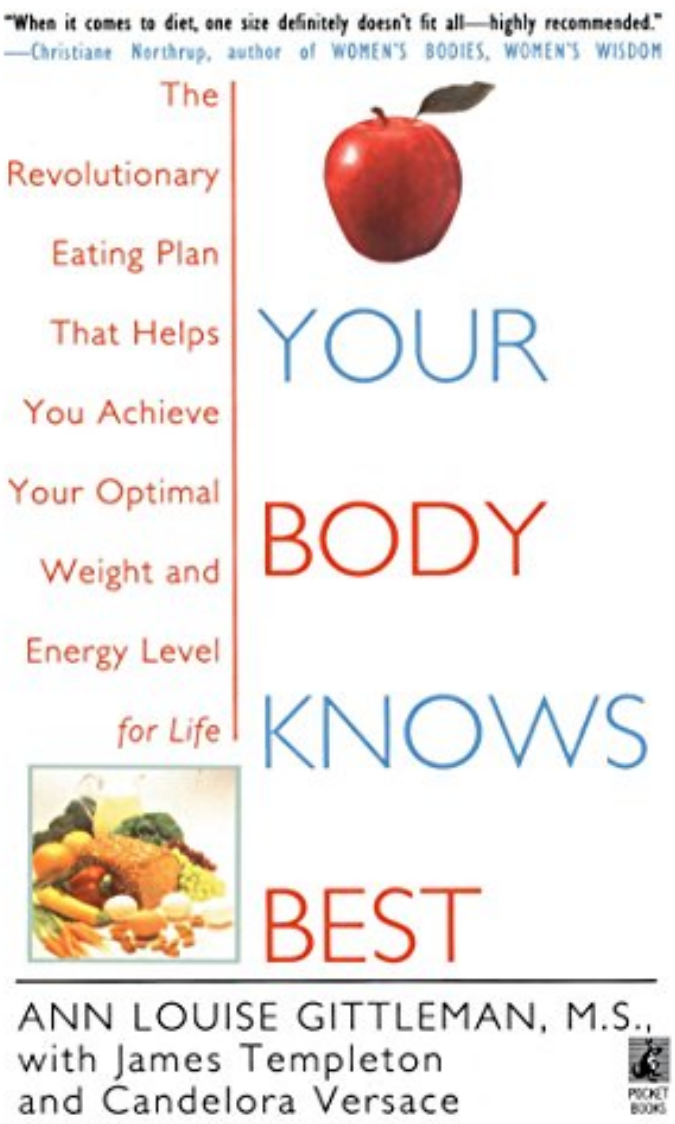
Your Body Knows Best (English Edition)



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(Pdf free) Your Body Knows Best (English Edition)

Par Ann Louise Gittleman : Your Body Knows Best (English Edition) before purchasing it in order to gage whether or not it would be worth my time, and all praised Your Body Knows Best (English Edition):

Description :

Prsentation de l'diteurDiscover the remarkable truthyour body knows best. Youve tried the low-fat, high-carbohydrate diets and failed. Youve religiously adhered to very low-calorie regimens and watched your weight skyrocket as soon as you resumed former eating habits. The truth is: no one-size-fits-all diet plan works for everyone. But there is a personalized diet that is perfect for you. Its time to tune in to your ultimate diet guru-yourself-because with Your Body Knows Best, you can custom-tailor a diet that meets your bodys special needs! Ann Louise Gittleman, author of the famed Fat Flush Plan and Fat Flush for Life, shows you how in this groundbreaking, individualized approach to weight loss. Yes, you can reach and

sustain your optimal weight and energy level by eating the foods your body needs. Your customized diet is determined by your ancestry and genetic heritage, your blood type, and your metabolism. Your Body Knows Best was the first book to uncover the possibility of the blood type connection to weight gain.ExtraitYOUR BODY KNOWS BEST 1 Why Different People Require Different Diets Betsy is your typical high-powered Chicago executive. She walks fast, talks fast, and thinks even faster. You might say shes always on the fast track. Betsy, 35, keeps up with all the latest nutrition information and, therefore, has cut out all fats from her diet and has increased her intake of fiber-rich grains, breads, pasta, and potatoes as the current diet plans dictate. She keeps a diet soda on her desk at all times and, after a hard day at work, treats herself with fat-free yogurt (which tastes even sweeter than ice cream, thanks to the miracle of NutraSweet). Believing that she can eat more, weigh less, Betsy cannot understand why she is not losing but gaining weight, is tired all the time, and feels uncomfortably bloated in her abdominal area. Knowing that her diet couldnt be the culprit, Betsy has increased her exercise program. When that doesnt help, she becomes convinced that she suffers from chronic fatigue syndrome. Her blood type is B and her grandparents come from Eastern Europe. Monica is a real fitness fanatic. At the age of 42, she is a competitive cyclist in Boston who looks exceedingly fit and has only an 8 percent body fat level. Unfortunately, she doesnt feel healthy. A family history of elevated cholesterol levels has made her a strict convert to the low-fat, high complex-carbohydrate propaganda, and she has cut all meat and animal products from her diet. But after three years on this regimen, she has begun to suffer from ongoing yeast infections, dry skin, dandruff, chest pains, and, finally, hair loss. Monica is of Irish ancestry, and has type O blood. Now meet Linda, a 25-year-old hairdresser in Tucson. Linda has become a missionary for vegetarianism, and for good reason. Since giving up all animal products, including meat, chicken, fish, and dairy, she feels lighter and more energetic and has lost 20 pounds. She has no more digestive upsets and can finally jump out of bed in the morning with vigor and vitality. Linda has type A blood; her ancestors hail from the Mediterranean area. These three women, created as composites from the 7,000-plus case histories Ive collected throughout my career as a nutritionist, are all following basically the same low-fat, high-carbohydrate diet, but with vastly different results. Monica experiences some pretty serious health problems; Betsy has been gaining weight; Linda has been so successful that she tries to get everyone she meets to try her extreme version of the diet. Ive included the information about their blood types and ancestry for a very important reason: to illustrate that certain biological clues point the way to the kind of dietary information that we need. Why would all of these women on the same diet experience such different results? The reason is that each of their individual chemistries reacts differently to the diet. Imagine an Eskimo on a low-fat diet. The traditional diet of Eskimos consisted of up to 10 pounds of meat a day, including high quantities of fat, but there is no evidence of cancer or heart disease in their history. Is it possible that through hundreds of generations, the Eskimos actually evolved genetically so their bodies require a diet high in protein and fat in order to stay healthy in their frigid environment? Now think about the typical Oriental or Indian diet, which has historically centered around vegetables and rice. Would this low-fat, low-protein diet provide enough stamina, endurance, energy, and body fat to withstand the extreme environment of the North Pole? Common sense would lead you to answer No and that, as it turns out, is the correct answer. Personalized NutritionNot a New Concept There is no universal diet suitable for everybody. It may seem like a new idea to you, but in fact, the concept of biological uniqueness and personalized nutrition has been around for centuries. Heres a little bit of international history to prove my point: Ancient Chinese writings and early Egyptian and Greek physicians all incorporated this concept into their healing dietary regimens. Hippocrates, often considered the father of medicine, classified individuals in different categories according to characteristics of their blood and phlegm and the color of the bile. Body structure was another feature Hippocrates told his students to observe when making diagnoses. Traditional Chinese medicine has developed its own unique system of classifying disease symptoms individualistically. Using tools such as tongue, pulse, and deficiency or excess, yin or yang, and cold or hot patterns diagnosis, Oriental medicine practitioners choose a course of treatment and food therapy for each patient based on the results of their findings in these areas. Some foods and herbs are very strongly indicated and helpful for some individuals but are wrong for others who have different types of ailments. This personalized form of medicine, which was developed thousands of years ago, is still in use today and recently has been gaining renewed popularity in the United States. Ayurveda is the 6,000-year-old science of India that differentiates individuals in reference to body typing. Color and texture of hair and skin, rate of speech, body size and shape, gait, and even temperament and emotional responses are the clues Ayurvedic physicians look at to determine body type, and assist them in individualizing diagnoses and treatment. Dr.

