

IT'S SO **EASY** TO LOSE WEIGHT

by Reduce Fat-Fast

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Introduction

As with so many life-changing experiences, the events that have led to the development of this book and the REDUCE FAT-FAST PROGRAM were never something I intended or expected. Even still, I am grateful for how it has all transpired, for what I have learned and have been able to accomplish, and for what I can share with you as a result.

Many years ago, I produced several very successful exercise videos for the Latin American market. As more and more of the videos sold I found that more and more people were asking me, “Is there something else that can help me lose weight and look and feel better?” Even with a very effective exercise program, people still seemed to be having a problem losing weight and getting into shape. In talking with them, it seemed that the challenge they were having was partly psychological. They would begin with the best of intentions, use the video and follow the exercise program, but without positive reinforcement – in the form of visible, early results – their commitment to exercise (and to making lifestyle changes necessary to lose weight) was easily derailed.

I decided that I needed to learn more about nutrition and the science behind why we gain/lose weight, why it seemed so easy to put weight on and so hard to take it off, and to find out if there was a way to kick-start success – to lose fat fast. I went back to school and in the course of my studies I was able to work with some of the finest physicians, nutritionists, and researchers in the world. The more I learned from them, the more I wanted to find a way to use that knowledge to benefit others. This was the motivation that led to the development of the REDUCE FAT-FAST PROGRAM: a diet and exercise program coupled with an all-natural dietary supplement combining millennia-old wisdom with modern medical science to create a weight-reduction product that works.

Everyone wants to look and feel good, and it seems a tragic irony that at such a time in our history – with all the miracles of science and technology available to us today – people find it so difficult to achieve something as seemingly simple as losing unwanted pounds. All over the world people are so desperate to change their appearance they are willing

to pay hundreds and thousands of dollars on dangerous surgical procedures or on exotic, untested products that claim dubious results. This is no longer necessary.

The REDUCE FAT-FAST PROGRAM includes ***Reduce Fat-Fast***[®], a clinically proven natural dietary supplement that is available in over 60 countries worldwide. Millions of capsules of ***Reduce Fat-Fast***[®] have been consumed safely with wonderful results and no side effects for more than ten years. In combination with a healthy diet and moderate exercise, ***Reduce Fat-Fast***[®] has worked for men and women of different ethnic backgrounds, different races, with different body types and eating habits. It should work for you.

I do not believe in “magic bullets” or miracle cures. I believe that we each need to take responsibility for how we live in the world, and that includes how we treat ourselves and manage our health. This book is the result of my research and work for the past 15 years. It is a privilege to be able to share with you what I have learned about why we gain weight (and what we need to know about losing weight), the importance of having a balanced life in terms of diet and exercise, and how you can use the REDUCE FAT-FAST PROGRAM as the strategy to having and maintaining a healthy life.

1 *The Modern World: A Blessing and a Curse*

In our every day lives we have the opportunity to be physically active in four major areas: at work, in transportation (walking or cycling to work), in domestic duties, and in our leisure time. Yet our modern world has made it extremely easy for us to live our lives expending very little energy in any of those areas. Unless your job requires constant physical activity, the chances are very good that you spend far more time in any given 24-hour day sitting and lying down than you do standing or walking. And, if we are being honest, even when we do spend time on our feet, most of us manage to eliminate as much excess standing and walking as we can. When was the last time you parked your car as FAR AWAY from the entrance to the mall as you could?

You're not alone. The global estimate of how physically inactive we've become suggests that on average the level of "insufficient activity" (less than 2.5 hours per week of moderate activity) ranges from 31% to 51%, with a global average of 41%¹. Yet we were not "built" for this type of existence. The marvelous biological system, which is our body, was constructed to operate in a very different world than the one in which most of us find ourselves here in the 21st Century. Don't misunderstand me. I love the modern conveniences that make our lives simpler and easier to live. I have traveled all over the world, lived in several different countries and cultures, and have been privileged to see technology totally change the way we live. But our modern world is both a blessing and a curse, so much so that the percentage of individuals who are considered overweight and obese is increasing dramatically all around the globe.

The term "overweight" refers to an excess of body weight (from muscle, bone, fat, and/or body water) compared to set standards. "Obesity" indicates having an abnormally high proportion of body fat². The degree to which someone is considered overweight and/or obese is most typically

¹ "The World Health Report," Geneva: World Health Organization; 2002.

² "Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults," National Institutes of Health, National Heart, Lung, and Blood Institute, June 1998.

measured using Body Mass Index (BMI), a height/weight formula with a strong correlation to body fat content³.

The World Health Organization (WHO) defines an individual as overweight when they have a BMI of at least 25. Obesity is considered to be a BMI of at least 30. The following table shows the basic breakdown of BMI ranges:

Range	BMI
Low	Less than 18.5
18.5 to 24.9	Recommended
25 to 29.9	High
30 or more	Very High

According to figures compiled for the "The World Health Report,"⁴ obesity rates have risen three-fold or more since 1980 in many parts of the developed world, particularly North America, the United Kingdom, Eastern Europe, Australia and surprisingly China⁵. As documented in the WHO report, the affected population has increased to epidemic proportions, with more than one billion adults worldwide overweight and at least 300 million clinically obese⁶.

In the United States and many developed countries, most of the concern about being overweight or obese seems to be associated with appearance. Subjectively, how we look is important to us (and the degree to which obese people feel stigmatized in our society because of their appearance should not be minimized). But the real issue – beyond how we look – is: are we healthy?

³ Your BMI is calculated by dividing your weight in kilograms by your height in meters squared. As a mathematical formula, it looks like this: weight (kg)/height squared (m²). To calculate your BMI using pounds and inches, multiply your weight in pounds by 704.5, then divide the result by your height in inches, and divide that result by your height in inches a second time. Chapter Five includes a complete BMI chart for easier calculation.

⁴ "The World Health Report," Geneva: World Health Organization; 2002.

⁵ Interestingly, two places I have experienced significant sales of **Reduce Fat-Fast**® are China and India. This is somewhat surprising as neither country is typically associated with high percentages of overweight people.

⁶ "Obesity: preventing and managing the global epidemic." Geneva: World Health Organization; 2000.

Medical research confirms that there are very real health concerns associated with being overweight⁷: adverse effects on blood pressure, cholesterol, triglycerides, and insulin resistance. Risks of coronary heart disease, ischaemic stroke⁸, and Type 2 diabetes mellitus all increase steadily with increased BMI. (Disturbingly, Type 2 diabetes, a condition confined to older adults for most of the 20th century, now even affects obese children before puberty.) High BMI also increases the risks of the following types of cancers: breast, colon, prostate, endometrial, kidney, and gallbladder. Individuals with chronic weight problems and obesity also have increased incidences of osteoarthritis, a major cause of disability in adults.

Chances are you already know some or all of this information. You've seen the news, and read stories like these in the papers and magazines:

Overweight children are being hospitalized at dramatically rising rates for diabetes, sleep apnea and other diseases that obesity causes or worsens. Obesity accounts for a tiny proportion of all child hospitalizations, scientists say. But the Centers for Disease Control and Prevention reported Wednesday that "a disturbing increase" in the numbers has made hospital costs related to childhood obesity more than triple in the past 20 years, reaching \$127 million. **"Illnesses related to obesity on the rise,"** *The Miami Herald*, Thursday, May 2, 2002.

Americans are waist-deep in an avalanche of obesity, according to a new study in the Journal of the American Medical Association. Numbers of the obese exploded from 12 percent of the total population in 1991 to 17.9 percent in 1998, according to the study by a team of researchers at the Centers for Disease Control and Prevention in Atlanta. **"Wave of Obesity Sweeping Population, Researchers Say,"** *The Miami Herald*, October 27, 1999.

Perhaps you've even heard from your own doctor about the dangers of being over weight, yet knowing that being overweight is bad for you

⁷ Allison DB, Fontaine KR, et al. "Annual deaths attributable to obesity in the United States." *JAMA*. 1999; 282(16): 1530-1538

⁸ Obstruction of a blood vessel in the brain.

may not be enough to move you to change. Perhaps you've said to yourself, "Being overweight isn't going to cause me any serious problems RIGHT NOW. Maybe in a few decades I might develop high blood pressure. But now it's mostly an inconvenience. I can't fit into some of the clothes I used to wear, but it's more convenient to buy new clothes than to have to watch what I eat or start going to the gym. If you are asthmatic and don't take your medication for a day or two, you will have trouble breathing within a couple of days. The next thing you know, you're back to taking your medication as you should. That's very strong motivation. But if you don't take those dangerous pounds off now it might be twenty years before your health is irreversibly compromised. That feels like a long time, a problem you can start solving tomorrow. Yet tomorrow never really comes, does it?



Factors that Contribute to Weight Problems

As with everything in life, there are many factors that influence how and whether we gain or lose weight. Some of these factors – physical inactivity, diet and dieting – we can control. Others – genetics, age and gender, season, etc. – we can't control. But we can compensate for them. The key is to know what they are and then to understand what effect they have on you, so you can develop a strategy for how to handle them.

Lack of Physical Activity

Beyond exercise or sports, physical activity is any bodily movement that results in an expenditure of energy⁹. Unfortunately, the majority of us have become so dependent on the technology of our modern world that we don't give a second thought to using the car to run a quick errand that could just as easily have been accomplished by walking or riding a bicycle. We have dishwashers that scrub our pots and pans for us, elevators to keep us from having to climb stairs, and remote controls so we never have to get up to change a television channel. As a result, 41% of the global population engages in less than 2.5 hours of moderate activity (household

⁹ "Factors Contributing to Obesity," Atlanta, GA: The Centers for Disease Control, 2002.

chores, gardening, walking) per week¹⁰. On top of this, the amount of leisure time we spend in physical activity has plummeted. According to the Behavioral Risk Factor Surveillance System, in 2000 more than 26% of adults reported no leisure-time physical activity at all.

Diet and Dieting

Changes in our world have brought changes in our food options and eating habits. Grocery stores display a huge selection of convenience products. Pre-packaged foods, fast food restaurants, and soft drinks are available everywhere. Unfortunately, while such foods are fast and convenient they also tend to be high in fat, sugar, and calories. Even foods that are marketed as healthy, low fat, or fat-free, often contain more calories than the "fat containing food" they are designed to replace. Portion size has also increased and it is quite a simple matter to eat more during a meal or snack because of larger portion sizes.

With so much available to us, it is easy to understand how we gain weight. Then, inevitably unless you are one of the blessed few with a metabolism that will burn through anything, we turn to dieting to help us shed the pounds that have accumulated as a result of eating and drinking without thinking. We successfully shed weight, return to the habits that got us into trouble in the first place, then diet again. The problem here is that "yo-yo" dieting can actually lower your metabolism, ultimately leading to additional weight gain and/or difficulty losing weight. Additionally, any time we use starvation tactics to shed weight quickly, we set ourselves up to fail in the future because of the way our amazing biological system, which is our body, has evolved.

Genetics

While the so-called "fat" gene has yet to be isolated in humans, genetic factors (inherited body types, shapes and build) are beginning to be associated with the degree to which diet and physical activity may contribute to weight loss or gain. Genetic predisposition is not necessarily health destiny, but recent studies indicate that inherited genetic variation is an important risk factor, particularly for obesity¹¹.

¹⁰ "The World Health Report," Geneva: World Health Organization; 2002.

¹¹ "Obesity and Genetics," Atlanta, GA: Centers for Disease Control and Prevention, 2002.

Another familial attribute that may be a strong predictor for being overweight is the environment in which you grew up. Certainly children who grow up in families in which overeating or unhealthy diets are common place have a great deal of “unlearning” to do when it comes to establishing healthy eating habits as adults. Where weight is concerned, the issue about families is that both “nature” and “nurture” are factors that may influence the ease with which you gain or lose weight, and even your predisposition to being weight conscious at all.

Age and Gender

After we reach the age of thirty, we begin to experience an age-related slow-down in our metabolism. Also, studies document that the age-related decrease in human growth hormone (HGH) has been linked to a reduction in lean body mass, skeletal muscle mass and strength, a reduction in exercise performance, and a corollary increase in abdominal, visceral and total body fat¹².

In addition to the way in which age has an impact on weight gain/loss, gender also plays a role. Men usually have 10 to 20 percent less body fat than woman. Estrogen increases the tendency of a woman to store fat in adipose tissue and, consequently, women's bodies are built to carry more fat than men's. This tendency does not impair the ability of women to develop lean body muscle mass. It just has an impact on how easily a woman gains or loses weight in comparison to a man. Men are more predisposed to lose weight easily or to maintain their weight while eating more food than women, whose bodies work to store fat (energy) for pregnancy and breastfeeding. Even the locations where fat is stored in men's and women's bodies are different as a function of our different biological systems. Women's bodies – built for childbirth – tend to store fat in the hips and thighs (although excess weight in these locations does not contribute to a woman's increased risk for heart disease), while men's bodies store it mostly around the middle. It is excess body fat in the waist area that is the factor that places both women and men at higher risk for high blood pressure, high blood cholesterol, diabetes, heart disease and stroke.

¹² Cummings, DE, Merriam, GR, “Age-Related Changes in Growth Hormone Secretion: Should the Somatopause Be Treated?” *Semin Reprod Med* 17(4):311-326, 1999

Season

In the same way that other mammals have an internal body clock that regulates such behaviors as eating and sleeping, we human mammals have a body clock that is affected by seasonal changes. As the days get shorter, the change in day length prompts alterations in our body chemistry and we tend to eat more (at one time necessary to survive harsh winter conditions when food was scarce), sleep longer, and reduce activity levels; a perfect recipe for a 5- to 10-pound weight gain in the winter months. And it is not just the body clock working against us here. At about the same time our biological clocks are slowing things down, our social calendars are speeding up. Particularly in North America, the two-month moveable feast that begins with Halloween and ends on New Year's Day is a disaster!

The changes in brain chemistry that result from seasonal changes can also influence our moods and, consequently, weight gain. Studies on Seasonal Affective Disorder (SAD) have shown that weight gain occurs in individuals diagnosed with SAD. This weight gain is associated with a higher-than-normal intake of carbohydrates¹³.

Medical Disorders

For some individuals, weight problems may result from a diagnosable medical condition, the most common of which is thyroid disease. A healthy thyroid releases hormones that control metabolism and energy levels. If the thyroid is under active (hypothyroidism), inadequate amounts of hormone are produced leading to a slowed metabolic rate, lack of energy. Weight gain often occurs despite a moderate diet or regular exercise program.

Less common than hypothyroidism is Polycystic Ovarian Syndrome (PCO). PCO is a female infertility problem that results in weight gain. About 4% of the general female population suffers from PCO, which results from too much production and secretion of the hormone androgen.

