

EPISODE 465

Metabolic Flexibility & The Truth About Intuitive Fasting

With Guest Dr. Will Cole

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SHAWN STEVENSON: Welcome to the Model Health Show, this is fitness and nutrition expert, Shawn Stevenson and I'm so grateful for you tuning in with me today. On this episode, we're diving into one of the most powerful solutions to some of our metabolic conditions that we're experiencing today as a culture. One of the things that I'm going to continue to highlight until it's truly understood at a societal level, is the rates in which we're seeing issues like obesity, insulin resistance, heart disease, here in the United States, we have over 240 million Americans who are overweight or obese, 43% clinically obese, and we're moving towards 50% within the next few years, but I believe we can change it, and I believe we can do something about it. But we've got to kick in the gear, we've got about 60% of Americans have some degree of advanced cardiovascular disease and hardening of the arteries, we've got 130 million Americans who have diabetes or pre-diabetes, we got 115 million Americans who are chronically sleep-deprived, and we've got... One of the latest studies showed that only 12% of American citizens are "Metabolically healthy," so 88% of our citizens are suffering from some degree of metabolic dysfunction. Obviously a big culprit behind it is our very abnormal conditions around the food that we eat.

We have a very processed culture, we've got a lot of fake foods out there in the street, so we've got a lot of fake food consumption. They say, "You are what you eat." I don't know if you know anybody that's fake, but anyway, so truly, we really got to address that piece, but it's so much bigger than that. I grew up, I was really inundated with processed foods, I was inundated with poor health, that's all that I really knew, I didn't know that there was anything else, I didn't know that there was a difference with food, I just thought it was stuff you eat. You know, and so for me, oh, my goodness, one of my loves was my cereal, man. There's really just two things that you don't get generic of, you don't get generic cereal, and you don't get generic trash bags, alright, seriously, I mean, you know what I'm talking about. You got to be careful with the quality of those trash bags, you don't want those to break on accident. Anyways, but generic cereal is not the best. Alright, let's be honest, there are some that can kind of fit the bill, but instead of Captain Crunch, we had King Vitaman, alright, and it was not the same.

Instead of the Trix, I wanted the Trix, man, we were able to get Kix on the WIC program, alright, the Kix were not as delicious as the Trix, because Trix used to be little balls, but they were flavored and fruity and different colors, all fake, of course. All Pro... There's 0% fruit in these fruity balls, of course, but the Kix were all plain Janes, alright, but still eating cereal, of course, you add enough sugar to the Kix to make it palatable, you got that little white sand at the bottom of the ball, if you drink the milk on the after cereal milk, I hope I'm not turning too many people on right now with this cereal, but that was my thing. That was my thing, not to mention the fast food every day because it's cheap. We're inundated with these things. So

that's just one portion. How do we fix this? How do we actually get to a place where our metabolisms are not even vying for those types of foods? How do we create more exposure to health and healthy foods for folks? But then also the systematic change from within, as we're going to talk about today, and tapping into that, there's a very specific term for this entity within us that our special guest is going to talk about, that's always there working for our good, but we've got to be able to create the conditions so that that gets activated.

But there is a specific tool, there's a specific nutritional practice that has been utilized since the dawn of humanity truly, and it's something that has so much science on it, that we're going to dive into a little bit today, but I want to continue to bring on more and more voices for you in this subject matter, because I've seen the effects of it firsthand in my clinical practice, but I've also seen it time and time again in the data and the clinical evidence, and again, it's not a new invention, this subject that we're talking about today, but today we've got all this science to affirm what humans have been doing for a very long time, but also in the context of this term fasting, there are many different flavors of what that looks like, and so we're not getting into a place of deprivation and restriction, and we're going to really kind of dispel some of the myths around that today as well, but also how do you do this in a smart practical way, if it's something that interests you, if it's something that really speaks to you, especially when you hear some of the science? It's just an incredibly powerful tool to have in your superhero utility belt.

So I'm really, really excited about this, and our special guest is one of the best in the world, but I'm going to continue to bring on a diversity of perspectives and voices in the subject again, because I've seen it so effectively in clinical practice and so many different healthcare professionals around the world, really utilizing this tool to see incredible results for all manner of chronic and infectious illnesses, so really, really pumped about this episode. Now, obviously, a big thing that we're seeing right now at this time in human history is a war against viruses, a war against pathogens, and as seen in conventional healthcare, we're doing the things that we've always done that have continued to lead to poor results. Every single thing keeps getting worse on the front of chronic diseases, for example, heart disease keeps getting worse, cancer keeps getting worse, obesity keeps getting worse, Alzheimer's, the list goes on and on and on. But there's this illusion that we've been very effective against infectious diseases, and not many people realize that over 750,000 people die every year from the flu, it's just not reported, it's not talked about in major media, and that's just from the respiratory effects.

And this is from the WHO if you want to go check it out, but 750,000 people die every year. And it hasn't even made a dent in what people are hearing about when it comes to infectious diseases, and that's just from the respiratory side effects of influenza, it's not including influenza-related seizures, and organ failure and all manner of things that can come from that, the comorbidities that can take place, pneumonia, and the list goes on and on and on. Then we're upwards into the millions, but nobody talks about it. Our poor health as a society has just increasingly created an inability to defend ourselves against chronic diseases and infectious diseases. The one thing, the most important thing is improving the health of our citizens and improving the health of our immune systems. There are so many things that we can do that are clinically proven to support our immune function, high quality sleep.

The Mayo Clinic reported a study recently that poor quality sleep or not getting enough sleep, dramatically suppresses your immune system, and increases your likelihood of contracting a viral infection. So shouldn't we put in a little bit more attention and effort around our sleep quality, shouldn't it be something that the task force is talking about, is helping people to optimize our sleep so that we know for certain this isn't a guess on all these different things, these different pharmaceutical interventions, we know that sleep deprivation increases our susceptibility to viral infections dramatically, so that's just one thing. Also our nutrition.

One of the studies published in the BMJ found that COVID-19 ICU risk is 20-fold higher in people who are Vitamin D deficient, a Vitamin D deficiency led to a 20-fold greater incidence of landing in the ICU when contracting this infection. This... Something like this should be incredibly eye-opening and it should be mandatory, we should be talking... This should be mandatory. Vitamin D is a natural thing that we'd be producing with proper sunlight exposure, and it's going to vary depending on your complexion, how much that's happening, how much you're getting, but this is part of our evolution as a human and becoming the incredible people that we are today, we evolved having exposure to sunlight, it's something that our genes expects us to have, our DNA expects us to have, but nutritional inputs, there are foods, it's not as viable in food sources though, of course, there are foods that have Vitamin D, but this is something to look to from whole food-based concentrates. So Vitamin D is one thing, and scientists from the Department of Neurology at USC found that the active ingredient in turmeric curcumin is able to help eliminate metabolic waste and reduce inflammation.

What we're dealing with now is a pro-inflammatory disease that has a tropism for lung tissue, we're chronically inflamed already, and then we meet up as a society with a pro-inflammatory because the inflammation is your immune system's reaction to the interaction with the virus. This is one of the things clinically proven to help reduce inflammation and eliminate metabolic waste, and something noteworthy about turmeric is that it's also been revealed to improve the function of resident macrophage cells that operate as the front line of the immune system. This is kind of important, and we know which nutrients have this capacity, both of these Vitamin D and turmeric and high quality food-based, whole food-based concentrates of some of the most potent Vitamin C-containing foods that have a spectrum of the different types of Vitamin C, is all contained in the Organifi Immunity Product, the Organifi immunity, and it's super easy to use, it's easy to travel with, you just tear the package open, put it into water, again, whole food-based concentrate, it tastes yummy without any added sugar, and it's

something, this is things that I give to my kids, these are things you can add to your smoothie, the list goes on and on.

