

A Special Report on Diabetes and Obesity

from Dr. Alisa Cooper

Dr. Alisa Cooper is a chiropractor, clinical nutritionist, health coach and wellness advocate with over 25 years of experience. Her passion is educating and inspiring people to take care of themselves in as natural a way as possible so they can enjoy good health and spread joy to others. Her health articles, blogs, presentations and newsletters explore popular trends and topics in healthcare today. Please enjoy this special, complimentary report!



Alisa Cooper, D.C.,

This special report was extracted and compiled from the International and American Association of Clinical Nutritionists

21st Annual Scientific Symposium

on

Diabetes and Obesity: Innovations, Myths, and Missed Opportunities

Presented by:

Some of the most qualified, credentialed, experienced, educated, and dynamic speakers available in the fields of health and nutrition!

As usual, Dr. Cooper took copious notes. “It was both a painstaking and pleasurable process to extract the symposium’s most vital information and put it into bulleted points that are easy to convey and understand.”

Read through these highlights, tips and recommendations and you may learn a thing or two. You may be shocked by some of the statements and perhaps even propelled into action as a result.

“While you may feel overwhelmed by the changes you need or want to make, just a few simple lifestyle changes can bring about significant improvements in your general wellbeing! “

Dr. Alisa Cooper presents:

Symposium Highlights, Tidbits and Recommendations

1. Worldwide obesity has more than doubled since 1980.
2. 1/3 of all U.S. adults are obese.
3. 65% of the world’s population lives in countries where being overweight kills more people than being underweight.
4. 8.3% of the population has diabetes: 7 million will go undiagnosed until they have a catastrophic event.
5. There are 79 million people over the age of 20 who are pre-diabetic.

6. 23% of obese people will develop non-alcoholic fatty liver.
7. If you are obese at age 12, you are more likely to suffer from colorectal cancer, arthritis, heart disease and diabetes in adulthood.
8. An overweight child, even if he or she enters adulthood at a normal weight, is more likely to have issues with chemical signaling pathways leading to chronic inflammation, predisposing to cancer later in life.
9. Even though the normal fasting glucose is between 80-120 mg/dl, damage to your blood vessels occurs at the level of 90 mg/dl. Put another way, the damage of diabetes is going on even within the currently accepted “normal” range!
10. Thiazide diuretics can cause diabetes. (It’s on the package insert).
11. Men on statin drugs (to lower cholesterol) are more likely to have low testosterone, develop leaky gut syndrome, have impaired detoxification function, and have systemic inflammation.
12. Statin drugs deplete your natural reserves of CoEnzyme Q10. Decreased CoQ10 renders your cells more resistant to insulin, thereby predisposing you to diabetes.
13. 2/10 of all osteoporosis cases occur in men. Men on PPI’s (Proton Pump Inhibitors taken for gastric reflux) for over a year are more likely to develop osteoporosis.
14. Vit D is inversely related to insulin resistance. In other words, the more optimal your Vit D levels, the less likely you are to become insulin resistant.
15. Almost all obese people are deficient in magnesium. Increasing magnesium levels to an optimal range can effectively lower triglycerides and increase HDLs (good cholesterol).
16. The diabetes drug Metformin can *cause* peripheral neuropathy!

17. Within 10 years of a woman having gestational diabetes, she will be a diabetic.

18. Overweight mothers are more likely to give birth to babies with increased visceral (belly fat) and fatty infiltration of the liver.

19. Those most at-risk for being insulin resistant are those who are overweight and obese, have a sedentary lifestyle, have high blood pressure, smoke and are genetically predisposed.

20. An elevated (fasting) blood glucose level may not show up until the cells of the pancreas responsible for insulin production are already dysfunctional.

21. The effects of high insulin:

- You will deposit excess body fat.
- Your appetite will increase.
- You will not be able to efficiently break down the fat you already have and use it for energy.
- Your triglycerides will go up, and so will the LDLs (bad cholesterol).
- You will retain sodium and that will make you swell up (edema) and increase your blood pressure.
- You will develop skin tags.
- Your adrenal glands will be adversely affected, and you will suffer fatigue and be more vulnerable to the effects of stress in general.
- The lining of your blood vessels will thicken, predisposing you to heart disease.
- You will produce more clotting factors, predisposing you to stroke.
- You are subject to higher cancer death rates (Note: women with the highest insulin levels responded most poorly to chemotherapy.)

22. Carbohydrate restriction (meaning less than 50gms of carbohydrates per day) is imperative for getting off the blood sugar roller coaster.

Avoid soda, sugary beverages, fruit juices, pasta, potatoes, white rice, cake, chips, cookies, pies, pastries, muffins, crackers, etc.)

23. Women who drink two or more sugary beverages per day are 4X more likely to develop high triglyceride levels than women who drink fewer sweetened beverages. Drinking sweetened beverages also raises fasting blood glucose levels.

