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### Healthy for Life Newsletter

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### Diabetes is a Choice

#### Introduction

One of the greatest challenges to our health care system is the dramatic rise in the incidence of both obesity and diabetes. In the U.S. and Canada, diabetes has increased more than 500% during just the last generation. More than seventy percent of adults and more than thirty percent of our children are considered to be either overweight or obese. In spite of spending more than 30 billion dollars each year on diets and weight loss programs, the rate of obesity has tripled in this country in the past thirty years. Even more alarming is the fact that the Center for Disease Control (CDC) has projected that one-third of our children born after the year 2000 will become diabetic. If they happen to be Black or Hispanic, nearly fifty percent are projected to become diabetic. The fact that diabetes is the leading cause of amputations, kidney failure, neuropathy, adult blindness, and premature death due to cardiovascular disease creates great concern.

Once considered a disease of the West, type 2 diabetes is now a global health priority. The International Diabetes Federation has now predicted that the number of individuals with diabetes will increase from 240 million in 2007 to over 380 million in 2025. The greatest

increase in type 2 diabetes is going to occur in Asia and primarily among the younger population. It doesn't take much imagination to realize what the diabetes epidemic will do to the health of the world and to our financial health. So are we just doomed? Is there anything we can do about these horrible projections and present day reality? This month's newsletter is going to focus on the health concept that developing type 2 diabetes is really a choice, even if you have a strong history of diabetes in your family. In over 90% of the population, no matter what their family history or genetic makeup, diabetes is preventable. Even if you already have prediabetes or diabetes, it can potentially be reversed. You need to understand that developing type 2 diabetes mellitus is really a **CHOICE.**

#### What Causes Type 2 Diabetes Mellitus?

Everyone agrees that the underlying cause of over 90% of type 2 diabetes mellitus in the world today is the result of poor lifestyles that create insulin resistance. The consumption of highly processed, high-glycemic carbohydrates along with our sedentary lifestyle are the main reasons that we are in the midst of this diabetes and obesity epidemic. The modern diets around the world are made up of more and more highly processed grains and foods that the body can quickly absorb which over-stimulate and abuse our insulin in the body's attempt to control blood sugars. It's like hollering "wolf" all the

time. When you are continually overstimulating the release of insulin in an attempt to control blood sugar levels, eventually your body just does not respond to insulin like it once did. Adding to this dilemma is the fact that a sedentary lifestyle and inactivity also cause our bodies to be less and less sensitive to insulin.

These poor lifestyles cause us to become less and less sensitive to our insulin. Over the years, we eventually develop what is referred to as insulin resistance. The body compensates for this situation by making more and more insulin. As blood insulin levels begin to rise, we literally tip over into an abnormal metabolic state called the metabolic syndrome. This causes high blood pressure, elevated cholesterol and triglyceride levels, and also causes us to begin gaining an unusual amount of weight around our middle. Eventually the body just can't keep making that much insulin and as insulin levels begin to drop these individuals then become diabetic.

If you have a strong history of diabetes in your family, you are even more vulnerable to these poor lifestyles. This is especially true for our children. Genetic susceptibility appears to be a major factor for our children in developing diabetes. However, even if you have a strong family history of diabetes this does not mean that you have no choice in the matter and you are just going to develop diabetes. Genetic tendency to develop diabetes has been present over the past several generations; however, it has only been during the past generation that we have been severely affected.

### **Healthy Lifestyles that Improve Insulin Sensitivity**

I researched the medical literature for over three years before writing my book *Healthy for Life* [Real Life Press 2005]. Since it was apparent that poor lifestyles were the main reason for the diabetes epidemic, it only made

sense that firmly establishing healthier lifestyles may be the answer. The medical literature clearly showed that a triad of healthy lifestyles actually improved insulin sensitivity via different mechanisms. First, a healthy diet that did **NOT** spike your blood sugar improved insulin sensitivity. Second, even modest, consistent aerobic exercise significantly improved insulin sensitivity from a different mechanism. Third, supplementing your diet with what I referred to as cellular nutrition again improved insulin sensitivity from a different mechanism.

When I could get my patients to make just one of these lifestyle changes, I saw improvement in their health and their bloodwork. It really did not matter which lifestyle they firmly established. If I could get my patients to make any two lifestyle changes, I would see even a little more improvement. However, if I could get them to firmly establish all three of these new, healthier lifestyles, the results I saw in my clinical practice were simply phenomenal.

Reversing insulin resistance is not an easy task. Remember, it is the result of years and years of poor lifestyles. However, I learned that when you combine this triad of healthy lifestyles, which all improve insulin sensitivity from different mechanisms; you literally could reverse insulin resistance. I saw this time and time again in my personal medical practice. In fact, I have actually documented over 50 type 2 diabetics in my practice who were able to totally reverse their diabetes and return to normal. This was documented by follow-up bloodwork that showed normal fasting blood sugars, normal glucose tolerance test, along with normal Hemoglobin A1C levels (this is a test we use in diabetics to see if their diabetes is under good control) in patients who had previously been diabetic. However, I learned that my diabetic patients had to allow a minimum of 18 to 24 months to receive the optimal improvement from these new, healthier lifestyles. Now not all my diabetic patients were able to reverse their disease;

however, they all improved their diabetic control.

The encouraging aspect of all of this is the fact that the earlier I was able to recognize insulin resistance (pre-diabetes) in my patients, the easier it was for them to reverse their disease and significantly decrease their risk of ever becoming diabetic. In fact, most of my patients with early insulin resistance were able to reverse their disease within twelve weeks of establishing the healthy lifestyles I promote in my Healthy for Life Program. So what are some of the signs I look for in my patients to recognize the fact that they may have early insulin resistance?

