

# Fasting 20–120 Hours: What Happens in Your Body?

## **Introduction to Fasting and Metabolic Changes**

Fasting means consuming **zero food** for a period of time – only water (and non-caloric drinks like black coffee or tea) 1. When you stop eating, your body gradually shifts from burning the fuel from your last meal to tapping into stored energy. For a healthy 25-year-old (like yourself), this transition brings **several stages of metabolic change** that can influence **fat loss, muscle tissue, energy levels, mood, and overall health**. Below, we break down what happens during different lengths of fasting, explain key concepts (in simple terms), and discuss the benefits *vs.* costs of fasting and extreme diets for your goals (current fat loss and future muscle gain).

**Key point:** In a fasted state, your body first uses up available blood sugar and glycogen (stored carbohydrate), then switches to burning fat and producing **ketones** (energy molecules from fat) for fuel <sup>2</sup>. This metabolic switch also triggers hormonal and cellular responses – like the release of growth hormone and the activation of **autophagy** (your cells' self-cleaning process) – that underlie many purported benefits of fasting <sup>3</sup> <sup>4</sup>. We'll explain each of these in detail, along with how exercise, severe calorie restriction, and diets like carnivore, vegan, or ketogenic compare in their effects on your body.

# What Is Autophagy?

**Autophagy** (pronounced "ah-TAH-fuh-jee") is your body's cellular **recycling and cleanup process**. The word literally means "self-eating," and it describes how cells break down and **reuse old, damaged components** <sup>5</sup> <sup>6</sup> . Think of it as a built-in repair system: cells digest dysfunctional proteins and organelles (cell parts) and either dispose of them or recycle the pieces to build new components <sup>6</sup> <sup>7</sup> . This clearing-out of cellular "junk" helps cells work more efficiently and has several benefits:

- **Cellular Repair & Renewal:** Autophagy removes debris and damaged structures, allowing cells to **function optimally** <sup>8</sup> . It's like taking out the trash so the cell's machinery runs smoothly.
- **Inflammation Control:** By eliminating old "senescent" cells (sometimes nicknamed "zombie" cells because they don't function right and secrete inflammatory signals), autophagy can **reduce chronic inflammation** in the body
- **Disease Prevention:** This process helps prevent the buildup of toxic proteins. Early research links autophagy to protection against neurodegenerative diseases (like Alzheimer's) and cancer, by removing precancerous cells and protein aggregates 10.
- **Healthy Aging:** Autophagy tends to decline with age, so keeping cells clear of junk via autophagy is thought to **support longevity** and healthier aging 11 12.

What triggers autophagy? Autophagy ramps up when cells experience stress from lack of nutrients – notably during fasting. In the absence of incoming food, your body's cells sense low energy and switch on autophagy to start scavenging internal resources for fuel 13 14. Other triggers include intense exercise and certain diets (more on those later) that mimic fasting signals 15. Essentially, when you're not feeding your body, it "eats" its own stored components – prioritizing defective or unnecessary parts – for survival, which has the side-effect of cellular housekeeping.

How long must you fast for autophagy? Autophagy isn't *instant*; it takes some time without food for it to significantly activate. Animal studies suggest autophagy begins to increase **around 24–48 hours into a fast** <sup>16</sup>. In humans, the exact timing varies, but a **full day or more of fasting** is likely needed to kick off substantial autophagy in many tissues <sup>16</sup>. It may start on a small scale after ~16–20 hours in some people (especially if they're already on a low-carb or ketogenic diet) <sup>17</sup>, but tends to **ramp up strongly after the 24-hour mark**, reaching higher levels by the second day of fasting <sup>3</sup> <sup>18</sup>. Autophagy peaks somewhere during **48–72 hours of fasting** as the body remains in survival mode <sup>19</sup>. (Beyond 3 days, it may continue at a high rate, but fasting this long should be done with caution – we'll discuss safety later <sup>20</sup>.)

In short, autophagy is a *major benefit* of longer fasts: it's a deep-clean of your cells that can help in **fat loss (by consuming fat and protein stores), injury repair, and possibly longevity.** We'll mention autophagy's timing again in the fasting timeline below. For now, remember it's **a self-cleaning program** that **fasting** (and ketosis) can activate – turning on **"survival mode" maintenance** in your body.

## **Timeline: What Happens When You Fast (Hour by Hour)**

Your body's response to fasting goes through **predictable stages**. Below is a timeline of what typically happens in a **healthy adult** during different fasting durations. (Exact timing can vary based on your last meal composition, your metabolism, and activity level, but this gives a general guide.)

- **0-4 Hours: Fed State (Digestion and Absorption).** In the first hours after a meal, your body is busy digesting. Blood glucose (blood sugar) rises from the carbohydrates, and **insulin**, a storage hormone, is released from your pancreas to help move that glucose into cells for use or storage <sup>21</sup> <sup>22</sup>. You're running on the fuel you just ate. **No hunger** is felt initially, and your body is in "growth/anabolic" mode using incoming nutrients to build and store (for example, storing excess energy as glycogen in liver and muscle, or as fat if glycogen stores are full) <sup>23</sup> <sup>24</sup>. During this time, **autophagy is OFF** (insulin signals plenty of food, so cells don't need to recycle internally yet) <sup>25</sup>.
- 4-12 Hours: Early Fasting (Glycogen Utilization). This phase is sometimes called the *post-absorptive* or *catabolic* phase <sup>26</sup>. As you finish digesting your meal and no new glucose is coming in, your body starts **breaking down glycogen** the stored form of carbohydrate to keep blood sugar steady <sup>27</sup> <sup>28</sup>. Glycogen is basically many glucose units chained together, stored primarily in the liver (and some in muscles). Over these hours, **insulin levels fall** and **glucagon** (another hormone) rises, which together signal the liver to begin releasing glucose from glycogen <sup>27</sup> <sup>25</sup>. You might start to feel **mild hunger** pangs as your stomach empties and blood sugar dips from its post-meal high <sup>29</sup>. **Energy levels may fluctuate** a bit as your body transitions to using stored fuel <sup>29</sup>, but generally you can function normally. By the end of this stage (around 12 hours without food), **liver glycogen is being depleted**. In an average person, the liver's glycogen supply lasts roughly 24 hours or less <sup>30</sup>, so even by 12–16 hours you're significantly using it up. **Autophagy** may *begin at low levels* toward the end of this window, especially if you're accustomed to fasting but it's not yet a major player <sup>17</sup>.
- 12–24 Hours: The "Metabolic Switch" From Carbs to Fat. Around the 16-hour mark (give or take a few hours), many people enter a deeper fasting state. At this point, blood glucose has fallen to the lower end of normal and most liver glycogen is nearly exhausted <sup>30</sup> <sup>31</sup>. To maintain blood sugar for the brain and red blood cells (which need some glucose), your body ramps up a process called gluconeogenesis literally "making new glucose" from other sources.

This means the liver begins converting **amino acids** (from broken-down proteins) and **glycerol** (from fat breakdown) into glucose <sup>32</sup> . Meanwhile, with insulin very low, **fat stores are unlocked for use**: fat from adipose tissue (body fat) is released into the blood as **free fatty acids** <sup>33</sup> . These fatty acids get taken up by the liver and **converted into ketone bodies** (**ketones**) – an alternative fuel for your cells <sup>34</sup> <sup>35</sup> . This period is often called the **"metabolic switch"**, as your body transitions from primarily glucose metabolism to **fat and ketone metabolism** <sup>28</sup> <sup>36</sup> . By 18–24 hours fasted, **ketone levels in blood are noticeably rising** (often reaching about 0.5 mM, which is the threshold of nutritional ketosis) <sup>2</sup> . Many people report a clear-headed or even euphoric feeling as ketones start fueling the brain, providing a steadier energy supply than rapidly fluctuating glucose <sup>3</sup> . **Autophagy is now active:** by 24 hours without food, studies indicate your cells have significantly ramped up internal recycling, clearing out old proteins and damaged components for fuel <sup>3</sup> <sup>4</sup> . You can consider **24 hours** of fasting as a *critical milestone*: **insulin is very low** (facilitating fat burning), **growth hormone is spiking up**, and **cellular cleanup (autophagy)** is well underway <sup>37</sup> .

- 24-48 Hours: Deeper Fasting (Ketosis and Surge in Growth Hormone). Going into the second day of fasting, your glycogen is essentially gone 30 and your body is now running almost entirely on stored fat for energy (aside from the glucose your liver can manufacture). Ketone **production** in the liver kicks into high gear – by 48 hours, blood ketones (β-hydroxybutyrate) often reach ~1–2 mM <sup>2</sup> . This is a level where the brain is getting a substantial portion of its fuel from ketones instead of glucose. As a result, many people experience reduced hunger by this point: high ketone levels are known to suppress appetite (they lower the "hunger hormone" ghrelin) <sup>38</sup> <sup>39</sup> . In fact, if you can get through the first 1–2 days, hunger typically *decreases*, and mood/mental clarity often improves on day 2 thanks to steady ketone fuel and elevated adrenaline. Indeed, the body produces more norepinephrine (adrenaline) during short-term fasting, which helps mobilize fat and can make you feel alert [40 41]. Growth hormone (GH), an anabolic hormone that helps preserve lean muscle and prompts fat breakdown, skyrockets during this period of fasting - research in men shows GH may increase by 4-5 times above **normal by the 48-hour fast mark** 42 . (GH rises to protect muscle and maintain blood glucose). This hormone surge, along with ketones, helps minimize muscle protein breakdown at this stage 42 4. Meanwhile, autophagy is at its peak by about 48 hours: your cells are aggressively cleaning house, repairing and recycling proteins 18. This is sometimes called the stage of "deep cellular repair" (43). Benefits like reduced inflammation become more pronounced now, as autophagy clears out many pro-inflammatory elements (43). Some where in the 2–3 day window, studies (in mice and in humans undergoing chemotherapy) even suggest that the immune system begins regenerating - the body clears out old immune cells and signals the stem cells to create fresh new immune cells upon refeeding 44 45. In sum, by 48 hours you are in full ketosis, feeling relatively energetic/clear-headed, burning fat rapidly, and undergoing a cellular "deep cleanse."
- 48–72 Hours: Prolonged Fast (Immune Reset and Conservation Mode). Fasting for 3 days (72 hours) is a prolonged fast that few people attempt regularly, but it has some notable effects. By the third day, ketones may reach 5–7 mM in blood <sup>2</sup>, a very high ketosis level (but still safe far below diabetic ketoacidosis). You're almost exclusively burning fat/ketones for energy, with only a minimal amount of glucose being made from protein or glycerol as needed. Autophagy remains in high gear, continually clearing out defective cells and proteins some researchers say a 72-hour fast can "reset" parts of your immune system, as mentioned, by culling old immune cells and allowing new ones to be built when you eat again <sup>44</sup> <sup>46</sup>. In fact, one study on chemotherapy patients found that a 3-day fast caused a burst of new white blood cell production after the fast, indicating immune regeneration <sup>44</sup>. Inflammation in the body is significantly reduced by this time, since autophagy has removed many damaged components

that trigger inflammatory reactions <sup>43</sup> <sup>47</sup>. Many people at 72 hours report a great sense of **mental clarity and even euphoria** – the combination of high ketones, high endorphins, and certain neurotransmitters can produce a calm, focused state. On the flipside, the body also starts to become **more cautious with energy** around day 3: levels of the thyroid hormone T3 may begin to drop, and **metabolic rate may start to slightly slow down** as your body senses prolonged absence of food (entering an energy-conservation mode) <sup>48</sup>. Stress hormones like **cortisol** might elevate to maintain blood glucose, which can have the side effect of breaking down some muscle protein (more on muscle loss later) <sup>49</sup> <sup>50</sup>. Generally, however, if you have ample body fat, your **muscle loss is still kept low at this stage**, because fat supplies most of the energy and ketosis plus growth hormone are anti-catabolic (muscle-sparing) <sup>4</sup>. **Hydration and electrolytes** become very important by 3 days – as you continue to excrete water and salts, you must replenish water, sodium, potassium, etc., to feel OK.

