

# Balance365 Episode 74 Transcript

Annie: Welcome to Balance365 Life Radio, a podcast that delivers honest conversations about food, fitness, weight and wellness. I'm your host Annie Brees along with Jennifer Campbell and Lauren Koski. We are personal trainers, nutritionists and founders of Balance365. Together we coach thousands of women each day and are on a mission to help them feel healthy, happy, and confident in their bodies on their own terms. Join us here every week as we discuss hot topics pertaining to our physical, mental and emotional wellbeing with amazing guests. Enjoy.

Annie: The Seventies was all about replacing meals with sensible shakes. In the 80s Oprah raved about her all liquid diet, the nineties focused on low fat everything. In 2003 the South Beach Diet came to market and today the Keto Diet is trending and popularity. The Keto diet has actually been around for decades, but its claims of burning body fat while simultaneously being able to enjoy bacon and butter has piqued a lot of people's interests. In fact, the Keto Diet is one of the most common diets we get questions about in our community. "Should I try Keto? How many carbs am I allowed to have again? Is there a difference between low Carb and Keto? What about those ketone supplements? Do those work? Do I need those too? My friend said she did Keto for a week and lost 10 pounds. Is that even possible? Is that healthy?" You're in luck because today's guest has answers to all of those questions and so much more.

Annie: Amanda Howell has been working in women's health for over eight years. She has her health coaching certification, multiple nutrition and personal training certifications and she also has her master's degree in public health and nutrition. Her specialties include women's health, reproductive health, sports nutrition and pre and postnatal exercise and nutrition. Combating bad information and fad diet trends on social media is a large part of Amanda's job. She is even an early adopter of the Association for Healthcare Social Media where healthcare professionals band together to drown out bad information and promote the latest scientific literature and research. And let me tell ya, Amanda gives it to a straight about the Keto Diet on today's episode. And when you're done with this episode, be sure to catch Jen and I are on the following Balance365 life radio podcast where we discuss Jen's experience with low carb, high fat diets and how she transitioned to a more balanced approach. Enjoy. Jen and Lauren, we're all together. It feels like it's maybe been awhile since we've all three been a podcast together, yeah?

Lauren: Yeah.

Jen: It has. I think, yeah, we talk everyday so it's tough to figure that out. But yeah, it is great. We're all here.

Annie: I know and it's really exciting because we have a special guest covering a topic that comes up so often in our community and that is the Keto Diet. Should you, shouldn't

you? What is it even? And Amanda, welcome to the show. You're going to tell us all about the Keto Diet today, aren't you?

Amanda: I am. Thanks for having me.

Annie: We're so excited. So Jen, tell me, Amanda and I actually go way back when we were like, I don't know, maybe like fitness bloggers sort of thing. Like trying to be fitness bloggers and I think we were both like women's health, like influencers or something back in like 2014 or something. And then out of the blue, Jen comes to me and she's like, you have to have her on the podcast. And it's like, I'm friends with her. So how did, how did you two meet Jen?

Jen: I noticed Amanda through our social media because she kept resharing our content and, and then I, so then I started following Amanda and was like, this woman is incredibly smart as well as educated and you put out amazing content, Amanda, and we have to link our community to your social media pages. That's how I found her.

Annie: I mean, anyone that shares our stuff is obviously our people, right? That's our love language. Like thanks for spreading the good message. But Amanda, you have a fair amount of experience and knowledge with the Keto Diet. How did that come about?

Amanda: So the short and sweet is my background is in medicine and I started working women's health about 10 years ago and I just realized that medical professionals don't get adequate new training in nutrition and fitness. So the women we were working with, you know, they weren't getting the best advice. And then of course as fad diets go, you know they come and go, there's always a new one. And for some reason Keto has been the thing to do over the past 12 months and it's definitely come and gone throughout the different decades. But it is the newest trendy fad diet and it's everywhere. And of course women are targeted by the diet industry hard. So we're seeing a lot of women falling this and unfortunately what they don't realize is that this particular diet has some really catastrophic effects on our unique hormones.

Jen: I actually, we interviewed Dr Aria Sharma a couple months ago. He's been an obesity medicine doctor in medicine professor for 30 years here in Canada. And we actually haven't published his yet because actually the interview is so long we need to go through and figure out how to break it up into several different podcasts. So we keep bringing it up that we've interviewed have and then we don't keep not releasing podcasts. Anyways, side note. And anyways, Keto came up with him just briefly and he said he's been doing this for 30 years. Keto is not new. He sees it come back around every couple of years.