Stuart Rothenberg, national co-director of the U.S. Maharishi Ayur-Veda Medical Center, explains it best. Western medicine asks what kind of disease the patient is suffering from. Ayurveda asks what kind of patient is suffering from the disease. Lucretius, the Roman philosopher, is credited with saying, One mans meat is another mans poison. The fact is that the concept of nutritional individuality has been a recognized ingredient of good health since antiquity. In modern times as well, there have been many noted researchers who acknowledged the importance of personalizing health and nutrition. Henry Bieler, in his book Food Is Your Best Medicine (Random House, 1965), led the way in modern times with his classification of individuals according to the dominance of their adrenal, thyroid, or pituitary glands. Even before Bieler, body structure classifications were identified by Dr. William H. Sheldon in The Atlas of Men in the 1940s. He divided individuals into three basic types: ectomorph (thin), endomorph (fleshy), and mesomorph (muscular). Perhaps the most well-known of these personalized health subscribers was the noted biochemist Dr. Roger Williams. He promoted his ideas of biochemical individuality as early as the 1950s, further explaining them in an interview in 1977: (Biochemical individuality) simply tells us that body chemistries are not the same. Two people of about the same height and weight have about the same total metabolism, but the details of chemical reactions taking place in their bodies may be different. Certain reactions will take place ten times as fast in one individual as another. This makes our nutritional needs different. Dr. Williams, the discoverer of pantothenic acid and the namer of folic acid, developed the genetotrophic theory of disease, in which he stated that each individual has, because of his genetic makeup, distinctive nutritional needs , the lack of which predispose him to certain degenerative diseases. He stated that individuality pervades every part of the body. From birth, human beings are highly distinctive in both microscopic and gross anatomy, in the functioning of their organs, the composition of body fluids and in nutritional requirements, and that these permanent, genetically inherited factors extend to the structure and metabolism of every cell, and determine the speed and efficiency with which cells perform their essential functions. In one of his numerous books, Nutrition Against Disease, Dr. Williams wrote: That malnutritionunbalanced or inadequate nutritionat the cellular level should be thought of as a major cause of human disease seems crystal clear to me. It is the inevitable conclusion to be drawn from the facts produced by decades of biochemical research. What do these facts suggest in terms of practical application? We need to develop techniques for identifying far more accurately than is now possible the inherited pattern of susceptibilities and resistances that is unique to each individual. Call it a metabolic profile or any other name you wish, but plainly it represents a necessary precondition for making rational programs of nutrition tailored to fit each individuals special requirements. Enter Dr. William Donald Kelley. As if in answer to Dr. Williams call, in the 1970s, Dr. Kelley became the first researcher to utilize computer technology in developing a systematized analysis of what he called individual metabolic types. Following the lead of research done by Francis Pottenger, M.D., in the 1920s, and Royal Lee, D.D.S., in the 1950s, on the relationships of nutrients to the autonomic nervous system, Dr. Kelley developed a one dimensional paradigm, utilizing the influences of the autonomic nervous system as a basis for what he termed metabolic typing. He was also one of the early medical proponents of treating the patient based on his or her metabolic type, rather than attempting to treat the disease. More recently, two-time Nobel Laureate Dr. Linus Pauling, in his extensive studies of the effects of vitamin C on health, confirmed the principle of biochemical individuality when he discovered that different people required different amounts of the nutrient for optimal nutritional health. For some people, the desired amount of vitamin C to be added to the daily diet (up to 10 grams) far exceeded the Recommended Daily Allowance (RDA) of 60 milligrams. We are just beginning to understand the tremendous variation in individual nutrient needs and other aspects of biochemical individuality. I am certain that with more research in this area, we will find other factors in our genetic blueprint that affect our health. For example, veteran nutritional researcher Lendon H. Smith, M.D., has observed that blue-eyed blonds, green-eyed redheads, and American Indians develop alcoholism more frequently than other Americans. Perhaps there is something in their genes that make these groups more prone to contracting the disease. Until more research is done, however, we need to look at what we do know about biochemical individuality. The place to start is with ancestry and hereditythat fascinating collection of unique biological factors that has developed in a group of people over hundreds of thousands of years of evolution. We have each inherited a distinctive set of nutritional needs based upon the effects of climate, geography and the indigenous foods of our ancestors. Whole cultures have genetically adapted over dozens of generations to various conditions and their bodies have developed an affinity and dependence upon the specific foods natural to their region. What is most surprising about this fundamental concept of biochemical individuality is that it has been virtually ignored by modern-day