• Beyond 72 Hours (4-5 Days and onward): Fasting past 3 days extends all the above processes, but also requires caution. By 96 hours (4 days) and 120 hours (5 days) of fasting, you are in a profound metabolic state that only therapeutic or experienced fasters undertake (often under supervision). Autophagy continues at a high rate, but may not increase much further - there's only so much cellular junk to clean up at once 20. Ketone levels might plateau around 7-8 mM by day 5 [51]. One benefit of going this long is that your whole immune system gets a full "reboot" - prolonged fasting can destroy many old immune cells and dysfunctional cells, and when you refeed, there's a surge of stem cell activity to rebuild a "fresh" immune system 46 47. This is being researched for potential benefits in autoimmunity and chemotherapy recovery. People also sometimes fast this long for maximum autophagy benefits in tissues (for potential longevity or disease prevention reasons). However, the costs/risks become more evident here: Your body really starts conserving energy - metabolic rate can drop significantly if fasting continues too long, as the body adapts to prevent excessive weight loss 52 48. You may feel fatigued or cold as thyroid hormones decline. Muscle breakdown will increase if body fat gets very low or if stress hormones remain high - at <5% body fat, the body has no choice but to break down muscle for fuel, which is why starvation (extremely prolonged fasting) leads to severe muscle wasting [53]. Nutrient deficiencies become a concern if micronutrients (vitamins, minerals) aren't supplemented - for example, lack of sodium, potassium, magnesium can cause irregular heartbeat or other issues. It's also common to feel **lightheaded** if you stand up quickly (due to low blood pressure from electrolyte changes). For these reasons, going beyond 5 days is generally not recommended without medical supervision 54 55. Most of the dramatic cellular benefits (fat loss, autophagy, insulin sensitivity improvements) have already been achieved by this point, and risks start to outweigh additional gains. Refeeding after a long fast must be done carefully to avoid "refeeding syndrome" (a dangerous electrolyte imbalance).

To summarize the timeline: **By 12–24 hours**, you enter ketosis and autophagy begins; **by 48 hours**, you're in strong ketosis, with high growth hormone and peak autophagy; **by 72 hours**, there's immune renewal and deep repair, but the body may start adapting metabolism downward. Fasts of **4–5 days** sustain autophagy but should be approached with caution. Different **fast lengths (20h, 24h, 36h, 48h, 72h, etc.)** will give a *gradient* of benefits: even a 20-hour fast (almost one day) will lower insulin and start fat-burning, but a 48–72 hour fast digs much deeper into cellular cleansing and ketosis. In practice, **intermittent fasts** of ~16–24 hours are common for health and weight management, whereas fasts of 2–3+ days are done more infrequently for maximal metabolic reset.

# Fat Loss During Fasting (and Weight Changes)

One of the main reasons people try fasting is **fat loss**. Fasting indeed can be a powerful tool for losing body fat – but it's important to understand how it works and what the "costs" are.

Caloric deficit: Fasting helps fat loss fundamentally by creating a calorie deficit – you're not eating, so your body must consume its stored calories (mainly fat) for fuel. Each day of complete fasting can create a deficit of anywhere from ~1,500–2,500 Calories (depending on your maintenance needs), which translates to roughly 0.5 kg (1 lb) of fat loss every 2–3 days if the body were to use only fat. In reality, fat loss during fasting is often about 0.2–0.5 kg (0.5–1 lb) per day after the first day <sup>56</sup>. If you see more weight drop on the scale, it's mostly water weight, especially in the first 1–2 days. This is because when your body burns through glycogen, it also releases water (each gram of stored glycogen carries about 3 grams of water with it) <sup>57</sup> <sup>58</sup>. So, early in a fast, people tend to shed a lot of water (you'll notice frequent urination). This can cause 1–2 kg of quick weight reduction that isn't fat – it will come back when you rehydrate or resume eating carbs. Real fat loss\*\* does occur too, just at a slower pace than the rapid scale drop might imply.

Hormonal boost for fat burning: Fasting changes your hormones in a way that favors fat burning. Insulin, the storage hormone, **drops sharply** (fasting insulin levels can decrease by 20–30% on average) <sup>59</sup>, which **removes the brake on fat breakdown**. Low insulin allows fat cells to release fatty acids easily to be burned <sup>60</sup> <sup>61</sup>. Meanwhile, **norepinephrine** (adrenaline) increases, which actively signals fat cells to liberate fat and also slightly raises your metabolic rate <sup>62</sup> <sup>61</sup>. **Growth hormone** spikes (as noted earlier, up to 5× increase by 48h) – GH also helps mobilize fat for fuel <sup>63</sup>. The net effect is a *hormonal cocktail ideal for fat loss*: during short-term fasts, your body becomes a fat-burning furnace, tapping into stored triglycerides (body fat) for most of its energy needs.

**Metabolic rate:** There's a common worry that not eating will make your metabolism "shut down." In the *short term,* this is **not true** – in fact, fasting for a day or two can **slightly increase** metabolic rate temporarily. For example, one study found a **3-day fast increased metabolism by ~14%** in men <sup>52</sup> <sup>64</sup>, likely due to the surge in adrenaline and noradrenaline. This means in the first couple days, your body actually burns a few more calories than normal, not fewer. However, with *longer fasting* (>3–5 days) or repeated prolonged fasts, metabolism will eventually **slow down** as an adaptation <sup>65</sup> <sup>54</sup>. This is the body's way of conserving energy in a perceived starvation scenario – thyroid hormones drop and muscle tissue might be sacrificed to reduce energy expenditure. Essentially, **short fasts boost fat burn without stalling metabolism**, but **very long fasts or extreme diets over weeks can lower metabolism** (often called "starvation mode" or adaptive thermogenesis) <sup>65</sup> <sup>66</sup>. The good news is, fasting *intermittently* (with refeeding in between) tends to preserve metabolism better than continuous daily calorie restriction <sup>67</sup> <sup>66</sup> – we'll touch on this later.

Where does the weight come off from? Primarily, fasting will reduce body fat (especially around the belly and organs). Studies on intermittent fasting show it's effective at reducing body fat while sparing most lean mass 68 69. Visceral fat (the unhealthy fat around organs) tends to be burned readily when fasting, which improves metabolic health. One study review noted alternate-day fasting showed decreases in visceral fat and was at least as effective as standard calorie cutting for weight loss 70. You will also lose some lean mass (fat-free mass) during fasting, but a good portion of that is the water and glycogen in your muscles and liver, not actual muscle fiber. True muscle protein loss is relatively small in short fasts (especially if you're not extremely lean to begin with), on the order of a couple hundred grams over a few days. Your body works to preserve muscle as much as possible, using fat and ketones for fuel and boosting hormones (GH, etc.) to defend muscle tissue 42 4. That said, some muscle breakdown does occur (more on this next), which is why resistance training and adequate protein between fasts are important if you want to retain muscle while losing fat.

**Bottom line for fat loss:** Fasting can create a sizeable calorie deficit, **draining your glycogen and then dipping into body fat** for energy. It lowers insulin and raises fat-burning hormones, making stored fat more accessible 71 61. Many people find they lose weight (especially fat) faster with fasting protocols than with just trying to eat less at every meal. Moreover, some find fasting **easier to adhere to** – it's

straightforward (you just don't eat for a while, rather than constantly restricting every meal), and it can reduce appetite after you get used to it, thanks to ketosis and perhaps changes in appetite hormones <sup>38</sup> <sup>72</sup>. However, individual results vary, and fasting is *not magic* – it works via calorie reduction and hormonal changes, so if one overeats during the eating windows, fat loss can stall. Used properly, though, fasting is a **powerful tool for fat loss** and can especially help break a plateau or accelerate fat burning, while also providing some unique health benefits (via ketosis and autophagy) beyond just calorie cutting.

### Muscle Mass, Exercise, and Fasting (Protecting Your Gains)

A common concern is **muscle loss** during fasting – understandably, because if you go without protein intake, might your body start eating its own muscle? The answer is that *short-term fasts (24–48h)* cause **minimal muscle loss**, especially if you take steps to protect your lean mass, whereas *longer-term or repeated extended fasts* can lead to some muscle atrophy if not carefully managed. Let's break down what happens with your muscles and how exercise factors in:

Muscle fuel vs. fat fuel: During a fast, your body ideally wants to use fat stores for energy, not muscle. Muscle protein is valuable (for movement, organ support, etc.), so the body doesn't tap into it heavily until it has to. Early in a fast (first 24 hours), about 90%+ of energy comes from glycogen and fat, with a small portion from protein (amino acids) via gluconeogenesis <sup>30</sup> <sup>32</sup>. As glycogen depletes by day 2, the body does increase protein breakdown *temporarily* to make glucose – this is when muscle tissue can be broken down into amino acids (like alanine) to feed the brain. However, once ketones are high (by day 2–3), the brain's demand for glucose drops significantly, and muscle breakdown actually slows down compared to the initial 48 hours. In other words, *paradoxically*, a well-established ketosis state spares muscle: ketones and fatty acids fulfill most energy needs, so fewer amino acids are taken from muscle for gluconeogenesis <sup>73</sup> <sup>53</sup>. Plus, the big rise in growth hormone during fasting helps preserve lean muscle – GH reduces protein oxidation and encourages fat use instead <sup>74</sup> <sup>42</sup>. One study on fasting noted that nitrogen losses (a measure of protein breakdown) were higher on the first day than on subsequent days of a fast, indicating the body adapts to reduce muscle protein use as fasting continues (to prevent excessive muscle wasting).

**How much muscle might you lose?** If you fast *without* any resistance exercise or protein refeed, a multi-day fast could cause a small percentage of weight loss from muscle. But it's much less than people fear. For example, several intermittent fasting studies (like 16:8 time-restricted feeding or alternate-day fasting) in combination with exercise show that **lean mass is largely maintained** <sup>69</sup> <sup>75</sup>. In young men who did 16-hour daily fasts but still did weight training and ate adequate protein in their eating window, **no significant muscle loss** was observed – they lost fat and kept muscle <sup>68</sup>. A review of IF + resistance training found it can **maintain or even gain lean mass while reducing fat** <sup>76</sup> <sup>77</sup>. On longer fasts (several days), there will be *some* muscle protein catabolism because you're not consuming amino acids at all. Estimates vary, but one classic study by Dr. George Cahill found that after 7–10 days of total fasting, the body's fuel still came ~95% from fat/ketones and only ~5% from protein – meaning muscle was largely spared until fat stores ran very low. It's usually only in *starvation* (weeks of no food) that muscle loss becomes pronounced, or if someone is very lean to begin with (little fat to burn). As a well-fed 25-year-old omnivore, if you try a 2–3 day fast, you should **retain most of your muscle**, especially if you don't do heavy exhaustive exercise during the fast. You'll quickly regain any lost glycogen/water in muscles upon refeeding.