¹² Cummings, DE, Merriam, GR, "Age-Related Changes in Growth Hormone Secretion: Should the Somatopause Be Treated?" *Semin Reprod Med* 17(4):311-326, 1999

¹³ Krauchi, K, Reich, S, Wirz-Justice, A "Eating Style in Seasonal Affective Disorder: Who Will Gain Weight in the Winter" *Comprehensive Psychiatry* 1997; 38(2): 80-87

Recent studies have also documented that some medications have been associated with weight gain. Of these, the most widely prescribed were medications for: high blood pressure, diabetes, gastrointestinal disorders, convulsions/seizures, clinical depression, and birth control/contraception¹⁴. However, not all classes of medications prescribed in these areas are documented to result in weight gain. Regardless of your medical condition, it is critically important for you to consult your physician regarding any concerns you may have as to whether illnesses, medications, or psychological factors are contributing to weight gain or making weight loss hard.

Societal Pressures

Countless articles, thousands of web pages, and hundreds of books have been devoted to the topic of how societal pressures affect our weight. Body image issues resulting from the nonstop media barrage in our modern world contribute to such medical conditions as anorexia nervosa and bulimia. Those lucky enough to inhabit a city in one of the world's developed countries are also lucky enough to have a constant supply of easily accessible foods of all types. This incredible supply most naturally leads to a similar degree of demand, making overeating a simple if not well-accepted and expected pattern of behavior. Are you aware that in the United States, farmers produce 3,800 calories' worth of food a day for every man, woman, and child in that country? That amount is practically double what an average adult requires. Yet the obesity rates in the United States suggest that no one seems to think twice about sitting down to a meal that, in its super-sized version, can contain 1,500 to 2,000 calories.

Now think about the tremendous stress under which many of us operate today. Humans are built to handle short-term stress with what scientists have long referred to as the "fight or flight" response: a physical threat evokes in us a physical response to either confront the threat (fight) or escape it (flight). Chemically what happens is that, when faced with a threatening – stressful – situation, the body releases the hormone cortisol. This, in turn, releases glucose and fatty acids into the bloodstream, which provide energy to the muscles for fighting or "flying". After the stress is

¹⁴ Cheskin LJ, Bartlett SJ, Zayas R, et al. Prescription medications: a modifiable contributor to obesity. *Southern Medical Journal*, Sept. 1999: Vol. 92, No. 9, pp898-904.

resolved (when the perceived danger is over), the same cortisol increases your appetite for carbohydrates and fats to replenish the calories that you just burned. It is a very effective system. Unfortunately most of us no longer confront physical dangers on a daily basis. Rather we now live in a constant state of stress induced by deadlines at work, traffic, falling stock prices, paying our bills, relationships, the list goes on. Consequently, our bodies tend to stay in a perpetual state of “stress response,” meaning that our cortisol levels remain high, our appetites remain stimulated, and we gain weight¹⁵.

Does it seem like the whole of our modern world is out to get you? Yes it can be a curse, this world in which we find ourselves at the beginning of the 21st Century. But it also holds many blessings. You just need to know where to look for them.

¹⁵ LaValle, James B., “Stress: The Hidden Factor For Weight Gain,” *Nutrition Science News*, April 2001.

2 How Our Bodies Work

Whether you believe we evolved to our exalted position in the food chain or were created to it, the human animal is a highly effective biological system designed to take in nourishment, convert it to usable energy, expend the energy necessary to sustain life, and store excess energy for future use; and to do all of this as effortlessly and efficiently as possible.

As a species, our bodies are better adapted for wandering the savannas of what is now Modern Africa or the Ice Age steppes of what is now Russia. “Wandering” is the key term here. Our ancestors needed to eat a lot because they needed a lot of energy (calories) to exist. Fortunately for our ancestors (and for us) our bodies were built to squeeze a lot of energy out of our food and then to store it for future use, thereby not wasting what we didn’t need to use at the moment. Much like a car that uses the electricity from a charged battery for starting and then replenishes that charge while the engine is running, our bodies similarly use the energy that we get from our food, and move the rest to our batteries (fat cells) for use when fuel is not readily available. In the case of our ancestors, in circumstances when no food could be found this proved to be a very good system.

Our ancestors also developed a taste for high-energy foods because they needed them. Sugars tasted wonderful¹⁶ and fat tasted even better. Our physiological systems – back in the days of our forebears – could be stimulated to consume food by sight and smell as well as hunger because we did not know when the next big meal (source of energy) might come. So when food was abundant we ate it even if we weren’t hungry, because in the hunter/gatherer era we did not know how to store food until the next day and we did not know when it might be in abundance again.

¹⁶ Even the plants themselves evolved to take advantage of this and over time their fruit evolved to be tasty, laden with sugars and their seeds bitter. Animals, including us, would then be attracted to the fruit and eat it, seeds included. But we did not usually crunch the seeds, because they didn’t taste good (they were bitter) and so they would pass through us undigested to be deposited elsewhere and begin to grow.

Food as Fuel

Ultimately all life energy in our world comes from the sun. All living things are consumers of energy – growth, maintenance and repair all require energy to occur, and it all begins with light. The amazing process of photosynthesis, literally “making something from light,” is performed every day by the plants and algae of this planet. In doing so carbon and nitrogen and oxygen are stitched together to make more complex molecules, some of which then are able to be consumed by the rest of earth’s creatures that can’t just point themselves to the sunlight and get fed.

Being omnivorous mammals – as we humans are – we have an energy processing system (so we can expend energy in the business of life) that has evolved over the ages to do three very important things. First, we are able to get energy out of all sorts of things that we call food: plants, themselves, and their fruits; and animals (birds, mammals, and some fish). We are able to ingest and then digest that food and extract energy from it, which our bodies turn into readily consumable energy (used immediately) and stored energy (for later use in case it is quite a long time to the next major feeding). The second important function of our energy processing system is to extract from food things that are not energy but nutrients. These are elements (minerals like iron that are part of the molecule that is hemoglobin that transports oxygen around in our bodies) and compounds (proteins, nucleic acids that are essential components of so much of our bodies, vitamins). These elements and compounds are the raw materials that are used to create and maintain our bodies. They are integral to how we function and many of them cannot be manufactured within our own bodies. We must obtain them from the foods and liquids we eat and drink. (The discovery that the disease “scurvy,” was a deficiency of vitamin C in the diet and could be cured by eating citrus is one example of how our bodies must be given the right kinds of nutrients to be healthy). The third important aspect of our energy processing system is that it is also built to excrete from our bodies left over food that was not digestible (after we have extracted the usable energy) and wastes that are the by-products of life processes.

Food, water, and air (or more correctly oxygen) are the essential ingredients for life and our bodies have been designed to maintain the correct levels of all three for a healthy, balanced life. Maintaining the correct

level of oxygen in our bodies is, well, as easy as breathing out and breathing in. Maintaining the right balance of food and water – and therefore the right balance of energy intake and energy expenditure – seems to be a lot more complicated and is what this book is designed to help you learn how to do.



Energy Metabolism and Production

The energy processing system in our bodies has three separate but very interrelated processes dedicated to maintaining our bodies with the proper balance of energy:

1. A process to control how much and when we need to eat (hunger/satiety).
2. A process to digest food, turn it into energy and make it available to our life processes, and also to store the excess for later use.
3. A process to use the energy and nutrients obtained from our food – whether at the moment the food is ingested or later after it has been stored.

Understanding how each of these processes works and understanding how our modern life subverts these processes (that worked so well for our ancestors) is truly the beginning of wisdom, and the first step towards achieving and maintaining a healthy weight.

How Much and When?

After holding your breath for about thirty seconds or so, the desire to breathe becomes irresistible, illustrating how important it is for our bodies to have a near constant supply of oxygen. The idea of not being able to breathe is terrifying and painful, and we are equipped with a trigger mechanism that says, “I am running low on this (oxygen), get me some and, by the way, this is more important than anything, so forget everything else and do this NOW!” Less urgent than breathing but along the same lines is our urge for water. We all know, to a small extent, what being thirsty is about. Again, like the desire to breathe, the more our bodies need water the more insistent the urge to find water becomes. It, too, will become a screaming priority the more we become dehydrated.

Compare this to hunger: the feeling that we have when we “need” food. Hunger usually begins as a slight discomfort then it, too, follows the same trajectory as thirst and the need for air, growing more urgent over time. The purpose of hunger is to signal that we are running low on fuel and it is time to get some.

Three things cause our hunger mechanism to kick into gear and, strangely enough, the euphemisms we use in English to describe how we feel at a given moment very accurately hint at what is actually going on in our bodies. When we say, “I’m feeling empty,” or “I’m stuffed,” we are describing a sensation that includes both volume and weight. Biologically, the degree to which our stomach is distended (stretched out, expanded) by the presence or absence of food determines whether we will feel hungry or not. We also sometimes say, “I just need a little something to tide me over.” This phrase usually accompanies a feeling of “weakness.” This hunger trigger is the result of a lack of energy molecules flowing in our bodies. The third trigger is a curious one. We can be talked into feeling hungry even when the other two hunger triggers are silent. The phrase, “mouth-watering good,” describes the biological process whereby the very aromas or sight of certain foods (and of course their taste) can induce psychological feelings of hunger when the other two triggers are quiet on the topic. In healthy individuals, lack of stomach distension (an empty stomach), low levels of energy in the blood, and the stimulation of seeing food/smelling food induce hunger, which is the desire to eat. Similarly, stomach distension (a full stomach), changes in the levels of certain energy chemicals in the blood, and certain aromas (rotten fish for example) turn off the desire to eat.

Why then, if we have such a clever appetite control mechanism that basically operates as an on-off switch, do we find ourselves taking in more energy than we need and end up having to store it? The answer is simple: the system works perfectly with the diet and lifestyle for which it was designed, not the diet and lifestyle most of us have today¹⁷. Most of us have a fairly good idea where our next meal is coming from so the

¹⁷ It is interesting to note that teaching children to “clean up their plate,” may also be partially responsible for altering how our appetite control mechanisms function when we are adults. If, as children, we are conditioned to eat beyond when we feel “full,” it will take a lot of “unlearning,” to fix this as adults.

biological trigger that operates based on sight and smell is clearly implicated as a contributor to weight gain in today's world.

In the mid-1990s, Dr. Susanne Holt, published the results of her research on how different foods have the ability to make us feel full and how long (after the consumption of those foods) our appetites would be suppressed. The results of this research became known as the satiety index¹⁸. In her experiments, subjects were given a standard portion of 38 different foods, each portion of which had the same energy value (same number of calories). Upon observation, although each person was consuming the same amount of energy, the effect of the food on each person's feelings of hunger was drastically different. Certain foods did not make the subjects feel full and did not suppress hunger, while other foods were very satisfying and made the subjects feel less hungry for longer periods of time. The best foods performed six times better than the worst foods. Not surprisingly, the worst foods – those consumed that did not make subjects feel less hungry (sated) – were cake, cookies, and croissants. The best food – boiled potatoes – scored more highly on the satiety index than did the same amount of potato served as French fries. In the protein category, fish was found to be more satisfying than equivalent amounts (in terms of calories) of beef or chicken; oatmeal scored better than muesli. Dr. Holt's work has been popularized into a number of diets, however, more importantly for us her work served as a foundation for a whole line of inquiry into the energy density of foods.

Energy density refers to the amount of energy contained in a given weight of food. Research following on Dr. Holt's work has shown that energy-dense foods (foods and liquids containing lots of fat and sugars) are not effective at suppressing hunger. When we eat energy-dense foods, our appetite control mechanisms (particularly stomach distension and low energy levels) do not start working immediately and we end up consuming much more energy than we need. While energy-dense foods taste great, they are not satisfying (in terms of the satiety index) and so we keep eating because we are still have the sense of feeling hungry. Additionally, snacking on energy-dense food will not reduce the amount of

¹⁸ The original research was conducted by Susanne Holt, PhD and reported in the December 1996 issue of the *European Journal of Clinical Nutrition*.

food that we eat at our next meal¹⁹, while snacking on foods that have low energy density will.

Further research on energy density and water consumption²⁰ produced some fascinating results that have a very practical application in terms of smart eating. Subjects were given a portion of food before lunch. Although identical in energy value, each portion was given in a different form: a chicken casserole; a chicken casserole with a glass of water; and chicken soup (essentially, chicken casserole with water in it not along side of it). What the researchers found was that soup – the low energy density food – suppressed the appetite better than the higher energy density food. Similar studies have shown that having tomato soup as the first course at lunch decreases appetite during the rest of the meal significantly more than did the same amount (in terms of calories) of cheese and crackers.

The practical application of all this science is clear: our bodies have a wonderful, built-in mechanism for telling us when and how much we need to eat. Unfortunately, in today's world we tend to consume more energy-dense foods (rarely consumed in the ancient world) and, in doing so, trick our bodies into eating more than we need.

Digest and Process

Digestion²¹ begins the minute we place a morsel of food in our mouths. The very act of chewing prepares the food, turning it into small pieces and increasing the food's surface area so that more digestive enzymes can get to it faster. The mouth also supplies, through saliva, an important enzyme that immediately begins to break down starch (carbohydrates) into sugars that are be used by the body as energy. The food is then moved to the stomach by the action of swallowing and muscle contractions in the esophagus. Here the food is mixed with more enzymes, which primarily act to break down proteins into smaller molecules, a special protein called "intrinsic factor,"

¹⁹ Barbara J. Rolls, The Role of Energy Density in the Overconsumption of Fat, *Journal of Nutrition*. 2000; 130:268S-271S.

²⁰ Barbara J Rolls, Elizabeth A Bell and Michelle L Thorwart Water incorporated into a food but not served with a food decreases energy intake in lean women *American Journal of Clinical Nutrition*, Vol. 70, No. 4, 448-455, October 1999

²¹ Digestion is the process of breaking down food into simpler forms that can be taken in and used by the body.

which makes the absorption of vitamin B12 possible, and hydrochloric acid²².

After a period of time this mix of food and enzymes, called chyme, moves into the small intestine where the majority of digestion and absorption occurs. It is also here that bile is introduced. Bile makes it possible for the fats contained in the foods we eat to be emulsified (the process of mixing together two substances that don't mix, for example oil and water) so they can be broken down and absorbed by the body. The small intestine also takes some secretions from the pancreas, including more digestive enzymes and a naturally occurring antacid, that reduces the level of acidity.

The chemical control and regulation of this system is extremely complex and just because energy has found its way into the small intestine doesn't mean that it will end up in our blood streams or be stored in fat for use later on. There are dozens of different hormones that act together and against each other to determine exactly how much of the energy and nutrients we have consumed should be absorbed into the body. How well these hormones and chemicals work affects the absorption of energy in our bodies. This is of critical importance, particularly in light of the average diet of a person living in an industrialized country. For example, the amount of a small protein – Ghrelin – appears to be associated with obesity, the ability to maintain weight loss, and with the eating disorder anorexia nervosa²³. Ghrelin also naturally influences production of Human Growth Hormone. Some research suggests that the use of growth hormones in animal feed is contributing to the worldwide levels of obesity. It is entirely possible that this food additive is having an adverse effect on the hormones and chemicals controlling energy absorption in our bodies.