But it's one of those things that we can utilize as true health insurance right now, that's not being talked about, alright? Upgrading our nutrition, superfood high concentrates of Vitamin C, not synthetic Vitamin C, the good stuff. Food-based Vitamin D, turmeric, that has all these clinical evidence all in one easy to-use packet, so pop over then check them out, it's organifi.com/model. That's O-R-G-A-N-I-F-I.com/model. You get 20% off, 20% off the Organifi Immunity, and all the other incredible Organifi whole food, super food-based concentrates. The Organifi green juice, the red juice, but especially right now, I highly recommend the Organifi Immunity. Organifi.com/model for 20% off, and now let's get to be Apple Podcast review of the week.

ITUNES REVIEW: Another five star review titled "Educational and Awesome, be the change!" by Susie OZ "I seriously love listening to Shawn, he brings so much knowledge and research in a fun to listen to way, I wish everyone would educate themselves about our food so that we could collectively start changing our f-ed up system. Stop poisoning yourselves and our children."

SHAWN STEVENSON: You said it, Suzie, that's powerful. Thank you so much for leaving that review over on Apple Podcast, and listen, if you get to do so, please pop over to Apple Podcast and leave a review for the Model Health Show. I appreciate that so very much. And now let's get to our special guest and topic of the day. Our guest today is Dr. Will Cole, and he's a leading functional medicine expert, who consults with people all around the world in his clinical practice, and he specializes in clinically investigating the underlying factors in chronic disease, and then customizing health programs. Dr. Cole has been named one of the top 50 functional medicine and integrative doctors in the nation, and is the host of The Art of Well-Being Podcast, and he has been featured everywhere from Forbes to Parade, to Shape, to Mindbodygreen, and so much more. And he's the author of the best-selling books, Ketotarian, The Inflammation Spectrum, and his new book, Intuitive Fasting. So let's jump into this conversation with the incredible Dr Will Cole. The first day I went to the gym, because you know I was lifting heavy, and the first time I did feel a little bit after maybe at 70% into the workout, I typically do, I felt a little bit light-headed, but the next session, you know, it just... I can go in there dead lift 400 pounds on a little coffee.

DR. WILL COLE: Yeah.

SHAWN STEVENSON: Yeah, man. And it's amazing.

DR. WILL COLE: It is cool.



SHAWN STEVENSON: But prior to that, I would have had, I would have thought like...

DR. WILL COLE: This is extreme.

SHAWN STEVENSON: Yeah.

DR. WILL COLE: You can't do it. Yeah.

SHAWN STEVENSON: Yeah. My metabolism isn't on because I'm not eating.

DR. WILL COLE: Yeah, you're not feeding it enough. Yeah.

SHAWN STEVENSON: How long you've been in Pittsburgh?

DR. WILL COLE: My whole life, other... I lived here for four... Four and a half years.

SHAWN STEVENSON: Oh, really?

DR. WILL COLE: My wife's from Norwalk. I don't know if you know where that's at, but...

SHAWN STEVENSON: Not yet.

DR. WILL COLE: Long Beach area.

SHAWN STEVENSON: LBC.

DR. WILL COLE: Mm-hmm.

SHAWN STEVENSON: Awesome. So Pittsburgh, man. Are you a big Steelers fan?

DR. WILL COLE: Yeah. I'd be kicked out of the city if I'm not.

SHAWN STEVENSON: It's mandatory.

DR. WILL COLE: It's mandatory.

SHAWN STEVENSON: When the baby comes out, little stamp.

DR. WILL COLE: Yeah. Steeler nation.



SHAWN STEVENSON: Steeler nation, man. That's awesome. So this is one thing that I want to know more about for sure, which is your superhero origin story, man. Being from Pittsburgh, how did you first kind of fall in love with health and wellness?

DR. WILL COLE: So my dad was a bodybuilder in the '80s and '90s. So I thought it was normal to have your dad lubed up in baby oil with turquoise Speedos and at the competitions. And my mom, I remember her with those big '80s camcorders filming him, getting the poses right and... So that was... Not everybody in the bodybuilding world, of course, is interested in wellness. My dad just happened to be interested in both. So my early formative years was going through the co-op and buying the healthy foods and seeing that juxtaposition of my friends at school, and it was something that was just very normal for me, but I still didn't... We didn't look down on people that didn't eat like us, it just was different. And then that evolved to me being really interested in it for myself. It wasn't just something we did it at home. So I worked at Finish Line at the mall in Pittsburgh.

SHAWN STEVENSON: Shout out to our kicks right now too.

DR. WILL COLE: Got my Yeezys on. But I used to spend my paychecks working part-time at Finish Line going to the health food store, buying these cool things at like 16 years old, 17 years old, a sophomore, junior or a senior in high school. So it was just like... I did... There wasn't a term called biohacker at that time, but it was my version of that, of me wanting to feel good and understand how food could be medicine and how... Understand how food could improve my health. I didn't look at labs, I didn't look at all the studies at that point. It just was an intuitive thing for me. And I read a book at that same time called Patient Heal Thyself from Jordan Rubin. I don't know if you know Jordan Rubin. So he talked about how he reversed his Crohn's disease, his ulcerative colitis, his inflammatory bowel issues with food and fasting. So that was an early turning point for me too. And then I got trained in it formally and haven't looked back since. And we started one of the first Telehealth clinics. My whole career has been Telehealth, 'cause I am in Pittsburgh. So I moved back from LA back home, and then we started our Telehealth clinic just because I'd be writing about this or speaking about this, and functional medicine wasn't as well-known as it is today.

SHAWN STEVENSON: Yeah. I was wondering how you were working with folks like Gwyneth Paltrow who wrote the foreword for your book, and obviously, being a pioneer, really, in telemedicine, and so much that we can do now with getting labs done and all that stuff.

DR. WILL COLE: Yeah, doctors had to learn overnight because of... They were forced to with the pandemic. For me, it wasn't like a calculated thing, other than there'd be people in different



states and countries that needed access to this. So we provided it, and it was just born out of them needing it.

SHAWN STEVENSON: So what was it that... It seems like it was kind of a natural transition, but what was it that specifically attracted you to functional medicine?

DR. WILL COLE: Well, health and wellness was... I knew I wanted to be in health and wellness, but when I was in school, it was at Southern California University of Health Sciences in Whittier, not too far from here, and there was a guy who had gone to my school. He was older than I was, his name is Datis Kharrazian, and even today, Dr. Kharrazian's one of the leading voices in functional medicine, more in the clinical side. He speaks for the Institute for Functional Medicine. All the doctors at the Cleveland Clinic's Functional Medicine Center is trained through IFM, and Datis is associated with them. So that's... It was through hearing Dr. Kharrazian speak about this. So for me at that point, when I was in school, was more focused in functional medicine, not just this more broad... More broader health and wellness.

SHAWN STEVENSON: This was so good. So as I mentioned, your new book is fantastic, I mean fantastic. Intuitive Fasting.