24. Daily spikes of high blood sugar disrupts metabolism in several ways: It raises triglycerides, increases LDLs (bad cholesterol), decreases HDLs (good cholesterol) and increases systemic inflammation.

25. Getting your sugar from beverages is far worse than getting it from eating food, which is bad enough. Taking in sugar from beverages INCREASES your appetite! Your body does not do a good job of sensing liquid calories, and it does not sense it has eaten, leading you to eat more.

26. Liquid sugar is a metabolic poison! You must eliminate soda, lattes and milkshakes, etc.

27. The average American drinks 50 gallons of sweetened beverages a year (Cal. Dept. of Public Health).

28. People who fall asleep easily enough only to wake up after a few hours are often suffering from unstable blood sugar and could benefit from eating a small amount of protein before bed. (Try this for 2 weeks straight before deciding if this approach is working or not.)

29. Carbohydrate restriction benefits EVERYONE! It improves glycemic control, improves lipid profiles, decreases inflammatory markers in the blood, stabilizes insulin, facilitates the loss of excess body fat, and increases satiety (satisfaction).

30. People with diabetes will require a stricter and longer time at low levels of carb intake and may have to begin at 20gms/day and add more carbs into the diet as glycemic control improves. Weight loss will be slow, but it will come!

31. People with unstable blood sugar do not do well with caffeine.

32. Carbohydrate restriction (improved glycemic control) leads to improvements in the following conditions: Gastric reflux, headaches, joint pain, muscle aches, asthma, allergies, GI complaints, depression, anxiety, yeast infections and blood pressure.

33. Many medications interfere with the body's ability to stabilize blood glucose. The more meds you are on, the more diligent you must be in restricting your carbohydrate intake!

34. The diabetes drug Metformin depletes CoenzymeQ10, Vitamin B12 (methylcobalmin) and probiotics. If you need to be on this drug, make sure you are taking these supplements.

35. Probiotics help convert the inactive form of thyroid hormone into the active form (T-4 to T-3 conversion). Inadequate probiotics leads to low thyroid function. Low thyroid predisposes you to diabetes.

36. Statins raise glucose! They increase the risk of diabetes by 48%.

37. The first 5-7 days of carbohydrate restriction are the hardest (just like drug and alcohol detox!), but as glycemic control improves, cravings become fewer and fewer. You will break free!

38. NEVER allow yourself to gain 5 pounds without taking action. Never hold on to clothes that are too big for you. Get rid of them!

39. Obese people are overwhelmed by the amount of fat they need to lose. They must realize that even decreasing their total body fat by 5-10% will make bring about a tremendous improvement in their health.

40. Do not go through carbohydrate withdrawal on your own. Enlist the help of a clinical nutritionist or a qualified health care practitioner.

41. Feeding behavior (wanting and liking food) is managed, in part, by the complex interaction between nerve signals and chemical pathways to and from the brain and the gut. The hypothalamus (located within your brain) plays a significant role in hunger and satiety. The future of obesity treatment may be heading towards deep brain stimulation. Yikes!

42. The #1 cause of liver disease today is excessive infiltration of the liver by fat!

43. The more chaos in a person's life, the more difficult it will be for them to lose weight.

44. Adipose (fat) tissue secretes proteins that signal for inflammation. These proteins are called *adipokines*, and they are linked to cancer, immune dysfunction, diabetes and blood vessel disease.

45. Scientists are now thinking in terms of 'angry fat cells.' Fat cells fill up and explode, spewing toxins that must be cleaned up by the immune system. It's an ongoing and difficult job. Angry fat cells target every organ in your body and must be stopped.

46. Avoid foods made with sunflower oil, safflower oil, corn oil and soy oil. These are all omega-6 fatty acids and we have far too much of them in our diet. We should be at a 2:1 ratio of Omega-6's to Omega-3's, but most of us are at a ratio of 20:1- some are as high as 50:1, tipping biochemical pathways in your body to produce serious inflammation.

47. Omega-3 fatty acids (like those from fish oils) dampen the expression of genes involved with inflammation and obesity. Omega-3 fatty acids make your cells more sensitive to insulin, thereby preventing and treating diabetes.