Annie: It's been around for a while. Amanda, can you tell us where it even originated?

Amanda: Yeah, so it's actually a medical diet and it was established in the 1920s to treat epilepsy. So we didn't have medication at that time to control seizures. And once

medication was discovered was about, I think it was like 1938, the diet was pretty much abandoned. The only reason it's still used in medical settings is for epilepsy that is unresponsive to medication.

Jen: Yeah. One of our moderators in our group, her son has epilepsy and Keto in is known as the last resort for treatment and is also supposed to be under strict medical observation, well, the, like, fairly heavy medical observation while the child is on the Keto Diet. Because I mean, we could talk about this as well. We don't need to but keto has some catastrophic consequences for children as well. I don't know if you're up on that research, but slows down growth, et cetera, et cetera, et cetera. And what we're starting to see, I don't know if you've seen this, Amanda, is people putting their kids on Keto diets.

Amanda: Yeah. And as you said, it absolutely has to be overseen by a registered Dietitian who works in the area. You have to get regular blood draws. There's very serious issues with sodium regulation, blood pressure and kids are already so sensitive to stuff like that that putting them on Keto can, like you said, be catastrophic.

Annie: Hey Lauren, have you ever done a Keto Diet?

Lauren: No.

Annie: No. Jen, have you?

Jen: I've done not Specifically Keto. Okay. I wasn't doing Keto, but I've done Keto in different forms. There's like Atkins, South Beach Diet. I've done those like as like official diets and then there's been just cutting out all carbs, which is basically Keto. And so I actually flip flopped probably between sort of Keto and low carb for like 10 years. And then I shouldn't say just Keto and low carb. My third one was bingeing on sugar would have been the third thing that I was doing. Yeah.

Annie: Definitely not low carb.

Jen: Right. So I basically, I feel like for 10 years I went sort of back and forth between, that was like my pendulum. It was like Keto, sugar, Keto, sugar.

Annie: A ping pong match.

Jen: Yeah.

Annie: Between the two. I have never, I mean, I think I had intentions of doing a Keto type diet, but I couldn't sustain it. Like, I'd start out Monday morning like, "Yeah, I'm going to do this." And then like by the afternoon, like, "Nope, this is not for me."

Jen: Well, I think we're going to do a followup podcast on this after we interview Amanda to talk about my experience and my experience coming off Keto, which was also very difficult, but you get some quick wins really early on as far as, I don't want to

say fat loss cause I wouldn't say it's necessarily fat loss, but a change in body composition. It's weight loss. Yeah.

Amanda: It's different.

Annie: Right. Can we, can we circle back real quick to something that Jen and Lauren both brought up? Um, is there a particular number of grams and carbs, protein fat that distinguish a Keto diet from a low carb diet? Because are they one in the same when people talk about low carb, is that Keto? Is Keto low carb? Like what is the defining factors of a Keto diet?

Amanda: So keto is roughly 75 to 80% of calories from fat, 15 to 20% calories from protein and less than 5% calories from carbs. And it's going to be different for each individual person at what it takes to get into Keto really depends on the individual physiology, but usually it's considered successful when you have ketones regularly present in urine or you use finger poke to get ketone readings through blood and then that is different from low carb in the sense that low carb is anything under 130 grams of Carb, but above 50 grams of carbs. So 50 grams of carbs is kind of that cutoff between low carb and Keto.

Annie: So 5% of your daily intake from carbs.

Amanda: Yeah. It's usually no higher than 20 to 30 grams. 50 most people, if they're eating 50 grams of carbs aren't actually in ketosis anymore.

Lauren: Okay. So Amanda, tell me if this is your experience too, but what I see a lot, and they actually did a video about it a month or two ago because it just really irritates me, is people use Keto and low carb interchangeably and then they say, like, "Oh, I got these great results from Keto," but they're not actually Keto. And I feel like it's really harmful to be telling, you know, shouting from the rooftops that Keto is what made this change in your life when it was probably a lot of the time just being more moderate about your carb intake and eating more balanced meals or you know, dieting low carb during the week and having a cheat meal on the weekend, which is not Keto. Do you agree?

Amanda: Absolutely. And a lot of people don't really understand that actually getting into ketosis and staying in Ketosis is incredibly challenging and most people who are doing, you know, quote Keto aren't actually in Keto. They're not producing ketones or they're only producing ketones during the week. And then as you said, bingeing the weekends, which immediately throws your body out of Ketosis. You're no longer Keto. It's more of a Yoyo Diet than anything else. So most of the time when people say they're going Keto, what they're doing is they're removing processed, refined, simple carbs. They're replacing with fruits and vegetables, they're adding more dietary fats or adding more lean protein. Of course they're going to feel better. Of course they're going to lose some weight. There are increasing micronutrients, fiber. Like I said, they're getting enough protein. It's not Keto that's causing these, you know, great changes. It's just the fact that

they've tidied up their diet.

