AN EXPLANATION OF PHASE 3 OF THE IDEAL PROTEIN WEIGHT LOSS METHOD

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Phase 3: Introduction

Phase 3 is a concept unique to the Ideal Protein Weight Loss Method and arguably the most important part of the Ideal Protocol. This phase *always* lasts for 2 weeks (14 days) with the exception being of clients who are engaged in the *Cellulite Protocol.* In this specialized protocol, only 7 days of Phase 3 are required. This phase is very simple as the *only* difference between Phase 2 and Phase 3 is the morning meal. There are three major objectives in this Phase and successfully meeting them will almost certainly guarantee the client long term success in his/her lifetime weight management. These are:

1. **"Re-start" the pancreas' production of insulin** and actually "train" the organ to produce the correct amount of this hormone in response to the carbohydrates that are consumed. In other words we are going to address the problem of *hyperinsulinemia,* a condition which many experts feel is the root cause of *Metabolic Syndrome/Syndrome X.*

2. **Provide a transition** from a weight loss protocol to a weight maintenance protocol. Most diets go directly from their weight loss mode to the maintenance phase as far as calorie consumption is concerned. These types of programs, we feel, promote "food storage" rather than "food burning". In simple terms we will slowly increase the caloric intake so our metabolism can keep up with the increased fuel. Losing muscle mass during the weight loss phase and failing to slowly increase calories to a maintenance level are major reasons for the "yo-yo dieting" so typical in most popular programs.

3. **Education.** At some point during Phase 3, and the first two weeks of Phase 4, the client will experience a "one time" weight gain, as their glycogen stores are replenished. This can vary between 1 to 2 kg, depending on the sex and body size. The "coach" must share that this is *NOT* fat, and explain the physiology as to why this occurs (and that they may continue to lose cm). This is also the appropriate time to dispel such myths as: "My thyroid must be shot; I gained 1.5 kg the day after Thanksgiving!" This is also a good time to address the notion of "resetting the pendulum" (i.e. the pancreas) every year. The client must understand that the body is an extremely efficient machine and that gaining a little weight over a year is a "natural process", not something to stress about. Explain to them that they now have a tool whereby weight (and all the problems associated with it, e.g. hypertension, hyperglycemia, bad cholesterol, etc.) will never have to be an issue in their lives again! This is very empowering and is the true gift of the Ideal Protein Weight Loss Method.

Resetting the Pancreas

Remember, the *only* meal we are changing in Phase 3, from Phase 2, is breakfast. Lunch and dinner will be exactly the same as they were having in Phase 2 as well as the evening protein snack. Breakfast in Phase 3 will consist of the following: Complex carbohydrates from two sources, fruit and grains. They will also get a serving of protein and one of fat / dairy. Lactose and gluten intolerant folks as well as vegetarians don't worry, we have suggestions for you! Now, I didn't want to get into counting grams and calories but for simplicity's sake and to make sure *everyone is on the same page and the protocol is followed exactly by every clinic,* here are your guidelines for the 2 weeks of Phase 3:

GRAINS No more than 30 grams of carbohydrates.

FRUITS No more than 20 grams of carbohydrates.

PROTEIN Aim for at least 25 grams, more is OK. Remember, these are whole proteins, not the highly absorbable isolates in Ideal protein foods.

DAIRY No more than 120 calories (237 ml) of low fat plain yogurt.

FAT No more than 15 grams of total fat per day (you'll have to look at the grains, protein and dairy and add the grams of fat, you can make up the difference with butter (not margarine), coconut oil or other "good oils" (olive, grape seed, peanut butter, almond butter, etc.).

These guidelines will help create a breakfast containing between 400 - 500 Kcals.

The mechanism by which we "reset the pancreas" goes like this: when we eat these carbohydrates our blood sugar rises. The pancreas then secretes some insulin, but very little is required to lower the blood sugar now. This is because our muscles and liver are depleted of glycogen and, just like after a vigorous workout, our bodies want to replenish the glycogen and much of the glucose can enter the muscle cells *without needing the action of insulin.* Remember, during Phases 1 and 2 of the protocol, very, very little carbohydrates were consumed, and consequently very little insulin was produced. This period gave the cells of our bodies the required time to "re-gain their insulin sensitivity". Now when they see insulin they respond to its presence instantly.