Resistance training: One of the best strategies to protect (and even build) muscle while fasting is to do resistance exercise (weight training). Lifting weights provides a strong signal to your body that your muscle is "needed," which helps prevent muscle breakdown. Even though you aren't eating protein

at that moment, resistance exercise stimulates muscle protein synthesis (though to actually build new muscle fibers, you'll eventually need protein intake post-fast). Studies show that combining intermittent fasting with a **weight lifting routine** results in **fat loss with muscle preserved** – participants maintain lean mass and strength as long as total protein intake over time is sufficient <sup>76</sup> <sup>75</sup>. In fact, a study on time-restricted feeding (16:8) plus 8 weeks of lifting found the IF group lost more fat than a normal diet group, with no difference in muscle mass changes <sup>78</sup> <sup>79</sup>. Essentially, **lifting while fasting helps your body preferentially cut fat** and hold onto muscle. If your goal is to **gain muscle**, you'll obviously need to eat enough protein and calories (fasting too often or too long can impede muscle gain). But you can still use shorter fasts (like skipping breakfast or doing 1 meal a day occasionally) to control body fat while **resistance training to stimulate muscle growth**. Just ensure when you break the fast you **refeed with protein** so your muscles get the amino acids they need to rebuild.

**Fasted workouts (resistance vs. cardio):** Exercising during a fast can have special considerations:

- Strength Training in a fasted state: You can absolutely perform weight training while fasting (many people do morning workouts fasted). In a short fast (e.g. 16 hours), muscle glycogen in your muscles is still sufficient for moderate lifting. Some find they have good focus and adrenaline while fasted, enabling decent workouts. However, for heavy lifting or high-volume training, you might notice a slight dip in performance if you're low on glycogen, especially as you get deeper into a 24+ hour fast. The body can use fat/ketones for steady-state energy, but guick explosive movements primarily use glycogen/anaerobic energy. That said, fasted resistance exercise will trigger muscle growth signals just like fed exercise 80 79, and it may even amplify some cellular stress signals that are beneficial (some speculate it could enhance growth hormone response or AMPK activation, but the main point is it's not harmful to your muscles if done carefully). One important tip: if you lift while fasted, try to consume protein soon after your workout or at least that day in your eating window - this helps with recovery and muscle protein synthesis. Also, maintain good hydration and electrolytes during the workout since dehydration can reduce strength. Some choose to take branched-chain amino acids (BCAAs) or essential amino acids during fasting workouts to help prevent breakdown, though purists avoid them as they technically break the fast a bit (they have calories). In any case, listen to your body: if you feel lightheaded or weak, it's okay to skip intense exercise until you refeed. But generally, lifting during short fasts is fine and signals your body to keep muscle 80 79. During multiday fasts, intense lifting is not advised (you won't have the energy or recovery capability), but light bodyweight exercises or resistance bands can still be done to mitigate muscle loss.
- · Cardio (Zone 2) in a fasted state: Zone 2 cardio refers to moderate-intensity endurance training (where you can still talk in full sentences, roughly 60-70% of max heart rate). This intensity uses a high percentage of fat for fuel, and doing it in a fasted state can enhance that effect. In fact, studies show that aerobic exercise performed after an overnight fast burns more fat during the workout than the same exercise done after eating 81. With insulin low and glycogen limited, your muscles adapt to pull energy from fat stores, which over time can increase mitochondrial efficiency and fat-burning capacity 82 83. Athletes sometimes train in low-glycogen conditions ("train low" strategy) to stimulate endurance adaptations. For you, doing morning cardio before breakfast (while fasted) could help maximize fat oxidation and improve metabolic flexibility. One study found that 6 weeks of fasted aerobic training led to greater upregulation of proteins for fat transport and use in muscle than fed training 83. Additionally, fasted exercise may improve insulin sensitivity more than fed exercise in some cases 83. However, it's worth noting that while you burn more fat during the session, total fat loss always comes down to overall calorie balance. A meta-analysis concluded that body fat reduction was ultimately similar whether aerobics were done fasted or fed, as long as calorie intake was the same, because the body compensates over 24 hours [84] [85]. So, do fasted cardio

if you enjoy it or if it fits your schedule – it can train your body to use fat and might slightly speed fat loss – but it's not required to lose weight. **One caution:** for high-intensity interval training or long vigorous cardio, being completely fasted might limit your performance (since those rely more on quick glycogen energy). Zone 2 (easy jogging, cycling, brisk walking) is perfect for fasted states; just stay hydrated. Also, be aware of posture hypotension – get up slowly to avoid dizziness if you've been fasting and exercising.

**Recovery and refeeding:** After fasting (especially longer than 24h), when you **refeed with protein and carbs**, your muscles are like sponges – they will soak up nutrients to replenish glycogen and rebuild. It's important to **eat sufficient protein** on your eating days to compensate for the lack during the fast. General guidance for preserving muscle while losing fat is to consume about **1.2–2 grams of protein per kg of body weight per day** (on average, spread across your fed days). Intermittent fasting doesn't change the total protein need; it just compresses it into a shorter window. So if you do one-meal-a-day (OMAD) or similar, make sure that meal includes ample protein (e.g. 40–60g or more) to meet daily needs. **Leucine-rich foods** (meat, eggs, whey, etc.) are particularly good at stimulating muscle protein synthesis when you break the fast, which helps maintain/grow muscle.

**Takeaway for muscle:** Fasting, especially done intermittently, is compatible with **maintaining muscle mass**, as long as you incorporate **resistance training and adequate protein intake when not fasting**76 80. Short fasts might even enhance some anabolic hormones (like GH) that *help* preserve muscle

86. If your goal is purely to gain muscle size and strength, you'll likely want to limit fasts to shorter durations (e.g. 16 hours, or occasional 24 hours) and ensure a caloric surplus with high protein on training days. But if your goal is fat loss while keeping muscle (a "cut"), then fasting can be a great approach: **lift weights regularly, get enough protein on eating days, and use fasting to drop fat**. Many bodybuilders use an approach like 16:8 feeding or alternate-day fasting in cutting phases to achieve low body fat while retaining muscle – it can be done, and studies back it up 69. Just remember to monitor how you feel; if you ever start feeling excessively weak or are losing strength, you may need to refeed more often. And for any fast beyond ~2 days, be mindful that **muscle breakdown risk increases** as you go longer – so extended fasts are generally not for muscle-seekers (except perhaps for longevity reasons, done rarely).

# Energy Levels, Mood, and Mental Clarity on a Fast

Fasting can have noticeable effects on how you **feel** – both physically and mentally. Many fasters report fluctuations in **energy and mood**, from initial difficulty to later clarity. Here's what to expect and why:

• Hunger and mood ("the first 2 days slump"): When you first attempt fasting beyond your normal meal interval, it's common to experience waves of hunger, crankiness, or low energy, especially at your usual meal times. This is largely due to the hormone ghrelin, which peaks around your typical eating schedule causing that hungry feeling (ghrelin tends to spike on Day 2 of a fast in many people) 87 88. You might feel irritable or "hangry" as your blood sugar drops from its fed state. This early phase can also bring on a "fasting headache" for some – often related to caffeine withdrawal (if you skipped your coffee), dehydration, or the change in blood sugar 89. The good news is, these symptoms are temporary. By the second or third day (or even by the end of a 24h fast), hunger hormones start to stabilize at a lower level and many people feel their hunger decrease. In fact, ghrelin has been found to drop after about 48 hours in prolonged fasts, which corresponds to reduced hunger pangs. Your body essentially adapts: after realizing "no food is coming," it tones down the hunger signals for a while. This is why, as Dr. Alexis Shields notes, Day 2 is often the hardest during a multi-day fast, but by Day 3 it gets easier and hunger significantly subsides 87 90. If you push through that initial rough patch

(staying hydrated, maybe with herbal tea or black coffee to blunt appetite), you often come out the other side feeling **remarkably fine and not excessively hungry**.

- Energy dips and spikes: In the first 24 hours, you might experience some energy lulls, especially if you're used to a high-carb diet. This is basically your body's transition period - as blood glucose falls and before ketones rise enough, your brain might have a slight energy deficit, leading to sluggishness or difficulty concentrating. You might also feel more tired as your metabolic switch flips (some people get a bit fatigued 18-24h in, then suddenly feel an energy increase once ketosis is in full swing). By the second day, adrenaline and noradrenaline increase, which can make you feel alert and energetic despite the calorie deficit 91 61. Many people actually report a clearer, more wakeful state while fasting - an evolutionary advantage (when food was scarce, our ancestors needed to be sharp to go find it). Additionally, the high ketone levels provide a steady fuel for the brain, often resulting in mental clarity and stable energy (no post-meal crashes). Ketones also may have a direct positive effect on the brain's neurons, providing efficient energy and possibly increasing levels of BDNF (Brain-Derived Neurotrophic Factor), a protein that supports neuron health and learning 28 92. In fact, fasting has been shown to boost working memory in animals and improve aspects of cognitive function in humans 68. Many experienced fasters say that after the initial adaptation, they feel more focused and "lighter" mentally during fasts.
- Mood effects: Mood can vary some individuals feel a sense of calm or even mild euphoria on longer fasts (possibly due to endorphin release; some studies suggest fasting increases beta-endorphins, which can elevate mood). Others might experience irritability or anxiety early on. If you have a history of anxiety with low blood sugar, the early fast might not feel pleasant. However, after adaptation, fasting often improves mood stability. There's even research indicating potential antidepressant effects: for example, in animal studies intermittent fasting had antidepressant-like effects, potentially by enhancing BDNF and neurotransmitter balance <sup>92</sup>. Anecdotally, people often describe a "zen-like" mental state after 2–3 days of fasting a combination of stable energy, mental clarity, and perhaps the psychological simplicity of not worrying about meals. On the other hand, sleep can be affected: some notice difficulty sleeping deeply on the first night of a fast (perhaps due to increased alertness hormones), while others sleep fine. By night 2 or 3, many report sleeping very soundly or needing slightly less sleep yet feeling fine. Mood is also influenced by the individual if you go in with a positive mindset and manage any withdrawal (e.g., still have your coffee if you're used to it, to avoid caffeine-withdrawal irritability), you're likely to have a better mood outcome.
- "Keto flu" or adaptation symptoms: If you're not accustomed to low-carb, the onset of ketosis during a fast can bring some flu-like feelings headaches, lethargy, brain fog, nausea often collectively called the "keto flu." This is largely due to electrolyte imbalances and dehydration as your body flushes water and salts along with glycogen <sup>93</sup> <sup>94</sup>. To mitigate this, drink plenty of fluids and consider adding a pinch of salt to your water or drinking electrolyte supplements/ broth (which has sodium, potassium) during longer fasts. Maintaining electrolytes can dramatically improve how you feel, preventing headaches and fatigue. Once you're keto-adapted (either by doing repeated fasts or a low-carb diet), these symptoms are much milder or nonexistent. You mentioned you eat meat at every meal (likely a moderate-to-high protein diet), but if you also consume a lot of carbs normally, your body will need to adjust to running on fat which it does over a couple of days.
- **Physical performance:** We touched on exercise specifically, but generally your **strength and stamina** for normal daily tasks remain okay during short fasts. You might find doing intense exercise on day 2 of a fast is harder (due to low glycogen), but low-intensity tasks feel fine or

even easier (some athletes do long slow runs in a fasted state with success). **Reaction time and concentration** for tasks can actually improve with the heightened adrenaline – some people feel especially productive and mentally "sharp" while fasting (often using fasting strategically for work focus or studying). This likely ties back to those evolutionary reasons: an empty stomach can sharpen the mind to find food.

