

Newsletter

July 10, 2021



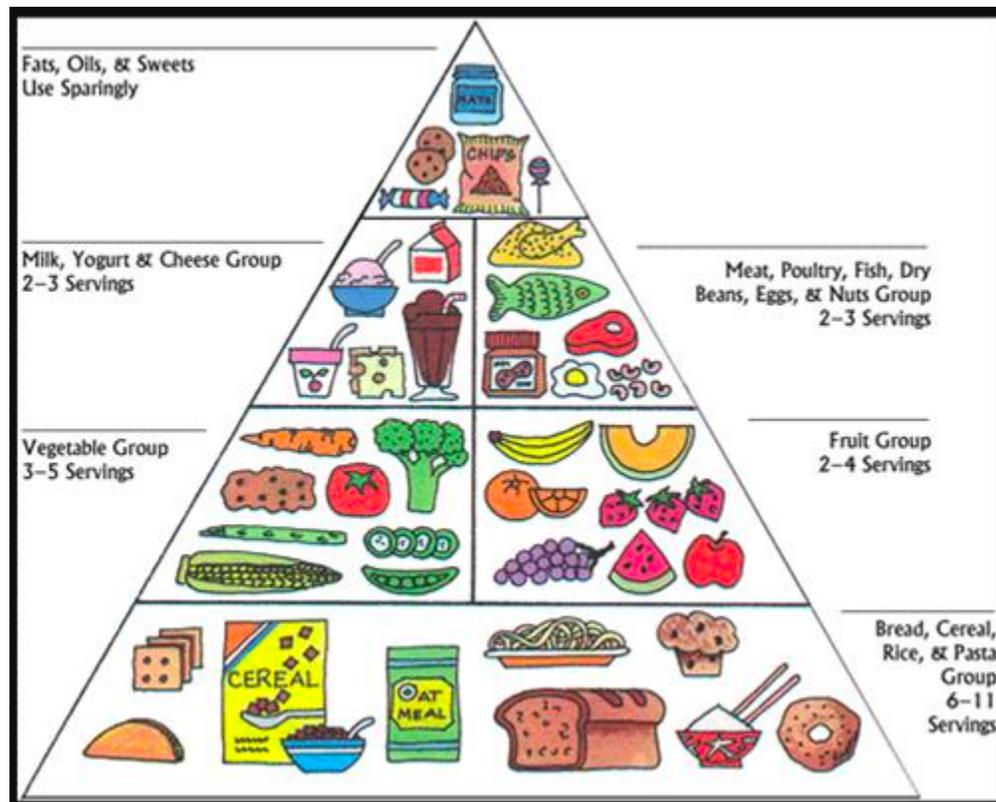
Let's Talk About It:

Let's talk about fat and disinformation. In 1992, the first food pyramid was introduced to the public by the United States Department of Agriculture (USDA), at the time it contained 6 blocks.

As I'm sure most of us remember, it had a "base" of grains and carbohydrates (6–11 servings of bread, rice, pasta, etc.), followed by the fruit (2–4 servings) and vegetables (3–5 servings) group, then the dairy group (2–3 servings), and the protein group, including meat, eggs, nuts, and beans (2–3 servings), and was topped off, of course, by the fats group at the peak of the pyramid. It was taught in school and it was a feature of our textbooks. On the next page I've included a rendition of the original pyramid.

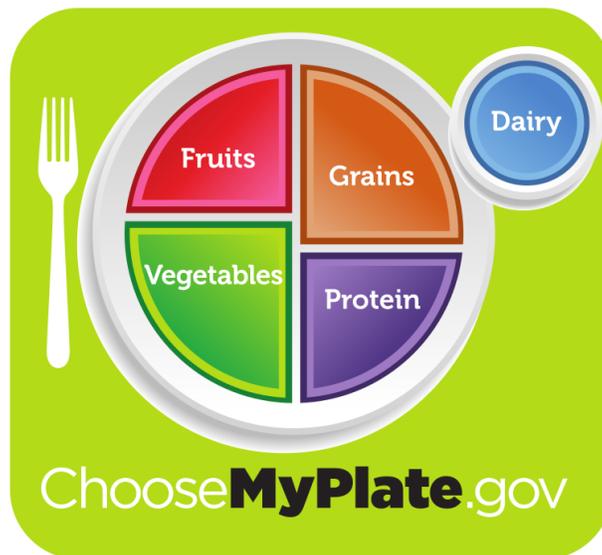
So, how in the world did this so-called "Eating Right Pyramid" to better health get developed and what was the science behind it? Scary fact: there was no science behind

it. It was actually influenced by lobbyists from various food producing industries, one of which was the sugar industry.



We know now that the decision makers in Washington got a lot wrong when they developed the food pyramid. What was an attempt to decrease cardiovascular disease, actually supported dietary habits that cause obesity and the comorbidities that are associated with obesity. This includes diabetes, high blood pressure, and hyperlipidemias (high cholesterol). These as we well know are the building blocks for cardiovascular disease. Since it was initially released there have been multiple attempts to improve on it by adding portion sizes and steps to encourage exercise. However, in 2011 the government finally stopped using it altogether when Michelle Obama and the USDA released the Myplate model.

