

DR. POON' METABOLIC DIET SUPPORT GROUP FAQ

Updated October 24, 2016

Most of the answers to your diet questions in general, will be found in DR. POON'S METABOLIC DIET BOOK.

It is HIGHLY recommended that you purchase and read the diet book as it will clarify most of your questions regarding the diet and make doing this program 100% easier. These FAQ's are here to help clarify common questions that may not be covered directly in the book, or that often come up in the support group. I've separated the questions into different categories in order to help keep them organized and easy to follow. The categories are: "Food Questions", "Ontario Nutrition Store (ONS) / Support group questions", and "Dr. Poon Diet Questions".

ONS = Ontario Nutrition Store (the store at the clinic)

Support Group Forum Rules

PLEASE READ THE RULES AND THE FAQ BEFORE POSTING!!!

New members must be invited by email as the group cannot be seen by anyone, linked to, or searched for on Facebook. This group is moderated by the volunteer moderator Doug Poon.

1. No profanity or insulting of any kind, towards other members, the clinic, ONS, or staff, will be tolerated. It's a support group first and foremost, so be positive and constructive with your comments. If you have an issue with a post, use the "report comment" function to alert the admin, or message Doug directly.

2. All posts should be Dr. Poon diet related. If you want to post something that is not related to the diet program, message drpoondietgroup@gmail.com for permission first, or the post may be deleted without warning. This includes things such as links, advertising, clothing sales, donation requests, referrals to other programs, blogs, discussion topics etc. Posts of such a nature will be deleted immediately without informing the poster.

3. If you have a question about something, please use the search function (on the far right side of the page, there's a magnifying glass. Click on it, and enter your keyword) Often, the question or discussion topic has been asked already, and you can find your answer much easier by searching for your question, rather than starting another discussion. This will make moderating a lot easier and prevent the same discussions from coming up.

4. Please do not post pictures or "cheat-confessions" of foods that are not allowed on the diet. If you cheated and need support, please just say you cheated and need help or ideas. People may

not be expecting to come here to see pictures or discussions of foods that got them unhealthy and obese in the first place. This can easily trigger cravings. The diet does not advocate cheating at all, so we do not advocate cheat-days or going off-plan in general in this group.

5. If there are any questions or concerns about individuals, posts, the program, ONS products etc., that don't really involve the rest of the group, you can email drpoondietgroup@gmail.com at any time.

6. The forum is not to be used for seeking medical advice of ANY kind. If you are not feeling well, or are concerned about something health or medical related, please call your doctor or go to the hospital. We are not legally allowed to consult you over Facebook, nor are we trained to do so even if we could.

7. If you post recipes or pictures of your meals, make sure to put PHASE 1 or PHASE 2 directly in the title, so that members know if they can try the recipe or not. It also makes it easier to search for recipes later on in the Files section.

8. The diet book is also the best resource you can have. If you don't have the book, you should get it - it's the only thing you need to buy on the diet program. There is a FAQ at the top of the page. It has ~20 pages of commonly asked questions that all members should read before posting in the group.

9. If you want to join the SECRET Dr. Poon Diet Group on Facebook, with increased privacy settings, more activity and more info, please email the following info to drpoondietgroup@gmail.com. 1. Your full name 2. Your clinic location 3. Your email address where the invite from Facebook can be sent. Follow the instructions in the autoresponder message once you send your email.

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> **1. Are we allowed coconut milk, coconut oil, or coconut?**

No. No Palm oil or palm oil products are allowed either. We recommend olive oil, canola oil and flax oil as your main oils. Coconut oil is almost 90% saturated fat. The 10% that is unsaturated is mostly omega-6 oil, and there is no omega-3 content. Omega-6 by itself isn't unhealthy per se, as long as it is in a 1:1 (Preferably a 1:3 ratio) of omega-6:omega-3. The average diet nowadays contains about 10-15x more omega-6 than omega-3, which causes inflammation. Adding more omega-6 in the form of coconut oil will cause further inflammatory conditions, which include cardiovascular disease, obesity and type 2 diabetes.

To reiterate, omega-6 is fine, but the ratio of omega 6:3 is the issue, as we are on the high side with omega-6. By consuming oils that are also high in omega-6 and contain no omega-3, you would be continually pushing the ratio in the wrong direction. We are already a bit low in omega-3 oils, which are anti-inflammatory and beneficial for cardiovascular health, in our diet, so skewing the ratio even more will add to the inflammation factor. Increased omega-3 is associated with lowered risk of cardiovascular disease, which itself is an inflammation.