Use the Energy

Every single moment of our lives we are using energy, to grow when we are young, to repair our bodily systems as cells die, and to maintain a very precise internal temperature at which all our systems work best. The energy that the body needs is delivered as a result of the processes of the digestive

²² Stomach juices are highly acidic. When the opening between the stomach and the esophagus is leaky this acidic mix can wash back into the esophagus causing acid reflux disease.

²³ Otto B, Cuntz U, Fruehauf E, Wawarta R, Folwaczny C, Riepl RL, Heiman ML, Lehnert P, Fichter M, Tschop M. Weight gain decreases elevated plasma ghrelin concentrations of patients with anorexia nervosa. *Eur J Endocrinol* 2001 Nov;145 (5):669-73.

system (gastrointestinal tract). The main form of this energy is the simple sugar glucose, which is found in carbohydrates and sugars. (When we eat what we call “sugar,” we are actually eating sucrose which is turned into glucose in the body.) When our body runs low on glucose (going without a meal for a while or after vigorous exercise), we become hungry and we look for more. If we don’t supply the glucose, our bodies automatically turn to the energy “batteries,” our fat cells, to get the energy we need to keep on going.

Fat cells, at the prompting of some specific hormones (adrenaline and noradrenalin), take the fat they store and turn it into fatty acids. The fatty acids are then turned into usable energy – ketones – through a process called fatty acid oxidation. This two-step process – stored fat turns into fatty acids and then into ketones – occurs in the liver. When glucose is not available, ketones (normally they only supply peripheral body systems with energy) become the alternative fuel upon which the body runs. We burn our stored energy (fat) and we lose weight.

Individuals who are losing weight will have higher levels of ketones in their bodies as a result. This condition is called ketosis (in its extreme form, ketosis can signal a major illness) and interestingly, research has shown that “energy derived from fatty acid oxidation seems to contribute to control of the duration of post-meal satiety and meal onset”²⁴. In other words, having these ketones circulating in your system actually helps you to go longer between meals and reduces your desire to snack. So when your body goes into the mode of “burning fat” or more correctly releasing fatty acids from fat cells you are doing two excellent things for weight loss: you are shrinking the fat cells by emptying them of their chemical store of energy, and you are helping your body to feel sated. You will not feel so hungry and can, more easily, resist the temptation to snack.

Our bodies are amazing systems for using and storing energy. They are designed to tell us when and how much fuel we need, and then to utilize and store that fuel efficiently and effectively. Unfortunately, the typical diet of humans in the industrialized world is not well suited to the design and proper functioning of this incredibly complex and wonderful energy processing system.

²⁴ Scharrer E. Control of food intake by fatty acid oxidation and ketogenesis. *Nutrition* 1999 Sep; 15(9): 704-14.

3 We're Becoming What We Eat

Humans are mammalian omnivores, meaning we are warm-blooded and rely on meat and vegetables for nutrition. According to researchers, 99.99% of our genes were formed before the development of agriculture²⁵. Or, as one nutritionist describes it, "100,000 generations of people were hunter-gatherers, 500 generations have depended on agriculture, 10 generations have lived since the start of the industrial revolution, and only two generations have grown up with highly processed fast foods"²⁶. Our diets have evolved over time yet our genetics have not.



Changes in Diet

As hunter-gatherers our diet was characterized by unprocessed or barely processed small animals, seeds, roots and tubers, seafood and wild fruits. We ate anything and everything, although meats were not available regularly and some foods were too time-consuming to prepare to be eaten in great quantity. Over a period of several thousand years and as a result of countless small decisions, we learned how to grow crops, domesticate plants, and raise animals. The population flourished as the food supply became more stable and our human diet began to change along with the culture; from a diet rich in a wide variety of fruits and vegetables, supplemented by meat, to a diet consisting of larger amounts of grains, dairy-based products and domesticated meats.

The agrarian revolution was followed by the Industrial Revolution. As early as 1900, whole grains were routinely refined and refined sugar started to become widely available. As noted by nutritionist Jean Bogert in 1939, "The machine age has had the effect of forcing upon the peoples of the industrial nations (especially the United States) the most gigantic human feeding experiment ever attempted"²⁷.

²⁵ Eaton, SB, Easton SB III, Konner, MJ, et al "An evolutionary perspective enhances understanding of human nutritional requirements," *Journal of Nutrition*, June, 1996; 126: 1732-40.

²⁶ Rice, WJ, "Back to Our Ancestor's Diet – A Healthy Move," 14 November 2002.

²⁷ Bogert, JL "Nutrition and Physical Fitness," Philadelphia: Saunders, 1939: 437.

Today the average diet of an adult living in an industrialized nation bears little to no resemblance to the diet of our ancestors; the diet for which we have been genetically programmed. Our early ancestors obtained about half of their calories from carbohydrates. The source of which was most usually vegetables or fruit. In a modern diet, the majority of carbohydrates are obtained from grains and sugars²⁸. Our hunter-gatherer forebears consumed as many as 100 different species of fruits and vegetables in a year's time. Compare this to our contemporary society in which, in the United States for one example, less than 9% of the population eats the recommended five servings of fruits and vegetables a day²⁹.

Thirty percent of the diet of our ancestors came from protein, much of which would be considered "game meat" today (i.e., deer, bison). They also consumed large amounts of cholesterol yet their blood cholesterol levels were much lower than the average adult today. While there may be numerous explanations for this, two stand out as important considerations for today's society: because of their diet, our ancestors consumed a higher percentage of Omega-3 fatty acids (the type found in salmon, for example, and other cold water fish) and they were more physically active³⁰.

Research also suggests that "pre-agrarian humans" consumed more vitamins and minerals than do post-Industrial Revolution urban-dwelling humans; as much as five times higher the amount of vitamins and minerals than we consume today³¹. This may have a high correlation with the fact that the food they consumed was non-processed and the majority of it was uncooked. It was, potentially, more nutrient dense than the foods we consume in the modern age (which, as we have discussed previously, tend to have high energy density).

As we have already seen, nutrient density refers to the amount of nutrients in a food as compared to the calories. Foods low in calories and high in nutrients are nutrient dense. Foods high in calories (i.e., energy

²⁸ Eaton, SB, Shostak, M, and Konner, M "The Paleolithic Prescription: A program of diet & exercise and a design for living," New York: Harper & Row, 1988: 39.

²⁹ Patterson, BH, Block, G, Rosenberger, WF, et al "Fruit and vegetables in the American diet: data from the NHANES II survey," *American Journal of Public Health*, December 1990, 80: 1443-1449.

³⁰ Rice, WJ, "Back to Our Ancestor's Diet – A Healthy Move," 14 November 2002.

³¹ Rice, WJ, "Back to Our Ancestor's Diet – A Healthy Move," 14 November 2002.

density) and low in nutrients are nutrient poor. Vegetables, yogurt and eggs are examples of nutrient-dense foods, whereas fast foods, and foods that contain fats, oils, and sweets are typically nutrient poor foods. One recent study in the United States indicates that as much as 27% of daily calorie intake comprises foods that have high energy density (high in calories) and are nutrient poor. The study also suggests that the greater an individual's intake of such foods – energy dense and nutrient poor – the less likely it is that that individual will consume foods from all five food groups (dairy, fruits, grains, meats, vegetables).

Increased consumption of energy-dense, nutrient-poor (EDNP) foods increases the intake of energy, the percent energy from fat, and the amount of saturated fat that is consumed. At the same time, it decreases the likelihood of consuming the recommended amounts of protein, vitamins, folic acid, calcium and iron³².

It has become a very simple matter for us to consume energy-dense, nutrient poor foods on a daily basis. Everywhere we turn, processed and fast foods are readily available and – as our schedules have become more and more hectic – often the only solution for us when it comes to fitting in a meal when we're in a hurry. Unfortunately, the actual nutrition values of fast and processed foods are quite scary when you take a look at the numbers of calories we consume in comparison to the number of calories we NEED to consume to keep ourselves going on a daily basis.

The average calorie intake for adult men and women varies with age and, of course, physical activity. On average, the suggested range for adult males ages 23-50 is 2300-3100 calories a day, while the average for females in the same age range is 1600-2400. If you stop into Pizza Hut for lunch, for example, one 6-ounce slice of the "Meat Lover's" style pizza has 470 calories, 27 grams of fat (12 saturated), 30mg cholesterol, 630mg sodium, 35 grams carbohydrates, 3 grams fiber and 21 grams protein. Now, multiple all of that by two or three because it is absolutely true that most people never have just one slice of pizza. Perhaps you'd rather have chicken for lunch. Kentucky Fried Chicken's "Three Crispy Strips" have 340 calories, 16 grams of fat (4.5 saturated), 70mg cholesterol, 1,140mg

³² Kant, AK "Study Shows Nutrient-Poor Foods Supply 27% of Daily Energy Intake," *United States Department of Agriculture*, December 2002.

sodium, 20 grams of carbohydrates, 0 grams of fiber and 28 grams of protein. That's not so bad, until you include the standard side dishes: mashed potatoes and gravy (120 calories and 6g fat), coleslaw (232 calories and 13.5g fat), and biscuit (180 calories and 10g fat). Now your lunch totals well over 800 calories and 29 grams of fat. Some current research suggests that our daily intake of food should limit the amount of calories from fat to 30 percent. In a 2000-calorie diet, that amount of fat is approximately 53 grams³³. Obviously, stopping at Pizza Hut or Kentucky Fried Chicken is not a good option if you want to maximize the amount of nutrition you are getting while minimizing your calorie intake.



Changes in Food

Beyond just how our diet has changed from the one for which our genetics have been programmed, we must also look closely at how the foods we eat have changed and what kind of impact this has on our bodies and on how we metabolize our food.

Unless your diet is limited to fruits and vegetables that you grow yourself, your daily food intake includes processed foods. In the early 19th Century, Nicolas Appert discovered that heating food in an airtight container would preserve the food as long as the container or the seal did not break³⁴. With the changes in society and advances of the Industrial Revolution, refined and processed foods started to become widely available in the early 1900s. Today, in industrialized countries, processed foods make up the majority of a person's diet.

Processing – canning, drying, freezing, freeze-drying, fermentation (pickling), and irradiation – are all ways we have discovered to keep food from spoiling, which is important because when food spoils it can be harmful to us if consumed (food poisoning). Yet, as with everything, food processing has benefits and drawbacks. For example, in canning, food must be heated to a certain temperature to kill the harmful microorganisms.

³³ Gebhardt, SE, Thomas, RG "Nutritive Value of Foods," Washington, DC: United States Department of Agriculture, Agricultural Research Service, *Home and Garden Bulletin 72*: 2002.

³⁴ "Food Processing And Preservation". *Planet Papers*. Nov. 2002.

This process, in addition to making the food safe to consume, also causes the food to lose flavor and nutrients. Freezing, while preserving food, causes the water in food to expand by forming ice crystals. As with canning, this process causes food to lose both flavor and nutrients. Irradiation – using certain types of radiation energy to destroy microorganisms – is a similar process to heating (or pasteurizing) food and, as occurs in canning, a similar amount of flavor and nutrient loss occurs.

Food Additives

An aspect of food processing that has become quite controversial is the use of additives and hormones. Food additives are substances – other than basic foodstuffs – that are added to food to: 1) improve storage quality, 2) improve nutritional value (add vitamins and minerals removed in processing), 3) improve the look of food (color, texture), 4) improve shelf life, and 5) make preparation easier. Additives may enrich the foods we eat, yet additives – according to some researchers – have little to do with the nutritional value of food³⁵ and studies have shown that some additives can have potentially adverse effects ranging from causing allergic reactions to muscle cramps to being carcinogenic. For example, sodium bisulfite prevents food discoloration and inhibits bacterial growth in wine. However, some people are allergic to sulfites and, in the United States for instance, the Food and Drug Administration prohibits the use of sodium bisulfite on raw fruits and vegetables. Sodium and potassium nitrite, used in the preservation of meats, can combine with chemicals in the stomach to form nitrosamine, a highly carcinogenic substance. Some food coloring additives are derivatives of coal tar and can cause allergic reactions, hives, and aggravate asthmatic symptoms in individuals with asthma.

The issue of importance when thinking about these and other food additives is your answer to the question, “What do I want to put into my body?” Keep in mind that food additives also include vitamins and minerals, so not all additives are bad. (Also, there is an on-going debate as to whether there is a link between food additives and attention deficit and hyperactivity behaviors in children diagnosed with Attention Deficit/Hyperactivity Disorder³⁶.) What is important is that we become knowledgeable about the foods we eat, and how the processing of them may affect our bodies.

³⁵ Rice, WJ, “The Dangers of Food Additives,” 14 November 2002.

Hormones

As early as the 1930s, it was determined that hormones could be used to accelerate the growth rate of animals so that they could reach market earlier. There are six different kinds of steroid hormones that are currently approved by FDA for use in food production in the United States: estradiol and progesterone are natural female sex hormones; testosterone is the natural male sex hormone; zeranol, trenbolone acetate and melengesterol acetate are synthetic growth promoters (hormone-like chemicals that can make animals grow faster). Currently, U.S. federal regulations allow these hormones to be used on growing cattle and sheep, but not on poultry (chickens, turkeys, ducks) or hogs (pigs). However, in 1989, the European Union (then called the European Community) issued a ban on all meat from animals treated with steroid growth hormones. This ban is still in effect.

According to the United States Food and Drug Administration, if hormones are used appropriately, the residues in food should be very low or undetectable and not result in a significant hormonal effect. In some countries, abuses have occurred and hormonal treatment has left high residues in poultry, veal and eggs. However, sufficient studies have yet to be completed to establish with certainty **whether or not** hormone residues in meat or dairy products cause any human health effects³⁷.

Having said that, there is a body of research that suggests that the chemicals used in food processing **are** contributing to our inability to lose weight easily. Dr. Paula Baillie-Hamilton hypothesizes that the level of human exposure to synthetic organic and inorganic chemicals – including growth hormones – “may have damaged many of the body’s natural weight-control mechanisms”³⁸. For example, growth-promoting additives force animals to gain weight faster and improve the efficiency of food by changing the animal’s metabolism in such a way that less food goes further. The presence of these additives in meat products, in turn, potentially affects our metabolism in a variety of ways. They potentially damage our natural appetite “on-off switch,” which tells us when to stop

³⁶ Conners, CK, Goyette, CH, Southwick, DA, Lees, JM, Andrulonis, PA, “Food additives and hyperkinesis: a controlled double-blind experiment,” *Pediatrics* 1976 Aug; 58(2):154-66.

³⁷ Gandhi, R, Snedeker, SM “Consumer Concerns About Hormones in Food,” The Program on Breast Cancer and Environmental Risk Factors in New York State, Nov. 2002.

eating, and they make us store fat more effectively. This results in changes in appetite, food use efficiency, and in fat, carbohydrate, and protein metabolism. Furthermore, studies indicate that these chemicals also may affect the desire and ability to exercise³⁹.