DR. WILL COLE: Thanks man.

SHAWN STEVENSON: And this term, of course, we're going to dive into what that looks like, but one of the big tenets, and we talk about this here on the show as well, is that we can't eat for someone else's body. We can't eat for somebody else's physical and biological needs. We need to be able to really... To listen to our own bodies and eat what's right for us. And you teach patients about eating intuitively. So first of all, what is intuitive eating? If I'm craving some Cinnamon Toast Crunch, is that my intuition talking to me?

DR. WILL COLE: You would think, right? Look, you're catching me at a weird time because the book's out, early days, and you don't know, 'cause I'm in my bubble consulting patients, all of this stuff I write about in my book is just born out of hours and hours, 10 hours a day seeing patients, seeing their labs improve, seeing their lives improve. It's the most uncontroversial thing in the world. It's positive. Their doctors are telling them, "Whatever you're doing, keep on doing it." Everybody's on the same page. We're good. They're getting healthy. There's nothing bad about that. But apparently, now that the book's out, it's triggering a lot of people, because of that title that I gave it is, Intuitive Fasting. And there's the more conventional intuitive eating community that they have that... They own... They think that they own that word intuition. That's not what I'm talking about, because that's talking about people with eating disorders, and they're kind of overcoming that. If that's working for them, the way that it works for them, great, that's their intuitive eating.

What I'm talking about here is, how do we get to a place of knowing what our body needs, how do we get to a place physiologically and mentally, emotionally and spiritually, how do we get to a place where we know what makes us feel great? 'Cause I'm meeting people that are struggling with hormonal problems, struggling with blood sugar problems, struggling with autoimmune issues. So like you said, is it hangryness or is it intuition? Is it insatiable cravings or is it intuition? If you're really going towards something that makes you feel worse, is that really just perpetuating you feeling bad at the end of the day? So I am all for authentic intuitive eating.

But you have to have metabolic flexibility or some semblance of it, at least moving in that direction to start to have proper hormonal signaling, proper blood sugar balance, proper satiety signaling, all of that stuff physiologically, that's the infrastructure that's the fertile foundation for knowing what makes you feel good and knowing what doesn't make you feel good. So that's what I'm talking about intuitive fasting and with eating intuitively, and I would say this, just like you and I are doing right now, when you're metabolically flexible, you can go longer without eating, not because it's some arduous obsessive punitive like, "I'm going to punish myself fasting." This is not an eating disorder disguised as a wellness practice, this is about, I can just go longer without eating because I'm more metabolically flexible, so that is the other part of intuitive fasting.

SHAWN STEVENSON: Yeah, and the funny thing is that it just goes against conventional wisdom, which is programmed into us, into our culture that you need to be eating constantly throughout the day, and so let's talk a little bit about that, how has our encouragement to constantly be eating really collided with our genome?

DR. WILL COLE: Well, researchers estimate that our genetics haven't changed in around 10,000 years, a long time, no matter however you look at it, it's a long time, our genetics haven't changed, but yeah, our world has changed so dramatically in such a short finite period of time. When you're looking at the context of the totality of human history, there is what's known in the research as the genetic epigenetic mismatch, this chasm between our DNA and the world around us, this living in a brave new world as far as genetics are concerned, and those genetic predispositions for insulin resistance or autoimmunity, they've been lying dormant for 10,000 years, but they're being awoken like never before, because of this onslaught of this epigenetic genetic mismatch, so that's a problem, and the way that we're eating and the amount that we're eating and the type of foods we're eating, all of the how and the when and what of what we're eating is this genetic epigenetic mismatch largely. So we're constantly eating, we're snacking, we're not giving our body much of a break from repairing and renewing, and it can be as simple as just not eating too late at night and allow your body to fast through the night



until you break the fast at breakfast, they could be that. But we can dig even deeper for people that want to explore the lengths that their metabolism can go.

SHAWN STEVENSON: So good, and I love the fact, we both do this, in my book as well, I kind of go through a little bit of the history of things, and this isn't a new thing, this isn't a new invention, but it's a new framework, it's a new way of looking at it, because again, we've been inundated with this idea, I was taught this in my conventional university, also certification programs, eat multiple small meals a day, we'll talk more about that, and some of the science and some of the studies around that, but this is what I was taught for us to be constantly eating. But you talk about Hippocrates, for example, and you kind of go back and you look at some of the historical references and just understanding that this kind of breakfast, lunch, dinner, breakfast, lunch, snack, dinner, snack paradigm, it's literally just a new invention. So let's talk a little bit more about that.

DR. WILL COLE: Yeah, it is. It's unsettling for some people to question, why? Can we do something different? And this is all predicated on feeling better. I just want to maybe reiterate this, if what you're doing is working for you, if you feel great, if your labs look great, if you have a healthy relationship with your body and food, keep doing what you're doing, but there's an epidemic of people that don't feel like that. There's 50 million Americans having autoimmune disease, over 50% of the United States is insulin resistant, pre-diabetes, metabolic issues, PCOS, type 2 diabetes, we need to do something different to see something different, so yeah, we're never giving our gut time to rest and digesting food requires a lot of energy, as you know, and there's an epidemic of gut problems and people that are not digesting food properly, are not breaking it down, we have an epidemic of people that can't even tolerate salads, they're eating raw vegetables and they're getting bloated and digestive problems, there's a problem here, and a lot of it does have to do with the gut never getting a break because of the constant eating, and then what we're feeding it too.

So fasting, one of the studies that I reference in the book is a way... And when I say fasting, a specific type of fast that I'm exploring in the book, when you explore in yours as well is this time restricted feeding. It's not about caloric restriction, it's just giving your body a bit of a break without eating, and you're eating ample delicious foods in specific windows, so it's nothing scary, but it's allowing your gut time to reset while microbiome has the circadian rhythm, like a cortisol has, certain colonies are higher in the morning, some are higher in the evening of this wave like motion of this microbiome metropolis, and fasting helps to reset that.

So that's a powerful thing, and when I see people start to have agency over their health again and start reclaiming their health, and I would say when they're more metabolically flexible and their gut's healthier and the inflammation levels are lower, they're in control of their life, they're in control of the food instead of the food being in control of them.



SHAWN STEVENSON: Is powerful men. So let's just clear this part up right here, so you kind of mentioned this a little bit earlier, this is not punishing yourself and starving yourself, when you say I'm fasting, this is not a self-punishment, how is intermittent fasting, intuitive fasting, different from chronic calorie restriction?

DR. WILL COLE: Chronic caloric restriction will over time slow your metabolism down and you'll feel miserable, and that's why most diets fail, because it's like an analogy that we use in our space, when you're in the sugar-burning mode, you're burning, kindling on the fire, the kindling will create some light, but it will be short-lived, so you're to keep putting kindling on throughout the day. So what caloric restriction is and what dieting culture is, it's basically taking that kindling down and then saying, live that way. And most people will do it for a little bit, but it fails most people most of the time, and they'll lose a little bit of weight, but over time it'll be short-lived, it's not sustainable for most people. There's a place for slight caloric deficit, don't get me wrong, and that can happen with some fasting, but that's not the main goal of it, it's a component of it, but calories are not king, and like I mentioned in the book, our body is more of a chemistry lab and less of a calculator.

SHAWN STEVENSON: Right.