• Common side effects to note: Aside from hunger and headaches already mentioned, other transient effects can include: bad breath (ketones like acetone can cause a fruity or nail-polish-like odor in breath or sweat – a sign of ketosis), dry mouth, or a strange taste in the mouth. These are harmless; good oral hygiene and staying hydrated help. You might feel cold more easily (with less food thermogenesis, your body might reduce blood flow to extremities). Moodwise, as mentioned, initial irritability can give way to calm. If you feel jittery or anxious, it could be the increased adrenaline – practicing slow breathing or meditation can harness that alertness without feeling anxious. Many people report an uplifted mood and a sort of "reset" of their relationship with food – fasting can sometimes break the cycle of constant cravings, making you appreciate meals more and feel more in control when you do eat.

In summary, **energy and mood during fasting typically follow a U-shape**: a dip or difficulty early on, and then an upswing to clarity and steadiness. **Mentally**, fasting can enhance focus once ketoadapted, and even cognitive benefits like improved memory and learning have been observed <sup>68</sup>. **Emotionally**, after adaptation, many feel a sense of well-being or at least neutrality. As your body learns that fasting isn't an emergency (it's a natural state), stress decreases and *sometimes mood even improves* compared to baseline (some inflammatory cytokines that affect mood are reduced during fasting). If you try fasting, plan for the first day to be the most challenging in terms of willpower and mood swings – arm yourself with plenty of water, electrolytes, maybe caffeine if you use it, and distractions (activities, work, etc.). After that, you'll likely find **smooth sailing with surprisingly good energy**. Always, of course, listen to your body: if you ever feel extremely unwell, dizzy to the point of fainting, or confusion, it's wise to break the fast. But such cases are rare in healthy individuals doing reasonable (<3-5 day) fasts.

# **Health Benefits of Fasting (Beyond Weight Loss)**

Aside from fat loss, fasting triggers a cascade of **health-promoting effects** in the body. We've already discussed **autophagy** – the cellular cleaning that can help with aging and disease prevention – and the improvements in **insulin sensitivity** and **inflammation** reduction that occur. Here we'll list some key health benefits that research has associated with intermittent and prolonged fasting:

- Improved Insulin Sensitivity and Blood Sugar Control: When you fast, your insulin levels drop and your cells tend to regain sensitivity to insulin. This helps lower blood glucose and is beneficial for preventing or managing type 2 diabetes 95 96. Studies show intermittent fasting can lower fasting blood sugar and fasting insulin significantly in overweight individuals 96. It can also reduce hemoglobin A1c (a diabetes marker) over time. Essentially, fasting gives your pancreas and insulin receptors a rest, often resulting in better blood-sugar regulation when you do eat. (In fact, some type 2 diabetics under medical supervision have been able to reverse their need for insulin medication with supervised fasting routines 97.)
- Heart Health Cholesterol, Triglycerides, Blood Pressure: Fasting tends to improve various cardiovascular risk factors. It often lowers triglycerides (blood fats) and can modestly increase HDL ("good") cholesterol. Some studies note a drop in LDL ("bad") cholesterol as well 98, though results can vary (prolonged fasting in a clinic setting showed improved lipid profiles). Blood pressure can also improve intermittent fasting has been shown to reduce blood pressure in

hypertensive individuals <sup>68</sup>. Resting heart rate often decreases, indicating improved heart efficiency <sup>68</sup>. Fasting's effects on **inflammation** (reducing inflammatory markers like CRP) also benefit heart health, as inflammation underlies atherosclerosis. Overall, fasting may help achieve a **"leaner body and a healthier heart"**, as one New England Journal of Medicine review by Dr. Mattson concluded <sup>99</sup> <sup>95</sup>.

- Brain and Cognitive Benefits: We mentioned BDNF increases this can support neuroplasticity (the brain's ability to form new connections). Animal research on intermittent fasting shows it can boost learning and memory and even slow neurodegenerative disease processes <sup>68</sup>. In humans, there's evidence that IF may improve markers of memory one study found improved verbal memory in adults who fasted intermittently <sup>68</sup>. Diseases like Alzheimer's and Parkinson's are being researched in relation to fasting or ketosis, since ketones provide an alternative fuel to brain cells and may reduce oxidative stress. While more studies are needed, some data suggests fasting could delay the onset or progression of neurodegenerative diseases due to these mechanisms <sup>100</sup> <sup>101</sup>. People often subjectively report *sharper concentration* and productivity on fast days.
- Longevity and Cellular Repair: Calorie restriction has long been associated with lifespan extension in animals, and fasting appears to activate many of the same pathways. By downregulating growth pathways like IGF-1 and mTOR, fasting shifts the body into a maintenance mode that is thought to promote longevity <sup>101</sup>. Autophagy, as discussed, is key to anti-aging (removing cellular garbage that would otherwise accumulate). In mice, those subjected to fasting regimens show extended lifespans and healthier aging. We don't yet have direct evidence in humans (that would take decades of study), but short-term markers (like improved DNA repair, reduced inflammation, better metabolic health) point toward fasting being potentially longevity-promoting <sup>102</sup> <sup>101</sup>. Intermittent fasting also reduces IGF-1 (a growth factor linked to aging and cancer risk) in both animals and humans <sup>103</sup> <sup>104</sup>. Lower IGF-1 and insulin, higher ketones, and activated autophagy all create a biochemical environment conducive to longevity and disease resistance.
- Cancer Prevention and Treatment (Experimental): There is emerging evidence that fasting may help the body fight cancer or make cancer cells more vulnerable to treatment. In fasting, healthy cells adapt by slowing growth and enhancing repair (high autophagy), while cancer cells which are often dependent on a steady supply of glucose and growth signals may suffer. Some animal studies and early human case series by Dr. Valter Longo and others have found that short fasts or "fasting-mimicking diets" around chemotherapy can protect normal cells and sensitize cancer cells to the chemo 100 105. Fasting cycles have been shown to reduce side effects of chemotherapy and potentially improve its efficacy in small trials. It's theorized that fasting starves cancer cells of glucose and growth factors (like IGF-1) and triggers autophagy that can lead to cancer cell death. While this is not a standalone cure and is still under research, it shows how fasting taps into fundamental cellular pathways that might confer protection against cancer initiation and progression 101 45. On the prevention side, maintaining lower body fat and improved insulin/IGF-1 through fasting likely lowers the risk of cancer in the long run, since obesity and high insulin are risk factors for many cancers.
- **Immune System Modulation:** We discussed how a 3-day fast can reset immune cells. Fasting has been found to reduce pro-inflammatory cytokines and to stimulate hematopoietic stem cells to generate new immune cells upon refeeding 45 106. In auto-immune conditions, some preliminary research suggests fasting or fasting-mimicking can calm down overactive immune responses (for example, showing benefit in animal models of multiple sclerosis and rheumatoid arthritis) 45. Additionally, a study found that **short-term intensive fasting improved the**

**function of neutrophils** (an immune cell) in humans <sup>107</sup>. Anecdotally, people often report improved allergy or asthma symptoms while fasting due to the lower inflammation. There's also interest in fasting's ability to make the body produce more **human growth hormone**, which aids in tissue repair and immune defense, and its triggering of **autophagy in old immune cells**, helping "rejuvenate" the immune system.

• Metabolic Syndrome and Organ Health: Intermittent fasting has shown benefits for components of metabolic syndrome – it can lower blood pressure, improve cholesterol and triglycerides, reduce waist circumference, and improve blood sugar control 108 95. Liver fat is often reduced (helping conditions like fatty liver). Some studies even suggest potential benefits to kidney health and resistance to stress at the organ level. For instance, fasting in animals can induce a mild stress that upregulates antioxidant defenses and improves cellular stress resistance in organs (a concept called hormesis). One study in rats showed fasting protected the brain and heart from ischemic injury (like a stroke or heart attack) more than in non-fasted rats. While human data is limited, these findings hint that fasting strengthens the body's resilience to various challenges.

To illustrate some of these benefits, here's a quick summary of findings from research 68 69:

- **Brain and Cognition:** IF boosted working memory in animals and improved verbal memory in adults 68.
- **Heart Health:** Fasting lowered blood pressure, resting heart rate, and improved cholesterol profiles <sup>68</sup> .
- Physical Performance: In one study, young men fasting 16 hours lost fat while maintaining muscle mass 69; alternate-day fasted mice showed increased endurance.
- **Diabetes & Obesity:** Fasting led to weight loss, lowered fasting insulin and glucose, reduced insulin resistance, and some obese patients even went off insulin therapy with medical supervision <sup>97</sup>.
- **Tissue Repair:** Fasting reduced tissue damage in surgery settings in animal studies and enhanced recovery 109.

Considering all this, it's clear that fasting isn't just about cutting calories – it triggers a **"metabolic switch"** that affects numerous health pathways <sup>110</sup>. It *can* be a powerful therapeutic approach for improving healthspan. That said, fasting is **not suitable for everyone** (see Risks, next), and more isn't always better – balance and listening to your body remain key.

# Risks and Downsides of Fasting (the "Costs")

We've covered many benefits, but **fasting also has potential drawbacks** or risks to be aware of. It's important to approach fasting intelligently to avoid these issues:

• **Initial Side Effects:** As discussed, the "keto flu" – headache, dizziness, fatigue, irritability – can occur especially with electrolyte imbalance or if you jump into a long fast without preparation. These symptoms are usually temporary and preventable by staying **hydrated and replenishing electrolytes** (salt, potassium, magnesium) 111 112. If you feel faint, that's a clear sign to rest and perhaps break the fast if needed. **Tip:** Ensure you drink plenty of water. Adding a bit of salt (or drinking broth) each day can stop headaches and weakness. Also, continue consuming **caffeine** if you're a regular coffee/tea drinker (black coffee or tea doesn't break the fast and can stave off caffeine withdrawal headaches and even suppress appetite a bit).