nutritionists, who have singularly focused their attention on creating one universal diet without any regard for genetic makeup. Lets examine the ancestral diet a bit deeper, so you understand its significance as a key modifying factor in your personalized diet plan. How Ancestry Influences Our Health Most of us come from families that have been in this country for several generations, which may make our own genetic nutritional requirements seem less obvious than the examples of the traditional Eskimo and Oriental diets. Furthermore, few of us have a one-nationality lineage, making our genetic influences even more convoluted. In our frenzy to find one perfect diet, weve forgotten a basic tenet of our American heritage: The United States is a melting pot. While few of us, like the Native Americans, have descended from peoples who have been on the North American continent for dozens of centuries, vast numbers of us have come from other continents and may have lost touch with our culturaland physicalorigins. Most of us, in fact, have been here only for a few generations. Our parents, grandparents, or great-grandparents hail from Northern, Southern, and Eastern Europe, South America, Africa, and Asia. Some of us have come from harsh, unrelenting climates where fresh fruits and vegetables were rare and meat or heavy, cold-water fish were eaten several times a day. Others have ancestors who lived in tropical climates where fruits, fish, and grains made up the bulk of the daily diet. Some of us have learned to harbor our personal resources, slowing down our metabolism to build body fat to keep us warm in cold climates or when food is scarce. Others, who perhaps adjusted to several generations in a warm climate, grew to depend on a diet high in leafy vegetables, fruits, legumes, and fish and seldom ate fatty animal meats. Taking Ancestry with Us Remember, its only been in the last few hundred years that humans have become as transitory as we are now, moving from one continent to another with ease. If we know where our ancestors are from, were fairly safe in assuming that several generations remained in the same region back then. Through countless generations, then, our ancestors naturally adapted and biochemically adjusted to become perfectly suited to their own environment and the foods naturally available there. However, researchers have noted that ethnic and genetic conditions persist, even if people have moved from their original geographic location. That means that even though somewhere along the line your ancestors moved, they took the genetic and nutritional needs that they built at their original location with them. The key to where our ancestors came from and the kind of biochemical adjustments their bodies made is now in our own genes: they determine our highly individualized nutritional requirements, no matter where we live. Simply put, if we know our ancestry, we will have a much better idea of what might be the right foods for us to eat. To prove my point, lets look at the work of Weston A. Price, D.D.S. Price, a pioneer in medical/nutritional anthropological research, traveled over 100,000 miles to over a dozen indigenous communities around the globe in the early 1930s. He looked at the diets and health of primitive and indigenous tribes in South America, Australia, Africa, Polynesia, and North America (Native Americans and Eskimos)cultures that were beginning to experience the impact of modern civilization. Carefully documenting the information he discovered about each population during his 20 years of research, Dr. Price concluded that the best diet for each of the populations he encountered is the diet of their own ancestors. Prices work showed that even though native diets were radically different from one location to the next, all the people within each tribe were able to maintain a standard of good health until they began eating foods not native to their own culture, such as processed carbohydrates like white sugar, white flour, and polished rice. Prices book, Nutrition and Physical Degeneration (Price-Pottenger Foundation, 1945), is a real nutrition classic that is just as relevant today as it was when it was first published, not only for its emphasis on ancestral diets but also for the proof that it holds on the havoc that the so-called civilized foods (like white flour and white sugar) cause when they are introduced into native diets. Price determined that the native diets differed according to climate, geography, and the natural flora and fauna of the region, but the common factors of all these primitive tribes was that they each had evolved to eat the foods naturally available in their region: fresh vegetables and fruits, whole grains, nuts, and animal protein. My research has led me to this same conclusion. Native Diets Nourish Best Other researchers have found that when people stray from their indigenous diets, they miss out on the necessary nutrients that had been provided by their native diets. Certain groups of people have greater needs for different nutrients than others. For example, the Scottish, Welsh, Celtic, Irish, Danish, Scandinavian, and northern coastal Indian peoples all display an inherited need for more essential fats in their diet than other populations. People with this ancestry have bodies that are accustomed to a native diet high in fatty fish. While key nutrients of this kind of fatty fish are sorely lacking in most contemporary diets, they can be easily replaced in the diet when people of these ancestries eat foods that are similar to those in their own native diets. If they dont get these nutrients their bodies crave, they can suffer from disastrous consequences like alcohol abuse, anxiety, depression, and schizophrenia. One group

of contemporary researchers working with the concept of ancestral diet is an organization in Arizona called Native Seeds/SEARCH. The researshers in this organization have focused their attention on the Pima Indians in Tucson, Arizona. Based on their findings, the researchers recommendations for the native tribe include turning away from the modern diet and returning to the original diet of their ancestors as a way to combat many illnesses, including adult-onset diabetes, which Pima Indians experience at the highest rate in the world. Their native foods, such as beans, chia seeds, psyllium seed, nopalitos, cholla buds, bellotas (Emory oak acorns), mesquite pods, and cactus are high in soluble fibers and naturally help regulate blood sugar. Since these foods have become less important in the modern diet, the health of the Pima Indians has suffered. Native Hawaiians are another population that have experienced serious health problems in the years that their culture has turned away from their native diet. In fact, native Hawaiians now have the worst health profile in America. Death rates from obesity, cancer, heart disease, and diabetes are among the highest in the nation. Some doctors treating native Hawaiians are now prescribing a diet rich in native foods that include taro root, seaweed, sweet potatoes, greens, fruit, and small amounts of fish. Those who have followed a diet based on their native one have had extremely promising results. Just How Different Are We? A red flag of common sense should fly up in front of our eyes when we read specific dietary guidelines, whether they are vitamin and mineral Recommended Daily Allowances (RDAs) or the optimum number of calories and fat grams a person should consume. Think about it for a moment: Just how much alike in physical energy, body mass, bone structure, temperament, shape, and size are you when compared to just about anybody else? Aside from having the requisite number of internal organs in pretty much the standard places, wouldnt you agree that you are probably quite different from the next person? Marion Patricia Connolly, director of the Price-Pottenger Nutrition Foundation, which was formed to promote the findings of nutritional pioneers Dr. Weston Price and Francis M. Pottenger, M.D., writes the following: It all boils down to our genetic inheritance from the survival of the fittest, whether we are of Mediterranean descent or of Norwegian descent. The former could handle grains, legumes and foods of the Mediterranean basin while the latter would do better with a high-mineral diet from the sea, tubers and the foods available during the 8,000 additional years when the home of their ancestors was limited in food production by the Wurm glaciation [the Ice Age]. Changing from a diet natural to a persons physical heritage and environment to something foreign could spell trouble for that persons health, no matter how healthy the new diet seems to be for others. Much research to support the current low-fat, high-carbohydrate diet was actually done in indigenous cultures whose natural surroundings supported that sort of diet. There doesnt seem to be any direct proof, however, that a diet that is suitable for an aged population in Ecuador would necessarily work for a young person in America. According to Nathan Pritikin, the pioneer of the extremely low-fat diet, many of our current dietary woes are due to certain elements in our diet that other cultures do not have. Among others, he researched the Bantus in Africa, whose diet is 10 percent fat and coronary heart disease is close to nil. Natives of New Guinea have a diet of 10 percent fat and only 7 percent protein; out of 600 deaths, only 1 was attributable to coronary heart disease. Pritikin also refers to studies on an aged population in Ecuador whose diet is mainly complex carbohydrates: corn, brown rice, beans, and various other vegetables and fruits, with a once-weekly portion of animal protein. The Tarahumara Indians of northwestern Mexicos Sierra Madre mountains are famed for their high endurance levels and their wooden kickball races. These Olympic-caliber athletes subsist on a diet of 10 percent protein, 10 percent fat, and 80 percent complex carbohydrates, a diet that is tailor-made for their extraordinarily active life-style. Dietary Transplants Unfortunately, statistics such as these have compelled many diet gurus to transplant diets from other societies and other climatic regions into our society. While a typical Tarahumara may indeed have amazing strength, resiliency, and endurance on his diet for his highly physical life-style in which he burns tremendous amounts of carbohydrates, could his diet support an average overworked stockbroker of Irish descent working on Wall Street? The Bantus of Africa may do well on their 10 percent fat diet in Africa, but could a German-American sitting at a computer all day in Silicon Valley eat the same foods and thrive? And how would a 200-pound construction worker from Norway fare on the typical Ecuadorian diet? These are the sorts of questions that have never before seemed important to consider. So much research has pointed to indigenous cultures and their health that weve rarely considered the other side of the coin. We imagine that if that diet worked for them in their native lands, it will work for us in our highly industrialized modern world. Whats been missing is the idea that even busy, urbanized Americans have their own native diet based upon their own individual ancestry. Weve been easily misled by the virtues of diets that work for other peoples in other places, and have tried to transpose them to our own society without any regard to our own personal

