THE BETTER HEALTH NEWS

DOES DIET SODA MAKE YOU FAT?

WEIGHT LOSS

Dieters, in their quest to consume fewer calories, often opt to drink diet soda instead of sodas with sugar in them. It turns out that drinking diet soda may not be a very good strategy for losing weight. Research was performed at the University of Texas Health Science Center San Antonio (and presented at the June 25, 2011 American Diabetes Association's Scientific Sessions) found a connection between diet soda consumption and girth.

The researchers monitored 474 subjects between the ages of 65 to 74 years for nearly a decade. They measured the weight, height, and waist circumference of the subjects every 3.6 years. They also kept track of diet soft drink intake.

They found that the weight and waist circumference of the subjects increased proportionally to the amount of diet soda consumed. "On average, for each diet soft drink our participants drank per day, they were 65 percent more likely to become overweight during the next seven to eight years, and 41 percent more likely to become obese," said Sharon Fowler, who was a faculty associate in the division of clinical epidemiology in the Health Science Center's department of medicine at the time.

The fact that something that does not have any calories can actually cause weight gain may change how we think about calories and weight loss. Another study, presented at the same meeting by Sharon Parten Fowler, Ganesh V. Halade, and Gabriel Fernandes showed a connection between aspartame consumption and weight gain in mice. Mice fed food that was high in aspartame(an artificial sweetener sold under the brand name Nutrasweet) actually had higher blood sugar levels than mice not fed aspartame. Fowler, one of the researchers, postulated that aspartame could trigger an increase in appetite, but do nothing to satisfy it. It can interfere with the body's ability to feel full and can cause overeating.

Also, the taste buds may perceive that the drink is sweet, but the brain knows the difference. One study found that women could not tell the difference between sugar and Splenda in taste tests. When the brain was viewed with functional MRI scans, it was determined that the brain's reward center responded more completely to sugar than to artificial sweetener. "Your senses tell you there's something sweet that you're tasting, but your brain tells you, 'actually, it's not as much of a reward as I expected,'" Dr. Martin P. Paulus, a professor of psychiatry at the University of California San Diego and one of the authors of the study.

"Data from this and other prospective studies suggest that the promotion of diet sodas and artificial sweeteners as healthy alternatives may be ill-advised," said Helen P. Hazuda, Ph.D., professor and chief of the Division of Clinical Epidemiology in the School of Medicine. "They may be free of calories but not of consequences."

CAN DIETING MAKE YOU FAT?

It was around 1914 when Dr. Lulu Hunt Peters came up with the concept of the calorie and its relationship to weight loss and weight gain. A calorie (actually, in dieting a calorie is actually a kilocalorie) is the amount of energy that it takes to increase the temperature of one liter of water by one degree centigrade. It made sense; all foods contained a certain amount of energy. Simply cut down on the amount of food energy you consume and your body will have to rely on other sources (namely your fat) for energy.

Ever since then, if you wanted to lose weight, you simply ate fewer calories. There have been variations over the last 95 years. You have been told to eat fewer fat grams or to limit the amount of carbs. But basically the advice has always been the same: If you want to lose weight, eat less.

That would work well enough if your body was a furnace and that excess weight was a pile of coal in front of it. Order less coal, and eventually the pile gets smaller. Unlike a furnace, your body adapts to less fuel; it becomes more efficient. In the 95 years that the calorie concept has been around, using it to lose weight has been woefully inadequate.

Hormones play a big role in weight loss and weight gain. They play a role in appetite. Fat cells produce a hormone called leptin, which helps control satiety. When you lose fat, leptin levels decrease and produce a greater desire to eat. Stress increases cortisol levels, which creates cravings for high-calorie foods and also causes the body to hold onto fat (especially around the belly and buttocks). Denying yourself adequate food produces stress, and ultimately results in weight gain. Another important hormone is insulin. We think of insulin as the hormone that keeps blood sugar under control. Insulin stores calories. It is impossible to lose weight unless insulin is under control.

We have survival mechanisms in place to keep us from starving and to provide us with fuel at times of stress. It turns out that how much we eat is not as important as when we eat and what we eat. Eating in a way that helps the endocrine system help us to lose weight is a much better strategy than merely limiting calorie consumption.