Changes in Our Bodies

Between our genetics, changes in our diets, and the changes in the way we handle and process our foods, it is no wonder that many of us have problems keeping our bodies in shape. And when diet and exercise doesn't seem to give us the results we're looking for immediately – or as quickly as we would wish – many people turn to more drastic means to achieve their goal of losing 20 pounds or a few dress sizes. More and more it is becoming commonplace for those who seek to lose weight to turn to surgical treatments to obtain the results that otherwise elude them.

Those who seek moderate adjustments will typically elect to have one or more of the following procedures:

- **Tummy Tuck:** Technically known as an "abdominoplasty," this procedure removes excess fat and skin from the abdomen, and also helps to flatten the abdomen by tightening the surrounding muscles.
- **Liposuction:** One of the most popular cosmetic procedures, liposuction (also known as lipoplasty or suction lipectomy) sculpts the body by removing undesirable fat from areas around the thighs, knees, buttocks, waist, hips, abdomen, chin, cheeks, neck and upper arms.
- **Brachioplasty** is surgically recontouring the arms. The procedure is usually performed under general anesthesia.

³⁸ Baillie-Hamilton, PF, "Chemical Toxins: A Hypothesis to Explain the Global Obesity Epidemic," *The Journal of Alternative and Complementary Medicine*, 2002, Vol. 8(2):185-192.

³⁹ Trankina, ML, Beitz, DC, Trenkle, AH, "Effects of in vitro Ronnel on metabolic activity in subcutaneous adipose tissue and skeletal muscle in steers. *J. Anim Sci*, 1985; 60(3): 652-658.

- **Thigh Lifting:** With aging, skin gets loose and flabby as natural elasticity disappears. Thigh lifting is meant to stretch skin back into place, improve contours by making tighter, more attractive thigh and buttock skin, reduce fat layers and decrease irregularities in skin surface if necessary and excise surplus skin.

Although generally considered “routine,” cosmetic surgery carries with it the same types of risks as any surgical procedure and is not to be decided upon lightly. Some risks include: infection, embolism, puncture wounds in the organs near the surgical site, seroma (pooling of serum in areas where tissue is removed), nerve compression and changes in sensation, swelling, skin necrosis (death), burns (during ultrasound-assisted liposuction), fluid imbalance, toxicity from anesthesia, and death. Studies indicate that the risk of death from liposuction procedures is between 20 and 100 deaths per 100,000 liposuction procedures. One study suggests that the death rate is higher in liposuction surgeries in which other surgical procedures are also performed at the same time⁴⁰.

Those with more severe weight problems are turning more and more to bariatric surgery. Bariatric surgery is indicated for people who have a BMI greater than 40 or for those with a BMI greater than 35 if they have associated medical problems. There are several types of bariatric surgical procedures that can be performed, the most common of which are such “Restriction Operations” as gastric banding and vertical banded gastroplasty (food intake is restricted by creating a small pouch at the top of the stomach where the food enters from the esophagus). The other common form of bariatric surgery is gastric bypass surgery. There are several approaches to this form of surgery that result in effective weight loss by restricting intake and creating malabsorption. However, as with all major surgical procedures, bariatric surgery has associated risks:

- Ten to 20 percent of patients who have weight-loss operations require follow-up operations to correct complications.
- More than one-third of obese patients who have gastric surgery develop gallstones.

⁴⁰ “What are the Risks Associated with Liposuction?” *The U.S. Food and Drug Administration*, Nov. 2002.

- Nearly 30 percent of patients who have weight-loss surgery develop nutritional deficiencies such as anemia, osteoporosis, and metabolic bone disease. These deficiencies can be avoided if vitamin and mineral intakes are maintained.

What is not known is the percentage of surgical deaths associated with bariatric surgery. Some place the risk associated with gastric bypass at the same risk as heart surgery, 1 death in every 100 surgeries⁴¹.

While surgical procedures may be the most effective answer for those who are profoundly overweight, the majority of us can and will lose weight by getting ourselves back into balance. The REDUCE FAT-FAST PROGRAM can help do just that. This all-natural approach works with your body's own systems to achieve safe, effective weight loss. The Program has three important elements:

1. **Reduce Fat-Fast**®, an all-natural dietary supplement that works with your body to achieve optimal food metabolism and appetite control.
2. The **Reduce Fat-Fast** Eating Program, a specially developed 14 day eating program that is lower in carbohydrates than other standard eating programs.
3. The **Reduce Fat-Fast** 15-Minute Daily Exercise Plan, a low-impact regimen that will get your body moving and feeling better within a few days.

⁴¹ Widemark, Sue "Vista sales double after aggressive ad campaign for Weight loss surgery".

4 Reduce Fat-Fast®: A Natural Supplement

There is quite a bit of discussion these days regarding Eastern versus Western-style medicine. One is considered more “natural,” the other more “scientific.” One is based on evidence, the other on tradition. Personally, I don’t have a bias either way. I have a bias for what is proven to work; particularly when it comes to the types of medications and food supplements we use to maintain our health.

It may come as a surprise to you, but 40% of all drugs originate from plants or herbs⁴². In reality, the best pharmaceutical companies and chemical factories on Earth are the green plants that turn light energy into the substances that we use to fuel our bodies and heal them when they become ill. On this, East and West agree.

When I first began my journey into understanding how our bodies work, the role of nutrition, and the difficulty of maintaining a healthy metabolic balance because of the changes in our modern world, I turned to experts all around the world for the answers. From them I learned much of what I have shared with you already about how the intricate chemical systems within our bodies control our desire for food and process that food into energy for immediate or later use.

I also learned from these experts about the chemicals derived from a variety of sources that can affect how our bodies work – for good and for ill. In the process of my research, I became very aware of the hundreds of diet pills out in the market claiming questionable results. In some cases, there was no possible way for them to be effective based on the active ingredients in many of pills! In others, the ingredients could actually prove harmful if taken in combination with other substances. This was when I decided I needed to direct my energies toward developing a food supplement that was, in no way, harmful to the body and that would work



⁴² Yong Gao Wang, “Stress, Anxiety and/or depression? Traditional Chinese Medicine can help you,” November 2002.

with the body's own energy processing system to achieve the kind of metabolic balance our ancestors enjoyed⁴³.



Reduce Fat-Fast® Works With Our Bodies' Own Systems

As we discussed in Chapter Two, there are three separate but very interrelated processes that help to maintain our bodies:

1. A process to control how much and when we need to eat (satiety).
2. A process to digest food, and turn it into energy, then make it available to our life processes, and store the excess.
3. A process to use the energy and nutrients obtained from our food – whether at the moment the food is ingested or later after it has been stored.

The active ingredients in ***Reduce Fat-Fast®*** work together with each of these systems to: 1) reduce appetite, 2) reduce the “absorption” of energy as food is digested and processed, and 3) increase energy consumption by stimulating fat cells to release their energy into the body. ***Reduce Fat-Fast®*** has been proven to work⁴⁴ and it does so without using harmful chemicals or stimulants.



Green Tea and Java Tea

Green tea (*Camellia sinensis*) and java tea (*Orthosiphon stemineus*) are two plants used widely in Eastern-style medicine and do not contain the types of chemicals or compounds that rely on elevating the metabolic rate as the main method for encouraging weight loss⁴⁵. More than three millennia ago, the Chinese Emperor, Sin-Non, declared that a daily cup of

⁴³ This approach is consistent with the physicians' Hippocratic Oath: Do No Harm.

⁴⁴ ***Reduce Fat-Fast®*** is the only natural diet capsule that has been tested in four clinical studies.

⁴⁵ Ephedra-like compounds, compounds with high xanthic bases (in the form of caffeine), thermogenic compounds.

tea (and historical use suggests that it was green tea) could “dissolve many poisons in the body.” Indeed, studies of green tea, in particular, have shown that it has been linked with:⁴⁶

- Enhanced immune system functioning,
- Prevention of normal cells turning cancerous,
- Suppression the formation and growth of tumors,
- Regulation of cholesterol levels,
- Reduced risk of stroke,
- Reduced control blood pressure,
- Reduced risk of epileptic seizures in laboratory animals,
- Reduced control blood sugar levels, and
- Weight loss.

While many of the claims for the value of the tea still await further validation – I am always skeptical when one substance is said to cure everything – there is mounting evidence that green tea, in particular, has some very important medicinal properties including its capability to promote weight loss. Our own clinical studies support these finding as well.



How Reduce Fat-Fast® Works

One chemical in particular found naturally in brewed green tea⁴⁷, epigallocatechin-3-gallate (EGCg), affects energy utilization in the body. Animal studies⁴⁸ have shown that EGCg can reduce body weight by about 20% to 30% within 2 to 7 days apparently due to EGCg-induced reduction in food intake⁴⁹. This exciting data published only in the last two years confirms

⁴⁶ Taylor, N, “Green Tea: The Natural Secret for a Healthier Life,” New York: Kensington Books, 1998.

⁴⁷ Green and Black tea are made from the same plant, however black tea leaves have undergone a natural fermentation process which disables many of the active compounds in the leaf.

⁴⁸ S Liao, “The medicinal action of androgens and green tea epigallocatechin gallate,” *HKMJ* 2001; 7:369-74

⁴⁹ Kao YH, Hiipakka RA, Liao S. “Modulation of endocrine systems and food intake by green tea epigallocatechin gallate.” *Endocrinology* 2000; 141:980-7. Kao YH, Hiipakka RA, Liao S. “Modulation of obesity by a green tea catechin.” *Am J Clin Nutr* 2000; 72:1232-4.

what we have seen in our own clinical studies and what we have heard from people around the world who have been using **Reduce Fat-Fast**® safely for over ten years. While using the product, appetites are reduced and energy utilization in the body is increased.

In addition to this, researchers have hypothesized that a class of naturally occurring chemicals in the green tea leaf, polyphenols (of which EGCG is one), stimulate the process known as lipolysis^{50,51}. Lipolysis is the process whereby fatty acids are released from fat cells. This results in "fat burning." In addition, the metabolites of this process (ketones) also help to suppress appetite. These same polyphenols may also act in the small intestine to reduce absorption of glucides and lipids by partially inhibiting certain digestive enzymes.

In other words, the three processes that make up the body's energy processing system are all affected by the chemically active components of green tea: 1) reduced appetite, 2) reduced "absorption" of energy as food is digested and processed, and 3) increased energy consumption by stimulating fat cells to release their energy into the body (lipolysis).

The other ingredient in **Reduce Fat-Fast**®, java tea, works to aid in removal of waste from the body's system. Java tea infusions have been shown to have many powerful antioxidant chemicals⁵² and also have reported diuretic properties⁵³. (Some studies have also observed mild hypoglycemic properties⁵⁴, which would also indicate that it is helpful in prevention of weight gain.) In traditional Eastern medicine, java tea was used as a mild natural laxative. In **Reduce Fat-Fast**®, the java tea helps to rid your body of excess water.

⁵⁰ Florkin, M, Stotz, EH, "Metabolism of cyclic compounds," *Comprehensive Biochemistry*, Vol. 20, Elsevier Publishing Company, 1968.

⁵¹ Stagg, GV, Millin, DJ, "The nutritional and therapeutic value of Tea: A review," *J Sci Fd Agric*, 1975; 26: 1448.

⁵² Tezuka Y, Stampoulis P, Banskota AH, Awale S, Tran KQ, Saiki I, Kadota S. "Constituents of the Vietnamese medicinal plant *Orthosiphon stamineus*." *Chem Pharm Bull* (Tokyo). 2000 Nov; 48(11): 1711-9.

⁵³ Beaux D, Fleurentin J, Mortier F, "Effect of extracts of *Orthosiphon stamineus* Benth, *Hieracium pilosella* L., *Sambucus nigra* L. and *Arctostaphylos uva-ursi* (L.) Spreng. in rats." *Phytother Res* 1999 May; 13(3): 222-5

⁵⁴ Mariam, A., M. Z. Asmawi, et al. "Hypoglycaemic activity of the aqueous extract of *Orthosiphon stamineus*." *Fitoterapia* 1996 67(5): 465-468.

Clinical Studies

Additionally, four clinical studies – conducted in France by the prestigious Laboratoire L.H.S. – document the efficacy of ***Reduce Fat-Fast***⁵⁵:

- **Preliminary Study Evaluating the Effects of *Reduce Fat-Fast*[®] on Thermogenesis:** This study shows that the active ingredients in ***Reduce Fat-Fast***[®] slow down the body's natural inclination to store excess food energy as fat (reducing the possibility of weight gain) and to speed up the body's release of stored fat as energy (increasing fat or weight loss).
- **Double-Blind Study on *Camellia Sinensis* in Obesity:** This double-blind study was performed on a test group of 60 clinically obese women. In the study, the women (ages 35-40) were divided into two groups of thirty. The first group received the active ingredient in ***Reduce Fat-Fast***[®] and the second received a placebo. Both groups received dietary advice and a daily diet of 1,800 calories. Both groups were reviewed at day 15 and at day 30. At day 15, the ***Reduce Fat-Fast***[®] group lost twice as much weight as the placebo group and at day 30 this same group has lost three times as much as the placebo group. Waist measurements at day 15 showed that the ***Reduce Fat-Fast***[®] group lost twice as much as the placebo group (in inches), and four times as much at day 30.
- **Multi-Center Study of 1448 Patients:** This clinical trial was conducted on a test group of over 1400 adults – 82% female and 18% male. The age range of the subjects was between 30 and 57, and 59% of the group was professionally active (to correspond with the activity level common to the target audience). No dietary recommendations were made, nor was a diet provided. All subjects were provided with ***Reduce Fat-Fast***[®] and instructions on its use. After one month of treatment, an average weight loss of 3.7% of body mass (2.9kg) was recorded in the group. After two months of

⁵⁵ "***Reduce Fat-Fast***[®]. Clinical Trials, Scientific Information," Laboratoire L.H.S., translated from French into English, August 1998.

treatment, an average weight loss of 6.4% of body mass (5.0kg) was recorded. Most significantly, regardless of sex, age, size, initial level of weight or body fat, a weight loss was recorded in 97% of the study population.

- **Study of the Efficacy and Tolerance of *Reduce Fat-Fast*® in the Treatment of the Condition of Overweight in Adults:**

This two-month study – conducted by 100 French medical practitioners – of over 400 obese adults (ages 18-65, 375 women and 46 men) was designed to study the effect of *Reduce Fat-Fast*® on an overweight population (with no dietary changes) and to evaluate the body's tolerance of the product (as safe and non-toxic). Body measurements were recorded (weight, abdominal size, hip circumference) at start and finish, as well as blood pressure and heart rate. At the conclusion of the trial, the average weight loss was 4.9kg, the average decrease in abdominal size was 3.6cm and the average loss from the hips was 3.0cm. Eighty percent of the test population and 81% of the physicians judged the results excellent. Ninety-eight percent of the physicians judged the physiological tolerance by the body to be excellent or good.