The MyPlate icon shows a plate with the five food groups on a placemat that is suggestive of proportions; i.e., to make half your plate fruits and vegetables. It is what the government is still encouraging today, however, there continues to be little to no improvement in the health of the average American, in fact the obesity epidemic has continued to skyrocket along with a steady rise in the total number of deaths due to cardiovascular disease.



So, what do we believe now? We believe what science and medicine have been teaching us all along but whose wisdom has been pushed aside by special lobbyist groups and the government. From as far back as Hypocrites (known as the father of modern medicine), it has been recognized that the food you put into your body affects your health and that exercise is also very important.

“An apple a day keeps the doctor away” Is an updated version of an old english proverb, the original version actually says, **“Eat an apple on going to bed and you’ll keep the doctor from earning his bread”**. Research has shown that at the time it was written an apple was not taken literally but rather it stood for any round fruit and over time the fruit and the saying have come to symbolize eating all things healthy. The

importance of eating nutritional foods cannot be denied, the problem is figuring out who to trust about what foods are healthy. Especially when there is lack of continuity even within the medical community. However this is why specialty practices have evolved and why the newest specialty of Bariatric Medicine has emerged.

One of the four pillars of Bariatric (Obesity) Medicine is nutrition. We know from research and study that the body requires certain nutrients to function optimally. Here we get back to the Macro nutrients that we discussed in an earlier newsletter. These are Fat, Protein, and Carbohydrates (Macronutrients because they are measured in grams versus micrograms or milligrams). Sadly fat, a very important Macronutrient, has gotten a bum rap due to the original food pyramid and as we'll see, a man named Dr. Key's, and it has really struggled to recover its legitimacy as having important food value. In reality, there are certain processes in our bodies that require fat for proper function. The required fats (good fats or healthy fats) include polyunsaturated, unsaturated, and saturated fats. Yes, you heard me right, saturated fats. They are all good sources of fatty acids that are not made by the body and must be consumed in one's diet. These fats lower cholesterol and decrease your risk of cardiovascular disease and despite what we were taught back in the 1970's saturated fats from natural sources do not cause heart disease. In the 1950's the premise that saturated fats are bad for you and cause heart disease came solely from Dr. Ancel Keys who published observational data linking or correlating eating a diet low in saturated fat to lower rates of heart disease. This data became the basis of what is now known as the Mediterranean Diet. However, correlation does not always prove causality, and since this was initially put forward by Dr. Keys, there have been two massive meta-analysis studies that found that there is no real link between consuming saturated fat and heart disease. So, if fat isn't the enemy, what is, you may ask? To that I say excess carbs, but that is a discussion for another day.

Sources of healthy fats:

Fish: Eat fish twice a week, choose fatty or oily fish such as albacore tuna, herring, lake trout, mackerel, sardines, halibut, herring, anchovies, cod, and salmon. These supply lots of essential Omega-3 fatty acids.

Nuts: snack on a handful or about 1 ounce of nuts and seeds. Benefits include getting essential fats, energy, protein, and fiber. Choose almonds, hazel nuts, peanuts, pistachios, pumpkin seeds, sunflower seeds, brazil nuts, pecans, and walnuts.

Avocado and Olives: Can be eaten for breakfast, lunch, or dinner or as a snack. They provide healthy fats, fiber, vitamins and minerals.

Oils: Can be used for cooking or in salads. Good choices include avocado, olive, corn, grapeseed, peanut, safflower, sesame, and sunflower.

Animal Fat: Eat meat with fat, beef, lamb, pork, chicken with skin, duck, and eggs. Lard, butter, cheese, whole fat milk

Task For The Week

Over the next week, make a plan to eat at least one meal a day using at least one fat from the list above.

Ask the following questions of yourself, and record your answers in a journal.

1. Did I feel full longer?
2. How soon after eating did I notice a change in my level of hunger?
3. Did I find myself eating less?

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Recipe of the week

Smoked Salmon, Avocado, Cucumber, and Mixed Green Salad.

Makes 4 servings

Nutrition Facts Per Serving: Net Carbs 5g, Fiber 8g, Total Carbs 13g, Protein 12g, Fat 23g, Calories 297

Ingredients

Smoked Salmon 6 ounces
Cucumber 1 medium
Avocado 1 ½ medium
Mixed Spring Greens 6 cups
Balsamic Vinegar 2 TBS
Extra Virgin Olive Oil 3 TBS

Instructions

- Step 1. Wash salad greens, cucumber, and avocado's
- Step 2. Slice cucumber and avocado into thin slices.
- Step 3. Combine balsamic vinegar and olive oil
- Step 4. Cut Salmon into bite sized pieces
- Step 5. Combine all ingredients in a large bowl and toss.

