillion cells requires. These special fats make it possible, among other important functions, for oxygen to reach the cells. We emphasize that you must get the PEOs (Parent Essential Oils) — not the mistakenly termed EFAs — because stores sell oils they call "EFAs," including fish oils, which are *not* the vital parent forms. Science is exact in its prescription for optimal health, so "sort of" following the correct path can often be worse than not trying at all. While most people — and too many supplement manufacturers — don't distinguish the parent

EFA's from the "derivative" EFA's, it is vital for you to know the difference.

"Parent" means the *whole* form of the essential oil as it occurs in nature before it's broken down or built up into any of its component derivatives. Your body doesn't need or want to consume many of the derivatives, because it makes its own out of the PEOs you consume *as necessary*. Taking fish oil and other health-food store "EFA's" can overdose you with derivatives and harm your health.

For the above reasons, PEOs should be a significant part of your diet. A second important point is that it is imperative to make sure that you are taking *more* unprocessed, natural, parent omega-6 than parent omega-3 – **more than** one part parent omega-6 to one part parent omega-3 and **less than** 2.5 parts parent omega-6 to one part parent omega-3 – and *no fish oils*. This recommendation is based on the physiology of your body, not the erroneous opinion that is leading everyone to "overdose" on omega-3! Of course, you can and do need some parent omega-3, but a relatively small amount. Personally, I've found at least 3,000 mg. of PEOs in the above proportions can make a noticeable difference in reducing my carbohydrate cravings and in energizing me too. (By the way, in the store, the labels won't read "PEOs," so you will have to look for "EFA's" or "EFA oil" meeting the above description.)

I also recommend the following:

A supplement with conservative amounts of at least eight essential minerals: magnesium, manganese, iron, chromium, boron, copper, selenium, and zinc. These minerals may be missing from your food and are too important to risk shorting yourself. Also be certain the mineral supplement you take contains "truly chelated" minerals. **True chelation** is a process that ties the minerals to amino acids in the correct form for full utilization by your body. Minerals are coenzymes. This means

they work in conjunction with the vitamins in your food to assist all of your important biological processes. Minerals can help your body to function up to a million times more efficiently than without them. Many vitamins are still found in our food, so taking a mineral supplement is even more important than taking a vitamin supplement!

I also highly recommend a gentle herbal optimizer based on the long-standing Essiac<sup>®</sup> concept formula. Versions are available with Cat's Claw Bark and even Fulvic.

These three vital supplements work amazingly well together, along with my dietary recommendations. Ask your local health store.

Conservative amounts of protein powder are fine — *See* as used in the Fruit Smoothie/Protein Combo Secret. However, I DON'T recommend overdosing on protein-powder supplements. Your digestive system is made to work by eating REAL FOOD, not predigested food. Heed my warning, or later in life you will pay a big price for teaching your system to be lazy.





# Appendix XIV

## Parent Essential Oils (PEOs): The Difference

**I am often asked how my EFA-based recommendations** differ from others. The answer is simple but very significant. The term “Essential Fatty Acids” is being misused so frequently that I was forced to coin a new phrase, *Parent Essential Oils* (PEOs).

This term “Parent Essential Oils” refers to the only **two true essential fatty acids**: parent omega-6 (LA) and parent omega-3 (ALA). The term “parent” is used because these are the whole, unadulterated form of the only two essential fats your body demands, as they occur in nature. Once **PEOs** are consumed your body changes a small percentage of them—no more than 5% and typically less than 1%—into other biochemicals called “derivatives,” while **leaving the remaining 99% in parent form**.

This is crucial to understand. There are a host of omega-6 and omega-3 oils being sold as EFAs that are *not* EFAs, but rather nonessential derivatives such as EPA, DHA, and GLA. Fish oils are made up almost exclusively of omega-3 *derivatives*. Scientifically and biochemically, calling derivatives such as EPA, DHA and GLA by the term “EFA” is wrong. **Derivatives are not EFAs because they are not essential**—your body has the ability to make them *as needed*. My research has shown that supplementing with the derivatives so commonly found in the marketplace and mislabeled as “EFAs” can easily be harmful to your health. Fish

oil/marine-based oils/EPA/DHA can all cause suprapharmacological overdoses of EPA/DHA – from 20x to 500x more than your body could or would ever produce on its own.

Why are the parent forms – PEOs – so important? Many of the EFAs sold in the stores consist of manufactured EFA derivatives. To be clear, your body doesn't need or want these derivatives, because it makes its own derivatives out of the **Parent Essential Oils (PEOs)** you consume *as it needs them*. Taking fish oil and other health-food-store "EFAs" often overdoses you with derivatives, which can be very harmful.

Don't make the common "EFA mistake" by unknowingly substituting derivatives for parents! **Since the term has become so confused by so many it is time to focus on the essence of what they are and why they are so vital to our health and well being.**

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From this point forward it is **Parent Essential Oils (PEOs)** that get center stage.

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Physicians and health professionals around the world rely on my scrupulously detailed research. Understanding how PEOs work is essential to your daily nutritional regimen. I recommend that everyone always demand to see solid science before taking any supplements or medications so you can avoid future problems.

Because so many people, including physicians, are misinformed that protein causes excess acidity, I repeat the important following section so you get the truth.