DR. WILL COLE: So the foods we eat actually influence our biochemistry, influence the gut microbiome, it's actually... It's a communication to our physiology, because 1000 calories of avocados is going to influence our body completely different than 1000 calories of a soda or something like that. So it's using food as medicine strategically, but definitely not chronic caloric restriction. And people conflate the two, because there's studies that show there's certain fasting mimicking ways of eating, and even those are finite, even those are temporary, that they're chronically lower in calories. There's a time for feeding and a time for fasting, and people like to make broad sweeping over-generalized statements and misrepresent what we're talking about when it comes to fasting.

SHAWN STEVENSON: Yeah. So now let's clear this up as well. So I was taught that... This is one of the craziest things, and this was at a fitness training. So this was like a certification, strength conditioning coach thing, while I was still at my university. I was trying to diversify because, again, what I was learning in school just wasn't measuring up. And the trainer, she said that if you don't eat breakfast, your metabolism isn't on. You got to eat to keep your metabolism going. So I want to ask you, shouldn't we be eating more times throughout the day? You've got some studies actually where they have folks to consume multiple meals versus just maybe two larger meals and see what happens.



DR. WILL COLE: Yeah. Yeah, I think that this is an interesting field of research, and I think when those... That advice of having six small meals a day or your metabolism's going to slow down, look, if you're in a kindling, burning mode, that can be relatively true, because you're addicted to kindling. Your blood sugar is going to be on a roller coaster if it's dependent on just kindling. So relatively, there's probably some truth to that, but if your... So if your only option is kindling, that's true, but you can put a log on the fire. You can be fat-adapted, and there's a time and place for kindling too. So what I'm advocating for is just putting another fuel source on the fire here for a more abundant, more sustainable, more long-lasting energy throughout the day. So yeah, if you have... If you're on a blood sugar roller coaster, you probably need kindling throughout the day, but there's another option.

SHAWN STEVENSON: Yeah, yeah. One of those, and I specifically wrote this down 'cause it was so eye-opening, it was a randomized controlled trial you talked about. They took two groups of diabetic patients, one group was eating five to six small meals per day, and the second group ate two large meals per day. Both groups were consuming the same, this is the key word, it's the same amount of calories, but at the end of the study, the group who ate two larger meals per day lost more weight, lost more hepatic fat, had a better improvement in insulin sensitivity and more. Unbelievable.

DR. WILL COLE: Radical to some, right? Radical. But isn't it amazing how resilient the body is? If you just allow it time to repair and renew and up-regulate these pathways that we... Our body's capacity for healing has, it's profoundly exciting. It's so cool to see. And I have no doubt, in another 10 years, there's going to be even cooler studies coming out, showing what the body's capable of doing. This is, like you said, Hippocrates, Paracelsus, I quote Paracelsus in the book, he's another father of modern medicine, also used fasting just like Hippocrates. He was known as a father of toxicology and the Martin Luther of medicine, 'cause he was reforming medicine at that time. And he called fasting the physician within, which I think is a powerful, eloquent summary of all the cool studies that are substantiating that now, is that they didn't have randomized controlled trials thousands of years ago, but they saw anecdotally people getting better and healthier. And that's why they're the fathers of modern medicine, and not me, 'cause they knew without studies, they saw changes in people's health.

SHAWN STEVENSON: Yeah. I think it's so interesting, whenever we talk about Hippocrates and how many principles... You take the Hippocratic Oath, but how many principles are actually in play from this person who is the framework for the system? All diseases begin in the gut's another thing that we hear coming from the father of modern medicine. So I want to talk about... Which we've been alluding to this, there are some very specific benefits that we see that folks can be... And again, and I love that you mentioned this too, if you're... It's okay if you are eating six, seven, eight small meals a day. And by the way, I've done all of this stuff. And



you are feeling good and you're getting results and... But the thing is, anything can work for somebody temporarily.

So you might even be in a space right now, especially when... People are most passionate about something when it's working for them in the moment. But especially once it becomes integrated, first of all, most folks find that they have to pivot with different things. And over time, especially if you know something works for you, you're just content with it. But the people who get adamant and want to debate and argue about it, generally, it's just that hot thing for them. So I'm saying this to say that folks could be missing out on some benefits because when you stop... When you stop eating, certain processes kick into gear, certain benefits start happening that you might be missing out on if you're constantly eating throughout the day.

DR. WILL COLE: Absolutely, yeah. This is about, if you want to take your health to the next level, if you're feeling intuitively, something's off here, then lean into these things, pick it up, experiment with it. And what you said is so true, if I hung my hat on one way to do something all day long when I'm consulting patients, I'd be proven wrong all day long. So these are tools that I want people to grow for themselves, and after cycling through two or three of the protocol in the book, they're going to be able to adjust it for themselves. Oh, I felt better when I did more of this. I'm going to do that. I'm going to do less of that. I don't need that. That's the heart of functional medicine, it's bio-individuality. We're all created differently. So the idea that everyone has to do this one type of fast... Maybe 12:12 is all you need. And like you said, what works for you now isn't necessarily what you're going to need down the line, and it's okay to pivot, it's okay to change your mind, it's okay to evolve. That shouldn't be feared and that shouldn't shamed either.

SHAWN STEVENSON: Oh yeah. So good. So specifically, you talk about... And this for me was a thing 15, 20 years ago that really got me to consider this in a new light, which is digestion itself requires an immense amount of energy. So can you talk a little bit about that?

DR. WILL COLE: Yeah, yeah. And if I could predicate this again on something I just touched on earlier, is that there is an epidemic of gut problems, but it exists on a spectrum. So if someone's gut is super healthy, they could probably get away with eating the modern western diet, if it's more or less healthy, if they're following the 80-20 rule maybe... And they're going to get away with it. People are getting away with less and less. The resilience capacity of the human health across the board in the West is going down. So maybe our grandparents could have got away with different stuff. People are not having the resilience that we once had because it's that mug analogy. Some people have massive mugs, some people have smaller mugs. That's your genetic tolerance to stressors. And you can't change your mug size, but you can change what you put in it.

The problem is, people are... Their mugs are overflowing sooner and sooner and sooner and sooner. So gut health is at the center of a lot of this. There's a lot of gut-centric components to people's chronic inflammatory problems. So to start to allow that mug to empty, to start to decrease that tipping point that people are finding themselves in, in the throes of inflammatory flares, in the throes of chronic health problems, in the throes of feeling out of control in their own body when it comes to health, you need to empty that mug, and dealing with the gut and giving the gut some TLC is at the heart of a lot of the principles within what we're talking about. It's the gut component there.

SHAWN STEVENSON: Yeah. So one of the... Looking at health in a very superficial way, we are taught that food is energy, calories are energy, this is how you get more energy. But again, we're not looking at... We're looking at the body as a calculator and not a chemistry lab, which is... We're looking at food in a way, again, we're getting energy from food, but the greatest energy requirement for the human body is digesting the food that we eat. So much energy goes towards that, and a part of this is the immune response. Your immune... Most of your immune system is located in your gut. It has to be there front line, because through our evolution, you could eat something random and it could be the last thing you ever eat. So your immune system has to be front line and plus... And this is the biggest part, it's the most miraculous thing where you're eating something and it's going to get turned into human tissue. It's like freaking magic. It's like some David Copperfield jumping-out-of-the-closet craziness that the human body is able to do, but that requires a massive focus of energy. And when that energy is getting siphoned, it's getting pulled away from other things... Repair, some of these other things I want to talk to you about.

