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The ZIED GUIDE™ A Fix for Stubborn Fat?

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0 COMMENTS



I recently interviewed registered dietitian Valerie Berkowitz, author of *The Stubborn Fat Fix*. At first glance, her book looked like a reincarnation of the low carbohydrate, high protein diet espoused by the late Dr. Robert Atkins. If you're a regular reader of my blog, or are familiar with my work or follow me on twitter or facebook, you know I very much support the evidence-based Dietary Guidelines for Americans that promote a diet that's rich in carbohydrates and moderate in fat and protein. You can read more about my take on the new Dietary Guidelines, issued last January, on msnbc.com. But as science continues to evolve, I'd be remiss not to acknowledge that not all experts support the government's recommendations, and that perhaps other diets—even those that may appear on the surface to be alternative—may be helpful to some. But my message to consumers will continue to be that no matter what diet you ultimately choose, it should be something you can maintain for life, and that gives you all the nutrients you need for optimal health. It should also be part of a comprehensive lifestyle program that includes regular physical activity and stress management. I also encourage slow and steady weight loss (as opposed to fast and furious weight loss as glamorized by tv shows such as *The Biggest Loser*) to maximize health and psychological outcomes and minimize risks.

Here are some highlights of my interview* with Ms. Berkowitz:

What inspired you to write *The Stubborn Fat Fix*?

The inspiration for writing my book, *The Stubborn Fat Fix*, is not a “what” but rather “who”. My clients at The Center for Balanced Health, <http://www.centerforbalancedhealth.com/> inspired me. The weight loss, the extra energy and the improved clinical outcomes they experience motivates me to share my nutritional approach with as many people who as possible.

What's the basic premise of the book?

The premise of the book is to help people increase their awareness of their health, their eating habits, and the obstacles that interfere with achieving their weight and health goals. The book encourages people to eat real, unadulterated foods, balance poor eating with nourishing foods, balance rest with activity, balance stress with relaxation techniques, and take the necessary emotional and motivational steps that can help them achieve better health, have more energy, achieve their goal weight, and enhance their feelings of satisfaction.

What are some of the basic principles of *The Stubborn Fat Fix*:

The Stubborn Fat Fix encourages the use of healthy low carbohydrate diets to promote better eating habits, lower health risk factors and achieve weight loss. The book helps readers identify common medical and environmental barriers that interfere with their ability to lose weight. The diet, nutritional supplementation, exercise and relaxation techniques are encouraged to help repair readers' underlying medical condition(s) and lose their “stubborn fat.”

Many experts and consumers may think your book sounds like a reincarnation of sorts of the high protein, low carb approach of the late, famous (and infamous) Robert Atkins Atkins-type book; how is your book different from what Atkins advocated?

I should only be so lucky to have as many people read *The Stubborn Fat Fix* as have read Dr. Atkins' book. *The Stubborn Fat Fix* is similar to the Atkins diet in that it taps into the body's natural ability to burn fat, burning fat from both food and body fat, as a prime source of energy. The difference is that my book:

*isn't just a diet; it's educational (for example, it teaches people how to read labels) and empowers people to make better food and lifestyle choices;

*it involves the reader in identifying “metabolic overdrive” and the medical conditions that make it difficult to lose weight but respond to a low carbohydrate nutritional approach; and

*it provides more carbohydrates for added flexibility, variety, fiber and antioxidants.

Can you briefly explain the two levels of carbohydrates your plan provides?

On Level 1, up to 50 grams of healthy carbohydrates come from 6-8 servings of fruit and vegetables (in line with the National Fruit & Vegetable Program and the new guidelines recommended by the Dietary Guidelines for Americans—2 to 6 1/2 cups of fruits and vegetables a day or the equivalent of 4 to 13 servings). Nutrient distribution as a percentage of calories is 10% carbs, 30% protein and 60% fat.

On Level 2, carbohydrates range from 51-150 grams (nutrients are distributed as a percentage of calories: 20% carbs, 30% protein and 50% fat). The carbohydrate level is determined and based on readers' medical condition(s), age, gender and activity level.

On Level 1, ALL food groups can be included and estimated fiber intake ranges between 15-20 grams or 30-40% of total carbohydrate intake. On level 2, fiber intake ranges between 20 and 30 grams. Level one:

*teaches people how to transition from eating fewer carbohydrates to eating more (as carbohydrate servings are added, fat servings are lowered);

*allows for a built-in "indulgence" so people can "cheat" and still stay on plan; and

*details key lifestyle factors including exercise, stress reduction techniques and environmental factors to help support weight loss success.

The diet you advocate does contain many healthful foods, but it's obviously not in line with current Dietary Guidelines for Americans. What would you say to those who support the science-based dietary guidelines for Americans and think your plan lacks in certain foods/food groups?

I'm not sure why there would be a presumption that my book "lacks certain food groups". So first I'd ask if they actually took the time to read *The Stubborn Fat Fix*. If so, they would know that all food groups are included and the diet plan is supported by science (see below "science supporting low carb diets").

Why the Dietary Guidelines for Americans does not include the existing science that supports low carb diets in its guidelines is a question you'd have to ask the committee. Nonetheless, it's extremely concerning and very unfortunate for those who would benefit from this dietary approach and look to the governmental agency for guidance on a healthy eating plan. The Metabolism Society has written a peer-reviewed article appearing in the journal *Nutrition*, "calling the Dietary Guidelines Advisory Committee to task for failing to consider recent scientific evidence in support of low carbohydrate diets," <http://www.nmsociety.org/Default.aspx>.