# Appendix XV

## More Exercise is Not “The Answer”

**If you think that exercise is the “answer” to staying lean-for-life**, then how do you explain the perfect fitness of André, my cat?

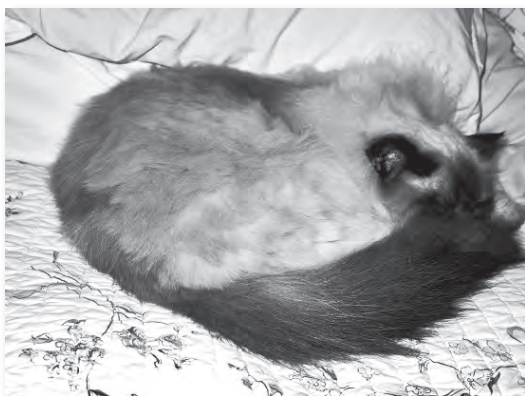


In over ten years he has NOT become overweight in spite of the following facts:

- **He eats two big meals each day.**
- He “relaxes” nearly 24 hours each day.
- He has plenty of energy WHEN HE WANTS because he vigorously plays with his sister.
- He gets no out-of-doors exercise.
- He is lazier than any human I know. In fact, he meows TWICE so my wife knows to pick him up and bring

him to his food and then later, he meows TWICE again so my wife can come and pick him up again to deliver him to his litter box. What a life this spoiled cat has! How does he stay lean-for life? The same way you discovered in this book.

**The simple explanation for André's perfect weight:** We give him the proper food for his species (a carnivorous mammal) – a 99% meat diet! Of course, both he and his sister consume the same PEOs I take.



André's sister, Beaubetté, is also a typical cat. Here she is, lounging on Italian bedding. Like André, she doesn't exercise. Although she is a Birman while André is a Persian, she, like all other cats, demands a carnivore's diet (strictly meat). The diets of both cats follow the principles of biochemistry and physiology you have read about in *The 24-Hour-Diet*<sup>™</sup>. This is the only reason both cats are thin, perfectly fit, and in great health without constant exercise.

**When the physiology and biochemistry of a species are understood, staying lean-for-life and energized simply happens. Fat cats are eating outside their species requirements, and so are overweight humans! This book allows you to easily correct those mistakes.**

# Appendix XVI

## Heart Myths

**Because we all try to do what is “heart-healthy,”** you need to know these common fallacies regarding vitamin E and so-called anti-oxidant vitamins. I’d rather see you spend money on what really works, not what you merely think works. These medical publications make it clear that:

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**Dietary [from food] antioxidants do not reduce heart disease risk.** *Journal of Clinical College of Cardiologists* 2001;38:1788-1798.

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1. “Until we have conclusive proof that ... antioxidant vitamins are beneficial, these should not be part of our main therapeutic regimen in cardiovascular disease prevention.”
2. “Our study produced no convincing support for the common practice of taking antioxidant pills such as vitamin E to prevent heart attacks.”

If this isn’t shocking enough, you need to know that so-called flavonoids DON’T WORK because consuming less of them gives LESS RISK of a heart attack!

**Flavonol and Flavone [from soy, fruits, vegetables, and wine] Intake Linked With Nonfatal Myocardial Infarction [heart attack].** *Epidemiology* 2001; 12:62-67.

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1. “The largest **decrease in coronary risk** was observed between the **lowest and second-lowest** [eating the least amount] quintiles of flavonol and flavone.”

# Appendix XVII

## **WARNING: Fish Oil Raises Blood Sugars— Diabetics Beware!**

**No one should have elevated blood sugars. This is a** diabetic condition. What few people, including physicians, have been told is that fish oil raises resting blood sugar levels. This is a hazardous condition if allowed to happen long-term. Here is what you need to know:

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**WARNING: Glycemic (blood sugar) control  
WORSENS during fish oil administration.**

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If the above information wasn't shocking enough, there is more bad news regarding fish oil supplements. The publication titled "Dose-Response Effects of Dietary Marine Oil on Carbohydrate and Lipid Metabolism in Normal Subjects and Patients With Hypertriglyceridemia,"<sup>1</sup> states:

**"The glycemic [blood sugar] control of [all of] the four insulin-dependent diabetic patients worsened during the fish oil administration.**

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1 Stacpoole, P., Alig. A., Ammon, L., and Crockette, E., published in *Metabolism*, Vol. 38, No. 10 (October), 1989, pages 946-956.

“...[T]he **insulin** dose of the subjects **had to be increased** throughout the six-month period of fish oil administration to maintain constant blood glucose and glycosylated hemoglobin concentrations (HbA1<sub>c</sub> average blood sugar level).

“Despite the stable body weight by patients on the basal diet, glycosylated hemoglobin levels **after six months of fish oil administration increased 16% from 4.9% to 5.7%**. Note: This is an awful effect for a diabetic.