48. New study: Animals deficient in omega-3 fatty acids that were fed high fructose corn syrup developed memory loss and metabolic syndrome (obesity, heart disease, high blood pressure and diabetes).
49. People with fatigue, depression, anger, anxiety and mental confusion must have their fatty acids analyzed. These symptoms may be a result of a deficiency.
50. Drug addicts and alcoholics treated with omega-3 fatty acids have a lower incidence of relapse.
51. According to the National Institutes of Health, obesity is the second leading cause of preventable death in the United States, close behind tobacco use. An estimated 300,000 deaths per year are due to the obesity epidemic.
52. Slow metabolism is due to a decreased amount of lean muscle mass.
53. Increasing exercise INTENSITY increases the magnitude of weight loss.
54. Your body receives the benefit from exercising for a great many hours after exercise. (Approx. 17 hours).
55. Exercise causes insulin levels to drop by 40-70% depending on intensity, frequency and duration.
56. After 24 hours of sitting, your body gets 40% less efficient at metabolizing glucose.
57. The more you sit, the less you use your muscles, bones and joints, leaving you more vulnerable to injury and connective tissue damage.
58. Diabetes confers an equivalent risk of aging 15 years.
59. An A1C (glycosylated hemoglobin) level greater than 5.0 reflects a person approaching diabetes.

60. Alzheimer's disease is now being considered Type 3 Diabetes, or insulin resistance affecting the brain.
61. The perfect storm for diabetes: high body fat, stress, inactivity, toxicity, and systemic inflammation.
62. Adipose (fat) tissue feminizes men since the aromatase enzyme in adipose converts testosterone to estrogen. This effect is physical and emotional!
63. Likewise, adipose tissue is masculinizing for women.
64. Every pound you gain above your ideal weight moves you closer to the grave.
65. Nearly 5% of American children have non-alcoholic fatty liver (liver scarring) most likely the result of ingesting high fructose corn syrup. HFCS causes insulin resistance and high blood pressure.
66. Americans consume 60 pounds of high fructose corn syrup per person per year.
67. Leptin, known as the satiety hormone, is released from body fat and tells the brain you have had enough to eat. Great! But if you keep eating and accumulating more fat, you become resistant to the circulating leptin and you miss out on the satiety effect.
68. Sugar disrupts neurotransmitter receptors just like opiates and other addictive substances, leaving you with an insatiable urge to eat and eat and eat.
69. Experiments showed that junk food turned rats into addicts, and they chose sugar over cocaine as their drug of choice.
70. The exclusive fuel of cancer is sugar. Depriving cancer cells of sugar will disrupt their metabolic processes, promoting cancer cell death.

71. One bad day of eating a high fat diet initiates brain decline. Every meal and every bite counts whether you think it does or not.

72. Exercise increases learning by 20% beginning with a single exercise session.

73. You can make up for excess calories by exercising vigorously.

74. You can double your life span by cutting your calories in half.

75. The bigger your waist the less fruitful your love life.

76. An ideal waist is less than 30 inches for women and less than 35 inches for men.

77. What really makes you fat is the combination of poor diet, lack of activity, stress and toxic chemicals.

78. A single exposure to certain pollutants can affect 4 generations of offspring.

79. The level of GGT in the blood is a bio-marker of toxin exposure. If your GGT level is greater than 50, you are 50X more likely to develop diabetes.

80. The wrong foods to eat are wheat, soy, corn and sugar.

81. Muscle is your only metabolically-active tissue! To up-regulate metabolic function, you have to fix the furnace! It always comes down to nutrition and exercise! That is not new, although we may need to hear it yet again.

82. Simply put, if you want to increase your metabolism and change your life for the better, start **GAINING** muscle!

83. Exercise reduces blood sugar levels to the extent that when a diabetic starts exercising, his/her meds will need to be reduced or else hypoglycemia (low blood sugar) can result.

84. If your doctor reduces diabetes meds too soon and/or too quickly, you could experience hyperglycemia (too high blood sugar).

85. Doctors need to work with nutritionists, exercise physiologists and fitness trainers for the good of the patient. At the same time, patients need to be willing to help themselves.

When you need a little help helping yourself...

If this Special Report has found its way to you, you may be a diabetic, pre-diabetic, overweight, obese and/or suffering with inflammation, fatigue, depression, arthritis, heart disease, high blood pressure, and gastric upset to name a few. If you read the report in its entirety, you will not be shocked when I say NOW is the time to champion yourself to embark on a healthier way of eating: one devoid of nutrient-poor, calorie-laden, metabolically toxic foods and beverages in favor of one that emphasizes delicious, nutritious, life-giving foods that heal the body and nourish the soul.

Hand in hand with embracing a new way of eating, there will also be exercise! The kind where you MOVE! And there will be BLOOD! Kidding! There won't be blood, but there might be a few beads of sweat. And probably a few tears, tears of joy when you see your body fat reducing, your meds reducing, your energy increasing, and your healthy glow radiating outward to awe and inspire others.

If you find that you feel inspired but don't know where or how to begin, it might be a good idea for us to talk. Call me at 602-361-3283 for a **FREE 15-minute consultation. Let's see if it clicks for us to work**

together toward achieving at least one of your most exciting health goals. I look forward to your call.

Call now, you'll feel better!

Your partner in health,

Dr. Alisa Cooper

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