DR. WILL COLE: Yeah, well said.

SHAWN STEVENSON: So really want to talk more about metabolic flexibility that you highlight in the book, which is super eye-opening. We're going to do that right after this quick break. So sit tight. We'll be right back.

One of the biggest issues facing our world today is the health of our immune system, and our immune system has many different dynamic parts. We have an innate immune system, and we also have an adaptive immune system. Our adaptive immune system has an intelligence that helps us to adapt to any pathogen that we are faced with, and our nutrition is a big part of this equation because our immune cells are made from the foods and nutrients that we consume. And one of the most powerful nutritive sources proven to help fortify our immune system is highlighted in this study published in Mediators of Inflammation. They discovered that the polysaccharides in Reishi medicinal mushroom were found to enhance the proliferation of T-cells and B-cells of our adaptive immune system. These were found to have the capacity to be

immunomodulators, helping to up-level the function and intelligence of our immune system, or if our immune system is overactive, to help to reduce and bring down that immune activity.

Again, this is called immunomodulation, and also inflammation of many different viruses that we might be exposed to is one of the big issues, and one of the viruses that we're facing right now has a tropism or target towards inflammation of our lungs. In another study, published in Patents on Inflammation and Drug Discovery revealed that the renowned medicinal mushroom Reishi has potent anti-inflammatory and anti-allergic action, plus again, it possesses immunomodulating capabilities. Super remarkable. It's one of the things that's been utilized for centuries that we have access to today. But we want to make sure that it is dual extracted, meaning that it's a hot water extract and alcohol extract, so we're getting all of these benefits that are noted in studies like these.

And the place that I get my Reishi from that does it the right way, organic high quality Reishi without any nefarious substances coming along from these random companies that are putting these formulas together is from Four Sigmatic. Go to foursigmatic.com/model. That's F-O-U-R-S-I-G-M-A-T-I-C.com/model, and you're gonna get 10-15% off all of the medicinal mushrooms that they carry. And by the way, Reishi is great for your sleep as well. This is another peer-reviewed study published in Pharmacology, Biochemistry and Behavior, found that the renowned medicinal mushroom Reishi was able to significantly decrease sleep latency, meaning you fall asleep faster and increase your overall sleep time and also increase your sleep efficiency.

So much good stuff. And this is one of the things about real foods that have a storied history, is that they're not just good for one thing, they're good for many things. It's why I'm a big fan of Reishi and I have a cup many nights of the week before bed. About 30-45 minutes before bed, definitely helps with improving sleep quality, but also beneficial for our immune system. Maybe have it with a little bit of whole natural source high quality fats like MCT oil, coconut oil, maybe a little bit of ghee, whatever it is that you're into, that helps to cut the bitterness, maybe a little bit, a couple of little drops of some Stevia, some English toffee Stevia, chocolate Stevia, just to make it nice and palatable. Or some folks have their Reishi tea all by itself. Either way, it's one of the most effective things right now when immune health is a top priority. Check it out foursigmatic.com/model. And now back to the show.

Alright. We're back and we're talking with best-selling author, Dr. Will Cole about his new book, Intuitive Fasting that I have right here. It is out and is available now, and it is fantastic. Even the book itself is beautiful.

DR. WILL COLE: Thanks.



SHAWN STEVENSON: And then you slid in the colored recipes. Man...

DR. WILL COLE: Thanks buddy.

SHAWN STEVENSON: To be 100, it made me hungry in a time when I was not... I was fasting.

DR. WILL COLE: You can intuitively break that fast.

SHAWN STEVENSON: So I wanted to talk to you... Before the break, I mentioned, one of our goals with intuitive fasting is to return our bodies to a natural state of metabolic flexibility. So let's talk about what metabolic flexibility is and mitochondrial indecision.

DR. WILL COLE: Yeah. Alright. So this... Many people are finding themselves in a lack of metabolic flexibility, they're stuck in that sugar-burning mode, they're bound by the next meal. The amount of bandwidth that the next meal and the next snack and the next craving is it's taking up a lot of their head space up throughout the day. And even when they eat food, they don't really feel fulfilled for long and they can feel fatigued and lethargic afterwards. These are some of the hallmarks of metabolic rigidity or metabolic inflexibility. We all are born as babies producing ketones for proper neural development. It's something that humans would have been in times of ketosis for eons. So when people talk about this stuff being a fad, what we're doing right now in modern life is the fad.

We're just returning to something that people talked about for thousands of years, and it's now substantiated in science too. So it's our birthright. We're... Metabolic flexibility is our birthright. We're just returning to that birthright. That's all. And that to me, when someone has metabolic flexibility, they have a log on the fire, fat for fuel, they have the kindling on the fire when they want it and when they need it, that's the best light, that's the best energy to fuel your day. There's no shame in either one of those. The problem is people feel like... I'm advocating for people to always be in ketosis or to always be fasting. No, these are tools to pick up to better your life. And intuitive fasting will just happen as you gain metabolic flexibility because you can go longer without eating.

And one day I'll wake up, I feel great. I know, I feel great when I do some fasting and timerestricted feeding, I'm consulting patients in the morning online, and I'll break my fast at lunch. And then the next day it... Maybe it's a Saturday morning, I want to have a breakfast. There should be that grace and lightness to this. It shouldn't be this punitive thing, and that's what I'm talking about. That's what you talk about. This is our message when it comes to this. This is a tool to better your life. We're not like "You can't eat, and if you eat you're bad." This is completely a misrepresentation of our message. So metabolic flexibility is this awesome place where you have food peace, you have an inner stillness of knowing, "I feel great, and I eat when I want, and I don't eat when I don't want, because I feel great where I'm at." And there's just this in tuned awareness of what your body needs at any given moment.

SHAWN STEVENSON: Yeah. And this... When you talk about utilizing different fuels, this is literally... The heart of this is the mitochondria.

DR. WILL COLE: Oh yes, mitochondrial indecision.

SHAWN STEVENSON: In being able to utilize the different fuels...

DR. WILL COLE: Yeah. Absolutely. Yeah. So mitochondrial indecision, many people find themselves... I call it in the book, and that's how I've been calling it for years, is metabolic purgatory, where you're not fully fat adapted, you're not fully sugar adapted, you got the kindling off the fire 'cause you're trying to diet, and then you're like, "Ahh." That's diet culture. That's the toxic diet culture of failing and filling yourself with shame because you can't stick with it. Yeah, 'cause you are dependent on kindling. So mitochondrial... You need... We need to train our mitochondria over time to build the proper infrastructure to start burning fat for fuel. That takes time. So the analogy that I use in the book is this proverbial yoga class for your metabolism. Look, I don't do yoga that much, so I can't... I'm just giving myself as an example, and I'm not very flexible either. So if I showed up to yoga, even if it's a beginner class, I'm going to be like, "What the heck? The human body should not move like this. I'm horrible about it, and I could even judge yoga and say yoga is not for me. But no, it's just... It's something new. And I'm muscular-skeletally, I am inflexible. Many people's metabolism is inflexible. So it's just about being consistent in gaining that flexibility, and part of that is the mitochondrial ability to burn fat for fuel.

SHAWN STEVENSON: Oh, wow. So we want to get our mitochondria to be able to do downward dog basically...