“Another important finding of our investigation was that consumption of a fish oil-enriched diet **worsens glycemic tolerance.**”

Furthermore, there is additional recent confirmation that fish oil significantly reduces the glucose metabolic clearance rate, an awful effect to a diabetic. You need to know that *British Medical Journal of Nutrition* (2003), 90, 777-786 published, “Fish-oil supplementation reduces stimulation of plasma glucose fluxes during exercise in untrained males”:

“It is concluded that **fish oil reduced Rd [rate of glucose disappearance] glucose by 26% by reducing glucose metabolic clearance rate ...**”

“[I]t was observed in healthy human subjects that a 3-week supplementation of the diet with **fish oil (6g/day) decreased by 40% the insulin response** to an oral glucose challenge without altering either endogenous glucose production or plasma glucose utilisation.

“[N]-3 long-chain fatty acids are incorporated into **membranes whose composition remains altered at least 18 weeks after interruption of fish-oil supplementation...**



“The main observation of the present study is that a supplementation of the usual diet with **6 grams fish oil / day during a period of 3 weeks reduced stimulation of both HGP [hepatic glucose production] (-21%) and Rd glucose (-26%)** during exercise.”

### ► *Lean-for-Life* Commentary

You don't want a substance to increase blood glucose or force higher insulin levels (insulin resistance) to control blood sugar, negatively impact natural tumor killers, or compromise your immune system. Fish is not protective against heart disease since it has an excess of the wrong type of omega-3. Fish oil does the opposite of what is desired in four areas: decreasing natural tumor cell killing ability, increasing harmful infection from bacteria, failing to stop arterial inflammation, and raising havoc with your blood glucose system (insulin resistance). With four strikes against it -- the fish oil myth is out.

Rather than supplementing with fish oils, we recommend a plant-based omega formulation (from various seeds) that contains parent omega-6 and -3 PEOs, and FEW, if any omega derivatives.

Please don't make the “fish oil tragedy” mistake that so many misled Americans and others around the world do because they don't have this important information.<sup>2</sup>

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2 If you'd like comprehensive peer reviewed 2013 journal articles, please see “SELECT Trial Results Examined: Why Fish Oil, DHA and ‘Oily Fish’ Are Inflammatory, Leading to Increases in Prostate Cancer, Epithelial Cancers and CVD,” *Food and Nutrition Sciences*, Vol. 4, No.11, pp. 1128–1144 and “Why Fish Oil Fails to Prevent or Improve CVD: A 21st Century Analysis,” *Food and Nutrition Sciences*, Vol. 4, No.9A, pp. 76-85.

Also, my new book with Robert Rowen, MD, *PEO Solution*, devotes an entire chapter on the dangers of fish oil supplements. It is a “must-read.”



# Appendix XVIII

## You Need to Know...

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NEWSFLASH November 2008: The “Experts” Are Wrong Again... The Brain Loves Lactate During Exercise!

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**Once again, the “experts” have misled us. First,** they told us that our brain wants to run exclusively on sugar (glucose) and that sugar is its preferred fuel. This is absolutely incorrect; the section titled “The Truth about Ketones and Ketosis” (pages 122-131), taken from the world’s leading medical textbooks, proved it. Your brain wants to run on *ketones produced from burning your own bodyfat, NOT sugar*. When carbohydrates are minimized, the brain *naturally* obtains all the energy it needs from running on your own bodyfat. It is only when overdosing on carbs that this mechanism is short-circuited.

So now the truth has emerged that even during exercise, your brain runs on lactate from your muscles, not sugar (glucose). From *Medical News Today*:

Human Brain Feeds On Lactate Not Glucose During Exercise<sup>3</sup>

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3 Ref.: October 2008 print issue of *The FASEB Journal* (The Journal of the Federation of American Societies for Experimental Biology). Bjørn Quistorff, et al., “Lactate fuels the human brain during exercise.” *The FASEB Journal*. 2008,

“Researchers in Denmark and The Netherlands have discovered that **during exercise, the human brain shifts into a higher gear and uses an ‘alternative energy’ source: it does not feed on glucose but on lactate.**

“...**above a certain level of exercise**, as it becomes more strenuous, the muscles shift to another way of making energy, **using anerobic respiration, which involves lactate production and does not use oxygen.**

“The researchers showed not only that the **brain runs on lactate** during exercise but it actually **shifts into a higher gear in terms of activity.** They said the finding will open up new areas of brain research that will seek to understand what lactate does to the brain.

“**The finding challenges a long held view that the brain is strictly a glucose fuel burner** and that only the muscles switch to the lactate alternative. It also adds weight to the idea that lactate is not just a toxic byproduct of exercise, but a rich supplemental source of energy and that the body has sophisticated mechanisms for optimizing where it gets energy from.” (Emphasis added.)

### ► *Lean-for-Life* Commentary

This research shows that, contrary to popular belief, the brain functions best NOT on glucose, but on lactate during exercise [and on ketones from burning your own fat the rest of the time as the medical textbooks make clear]! The fact that ketones are the preferred brain fuel was known decades ago

and published in the world's leading medical textbooks. The "long-held view" that the brain wants glucose during exercise could have been checked and disproved quickly and easily by any nutritionist, sports doctor or health writer instead of their merely assuming the incorrect view. Be very careful of trusting the so-called "experts."