history. Analyzing Our Unique History The answer, instead, is to look at our own individual ancestral diet. Although we may think of certain popular American foods, like hamburgers and apple pie, as part of our natural diet, the answer to a healthy diet for each of us lies a bit further back in our history. We need to look at the foods of our ancestors, in their native lands, because like the Eskimos and the Pima Indians, we are more genetically adapted to the foods once growing in abundance in the regions of our roots. The traditional Mediterranean diet of fish, olive oil, garlic, beans, and pasta could suit those of us with Italian, Greek, and Spanish ancestry well. An Asian-American can still do well on a diet of brown rice, sea vegetables, tofu, and other soy products. Descendants of families from south of the border can still benefit from a diet rich in seafood, tropical fruits, beans, corn, and vegetables. Those of us descended from the original inhabitants of the AmericasNative Americanswould be wise to include our own ancestral foods as well, whether they are beans, squash, cactus, or buffalo. As Lendon H. Smith, M.D., wrote in Happiness Is a Healthy Life: The trick of eating is to figure out your racial/ethnic background and try to imitate it. But how many of us can say we are direct descendants from a specific tribe or race? Most of us have a little of this and a little of that. Were African-Hispanic. Irish-Italian. German-Russian. French-Venezuelan. Italian-Arabic. Swedish-Lebanese. For this reason, ancestry, while not providing exact answers, can give us an understanding of why we are genetically predisposed to thrive on the particular metabolic food plan our profile suggests. Ancestry: A Quick Recap Knowing where our own family ancestors are from can provide clues about how our own family members naturally adapted and biochemically evolved to become suited to their own environment and the foods naturally available there. Researchers state that genetic and ethnic conditions persist even if people have moved from their original geographic location. That means that our nutritional needs are determined far more by where our ancestors originated than by where we live now. When people stray from their indigenous diets, they can miss out on specific and necessary nutrients and suffer from a host of physical and emotional difficulties. Basing our diets on the indigenous diets of other peoples can spell trouble, even when those diets appear to provide health and fitness. Incorporating those diets into our own lives doesnt take into account our own indigenous foods and special biochemical needs that have evolved over many generations. Most of us in North America are the product of generations of mixed ancestry, making strict determinations about a diet based solely on ancestral heritage very difficult. Thats why we will consider several other components of the individual diet and view the ancestral nutritional needs as a modifying factor. Ancestry is not the only key to discovering the right diet for each of us. Its just one modifying factor among others, as Ill now explain. Your Body Knows Best However you want to say itOnes food is anothers poison, or Whats good for the goose isnt good for the gander, or Different strokes for different folkseach of us is as unique on every level of our selves as snowflakes or fingerprints. It all boils down to a matter of our genes, and most importantly to the subject of this book, it extends to each of our individual nutritional requirements. Even people in the same family experience differences in the way they process food and their dietary requirements. Robin eats like a horse and never seems to gain a pound, although she still complains of feeling fat. She goes to bed late, gets up early, and is never short of energy. Robin is often called high-strung by her more mellow siblings; she flies off the handle easily but her temper tantrums are brief. Her sister Carolyn, on the other hand, feels like she gains weight just by looking at food. Carolyns temperament is much smoother than her sisters, but she also seems to move a lot slower. Shes more methodical and laid back and is not easily upset except over her seeming inability to lose weight, no matter how careful she is about her diet. Even though these women have the same ancestral background, their metabolismhow their nutrient intake is converted to energy and how that energy manifestsis different. Could one diet possibly work for both sisters? Robin is so wound up, it probably wouldnt hurt to slow her down a little, but Carolyn could use an energy boost. Imagine for a moment that their parents came from two very different ancestral backgrounds. Their mothers family was Northern European; her ancestors lived for many generations in a cold, harsh, and damp climate where few crops grew and the people relied heavily on a few sturdy root vegetables, breads, and meat. Their fathers family, on the other hand, had been in the Mediterranean region for centuries; their diet was one of fruits, leafy vegetables, fish, grains, and legumes. Its easy to see how their offspring could have incorporated a whole range of influences, with some of their dietary needs reflecting their mothers heritage and others reflecting their fathers. But lets look beyond ancestry for a moment. Instead, lets look at what we saw in Robin and Carolyn in terms of the differences in how their bodies convert food to energy. These two sisters have two very different metabolic profiles. This is where William Linz Wolcott comes in, who spent 8 years working as Dr. William Donald Kelleys assistant with his methods of metabolic typing. Later, Bill and his wife, Suzi, founded Healthexcel and developed The

Healthexcel System of Metabolic Typing, a new paradigm that evolved the original one dimensional perspective of metabolic individuality, based solely on the autonomic nervous system, into a four dimensional model, involving the interrelationship of the autonomic nervous system (from the works of Pottenger, Lee, Page, Kelley), the oxidative system (Watson, Eck), the endocrine system (Harrower, Bieler, Abravenel) and the constitutional elements (Chinese medicine, AyurVeda). One of the most critical factors uncovered in Bills research involved the understanding that any given nutrient or food can have virtually opposite influences in different metabolic types. Bill coined this phenomena, The Dominance Factor. What it means is that the effect of a given food or nutrient does not depend so much on its innate properties as it does on the system being affected in the person ingesting it. For example, eating an orange may calm one metabolic type down and result in an alkaline shift, whereas in a different metabolic type, the same orange can be found to cause a hyper response and result in an acidic shift. This phenomena explains why what improves a problem in one person, will worsen the same problem in another and why nutrition can seem so confusing and baffling. I know that this was the case for me! When I understood for the first time, by virtue of my Healthexcel evaluation, why I reacted to foods the way I did, it was a real eye-opener and that experience actually served as the catalyst for my writing this book. It proved to be a major clue in determining my own personalized diet. I had always been taught that heavy proteins like meats were acidifying and hyperactivating, just the opposite of what I needed to be more of. So, I purposely went the other way with my diet. The problem was, I didnt do well at all on a low fat, low protein diet. When I received back my Healthexcel evaluation of my metabolism, I learned that in my type, heavy foods like meats and fatty foods were good for me and would actually have, in my type, a calming, balancing effect. Indeed that turned out to be the case. My body had known what was best for me all along. It was only a matter of learning to understand my bodys means of communicating its requirements for me to get on the road to good health and well-being. It turns out that Roger Williams was right and way ahead of his time. Im convinced that Metabolic Profiling is indeed needed and is likely the only way each person can find out just what his or her body needs in order to be healthy! Healthexcel exclusively licensed their metabolic profiling program (including nutritional supplement formulas) to Mannatech, Inc., a health company located in Grand Prairie, Texas. Through an introduction from Bill Wolcott of Healthexcel, I was able to receive permission from Mannatech, Inc. to publish the following information about Metabolic Profiling directly from their literature. Metabolic Profiling Metabolic Profiling is a system of interpreting and understanding body language to determine an individuals genetically based nutritional requirements. The body gives us many clues to these needs, communicating them through physical, mental, emotional, and behavioral characteristics. Most important, we are able to observe the bodys energy statuswhether fuel (nutrients) is being used efficiently and whether the body and its cells, organs and glands, and systems are functioning efficiently and are in homeostasis, or balance. Since energy production is essential for good health and well-being, and for optimum body function, metabolic profiling focuses on the nutrition needed by each metabolic type to produce that energy. To create energy, the body obtains nutrients from air, food, water, and light. These provide the fuel for all the metabolic processes that produce our mental, emotional, and behavioral characteristics and our physiological traits. If your body receives all the raw materials for which you have a genetically based requirement for energy production, the result is optimal energy and the strong potential for good health. If your cells dont receive the necessary fuel, your metabolic activity is disrupted; it becomes imbalanced and inefficient. That imbalanced, inefficient, negative condition will be reflected in your quality of life on all levels. Your bodys language will tell you if all is not well! Long before these external signals are noticeable, the body circulates internal messages indicating that problems exist. An exquisitely designed, dynamic mechanism, your body constantly displays its own balances and imbalances, telegraphing its own very specific needs. From our bodies, we get continuous status reports expressed through mental, emotional, and physical characteristics. Our job is to learn to interpret and understand this body language through metabolic profiling. In metabolic typing, the first task is to understand the underlying physiological basis for all the characteristics that constitute any persons metabolic makeup. By understanding these, we can categorize them and determine the overall metabolic patterns, styles of functioning, and the metabolic classification. The main energy systems of the body are the bases of these metabolic profiles. The interrelationship of the bodys systems that create, maintain, and control energythe autonomic nervous system (ANS) and the oxidative systemare evaluated in metabolic typing. When we understand how these systems interact, we understand the purpose and the value of this process. The Autonomic Nervous System The autonomic nervous system (ANS) is referred to as the master regulator of