DR. WILL COLE: Hold that warrior too.

SHAWN STEVENSON: Hold that warrior... I love that so much. Because essentially what happens with... We create these kind of metabolic clogs with the way that we eat, especially the type of food that we're eating. As you mentioned a couple of times, just the very nature of the things that we are exposing ourselves to, that's the fad. Smurf cereal that I grew up on, which was my favorite, that's a fad. Even though it looks like Doritos have been around a long time, it's a fad. These are new things. But creating these metabolic blocks where your mitochondria don't really even know how to utilize different fuels, and creating that stagnation that you just mentioned.



DR. WILL COLE: 100%. And it's an "aha" moment for people once they're on the other side of it, it makes complete sense. But I get it when what we're talking about here is turning everything on its head as far as what they knew, and they don't even... Just because something's there every day, they think that's normal, and many people settle for just feeling lousy, different degrees of lousy. And like you said, it's like that maybe something's working for them now, and that's the only truth for them. But the reality is not everybody's wellness path has to look exactly the same. And yeah, this is a tool to improve your quality of life.

SHAWN STEVENSON: Yeah. Let's talk about how our microbiome plays into metabolic flexibility, how does our microbiome play into this, in the whole equation of intuitive eating and fasting?

DR. WILL COLE: Yeah. So I see on an hourly basis, the microbiome labs. I look at poop all day long, not literally like a poop...

SHAWN STEVENSON: Poop-looker.

DR. WILL COLE: It's so normal for me to talk about poop. I don't realize when I'm talking to a mixed company, it's really not normal to talk about feces, but... The amount of dysbiosis, the amount of bacterial overgrowth, the amount of these weeds that are overgrowing in this gut garden, there's nothing inherently wrong with weeds, they're part of nature, but people are having a weed overgrowth. They're having pathogenic and opportunistic bacteria overgrowing because there's genetic epigenetic mismatch. This microbiome would have lived with us for a long time too, and they're also living in a brave new world, just like our genetics. So upwards of, depending on the study that you look at, but upwards of 100 trillion bacteria in our gut and on our skin, and we have about 10 trillion human cells. So we're about 10 times more bacteria than human. And the microbiome influences so much of our life. 95% of serotonin, these are things that probably your audience already knows, but most of serotonin is made in the gut, stored in the gut. It's known as the second brain, which you talk about.

So the reality is this... An insult to the gut is an insult to the rest of your body. And dysbiosis... And this is the thing people think they have to have extreme digestive symptoms to have underlying gut components to their issues. They're like, "Okay, I go to the bathroom fine. I don't have IBS, I don't have constipation." And that's not necessarily the only thing that's going on. If you look at the studies that are coming out that underlying bacterial imbalances are associated with metabolic issues, they're associated with brain health issues, they're associated with autoimmune issues, and they go to the bathroom more or less okay. But then there is a larger conversation about what is normal as far as bowel movements anyways, 'cause patients, they don't really like to talk about it that much, but then they'll say, I don't have any digestive problems.



But then they'll tell you, "No. I go every three days. But they're like, "I'm not constipated." Or it's looser stools every day on the Bristol chart, and they're like, "Yeah, it's normal," 'cause it's there every day. Just because something's common doesn't necessarily mean it's normal, and settling for these gray areas that are, from a functional medicine standpoint, check engine lights. You may think it's normal, but actually it's not. So what's normal for bowel movements is one to two snakes a day, as we say. But that's a good Bristol chart way of guessing where you're at. But again, you can have normal Bristol chart and still have a gut problem too.

SHAWN STEVENSON: Wow. So how is our microbiome potentially influencing our ability to manage our hunger, manage our ability to fast?

DR. WILL COLE: Wow. So it's these microbiome cities, these colony-forming units, they're all like neighborhoods within this microbiome metropolis and certain colonies of bacteria, especially the overgrowth, the SIBOs, the dysbiosis, the SIFO is the small intestinal fungal overgrowths, they are... They determine a lot of how your brain works, they determine how blood sugar's regulated, they determine how hormones are converted. So if your blood sugar is being influenced by this, if your neurotransmitters are influenced by this, if your inflammation levels are being influenced by this, that's going to influence what you crave, that's going to influence how you relate to the world around you, food being a part of that. Your relationship with the world around you will be influenced with an unhealthy gut. And food's a part of that, cravings are part of that.

SHAWN STEVENSON: Wow, so it's not necessarily my intuition that's craving the Cinnamon Toast Crunches. It's very likely microbes.

DR. WILL COLE: Absolutely. That's a component of it. 'Cause if you look at the cascade, the ripple effect, so yeah, it's blood sugar balance, imbalance, but then can we go upstream from there? Oftentimes we can, and the scientific journals are exploring that too. Can... What's upstream from blood sugar imbalance, oftentimes has gut components to this. But it's oftentimes a confluence of factors that is the perfect storm, or the gut's a major component of it for many people, but it's not the entire component of it, but that's a good thing 'cause we have to understand all the pieces of the puzzle. 'Cause on the flip side of that, I see some people that are focused so much on gut health, they without a doubt are way better than they used to be, and they know that. Their health's improved, and that's typically where I'm meeting most of my patients. They've got their gut in check, they're a lot better, but they're still struggling. And that's what we can find with labs, some things that maybe get missed that need some next-level support.



SHAWN STEVENSON: Yeah. Now, you've also written a book on this subject that I'm about to bring up and it's so important because even in our field, and of course with the public at large, this term can seem a little bit like it's a ghost, or it's not really real, inflammation. How is inflammation playing into our ability to have metabolic flexibility and just the overarching health issues associated.

DR. WILL COLE: Yeah, man. It is a nebulous term for many people. They may know inflammation is probably not good, but they don't really know the implications in real life. And all of the things that I've written, like with Ketotarian and then with Inflammation Spectrum and this, I've talked about fasting in all three of the books because it's part of my clinical work. And specifically with intermittent fasting, it supports β -hydroxybutyrate which lowers inflammation. So that's why I talked about... In passing, I talked about fasting in Inflammation Spectrum. So inflammation is the commonality between just about every health problem. So we're talking about autoimmune conditions to diabetes, metabolic issues, inflammatory problems in the muscles and joints, arthritis. All of these are inflammatory issues.

SHAWN STEVENSON: But what is it? Is it... It sounds like a boogeyman. It sounds like Candy Man. Like you say inflammation three times and it shows up. What is it?

DR. WILL COLE: It's actually a product of the immune system. So it's actually not a bad thing. It's not inherently bad at all. If it's in balance, inflammation fights viruses and fights bacteria, and heals wounds and protects us. The problem is when there's an insult and when there's an assault against the Goldilocks principle, right? Not too high, not too low, but just right, and that's so much of our body, isn't it? Like the microbiome, we just were talking about that. You don't want dysbiosis, bacterial overgrowth, you don't want deficiencies of bacteria either. Same with hormones, you don't want dominance of hormones, you don't want deficiencies either. Inflammation, same thing, same principle. You want inflammation just right. When you need it, you want it to be high at certain times when it's fighting something off, and you want it to calm back down. The problem is, and what we are typically referring to in, we in health people... In the health world, when we're talking about inflammation, we are saying... We're meaning chronic inflammation.