Jen: I actually was at a conference last May and sat across from a man who is Keto and he ordered ginger beef and I was like, you are not knowing what you're doing. Like ginger, you know, is full of sugar, ginger beef. And I'm like your first bite, you have knocked yourself out of ketosis. It was, yeah, but he calls himself keto. He had ginger beef for dinner, didn't order any bread or whatever else. But yeah, it's, there's a lot of misconceptions.

Amanda: I find the social media kind of gets out of control. You have all these people who are showcasing these amazing results they got from, you know, quote Keto and it's kind of deceptive because if you would really, you know, stick them in a room and study them without any other factors being involved, they are most likely not on Keto. They are just eating a healthy, balanced diet. They're in a calorie deficit and they're more than likely eating enough protein to help out with muscle mass.

Annie: Amanda, you keep talking about this word Ketosis, which is essentially the goal of a Keto Diet to put you in this state of Ketosis. Can you kind of in layman's terms describe what that is and why it's beneficial?

Amanda: Yes.

Annie: Or why people believe it to be beneficial?

Amanda: Yes. So Keto really stands, just stands for Ketosis. It's just a shortened abbreviation of the word and it just means that your body is producing ketones. And what that means is that your body is using dietary fat or body fat for energy instead of glucose from carbs. So our body's main source of energy is glucose. We love carbs. We throw them in our muscles in the form of glycogen. Any athlete knows that replacing glycogen in your muscles, I'm sorry, is mandatory. But the idea behind ketosis is that you can utilize dietary fats and then your own body fat for fuel in that. So historically speaking, it's a survival mechanism. If we're in a situation which most of us will never find ourselves in now, where there is no food or famine, our body is really smart and it will switch over to burning fat to keep us alive. Just because we can do it doesn't mean we should. It's kind of the last resort to prevent you from dying.

Annie: So this is can also be achieved through, through low carb or minimal carbs or even fasting?

Amanda: Yes. And so obviously people who do Keto aren't close to death. They're doing this in a really strategic way while controlling their protein, controlling their dietary fat intake. So they're almost trying to kind of cheat the system, if you will. They're trying to get, you know, your body into a state of Ketosis, fat burning, by kind of circumventing the need for carbs. It's doable. It's just, it's not enjoyable. It's not sustainable. And it's not necessary. I mean, my motto is, you know, why make it harder than it needs to be?

Annie: Sure. And as Jen noted, even just one meal can knock you out of that state of ketosis almost instantly. Correct?

Amanda: Oh, absolutely. And that's why most people who are following the Keto Diet aren't actually Keto because the amount of control you have to have on your diet, your environment, your situation, knowing exactly what's in your food. I mean, traveling is pretty much out of the question unless you pack and bring all your own food, you have to be testing your blood or your urine every single day. It's just, it's too easy to knock yourself out of ketosis. So like you said earlier, most of the time it's really the low carb diet.

Lauren: Yeah. And as Amanda said, it's a survival mechanism. Like it's the last resort that your body takes. And so as soon as your body is able to switch back to normal using glucose for fuel, it does so. So as soon as you falter, it'll go back to its preferred source of fuel, which is glucose.

Amanda: And that's really where that Yo Yo dieting comes in because at that point, what you're doing isn't healthy. You're just bouncing back and forth between these unsustainable methods of eating.

Annie: So can you talk us through kind of what Jen was alluding to earlier? When someone starts a Keto Diet, should know that they get kind of some quick quote unquote wins instantly. Can you, let's just pretend I'm like, "Okay, it's Monday morning, I'm starting the Keto Diet." What does that look like? What's gonna happen to my body? Or what could I expect to happen to my body?

Amanda: Yes. I think the most important thing is to differentiate like right away that weight loss and fat loss are totally different. You can lose weight but not lose fat. So when people started Keto Diet, what they're doing is essentially, you know, cutting back their calories, cutting back their carbs. So the reason quote it works is because they are immediately dumping stored glycogen, which is carbs in our muscles. So, you know, you're trying to get your body to burn fat. You're not eating any carbs, so your body is going to dig in to all that stored glycogen and use it all up. So you're about to dump all that glycogen stored in your muscle. For every gram of glycogen we store on our muscle, we actually saw our three grams of water as well in our muscles. So this makes us feel full, fit, it gives our muscles that plumped up look.