- Over-fasting and Malnutrition: While intermittent fasting (16–24h) is generally safe for well-nourished adults, fasting too frequently or for too long without proper refeeding can cause nutrient deficiencies. For example, if someone tried to fast 5 days every week without taking vitamins or eating nutrient-rich foods on refeed days, they might become deficient in electrolytes, vitamins (like potassium, sodium, magnesium, B-vitamins, etc.), and protein. Extended fasting (beyond ~5–7 days) should only be done with medical supervision for this reason <sup>54</sup> <sup>55</sup>. Always refeed carefully: start with small balanced meals to avoid shocking your system (refeeding syndrome is a concern after very long fasts, where a sudden influx of carbs can cause dangerous shifts in electrolytes). However, this is mainly a worry for prolonged fasts >7 days or in very frail individuals. Shorter fasts are generally well-tolerated by the body's nutrient stores.
- Muscle Loss if Overdone: As noted, fasting *in moderation* doesn't strip muscle, but excessive fasting without resistance exercise or adequate protein refeed can lead to muscle atrophy. If you were to, say, do a 10-day water fast, you would likely lose a noticeable amount of lean mass in addition to fat your body may consume some muscle for gluconeogenesis when fat cannot fully cover needs. Also, chronic calorie restriction (even mild) can cause slow muscle loss over time if protein intake is low. Thus, fasting is best cycled with feeding. If your goal is muscle gain, do not fast every day for long periods; use it strategically and make sure to lift weights and eat protein to signal muscle preservation. For most people using fasting for weight loss, incorporating even light bodyweight exercises on fasting days (or strength training on eating days) will protect against muscle loss.
- **Potential for Overeating or Disordered Eating:** Some individuals find that after a fast, they have intense cravings and might binge, offsetting the calorie deficit (or causing guilt). Fasting can, in susceptible people, trigger a restrict-binge cycle. It's important to cultivate a healthy mindset: use fasting as a *tool*, not as punishment or an obsessive rule. If you notice you're obsessing over not eating or swinging between fasting and overeating, consider a more moderate approach. **Never force a fast if you feel unwell**. People with a history of eating disorders should avoid fasting unless cleared by a doctor, as it can be a slippery slope 113 114.
- Medical Conditions and Medications: There are certain groups who should not fast (or need close medical supervision if they do). These include: Pregnant or breastfeeding women (they need steady nutrients for baby), children/teens under 18 (still growing, not advisable) 115, and people with Type 1 diabetes (risk of dangerous hypoglycemia and ketoacidosis type 1s require medical supervision if attempting any fasting) 115. If you're on medications, fasting can affect their absorption or effectiveness (for example, blood pressure or blood sugar meds may need adjustment). Always consult a doctor if you have any medical condition like liver disease, kidney disease, heart arrhythmias, etc., before fasting. Also, those who are underweight or have nutrient deficiencies should not fast. Fasting is generally designed for people who have excess energy stores (fat) to burn.
- **Gallstone Risk:** One lesser-known risk of rapid weight loss (including from fasting) is **gallstones**. When you don't eat for extended periods, bile can accumulate in the gallbladder and cholesterol can precipitate out, forming stones. Rapid weight loss is a known risk factor for gallstone formation <sup>116</sup> <sup>89</sup>. This is more of a concern in long-term aggressive fasting or very low-calorie diets. Staying hydrated and, if doing repeated fasts, possibly consuming a little fat when refeeding to regularly empty the gallbladder, may help. It's not a common issue for intermittent fasters, but something to be aware of if you experience any right-upper-abdominal pain after fasting.

- **Reproductive Hormones:** Prolonged calorie restriction or very frequent fasting can, in some cases, disrupt hormonal balance. In women, excessive fasting or low body fat can lead to irregular menstrual cycles or even temporary amenorrhea (loss of period) because the body perceives an energy deficit and downregulates reproductive priority. In men, long-term energy deficit might lower testosterone somewhat. However, moderate intermittent fasting *with adequate calorie intake on average* usually does not cause these issues; they typically arise only with chronic under-eating. Nonetheless, women in particular often do slightly shorter fasts (12–16h) if aiming to avoid any menstrual disturbances. Everyone's threshold is different just be mindful of any changes in your body's hormonal signals and adjust accordingly.
- "Rebound" weight if not careful: If one uses fasting to lose weight but then returns to old eating habits, it's possible to regain weight quickly (especially the water weight). Fasting doesn't exempt one from a healthy diet overall. Sometimes, people might overestimate how much they can eat on feeding days ("feast" mentality) and accidentally erase the deficit. So the "cost" here is that fasting requires discipline outside of the fasting window too. It's not a free pass to eat junk you still need nutritious foods to truly improve health and body composition 117 118. Also, after a fast, refeed gradually heavy meals immediately can cause gastrointestinal discomfort. Your digestive system might have slowed down and will appreciate gentle reintroduction of food.

In practice, most healthy individuals can fast up to 24–48 hours with no serious issues, as long as they stay hydrated. The *safety profile* of intermittent fasting is good – clinical trials report few adverse events, mostly just the transient side effects we discussed. The key is to **be mindful of your body's signals**. Fasting should make you feel *light and clear*, not deathly ill. If something feels wrong (dizziness that doesn't go away with rest, heart palpitations, confusion), play it safe and break the fast. You can always try again another time.

Finally, remember that **fasting is a stress on the body** – a hermetic (beneficial) stress in the right dose, but if overdone it can become a negative stress. So it's about finding the right balance (much like exercise: too little vs. too much). The good news is, used wisely, fasting can yield *a lot of benefit with minimal risk*.

# Fasting vs. Severe Calorie Restriction: What's the Difference?

You might wonder how **fasting** (complete abstinence from food for a period) compares to just eating a **continuous low-calorie diet** every day. Both can create a calorie deficit, but they aren't identical in how your body responds. Let's clarify the differences in effects and when you might use one approach versus the other:

**Metabolic Adaptation:** One big difference is how the body's metabolism adapts. With **continuous severe calorie restriction (CR)** – say you eat 30% below your maintenance needs every day for weeks – your body tends to respond by **gradually lowering its metabolic rate**, in part by reducing thyroid hormones and muscle mass, and increasing efficiency to conserve energy <sup>66</sup> <sup>119</sup>. This is the classic "starvation mode" effect seen in studies like the Biosphere experiment or extreme cases like **The Biggest Loser** competitors, where prolonged dieting caused their metabolisms to slow dramatically <sup>120</sup> <sup>121</sup>. For example, people who chronically diet often experience plateaus because the body adjusts to burn fewer calories. In contrast, **intermittent fasting** (IF) intersperses periods of no food with periods of normal eating, which *may reduce* this adaptive slowdown. Because you're not in a constant calorie-deprived state – you refeed and get ample nutrients on non-fasting days – the body doesn't continuously sense a famine. Some studies suggest IF leads to **less reduction in metabolic rate and lean mass** compared to equivalent continuous calorie cutting <sup>67</sup> <sup>70</sup>. Essentially, **fasting can act like** 

**a "reset"** – during fasting you burn fat, and when you refeed, your metabolism gets a boost and replenishes muscle glycogen, etc., avoiding a chronic starvation signal. However, if IF is taken to an extreme (fasting too often with insufficient intake on feed days), it can also cause adaptation – balance is key.

**Muscle Preservation:** Related to the above, research indicates that **alternate-day fasting (ADF)** or intermittent energy restriction can result in **similar fat loss but preserve more lean muscle** than continuous dieting  $^{70}$ . One review noted several studies where ADF participants retained more muscle mass, potentially because the periodic feeding with adequate protein prevents ongoing muscle catabolism, whereas daily calorie restriction can cause continuous (albeit slow) muscle breakdown  $^{70}$ . Also, IF tends to spur big pulses in growth hormone when fasting and then insulin/IGF-1 when feeding, which might net retain muscle, whereas continuous semi-starvation keeps these anabolic hormones suppressed consistently  $^{122}$   $^{123}$ . For example, a study of 8 weeks alternate-day modified fasting vs. daily CR found both lost weight, but the ADF group lost slightly more fat and preserved lean mass better  $^{124}$   $^{70}$ . It's not a guarantee – ultimately protein intake and exercise matter hugely – but IF *can* be more muscle-sparing if done right. As a bonus, resistance training while doing IF has been shown to be effective: one study found that an 8-hour feeding window + weight training led to fat loss *with no loss of muscle* vs. a normal diet + training  $^{78}$   $^{79}$ .

**Autophagy and Cellular Effects:** Chronic calorie restriction does induce some autophagy and stress resistance pathways, but interestingly, **fasting (with refeeding cycles) induces a more intense autophagy and stem-cell regeneration** response than mild CR <sup>122</sup> <sup>123</sup>. The refeeding period after fasting seems crucial for regenerative effects – for example, fasting then refeeding activates stem cells to produce new immune cells, which continuous CR doesn't do as dramatically <sup>123</sup> <sup>45</sup>. Also, fasting more strongly inhibits the nutrient-sensing pathway mTOR and IGF-1 in the short term <sup>101</sup>, which triggers autophagy robustly, whereas continuous 20% calorie cut might only modestly affect those pathways (because the body adapts to the new normal). Therefore, **periodic fasting can "flip a switch"** that tells the body to go into deep repair mode (autophagy, apoptosis of bad cells, etc.), and then refeeding flips the switch to regeneration (new cells, growth) <sup>123</sup> <sup>45</sup>. Continuous CR is more like staying in a mild stress state without a clear on/off, which might actually *lack* some of the benefits of the fasting-refeeding cycle (and can even cause some issues like persistent high cortisol) <sup>125</sup>. In fact, one paper pointed out that chronic calorie restriction caused *less* activation of cell death and stem cell renewal pathways compared to fasting, partly because CR never gave a strong enough stimulus and had no refeed phase <sup>101</sup> <sup>123</sup>.

**Compliance and Lifestyle:** From a practical perspective, many people find **intermittent fasting easier to stick to** than constant dieting <sup>126</sup> <sup>127</sup>. With daily CR, you have to measure portions or resist temptation at *every* meal, which can be draining. IF simplifies things: e.g., "I just don't eat after 8 PM until noon next day" or "Mondays and Thursdays I eat only 500 kcal" – clear rules that some find more feasible. Studies have shown **adherence rates for intermittent fasting can be as good as or better than continuous restriction** for certain individuals <sup>128</sup> <sup>70</sup>. The mental relief of not having to prepare or think about food for periods can actually reduce stress for some. That said, others prefer smaller meals and don't like skipping – so it depends on personality. Importantly, physiologically, IF allows for **larger, satisfying meals** on feed days, which can help psychologically. You mentioned you currently limit to <1000 kcal per meal – with IF, you might only have 1–2 meals in your eating window, but they can be hearty (with meat etc.) and still keep you in deficit over 24h. Some folks find that more enjoyable than eating many tiny meals.

**Which is better for fat loss?** If total calories are equal, studies suggest **weight loss is similar** between IF and continuous calorie restriction <sup>70</sup>. A meta-analysis in 2018 found no significant difference in fat loss between intermittent fasting and continuous restriction when looking at 3-12 month outcomes –

both work. The difference may come in secondary outcomes: IF might preserve muscle a bit more, might improve insulin sensitivity more, and might be easier to maintain for some <sup>70</sup> <sup>129</sup>. But if someone tends to binge on feed days, then daily moderate restriction might work better for them.

**Psychological effect on appetite:** Continuous dieting often triggers **constant hunger** because you never fully satisfy yourself. IF, on the other hand, often leads to **reduced appetite during fasting (after adaptation)** and surprisingly normal appetite on eating days (some people don't overeat as much as expected). There's evidence that some hunger hormones adjust with IF – e.g., fasting can lower overall ghrelin levels over time or reset your satiety signals <sup>130</sup>. Many individuals on 16:8 IF say they feel less hungry overall than when they ate 3-6 small meals. But it varies.

**Health differences:** We covered autophagy and metabolic effects. One thing to note is **adaptive thermogenesis** – daily CR tends to lower T3 thyroid hormone more, whereas intermittent fasting might not reduce T3 as much (except on the fast day itself) because when you refeed, the hormone levels bounce back. Also, continuous CR often leads to **cold intolerance**, **fatigue**, **and decreased libido** over time due to that constant energy lack; with IF, those effects are mitigated by periods of normal intake. Fasting can acutely increase cortisol on the fasting day, but continuous CR can chronically elevate cortisol which is not great if sustained 125.

In summary, fasting is like an on/off push to your metabolism (burn, then recover), whereas continuous restriction is like riding the brake constantly. For fat loss with muscle retention and metabolic health, many find intermittent approaches superior 70 75. But for steady slow weight loss, some might do fine with mild continuous cuts. You can also *combine* approaches: e.g., eat a moderately reduced calorie diet *and* include one fast day a week. The key is hitting your goals while staying healthy and sane. Given your interest in fat loss now and muscle gain later, you might find IF useful to cut fat (since it targets fat and keeps hormones like testosterone/GH in decent shape), and then for muscle gain you'd drop IF or keep only a short fasting window to ensure caloric surplus on training days (some bodybuilders do 14h fasts in off-season just to limit fat, but still eat a lot in 10h window).