Chronic inflammation is that lack of balance, that sort of forest fire that's burning in perpetuity that is associated with just about every health problem under the sun, even brain health issues, and that's what people don't make the connection. Oftentimes they think, "Oh, it's a mental health issue." Mental health is not separate from physical health. Mental health is physical health. Our brain is part of our body, and there's a whole field of research exploring it, which you've talked about, and I've talked about, this neuroinflammatory component of it, that when we're looking at the cytokine model of cognitive function, how cytokines or pro-inflammatory cells are attacking the brain or upregulated against the brain, which things like anxiety and

depression and fatigue and brain fog are all associated with. This is all inflammation. It's immune system gone awry.

SHAWN STEVENSON: Man, yeah, neuroinflammation is one of the biggest issues in our culture. But the thing is, of course, is one of those things where the brain doesn't have pain receptors, so you don't really know that your brain is on fire, and I love the analogy you give in the book of the human body experiencing its own global warming basically.

DR. WILL COLE: Yeah.

SHAWN STEVENSON: And oftentimes we find out too late and we have downstream effects, but it's really rooted in this information taking place in our brain. Now, I want to talk about... I think this is so important just to bring some more practicality to things, too. Some of the benefits, some of the specific benefits of intuitive fasting, and you go through five of them in the book. I want to talk about a couple of them. The first one being ketosis. Let's talk about that.

DR. WILL COLE: Yeah, so that's part of the log on the fire. That is what's known in the research as the fourth macronutrient. So we have proteins, fats, carbs and ketone bodies, that again, babies are all producing them when they're born. We can all produce them, they are naturally produced in the body, and so endogenous ketone bodies is something that's one of the hallmark benefits of intermittent fasting and a clean ketogenic diet, which mimics fasting in many ways, and if you look at the research... Obviously, you look at the research, but for people that are curious about this, is that if you look at the pathways of the ketogenic diet and fasting, you'll see a lot of the same things because β -hydroxybutyrate is at the heart of a lot of that research. So it's not just a way to burn fat, it's a way to fuel your body. And it's not just a way to burn fat, it's a signaling molecule to actually downregulate and basically manage these really cool pathways in the body. So it downregulates these proinflammatory pathways, like we just were talking about, this chronic inflammatory state, well, this is a natural, completely free way to lower inflammation levels.

So things like NF kappa B, the NLRP3 inflammasome, these pro-inflammatory pathways are lowered naturally in this state, and we can upregulate these pro-antioxidant anti-inflammatory pathways like the NRF2 pathway, the AMPK pathway, so it's a regulator of inflammation. And it increases mitochondrial biogenesis, we were talking mitochondria... Actually making more resilient mitochondria. It increases BDNF, brain-derived neurotrophic factor, actually encouraging neuroplasticity and making new neurons. I keep thinking of Paracelsus, the physician within, I'm like, "That dude was right!"



That dude was right! He didn't know all this stuff we know now. It was a physician within, and autophagy with cellular recycling, that's just ketosis. So that was one of the five in that chapter.

SHAWN STEVENSON: Yeah. Oh, so good, and even just mentioning... Because that's the thing is actually connecting all of those benefits with what's happening, which is your body shifting over into ketosis, which again, this would be something through evolution that would more than likely happen on a daily basis, but today, most folks never touch that, and so they don't see the uptick in the production of HGH, they don't see the uptick in the production of BDNF, like you just mentioned, but also it's just... There's so many cool benefits, one of the last ones you just mentioned is another one of the five you kind of target and dig deeper on, which is autophagy. So let's talk about that.

DR. WILL COLE: Right, which it's connected to ketosis, but I see it as its own separate thing because of the power that it has on our health. We all have autophagy. If you break that word down, auto-phagy itself, auto-phagy eating, it's our healthy cells gobbling up and recycling dysfunctional cells, so it's our body's innate house cleaning system. And we all have it to a certain degree, but because of this genetic epigenetic mismatch, autophagy's not working so hard, so we need to support that by decreasing that mismatch, by decreasing that chasm. So this evolutionary mismatch that you mentioned is one of the reasons why researchers are exploring why autophagy is... Even needs support autophagy. So it excites me for my patients that are struggling with chronic inflammatory problems as a tool to improve their health.

SHAWN STEVENSON: That's so powerful, and we have... I love that you said this multiple times, the physician within creating... We've got the most powerful pharmacy in our body and all of these different things that... Man, you cannot get a pill for, your body just does when you allow it to. So empowering, man. Can you talk a little bit about which... This is a thing about your book, is that you really spend time outlining the plan to get people to the place of intuitive fasting, intuitive eating, which again, it would sound like a very... Not a conventional term, we'll just put it like that but that's really ultimately where we want to get, where we can actually listen to our body, listen to the physician within because what we are eating, the way that we're eating oftentimes, we're programmed to eat like somebody else. To eat for what somebody else's needs are, but once we really dial that in and listen to our own bodies, that's when the magic happens. Can you talk a little bit about the plan that you've outlined in the book?

DR. WILL COLE: Yeah man, thanks for touching on that, 'cause I think when you... It is a paradox on one end of it, intuitive fasting. When someone's in sugar-burning hangry mode, addicted to food, yeah, fasting will not be intuitive, I agree with that. But what I'm saying is just like that yoga class, you're not flexible, you need to become flexible so you can have strength and

resilience and flexibility and intuition. I'm right there with you, it's not intuitive to you, but by using these tools you can gain metabolic flexibility, which just like with yoga, you'll gain strength, you'll gain resilience, you'll gain a rootedness in your body, you will be able to because that fat... The log is on the fire, you are keto-adapted or fat-adapted, you can go longer without eating. It is this yoga class where we're stretching and contracting metabolism over four weeks, and you and I both know this, but it's not done after four weeks. I want you to cycle through these four weeks as many times as you need to, 'cause this is a template to gain metabolic flexibility. Week one is a 12:12 fasting to eating window. These are all types of TRFs, time restricted feeding windows. They're very moderate, approachable, accessible forms of fasting light in a way. We're not talking about multiple day water fast or dry fast, they have their place with doctor supervision and for when it's clinically appropriate.

But this is something that you don't need a doctor for necessarily, most people can do this by themselves. 12:12 is I think so under-appreciated. You know what I mean? It's like the fasting... The fasting... Militant fasting people will be like that's weak, that's weak. Why are you even saying that? But they have to understand, most people are not where they're at. We have to lean these people in and help them out where they're at and be there for them in the way that they need at this point. 12:12 most people just can start there.

SHAWN STEVENSON: And the data shows that just after 12 hours, 12 hours you start getting a lot of these benefits start happening.

DR. WILL COLE: Yes.

SHAWN STEVENSON: It's definitely touching that, which is, 12:12 is what specifically?

DR. WILL COLE: You have 24 hours in the day. If they've learned nothing in this conversation that's the first thing there'll learn, 24 hours a day. 12:12 is you have a 12 hour of eating 12 hours of fasting. 08:00 AM to 08:00 PM, 07:00 AM to 07:00 PM have it work through with your schedule. The goal of it mainly is to not eat too late at night, and allow 12 hours to... Your body to fast.

SHAWN STEVENSON: Which includes your sleep time.