Why Not Drink More Tea?

Over the years many people have asked me, "Will I get the same results if I drink a lot of green tea?" While it is true that in the Eastern Traditions green and java tea leaves are served as an infused drink (tea), to achieve the weight loss effects described in the preceding pages you would need to have over 20 cups a day! Since most of us rarely manage to drink EIGHT cups of water a day, it seems highly unlikely that we would sit still for over twenty. As important as the raw ingredients in *Reduce Fat-Fast*® are, the formulation we have developed is one of the key reasons this product is so effective and so safe.

Through many months of research and experimentation, we have developed a process whereby we can obtain an extract of the teas using a revolutionary new process called Supercritical CO₂ Extraction. This process uses compressed carbon dioxide gas at medium temperature (about 30°C, 90°F) and makes it possible to:

- Preserve the active ingredients of the extract, thereby maintaining the integrity of the plant ingredients (note how this process differs from how food processing actually removes nutrients).
- Obtain extracts that are 100% natural and free from any extraction solvent residues.

Prior to extraction with supercritical CO₂, the plant material is first freeze ground. This modern technology makes it possible to avoid heating the plant during grinding. At the end of extraction, an expansion phase (brought about by lowering the CO₂ pressure) causes the carbon dioxide gas to change from the supercritical state to the gaseous state, which means it can be completely removed from the plant material obtained as a result of the extraction process – no chemical remains.

The final product, ***Reduce Fat-Fast***[®] is a natural concentrate that has no foreign residues and delivers a biologically effective quantity of the active ingredients in green tea and java tea in one capsule. In clinical studies it has been shown to have none of the side effects of the ephedra-based products available in the marketplace today. Ephedra (Ma Huang) has been shown to promote weight loss, but ingesting it is very similar to taking amphetamines. Ephedra (found in such popular products as Herbal Fen-Phen, Power Trim, Up Your Gas, Diet Pep, and Metabolean) increases your heart rate and raises your blood pressure, which may ultimately lead to heart palpitations, tremors, headaches, dizziness, and insomnia. Furthermore, for people who suffer from hypertension or heart conditions ephedra can be lethal.



Testimonials

There are hundreds of dietary supplements on the market today containing dubious ingredients and making dubious claims. ***Reduce Fat-Fast***[®] is NOT one of them. ***Reduce Fat-Fast***[®] is a clinically proven food supplement that is available in over 60 countries worldwide. Millions of capsules of ***Reduce Fat-Fast***[®] have been consumed safely with wonderful results and no side effects for over ten years. In combination with a healthy diet and moderate exercise, ***Reduce Fat-Fast***[®] has worked for men and women of different ethnic backgrounds, different races, with different body types and eating habits. It should work for you. But don't just take my word for it.

- **Rebecca Vaughn lost 128 pounds in ten months.** "When I first started taking Premier's **Reduce Fat-Fast®**, I weighed a total of 268 pounds. I lost 31 pounds in a month and the rest, a total of 128 pounds, in ten



months so you can imagine how excited I was. When I was fat, I felt very much withdrawn. I had low self-esteem. I never bought clothing because nothing looked right, there wasn't a good selection and since I wasn't going anywhere, I didn't really need a lot of clothing. It was almost the life of a recluse that I was leading. It was very sad. When I lost the weight with **Reduce Fat-Fast®**, you can't imagine how excited I was!"



- **Luis Rivera lost 47 pounds.** "I was 215 pounds. I got a lot of criticism in high school, at my job. Everywhere I walked, somebody said something, called me names. It hurt. I felt lousy, lazy, never did

anything, I was wearing a size 38. And now I'm happy to say I'm fitting into a size 32. I'm 47 pounds lighter, I've kept it off for two years now and I'm very happy about it."

- **Liz Venza lost 80 pounds.** "I'd gotten to a point in my life where I was way over weight and I was really miserable. My self-esteem was down and I said to myself, 'Why not give it a shot?' So, I



tried the product – Premier's **Reduce Fat-Fast**® – and before I knew it, I was starting to lose weight. In thirty days I must have taken off about 25 to 30 pounds and I continued to lose weight for about three months. Now it's been about a year since I used **Reduce Fat-Fast**®. It's a great product, I enjoyed using it and I'd recommend it to anyone."

- **Marcela Brane, Miss Argentina 1998, lost 10 pounds.** "After my pregnancy, I was finally able to loose 10lbs thanks to **Reduce Fat-Fast**®."



Everyone's results will vary when using **Reduce Fat-Fast**®. Some people may lose as much as five pounds in the first week, some people won't lose any weight in the first week, but will start losing in the second week. Because **Reduce Fat-Fast**® works with your own system, the weight loss you will experience depends very much on your own metabolism. But you will experience results just as Rebecca, Luis, Liz and Marcela and the thousands of others around the world who have used this product as part of a safe and a successful weight loss program.

5 *The Reduce Fat-Fast Eating Program*

Ingredients for a Healthy Life

In the short term, even the most unorthodox diet can lead to weight loss. There are hundreds of them out there: soup diets, grapefruit diets, low-carbohydrate diets, water diets, and juice diets. The list is long and the options are plentiful. But in the long term, none of these diets offer the kind of balance that we need to maintain a healthy weight and a healthy lifestyle. Extreme measures will always lead to short term results, but they never form a long-term solution. This is why I have created the **Reduce Fat-Fast REDUCE FAT-FAST PROGRAM**. It will help you lose excess weight following a sensible eating and exercise program and, in the process, it will help you develop the types of eating habits that will help you maintain a healthy weight for the rest of your life.

Food is our fuel. We need energy to live and what we eat and drink is the source of that energy. Energy is measured in calories, which for easy reference can be thought of this way: a calorie is the amount of energy burned by a 150-pound person each minute during sleep⁵⁶. We gain weight when the amount of calories we take in exceeds the amount of calories we use to live.

As we have seen, our genetic evolution has made it such that we can obtain energy from a variety of foodstuffs. This is a good system considering the fact that our ancestors did not always have a guaranteed, steady source of food. The diversity of foods upon which we can draw for our nutrition is important because a healthy diet consists of macronutrients (protein, carbohydrates, fat, water) and micronutrients (vitamins and minerals). Balance is both a matter of the right number of calories and the right combination of macro/micronutrients to achieve optimal health.

Protein

Protein is the most common substance in the body after water. Proteins are part of every cell in the body, which requires a constant supply of

⁵⁶ Willett, WC, "Eat, Drink, and Be Healthy," New York: Simon & Schuster, 2001.

protein to repair cells as they wear out. In periods of growth (infancy, childhood, adolescence), our bodies need extra protein to make new body tissue. Proteins provide the foundation for everything from enzymes and hormones, to antibodies to protect the body from infection and disease. They provide the framework for an infinite number of compounds and structures in the body. Our hair and skin are mostly protein, as are our muscles.

Proteins are made up of a combination of approximately 20 different amino acids. Of these 20, nine are considered “essential,” because they are not manufactured in our bodies and therefore must be obtained from the food we eat. Proteins that are considered “complete,” are those that contain all the essential amino acids. Just about every kind of animal meat is a complete protein; this includes beef, milk, poultry, eggs, and fish. “Incomplete” proteins lack one or more of the essential amino acids. These types of proteins tend to be found in vegetable sources (leaves, stems, roots). Consequently, vegetarians who do not consume proteins from any animal source must combine the types of plant-sourced proteins they eat (i.e., rice and beans) to ensure they are getting complete proteins.

Studies have shown that **at a minimum** we need about 8 grams of protein for every twenty pounds of weight. The average male body loses about 24 grams of protein per day so, to maintain health, at a minimum an adult male needs about 65 grams of protein while an adult female needs – at a minimum – 50 grams of protein, but from what source?

There is a great debate ranging around the planet as to the best source of dietary protein. Unfortunately, there still is not enough evidence to make a hard and fast rule as to which is the best source of protein: animal or vegetable⁵⁷. The issue with protein potentially has more to do with its “package” than anything. For example, beef is an excellent source of complete protein, but it also is an excellent source of saturated fat. The same holds true for whole milk and dairy products made from whole milk. The following table illustrates the amount of protein available from various sources.

⁵⁷ Willett, WC, “Eat, Drink, and Be Healthy,” New York: Simon & Schuster, 2001.

Dietary Sources of Protein⁵⁸

(Based on daily value for protein of 50 grams in 2,000-calorie diet)

Food	Serving	Weight (grams)	Protein (grams)	% Daily Value	Calories	% Calories from Protein
Hamburger (extra lean)	6 oz.	170	48.6	97	451	43
Chicken, roasted	6 oz.	170	42.5	85	284	60
Fish	6 oz.	170	41.2	82	190	87
Cottage Cheese	1 cup	225	28.1	56	233	48
Yogurt, low-fat	8 oz.	227	11.9	24	144	33
Whole Milk	1 cup	244	8	16	150	21
Peanuts	1 oz	28	7.5	15	165	18
Rice, cooked	1 cup	158	4.3	9	205	8
Broccoli, cooked	5-inch piece	140	4.2	8	39	43
Baked potato	2 x 5 inches	156	3	6	145	8
Corn, cooked	1 ear	77	2.6	5	83	13

⁵⁸ Source: U.S. Department of Agriculture, Agricultural Research Service, 1999. USDA Nutrient Database for Standard Reference, Release 13, Nov. 2002.

The bottom line with proteins is that we need them every day to be healthy. If you choose to have the majority of your proteins come from plant sources, make sure these sources include a good mix of beans, nuts, grains, and vegetables. For those who enjoy beef, choose the leanest cuts you can find or eat more chicken, turkey and fish.

The **Reduce Fat-Fast** Eating Program includes 27% protein, which is approximately 120 grams per day (at 1,800 total calories per day), well above the minimum daily requirement yet balanced with the carbohydrate and fat intake to provide your body with the nutrients needed to keep it healthy. The Program is organized so that the sources of protein are divided between animal and plant sources to provide you with the right combination of complete and incomplete proteins, and each meal contains proteins from several sources to keep you feeling satisfied and keep your energy levels consistent throughout the day.

Carbohydrates

Weight gain and loss in most of us is directly associated with how many calories we consume and in most countries of the world, the majority of dietary calories come from carbohydrates. Carbohydrates come in two essential forms: simple carbohydrates (sugars) and complex carbohydrates (starches). The simplest forms of the simple carbohydrates are glucose, fructose (also known as fruit sugar), and galactose (found in milk sugar). Glucose and fructose combine to create “sucrose.” Sucrose – particularly in the form of table sugar – is the most commonly consumed carbohydrate of them all in that it is contained, in some amount, in virtually every processed food we consume; particularly soft drinks, syrups and jams, bread, ready-to-eat cereals, milk. Simple sugars provide us with energy, but with little else and consequently, simple sugars are often associated with “empty calories,” in that they provide the body with a great deal of energy, but very little nutrition. When we eat simple carbohydrates, we experience a temporary elevation in energy – a “sugar high” – because the glucose can be absorbed so quickly into the bloodstream⁵⁹. Complex carbohydrates (starches) are essentially the same as simple carbohydrates, but are more complex and take longer for the body to digest

⁵⁹ This sugar “high” is followed naturally by a “low,” which often brings a corollary desire for more sugar.

and break down. Instead of giving you a short-term jolt of energy, complex carbohydrates provide you with a more sustained source of fuel⁶⁰. Complex carbohydrates can be found in pasta, grains, fruits, and vegetables (cabbage, lettuce, celery, spinach). In addition to their capacity as an energy source, some complex carbohydrates are actually indigestible by our bodies. These are known as “fiber,” and are critical to a healthy diet.

The minimum daily intake of carbohydrates is approximately 100 grams. This amount prevents muscle wasting and ketosis. The most healthful approach to achieving a balance of carbohydrates is fewer refined carbohydrates and more carbohydrates from whole grains and vegetables. The **Reduce Fat-Fast** Eating Program includes 45% carbohydrates – approximately 202 grams. Although this is lower than a standard eating plan, the carbohydrates included are from whole grains and vegetables, therefore ensuring that the carbohydrates will provide you with a sustained source of energy and important dietary fiber.

Fat

Fat is not all bad! Eating less fat does not mean that you will lose weight. As a matter of fact, studies in Europe comparing men and women from different countries showed that women with the lowest fat intake were more likely to be obese, while those with high fat intake were the least likely to be obese⁶¹. The obesity epidemic in the world today is not simply a function of eating too much fat, it is because we are eating too much, eating the wrong things, and not active enough to burn off the calories we are consuming.

Any nutritionist will tell you that the fats are critical to a healthy and balanced diet. Some fats are good for you and you need them to sustain your body in a balanced and healthy manner. For example, some vitamins are only digestible in the presence of fat (Vitamins A and D). The majority of fats that we eat are called triglycerides: three fatty acids linked together by glycerol and there are four main categories of fatty acids: saturated, monounsaturated, polyunsaturated, and trans fatty acids. In addition to providing fuel for our cells, fats are the raw materials for cell membranes; they contribute to healthy blood circulation, muscle contraction, and are the raw materials for some

⁶⁰ This is the reason for the “carbo-loading” that long distance runners often do before a marathon.

⁶¹ Willett, WC, “Eat, Drink, and Be Healthy,” New York: Simon & Schuster, 2001.

hormones. Our bodies can manufacture most of the fats we need from the fats and carbohydrates we eat. There are some, however, that our bodies can't create: these are considered "essential fats," and two of these that have recently gained a lot of attention are Omega-3 and Omega-6.

From the standpoint of a healthy diet, the best fats to have are unsaturated fats. These can be found in olive oil, nuts, avocados, corn, seeds, whole grain, and from such fatty fish as tuna and salmon. Saturated fats and trans fats are found in meat and animal fat (think bacon), dairy products, and in many of the products we use in cooking and baking. Consequently, a healthy, balanced diet limits the amount of meat and dairy products, while increasing the amount of unsaturated fats, which can actually reduce cholesterol levels and help to protect against heart disease and stroke.

As you will see, the **Reduce Fat-Fast** Eating Program includes approximately 56 grams of fat on a daily basis accounting for 28% of the calories in the 1,800-calorie program. This amount is on target with medical and nutritionist recommendations for the percentage of calories from fat in a healthy diet. As with protein sources, the Program includes a high percentage of fish, which is an excellent source of Omega-3 and Omega-6 fatty acids. As a matter of fact, I have seen great results with this diet in my own life. At my last visit to my physician, my HDL cholesterol (good cholesterol) measured 85, an excellent number considering that HDL cholesterol values of higher than 59 mg/dL are associated with reduced cardiac risk⁶². The higher the better!

Look how well it has worked for me.