Now, let's talk about some **specific diets** you asked about, which also relate to fasting-like effects:

# Carnivore, Vegan, and Ketogenic Diets – What They Trigger in the Body

Beyond fasting, certain diets can mimic some fasting effects or have their own unique impacts on metabolism and health. Let's examine **three distinct diets** you mentioned – carnivore, vegan, and ketogenic – and see what each "triggers" in the body in terms of fuel use, hormones, and possibly autophagy or other pathways:

• Carnivore Diet (All-Meat Diet): The carnivore diet is essentially the opposite of vegan – you eat only animal products (meat, fish, eggs, some dairy) and zero carbs from plant foods 131 94. This diet is high in protein and fat and contains virtually no carbohydrate. As a result, the carnivore diet tends to put your body into a state of ketosis, much like a classic keto diet or fasting, because with virtually no carbs to burn, the body shifts to burning fat and ketones for fuel 94. In fact, carnivore dieters often find their blood sugar stays very low and stable, and insulin remains very low chronically (since meat causes only a modest insulin response and there's no high glycemic carb intake). This triggers some similar pathways to fasting: low insulin means the hormone glucagon stays higher, promoting fat burning and possibly autophagy. Some proponents say a carnivore diet can induce autophagy due to consistently low insulin and

high fat intake – it's essentially a zero-carb ketogenic diet, and ketosis is known to activate some autophagy mechanisms <sup>15</sup>. Additionally, carnivore typically involves eating **high protein**, which can help maintain muscle mass while losing fat. People often report rapid **weight loss** initially on carnivore, partly due to water loss (no carbs = no glycogen = water release, similar to fasting) and reduced appetite (protein is very satiating). Benefits claimed include **improved mental clarity, stable energy** (no sugar crashes), and reduction in inflammation or autoimmune symptoms (since it eliminates many common allergens or irritants in plant foods, though this is anecdotal) <sup>132</sup>. The carnivore diet essentially triggers a **ketogenic metabolic state** and might also keep **mTOR somewhat lower between meals** (though protein does spike mTOR when you eat). It's like being in a fed state but *without carbs*, so some autophagy might be happening especially if one is not overeating calories. That said, because carnivore allows unlimited meat, some people eat at maintenance or surplus and may not lose weight unless they also watch portions.

Pros and cons trigger-wise: Carnivore will cause ketone production similar to fasting 94, leading to some of the same benefits: fat burning, low insulin, possibly improved insulin sensitivity (though high protein can stimulate gluconeogenesis, so blood sugar might not be as low as in a fast, but still low-ish). It triggers a large release of glucagon when high protein is consumed with zero carb, which further stabilizes blood sugar by making new glucose as needed. Many on carnivore report reduced **inflammation** markers, possibly because they cut out high-carb processed foods (and carnivore tends to be lower Omega-6 and higher in certain nutrients like carnitine). Autophagy: Since carnivore = keto, and keto has been noted to induce autophagy in some contexts 133, it's reasonable that carnivore would too - though note that eating tons of protein might limit autophagy somewhat (because amino acids can signal the body that nutrients are available). But if one eats just enough and does intermittent fasting on carnivore (common to do OMAD or 2MAD on carnivore), autophagy can be in play. The high protein triggers muscle protein synthesis and tends to preserve muscle if calories are adequate, which is good for body composition (especially compared to fasting where you rely on internal protein). Hormone-wise, carnivore often leads to low insulin, low leptin, low IGF-1 (because IGF-1 responds to protein and carb - interestingly, even though carnivore is high protein, some report IGF-1 decreases, possibly due to weight loss or low carb; IGF-1 might not drop as much as in a pure fasting state though). Growth hormone might not be as elevated as in fasting because you are eating, but anecdotal evidence suggests people often have good energy and recovery on carnivore, implying no major GH deficiency.

**Drawbacks/triggers:** Carnivore eliminates fiber, which can affect gut microbiome – some beneficial gut bacteria populations may decrease without fiber, while others that feed on protein increase. This diet triggers the body to adapt to digesting a lot of protein and fat; initially, some get **constipation or diarrhea** ("carnivore flu"), as the gut adjusts and bile production ramps up <sup>134</sup>. Over time, the body usually adapts. Also, without carbs, **thyroid T3 hormone sometimes lowers** slightly (as in any low-carb diet), but not to a pathological level for most. Another effect: **elevated LDL cholesterol** in some individuals (especially if eating a lot of saturated fat from beef) – many carnivore dieters see a spike in LDL, which is controversial (some believe if other markers are fine it's okay; others worry). Triglycerides usually plummet and HDL rises, which are positive for heart health. But the high intake of saturated fat triggers increased LDL production in about LDL-hyperresponders. So, carnivore triggers a lipid profile change akin to ketogenic diets.

**Autophagy and immune**: Because carnivore is very low in insulin and glucose, it might put your cells under a mild nutrient stress that edges toward autophagy between meals <sup>15</sup>. Additionally, by cutting plant foods, you avoid antigens that might trigger immune responses – some on carnivore claim remission of autoimmune issues (one hypothesis is it alters gut permeability and microbiome in a way

that reduces autoimmune triggers). However, carnivore also lacks many phytonutrients and antioxidants found in plants, so long-term effects are still under study.

In summary, the **carnivore diet triggers a metabolic state very similar to fasting**: continuous **ketosis and fat burning**, **low insulin and blood sugar**, and possibly intermittent autophagy especially if combined with IF <sup>135</sup> <sup>136</sup>. It's basically a continuous extreme keto diet. The difference is you are getting **protein** and calories, so you can maintain muscle and energy for workouts better than on a pure fast. It's like mimicking some fasting benefits while still eating meat. But one should be cautious about **nutrient balance** (ensure you eat organ meats or supplement to get vitamins like C, and not just muscle meat).

• **Ketogenic Diet (Low-Carb High-Fat Diet):** A **ketogenic diet** is typically ~75% fat, 20% protein, <5% carbs (percent of calories). It aims to keep carbs under ~20–50g per day so that your body remains in **nutritional ketosis**. **Keto triggers** many of the same adaptations as fasting, albeit to a slightly lesser degree since you are still eating some food. With very low carb intake, **insulin levels stay low** and the liver produces **ketones** from fat, fueling the brain and muscles much like in a fasted state <sup>133</sup> <sup>2</sup>. Essentially, a well-formulated keto diet puts you in a **fat-burning metabolism 24/7** – you burn dietary fat and body fat for energy. The **metabolic switch** that happens after ~16 hours of fasting is sustained continuously on keto because you never really replenish glycogen fully. So a person on keto might wake up each day already in ketosis (e.g., blood BHB maybe 0.5–1.5 mM) and continue burning fat.

The **benefits triggered** by keto overlap with fasting: reduced blood glucose and insulin, increased insulin sensitivity, often **weight loss** (especially from fat) as hunger can decrease due to high satiety of fats and ketones <sup>38</sup> <sup>137</sup>. **Ketosis** itself seems to have signaling functions: the ketone **BHB** (betahydroxybutyrate) acts as a signaling molecule that can inhibit inflammation pathways and oxidative stress. It also might directly stimulate some autophagy in certain tissues – studies have shown that ketosis can promote autophagy in the brain, possibly helping clear misfolded proteins (which is one reason it's being studied for neurodegenerative diseases) <sup>138</sup> <sup>139</sup>. One source indicates ketogenic diets and glucose restriction *induce autophagy* by activating AMPK (an energy sensor) and inhibiting mTOR, similar to fasting <sup>139</sup>. In fact, the Cleveland Clinic article explicitly said **a high-fat low-carb (keto) diet can trigger autophagy** because it forces the body to repurpose components for energy in the absence of carbs <sup>15</sup> <sup>133</sup>. So keto, like fasting, **activates AMPK** (the "low energy" sensor) and likely increases autophagy over baseline, though perhaps not as strongly as a complete fast would (since protein on keto might limit autophagy somewhat).

**Hormones:** On keto, **glucagon** is higher relative to insulin, similar to fasting, encouraging fat breakdown. **Growth hormone** might not skyrocket as it does in a fast, but some studies note that low-carb diets do not suppress GH, and weight loss on keto can even raise GH in obese individuals as they lose weight. **IGF-1** tends to decrease on keto if protein is moderate (this is often observed: low-carb, moderate protein diets can reduce IGF-1 somewhat, especially if overall protein intake drops or if calories drop). Lower IGF-1 could be beneficial for longevity (similar to CR effects) 103. For example, epilepsy patients on long-term keto diets have shown **reduced IGF-1 levels** and improved insulin sensitivity.

**Body composition:** Keto diets are muscle-sparing *if* protein intake is sufficient. There's a misconception that keto means low protein – a well-formulated keto for strength/health usually has enough protein (1.2–1.5 g/kg). Thus, many people can gain muscle on keto as long as calories and training are present <sup>140</sup> <sup>141</sup>. In your case, a keto diet during fat loss would trigger similar fat-burning as fasting *while allowing you to eat*, making it more sustainable daily. Also, keto often naturally restricts calories because fat and protein are satiating (some find they inadvertently eat less because cravings vanish and you

don't get hungry as often). So it can trigger the **same fat loss pathways without conscious calorie counting**.

**Health triggers:** Keto was originally a medical diet for epilepsy – **ketones have neuroprotective effects** (increase GABA, decrease glutamate, etc., to stabilize neurons) <sup>142</sup> <sup>143</sup>. Now it's being researched for mental clarity, migraine reduction, etc. Keto also triggers improvements in blood pressure, triglycerides (they drop significantly), HDL goes up, and insulin resistance improves dramatically (some type 2 diabetics get off meds on keto). It also lowers inflammation in many cases (due to less high blood sugar and insulin spikes, and BHB inhibiting an inflammatory pathway called the NLRP3 inflammasome).

**Risks/downsides:** Keto triggers a big diuresis at first (like fasting), so electrolytes need management – basically the "keto flu" is similar to fasting adaptation: fatigue, headache, etc., due to low sodium and shifts in fuel usage <sup>137</sup> <sup>144</sup>. Once adapted, most report good energy. One must ensure micronutrients (like potassium from avocados/greens, magnesium from nuts or supplements) and fiber from non-starchy veggies to keep gut health. Some strict ketoers don't eat enough fiber which could affect gut bacteria. But unlike carnivore, keto encourages low-carb veggies, so fiber and vitamins are usually fine.

**Autophagy and longevity:** There is a theory that a keto diet basically gives you **many of fasting's benefits chronically**. It keeps insulin/IGF low-normal, possibly continuously engages mild autophagy especially if one does intermittent fasting in addition (many on keto do IF since they aren't as hungry). So it might be a dietary way to mimic fasting's anti-aging effects while still nourishing the body. Indeed, animal studies of cyclic ketogenic diets show lifespan extension in mice, and ongoing research in humans is looking at markers.