Eating a good breakfast and making sure that you eat more early in the day and less later in the day helps to

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keep cortisol, insulin and your appetite under control. Avoiding common food allergens, like gluten and dairy, is often an effective strategy.

Science has provided us with information about weight loss that goes way beyond the century-old concept of the calorie. The endocrine system and brain chemistry hold the key to losing weight and getting healthy. To successfully lose weight, you have to get around your own survival mechanisms. Let's face it, your body thinks that weight loss is starvation and will work very hard at preventing it. The Control-IT system utilizes the latest scientific research to help you to successfully lose weight. After a century, we finally know what works.

INSULIN RESISTANCE

Excess insulin production causes a variety of problems. For one thing, insulin causes the body to store calories. You have to get insulin production under control to lose weight. This means avoiding sweets and starch.

Our blood sugar is controlled by insulin and glucagon. The excessive consumption of sugar and refined carbohydrates causes the body to become less sensitive to insulin—a condition that will lead to the metabolic syndrome or syndrome X. It can eventually lead to type-2 diabetes.

Insulin resistance can also lead to high cholesterol. Usually there is a pattern. The triglycerides and LDL (bad) cholesterol are high and the HDL (good) cholesterol is low. This is a situation known as the metabolic syndrome, or syndrome X. It is often accompanied by high blood pressure. It is interesting to note that cholesterol lowering drugs work by suppressing an enzyme in the liver. That enzyme is actually stimulated by insulin production.

Consumption of sugar and insulin resistance go beyond the obvious problems of obesity, diabetes and high cholesterol. Sugar is also linked to fatigue, high blood pressure, fatty liver, atherosclerosis, yeast overgrowth, magnesium loss, acidic pH, calcium/ phosphorus imbalance, polycystic ovary disease, endocrine problems, a systemic inflammatory state, impaired fibrinolysis and pro-coagulation, and an environment that favors neoplastic (cancer) growth.

The average American consumes nearly 200 pounds of refined sugar each year, and we get half of our calories from refined carbohydrates. This creates vitamin deficiency and insulin insensitivity. Other factors that contribute to the metabolic syndrome include stress, poor sleep habits, lack of exercise, and exposure to toxins.

According to the *Journal of the American Medical Association*, Syndrome X is present if these three things are present:

- Waist measurement greater than 40 inches in men or 35 inches in women
- Triglycerides greater than 150 mg/dl
- HDL less than 40 mg/dl in men or less than 50 mg/dl in women
- Blood pressure that is 135/85 or greater
- Fasting blood glucose of 110 mg/dl or greater

25% of all Americans have Syndrome X. It is a problem created by eating too much refined food. It can result in diabetes, high blood pressure and heart disease. Clearly getting insulin levels under control is a must.

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THE OBESITY EPIDEMIC

The number of overweight and obese people in the United States is on the rise. According to data published in *Epidemiologic Reviews* (2007; 29: 6-28), the incidence of obesity increased from 13% of the population in the 1960s to 32% in 2004. Between 2003 and 2004 66% of American adults were overweight, and 16% of the children and adolescents were overweight.

According to an article published in *Nutrition Week* (July 28, 1995;25(28):7), obesity adds $68.8 billion dollars to our health care bill. It is responsible for 19% of the cardiovascular disease in the US. There are an additional $23 billion in indirect costs like lost productivity and work missed while in the hospital.

An article appearing in the *American Journal of Clinical Nutrition* (2004;79:537-543) notes that the consumption of high-fructose corn syrup increased by more than 1000% between 1970 and 1990, according to the US Department of Agriculture. Currently it represents 40% of sweeteners used in this country (not counting artificial sweeteners). This increase in the use of high-fructose corn syrup parallels the increase in obesity over the same time period. Almost all of the soda pop in the United States is sweetened with high-fructose corn syrup (excluding drinks labeled “diet”). There is a strong correlation between the consumption of soft drinks sweetened with sugar or corn syrup and obesity. Research appearing in *The Lancet* (February 17, 2001;357:505-508) studied 548 children and found that each serving of soda pop the body mass index and frequency of obesity increased. There is a 1.6 fold increase in the odds ratio for becoming obese for each additional 12 oz of sugared soda pop consumed. The article goes on to say that there has been a 500% increase in soda consumption over the last 50 years.