PATIENT NAME		SEX M		AGE(YR/MOS) /		CICCIA MAR		65586	
PT. ADDR:						ACCOUNT: CARDIOVASCULAR ASSOC OF MIAMI MT SINAI MEDICAL CENTER			
DATE OF SPECIMEN		TIME	DATE RECEIVED		DATE REPORTED	TIME	ACCOUNT NUMBER:		
11/07/2002		13:45	11/08/2002		11/08/2002	10:15			
TEST			RESULT			LIMITS		LAB	
Cholesterol, Total			185			mg/dL		100 - 199 TA	
Triglycerides			45			mg/dL		0 - 149 TA	
V HDL Cholesterol			85 H			mg/dL		40 - 59 TA	
Comment			TA						
HDL cholesterol values >59 mg/dL are associated with reduced cardiac risk.									
VLDL Cholesterol Cal			9			mg/dL		5 - 40	
LDL Cholesterol Calc			91			mg/dL		0 - 99	
LDL/HDL Ratio			1.0			ratio units		0.0 - 3.6	
LDL/RDL									
Men Women									
1/2 Avg.Risk 1.0 1.5									
Avg.Risk 3.6 3.2									
2X Avg.Risk 6.3 5.0									
3X Avg.Risk 8.0 6.1									
HOMO CYST (S) IRE, PLASMA/SERUM									
Homocyst(e)line, F/S			9.8			umol/L		6.3 - 15.0 TA	

⁶² Cholesterol comes in two forms: Low-density lipoprotein (LDL) is "bad" cholesterol. The higher the LDL cholesterol levels in the blood, the greater the heart disease risk. High-density lipoprotein (HDL) is "good" cholesterol and helps prevent plaque buildup in blood vessels (clogged arteries).

Liquids

The average adult body is over 50% water and as with most every living thing, if we do not have enough water we die. As humans, we need to take in enough fluids so our bodies can maintain themselves by making enough urine to flush out wastes, maintaining the proper volume of blood, preventing body salts from becoming too concentrated, and replenishing the water we lose through bodily processes (i.e., sweating). Exactly how much fluid you need depends on many things, including genetics, diet, the environment you live in, and your level of physical activity. However, the average person needs about a milliliter of fluid for every calorie burned, which is approximately 64 ounces for a 2000-calorie diet. While we do get some fluid from the foods we eat (think watermelon, for example), most of us get the majority of our fluids from drinking liquids.

However, not all liquids are alike and, like different grades of fuel for your car, some liquids are better for your body than others. Water is, of course, the best. It has everything we need, and no calories or additives. However, many people in our contemporary societies have substituted drinking water with drinking sodas or fruit juices. Although they are a source of the liquid that our bodies need, they also contain high amounts of calories from sugar – a 12-ounce can of orange juice contains 168 calories – and many people seem to think of the calories in juices or soda as somehow different than the calories in food. The bottom line, however, is that if you drink a can of soda every day – without cutting back on calories from another source – you are taking in an extra 150 calories a day. In a year's time, this can add up to an extra 15 pounds. While drinking diet soda solves the calorie problem, keep in mind that drinking diet soda is essentially drinking a lot of chemicals, aspartame, phosphoric acid, and caffeine just to name a few.

Speaking of caffeine, there has been a lot of controversy and contradictory information published about the bad and good physical effects of caffeine, regardless of the source. Coffee and tea are two major sources of dietary caffeine. We have already seen that green tea is highly beneficial. Coffee, can be beneficial in terms of how the caffeine provides a “pick me up,” particularly in the mornings. However, caffeine is a drug and it does have side effects: it can make you jittery, keep you from sleeping, and it is addictive.

Alcohol is quite controversial as well. It seems that every other month, a new study comes out telling us that red wine is good, red wine is bad,

some types are okay, and others are not. In the **Reduce Fat-Fast** Eating Program, I have eliminated alcohol completely because it is such a high-calorie liquid and has little to no nutritional value. For example, a 3.5 ounce glass of wine has approximately 72 – 75 calories in it, depending on the type of wine. A twelve-ounce can of beer is approximately 145 calories (depending on the type of beers, some have higher calorie counts). As with pizza, very few of us ever have one glass of wine or one beer. If we drink alcohol on a daily basis, without cutting out calories from another source, the effect on our weight will be the same as drinking a 150-calorie soda every day: an added 15 pounds over the course of a year. For a healthy diet, if you drink alcohol do so in moderation.

When it comes to fluids, many people have asked me how much water – for example – they should drink. In the **Reduce Fat-Fast** Eating Program, I recommend that you drink a minimum of eight cups of water a day, and add an additional one to three cups of water per hour that you exercise (depending on the intensity and length of the activity). This amount is a good general rule, although some people will naturally need less water than others. A good way to determine if you are getting enough liquids in your diet is to keep an eye on the color of your urine throughout the day. Ideally it should be quite clear. This indicates that your body is efficiently flushing wastes out of your system.

Vitamins and Minerals

Vitamins and minerals don't provide our bodies with the fuel we need for energy, however they are important to such processes as metabolism. Vitamins are organic substances that cannot be made in adequate quantities by our bodies, so we get them from the foods we eat. Generally, vitamins are classified in two categories: water-soluble vitamins (members of the vitamin B complex and vitamin C) and fat-soluble vitamins (includes vitamins, A, D, E, and K).

Minerals are similar to vitamins in terms of their importance to our bodies, but they are inorganic (not composed of organic matter). Minerals – calcium, copper, manganese for example – are necessary for growth, particularly for bones and teeth. They form the major parts of the hard tissues of the body, are necessary to muscle contraction, and are essential for enzyme function and the maintenance of the chemical balance of our bodies. Because we lose minerals every day through the natural processes of our bodies (sweating, urinating, etc.) they must be replaced on a daily basis.

In developing the **Reduce Fat-Fast** Eating Program, I have made sure that the Program provides you with the necessary vitamins and minerals needed for a healthy body. I also recommend you take a one-a-day vitamin/mineral supplement.

Reduce Fat-Fast®

Reduce Fat-Fast® is as essential to the Program as are protein, carbohydrates, vitamins and minerals. It is the added ingredient that will help you achieve healthy weight loss and re-establish a healthy metabolic balance.

As we discussed in Chapter Three, **Reduce Fat-Fast®** works with our bodies' own processes to improve how food is digested and metabolized, and how the body uses stored fat to produce the energy we need on a daily basis. As an all-natural food supplement, **Reduce Fat-Fast®** can help recalibrate your body so that, once you have achieved the desired amount of weight loss, you will find maintaining that weight a simple matter of sticking to the behaviors you have learned through the Program. Because it works quickly and safely, it is possible to see results from taking **Reduce Fat-Fast®** in conjunction with following my Eating Program and Exercise Plan within a very short period of time. For most people, results can be seen within a week of beginning the Program. And while it is true that you would achieve weight loss results from doing any one of the three elements of this Program by itself, the three elements together are an EXTREMELY POWERFUL combination for rapid, safe weight loss that can be maintained in the long term.



Getting Started

As with any diet or exercise program, it is very important to consult with your physician before beginning the **Reduce Fat-Fast** REDUCE FAT-FAST PROGRAM. Discuss with your physician your current health concerns, identify the weight that is healthy for your body type, and make sure you are aware of any special needs you may have as a result of your current eating habits and lifestyle.

In terms of recommended weights for men and women, the following table provides recommended weights for men and women based on frame size.

Suggested for Women

Height - Feet Inches	Small Frame	Medium Frame	Large Frame
4' 10"	102-111	109-121	118-131
4' 11"	103-113	111-123	120-134
5' 0"	104-115	113-126	122-137
5' 1"	106-118	115-129	125-140
5' 2"	108-121	118-132	128-143
5' 3"	111-124	121-135	131-147
5' 4"	114-127	124-138	134-151
5' 5"	117-130	127-141	137-155
5' 6"	120-133	130-144	140-159
5' 7"	123-136	133-147	143-163
5' 8"	126-139	136-150	146-167
5' 9"	129-142	139-153	149-170
5' 10"	132-145	142-156	152-173
5' 11"	135-148	145-159	155-176
6' 0"	138-151	148-162	158-179

Suggested for Men

Height - Feet Inches	Small Frame	Medium Frame	Large Frame
5' 2"	128-134	131-141	138-150
5' 3"	130-136	133-143	140-153
5' 4"	132-138	135-145	142-156
5' 5"	134-140	137-148	144-160
5' 6"	136-142	139-151	146-164
5' 7"	138-145	142-154	149-168
5' 8"	140-148	145-157	152-172
5' 9"	142-151	148-160	155-176
5' 10"	144-154	151-163	158-180
5' 11"	146-157	154-166	161-184
6' 0"	149-160	157-170	164-188
6' 1"	152-164	160-174	168-192
6' 2"	155-168	164-178	172-197
6' 3"	158-172	167-182	176-202
6' 4"	162-176	171-187	181-207

To determine your frame size, bend your right elbow to a 90-degree angle, so your upper arm is parallel to the floor. With your left hand, locate the two bones that protrude from either side of your elbow. Then use a ruler or tape measure to measure the distance between your two fingers. Compare this distance to the following table that provides measurements for a medium-frame person. If your measurement is smaller, you have a small frame and if it is larger, you can be considered a large-framed person.

Medium Frame Size for Women

Height (no shoes)	Elbow Breadth
4'9" – 5'2"	2 1/4" – 2 1/2"
5'3" – 5'10"	2 3/8" – 2 5/8"
5'11" +	2 1/2" – 2 3/4"

Medium Frame Size for Men

Height (no shoes)	Elbow Breadth
5'1" – 5'2"	2 1/2" – 2 7/8"
5'3" – 5'6"	2 5/8" – 2 7/8"
5'7" – 5'10"	2 3/4" – 3"
5'11" – 6 1/2"	2 3/4" – 3 1/8"
6'3" +	2 7/8" – 3 1/4"

While most of us rely on the scales to tell us what we already know (that we are overweight), the scales can't tell us what is also very important for us to know: do we have a healthy balance of fat/muscle in our bodies? Weights fluctuate with water retention and increases in lean muscle tissue, so the scale can't really give us an accurate read on what is going on. This is why, in addition to identifying your target body weight, using Body Mass Index to determine your target BMI is important. Your body mass number has a high correlation with the amount of fat in your body, which is what you want to get rid of (not lean muscle tissue). The following chart can be used to identify your current BMI and also the range that is appropriate for you⁶³. First, locate your height (in inches) in the far left column. Once

⁶³ Source: "Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults," National Institutes of Health, National Heart, Lung, and Blood Institute, June 1998.

you've done that, find your approximate weight in the row that corresponds to your height. Once you've found your height, you can identify your corresponding BMI by locating the number at the top of the column. For example, a person who is 5'8" (68 inches) and weighs 164 pounds has an approximate BMI of 25%.

Body Mass Index Chart

Height (inches)	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
	Body Weight (pounds)																
58	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
59	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
60	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
61	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
62	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
63	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
64	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
65	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
66	118	124	130	136	142	148	155	161	167	173	179	188	192	198	204	210	216
67	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
68	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
69	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
70	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
71	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
72	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
73	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
74	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
75	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
76	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287

Typically for men and women of average frame size, the recommended ranges⁶⁴ of BMIs are as follows:

Men	Age	Low	Recommended	High	Very High
	20-39	5-7	8-20	21-25	>25
	40-59	5-10	11-21	22-27	>27
	60-79	5-12	13-25	26-30	>30
Women	Age	Low	Recommended	High	Very High
	20-39	5-20	21-33	34-38	>38
	40-59	5-22	23-34	35-40	>40
	60-79	5-23	24-36	37-41	>41

⁶⁴ Based on Gallagher, et al, *American Journal of Clinical Nutrition*, Sept. 2000, Vol. 72.

Now that you know where you are and where you need to go. The next step is simple: GET GOING! Your results will vary depending on how much weight you have to lose, but based on the experiences of those who have used the REDUCE FAT-FAST PROGRAM successfully over the years, a general guideline is that those at the high end of the recommended range will lose the desired amount of weight within 15-30 days, whereas for those in the High BMI category the amount of time is 60 days, and those in the Very High BMI category it is more typically 90 to 120 days.



The Daily Meal Plan

The **Reduce Fat-Fast** Eating Program includes a 1,800 calorie-a-day meal plan⁶⁵ that is lower in carbohydrates (45%) than other standard meal plans and includes 27% calories from protein and 28% calories from fat. It emphasizes heart-healthy, monounsaturated fats (like olive oil and canola oils) and it contains whole grains, so it is very high in dietary fiber. Each meal is designed to provide you with a balance of proteins, carbohydrates, and fats and each meal includes calcium, fiber, vitamins and minerals.

The Meal Plan lasts for 14 days and each day's plan is included on the following pages. Remember, at least 20 to 30 minutes before each meal, you will take your **Reduce Fat-Fast**[®] pill with two 8-ounce glasses of water. Also, to make it easier for you, and depending on your schedule, lunch and dinner can be interchanged. It's all here, a complete and satisfying meal plan that contains everything you need for a healthy diet that can help you lose weight. And, if you find yourself getting hungry between meals, feel free to select from one of the following 100-calorie (or less) healthy snacks once a day:

⁶⁵ Special thanks to Claudia M. Gonzales MS. RD. LD/N for helping me in preparing the Hane's Eating Program. Claudia, a registered dietitian and a media spokesperson for the American Dietetic Association, the nation's largest organization of food and nutrition professionals headquartered in Chicago. The 70,000-member ADA serves the public by promoting optimal health, nutrition and well-being. She is an expert in the weight management field, as well as in the nutritional treatment of immunology HIV/AIDS, cardiac disease, diabetes and pregnancy nutrition. She earned her bachelor's degree in dietetics and nutrition and her Master's degree in Communication at Florida International University. Claudia has served as a nutrition consultant at international food shows in Germany, France, Spain, Argentina, Mexico and the USA.