Amanda: So the second we dump glycogen, we started dumping water. That's weight, not fat. So, then as we kind of move along, it's actually really hard to eat the optimal amount of protein you need and remain in Ketosis. This is one of those tricky situations with the diet is too much protein throws your body out of Ketosis, but not enough protein means you're going to lose muscle mass. So then we see a loss in muscle tissue, which again is not good. And then lastly, if someone manages to stay in a calorie deficit long enough, they're going to lose fat. But again, that weight loss in the form of glycogen, water and muscle is going to come first. Those are the things we absolutely do not want

to be losing, especially as women. We need that muscle mass, we need that bone density. All of these things are so good for us and that diet immediately take those away.

Annie: So this is what we kind of hear, we see it on social media or in our circle of friends or family that someone starts a Keto diet and they're like, "I've lost 10 pounds in two weeks."

Jen: I have seen some people reporting some insane stuff. There was actually, Layne Norton talks about like Ketogenic diet quite a bit. Amanda, I'm sure you know who he is. And he posted a couple of weeks ago about a study that was done with three different diets looking at weight loss versus actual fat loss and the Ketogenic diet produced great weight loss results, but it had the exact same body fat loss as the diets that it was being tested against.

Amanda: And that's really what it comes down to is all the recent research that we have shows zero metabolic advantage to Ketogenic Diet. Even when you look at insulin, because everyone's obsessed with insulin down sports nutrition world. Even when holding all those things constant, it just comes down to a calorie deficit. So if you're in Keto and you're losing weight, it's just because you're eating less calories, there's probably a higher satiety effect with the protein and fat, which means you're eating less. But if you're losing weight because you're eating less than you need.

Lauren: So one thing too I wanted to go back to, as Amanda said, the first things that you're going to lose is going to be the water and the glycogen. And so if you think about it, the Keto diet is so hard to stick to, you're doing all of this. You're losing water and glycogen and muscle more, even more than you are fat. And then you are bingeing or overeating most likely because of it. And you gain weight back. So it's like you're doing all this work and you're not even losing fat. You're losing water and glycogen mostly.

Jen: Right? And you're often gaining, actually, what can happen is fat gain over time, as we talk about, it's just that cycle of Yoyo dieting and that once you lose muscle, you don't just put muscle back on, right? You put fat back on. When you're in a caloric surplus, your body's not like, "I'm just going to take these calories and beef up these muscles."

Amanda: Well, that's where the survival mechanism comes into play is if you are depriving your body and you're not doing it because there is obviously a way to slightly deprive your body if your goal is, you know, fat loss. But in this sense with Keto, if you're depriving your body that immensely, the second you introduce calories or food again, your body is going to immediately store all of that. Again, survival. If you starve, starve, starve and then all of a sudden binge, your body holds on to all of it because it does not want to be in that state of survival anymore.

Jen: Right. And not to mention the like, I guess, the bloat, which I've experienced and we can talk about on the next podcast, but when you're bingeing, like when you deprive yourself, what people don't understand, I think, is that that binge is actually like a normal and natural response to restriction. It feels awful. It feels awful to swing between

deprivation and then bingeing. So you have that water loss on the Keto Diet and then you are all of a sudden bingeing on, typically, the food that you're restricting. So for me it would be ice cream and whatever else. And then you're basically bloated because you've just had so many carbohydrates. Yeah.

Annie: Amanda, we've kind of already touched on some of the downfalls of Keto. If there's someone listening that's like, "Should I, shouldn't I?" The first one being that it's really not sustainable. There is no wiggle room for a true Keto Diet. What we have heard is this term of like I'm doing like modified Keto or like we talked about low carb, but calling it Keto, which isn't true Keto as we just discussed. But there is some other downfalls to Keto diets or maybe even some of the low carb diets depending on your carb intake could fall into this. And one of them has cravings, correct?

Amanda: Oh, absolutely.

Annie: Like you can expect some insane cravings if you're doing a Keto Diet.

Amanda: Yeah. Like we talked about your body's main source of fuel, you know, the preferred source of energy is carbohydrates. Glycogen. Our brain runs on those. Like I said earlier, just because we can run on dietary fat doesn't mean that optimal. I mean, we can survive. We can't thrive. So carbohydrates are necessary. And there's this concept of quote, the Keto flu. So this is if you've been doing Keto for a few days, you're going to start feeling irritable, you're going to have fatigue, nausea, brain fog, all these terrible things that people just call the Keto flu and you're supposed to push through it, you know, and that's literally your body screaming for nourishment. You should not just push through that. And if you can, more than likely those cravings are going to stick around. And unless you have some incredible self control are going to binge. And honestly you probably should. Your body needs that. I'm not saying that bingeing is a good idea, but your body is telling you "This is what I need and you need to eat it immediately."