metabolism and is considered the primary basis for the classification of metabolic types. Each of the systems with which we are concerned, autonomic and oxidative, has an important role to play in metabolic typing and each has an influence on, and interrelates with, the other. Either system can enhance or restrict the genetic strength of the others activities. The human nervous system may be considered from the standpoint of two major divisions: the voluntary, or cerebrospinal (Central), and the involuntary, or autonomie. The autonomic nervous system is divided into two parts, or divisions, on the basis of anatomy and the central sympathetic and the parasympathetic divisions. For the purposes of metabolic typing, it is important to know that nerves from both divisions connect the brain (the hypothalamus) to the various organs and the glands of the body. In a sense, the ANS acts as an information transport system. If the brain is seen as the central switchboards, the ANS is like the telephone lines leading to all the branches. Its purpose can be viewed as the transportation and regulation of metabolic information. The sympathetic and parasympathetic systems work together in the regulation of all involuntary activities of the body: control of heart rate, blood pressure, digestion, repair and rebuilding, rate of cellular activity, secretion of sweat, contraction of the pupils in the eyes, activities of the immune system, and so on. In this arrangement, one system is in charge of turning on, or innervating, various functions of the body. The other system has the task of turning off the activity or inhibiting the function. For example, the sympathetic system speeds up the heart rate: parasympathetic activity slows it down. In this way the heart beat is regulated by the ANS through the interaction of the sympathetic and parasympathetic divisions. In other functions of the body, the roles can be reversed. For example, the parasympathetic system turns on the activity of digestionthe secretion of hydrochloric acid and the contracting activity of the stomach. But should a tiger appear during your lunch break, the sympathetic system would kick in, causing a fight or flight response. This immediately shuts off digestion, sends blood from the digestive organs to the muscular system, increases the heart and breath rates, and makes all necessary metabolic preparations for your fight or flight. Practical Application Each of us shows a distinct metabolic profile from the standpoint of ANS influence. This is determined by genetically inherited differences in the degrees of sympathetic or parasympathetic dominance and by our own varying levels of functional efficiency. Consequently, every characteristic one displaysphysical, psychological, or behavioralmay be found to have a physiological basis. Many characteristics may be tied directly to the ANS, while others are tied to the oxidative system. Others may be based in either one system or another. Why is it important to know the basis of ones characteristics? Once the metabolic type is understood, we will also know what balance of vitamins and minerals is correct for the metabolism in question. This is due to the fact that some nutrients are believed to stimulate, strengthen, or support the sympathetic system, but have the opposite effect on the parasympathetic system, and vice versa. The Oxidative SystemSlow Burners and Fast Burners Dr. George Watson, Ph.D., of the University of Southern California, first connected the oxidation rate with metabolic individuality in the 1970s. As a psychologist. Watson was primarily concerned about the effects of oxidation rate on the emotions and behavior of his patients. He identified two types of oxidizers who do not use energy efficiently: the slow oxidizer and the fast oxidizer, which I have already referred to as the slow burner and the fast burner. Other researchers, such as Drs. Paul Eck, Dave Watts, and Rick Malter, have all expanded our knowledge about the oxidation types and their effect on dietary needs and psychological problems. Both oxidation types can experience problems with their weight. Robin is a fast burner, and her sister Carolyn is a slow burner. As you might have guessed, these two terms refer to the relative speed at which a person is able to utilize nutrientslike carbohydrates, proteins, and fatsfor energy. Although you might be tempted to think that if you have problems keeping extra weight off then you are a slow burner, thats not the case at all. Fast burners, especially if they dont eat the right foods for their metabolism, can have just as much trouble trying to budge those extra pounds. You see, energy is created by the interaction of two biochemical processes in the bodyglycolysis and the citric acid (or Krebs) cycle. Simply speaking, these processes require very specific minerals and vitamins at every stage of energy production. Both the slow and fast burners, due to their own specific set of vitamin and mineral deficiencies, do not utilize energy efficiently. The slow burner burns food too slowly, and therefore can feel lethargic and sluggish and gain weight easily. The fast burner burns food too quickly, especially carbohydrates, and so can feel hyped up, nervous, and easily stressed. Fast burners also burn out quickly, stripping them of the energy needed for exercising, the lack of which contributes to weight gain. Slow burners tend to gravitate toward simple carbohydrates such as sodas, candies, pastries, and other sugary foods in a misguided attempt to create quick energy. Long-lasting energy is created much more readily with moderate amounts of lean protein that could be missing from a slow burners diet. A slow burner is much better off satisfying her sweet