- 1 cup fat-free, sugar-free yogurt
- 1 four-ounce fat-free pudding
- Up to 4 cups light popcorn (no butter/margarine)
- 1/2 cup fat-free ice cream or frozen yogurt
- 3 graham cracker squares
- 1 small slice of angel food cake
- A handful of pretzel nuggets
- 6 ounces sugar-free Jell-O
- 1 cup blackberries or raspberries
- 1 mini bagel
- 1 large apple
- 1 medium banana or pear
- Up to 16 medium strawberries
- 1 kiwifruit
- Up to 30 grapes
- 1 frozen fruit juice bar
- 8 saltine crackers
- 1 fig bar
- 1 tangerine

Monday - Day One

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:	Lunch:	Dinner:
small whole-wheat crackers, no fat added	4oz baked chicken breast	5oz ...grilled fish in lemon
2ozlow-fat cheese	1/2 cup.....beans	1(3oz).....small-baked potato with 1/2 tsp of sour cream or margarine
1oz.....low-fat ham	1 (6in)pita bread	1 cup tossed green salad with fat-free dressing
1small apple	2 cupsraw vegetables	1 cupapple juice
1glass fat-free milk	1 cupmelon cubes	
	1 Tbsp.olive oil	

Tuesday - Day Two

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:	Lunch:	Dinner:
2 ...egg-white omelet with 1 oz low-fat cheese and 1/2 cup veggies (use nonstick cooking spray)	1(3oz) ...veggie-burger on onion-roll	5 oz...stir-fry chicken with 1 cup of veggies and 1 Tbsp peanuts (use 1 Tbsp of olive oil)
1 slice whole-wheat bread	2 cupsfresh salad	1/2 cup.....brown rice
1banana	1/2 cupgrapes and strawberries	1/2medium grapefruit
1 (8oz).....fat-free yogurt	1 Tbspwhipped topping, light	
	1 Tbspolive oil	

Note: tsp = teaspoon and Tbsp = tablespoon

Wednesday - Day Three20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.**Breakfast:**

2 ...egg-white omelet with
1 cup cottage cheese,
low fat
1peach, medium
4 slices.....Melba toast
1 cup.....skim milk

Lunch:

5 ozsalmon
1small sweet potato
1 cupzucchini slices
3tomato slices
1Tbsp ...balsamic vinegar
1 Tbspolive oil
1/4 cupfruit cocktail
(light syrup)

Dinner:

4 oz Pork chop, very lean
saltine-type crackers
(low sodium, wheat)
1/2 cup...summer squash
1 cup mixed-green veggies
1 Tbspfat-free salad
dressing

Thursday - Day Four20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.**Breakfast:**

2 ...egg-white omelet with
1boiled egg
1 Tbspfat-free cream
cheese
toasted English muffin
1 cupfat-free yogurt

Lunch:

3 ozturkey breast
2 oz ...mozzarella cheese
slices whole wheat bread
1 tsp fat-free mayonnaise
2 cups...cucumber slices,
baby carrots and celery
1 cupapple juice

Dinner:

5 ozgrilled shrimp
in lemon
1 cupsteamed broccoli
1/2 cupmashed potato
1 tspmargarine
1 cup...fresh strawberries

Friday - Day Five20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.**Breakfast:**

2 ...egg-white omelet with
1 cupprune juice
1 cupbran cereal with:
1 cupskim milk
2 Tbspwheat germ

Lunch:

roll filled with:
3 ozlean roast beef
2 ozSwiss cheese
1Tbsp.....horseradish
2 slicestomatoes
1 cupside salad
(spinach, red cabbage)
1 Tbsp ...fat-free dressing
1small pear

Dinner:

5 oz grilled chicken breast
1/2 cupsteamed rice
1 cupsteamed carrots
with dill and
1 tspmargarine
Salad:
1/2 cupeach cucumber
slices, tomato slices, and
alfalfa sprouts
1/2 cupunsweetened
applesauce

Saturday - Day Six

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

French toast made with:
1/2 cupegg substitute
2 slices whole-wheat bread
1/2 tspmargarine
1 tspmaple syrup
2 ozAmerican cheese
1 cupskim milk
1 smallorange

Lunch:

5 ozbaked halibut
with lemon
1 cupsummer squash
steamed with
1/4 cupchopped green
pepper
1 smallroll, plain
8 halvesdried apricots

Dinner:

3 ozTuna in water
1 tspreduced-calorie
mayonnaise
2cups mixed-green
veggies
1 Tbspfat-free calorie
salad dressing
small pita bread (6 in across)
1 cup lemonade, low sugar

Sunday - Day Seven

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

1banana
1 cup ready to eat cereal
1 cupskim milk
2 Tbspraisins
boiled egg

Lunch:

4 oz Lamb chop, very lean
2 cupsraw spinach
leaves with
1/2 cup each mushrooms
and artichokes
1 Tbspolive oil and
balsamic vinegar
1/2 cupblueberries

Dinner:

1 bunhamburger with:
4 oz very-lean ground beef
1 tspcatsup
2slices each onion,
tomato and lettuce
10 pieceoven French
fries drizzled with
1 tspolive oil
(bake for 15 minutes)
1 cup ..watermelon cubes

Monday - Day Eight

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

3 ..strips Canadian bacon
1scrambled egg
2slices whole
wheat toast
1 cupfat-free milk

Lunch:

Greek Gyro sandwich:
whole wheat pita bread
3 oz lean roast beef, sliced
1/2 cupdiced tomatoes
and shredded iceberg
lettuce, each

Sauce: blend 1/4 cup
plain non-fat yogurt, 1/2
tsp dill, 1/2 cup chopped
cucumber, seeds
removed, salt and pepper
1 cupfresh fruit

Dinner:

3ozbaked swordfish
brushed with:
1 Tbsplemon juice
baked potato, small, with:
1/2 tspdiet margarine
1 cupsummer squash,
steamed with 1/4 cup
chopped green pepper
1 cupgrape juice

Tuesday - Day Nine		
20-30 minutes before each meal, take your <i>Reduce Fat-Fast</i> ® with 2 glasses of water.		
Breakfast: 3vegetarian sausages pancake (4 to 5 inch) with 2 Tbspreduced-calorie maple syrup 1 cupskim milk 1/2 cupapple slices	Lunch: <i>Slim sub:</i> low-calorie hot dog roll 2 oz.low-fat white cheese 3 oz.....tuna in water 1/2tomato, sliced lettuce leaves sprinkling of chopped onions dill pickle chips carrot, large, cut into sticks sweet cherries	Dinner: 1 cupvegetable soup 4 ozsirloin steak 1/2 cup.....brown rice 2.....celery sticks 1medium tangerine

Wednesday - Day Ten		
20-30 minutes before each meal, take your <i>Reduce Fat-Fast</i> ® with 2 glasses of water.		
Breakfast: 1wheat bagel 1 Tbspfat-free cream cheese 2 ozlean-ham 1 cupfat-free yogurt 1/2 cuporange juice	Lunch: <i>baked potato, medium,</i> <i>stuffed with:</i> 1/4 cup 1% cottage cheese 2 Tbsptomato salsa 1 tspgrated cheddar cheese 1 cuplettuce with cucumbers 3 oz.....grilled catfish with lemon pepper 1 cupmixed fresh fruit	Dinner: 1 cuppasta with 1 cupvegetables 2 Tbspolive oil 3 ozbaked chicken breast strips 1medium apple

Thursday - Day Eleven		
20-30 minutes before each meal, take your <i>Reduce Fat-Fast</i> ® with 2 glasses of water.		
Breakfast: 1/2 cup pineapple cubes slices whole wheat toast with 1 Tbsppeanut butter 2 Tbspapple butter 1 cupfat-free milk	Lunch: 1 whole-wheat pita, cut in 1/2, warmed and filled with: 1 cupEggbeaters scrambled with 1/2 cup ...chopped frozen spinach, 1 ozlow-fat cheese, 1/2 cupmushrooms and bell pepper Salt and pepper to taste mixed-veggies salad with low fat dressing 1 cupstrawberries	Dinner: 1 cupthree-bean salad made with: 1/3 cupkidney beans 1/3 cup ..garbanzo beans 1/3 cupsteamed green beans 2 Tbspchopped onion red wine vinegar salt and pepper to taste 3 ozboiled shrimp celery stalks filled with: 2 Tbspfat-free cream cheese 1/2 cup ...grapefruit juices

Friday - Day Twelve

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

3 ..strips Canadian bacon
1 cup bite-sized shredded
wheat cereal
1 cup.....skim milk
oz cheddar cheese cubes
1medium grapefruit

Lunch:

5ozveal, broiled
1/2 cup mashed potatoes
2 cupsraw vegetables
(cauliflower, carrots,
cherry, tomatoes)
1 Tbsp ...fat-free dressing
1.....medium nectarine

Dinner:

4 oz....grilled sirloin steak
1 cup Italian Greek beans
and asparagus with
1 Tbspolive oil
medium baked
sweet potato
1 cupfresh grapes

Saturday - Day Thirteen

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

1 cup scrambled egg with
1/2 cup chopped tomatoes
(egg substitute)
1 ...English muffin toasted
1/2fresh blueberries
cupnon-fat yogurt

Lunch:

1 onion roll sandwich with
3 oztuna salad with
chopped onion
1/2sliced tomato
1/2 cup..shredded lettuce
2 cupsspinach salad
mixed with orange wedges
and raisins with olive oil
and vinegar to taste

Dinner:

5 oz baked fish with herbs
(like basil, dill, thyme, rosemary)
1/2 cup.....yellow rice
Salad:
slices tomato with
3 TbspFeta cheese,
reduced fat
2 Tbspolive oil
1 Tbsp ..balsamic vinegar
1/2 cup strawberries with
1 Tbsp non-fat
whipped cream

Sunday - Day Fourteen

20-30 minutes before each meal, take your
Reduce Fat-Fast® with 2 glasses of water.

Breakfast:

2 sliceswhole wheat
bread, toasted
1 tspdiet margarine or
cream cheese
1 Tbsplow sugar jelly
1cup.....fresh cantaloupe
1 cup.....fat-free milk

Lunch:

1 cuppasta with
3 oz ...boiled baby shrimp
or
lean ground-beef with
1/2 cuptomato or
marinara sauce
medium yam
2 cups.....mixed green
vegetables with
1 Tbsp ...fat-free dressing
1small apple

Dinner:

corn tortilla 7-8 in. across
3 oz.....turkey breast
1 oz.....Monterrey Jack
cheese
tomato slices, chopped
Dijon mustard
1large carrot
1celery stick
1small orange

Making the Program Work For You

Providing you with a daily meal plan helps to take some of the guesswork out of losing weight. This particular plan and **Reduce Fat-Fast**® will work together as an extremely powerful combination to help you lose the extra weight you currently are carrying. I also want to share with you several other important things I have learned over the years about dieting and weight loss. These tips have come from talking with medical professionals, nutritionists, and regular people all over the world and they will help you not only lose weight but change your eating habits so that after you have completed the 14-day meal plan, you won't put weight back on.

- Fat-free doesn't mean calorie-free. A lot of foods that are advertised as "fat free" have replaced the calories from fat with calories from carbohydrates. Always count the calories, particularly with processes or pre-packaged foods.
- Choose lean meats, fat-free or low-fat cheeses, fat-free or 1% cottage cheese.
- Use olive, canola, and sunflower oils and diet margarine when cooking or using as a dressing. (In baking, soy-based margarine works very well as a substitute for regular margarine or butter.)
- Choose fat-free milk over whole, 2% or 1%.
- Drink at least 8 cups of water a day (an easy thing to do during the Meal Plan because you will already be drinking six cups with the **Reduce Fat-Fast**® pill). If you are exercising, add an additional 1 to 3 cups depending on the intensity and length of the activity.
- Use balsamic vinegar in combination with a little olive oil as a dressing for your salads.
- Do not skip meals.
- Never write your shopping list when you're hungry and go grocery shopping when you have a full stomach.
- Use a smaller dinner plate than usual to make portions look larger.

- Eat slowly so you'll feel full. Savor and enjoy every bite of food, and try putting your fork down between bites. It will help slow down the meal. Try never to eat a meal in front of the television or in your car.
- Sip rather than gulp your beverages.

When you get the urge to eat between meals, do something else instead. Walk, call a friend, re-arrange the furniture, or clean your desk. Any small activity adds to the amount of calories you burn in a day.

Plan your meals ahead of time. Haphazard eating is usually high-calorie eating. If you are going to an event where you know the only food available to you will be high-calorie (i.e., a football game), eat before you leave. That way you won't be so tempted.

If you travel a lot as I do (or when you vacation) and eat in a lot of restaurants, it is often difficult to stick to a meal plan, particularly one that restricts calories. When you are in a restaurant, keep in mind the quantities and types of foods that have been used in the Daily Meal Plan and try to order menu items that will supply you with a similar range. Then, to help with not eating the entire portion that they serve, I have found that having a non-dairy-based soup instead of an appetizer really increases my feeling of fullness (satiety) so I don't eat as much of the entrée when it comes. Also, particularly if it is stock-based, soups tend to have fewer calories than a typical appetizer.

When you are at home, try to make as many meals as you can from scratch with fresh produce and ingredients. This is one of the best ways to control the amount and type of calories you consume.

Eat fruits and vegetables of every color! Red tomatoes help reduce the risk of heart disease, prostate cancer, and other types of cancers. Yellow corn protects against macular degeneration, the number-one cause of blindness in the elderly. Carrots and sweet potatoes (orange) help prevent heart disease by lowering cholesterol. Green, leafy vegetables help prevent cancer as do blueberries, which also protect memory and motor function. And purple Concord grapes are good for preventing heart disease.

Holiday time of year is always hard on people. We invariably have parties to attend and food and alcohol are in abundance. Be smart and

listen to your body. Every once in awhile it is okay to splurge, but remember that calories add up quickly. If you go to a party, stand up to socialize, walk around and circulate. Dance! Keeping physically active will keep you from eating too much, you'll burn more calories than you will if you sit in one spot all night, and you may have a better time! Also, by continuing to take ***Reduce Fat-Fast***[®] according to the directions during these times, you can help minimize the harmful effects of eating and drinking too much.

Keep a food journal. We often end up eating more than we know because we don't pay attention to the foods we eat. Write down what you eat and how much. It also is important to keep track of when you eat, noting in your journal the times of day you tend to be hungry. I tend to follow the age-old advice: "Eat breakfast like a king, lunch like a prince, and dinner like a pauper." By doing this, I am consuming more calories earlier in the day and my body has the entire day to burn them up. At night, when I tend to be less active, I have fewer calories that have to be burned up. Also, if you eat late at night, try never to go to sleep immediately after eating. Give yourself at least two hours to digest your meal and burn up some of those calories.

The REDUCE FAT-FAST PROGRAM has worked safely and successfully for people all around the world. It should work for you. By combining the Daily Meal Plan with the ***Reduce Fat-Fast***[®] supplement, you have two of the three key ingredients to losing the excess weight you're carrying now and restoring a natural balance in your body of the calories you need and the energy you need to burn. The 14-day Meal Plan will get you started and also will teach you how to eat the proper foods necessary for a healthy body. Once you have lost the weight you want to lose, you will find that your body and your mind have been retrained away from the old habits that made you overweight in the first place. There's only one more thing you need: EXERCISE!

6 *The Reduce Fat-Fast 15-Minute Daily Exercise Plan*

As we have seen, everything we do expends energy: eating, sleeping, sitting, standing, growing hair and nails, all of it expends some amount of energy. Unfortunately for most of us, we expend far less energy that we consume – in the form of fuel – and therefore we are overweight, unhealthy, and unhappy with ourselves.

The **Reduce Fat-Fast** 15-Minute Daily Exercise Plan is a simple, safe approach to getting you moving. When you think about it, fifteen minutes a day is less time than most of us spend getting ready for work in the morning. Coupled with the Daily Meal Plan and **Reduce Fat-Fast**®, this 15-minute workout will add exercise-oriented activity to your day, so that you can begin losing weight and building up lean muscle tissue within the first week of the REDUCE FAT-FAST PROGRAM.



The Right Exercise For You

Any kind of physical movement burns calories, however the type of exercise that uses the most energy is aerobic exercise. Jogging, brisk walking, swimming, biking, cross-country skiing and aerobic dancing are some popular forms of aerobic exercise.