Bottom line is that very little insulin is now required to facilitate glucose uptake and the pancreas no longer needs to "keep pushing insulin" in order to regulate blood glucose control. Remind them of the initial consult you had with them. "Remember that skinny friend of yours we talked about, and how he or she has a pancreas that works great? That's why he/she can eat what they want, but don't gain weight, while you 'just smell the donut' and gain 1 kg. Well, guess what, we just made you like her!"

Well That Sounds Interesting, But Do You Have Any Clinical Studies?

No not yet, but what we have are hundreds of individual cases from scores of medical clinics around the world that all show the same results. Upon completing the program all show normal fasting glucose levels, stellar lipid panels and fasting insulin levels usually less than 2 micro-units/dl (prior to starting the program most insulin levels where above 9 mu/dl, with many much higher). These results are predictable and repeatable and the change in fasting insulin levels show we really do "re-set the pancreas"! My own case illustrates that these are truly lasting results. Four years ago I lost 23 kg on the program. My fasting glucose was 105, lipid panel fairly crummy (total cholesterol 245, HDL 45 with a TC/HDL ratio of 5.4 - bad). Blood pressure was 147/89 and my fasting insulin was 9.2. After four years of 'eating well' and enjoying myself I was able to keep 85% of the weight off, moreover my blood work continues to be stellar. As of a month ago: Total Cholesterol 176, HDL 65, LDL 88, TC/HDL = 2.7 (awesome!) fasting insulin level below 2 mu/dl and blood pressure was 110 / 77. Fasting blood glucose was 89. Before Ideal Protein, I was on the fast track to becoming a Type II diabetic and/or having a cardiac event. Risk factors for these have been completely reversed due to our dietary protocol. Basically we are treating a problem caused by food with food. In other words, "let your food be your medicine"...what a concept!

DE-MYSTIFYING THE FEAR: "If I eat all that, I'll gain it right back!"

Remember the anxiety that many of your clients had when you moved them from Phase 1 to Phase 2? Well imagine what's going through their minds when you tell them to start having breakfasts containing 400 to 500 calories "with lots of dreaded carbohydrates and fat!" We must allay their fear and explain precisely why they won't gain the weight back and make sure *they understand this!*

OK, here's the scenario: "Sally", your client, is one of those individuals who is fixated on a certain weight. She doesn't care about centimeters (so she says) or percent body fat, or anything else. All she wants is the scale to say 53 kg when she gets on. You took her to 53 kg on Phase 1, then transitioned her to Phase 2 in order to lose an additional 1.4 kg, which will come back on once we replenish her glycogen stores. You explained that she is going to store about 300 grams of glycogen in her muscles and liver, and that 4 grams of water are attached to each gram of glycogen so that sometime during Phase 3 or the first 2 weeks of Phase 4 she will see a *one- time weight gain of 1 to 2 kg...and that this is not fat and she will probably continue to lose centimeters.* About this time you are getting '*the look'* from her like you have two heads and so inquire "What's the matter?" "Well when I was on Phase 1 you said I was getting about 750 calories and I was losing pretty much 1.4 kg per week. Then you increased the calories to about 1100 per day and

I only lost .4 to .75 kg...less than .5 kg last week! Now you want me to eat 400 to 500 calories more at breakfast, well that means *I'm going to gain weight, just like every other diet I've been on, once I stop "the diet part" I gain the weight right back!".*

OK 'Coach', it's time to pull out a pencil and piece of paper and ask: "Sally, do you remember how many calories it takes to make .5 kg of fat?" Hopefully she'll remember and answer "3500 calories make about .5 kg of fat". "Right, so if you lost .5 kg last week, how many calories did you lose?" Again, hopefully she'll answer "3500 calories". "OK Sally, so how many calories per day did you lose if you lost 3500 in 7 days?" (Give her a hint if necessary: 3500 divided by 7 days = 500 calories per day). "So now I'm telling you to eat 400 to 500 more calories per day, what do you think is going to happen?" Of course the correct answer is "I'm going to stop losing weight or maybe even lose a tiny bit more". Welcome to the beginning of a maintenance program! Make sure they absolutely, positively understand that it's impossible to gain weight when we move them into Phase 3!