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**\*\*\* Case Closed...The Failure of Exercise Alone to Prevent Cardiovascular Disease \*\*\***

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Beginning in 1977, marathoner **Dick Hoyt started pushing his then 15-year-old disabled son, Rick**, in races, culminating in **26.2 mile** marathons. He did it eighty-five times! **Eight different times** he not only **pushed him 26.2 miles** in a wheelchair but also **towed him 2.4 miles in a dinghy while swimming and pedaled him 112 miles in a seat on the handlebars — a marathon, a tow, and a pedal — all in the same day!**

Dick also pulled him cross-country skiing, carried him on his back mountain climbing and once hauled him across the U.S. on a bike.

He became obsessed with giving Rick that feeling as often as he could. He got into such hard-belly shape that he and Rick were ready to try the 1979 Boston Marathon together. "No way," Dick was told by a race official. The Hoyts weren't quite a single runner, and they weren't quite a wheelchair competitor. For a few years Dick and Rick just joined the massive field and ran anyway, then they found a way to get into the race officially: **In 1983 they ran another marathon so fast they made the qualifying time for Boston the following year.**

Then somebody said, "Hey, Dick, why not a triathlon?" *Now they've done 212 triathlons*, including *four grueling 15-hour Ironmans* in Hawaii.

In 2008, at ages 65 and 43, Dick and Rick **finished their 24th Boston marathon**, in 5,083rd place out of more than 20,000 starters. Their best time? Two hours, 40 minutes in 1992 - only 35 minutes off the world record, which, in case you don't keep track of these things, happens to be held by a guy who was not pushing another man in a wheelchair at the time.

And Dick got something else out of all this too. **Two years ago he had a mild heart attack during a race. Doctors found that one of his arteries was 95% clogged.** "If you hadn't been in such great shape," one doctor told him, "you probably would've died 15 years ago."

### ► *Lean-for-Life* Commentary

Dick is an amazing father. His level of athleticism is incredible. **He has completed 212 triathlons, 4 Ironman competitions, 24 Boston Marathons – all while bearing the weight of his grown son!** And yet *he had a heart attack with 95% occlusion of an artery!* The inane and silly comment by a physician that Dick would have certainly died earlier if he wasn't in such great shape is utter nonsense and scientifically wrong. *The Exercise Myth* by cardiologist Henry Solomon, M.D., Harcourt Brace Jovanovich Publishers, New York, NY, 1984 (out of print) clearly showed the fallacy that exercise stops heart disease. Marathon runners routinely suffer heart attacks and often have very clogged arteries. All that exercise does very little to stop a heart attack. Remember my mailman father, who suffered a quadruple bypass? All that walking did nothing to protect him either. In fact, because everyone is so misled in this area, I was compelled to write a special report titled *The Myth of Cardiovascular Health From Exercise: Exercise Doesn't Prevent Heart Disease.*" (Available at no charge from [www.brianpeskin.com/sdsds.htm](http://www.brianpeskin.com/sdsds.htm).)

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## Newsflash: Surprise....A Larger Person Eats Less to Maintain Their Size!

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That's right. As shocking as this may seem, the bigger you are, the less you need to eat to maintain that size.

A small hamster or any other small rodent can eat its own weight in food every day whereas an elephant only requires 1/10<sup>th</sup> its weight in food per day. Both animals are plant eaters.

**QUESTION:** How much more energy does a person weighing double need compared to the person weighing half?

**ANSWER:** If you said double the calorie intake, that would be a good GUESS, but you'd be very WRONG! **The energy demands of a person weighing half what you do is about 20% MORE per unit of weight compared to you.** Understand exactly what this means. Of course, the smaller person DOES eat less food to maintain their weight than you because you weigh double. However, the smaller person can eat more than half of what you would because their resting metabolism is higher because they are smaller.

As a further example, the resting energy expenditure of every gram of a hamster exceeds those of an elephant by a factor of 17.8 (an elephant weighs about 100,000 more than a hamster). SO, the elephant eats 17.8 times LESS on a proportional basis than the hamster. The elephant is 100,000 times larger but there is a factor of 17.8 to scale this by. The elephant doesn't eat 100,000 times more food, as someone might initially and naively think. **The more you weigh, the less food you need proportionally to maintain that weight.** It may be even worse because this calculation (see below) may be based on a "best-case result," according to Dr. Alan Batterham (*J Appl Physiol* 82: 693-697, 1997). This precisely explains why it is so easy to gain weight and harder to lose it.

Although this example applies to different species, the analysis IS applicable to the same type of animal, i.e. comparing mammals to mammals or varying weights or reptiles to reptiles, etc. All that counts is the size difference.

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**WARNING!** The more you weigh, the less food is required to maintain that weight! That's why eating more is NOT "the answer." Instead, you should want to naturally fulfill your appetite with the least amount of food.

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That is why it is so critically important that you appreciate the science.

Energy  $\approx$  Mass  $^{(3/4)}$  so for unit mass, the energy goes as  $-1/4^{\text{th}}$  power. Therefore, when you double the size of the person, you only require about 1.8 times more energy for unit mass – not double (2 times). The result is strictly experimental but not very difficult to confirm with basic thermodynamics.<sup>4</sup>

So to maintain a larger size is easier than getting there. The adage that "it was so easy getting fat but so difficult to lose it," has a valid scientific basis!