I believe *The Stubborn Fat Fix* is healthier than the dietary guidelines put forth by The 2010 Advisory Committee because low fat foods are not necessarily healthy. For example some low fat foods are eliminated on my plan because they are processed and commercially prepared items that add trans fats, corn syrup and other non-essential ingredients to make fat-free high-carbohydrate foods (cold cereals, fat free yogurt, pretzels, etc...) shelf stable and taste better. Yet, vegetables that are low in fat are, in fact, included on my plan because they are nutrient dense.

What would you like to tell the naysayers about your book—why should consumers read and follow your book, and why should experts support the ideas you promote in the book?

Consumers should read and follow the nutrition plan because:

*the book was written to be your "buddy" and to help support emotional and social barriers that get in the way of sticking to a diet plan;

*the recommended foods are real whole foods that taste delicious;

*it's flexible, provides quick reference tips and is easy to incorporate as part of a healthy lifestyle;

*the food options are rich in vitamins and minerals, provide nourishing carbs that contain fiber and antioxidants, adequate protein and healthy fat to stave off hunger and provide health benefits;

*it explains why you may be having difficulty losing weight and provides insight into how to help get the results you seek

*after reading the book, readers will become educated "food" consumers.

Experts should read and follow the nutrition plan because:

*low carb diets have been given a bad "wrap". While some may disagree with some low carbohydrate diets, experts should use their expertise to determine which of these nutrition plans you might consider for clients that may prefer this type of eating plan or may have improved clinical outcomes that occur when carbohydrates are lowered (ie triglycerides and blood sugar) instead of ruling out all low carb diets. This open-minded approach will broaden your ability to help clients who may not be doing well on other diets;

*the percentage of carbs on *The Stubborn Fat Fix* is low because when higher carbohydrate food choices (15 g) are replaced with non-starchy vegetables (5g), the carbs are automatically reduced by 1/3. The *Stubborn Fat Fix* is based on whole foods, so 100 calorie snack packs are not recommended because of the ingredients. But something like celery with peanut butter is an option and would be similar in calories, lower in carbohydrates, contain heart healthy fat, provide more fiber and likely be more filling. Replacing conventionally-made toast (that contains too many preservatives like corn syrup) with either a side of spinach or a "recommended" bread will also lower carbs and certainly NOT make the daily plan on my diet less nutritious or less healthy than a low fat diet;

*the book goes beyond diet and attempts to guide readers on personal, social and other lifestyle issues that interfere with eating well. It outlines the importance of prioritizing dietary changes and making behavior changes. The book educates readers on how to stay motivated despite falling off plan, "how to" read labels and discusses many topics that any nutrition expert would believe imperative to attaining nutrition goals;

*according to The Position on Weight Management from the American Dietetic Association (*J Am Diet Assoc. 2009;109:330-346*), carbohydrate restriction "may help with diet adherence by reducing physiological hunger." The position recognizes that initial concerns regarding cardiovascular risk factors with low-carbohydrate diets have not been found;

*nutritional genomics (5-7) and the metabolic impact of how macronutrients (fat and carbohydrates) are handled differently in the body with various levels of macronutrient consumption, personal food preferences and lifestyles and a greater capacity to contribute to the successful treatment of obesity (8), type 2 diabetes (9) heart disease (10) and metabolic syndrome (11) are plausible reasons for registered dietitians and other health experts to consider evolving low carbohydrate diets like *The Stubborn Fat Fix* as an option in providing medical nutrition therapy;

*using the body's natural lipolytic pathway (fat metabolism) is much safer than popping pills or undergoing surgery and is certainly better than not providing any alternative for conventional diets that are not working.

There is NO argument that lowering fat is the prudent thing to do when carbohydrate consumption is high. It is no secret that a calorie laden, high carbohydrate, high fat diet is at the core of obesity and many chronic diseases. However, when carbohydrates are lowered to the extent that the body is using a lipolytic pathway (fat metabolism) instead of carbohydrate metabolism, fat from ingested food and from the body's adipose tissue is burned and used for energy much like in an endurance athlete. When it takes 30 minutes of aerobic exercise for someone to start burning a higher percentage of fat while following a high carbohydrate diet, fat is immediately burned upon initiating exercise when following a low carbohydrate diet.

What would you say is a reasonable weekly weight loss people should expect following the diet and do you consider this a safe rate of weight loss?

In my experience with *The Stubborn Fat Fix*, a reasonable or "safe" weight loss would depend on the person. I find that young obese males and females can lose up to 14 pounds in 2 weeks or on average 1 pound/day. They're not dehydrated (we monitor for symptoms of dehydration), they don't complain of muscle cramps (or have any complaints), they're happy and are full of energy. So, for them, I believe their bodies are happy to not be schlepping around extra pounds. Others who have less weight to lose or women who are experiencing hormonal fluctuations or those who are taking certain medications may not lose more than 1/4 pound per week, and this is reasonable for them. So, as long as a client stays hydrated, follows the plan, and makes behavior changes, they themselves dictate the definition of a reasonable weekly weight loss.

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*Since our interview, Ms. Berkowitz review article called "Low-Carbohydrate Diet Review : Shifting the Paradigm" was published in *Nutrition in Clinical Practice* (Jun, 2011;26(3):300-8).

Would love to hear your thoughts...

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