Dispel another Great Myth about Weight Gain

The Holidays are a great source of stress and anxiety for folks who have struggled with their weight. It is our job to alleviate this fear by making sure they understand what happens when they overindulge. Incidentally this is a great segway to again mention the notion of re-setting the pancreas every year after the Holidays. So while you have your pencil and paper out, ask 'Sally': "Tell me, did you think you can gain 1.4 kg after Thanksgiving or Christmas Dinner?" She might answer: "I gain some weight but my husband always gains about 1.4 kg. Now you ask again about how many calories it takes to make a .4 kg of fat (3500), so 1.4 kg would be 10,500 calories. Tell her that that's not all. Say even if your husband's metabolism "was in the tank" he'd still have a BMR (basal metabolic rate) of around 1500 calories per day. That means to gain 1.4 he would have to eat 10,500 calories plus 1500 calories to offset what his body burnt that day. The grand total would be 12,000 calories consumed in order to put on 1.4 kg! She might say "Yeah, he probably does. We have Christmas cookies and candy all over the house, we make eggnog and the neighbors always bring stuff over plus we have a big dinner with wine and desserts and after dinner drinks, so yeah, during the day he probably eats that much".

Try not to laugh, but put this into perspective for her. A regular lager beer contains about 125 calories, so does a really decadent Christmas cookie. So if during the day "hubby" drank a case of beer or ate 24 big cookies that would be 3,000 calories (only 9,000 to go!). Now 3,000 calories is a FULL DAY'S worth of food for a large man. That

means in addition to the two dozen beers or cookies, he would have to eat a full day's worth of food for breakfast AND lunch AND dinner! Of course this is impossible. Actually there are probably only two types of people who could come close to doing this. Sumo wrestlers, when training, have a very precise daily regimen of eating, sleeping and exercising. They will consume 9,000 to 10,000 calories per day to put the "needed weight on". Incidentally, this is subcutaneous fat and they do not suffer from diabetes or cardiovascular problems (very interesting physiology here). The other type are the morbidly obese folks weighing from 225 to 450 kg. These people have stretched their stomachs and intestines to such an extent through years of abuse that they can actually eat that much per day.

So now ask her: "What does that 1.4 kg, that shows on the scale the next day, really indicate?" The answer is all of the food that is still in the intestines, all of the fluid/water consumed (the more we eat the more we have to drink in order to digest) and the fluid that is retained due to all the salt that was consumed eating rich foods and desserts. It is truly amazing how many people think they can gain a kilogram due to one day's extravagance! Please address this with your dieter.

The Physiological Principle behind Phase 3

As stated before, we are going to "wake-up the pancreas" and train it to produce the correct amount of insulin. To do this we are going to eat our “carb-load" only during the morning meal. It is extremely important that this breakfast <u>is consumed at one sitting!</u> That is do not eat your eggs and fruit at breakfast and take your yogurt to the office to have as a ten o'clock snack. All of the food that is on your breakfast menu MUST be consumed at breakfast! The reason for this is we only want insulin to be secreted once a day. After spiking, the insulin levels will fall and if we do not eat any other carbohydrates, as the blood sugar drops, glucagon and other substances (like nor - epinephrine) will be produced and these will enhance "catabolism" (the breakdown of fats, proteins and glycogen). In other words we are enhancing the "burning phase of metabolism", whereas insulin promotes "anabolism"...the storage of nutrients. This is how we are going to ramp up the dieter's calorie burning capacity. Also we only want the cells to "see insulin" once a day so as to prevent them from reverting to insulin resistance. This is especially important in those persons who were Type II diabetics or the ones with poor blood sugar control (really insulin resistant). This is why so many other diets fail after the weight loss phase; they don't give the body time to adjust to the sudden increase of food. In Phase 4 our physiological principle will be that of "dissociation", that is the separation of carbohydrates and fats which we will explain to the dieter after they complete Phase 3.

COACHES

I strongly suggest you review and then give this document to your dieters the week before they start Phase 3. Ask them to "plan out" the "Phase 3 breakfasts" that they would like have. Have them go to the store and write down the nutritional facts of foods' ingredients (grams of fiber can be subtracted from total carbohydrates). Meals should consist of 30 g or less of grain carbohydrates, 20 g (or less) of fruit carbohydrates, 15 g (or less) from dairy carbohydrates. Aim for about 25 g of protein, and try to keep total fat less than 15 g. Breakfast should be between 400 and 500 calories in Phase 3.