• Vegan Diet (Plant-Based Diet): A vegan diet includes no animal products, so it's typically high in carbohydrates (from fruits, grains, legumes), variable in fat (can be low-fat high-carb or moderate-fat depending on oils/nuts used), and moderate in protein (plant proteins). The effects of a vegan diet are quite different from keto/carnivore. A whole-food plant-based diet often high in fiber, antioxidants, and polyphenols triggers improvements in cardiovascular health (lower LDL cholesterol, improved arterial function) and reduces inflammation markers in many cases, due to the abundance of anti-inflammatory compounds and weight loss effect. However, since many vegan foods are carb-heavy, a vegan diet tends to cause higher insulin levels after meals and higher average blood glucose compared to low-carb diets. That said, vegans often have improved insulin sensitivity at the tissue level, partly because they tend to be leaner on average and have less intramuscular fat. Epidemiological studies show vegans have about half the risk of developing type 2 diabetes compared to omnivores, likely due to lower body weight and high fiber intake which blunts glucose spikes (145 146). So the vegan diet triggers better glycemic control long-term even if each meal might be higher in carbs – the fiber causes slower absorption and improved insulin sensitivity means glucose is handled efficiently.

**Fat loss and metabolism:** Vegans often naturally consume fewer calories (plant foods are less energy-dense and more filling fiber) <sup>147</sup> <sup>148</sup>. Studies consistently find that switching to a vegan diet can cause weight loss without intentional calorie restriction – one reason is fiber increases fullness, another is the thermic effect (plant proteins are a bit less efficiently absorbed, so you get a slight calorie loss). Also, the **gut microbiome** changes on a vegan diet to one that might burn more energy (short-chain fatty acids produced by fiber can increase metabolic rate slightly). So many people lose fat on vegan diets, which improves their metabolic health. However, if a vegan diet is high in refined carbs (white bread, sugar) and low in protein, one could potentially lose muscle or have blood sugar swings. A well-planned vegan diet is usually high in complex carbs, which release glucose slowly.

Hormonal effects: One interesting aspect: Vegans often have significantly **lower IGF-1 levels** than omnivores <sup>149</sup> <sup>150</sup>. This is because IGF-1 (a growth factor hormone) is stimulated by dietary protein intake, especially animal protein which is rich in certain amino acids (like leucine and methionine) that raise IGF-1. Plant proteins are often lower in those amino acids, and many vegans have slightly lower protein intake overall. Research by Longo and others showed that a low-protein diet (especially low in animal protein) led to much lower IGF-1 and was associated with lower risk of cancer and mortality in ages below 65 <sup>151</sup> <sup>150</sup>. Specifically, a study found vegan women had IGF-1 levels ~13% lower than meat-eaters <sup>152</sup>. **Lower IGF-1** might slow aging and reduce cancer risk (since high IGF-1 can drive aging and tumor growth) <sup>153</sup>. In essence, a vegan diet triggers a sort of **mild protein restriction** state that overlaps with some longevity pathways (similar to fasting which also lowers IGF-1). Additionally, plant foods have less saturated fat and more polyunsaturated fat, which can improve cell membrane function and possibly hormone sensitivity (some find improved insulin sensitivity as noted, and improved leptin sensitivity so they feel full on fewer calories).

**Autophagy:** There isn't a direct link like "veganism triggers autophagy" in the way fasting does, but indirectly, if a vegan diet causes calorie restriction or protein restriction, it could *activate autophagy modestly.* Some research in rodents shows that low protein, high carb diets extended lifespan partly via increased autophagy in the liver. So a **whole-food vegan diet that's not excessive in calories might keep mTOR activity lower** (because fewer animal proteins to spike it), thus potentially **promoting maintenance mode** in cells more often. Also, many plant compounds (like resveratrol in grapes, curcumin in turmeric, EGCG in green tea) can induce autophagy by activating AMPK – vegans might consume more of those phytochemicals which could stimulate cellular cleanup. For example, polyphenols mimic some effects of fasting by tricking cells into a stress response. So, a plant-based diet could trigger various cytoprotective mechanisms.

**Other health triggers:** Vegan diets almost invariably lower **blood cholesterol** drastically, which triggers reduced risk of heart disease. They also usually **lower blood pressure** due to high potassium and low sodium content of plant foods <sup>154</sup> <sup>155</sup>. Many report improved **energy** after an adaptation period, likely due to weight loss and cleaner arteries. There's also a **gut microbiome** benefit: fiber in a vegan diet feeds beneficial bacteria that produce short-chain fatty acids (SCFAs) like butyrate, which *trigger anti-inflammatory pathways* and improve colon health. This is something fasting lacks (since no fiber intake during fasting), so a vegan diet triggers a strong **gut health improvement** which can have systemic effects on immunity and even mood (gut-brain axis).

**Body composition concerns:** One thing to watch is that a vegan diet can sometimes lead to lower muscle mass if protein intake and resistance training aren't prioritized. Plant proteins often are less bioavailable and lack some essential amino acids unless combined well. However, it's definitely possible to build muscle as a vegan – one just needs to eat enough **high-protein plant foods** (tofu, legumes, seitan, etc.) and possibly use protein powders (pea, soy, etc.) to easily meet protein goals. It's true that **IGF-1 is lower**, which might slightly slow muscle gain, but as long as training and protein are present, muscle growth still occurs – just possibly not as rampant as on a meat-heavy diet. Many athletes are proving one can perform well on vegan diets. The **lower IGF-1/higher IGF binding proteins** in vegans might mean less risk of cancer, but one must ensure enough IGF-1 for healthy muscle and bone – usually adequate protein will maintain normal range IGF-1, just not excessive.

**Nutrients to monitor:** Vegan triggers beneficial processes, but one must supplement or ensure intake of **vitamin B12** (since it's not present in plants), possibly **iron** (plant iron is less absorbed, though high vitamin C in vegan diets helps absorption), **omega-3 DHA** (flax gives ALA but conversion to DHA/EPA is limited, so an algae-based DHA supplement is wise for brain health), **iodine** (if no seaweed or iodized salt, could be low), and **calcium/vitamin D** (if no fortified plant milk, need to ensure through greens or supplements for bone health). If those are covered, a vegan diet triggers a very heart-healthy and

potentially longevity-promoting metabolic state: low cholesterol, low inflammation, trim body composition, and high intake of cancer-fighting antioxidants.

Comparison Summary: - The carnivore and ketogenic diets mimic many fasting effects: they keep insulin extremely low, promote **ketosis**, and could induce some autophagy. They shift the body to **fat**burning mode similar to fasting [132 133]. So, think of them as "fasting with food" – you get to eat (which helps adherence and muscle maintenance) while still enjoying ketosis and stable blood sugar. Carnivore is extreme keto (zero carb, high protein/fat); keto is moderate protein, very high fat. These diets trigger weight/fat loss in many because of appetite suppression and hormonal effects. They also may improve mental focus due to ketones. But they require discipline and careful nutrient management (carnivore especially lacks certain nutrients unless organ meats are eaten). - The vegan diet, by contrast, is highcarb and not ketogenic (unless one does a very specific high-fat vegan keto). It triggers health benefits through **fiber and nutrient density**: improving gut health, lowering growth signals like IGF-1 <sup>150</sup>, and usually causing weight loss via low calorie density [147]. It doesn't mimic fasting in terms of ketosis, but it can mimic some effects of caloric restriction and protein restriction, which are known to extend lifespan in lab animals. Vegans often show signs similar to CRON (calorie restriction with optimal nutrition) individuals: low IGF-1, low cholesterol, low blood pressure, etc., which correlate with longevity 145 (153). - For **fat loss goals**, a keto or carnivore approach might give quicker initial results due to diuresis and appetite suppression, whereas a vegan diet can also lead to steady fat loss but you have to be mindful of portion control on starches. For muscle gain goals, carnivore/keto provide plenty of protein but you need enough calories; vegan can build muscle too but you have to plan protein combinations and possibly eat larger volume to get enough calories/protein. - All three diets can be compatible with intermittent fasting as well. In fact, many people combine them: e.g., do IF on a keto diet for amplified autophagy, or do IF on a vegan diet (like an 18:6 pattern) to help with weight loss. Each combination has unique effects (e.g., vegan + IF might maximize longevity signals but need careful muscle maintenance; keto + IF can deeply engage ketosis and fat loss but watch electrolytes; carnivore + IF can mimic extended fasting autophagy a lot, given you might eat OMAD all meat).

Ultimately, all diets share common ground in that weight loss from any method improves metabolic health. The best diet is one you can stick to and that provides needed nutrients. Since you "eat pretty much anything with meat at every meal," switching to a vegan diet would be a drastic change for you, whereas trying a ketogenic or carnivore diet might be more palatable given you like meat. Those would align more with your current habits (just removing carbs). If your interest is in fasting's benefits, a keto diet is a logical eating plan because it keeps the body in a quasi-fasted metabolism even when fed, potentially enhancing autophagy and fat loss (15) (133). On the other hand, a vegan diet excels in disease prevention aspects (heart health, anti-cancer) and could be used during a muscle-gain phase to keep health markers in check – but one might need to watch that they're getting enough protein and not too many refined carbs.

# **Using Fasting and Diet Knowledge for Your Goals**

Now, to bring it all together for practical use:

You're currently focused on **fat loss** and in the future on **lean muscle gain**. How can you apply this knowledge about fasting and diets?

For **fat loss**: Intermittent fasting is a great tool. You might start with a **16:8 IF schedule** (fast 16 hours, eat in an 8-hour window), which is easier to implement daily. This will naturally cut some calories (skipping either breakfast or dinner) and leverage a bit of fat-burning and autophagy each day (though autophagy will be modest at 16h, it's still beneficial). If that goes well, you could occasionally do a **24**-

**hour fast** (dinner-to-dinner, for example) once or twice a week to really boost the calorie deficit and autophagy 16. During those fasts, remember to hydrate and take salt. Expect the first 20 hours to have some hunger waves, but by hour 20 the ketones kick in and it gets easier. These fasts will accelerate fat loss and also likely improve your **insulin sensitivity and metabolic flexibility**, making your body better at burning fat even when you're not fasting.

Keep up **resistance training** while losing fat – as we covered, lifting weights will signal to your body to hold onto muscle mass <sup>80</sup>. You won't have as much strength on an extended fast, so maybe plan your hardest workouts on days you eat. On fasting days, you can do lighter cardio (zone 2 walk/jog) to burn additional fat, which is very effective since you'll be in a low-insulin state and **fat oxidation rate is high** <sup>81</sup>. Even a 30-min fasted brisk walk in the morning can tap into fat stores nicely.

Nutritionally during fat loss, you could consider going **lower-carb or ketogenic** if it suits you, because it will complement fasting well. Being in ketosis from diet means when you fast you transition even more smoothly (you're already fat-adapted, so no energy slump). It will also keep hunger lower. For example, you might eat two meals a day, each under 1000 kcal (which you're already aiming for), focusing on meat, fish, eggs, above-ground veggies, some healthy fats like olive oil or avocado. This might naturally put you near ketosis and make those 16+ hour fasts a breeze. If you prefer not to cut carbs completely, that's fine – you can still do IF, but your hunger on fast days might be a bit more until you adjust. You can also experiment: maybe **cycle** your approach – e.g., some weeks you do keto + IF, other weeks you do moderate-carb vegan-ish eating for a break, etc. However, consistency tends to yield best results; many find a **low-carb diet with IF** peels off fat quite effectively while preserving muscle with the high protein.