## **A Very Big SECRET...**

For maximum weight loss while still eating carbs, the earlier in the day you eat the carbs, the better. Why is that? Because you move around more during the day and early evening than at night. Muscles use carbs (glucose) first for fuel so you

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<sup>4</sup> Over 65 years ago, M. Kleiber showed that the metabolic rate for animals ranging from mice to elephants scales as  $M^{3/4}$ .



have a much greater chance of burning up the carbs earlier than you do later.

The worst possible thing you can do is eat carbs in the evening, then watch television or go to sleep. Because few of us do much physical activity in the evening, there is little chance these carbs can be burned for energy. Rather, they cause a significant insulin spike, go right into body fat, and require lots of water, so you become bloated. There is a strong likelihood that you'll need to get up in the middle of the night and drink lots of water, too. What could be worse?

- **Eat the majority of carbs during the day.**
- Never eat carbs after 8 p.m. UNLESS you will be exercising or moving around a lot later in the evening so they get burned up. The only exception is the Protein Powder / Fruit Smoothie.
- Eat only natural fats and protein after 8 p.m.

This method ensures maximum weight loss.

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### **Major Newsflash 2008: Higher Protein Meals Keep the Fat Away AND Glycemic Index is Worthless for Weight Loss**

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*Medical News Today* (November 20, 2008) reported a dramatic study from the journal *Nutrition & Dietetics* titled, "High-protein meals may benefit fat oxidation and energy expenditure in individuals with higher body fat," December 2008 (Vol. 65, Issue 4).

This study verifies what you have already discovered:

- **"...[F]ound higher protein meals may have a subtle fat-burning effect in overweight or obese**

**people. And the study showed the glycaemic index (GI) of a meal has no additional effect on fat breakdown.**

- “...‘This new study shows that fat oxidation, or the body’s ability to “burn” fat, improves in obese people when they eat a higher protein diet.’
- “The high-protein meals led to the **greatest level of fat oxidation [burning excess bodyfat]**.
- “We found a **clear relationship** between body composition and the **effect of dietary protein on fat oxidation....**” (Emphasis added.)

### ► *Lean-for-Life* Commentary

More verification of the truth is here. First, as you have already discovered, the glycemic index is worthless in assessing a carbohydrate’s basis for adding bodyfat. All carbohydrates make you fat, period. They are a nonessential food, but *see* Appendix XIX. Second, by making protein your #1 food, you encourage your body’s own automatic fat-burning mechanism.

Remember, your body automatically keeps that one little teaspoon of sugar in your system constant from the protein you eat combined with your own bodyfat. That process is called gluconeogenesis and is completely described in any medical physiology textbook.

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## Major Newsflash: Derivative EFAs Made “As Needed” CONFIRMED

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I thank Soram Khalsa, MD, an extraordinary board-certified Internist utilizing complementary medicine, for sending me

the following article showing how PEOs do indeed allow creation of plenty of EFA derivatives—exactly as I have already postulated and predicted had to occur.

The article is “Flaxseed oil and fish-oil capsule consumption alters human red blood cell n-3 fatty acid composition: a multiple-dosing trial comparing 2 sources of n-3 fatty acid,” *American Journal of Clinical Nutrition*, Vol. 88, No. 3, 801-809, September 2008. It reports the following:

- **“Background:** An increase in plasma n-3 fatty acid content, particularly eicosapentaenoic acid (20:5n-3; EPA) and docosahexaenoic acid (22:6n-3; DHA), is observed after consumption of fish oil-enriched supplements. Because -linolenic acid (18:3n-3; ALA) [parent omega-3] is the direct precursor of EPA and DHA, ALA-enriched supplements such as flax may have a similar effect, *although this hypothesis has been challenged because of reported low conversion of ALA into DHA.*
- **“Conclusions:** The consumption of ALA-enriched supplements for 12 wk was sufficient to elevate erythrocyte EPA and docosapentaenoic acid content, *which shows the effectiveness of ALA conversion and accretion into erythrocytes. The amounts of ALA required to obtain these effects are amounts that are easily achieved in the general population* by dietary modification. (Emphasis added.)

### ► Lean-for-Life Commentary

There you have it. The conversion from “parents” into “derivatives” easily occurs naturally. Pharmacological overloads of derivatives are not required.

## **Carbohydrates Known to Lower Immune System Known in 1977<sup>5</sup>**

That's right. Carbohydrates suppress the activity of your immune system. Analyzing blood drawn from subjects, white cell activity was measured before and after various doses of carbohydrates (sugar): 6, 12, 18, and 24 teaspoons worth. Remember, the average American consumes at least 70 teaspoons of sugar equivalents (carbohydrates) a day, often consuming over 20 teaspoons of sugar at a single meal. DECREASED white blood cell activity was directly correlated with carbohydrate consumption. The group consuming the 24 teaspoons had virtually complete immobilization of white blood cells within an hour after eating. The immunosuppression occurred for up to 2 hours with adverse effects of blood cell activity continued for up to 5 hours.

Following the popular nutritional advice to eat 5-6 times a day with a carbohydrate-based diet can cause great harm to your immune system.