DR. WILL COLE: Which includes your sleep, which includes sleep, which includes sleep. People get confused on that all the time. But yeah absolutely, sleep is part of that. That's week one, but I'm pairing that with ketotarian which is complementing that time restricted feeding window because it's fasting mimicking in many ways, 'cause it's high fat, moderate protein, low carb. We're supporting that mTOR pathway or keeping it modulated to support these fat-adapted, let's get some mitochondria, getting it less indecisive over that week one. It's leaning

into it, we're leaning into it. It's a gentle leaning in. And like I say in the book, "Meet your body where you're at." Start checking in with your body now. Even though you probably won't be fully intuitive, check in with your body. Maybe you need to do week one, two weeks. Maybe you need to do it three weeks, that's all right. Because I want this to be sustainable for you. And maybe week two, going right into week two in week two is too much for you but many people are going to do fine with going into week two as it is, which is why I made it week two. But it is a 14 to 18 hour fasting window. It's... Depending on how you do it, let's just use 18 hour as an example, you have about a six-hour eating window. You can move that six hours whenever you want, and you're fasting 18 hours, sleep included. That's the metabolic recharge fast.

We're working on cardio metabolic markers, decreasing insulin resistance, increasing more fat adaptation and decreasing inflammation levels. And week three is the deepest fast, it's the cellular renewal fast. That's where I talk about the research about sirtuins and longevity in stem cells and autophagy and it's the almost OMAD fast, but it's every other day. It's not too scary guys. But it's a 20 to 22-hour fasting window. I call it almost OMAD 'cause there's a study in that book that I talk about that PKR pathway, where there's studies that show getting all your calories in, in a one hour period. I know a lot of people in the OMAD world do fine with that, and I'm not shaming anybody who wants to do OMAD. But I'm saying a lot of times people that aren't metabolically flexible and they're jumping right into an OMAD, it's a lot of calories get in, in a short period of time. Doing a more... A looser, more flexible almost OMAD approach that I talk about in the book is, allows for a bigger eating window. 'Cause remember this isn't about calorie restriction, you're still getting your meals in. It's not increasing that PKR pathway, the metaflammation and it's a little bit more approachable for people. This deeper fast is deeper ketosis. We're supporting those longevity pathways, decreasing inflammation, supporting autophagy.

And then week four... Maybe I should go back to week three. Week three, it's non-consecutive too. I know I said that, but just to repeat that. We're doing almost OMAD 12:12, almost OMAD 12:12. At that eating window variability, the fasting and re-feeding days are really important there. That's the warrior two week. That's like, "Alright, I'm getting resilience, I'm going to hold this." And then week four you're loosening back up. It's 12:12, we're increasing clean carbohydrates, we're getting that kindling on the fire, and it's like that Shava asana at the end of yoga class. You're like, "Dang, I did that." And that cycle is building that fortitude on a metabolic level and people can adjust it accordingly. I brought tons of tweaks throughout that whole protocol because I've heard just about every excuse in the book consulting patients. It's like, "Oh, I need to do this." Okay, adjust it here. Women are on their cycle or personal preference, you can adjust it accordingly. Because as you calm this noise of imbalance, you'll be able to hear that still small voice of your intuition. It will become innate as you get grounded in your body.

SHAWN STEVENSON: Incredible. Will, this has been fantastic and super beneficial. I'm so grateful that you put a tool together like this.

DR. WILL COLE: Thanks man.

SHAWN STEVENSON: And just outlined it in such a clear way. Can you let everybody know where they can pick up their book obviously. And also where they can just follow you online and get more information.

DR. WILL COLE: Yeah man. Thanks for having me, I appreciate it. On Instagram @drwillcole, drwillcole.com if you want to learn more about my clinical practice, and Intuitive Fasting's on Amazon, Barnes & Noble, support independent bookstores, yeah, all that stuff.

SHAWN STEVENSON: Awesome, man. One of the big things... Before I let you go, I love this. In the book, you said, "In short, you can... "because this is the thing. We oftentimes are thinking about, I want to get healthy, so I'm going to lose weight. And you say this in the book, you say, "In short, you can get healthy so that you can lose weight instead of trying to lose weight to get healthy." Can you talk about why you wrote that?

DR. WILL COLE: Yeah. People... There's a lot of shame when it comes to weight loss, and there's a lot of misinformation out there. And a lot of times people think, I'm going to... Their main objective is just to lose weight. I hear it all the time with patients and people on social media. They think, If I just lose weight, all my health problems will go away. And there's a part of that that's true, because the body's all interconnected, and fat can be inflammatory. I get that point. But I'll tell you this, when your focus is on getting healthy, sustainable weight loss will be a natural byproduct of that. When you're dealing with the underlying impediments that's making weight loss so difficult, it'll just be an outflow of that. So that's what I see time and time again, is when we deal with the things like the inflammation or the gut issues, or the insulin resistance, or the estrogen dominance, or the... Whatever we're talking about, when you deal with that and start tapping into that physician within, weight loss becomes a natural byproduct of that.

SHAWN STEVENSON: Awesome, powerful. Dr. Will Cole, everybody.

DR. WILL COLE: Thanks, man. Appreciate it.

SHAWN STEVENSON: Thank you so much for tuning in to the show today. I hope you got a lot of value out of this. One of the last things that we covered is one of the most important. Obviously in our society, transforming our body and our body composition is a big goal for a

lot of people. Here in the United States, we've got 242 million of our citizens are overweight or obese, and this is from the same environment that I come from. Of my 30 close family members, 28 of them were obese. And these are wonderful people, great people, but our environment doesn't care. Biology doesn't care, science doesn't care how good of a person you are, there are certain tenets that we must follow and to achieve that optimal state of health. But here's the rub, achieving this state of change with our body composition is a side effect of getting healthier, of doing things that our genes really expect us to do. And that's the big tenet, the big key, and the science coming from Dr. Will Cole's new book, and talking about really tapping into what our genes expect us to do, which is having these periods of eating and not eating, but also of course, upgrading the fuel that we're bringing in, getting ourselves metabolically healthier, metabolically flexible. Getting those yoga cells going and being able to really tap into our potential.

And so this... Again, the side effect is going to be weight loss. So it's not that you can't get the weight loss employing the specific strategies, it's just that the target should be health first. Improving our biomarkers of health, improving our insulin sensitivity, our leptin sensitivity, reducing inflammation. When we target certain lifestyle practices that encourage those things, the side effect is weight loss. But if we make weight lost the target, oftentimes we'll cut corners. We'll do things that are twisted and different fads and crazies. We'll grab... We'll order the Shake Weight. Do you remember the Shake Weight? Oh my goodness. The most inappropriate commercials I've ever seen. We'll do stuff like that. But the reality is, again, we're really getting into alignment with what our genes expect us to do. Healthy, high quality, nutritious movement. Great sleep, sleep quality, not necessarily just the quantity, the quality of our sleep. Real food nutrition, stress management, human connection. These are all things that our genes expect of us.

And these are the things we're going to keep dropping incredible science on, bringing on the very best experts in the world, and of course, our master classes here on the Model Health Show. We've got some epic shows coming your way very, very soon, so make sure you stay tuned. Take care, have an amazing day, and I'll talk with you soon.

And for more after the show, make sure to head over to themodelhealthshow.com. That's where you can find all of the show notes, you can find transcriptions, videos for each episode, and if you got a comment, you can leave me a comment there as well. And please make sure to head over to iTunes and leave us a rating to let everybody know that the show is awesome. And I appreciate that so much. And take care. I promise to keep giving you more powerful, empowering, great content to help you transform your life. Thanks for tuning in.