Annie: This goes back to kind of our philosophy of how women especially seem to think that outside influencers know their bodies better than we do and they're like, "Oh, everyone else is doing it. And I read this article in a magazine from this expert or someone I follow on social media and they can do it. So therefore I should do it too. But like, yet, my body is telling me don't do it." And we trust the outside person or the outside influence more than we do ourselves in. You're saying, like, "No, maybe you should listen to your body."

Amanda: Absolutely. I mean just because someone else wants to be miserable doesn't mean you should be, I mean irritability, fatigue, nausea, brain fog. That all sounds terrible. And why would you want to put yourself through that if it's not necessary? If your goal truly is to, you know, lose the weight or lose fat or feel better, you can do it in ways that don't cause you to feel that miserable.

Annie: Can you also touch on, there's also some ways, some supplements that are

being pushed or encouraged, either and I'm not exactly sure how you use them, if they're used in conjunction with a Keto diet or in place of a Keto Diet. Can you explain what mean? Cause you can take ketones.

Jen: We get so many questions about Keto supplements. We just got one the other day and I actually can't, I can't go research every single supplement for people that they send us questions about because there's just so many untested supplements on the market. And I wish there was a better place for us to send people. But I think what people really have to realize is that there's, we're never going to stop seeing supplements like this that promise the world. It's, the supplement industry isn't regulated, there's no testing. It's just kind of whatever goes and wild west.

Amanda: Well, and I think what people forget is the supplement industry is a business and they don't care about your health. If they see a fad diet or trend, they are going to capitalize on it. Simple. Their goal is to make money. So right now there are these things called powdered synthetic ketones and they're essentially supposed to mimic the ketones that your body would produce when you are in Ketosis. And honestly right now there is zero research so you don't even have to do research because there is none available to back these claims. No research has been done. We haven't, from what we have seen with the powdered ketones, they do not put your body into a state of ketosis. It's literally just tossing money down the toilet.

Jen: Right. Which is the case with a lot of supplements actually, but

Amanda: and honestly any reliance on supplements should be a red flag. That's one of the things I teach my community is if you see this awesome new diet and you think it's really great and you want to try it, look immediately. Do they recommend or require supplements? If that's the case, it's a fad diet, it's not going to work. You're most likely gonna rebound. You don't need supplements to be a healthy person. The only time I ever tell my clients that they ever need something additional is if they are seeing their doctor, they're getting blood work and they might be deficient in something. Let's just say vitamin D. Then you take a vitamin D supplement. You don't need powdered ketones, anything like that. If your diet is complete, you shouldn't need that.

Jen: The other thing that people don't realize about the diet industry is that supplements have an insane markup on them. It's really good money to be in the supplement business. And so when these diets are recommending supplements to you or you must have this supplement, they are probably making an enormous percentage of their money from the supplements you're buying from them, not even necessarily the Diet. Like I know BeachBody is like a \$700 million company and they push Shakeology on everybody, right?

Amanda: Yeah. It's insane. And we see a lot of it in the dieting world. I mean we've all been there. We have friends who, you know, gets in with a company and they want to sell the supplements to us. And what I really tell people is to look at it so we can use shakeology as an example really quick is if you look at the nutritional breakdown in the

back of shakeology, it is nothing more than a protein shake. That's all it is. So the reason people feel better is because they're increasing their protein and probably replacing like a, you know, a process meal or a meal they would have normally eaten out with a protein shake. So why would you spend \$130 on a shake when you could just eat a higher protein meal or honestly, if you really want the protein powder, grab a \$20 protein powder from Target, call it a day. You don't need to spend a \$130 on the trademarks of supplements.

Jen: Right.

Annie: Shifting gears a little bit, Amanda, we work pretty much exclusively with women. We have some supplements to our program that address feeding your family, including men.

Jen: We have paper supplements. We have some additional material that could be called supplements.

Annie: Yes. Which is

Lauren: supplemental materials.

Annie: That's, that's funny. I was listening, I swear. But there are some ways in which Keto slash low carb high fat diets affect women differently than they do men. And that's something that I have heard, in my personal life, in our community that like my husband's doing this and he's had great results or this has worked well for my husband, but I'm struggling to get the same results. Are there ways that these sort of affect women differently than men?