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### **2009 MAJOR NEWSFLASH: Exercise Not Key to Obesity Epidemic!**

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The truth that exercise is not the answer to maintaining your ideal weight has finally been published and publicized in

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5 "Saying No to Vaccines," Sherri Tenpenny, D.O., NMA Media Press, Cleveland, Ohio, page 171, 2008. Ref.: "Depression of lymphocyte transformation following oral glucose ingestion," *American Journal of Clinical Nutrition* 1977;30:613.

2009. [Note: A different study with the same finding had been published in 2007, but no one saw it because it was not publicized.]<sup>6</sup>:

- “A recent *international study fails to support the common belief* that the number of **calories burned in physical activity is a key factor in rising rates of obesity**. Researchers from Loyola University Health System and other centers compared African American women in metropolitan Chicago with women in rural Nigeria.
- “On average, the Chicago women weighed 184 pounds and the Nigerian women weighed 127 pounds. **Researchers had expected to find** that the **slimmer** Nigerian women would be **more physically active**. **To their surprise, they found no significant difference between the two groups in the amount of calories burned** during physical activity.
- ““We would love to say that physical activity has a positive effect on weight control, but that **does not appear to be the case**,” Cooper said.’
- “Results of the new study are **similar to those of a 2007 study** of men and women in Jamaica. Researchers from Loyola and other centers found there was *no association between weight gain and calories burned* during physical activity.

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6 “Physical Activity May Not Be Key To Obesity Epidemic,” Medical News Today, January 6, 2009. (<http://www.medicalnewstoday.com/printfriendlynews.php?newsid=134551>.)

- “Evidence is beginning to accumulate that **dietary intake may be more important than energy expenditure** level,” Luke said...” (Emphasis added.)

### ► *Lean-for-Life* Commentary

Once again, a “common belief” has been shattered. You have already discovered that a dietary “calorie analysis” alone is insufficient. More exercise is not the answer, because your appetite typically increases significantly with exercise, as the next newsflash describes. The answer is to fulfill your appetite naturally with the proper fats; in particular, parent omega-6 (as appendix X details).

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## 2009 Newsflash: Exercise Associated With Eating More

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For most people the adage holds true that if you exercise, *you eat more*. This fact was finally published and publicized in 2009 in Medical News Today<sup>7</sup>:

- “**New research from the University of Illinois suggests that weight-loss campaigns that promote exercise may actually cause people to eat more.**
- “The study, which appears in the journal *Obesity*, builds on previous research by Albarracín that suggests that *general messages to be active* can prompt people to behave in a variety of ways, some of which *may have negative consequences*.”

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<sup>7</sup> “Exercise Associated With Eating More,” Medical News Today, March 2, 2009. Article URL: <http://www.medicalnewstoday.com/articles/140698.php>..

## ► *Lean-for-Life* Commentary

The key to weight loss is not more exercise, because it causes too much of an additional energy demand on the body, making you hungry! Exercise can make you fatter faster because your appetite will easily become uncontrollable if you are consuming lots of carbohydrates. You have already discovered that a dietary “calorie analysis” alone is insufficient. The insulin response to a high carbohydrate diet ensures you will become a “human billygoat,” eating all day long. As the *Textbook of Medical Physiology* makes clear, 97% of the time, muscles can’t even use carbohydrates as fuel – they need fatty acids. These are obtained by metabolizing your own body fat.

The carbohydrate diet that everyone told us was so good – and that most nutritionists and physicians still maintain is best in spite of the science against it – has put America and the rest of the world at enormous risk for diabetes, heart disease, and cancer, too. The number of obese people has skyrocketed and huge numbers of kids in recent generations are growing up obese. Those who should have known better have let opinion, rather than proven science, rule.

Dr. Solomon, a renowned cardiologist, was the first to expose in a scientific manner the gross amount of *misinformation* being disseminated concerning exercise and its supposed correlation to improved health. He published *The Exercise Myth* in 1984 and it was shocking. We all owe him a great debt of gratitude.<sup>8</sup>

**I have always had a big problem with the notion that diet and exercise needed to be tied together. What type**

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8 *The Exercise Myth*, Henry Solomon, M.D., Harcourt Brace Jovanovich Publishers, New York, NY, 1984 (out of print).

**of food is exercise?** Is it a carbohydrate, fat, or protein? Of course, the answer is “none of them.” Exercise DOES deplete the bloodstream of glucose (carbs), meaning if you exercise, you won’t become AS fat eating carbs as when you don’t exercise at all. Exercise is also good for diabetics because it helps them decrease their blood glucose levels.

The *Textbook of Medical Physiology* makes it quite clear that while a person is on a high carbohydrate diet – like those we have all been told to eat for the past 50 years – it takes **40 days of running an hour a day to lose just one (1) pound of bodyfat**. That’s right.

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**WARNING: Exercise can make you  
fatter faster ...**

Running every day, 365 days a year, while following a high carbohydrate diet... You will lose a mere 9 pounds at the end of that year. That doesn’t take into account the weight gain from the increase in appetite. Exercise can make you fatter, faster...

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Most people have been incorrectly led to believe that it takes just six days of running, for an hour a day, to lose a pound of bodyfat. Wrong. The reason that this is not true is because you DON’T start burning fat immediately. You burn stored carbohydrate (glycogen) first. The more carbohydrates you eat, the less fat is burned because the longer it takes for the oxidization of fat to start. The notion of more exercise has completely failed us as a means for weight loss.