### Early Signs of Insulin Resistance

- Expanding waist size (simply measuring your waist size by placing a tape measure 1 inch below the belly button and across the upper part of your hips)—I become concerned when my female patients have a waist size greater than 32 inches and especially when it gets above 34 ½ inches. I become concerned in my male patients when their waist size is greater than 36 inches and especially if they are greater than 40 inches.
- Resistance to weight loss—one of the hallmark signs of early insulin resistance is when my patients cannot effectively lose weight or if they are even able to lose weight, can't keep it off.
- Increasing blood pressure—if you or your physician note that your blood pressure is increasing and is greater than 130/85, I become concerned.
- Increasing fasting blood sugar—I become concerned when your fasting blood sugar is over 100 mg/dl (6.0 mmol/L).
- Low HDL or good cholesterol—I do not like to see my ladies have an HDL cholesterol less than 50 mg/dl (1.29 mmol/L) or my

men to have an HDL cholesterol less than 40 mg/dl (1.04 mmol/L).

- Elevated triglyceride levels—triglyceride is the other fat in the blood besides cholesterol. I don't like to see this get above 150 (1.69 mmol/L). In fact, I do a ratio where I divide the triglyceride level by the HDL cholesterol. If this is greater than 2, I become very concerned that my patients have tipped over into early insulin resistance. The higher this ratio actually is the worse their insulin resistance is.

### The Healthy for Life Program located at [www.ReleasingFat.com](http://www.ReleasingFat.com)

Helping my patients change their behavior and replace those old, damaging lifestyles with new and clinically effective, healthier lifestyles has probably been the most difficult challenge of my career. However, my patients became excited when they realized that they never had to go hungry, that they felt great and actually had more energy, that their health parameters improved, and that they began losing weight when they were not even trying. I did not rely on "will power." Those patients that were personally motivated to better protect their health and decrease their risk of becoming diabetic were able to firmly establish these new, healthier lifestyles. The use of my internet-based behavioral modification program was the key to their success. They were evaluated, educated, motivated, and held accountable through my 12-Week "Healthy for Life" program located at [www.releasingfat.com](http://www.releasingfat.com). They used healthy meal and snack replacements that were low-glycemic and did not spike their blood sugar. They took high-quality, complete and balanced nutritional supplements, and they began a modest aerobic exercise program.

## University of Colorado Clinical Trial

I have just completed a clinical trial using the Healthy for Life Program at the University of Colorado Medical School in Denver, Colorado. This was a clinical trial that was under the guidelines and direction of the Institutional Review Board (IRB) and FDA. This trial was strictly third-party and was under the direction and total control of Dr. Holly Wyatt, an endocrinologist and researcher at the University of Colorado. There were sixty participants who had insulin resistance or the metabolic syndrome (pre-diabetes). Fifty-three participants completed the clinical trial with the following preliminary results:

- Weight decreased an average of 12 pounds
- BMI (Body Mass Index) decreased 2.1 points
- Participants lost an average of 2½ inches from their waists (all the weight loss was from their abdomens)
- Systolic blood pressure dropped an average of 6 points and diastolic blood pressure dropped an average of 8 points
- Total cholesterol decreased an average of 5%
- Triglyceride levels dropped an average of 16%
- Fasting blood insulin levels dropped 32%
- Insulin levels, during an oral glucose tolerance test at 120 minutes, decreased by an amazing 44%
- Insulin resistance, as measured by the HOMA index, decreased by 32%
- C-Reactive Protein (a measure of inflammation in the body) decreased an average of 27%
- Urinary Isoprostanes, a marker of oxidative stress, dropped an average of 29%

- Plasma Antioxidant Reserve (PAR) increased 20%
- Vitamin E levels increased an average of 30%

All of these changes are consistent with improvements in the markers of the metabolic syndrome and offered each participant significant improvements in their cardiovascular and metabolic health. In fact, they were literally able to “tip back” into a normal metabolic state.

## Conclusion

You don't just wake up one day and have diabetes. It is the result of years and years of poor health habits. The combination of inactivity and a poor diet results in individuals developing insulin resistance. This clinical trial proves that individuals do have choice. Even if you are genetically predisposed to developing diabetes, I believe that over ninety percent of type 2 diabetes cases can and should be prevented. Once the participants stopped spiking their blood sugars, their natural appetites decreased and carbohydrate cravings disappeared. They were, in effect, “freed up” to eat healthy, delicious food. Several of the participants even marveled at how well they did - along with not having to go hungry, feeling great and having more energy and focus, seeing their health parameters improve, and losing weight without even trying. Does this sound too good to be true? This clinical trial proves that it is true.

Dr. Holly Wyatt is a physician and faculty member of the University of Colorado's Department of Medicine, Division of Endocrinology, Metabolism and Diabetes and she supervised this study. She stated, “This is a very promising program that produced some very positive changes in the cardiovascular risk factors associated with the metabolic syndrome.” Dr. Wyatt went on to say, “The shifts in dietary habits to low-glycemic meals,

nutritional supplements and modest increases in physical activity were not only effective but also are realistic behavioral changes many people can make.”

I personally believe that this is the answer to the obesity and diabetes epidemics. Diabetes is truly a choice. Take some time to check out my 12-Week Healthy for Life Program at [www.releasingfat.com](http://www.releasingfat.com). You can register to participate in the “Coaching Program” or the very affordable “Self-Directed Program.”