Amanda: Oh, absolutely. And I think it's really important to understand that men are simple. They do not have the crazy amount of hormones that we are dealing with as women. Most of the research that we see in sports nutrition is done on men because it is easier to do studies on them. They are not dealing with progesterone and estrogen spikes, all of that other stuff. So when we look at women, we really have to look at those reproductive hormones and look at how diet affects those in particular. Just because some bro is doing Keto and telling you he's getting great results does not mean it's a great option for us as women. So, you know, right away, we see a lot of women struggling with thyroid issues. Women are just at a higher risk for thyroid issues overall. So this is always kind of where I start with women is low carb and Keto can actually present a huge issue for women in thyroid function. So we require carbohydrates to convert thyroid hormone and without carbs we can't convert properly, which means we're going to stop her from underactive thyroid, which results in fatigue, irregular cycles, infertility, hair loss and weight management issues. So there's more. But right off the bat we're seeing issues with thyroid function.

Annie: That's really interesting to me. I do think, like you said, women are, I see this as it pertains to weights that like they, they're learning about how to take care of their bodies from a boyfriend or a man in the weight room or whatever. And it's like, it's not exactly apples to apples and just because maybe he has a certain type of body or he has a lot of quote unquote of experience, personal experience in the weight room or dieting. Does it mean that he should be giving out dieting advice.

Amanda: Oh, absolutely not. And what men don't realize is that women, again, have estrogen and progesterone we need to deal with. So let's talk about Leptin for a second. So being in Keto is supposed to lower insulin levels, and like I said, sports nutrition is all about insulin right now. So in theory that sounds great. You know, if you're suffering from PCOS, let's say, and you struggle with insulin, it sounds great that Keto might lower that insulin. So the problem we're seeing is that lower insulin lowers our leptin levels and Leptin is actually a satiety hormone that tells us when we're full or we've had enough. And when we as women follow a Ketogenic Diet, we are at risk for lower levels of circulating Leptin because it's produced on our ovaries and men don't have ovaries, so they might not know this. And that causes an imbalance in our female sex hormones, which is the estrogen and progesterone. When we start messing with our estrogen and progesterone, that's when we see loss of period, irregular cycles, infertility, thyroid issues, weight management issues. It's a whole cascading nightmare of problems.

Annie: That sounds fun.

Amanda: It's not. And like I said, I work in Ob/Gyn and it's just unfortunate because the Instagram influencers pushing this diet, they don't have to deal with the fallout. The women are sitting in our office in tears after years of these Yo Yo Diets, unable to conceive or not having a regular period. And we are the ones having to talk them through this. And like I said, those Instagram influencers, they don't care. They're not the ones sitting with you in the doctor's office trying to help you. They're just pushing this idea to make money. They don't deal with the fallout.

Jen: Yeah. I mean, I feel I'm, I'm probably, I don't know, I feel like I'm the biggest dieter of the three of us, but I feel, like, resentful towards some of the people that I got really horrible advice from, and it wasn't, it's just that I trusted them and it wasn't just that actual person. It was, I'm thinking of one woman in particular who was very relevant about 10 years ago and she was on the cover of all the fitness magazines. I mean, it was like a whole system around her, do you know what I mean? But it snowballs, right? So she has influence, magazines, want her on their covers and so she seems credible. There was actually a fitness organization in Canada who does like personal trainer certification here. They aligned themselves with her at one point and so you have to understand this is all about money and business. Like it's not about your health and some of these influencers, their job is to stay relevant. It doesn't matter what diet comes their way or what, they're going to be on every new diet train because it's their job to stay relevant is their job to be doing that thing that everyone is talking about because

that's how they find new followers. Right. And continue to raise themselves up.

Amanda: Well, I have to talk about this quite often with my clients is just because someone writes a book or just because someone has a million followers does not mean they know what they are talking about. It's usually the people with a smaller community who are highly educated pushing the good information. The problem is good information isn't trendy. It's not glamorous. You know, telling someone to, you know, eat more protein, vegetables, then go out for a walk. That's not exciting. But if someone says, "Hey, I have this new magic diet, you're going to lose 20 pounds in a week."

Jen: Right? It's not sexy.

Amanda: It's a big problem. We're seeing a big push with these diet books and unfortunately people with seemingly good credentials are, like you mentioned, doctors are writing these diet book. It's completely inappropriate. It's completely unethical. They don't have the training to do that, but there's no board of directors that oversees who gets to write a book. You write a book, you get it published, you're good to go.