tooth with small amounts of fruit or sweet vegetables like butternut squash or yams, rather than sugary snacks, however, because of the uneven blood sugar swings the sugary snacks cause. Oftentimes, a glucose tolerance test, which tests for the ability to metabolize sugars, reveals high blood sugar or diabetes in slow burners. Slow burners also tend to have a higher than normal insulin level (hyper-insulinemia), which results in conversion of carbohydrates into body fat. (Ill be explaining the insulin connection to carbohydrates and body fat in more detail in the next chapter.) Another characteristic of slow burners is that they generally have a poor appetite and dislike protein-rich foods and fats. A thick, juicy steak or rich, cheesy sauces are not very appealing to these types. Instead, they tend to overindulge in starches such as pasta and bread, which can lead to overeating and weight gain. Because a slow burners energy production is slowed down, the efficiency of the glandular system can also be affected, particularly the thyroid and adrenal glands, which tend to be hypoactiveor underactive. This can lead to a sense of constant fatigue, exhaustion, apathy, and depression, and a sense of feeling cold all the time. Fast burners, on the other hand, usually show a low blood sugar reading on a glucose tolerance test because their energy cycles are burning off carbohydrates at a rate that is too fast. They are often diagnosed as hypoglycemic, or having low blood sugar. In the fast burning system, carbohydrates are metabolized so quickly that they dont offer a source of sustained energy. Fast burners can be likened to a furnace with fast-burning fuel. Without sufficient fat and protein in the diet to balance things out, fast burners feel hyper and are often irritable and anxious. They, too, reach for more carbohydrates in the quest for a balanced blood sugar, but excessive carbohydrates only feed the flame of a fast burner. Try pouring gasoline on a fire if you want a clear picture of what carbohydrates do to the system of the fast burner. The blood sugar rises quickly, increasing the metabolic rate and all metabolic activity, causing a sense of nervousness or excitability. Next comes the crash as the blood sugar drops, following its quick removal from the blood. At this time, the fast burner is likely to feel fatigue and confusion as well as strong cravings for sugary foods. A constantly fluctuating blood sugar leveland the attendant mood swingsresults. The remedy? A diet heavier in certain types of protein and healthy fats not only stabilizes blood sugar but also reduces cravings for sweets. Fast burners also have strong appetites; they like to eat all the time. Heavy proteins like beef ribs or a plate of lamb chops satiate and sustain fast burners, giving them a sense of having been well-nourished. Although they appear filled with nervous energy, fast burners often keep themselves going with sheer willpower; their emotional state is often marked by extreme peaks and valleys and patience is not one of their strong suits. Fast burners can be overweight, just like slow burners, if they eat inappropriate foods for their metabolism. A diet heavy in processed and simple carbohydrates, such as pasta, fruit, and fruit juice, can lead to storage of body fat. I know the fast burners pitfalls very well because I am one. The common denominator for both types of fuel burners is that they need protein to stabilize their blood sugar levels. The fast burner needs heavier, fattier proteins such as red meat, organ meats, and coldwater fish daily. The slow burner, on the other hand, does not handle fat well (it slows down the metabolism) and so needs to eat lean protein, such as white meat chicken, turkey, and fish, in the daily diet. I know that recommending a daily intake of forbidden foods such as steaks and ribs flies in the face of all the nutritional advice of the last several years. I myself have had a difficult time reconciling the fact that as a fast burner, I do feel significantly better following these guidelines of moderate meat intake than I did in my days as a vegetarian, macrobiotic, or Pritikin advocate. My body does well with these foods; it breaks them down and utilizes them for quality energy in a way it could not when I was on a high-carbohydrate diet. You can see a magnified version of how important the distinction between the fast burner and the slow burner is by looking at children. Many children who arc hyperactive or have attention-deficit disorder (ADD) are fast burners. With overactive adrenal and thyroid glands, they have trouble harnessing their nervous energy and are often irritable, aggressive, or even violent. Unfortunately, their parents, in a misguided effort to control cholesterol and fat, give these children all the wrong foods. Avoiding butter, meat, cheese, eggs, and other high-protein and fatty foods, the children fill up on cereal, bread, fruit, and other sweets. As Ive explained, this sort of diet only aggravates the fast burners already revved-up system. Throughout my years of experience, I have seen very few balanced burnerspeople who fall into the normal range. Most people are either too fast or too slow, and many of them suffer from weight problems. In addition, a persons metabolic rate can be directly affected and in fact normalized by what he or she eats, which is why it is important for everyone to know if he or she is a slow or fast burner. If your metabolism is too slow, eating the right foods can speed it up. If it is too fast, the proper diet can actually slow it down. In either case, approaching a balanced rate of metabolism will result in achieving your desired weight and a healthier body, as well as smoothing out emotional ups and downs. Diet Basics for Slow and Fast Burners Ill

go into much greater detail about the right diet for fast and slow burners in later chapters, but I want to give you a few standards to start with. As I mentioned, the best diet for a slow burner would be one that is low in fat, because fat slows down the already depressed metabolic rate. Processed and simple carbohydrates (sugar, honey, soft drinks, pasta, bagels, breads) should be eliminated or at least limited, due to the inherent problems slow burners have with blood sugar and insulin levels. Complex carbohydrates (winter squash, sweet potatoes, corn on the cob, peas) eaten with lean proteins will provide the slow burner with sustained energy. Protein will speed up the metabolic rate and therefore should be a consistent and daily part of the slow burners diet. It should also be included because protein produces a hormone called glucagon, which blocks the fat-promoting activity of insulin, which is released when carbohydrates are eaten. Lean meats like chicken, turkey, and white fish will go a long way toward activating the metabolism of the slow burner. This is why certain individuals have had such outstanding success on diet programs like Weight Watchers, Diet Center, Lean Bodies, and Overeaters Anonymous. All these plans are actually geared to the person who is a slow burner. Slow burners also need more potassium, which can be found in citrus fruits and bananas, because it accelerates the metabolic rate. By contrast, the fast burner would suffer on such low-fat diets. Fast burners do best on a diet that is higher in heavier protein and fat and low in complex carbohydrates. This diet helps to balance out blood sugar, create an enduring energy source, and also provide body warmth in cold weather. Roast beef, beef ribs, and lamb chops are necessary energy sources for the fast burner. This is a far cry from the diet of the slow burner, who thrives on lighter proteins like chicken and turkey. Fast burners also do well with foods that are high in calcium (such as broccoli, sesame seeds, and sea vegetables) because calcium tends to slow down the metabolic rate. In addition, a certain class of proteins called nucleoproteins is very effective for the fast burner but should be avoided by the slow burner. Nucleoproteins provide substances called purines, which provide energy for the fast burner. (Fast burners do not produce this particular energy source in their own cells, whereas slow burners actually do.) Purine-rich proteins include wild game, red meats, anchovies, herring, caviar, sardines, and organ meats like liver, kidneys, sweetbreads, and heart. Although these may be unpopular foods today, they actually have been a standard meal component throughout our history. In fact, it has only been in the last 20 years when the misguided cholesterol propaganda came into vogue that these foods have been banished from the American home. Ancestrally speaking, organ meats were often considered to be the prize of a successful hunt. More recently, a quick scan of the most enduring cookbooks, such as The Joy of Cooking, will reveal dozens of recipes for organ meats, highlighting their presence in the American diet for decades. The Atkins diet and other similar high-protein, high-fat diets may be most effective for the fast burner for weight loss and maintenance. This type of diet will reduce the craving for carbohydrates and sweets, and the relatively high fat content exerts a slowing effect on the fast burners excessively fast rate of metabolism, resulting in improved energy efficiency. Dairy products can be beneficial for fast burners because they contain calcium, fat, and the amino acid tryptophan, which are all slowing agents. But one should also take into account an individuals personal level of tolerance for dairy products, by way of blood type and ancestral diet, before incorporating any number of them into a daily diet. A complete discussion of the appropriate foods and sample menus for slow burners and fast burners can be found in Chapter 9. Metabolism: A Quick Recap Probably one of the most important and overlooked aspects in determining a persons bio-individuality is the rate at which a person turns his or her fuel into energy. There are two types of people whose metabolisms do not burn energy efficiently; I call them the fast burner and the slow burner. Both can experience weight problems. Both fast and slow burners tend to eat diets high in carbohydrates, which contribute to weight gain. Slow burners burn food too slowly, can feel lethargic and sluggish, and gain weight easily. Fast burners use food energy up too quickly, and can feel hyped up, nervous, and easily stressed. Fat accumulates when the wrong foods are eaten and when the fast burner is too exhausted to exercise. Carbohydrates dont process quickly enough in the slow burner and convert to fat; carbos also speed up the already speeding fast burner. Protein will jumpstart the slow burner and also will provide more substance for the fast burner, balancing out the excessive highs and lows. Fat will slow down the slow burner and accumulate; the fast burner benefits from this slowing activity of dietary fat. Fast burners need more of the rich, red meats like beef, pork, and lamb, as well as dark meat poultry and cold-water fish. Fast burners also can eat more fat like full-fat dairy products to slow down their hyped-up metabolism. Slow burners do best with lighter forms of protein like white meat poultry and white fish. Slow burners can use more carbohydrates but not in the excessive amounts weve all become accustomed to in the last few years. Slow burners also need to be more watchful about fat intake in the form of dairy products and oils. How Blood Type Influences Our Health In addition to knowing where