For **lean muscle gain (bulk)**: When you switch goals to building muscle, you'll need a **caloric surplus and ample protein**. Long fasts are generally counterproductive during active muscle-building phases because your muscle needs frequent protein synthesis stimulation. However, you can still implement a **short daily fast (e.g., 14 hours)** or simply avoid late-night eating to maintain insulin sensitivity and not accumulate excess fat. Many bodybuilders follow a version of **16:8 IF in a bulk**, which doesn't hurt gains as long as you eat enough in those 8 hours and hit, say, 3-4 protein feedings in that window. Studies (like one in resistance-trained males on 16:8) found they could gain strength and muscle similar to normal eating as long as protein was sufficient, and they gained less fat than the control group <sup>78</sup> <sup>79</sup>. So IF can be a tool even in muscle gain to limit fat gain (the "lean gains" approach). But you likely would *not* do 24+ hour fasts when trying to gain size – that would just make it hard to get enough calories/ protein weekly and might put you at risk of losing muscle. You might keep maybe a single 24h fast once a month for health if you want, but not frequently.

During muscle gain, diet composition might shift: if you go **vegan or higher-carb** at that stage to fuel heavy training, that's fine, but remember **higher carbs will raise insulin and IGF-1** which are anabolic (good for muscle) but you might lose some autophagy and health perks. You can mitigate that by still incorporating short daily fasting or occasional mini-cuts. If you stick with **carnivore/keto while bulking**, you'll have to eat a lot of fat to be in surplus which can be challenging volume-wise, but it's doable and you'd stay in ketosis – some people do gain muscle on keto but more slowly; including targeted carbs around workouts could be beneficial for performance if needed.

**Flexibility**: You don't have to be dogmatic. You can enjoy a variety of foods (since you said you eat "anything with meat"). Perhaps a balanced approach: high protein omnivorous diet focusing on whole foods (meat, fish, eggs, plenty of vegetables, some fruits, nuts, maybe some whole grains/legumes if you tolerate them) and just use **fasting** strategically. For example: - **Current fat loss plan**: 16:8 IF on weekdays, 24h fast on Monday and Thursday (just an example; adjust frequency based on how you feel), resistance training 3-4x/week, and cardio 2-3x (some fasted). Diet: moderate low-carb (~100-150g)

carbs mostly from veg/fruit, higher on training days if needed), ~180g protein (just guessing if you're around ~80kg and lean target), rest fat for calories. This would create a robust deficit and you'd see weekly fat loss, with autophagy from those 24h fasts cleaning up cells and perhaps giving you some cognitive boost. - **Later muscle gain plan**: shorten fasting window to maybe 12h (basically just not eating late night), increase calories by adding more carbs (if you want) around workouts and more protein. Keep lifting heavier. You could incorporate **periodic mini-cuts** using fasting: e.g., one week every 2 months where you do a 3-day cut with IF or a 2-day fast to trim any gained fat. That way you stay lean while bulking – some call this "fasting bulking" or recomposition approach.

Throughout all this, pay attention to **your body's signals**. Fasting is a tool – if you ever feel it's affecting your workout recovery or causing sleep issues, scale back. Make sure to get enough **sleep** (fasting can increase adrenaline which in some can disrupt sleep initially; magnesium at night can help relax). And remain well-**hydrated** always – dehydration is often why people feel tired or weak on a fast.

Finally, one of the arguably biggest benefits of understanding fasting is **metabolic flexibility** – the ability of your body to switch between burning carbs and fat efficiently. By incorporating fasting and possibly keto phases, you train your body to be an efficient fat-burner, which will help in the long run whether you're cutting or bulking. It might reduce cravings and make you less dependent on constant feeding, giving you more control over your diet rather than being controlled by hunger.

Let's recap key takeaways in a concise way:

Fasting Benefits (20–120h): As fasting length increases, expect increased fat burning, deepening ketosis, rising autophagy, and hormonal shifts like high growth hormone and low insulin  $^{37}$   $^{18}$ . Benefits include fat loss, improved insulin sensitivity, possible immune system renewal at  $^{72}$ h  $^{44}$ , and cellular cleansing (autophagy) kicking in strongly after  $^{24}$ h  $^{16}$ . Mood and energy dip early but often soar later due to ketones and adrenaline. Short fasts ( $^{24}$ h) mostly help by creating a calorie deficit and slightly boosting fat-burning hormones  $^{61}$   $^{64}$ , while longer fasts ( $^{48}$ – $^{72}$ h) add the full range of metabolic perks (max autophagy, big inflammation reduction, a "reset" for many systems)  $^{43}$   $^{46}$ .

**Costs of Fasting:** Hunger, potential muscle loss if extreme, nutrient deficiency risk if extended or not refeeding properly, and not suitable for everyone (avoid if pregnant, etc.) <sup>54</sup> <sup>115</sup>. These are mitigated by proper planning: stay hydrated with electrolytes, keep fasts within safe durations for you, and do resistance exercise to protect muscle.

**Exercise & Fasting:** Light cardio in a fasted state burns more fat during the activity <sup>81</sup>, and doing some training fasted can increase fat-burning adaptations in muscle <sup>83</sup>. Resistance training is recommended to preserve muscle – it works well with shorter fasts (and even longer ones, albeit then keep intensity lower). Always be cautious with very intense exercise on multi-day fasts; your body can do it, but performance may suffer and recovery is limited until you refeed.

**Diet Strategies:** - A **carnivore or keto diet** keeps your body in a fat-burning, low-insulin mode akin to being partially fasted all the time <sup>94</sup> <sup>156</sup>. This can amplify fasting's effect, making fasting easier and potentially increasing autophagy (since insulin stays low and ketones are always present) <sup>15</sup> <sup>17</sup>. - A **vegan diet** emphasizes nutrient density and fiber, improving health markers and lowering growth signals like IGF-1 <sup>150</sup>. It doesn't promote ketosis (unless done in a special way), but it supports weight loss via lower caloric density and triggers positive changes in inflammation and metabolic health through different means (antioxidants, etc.) <sup>145</sup> <sup>146</sup>. Vegans might not get the ketone/autophagy boost, but they get benefits of protein restriction and high micronutrient intake which converge on longevity pathways as well.

Since you eat "anything with meat every meal," a more moderate approach might be to use the **principle of fasting** to allow you to still enjoy a broad diet. For example, you could eat a balanced diet (including meat, veggies, maybe moderate carbs) but restrict your **eating window** (**Time-Restricted Feeding**). That way you get a daily mini-fast that still triggers some fat adaptation and autophagy while letting you have flexibility in food choice. If you wanted to incorporate ideas from all worlds: you could do something like "**Ketogenic on weekdays, Vegan on weekends**" or vice versa, to get a mix of benefits – some folks do that to balance high protein days with high phytonutrient days. There's also something called "**fasting-mimicking diet**" (Valter Longo's research) where for 5 days you eat a very low calorie, low protein, high fat (mostly plant) diet that gives fasting benefits of autophagy and immune reset while still providing some food – could be an option if water fasting for 3 days is daunting, though it's simpler to just water fast if you can.

To sum up for you personally: Given you have not fasted >24h before, **ease into it**. Try 20-hour fast (just one meal a day) once and see how you feel. Then next time maybe 24 hours. You will likely be surprised that it's quite doable – stay busy and drink fluids. After 18+ hours you might feel a clarity that's interesting to experience. Don't exercise super hard the first time; let your body adjust. Over a few weeks, you'll become metabolically flexible and fasting will feel more natural (hunger becomes just an empty feeling that comes and goes, not an emergency). Always break your fast gently – a large heavy meal right away can upset your stomach or cause a blood sugar spike. Instead, break fast with something light (some protein and a bit of fat, e.g., a small piece of chicken or a shake), then eat a normal meal an hour later.

By understanding what happens in your body at each fasting milestone and with each diet composition, you now have the **knowledge to tweak your regimen** to meet your goals: - For aggressive **fat loss**: incorporate longer fasts (24-48h occasionally), possibly a ketogenic diet to maximize fat burn and autophagy <sup>15</sup> <sup>18</sup>. - For **muscle gain**: use shorter fasts (12-16h) just for health, focus on protein and resistance training, and maybe use a cyclical approach (periods of surplus with muscle gain, punctuated by mini fasting cuts to shed any fat gained). - Always combine strategies with **adequate rest, stress management, and micronutrient-rich foods** so your body gets all it needs to function optimally while you manipulate energy intake.

In essence, think of **fasting** as a powerful "reset" button – hitting it periodically clears out the junk (cellular and perhaps mental junk too) <sup>43</sup>, and calibrates your system to run better. **Autophagy** is a big part of that reset: it's how fasting tells your body to "spring clean" internally, consuming old cells and misfolded proteins for fuel and thus preventing diseases <sup>5</sup> <sup>16</sup>. Understanding this, you can appreciate why fasting is being explored not just for weight loss but for longevity and therapeutic purposes.

With this knowledge, you can confidently experiment and find the right balance of fasting duration and diet type that suits your lifestyle and helps you achieve a lean physique now **without** sacrificing muscle (since you'll protect it with training and nutrition), and later shift to muscle-building with minimal fat gain because you know how to control hormones and metabolism with fasting if needed. Always listen to your body's feedback and adjust accordingly – science provides guidelines, but individual responses vary.

Good luck with your fasting journey and fitness goals! By leveraging the science of fasting and diet, you're equipped to transform your body composition while also improving your health from the inside out – truly using knowledge as power.

#### Sources

- Fasting depletes glycogen by ~24 hours, then forces the body to switch to burning fat (ketones) and protein for fuel [30] [34]. This metabolic switch is key to fasting's fat-burning effect.
- Studies suggest **autophagy** (cellular self-cleansing) significantly increases between 24–48 hours of fasting 16, as the lack of nutrients triggers cells to recycle old components for energy. This helps explain fasting's rejuvenating effects.
- Short-term fasting causes surges in human growth hormone (HGH) one study noted up to a 5-fold increase in HGH after 2 days of fasting 157. Higher HGH during fasting aids in fat breakdown and helps preserve lean muscle mass 42 158.
- Fasting lowers the fat-storage hormone insulin and raises adrenaline/norepinephrine. As a result, fat oxidation increases. Research confirms that fasted exercise burns more fat - in one trial, aerobic exercise after an overnight fast led to higher fat burn than the same exercise fed 81
- During prolonged fasting (48+ hours), ketone levels in the blood rise substantially. After 2 days, ketones reach about 1-2 mM, and by 5 days they can hit ~7-8 mM <sup>2</sup>, indicating a deep state of ketosis where body fat is fueling the body and brain.
- · Alternate-day fasting or similar intermittent fasting routines have shown effective fat loss with muscle retention. A review noted that intermittent fasting trials resulted in comparable weight loss to daily calorie restriction, but with potentially less muscle mass reduction (70). Participants often find IF easier to adhere to than constant dieting 128.
- Autophagy is activated not just by fasting but also by carb restriction. The Cleveland Clinic notes that a high-fat, low-carb ketogenic diet can induce autophagy, as it mimics the fasting state from a cellular perspective 15 133. Thus, diets like keto or carnivore keep insulin low and may promote some of the same cellular cleanup benefits as fasting.
- Those on plant-based (vegan) diets tend to have significantly lower IGF-1 levels than meateaters 150. Lower IGF-1 is linked with reduced aging and cancer risk. The high fiber and nutrient intake in vegan diets also improve insulin sensitivity and lower inflammation 145 146, contributing to long-term health and easier weight management.
- Fasting, especially intermittent fasting, has been associated with numerous health benefits in human studies: improved memory, lower blood pressure and resting heart rate, reduced fasting insulin and improved glucose control 68 69. It even triggers markers of cellular stress resistance that can protect against chronic diseases (95) (99).

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