#### THE BETTER HEALTH NEWS

### CAN DIET SODA MAKE YOU FAT?

IT'S NOT REALLY 2 ABOUT CALORIES DEPRESSION 3 AND OBESITY EAT BREAKFAST 3 TO KEEP WEIGHT 0 F INSULIN 4 RESISTANCE THE WEIGHT IS 5 OVER THE OBESITY 6 EPIDEMIC

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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 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 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," said Dr. Martin P. Paulus, a professor of psychiatry at the University of California San Diego and one of the authors of the study.

Page 2

#### THE BETTER HEALTH NEWS

# IT'S NOT REALLY ABOUT Calories

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 (in dieting, a calorie is actually a kilocalorie) is the amount of energy that it takes to increase the temperature of one kg. of water by one degree Celcius. 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. That would work well enough if your body was a furnace and that excess weight was a pile of coal in front of it.

It turns out that WHAT you eat is more important than how much you eat. Other issues, like digestion and hormonal balance also play a big role. Hormones play a big role in weight loss, weight gain, and 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, but insulin also functions to store calories. It is impossible to lose weight unless insulin is under control.

The Paleo/Mediterranean Diet can help you control stress hormones and insulin. More importantly, it can help to improve many digestive problems. The diet is very similar to the diet developed by Elaine Gottschall to help treat patients with irritable bowel syndrome and inflammatory bowel disease. The main feature of the diet is the avoidance 0 f complex carbohydrates—starches and disaccharides (including dairy). We tend to eat too many of these foods and they tend to rot in our digestive systems. That is the Paleo part of the diet. The other benefit is that following it helps you to avoid many common food 'allergens' (or foods to which you may be sensitive, like gluten or dairy). The Mediterranean part of the diet is that it is dominated by fresh vegetables and good oils, like extra virgin olive oil.

You must address any health issues. This is not about being thin. It is about being healthy. Healthy people are not overweight. Checking for and supporting adrenal issues, for example, may pay dividends in results. Check thyroid function; research shows that there are 13 million Americans with undiagnosed hypothyroidism. Digestive support, like enzymes. a probiotic, or even HCl is often helpful (research shows that taking a probiotic can reduce waist circumference) can also help. There are other health issues as well. Seek out a professional who understands natural health care to improve your results.



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Page 3

## DEPRESSION AND OBESITY

According to research appearing in the *Archives* of *General Psychiatry* (2006; 63(7): 824-30), there is a relationship between obesity and the risk for anxiety and mood disorders. The 9,125 subjects in the cross-sectional study were assessed using the World Health Organization Composite International Diagnostic Interview.

Subjects with a body mass index of 30 or higher were determined to be obese. Researchers found that obesity increased the risk of major depression, bipolar disorder, panic disorder or agoraphobia. Overall there was a 25% increased risk of these disorders in obese subjects. The obese subjects also had a lower risk of substance abuse.



# EAT BREAKFAST TO KEEP WEIGHT OFF

A study appearing in the *European Journal* of *Clinical Nutrition* (2009; 63, 405-412) found an association between skipping breakfast and becoming overweight or obese. Information was gathered about breakfast, physical inactivity and alcohol consumption in 25,176 teen-aged subjects. The researchers found that skipping breakfast had a stronger association with being overweight or obese—stronger than alcohol consumption or physical inactivity.

Other research appearing in *Family Practice News* (May 15, 2003:10) looked at 1,943 adults between the ages of 25 and 37 and found that those who ate breakfast seven days per week were less likely to be obese, or to have insulin resistance. The risk for insulin resistance was between 37% and 55% lower for regular breakfast eaters than for those who seldom or never ate breakfast.

#### 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 metabolic syndrome or syndrome X, which can eventually lead to type-2 diabetes if not controlled.

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. veast overgrowth, magnesium loss, acidic pH, calcium/ phosphorus imbalance, polycystic ovary disease, endocrine problems, a systemic inflammatory state, impaired fibrinolysis and procoagulation, 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. [The key to longevity:] Keep breathing— Sophie Tucker, newspaper reports, Jan 13, 1964



There are concerns beyond the cosmetic for getting insulin and your weight under control

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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 diseases in the US. There is 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. Currently high-fructose corn syrup

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 either sugar or high-fructose corn syrup and obesity. Research appearing in The Lancet (February 17, 2001;357:505-508) studied 548 children and found that with 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.