If you have a recipe you would like to share, please send it to drqweightloss@gmail.com

Announcements

Vitruvian BodyWorks is now offering Yoga, HIIT, and Pilates classes. Call to sign up and get your first Yoga or Pilates class free (applies only to Yoga and Pilates). Classes available Sun - Sat. 727-273-2030.

Yoga \$10.00/class, Pilates \$15.00/class, HIIT \$15.00/class

Date	Pilates/HIIT	Yoga
Sunday July 11	9:00am (Pilates)	No Class
Monday July 12	9:00am (Pilates)	10:00am
Tuesday July 13	No Class	5:30pm
Wednesday July 14	9:00am (Pilates)	10:00am
Thursday July 15	6:00pm (HIIT)	2:30pm
Friday July 16	9:00am (Pilates)	No Class
Saturday July 17	9:00 (Pilates)	No Class

Looking for a personal trainer? Vitruvian BodyWorks offers a reduced rate to our active patients. Call the office for more information or to schedule a training session.



Q & A:

Why am I not losing weight as fast as I would like to? Part 4.

You are still drinking sugar.

Sugary beverages are often overlooked when considering your total calorie intake. Your brain doesn't compensate for the calories in them by making you eat less of other foods and this isn't only true of sugary drinks like sodas. It also applies to "healthier" beverages like Vitamin water, which is loaded with sugar. Even fruit juices are problematic and should not be consumed in large amounts. A single 8 ounce glass can contain a similar amount of sugar as several pieces of whole fruit. It is healthier and more satisfying to eat a piece of fruit, because you get not only the juice but also the fiber which can be subtracted from the total carbs to provide a lower number of net carbs.

You aren't getting enough sleep.

Good sleep is one of the most important factors for your physical and mental health as well as your weight. Studies show that poor or lack of sleep is one of the single biggest risk factors for obesity. Adults and children who sleep less than 7 hours per night or those with poor quality sleep have a 55% and 89% greater risk, respectively, for developing obesity. Studies also show that when trying to lose weight 7 ½ hours or more is ideal to lower nighttime cortisol levels and increase growth hormone levels two hormones that affect weight homeostasis.

You are eating too often.

It is a myth that everyone should be eating many small meals each day to boost metabolism and lose weight. Studies actually show that meal frequency has little or no effect on fat burning or weight loss.

<https://pubmed.ncbi.nlm.nih.gov/26226640/> It is also ridiculously inconvenient to be preparing and eating food all day, as it makes healthy nutrition much more complicated.

You are not drinking water.

In one 12-week weight loss study, people who drank half a liter (17 ounces) of water 30 minutes before meals lost 44% more weight than those who did not. Drinking water has also been shown to boost the number of calories burned by 24–30% over a period of 1.5 hours. The minimum daily goal you should be striving to achieve is 64 ounces of water per day. Add 8 ounces for every 15 minutes that you are sweating.

You are drinking too much alcohol.

If you like alcohol but want to lose weight, it may be best to stick to spirits like vodka mixed with a zero-calorie beverage or hard seltzer but be sure to look up the nutritional facts about your choice, flavored vodkas for example may have more carbs than you expect and not all hard seltzers are sweetened the same. Beer, wine, and sugary alcoholic beverages are very high in calories and should be avoided but again there are choices out there that are lower in carbs and calories. Compare Michelob 155 **calories**, 13.9 grams of **carbs** and 1.3 grams of protein while Michelob Ultra has 95 **calories**, 2.6 grams of **carbs**, and 0.6 grams of protein. Overall it is important to keep in mind that



alcohol itself has about 7 calories per gram, which is high. That being said, studies on alcohol and weight show mixed results. Moderate drinking seems to be fine, while heavy drinking is linked to weight gain.

You have a medical condition that is making it harder.

There are some medical conditions that can drive weight gain and make it much harder to lose weight. These include hypothyroidism, polycystic ovarian syndrome (PCOS), and sleep apnea. Certain medications can also make weight loss harder – or even cause weight gain. If you think any of these apply to you, let one of us know. We do screen for all of these with your labs.

Your expectations are unrealistic.

Weight loss is generally a slow process. Many people lose patience before reaching their goal. Although it is often possible to lose weight fast in the beginning, few people can continue to lose weight at a rate of more than 1–2 pounds per week. At some point, your weight will reach a set point where your body feels comfortable and from there it may take some time for it to adjust and be ready to move past it. Just remember the set point can slowly creep up over time and with diligence and perseverance you can nudge it down to where you want it.

You don't have anyone to hold you accountable.

It is extremely important to partner with someone to hold you accountable. Bariatric physicians are trained to focus on all of your needs from nutrition to your emotional and psychological well being. They can educate you and help you along when medication is



needed. All in all once your weight goals are met they are still there to help you maintain and sustain.

Please feel free to email us with questions, topics, or ideas that you would like to see included in this newsletter.

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