Jen: It's about money and business. Again, like it's like the publishing company isn't fact checking. They're not, publishing company's going, is this going to sell? And then they're getting it on bookshelves. Right? It's and of course it'll sell if it comes from a doctor. Like, we talked about this briefly before we started recording. Amanda and I were talking about how problematic doctors are in the diet industry. And I came across two this weekend that are saying some crazy things online. One of them had over a hundred thousand followers, a female doctor in Florida I think. And it was like this is incredibly dangerous for doctors to have that much influence, and that much trust to be talking about both these things.

Amanda: It is, and there's actually a prominent Ob/Gyn doctor right now pushing Keto, which again is so stressful because she's got this influence and she sees her patients one on one, you know, in practice. And the information that they're getting from their doctor who is supposed to be a trusted source is not quality. And as we chatted about briefly is doctors are not nutritional experts and they only get 19 hours or less training on nutrition in their entire medical training unless they take it upon themselves to get more. So honestly, if your doctor is giving you nutrition advice and they're not qualified further beyond medical school, they're honestly a little bit outside their scope. They need to be referring to you to an RD.

Jen: Yeah. It's a big problem. I wanted to come back to another thing we hear a lot. We have, we hear from the diabetic community or we've heard from many women who have diabetes in our community. I just saw this comment the other day in our community, I'm on Keto, but I quote unquote have to be because I'm a diabetic. What are your thoughts on that?

Amanda: So obviously there are medical conditions. We see diabetes and pcos quite a bit where insulin or you know, carbs are an issue. They need to be moderated. But

there's a difference between, "Hey, we should moderate carb consumption and you should cut out all carbs." For some reason people don't understand that there is an in between. It's all or nothing. So when we work with people with diabetes or pcos, we focus more on complex carbs. Carbs that are going to slow blood sugar rises and crashes, things with fiber, fruits and vegetables. We're going to slightly limit things that, you know, are filled with sugar, can spike your blood, your blood sugars. And that's where the difference is. You can be mindful of carbohydrate intake without cutting out carbs completely and improve your health.

Jen: And isn't diabetes somewhat individual in that what one diabetic sort of responds to might be different from another diabetic. It's not like across the board, "Hey, you can't have this and you can't." And you know what I mean. Does that make sense?

Amanda: Absolutely. And that's why you work with an RD and your doctor to monitor blood sugar, to monitor other health indicators, to make sure things are working.

Jen: Right. And the other one I wanted to bring up, I don't know if you know, his name is Drew. He's at Drewsdailydose on Instagram. Drew Harrisburg, he's in the fitness industry and he did Keto for a couple of months, and he's diabetic and then he quit Keto and did a post about it and talked about how after two months on the Keto Diet, he became the most insulin resistant he has ever been. He lost, he says, "I lost all metabolic flexibility. Sure. I was a very efficient fat burner, but it was at the expense of the ability to tolerate glucose."

Amanda: Well, and that's again, we can circle that. That's every fad diet. I mean, the second you push your body into this state that's not natural. It's going to fight you every step of the way. So then when you swing back out of it, you've completely messed up the way your body functions. And that's why, like you guys push, fad diets are not the answer. More often than not, you end up doing more harm and to reverse the harm, it takes a long time and it takes a lot of effort and it's really hard. It actually makes it much more challenging.

Jen: He said, "Here's the worst part. Even if I didn't eat anything at all and my liver put glucose into my bloodstream, I couldn't fix my high blood sugar levels because I was resistant to the insulin I was injecting."

Amanda: Type one diabetic?

Jen: Yeah, he was type one. Yeah. Yeah. And he says, "It felt like I was on my way to developing type two diabetes. It was a scary place to be."

Amanda: Yeah, absolutely. And at that point, I mean, you're stuck. You've got to go to an endocrinologist, an RD. You need to figure out how to manage that. And unfortunately there are so many Instagram influencers who are like, "Hey, you know, I can fix that for you. Here's the next best thing to do." And when you're at that point, you need to go

seek help from your medical team because that's when actual serious consequences can show up.

Annie: Amanda, is there anyone that should do a Keto diet in your professional opinion?

Amanda: In my professional opinion, unless they are suffering from epilepsy unresponsive to medication, no. There is just no reason. And I talk about this, so I work with women in sports nutrition world, so athletes and you will never see a podium athlete who follows a Keto Diet. And that's honestly the biggest thing that you want to focus on, especially when you're working with women or athletes is do you see anybody who is a top performer in their sport, let's just say Olympics, Crossfit, Spartan races, anybody standing on a podium? Do they follow a Keto Diet? Absolutely not because it is not optimal. You cannot thrive and you don't function well when following it. There are other ways that are so much more simple and so much more effective. You'll feel good, you'll improve your health. If losing fat is a goal, you can lose that. You don't have to be that miserable.