our ancestors came from and our rate of metabolism, there is another modifying factor that must be taken into account in personalizing a diet. Our own heritage is intimately tied in with blood type, a determination that evolved along with our other characteristics. The different blood types (A, B, AB, and O) appeared at different times during humankinds evolution and are related to the movement of generations of people over the continents. Although most of us are familiar with the standard ABO system of blood typing, few of us may realize how those different blood types connect us intimately to our distant past. Fewer still understand that our own blood type may be the secret clue to what the best foods are for each of us. Research also has indicated that blood type might affect our vulnerability to disease. In Japan, the study of blood type and its impact on personality is serious business. Toshitaka Nomi has published over 25 books on the subject (including You Are Your Blood Type, Pocket Books, 1983) and is considered to be the worlds foremost expert. Companies in Japan such as Honda, Toyota, and Yamaha frequently consult blood type information when determining consumer preference for marketing and manufacturing, or compatibilities among employees. Nomi also has postulated that national personality traits of Americans, Germans, and Japanese are based on the different balances between the blood type groups in their populations. Nomi suggests that in general, blood type Os are goal oriented and enthusiastic, while blood type As are more detail oriented and fastidious. Blood type Bs tend to be creative and unconventional, whereas type ABs have a great spiritual sensitivity. In North America, there have been two prominent naturopathic physicians, James DAdamo and his son Peter DAdamo, who have extensively researched blood groups in their relation to biochemistry, diet, and disease. You may want to refer to the published papers of Peter DAdamo for more scientific documentation (see the References). In the book The DAdamo Diet (McGraw-Hill, 1989), which is oriented more for the lay reader, James DAdamo writes that because blood carries nutrients throughout the body, perhaps different blood types act differently with foods and their nutrient components. He found that people who had blood type A did well on a vegetarian or near-vegetarian diet, as did those with the very rare type AB, but individuals with type B need more animal protein in their diet. Type Os found it virtually impossible to remain on a vegetarian diet and feel healthy; as the oldest blood type, Os have been found to have a much greater genetic need for animal protein and fat. Type Os also tend to be much more physical, while As are considerably less so, expending more of their energy in mental processes. Before we look more closely at which foods are appropriate for the different blood types, lets examine the underpinnings of Dr. DAdamos findings. If its true that different blood types react differently to different foods, then our next question might be, why do people have different blood types? The answer is one Ive referred to several times: evolution. As humans moved across the planet in search of food, their bodies gradually adapted to whatever local conditions they found. (By gradually, of course, we mean over the course of millions of years. Evolution is such a slow process, a few generations are not sufficient to help the body adapt. Thats one of the reasons why so many of us have trouble with sugar; its only been available to us in its refined state and in abundance for the last 150 years!) BLOOD TYPE O CHARACTERISTICS Type O was the first blood type researchers have been able to determine existed among our ancestors. The very first humans were all type O and their diets reflected the first foods they found available. Animal meat (including fish) was their primary source of food, with roots, leaves, wild grains, and other foraged plant foods supplementing the meat. According to Dr. DAdamo, type Os also have a high level of hydrochloric acid and other digestive enzymes, which make digesting a high-protein diet fairly easy. High levels of hydrochloric acid also make type Os less prone to developing parasitic infections like Giardia, yet they are actually more susceptible to infection by H. pylori, the bacteria that has been found to cause duodenal and peptic ulcers. In humankinds earliest days, dairy products cultivated from domesticated animals were unheard of, so the type O human did not completely adapt to be able to digest those foods. Some modern type Os might have a hard time with dairy products, finding them difficult to digest; they may produce gas and bloating, and may convert quickly into body fat. More so than other blood types, type Os also have a greater predisposition to celiac/sprue disease, which is caused by a genetically inherited metabolic inability to digest foods that contain gluten, specifically, wheat, rye, oats, and barley. (Coincidentally, these grains are the new foods that were introduced into the human diet only 10,000 years ago, long after the first appearance of the type O person.) Symptoms of sprue include nausea and vomiting (especially in infants and children), severe flatulence, fatty stools, chronic constipation or diarrhea, bleeding from the colon, bloating and abdominal distention, fatigue and muscle weakness, memory loss, and depression. Hives, food allergies, and hay fever also are common among type Os. Those early type Os were a very active sort; they needed to be in order to survive in a hunter/gatherer society. Todays type Os do well with a lot of vigorous exercise, like aerobics several times a week. Dr. DAdamo

suggests that type Os exercise frequently to increase energy and ward off fatigue and depression. In work with my clients, Ive found exercise to be almost more important than eating correctly for those with type O blood. BLOOD TYPE A CHARACTERISTICS Type O was followed some centuries later by type A. Both blood types are now the most common in America, accounting for almost 85 percent of the population. Type A is predominant in Europe and Africa. Type As tend to be adaptive vegetarians, having developed when the wild meat supply dwindled and our ancestors turned to an agrarian life-style. Rather than a strict vegetarian diet for type As, Dr. DAdamo suggests incorporating fish, chicken, and turkey into the diet a few times a week. Red meat and dairy products are not recommended for this blood type because usually the As stomach has a low output of hydrochloric acid and digestive enzymes. To complicate matters, there are actually two type As, called A-1 and A-2. Most A-1s have lost the ability to make pepsin (a protein-digesting enzyme) but have other enzymes that aid in carbohydrate digestion. A-1s dont do too well with meat and dairy products, nor do they handle beans well. A-1s do best on a diet heavy in vegetables, fruits, nuts, seeds, and eggs. A-2s have more stomach acid and so can handle more meat and fish in the diet. Both types need to be careful about overdoing grains and concentrate on eating a broad variety of the foods just mentioned. One of the reasons I found the research on blood types to be so fascinating is that while I was working on my book about intestinal parasites, Guess What Came to Dinner, I found that type As are at high risk for infection by Giardia, a common waterborne parasite. It is the lack of hydrochloric acid in the digestive systems of most type As that makes them so susceptible. Type As also tend to have more digestive problemsgas, bloating, gastritis, and constipationthan the other blood types. Ulcers could be a problem for type As because they seem to have more Camphylobacter bacteria in the digestive system. According to Dr. Peter DAdamo, pernicious anemia and breast cancer can be more devastating for type As because of certain immune responses in type A blood. Yeast overgrowth can also be a problem of type As, and their immune systems tend to be somewhat sensitive, more good reasons for being aware of the proper diet for this type. Type As tend to be a lot less active than type Os; the blood type developed as humans began to utilize their minds for solving problems. Light exercise, such as stretching or occasional swims, are good for type As, DAdamo says, but they need to be careful of exhaustion, a tendency for type As who are filled with nervous energy. Relaxation is important for blood type As, who are sensitive and tend to get stressed out easily. Heavy exercise depletes the mental clarity of the type A. BLOOD TYPE B CHARACTERISTICS Blood type B appeared less than 10,000 years ago, which was after the introduction of domestic grains into the human diet. Type Bs are predominantly of Eastern European and central Asian extraction, from societies that were nomadic herders. Natives of those areas are famous for their longevity, for which they wholeheartedly recommend yogurt. This is explained by the fact that type Bs have digestive systems that are well adapted to dairy products, especially fermented ones like yogurt. Type B also falls somewhere between type O and type A; thus, a person with type B blood can handle a range of animal products as well as a lot of complex carbohydrates. The key to the diet for type Bs would be to find a good balance among different foods, as well as a balance between heavy or strenuous exercise and the more meditative types, such as yoga or tai chi. Type Bs can also be more susceptible to degenerative conditions due to viruses. BLOOD TYPE AB CHARACTERISTICS Blood type AB, the rarest blood type, is perhaps the most well-adjusted for the new foods in our diet, such as dairy products and domesticated meats and grains. People with AB blood will generally lean more strongly to either the A type of energy level or the B, and can adopt either the A diet or the B diet (and level of exercise), depending on the individual. Meat, dairy products, and grain products may be tolerated less by ABs if they lean more toward having A characteristics, and those foods should be introduced slowly into the diet. If ABs lean toward having more B-type characteristics, they should be able to handle a wider range of foods. ABs may be more susceptible to chronic viral infections and cancer than the other types. Currently, approximately 44 percent of the American Caucasian population have type O blood, as do 49 percent of American blacks. Blood type A is found in 42 percent of the white population, and only 27 percent of the black population. Only 10 percent of whites but 20 percent of blacks have blood type B, a more recently evolved type. Blood type AB occurs in only 4 percent of both groups in the American population. Discovering this information about blood types has been very exciting for me and, learning about lectins (see next section) really put the blood type information in its proper perspective. By the way, another blood type determinant is the Rh, or Rhesus, factor. Most of us who have our blood tested know that we are either Rh negative or Rh positive. How that impacts on diet has yet to be investigated by blood type researchers, but you can bet Ill be following developments in this area in the future. THE LECTIN CONNECTION From information I found in an article published by Laura Power, Ph.D., of The