**Glucose restriction can extend normal cell lifespan and impair precancerous cell growth.<sup>9</sup>**

Carbohydrate overdose = greater risk of cancer, too. That's right. As more confirmation of the horrors of carbohydrate overdosing, in a highly technical 10-page paper, these medical researchers concluded:

- “More importantly, **for the first time** we found that **glucose restriction-induced** altered key gene expression through epigenetic mechanisms is a main pathway leading to different cell fates in normal and **precancerous** cells.
- “Collectively, these results provide new insights into the epigenetic mechanisms of a nutrient control strategy that may contribute to **cancer therapy** as well as **anti-aging** approaches
- “Glucose restriction can extend normal cell lifespan and impair precancerous cell growth through epigenetic control of hTERT and p16 expression.”

► **Lean-for-Life Commentary**

Once again, the positive anti-aging, and anti-cancer attributes of a decreased carbohydrate diet are shown.

Aren't you glad that you have read *The 24-Hour Diet* and now know you don't have to be a rat on a treadmill running or exercising every day to reach your ideal size?

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9 Yuanyuan, Li., et al., “Glucose restriction can extend normal cell lifespan and impair precancerous cell growth through epigenetic control of hTERT and p16 expression,” *FASEB Journal* (Federation of American Studies for Experimental Biology), Vol. 24, May 2010: doi: 10.1096/fj.09-149328.

## **2010 Newsflash (from 2008): Case Closed ... ONLY FATS Fill You Up!<sup>10</sup>**

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A landmark experiment absolutely showing that it's only FATS – NOT carbohydrates or proteins which send signals to the brain saying you are FULL – NOT hungry! Here's what was published in 2008, if anyone would care to research it:

- “Here, we report that *duodenal infusion of fat stimulates oleoylethanolamide (OEA) mobilization in the proximal small intestine, whereas infusion of protein or carbohydrate does not.*
- ...[T]his lipid messenger *participates in the induction of satiety.*
- ...[T]he rapid onset of the OEA response (<30 minutes)...
- ...[P]rolonging the time interval between meals.
- OEA production utilizes dietary oleic acid as a substrate and is disrupted in mutant mice lacking the membrane fatty-acid transporter *CD36*. Targeted disruption of *CD36* or *PPAR-α* **abrogates [ends] the satiety response induced by fat.**
- The results suggest that activation of small-intestinal OEA mobilization, enabled by *CD36*-mediated uptake

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10 “The Lipid Messenger OEA Links Dietary Fat Intake to Satiety,” Schwartz, GJ, et al., *Cell Metabolism*, Vol 8, Issue 4, Oct 8, 2008, pages 281-288.

of dietary oleic acid, **serves as a molecular sensor linking fat ingestion to satiety.**

- In conclusion, our studies identify **OEA as a key physiological signal** that specifically **links dietary fat ingestion to across-meal satiety.**" (Emphasis added.)

### ► *Lean-for-Life* Commentary

Once again, the truth gets published but no one is made aware of it. **ONLY fats fulfill your appetite; NOT protein or carbohydrates.** This experiment was done with oleic acid (like found in olive oil). **The effect is much stronger with a food containing an essential fat (parent omega-6), as you discovered in *The 24-Hour Diet* back in 1973.** Over a decade ago, I termed the receptor in the brain the "appestat." Now it's proven. You can easily prove this to yourself. First, eat five egg whites without any yolks. Fifteen minutes later you will still be hungry. Add the yolks and you're full. Eat a few pieces of bread and see how full you are; because of the insulin response you'll be starving again soon. Nature always ties a protein to a fat for good reason — **ONLY fats fill you up.** The silly "fat-free" notion is once and for all completely destroyed! What a tragedy this wasn't published sooner.



# Appendix XIX

## Fruit: A Diabetic's Best Friend—If Used Properly

### The Solution to Your Cravings for Sweets, Candies, and Cakes

**At one point I thought a “carb was a carb was a carb...”** and that you must avoid them like the plague to stay lean and healthy. However, there is much more to the story, and I have the editor-in-chief of *Second Opinion Newsletter*, Robert J. Rowen, M.D., to thank for his assistance.

We all crave sweets. Prior to cooking food, raw fruit was the primary food for early man. With all the physical exercise necessary to stay alive, everyone easily burned all the sugar ingested. Nature provided us with a great, readily abundant food source. When early humans consumed 1–2 pounds of fruit a day, they not only had the benefit of quick energy from the sugar, but they also obtained the majority of their PEO requirements, too.

Unlike prehistoric man, many today eat well into the evening. After a busy day you may want to watch a few hours of television, and of course, consume large quantities of carbs—chips, soda, pizza, ice cream, beer. Proteins and fats naturally fulfill your appetite, making you feel “full.” But they don’t always fulfill the cravings for sweets. Without the magic of fruit there would be no way to solve this problem because, as you have already discovered, “grain and starch carbs make you fat!”

## **Fruit Smoothie / Protein Powder Combo— Not Juicing: The Solution to Your Cravings for Sweets, Candies, and Cakes**

Here is a quick and satisfying solution to those cravings. Since the half a pound of protein requirement per day is an upper limit, I often choose to decrease it slightly and supplement with a Fruit Smoothie/Protein Powder Combo. It's a quick, easy-to-prepare meal fulfilling both your appetite and part of your daily protein requirement.