Annie: Excellent. I, this reminds me of, we recorded a podcast with Yoni Freedhoff and one of his kind of litmus tests for diets are, like, "Do you enjoy it?"

Amanda: Absolutely.

Annie: And if you enjoy how you're eating, the likelihood that you're going to sustain it for the long haul and therefore sustain the results that you get from that particular day. And I'm using terms, the term diet as in just what you consume, your intake of food, the longer, the more you enjoy it, the longer you can stick with it and the more likely you are to sustain results. But if you're like white knuckling it through whatever it is you're doing, like you can expect whatever results you got for that week or two weeks or month to come back as soon as you stop. And sounds like Keto is the experience that a lot of women have is similar to that. They can do it maybe for a while and get some results and then it's as Jen noted, like ping pong over to the other side of the table and sugar binge or, yeah.

Amanda: Well, and that's where it really comes down to this fad diet, yo you diet, on and off thing is every time you binge, it's usually a result of restriction. I mean, who wants to live without bread or wine or cookies? I mean, at some point you're going to go on a camping trip and want to eat a s'more with your child. At some point you're going to go to a wedding and want to have a slice of cake. At some point you're going to go to a 4th of July party and wants some pie and you should be able to eat those things without this fear of "Well, I'm Keto and if I eat it, I'm going to be thrown out of Ketosis and then I have to start back over." That is a miserable cycle to put yourself in.

Jen: It's very, it's anxiety inducing because you can't just live your life. You're looking at all these foods wondering how many grams of, like Keto is so restrictive. Even low carb is less restrictive because you've got some wiggle room there of how much carbs you have but Keto is just, it's so restrictive that you can't function in normal day to day life

without anxiety of wondering how many grams of carbs are in that apple or you know what I mean? Like I don't think you can even eat an apple, a whole apple in a day in Keto.

Amanda: Probably not. And that's, yeah, that's why we talk about, people don't understand what true Keto actually is. The amount of fat you have to eat, the amount of carbs you have to not eat is, it's almost impossible. Most people can't do it. So most people aren't Keto.

Annie: Well, I think we covered a lot of ground in this episode. I think it's, hopefully it's going to clear up a lot of misconceptions and provide a lot of great information to our audience because like we said at the beginning of this show, this comes up so often and people, as Lauren noted, think that they're doing Keto but they might just be doing low carb and the distinction between the two and the benefits, potential benefits and the definite downfalls. And you know, obviously, true to Balance365 form, we would encourage people to have a more balanced plate of protein, carbs and fats. And especially considering the enjoyability, like you don't have to be miserable to get results that you might want.

Amanda: Well, and that's something that was just touched on that like triggered off something I wanted to touch on here was that anxiety and what we already see with women as we produce only half as much serotonin as men and we actually have fewer transporters to recycle the Serotonin, which is interesting. So when we cut our carbs, which is the brain's primary source of energy, we actually see lower serotonin. So we're seeing an increase in depression and anxiety among the female low carb dieters because of that lack of Serotonin. So not only is it horrible for your hormones, horrible for your muscles, you know, horrible for restrictive purposes, but it can actually contribute to anxiety and depression.

Jen: I had severe postpartum depression after two of my three children and well, Annie, and I'll touch on this when we do our podcast on my experience with that, but I think all the time about how that contributed. It's not that it wouldn't have happened otherwise, but just, I mean, you never know, right? All the risk factors were there for me anyways.

Amanda: Well, and even if it exacerbated it, I mean

Jen: Yeah.

Amanda: Think of how much better we could do for ourselves if we just ate a healthy, balanced diet and helped ourselves instead of, you know, continued to pile on things that could exacerbate something.

Annie: Well said. Lauren, Jen, any final thoughts before we wrap up here? I think, like I said, we covered so much good ground and had a lot of good talking points here. I'm excited to share this with our community.

Jen: Yeah. It's going to be a good one.

Lauren: I don't think so.

Jen: Thank you, Amanda. That's amazing. And you do such good work. You do such good work, so just keep doing it.

Annie: Well, where can our audience find you, Amanda?

Amanda: So on Instagram, I'm @Amandahowellhealth and my website is currently under construction, but it's Amandahowellhealth.com but in the meantime, people can find me at warriorwomanmentality.com that is my coaching website

Annie: And we can link all that in the show notes too. So thank you so much for joining us. This is wonderful.

Amanda: Thank you.

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