Nutritional Values of Some Common Foods

GRAINS	**Serving**	**Carbohydrates**	**Protein**	**Calories**
Arnold Rye	1 slice	14	2	80
Wonder Bread	1 slice	14	2	70
7 Grain Bread	1 slice	13	3	60
Stone Ground Wheat	1 slice	10	4	50
Arnold Carb Balance	1 slice	8	5	50
Quaker Oatmeal Pancake mix (makes 2- 4)	1/3 C dry	27	2	150
Quaker 5 minute Grits	1/4 C. dry	29	3	130
Thomas' Hearty Grain English Muffin	1 muffin	23	6	120
Alpen unsweetened Muesli	1/3 Cup	20	3.5	100

FRUITS	**Serving**	**Carbohydrates**	**Protein**	**Calories**
Blueberries	1 cup	20	4	80
Strawberries	1 cup	10	3.3	43
Raspberries	1 cup	14	8	60
Blackberries	1 cup	18	7.1	75
Honeydew	1 c. pieces	10.6	3	44
Banana	1 Medium	27	3	108
Peach	1 Medium	10.8	2	42

DAIRY	**Serving**	**Carbohydrates**	**Protein**	**Fat**	**Calories**
1% Milk	237 ml	12	8	2.5	100
Soy Milk	237 ml	8	7	4	100
Almond Milk	237 ml	8	1	2.5	60
Philly 1/3 less Fat Cream Cheese	2 TBSP	2	2	6	62
4% Cottage Cheese	237 ml	3	15	5	110
Butter (1 pat)	1 Tsp	0	0	3.7	33
Low-Fat Organic Yogurt	237 ml	15	10	2	120
"Veggie Cheese"	1 slice	2	6	4	68

PROTEINS	**Serving**	**Carbohydrates**	**Protein**	**Fat**	**Calories**
Egg (Large)	1 Egg	6	4	4	70
Egg whites (100% liquid egg (whites of 4 eggs)	4 Eggs ¾ cup	3	18	0	90
Bacon- Oscar Mayer- regular cut	3 pieces	0	6	9	105
Ham Steak	½ steak	2	14	4	100
Ham Steak- Jones Brand	207 ml	2	14	4	100
Nova brand Lox	60 ml	0	12	6	100
Peanut Butter	1 TBSP	3	4	8	
Franklin Farms Veggie Burger	1 patty	10	12	2	110
Franklin Farms Portobello Burger	1 patty	9	14	2	110
Smart Deli (soy) Baked Ham	4 slices	3	12	1	70
Franklin Farms “Soyrzio’	1 sausage	5	7	9	120

SAMPLE MENUS

"The All American"

1/2 grapefruit, 2 eggs any style, 3 pieces of bacon, 2 slices stone-ground wheat toast, butter, coffee or tea.

"The Country Boy"

1 cup of mixed melon (cantaloupe/honeydew), 2 (4") Quaker Oatmeal pancakes with Pecan halves, 1 small smoked pork chop (fat trimmed off), IP Maple syrup, 237 ml of 1% milk, coffee or tea.

"The Country Boy 2"

1 cup of blueberries, 2 eggs any style, 1 serving of Quaker Brand 5 minute Grits, 3 pieces of bacon, 237 ml 1% milk, coffee or tea.

"The Ragin' Cajun" (here ya 'geaux' Dr. Craig!)

1 cup of cantaloupe, 2 egg + 3 egg white omelet, 1 (85 grams) piece of Andouille or Boudin, 2 tablespoons of 'sauce Picante', 2 pieces of stone-ground whole wheat toast, butter, 120 ml of 1% milk, coffee or tea.

"The Nature Valley"

1 cup of mixed berries, 237 ml plain low-fat yogurt, 1/3 cup Alpen Muesli, 1 piece "Carb Balance" toast, 1 tablespoonful of almond butter, coffee or tea.

CONDIMENTS

Most commercial Salsa products are fine (watch fruit salsas like peach or mango, they may have too much sugar). Picante sauce and hot sauces, as well as mustards, are fine also. Coffee and tea creamers can be milk, Half & Half or use IP's protein drinks or puddings. NEVER use "non-dairy" coffee creamer, as these are Hydrogenated Oils...and are metabolic poisons! Sweeteners can be Splenda, Stevia, Truvia, or Xylitol.

NOTE: Stay away from fruit juices and dried fruits! These are concentrated sources of sugar. If the dieter craves juices, suggest the IP products....like half of a Peach/Mango or Pineapple Banana drink. As a great training exercise, go over these menus and pencil in the carbohydrates, fats, protein, fiber (if available) and total calories. HAVE YOUR DIETERS DO THIS! For fun, have them create a "Phase 3" Egg McMuffin Breakfast!!!