### **What Makes Fruit Different?**

Fruits are made of three different types of sugars: sucrose, glucose, and fructose. *Sucrose* is a naturally occurring combination of 1 part glucose and 1 part fructose and is very resistant to breakdown via hydrolysis. *Glucose* raises blood sugar, and pure glucose is the benchmark against other insulin-response foods. The third type of sugar, *fructose*, is known as “fruit sugar” and it is the most satisfying and sweetest of all sugars. Fructose is typically bonded to indigestible fiber for elimination so all that sweetness is at nearly ZERO cost (body-fat-wise). Attaining supraphysiologic levels of blood glucose in the body by consuming the lowest glycemic natural fruits is virtually impossible.<sup>11</sup> **It is important to understand that, as a group, raw fruits fulfill your cravings for sweets without putting on the pounds, because they are primarily water.**

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11 Blood glucose levels are 5.5 mM and even consuming a very high fructose (from fruit) diet, serum concentrations can reach 0.5 mM—just 10% of blood glucose levels. Of course, fruit's *glucose* level will cause a rise, so *choosing the best fruit that works best for you is most important.*

## **GLUTs: The Transporters<sup>12</sup>**

There are 14 glucose transporters (GLUTs); 7 can transport fructose, with GLUT5 being the sole specific fructose transporter. Physicians are familiar with GLUT4, regulated by insulin: with an improper insulin response, you get fat. But there are many other pathways the sugars in fruit utilize that don't make you fat as a result of a rise in blood sugar. For example, GLUT1 fuels the central nervous system and GLUT 5 regulates fructose in the intestines, testis, kidney, skeletal muscles, and brain — not raising blood sugar.

I initially discovered this by feeding fruit to a type I diabetic (my wife) and measuring her before/after blood glucose levels. After an hour there should be a significant increase from the sugar. This did not always occur. I remember giving her 10 ounces — about a half a pound of frozen peaches — expecting at least a 120–150 point blood sugar rise. It was only 17 points. I nearly fainted, as I had no explanation. I confirmed the rise on another occasion, with the same outcome. Since then, numerous followers of my recommendations around the world have verified the effectiveness of this incredible discovery.

## **For Maximum Weight Loss— a FEW “NEVERS”**

For maximum weight loss, do NOT eat any dried fruits, as they are concentrated sugar. Fruit juice is awful, too. You can eat the

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12 Douard, V, and Ferraris, R., “Regulation of the fructose transporter GLUT5 in health and disease,” *Am J Physiol Endocrinol Metab* 295: E227–E237, 2008; *Am J Physiol Endocrinol Metab*. 2010 February, 298(2):E141–E145.

whole fruit or grind it up in a smoothie, but never eat/drink fruit juice. Avoid bananas, too. They are concentrated sugar.

The great news is that on average, with whole fruit, the blood sugar rise that typically goes directly to making you fatter is much smaller than the expected rise. Given the glucose content of the particular fruit, it is between one-eighth and one-half of the expected amount. This is fantastic because even consuming 8–10 ounces of fruit in a smoothie as a meal increases blood sugar by no more than 130 points. As you may recall, 1 teaspoon of sugar raises blood glucose levels by 70–90 mg/dl, but when it is fresh fruit, the impact on your blood sugar is quite different and unexpectedly lower. A Type I diabetic's blood sugar only increases by 2 teaspoons sugar equivalent – an incredibly small amount for such contentment. If you instead foolishly eat a half pound of cake/pie/pizza/ice cream, your blood sugars could skyrocket to over 1,000 mg/dl.

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**Note:** If diabetic, please experiment with different fruits and see which ones work best for you to minimize blood glucose rise. Feel free to contact us @ 24-hour-diet.com.

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## **Fructose is NOT high fructose corn syrup**

High fructose corn syrup is not equivalent to naturally occurring fructose in fresh fruit. It is an *adulterated*, man-made food, and its level of adulteration is on par with adulterated cooking oils and *transfats*. The journal article mentioned earlier states, “Most of the increase in [fructose] consumption is derived from **refined or processed fructose**.” Natural fructose contained in **unprocessed fruit** is fine.



# Appendix XX

## James Garland Vegetable List

**The following list of low carb vegetables\* is from James Garland of Austin, Texas, whom I thank.**

Mr. Garland is a *nationally certified strength and conditioning specialist* holding a *kinesiology degree* with a *minor in biology* and is very familiar with my work.

The following is a list of the kind of carbohydrate foods he recommends to his clients, and I whole-hearted agree...

- broccoli
- green beans
- yellow summer squash
- kale
- spinach
- Brussels Sprouts
- mustard greens
- collard greens
- cauliflower
- cabbage
- alfalfa sprouts
- zucchini, lettuce (all varieties)
- eggplant
- cucumber
- celery
- asparagus
- snow peas

\* These carbohydrate foods are very low in sugar and starch and are mostly water. You won't get a "sugar high" from them\*\*

I sometimes enjoy a baked or mashed potato — eating half portion with real butter with sour cream and chives — but it certainly is higher carb than the above.....



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