Aerobic exercises use the large muscle groups and require oxygen for the production of energy. The longer you move aerobically, the more energy needed and the more calories used. Regular aerobic exercise improves the ability of your heart, lungs, blood vessels and associated tissues to use oxygen to produce energy needed for activity.

In addition to the aerobic exercise, weight and strength training is important for improving muscle tone and strength. Working out with dumbbells and bar bells (free weights) or using the type of exercise equipment found in gyms and health clubs is the most common type of strength training. Strengthening your muscles through weight training improves posture, helps to decrease the risk for osteoporosis, reshapes your body, and also – by increasing lean muscle mass – leads to more energy use in your body because muscle uses calories up at a faster rate than fat cells.

The important thing to remember when you exercise is that you need to work at an intensity that is vigorous enough to cause your heart rate and breathing to increase. How hard you should exercise depends on your age and fitness level, but at a minimum it is recommended that your heart should be beating somewhere within a range of 60% to 80% of your maximum heart rate (the maximum amount of times your heart can beat in one minute). This is known as your target heart rate.

The simplest way to calculate your target heart rate is to subtract your age from 220 and then calculate 60 to 80 percent of that figure. Beginners should shoot for the 60% while those in better shape should shoot for 80%. These percentages, of course, are a general guideline and as with anything else, it is very important for you to discuss your exercise and fitness plans with your physician. As a quick reference for you, the following table shows the average amount of calories expended in one hour when doing different exercises (average for a 150-pound woman)⁶⁶. The amount of calories used when exercising changes as a function of your weight (if you weigh more, you would use more calories in an hour). And remember, regardless of the type of exercise you do, you need to take time to warm up and stretch before you start your workout and also allow yourself time to cool down at the end of your work out.

Type of Exercise	Calories/hour	Type of Exercise	Calories/hour
Golf, with trolley	180	Jogging, 5mph	500
Golf, without trolley	240	Gardening, digging	500
Gardening, planting	250	Swimming, active	500+
Dancing, ballroom	260	Cross country ski machine	500+
Walking, 3mph	280	Hiking	500+
Table Tennis	290	Step Aerobics	550+
Gardening, hoeing etc.	350	Rowing	550+
Tennis	350+	Power Walking	600+
Water Aerobics	400	Cycling, studio	650
Skating/blading	420+	Squash	650+
Dancing, aerobic	420+	Skiping with rope	700+
Aerobics	450+	Running	700+
Bicycling, moderate	450+		

⁶⁶ "Exercise & Calories Burned Chart," November 2002.

The Exercise Plan

Not all exercises are suitable for everyone. To reduce any risk of injury please consult your physician before starting any exercise program. This instruction is in no means a substitute for medical advice. It is always best to work with a certified instructor.

There are many types of exercises that you can do to get in shape and feel better, the **Reduce Fat-Fast** 15-Minute Daily Exercise Plan is based on an exercise program that is getting a lot of attention recently, but has been around for a very long time: Pilates.

Developed in the 1920s by Joseph Pilates, the low-impact exercises of Pilates are designed to improve posture and strengthen and lengthen muscles without adding bulk. Pilates can be done using special equipment, but it is not necessary. My 15-minute plan requires no special equipment beyond a towel⁶⁷!

This innovative and easy workout will give you great muscle definition, improve your posture, strengthen your arms, shoulders, and abdominals, and get your heart rate going. Although it is only fifteen minutes, the movements work your muscles in a balanced way that results in a better, more effective work out⁶⁸.

Before we get started, I have several very important tips for you to keep in mind as you do these exercises:

- **Posture.** The posture of your body while you train is the posture to which you train your body! Pay close attention to your posture as you do these exercises. During the Standing Arm Towel Work, keep your chest lifted. Flatten your stomach by pulling your belly button in towards your spine. Keep your chin parallel to the floor and your shoulder blades pulled down toward your butt away from your ears. (Imagine you have

⁶⁷ I have found this workout to be great for traveling because it requires no special equipment and you can do it in a hotel room easily.

⁶⁸ Special thanks to Chris Toledo, a professional Pilates Trainer, with whom I have worked for a number of years. Her help with this chapter has been invaluable.

apples under your armpits to keep your shoulders from elevating toward your ears.) Grip the towel firmly, don't bend your wrists while holding the towel. Your feet should be firmly planted, hip width apart.

- **No Abrupt Movements.** Keep the towel work fluid, rhythmic and flowing from one movement to the next. Do not let the towel sag. Keep pulling hard on the towel through the entire series. The harder you pull on the towel (imagine yourself trying to rip it apart), the more quickly you will see results.
- If you experience discomfort or pain, stop! Listen to your body and do not push yourself beyond what you can do. As with any exercise program, you should consult with a physician before beginning this routine.

Towel Work for the Upper Body

First Movement

- 1 **Preparation:** Hands are shoulder width apart; arms are extended in front of the chest, holding the towel with both hands.



- 2&3 **Movement:** Pull towel apart, keeping the tension consistent. Slowly lower your arms to your thighs, lift your arms back to chest height.



- **Repetitions:** 20 times
- Be aware of tension in your neck and the elevation of your shoulders. Do not bend your wrists. Keep them flat.



Second Movement



- 1 **Preparation:** Hands are shoulder width apart, arms are extended in front of the chest, holding the towel with both hands.



- 2&3 **Movement:** Bend elbows and bring the towel close to the chest, extend the arms away from the chest. Pull hard on the towel while bending and extending the arms.



- **Repetitions:** 20 times
- Be aware of your elbows, keeping them lifted while doing this exercise, do not let them drop. Keep the towel taut.

Third Movement

1 Preparation: Elbows tucked into your sides, shoulders down, palms up. Your hands should be directly in front of your elbows, holding each end of the towel.



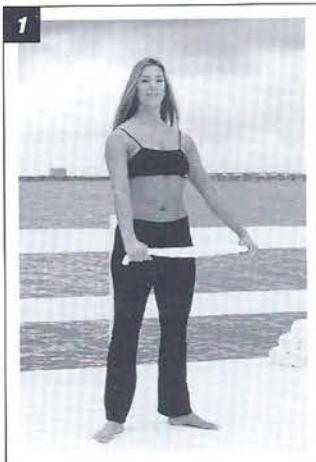
2&3 Movement: Bicep curls. Keep constant tension on the towel while you lift your hands up to your chest then lower them to the front of your thighs. Vary the speed of the movement between fast for a count of five and then slow for a count of five.



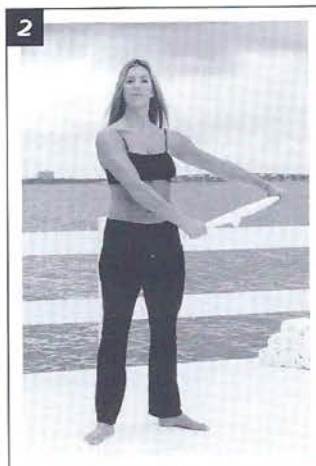
- **Repetitions:** 4 sets of 10, varying the pace (5 fast, 5 slow)
- Be aware of discomfort in your elbows. Make sure your hands are aligned with your elbows.



Fourth Movement



- 1 **Preparation:** Palms down, hands are shoulder width apart in front of legs, holding both ends of the towel. (Your arms do not bend throughout this movement).



- 2&3 **Movement:** With the towel taut, lift both arms out to the side like a pendulum. Keep your shoulders and hips facing forward. Then swing your arms to the other side keeping constant tension on the towel.



- **Repetitions:** 10 to each side
- Be aware of the elevation of your shoulders and tension in your neck. Do not lift the extended hand higher than the shoulder.

Fifth Movement

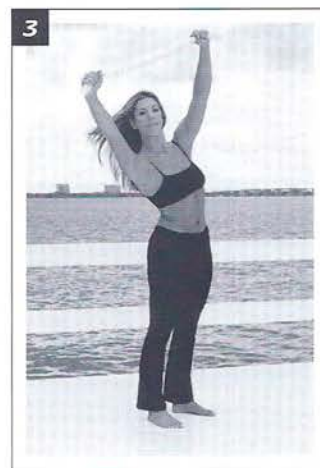
- 1 Preparation:** Both arms are overhead, pull towel apart. Keep the neck long, should blades slide down the back toward the butt (imagine pinching a pencil between your shoulder blades). Do not let your shoulders reach past your ears.



- 2&3 Movement:** Reach to one side, bending at the waist. Pull up with the top hand and pull down with the bottom hand. Feel a sense of length on both sides of the waist.



- **Repetitions:** 10 on each side
- Be aware of the elevation or discomfort in your shoulders. Your neck muscles should stay relaxed.



Sixth Movement



- 1 Preparation:** Posture is crucial in this one! Your chest is lifted to the sky, hands behind your butt, palms forward holding each end of the towel. Keep your head in line with your shoulders and do not let your chin move forward.



- 2&3 Movement:** Pulling on the towel, lift the towel away from your butt as far as you can without your head and neck coming forward. Hold and pull hard for 5 seconds. Then bring the towel back toward your butt without releasing any tension. Consider this one repetition.



- **Repetitions:** 5 sets of 5-second holds
- Be aware of keeping your head and neck from moving forward. Keep your chest lifted. Keep your arms straight throughout the movement.

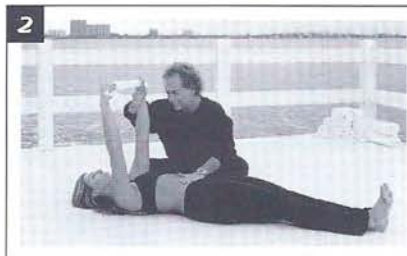
Towel Work for the Lower Body

Flat Abdominals

- 1 Preparation:** Lay on your back, arms overhead holding the towel in your hands, legs extended on the floor. Pull your belly button in towards your spine. Press your lower back into the floor. Push your heels into the ground and keep your toes flexed.

- 2-4 Movement:** Keep your back rounded and use your abdominals – not momentum – to lift your torso off of the floor and come to an upright, seated position. Pull the abdominals in, push the heels down and slowly roll back down to the floor one vertebrae at a time. When your back is on the floor, reach your arms overhead to begin the next roll up. Keep the towel taut the entire time.

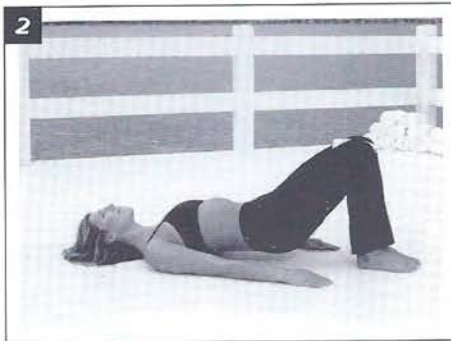
- **Repetitions:** 15 rolling up and back
- Be aware of keeping your back rounded and your abdominals pulled in as you roll up and down. Do not let your heels come off of the floor. If you have trouble keeping your feet on the floor, bend your knees and press the bottoms of your feet into the floor then try the movement again. Do not let your neck become tense.



Tight Butt



1 Preparation: Lie on your back, flatten your shoulder blades to the floor, and place your feet flat on the floor, knees bent, ankles touching. Place the towel between your knees.



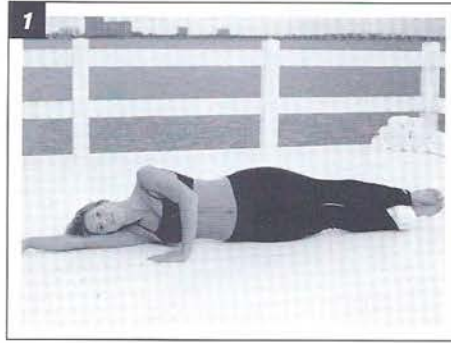
2 Movement: With the towel held firmly between your knees, peel your butt off the floor one vertebrae at a time. Squeeze your knees together for 20 seconds, squeeze tighter for 20 seconds, then tightest for 20 seconds more –

consider this one set. One vertebra at a time, slowly roll your back onto the floor. Feel a sense of length in your back.

- **Repetitions:** 5 sets
- Be aware of keeping your back from arching. Don't put pressure on your neck and shoulders.

Gorgeous Legs

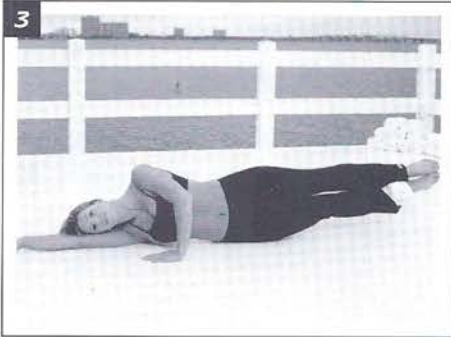
- 1 **Preparation:** Lay on your side, one arm extended straight under your ear, the other arm is placed in front of your chest on the floor to balance yourself. Lift your waist off of the floor, keeping your abdominals pulled in. Your hips should be stacked one on top of the other. Do not let your body lean forward or backward during this movement. Place the towel between your ankles.



- 2&3 **Movement:** Squeezing the towel between your ankles, lift both legs off of the ground, and pulse up and down for a count of ten. Keep your waist lifted off of the floor while you pulse your legs.



- **Repetitions:** 5 sets of 10 pulses on each side
- Be aware of any discomfort you may experience in your low back. Place a small cushion under your hip if you experience any discomfort.



Spine Stretch



1 Preparation: Sit upright on a wooden or tile floor, legs extended hip width apart. Press the back of your knees to the floor and flex your feet. Place the towel on the floor between your legs.



2 Movement: With your hands on the towel, press down into the floor, slide and reach forward, while unrolling your back one vertebrae at a time. As you are reaching forward, pull your abdominals in toward your spine (this will give

you a much deeper stretch). Reach your hands past your feet, then slowly – stacking one vertebrae at a time return to an upright seated position as your hands return to their starting position.

- **Repetitions:** 5 times, try to gain a deeper stretch with each slide forward.
- Be aware of your back, keeping it rounded as you go through the movement. Never force the stretch.

You're on Your Way

Behavioral psychologists say it takes 21 days to establish a pattern (habit) and 100 days (about 14 weeks) to make it automatic. With the REDUCE FAT-FAST PROGRAM, I have mapped out for you the first fourteen days. If you follow my Program, by the end of those fourteen days I believe you will find that you have lost weight and have started to re-train your mind and your body into healthier eating and exercising patterns.

Once you have lost the weight you wanted to, all you need to do is continue to apply in your life what you have learned from this book and the Program. Make what you have learned and experienced through the Program a habit: eat carefully and sensibly. Pay attention to the quality of the fuel you put into your body. Continue to make sure you get at least 15 minutes of physical activity in every day (walking is often the easiest way to do this). Most importantly, be proud of who you are and what you've been able to accomplish, and use that pride as the source of inspiration to go on and live a healthy and happy life!