Nutrition Clinic, Inc., in Bethesda, Maryland, in the Townsend Letter For Doctors, June, 1991, Ive come to believe that blood types have just as much to do with what not to eat as with what should be eaten! This article provided a thorough review of current research data concerning the possible negative effects of dietary lectins on the ABO blood types. Blood types are themselves antigens that exist on the surface of red blood cells. They are, in fact, part of the immune system, and as such are known to react with foreign substances such as: antibodies, bacteria, viruses, parasites, toxins, and LECTINS. Thirty percent of foods contain dietary lectins, which are protein antigens that, like little strips of velcro, also bind to the surface of blood cells. Lectins can cause intestinal damage, disrupt digestion and absorption, cause nutrient deficieicies, food allergies, immune responses and immune exhaustion, intestinal gas and mucous, fatigue, headache, achiness, diarrhea, irritability, hemolytic anemia, alter host resistance to infection and to tumor challenge by exhausting the immune system, cause failure to thrive, and cause agglutination (clumping) and subsequent lysing (destruction) of blood cells. Sixty-five lectins are known to bind specifically to the ABO blood types. As a result, foods containing the blood-type specific lectins should be avoided in those blood types, as 5% of an ingested lectin can be absorbed into the system and cause their damage, even after cooking and maximizing digestive capacity, which can reduce lectin absorption to some extent. This information, as it relates to specific dietary recommendations for the blood types, is addressed in detail in Chapter 9. Blood Types: A Quick Recap Nutritional needs evolved along with the different blood types. Type O is the oldest blood type on the planet. Nutritionally, type Os adapted to a diet heavy in animal meat and fish on a daily basis, supplemented with roots, leaves, wild grains, and other foraged plant food. Type Os do not do well with dairy products or excessive amounts of grains, and they generally need to have active life-styles. Because of the lack of certain stomach acids that digest meat, type As are best suited for a semivegetarian diet of leafy and starchy vegetables, incorporating the leaner meats like poultry several times a week but not necessarily every day. Type As dont always handle dairy products very well, and should not overdo grains in the diet either. Type As require less strenuous activity than type Os, and do best with light stretching and meditative exercises. Type B evolved with an ability to handle a wide variety of foods, and today should make an effort to find a balance between several different foods rather than focus on just a few. Type AB, the last to evolve, is very rare. It is the only blood type fully adapted to dairy products, but also may have some of the characteristics of an A type, which has less tolerance for meat and animal products. Putting the Factors Together Ive covered three areas so far that will help you personalize your eating plan. Ancestry, metabolic rate, and blood type are three factors to consider when determining a diet that is appropriate for you. In my experience, the rate of metabolism should be the dominant factor when it comes to planning your diet, with blood type and ancestral heritage considered as modifying factors. For example, I am a fast burner with blood type B and an ancestral heritage that is Eastern European. As a blood type B, my diet can be fairly high in grain-based complex carbohydrates, but because my metabolism is so high, I do much better on a diet that is higher in protein and fats rather than carbohydrates. As an Eastern European with blood type B, I can also easily handle fermented dairy products like yogurt. James, on the other hand, is a slow burner, with blood type O and ancestral heritage from northern Europe. As a blood type O, he needs more protein, but as a slow burner he needs to emphasize low-fat meats like chicken and fish rather than heavier meats like beef. Furthermore, as a northern European, he has a genetic need for high amounts of essential fatty acids, particularly those found in cold water fish like salmon. Later on youll learn about which foods are best for the fast burner and slow burner in greater detail, as well as for the different blood types and for people of different ancestral heritage so that you, too, can make a determination of the best diet for you. In the next chapter, Ill cover information that has been virtually ignored about carbohydrates and why certain types develop problems on the current popular high-carbohydrate diet. Food for Thought Take a look at yourself and then look at everyone else in your family, in your workplace, and in your circle of friends. You see many different shapes and sizes, different personalities and attitudes. How could one diet possibly be sufficient for all these different kinds of people? Now you know that the truth is, it cant be. Take a moment to look at your family tree. What nationalities are your parents, and both sets of grandparents? Can you trace your roots back farther than that? Make some guesses about the foods that were eaten in the parts of the world your ancestors came from, and compare those foods to the foods you eat today, as well as the foods you most like or even crave. Based on the outline of behavioral traits belonging to the different blood types, maybe you can make a guess at what your type is without having it tested. You can also look at the blood types of your parents and make some determinations about which traits or characteristics you may have. Do you consider yourself high-strung and hyper, or are you more the slow and steady type? Do you

have a ravenous appetite that keeps you eating big meals several times a day, or do you find that one big meal fills you up for hours? Does the idea of a thick juicy steak seem like it would really satisfy you, or do you honestly crave a big salad instead? These are clues to whether you are a fast burner or slow burner, and to determine what you should be eating. Prsentation de l'diteurDiscover the remarkable truthyour body knows best. Youve tried the low-fat, high-carbohydrate diets and failed. Youve religiously adhered to very low-calorie regimens and watched your weight skyrocket as soon as you resumed former eating habits. The truth is: no one-size-fits-all diet plan works for everyone. But there is a personalized diet that is perfect for you. Its time to tune in to your ultimate diet guru-yourself-because with Your Body Knows Best, you can custom-tailor a diet that meets your bodys special needs! Ann Louise Gittleman, author of the famed Fat Flush Plan and Fat Flush for Life, shows you how in this groundbreaking, individualized approach to weight loss. Yes, you can reach and sustain your optimal weight and energy level by eating the foods your body needs. Your customized diet is determined by your ancestry and genetic heritage, your blood type, and your metabolism. Your Body Knows Best was the first book to uncover the possibility of the blood type connection to weight gain.