

# CARB TOLERANCE

## WHAT'S YOURS?



dietflex

LOZ life

For the past 40 plus years, the blame for the everexpanding waistlines in Western populations has been placed on dietary fat. This spawned industries promoting everything from low-fat diets, low-fat foods including junk foods promoted as being healthy, and medication to prevent the body absorbing fat. And what has happened to the population in that time? The problem continues to increase.

Despite research proving that Western populations are now eating less fat, there has been no reduction in the incidence of overweight or obesity. Researchers started to question if the accepted dietary advice was correct.

Increased understanding of the biological functions of the body has shown that dietary fat is not the villain it was made out to be.

When eaten, fat is digested primarily in the small intestine. As it is broken down, the resultant fatty acid molecules are transported through the intestinal wall and into the bloodstream, where they are each combined with three glucose molecules to form triglycerides. If not used for energy, the triglycerides are stored in the fat cells.

When carbohydrate is eaten, digestion begins in the mouth and is completed in the stomach and small intestine. Carbohydrates are broken into simple sugars. The sugar molecules are absorbed through the intestinal wall and taken to the liver, and then released into the bloodstream where they combine with fat.

Glucose is the preferred source of energy for the body as it is very easy to access. Specific enzymes are needed in order to burn glucose for fuel, and these enzymes cannot burn fat. When glucose levels are high, and when the person follows a high carbohydrate (low fat) diet, glucose is burned for fuel and fat is stored. Where carbohydrate consumption is greater than what is burned for bodily function, everyday activity and exercise, the excess is stored in the fat cells.

If glucose levels are kept low, the body is forced to switch from producing glucose-burning enzymes to producing fat-burning enzymes. Virtually no glucose can be stored in the fat cells if dietary carbohydrates are low, so energy requirements must come from fat – both dietary fat and stored fat. This is how weight loss occurs.

It is now clear that the rise in weight in Western populations is the result of high carbohydrate (high sugar) eating patterns.

We all have at least one friend who can eat whatever they like and still stay slim, healthy and vibrantly full of energy. We also have a friend (and it may be you) who only needs to think about a piece of cake and they gain a kilogram. These two people may even be siblings.

## **SO WHAT'S THE DIFFERENCE?**

We are all different. Unless you look at identical twins, everyone has differences in their face structure, eye and hair colour, height, weight, hormonal function ... the list goes on. Knowing this to be true, it makes perfect sense that we each have an individual tolerance to the amount of carbohydrate we can consume with no ill effects.

It may not seem fair if you are not one of the 'blessed' ones, but it is a fact and you need to learn how to live with it. Someone with a nasty disease would not see it as fair, but they need to learn how to live with it as best they can.

## DO A SMALL TEST:

- Roll up your sleeves.
- Compare your forearm with that of another person.
- Who do you think could stay out in the sun for longer before getting burned?

## WHY?

The reason is that, for whatever reason (more melatonin, genetics) they have a better tolerance to the effects of the sun than the other person. But does this mean the person with lower sun tolerance has to get burned every year?

Of course not. They can:

- Be out in the sun for less time
- Cover up or use a sunscreen
- Not spend time in the sun.

There are effective ways to deal with poor sun tolerance, just as there are effective ways of dealing with poor carb tolerance.

## DISCOVERING YOUR CARBOHYDRATE TOLERANCE

The purpose of the dietflex program is not only to help you lose weight, but more importantly to determine your individual level of carbohydrate tolerance so you can learn how to deal with it. Even if you have a low tolerance, there is no reason you can't lose the weight you want and maintain your new weight for life.

As you progress through the dietflex program, you will gradually increase the amount of daily carbohydrate you consume. These increases will occur every fortnight as long as you are losing weight.

Your body's responses to these changes are carefully monitored; this includes what happens with your weight as well as your overall sense of well-being. Some find that the addition of specific foods simply does not agree with them, and these may be foods they have eaten all their lives. Perhaps in the past the problem caused by these foods was so 'normal' that it wasn't even noticed, but by excluding the food for a time and then reintroducing it, the problem is noticed.

In reintroducing foods, if you notice an undesirable consequence it makes sense to eliminate that food. Trial and error will tell if the problem was a coincidence or if the food really is the problem.

Here is an (unlikely) example: you may introduce apples to your eating plan. The first apple seems to be fine, but on the second day you have a slight tummy ache.

By the third day, your pain is quite nasty. You eliminate the apples and the pain goes away, and then two weeks later you reintroduce the apples and the pain returns. It's looking like apples are the problem.

Alternatively, the apples are introduced and over three days the pain gradually worsens. You take the apples away but the pain continues to worsen. You go to the doctor and are diagnosed with appendicitis.

The point here is that you should not automatically blame a food for a problem. The body is a complicated thing, and foods are not the only things which might cause problems.

Over time, a larger variety of foods may be added. Each set of potential additions has slightly higher carbohydrate levels. As these foods are added and their effect on your body is noted, you'll actually be consuming more carbohydrate per day and working towards discovering your individual carbohydrate tolerance.

Some people will make this first small addition and stop losing weight. Others will continue to make additions for a number of months and still lose weight. The key is to determine what works best for you.

And if you want a treat now and then? It depends on your definition of "now and then". Once you have control of your eating plan, the occasional treat should not cause too many problems. If it does cause problems, you'll know you've been over-doing it - either with frequency or amount - or you'll need to change the 'treats' you allow yourself.

## TRY ONE OF THESE WEEKLY CHALLENGES:

- Aim to eat more whole and fresh foods; eg vegetables, meats, eggs.
- Reduce processed foods and food with labels.