There is something called the Inflammation Factor (IF), which “estimates the inflammatory or anti-inflammatory potential of individual foods, or combinations of foods by calculating the net effect of different nutritional factors, such as fatty acids, antioxidants, and glycemic impact. How to interpret the values: Foods with positive IF Ratings are considered anti-inflammatory, and those with negative IF Ratings are considered inflammatory. The higher the number, the stronger the effect. The goal is to balance negative foods with positive foods so that the combined rating for all foods eaten in a single day is positive.” The typical net daily IF target is 50. Coconut oil has an IF of -1798!!!

For comparison, cod liver fish oil has an IF of 16,539, meaning it is highly anti-inflammatory, which we can see due to its high level of omega-3 and omega-3:6 ratio (it has over 20x the omega 3 vs. omega 6!) Flax oil has an IF of 2297, olive oil is 1137, canola oil is 68, meaning they are all anti-inflammatory and contain good omega-3:6 ratios. Peanut oil is -45, Palm oil is -117, so they are mildly inflammatory, and thus poorer choices. **Read More:** <http://nutritiondata.self.com/facts/fats-and-oils/508/2#ixzz2tDeaC7aZ>

> **2. Are we allowed bean sprouts on phase 1?**

Yes. (4g net carbs per cup)

> **3. Are we allowed brussel sprouts on phase 1?**

No. 1 cup on phase 2 max per serving (5g net carbs per cup)

> **4. Are we allowed avocado on phase 1?**

No. It is not allowed on any phase of the program. It is very high in fat. Avocado's aren't that healthy really. It's a lot of marketing that has made it seem as such. Are they healthier than most junk foods? Yes. Are they healthier for someone who is obese, or trying to lose weight, or who may have certain medical conditions? Probably not.

1 avocado contains 29g of fat. 247 of the 279 digestible calories per avocado comes from fat (89% of an avocado's calories come from fat!). So really, you are consuming a fat. It is relatively low in protein (4g each) but does have some good fibre. The issue with avocados is that while most of the fat is the preferred unsaturated fat, and some places cite it as a source of

Omega-3 in their list of benefits, actually this is a misrepresentation. While it does contain SOME Omega-3, the majority of the unsaturated fats is actually Omega-6. Omega-6 is inflammatory, meaning it can exacerbate conditions like arthritis or even high blood pressure. Omega-3 is anti-inflammatory. We generally want more Omega-3 than 6 (best in a 3:1 ratio of Omega 3:6), especially in any fat we consume (which is why canola and olive oil are the allowed oils on the program, for reference, canola oil is a 1:2 ratio of Omega 3:6). Otherwise it is just consuming empty calories with few benefits. Avocados contain only 220mg of Omega-3 and 3400mg of Omega-6, a 1:15 ratio, meaning over 15x as much Omega 6 as 3. So actually it is an inflammatory food. 1 tbsp of canola oil contains 6 times as much of the beneficial omega-3 oils as an entire avocado.

While they do also contain some vitamins and minerals, they are not in especially large quantities that you could not get those same vitamins and minerals from other food sources, like your green leafy vegetables. The benefit of getting them from your vegetables as opposed to avocado, is that you don't have to consume so much fat, to get to those vitamins and minerals

› **5. Are we allowed okra on phase 1?**

No. Phase 2 can have 1/2 – 1 cup per serving (6g net carbs per cup)

› **6. Is Quinoa allowed?**

Not allowed on any phase due to being high in carbs.

› **7. Is almond or soy milk allowed on Phase 1?**

Only unsweetened almond or soy milk would be allowed, and usually in only 1/2-1cup serving, depending on the quality and nutritional values of the product. Check the label before consuming.

› **8. Are flax or chia seeds allowed on Phase 1?**

They are both high fiber, high unsaturated fat (good fat), and contain protein, so they are both very healthy products, even suitable for phase 1. However, due to the high fat content (high calories) we still must restrict them both to about 2 tbsp per serving.

› **9. Can I have squash on Phase 1?**

Only certain squashes (ex. Spaghetti squash), are suitable for Phase 2 only. None for phase 1.

› **10. Can we use palm oil?**

Best to use only olive oil or canola oil for cooking purposes. Flax oil is good for raw consumption uses. We prefer oils that contain omega-3 oils.

› **11. Are unsalted sunflower seeds OK to eat in phase 1?**

Only a very small portion. It's not technically listed on the phase 1 sheets, 1 cup WITH hulls has about 5g net carbs, so you'd need to keep it to 1/5th of a cup, with hulls, or less. If they are hulled, then about 1/10th of a cup, or approximately 10g per serving. Would count as a snack due to carb content.

› **12. Can I have tomato, fruits or nuts on Phase 1?**

No. You can have some smaller portions of tomatoes, fruits and nuts on Phase 2 only. They will still be portion restricted. Again, the products sold in the ONS are an exception since the nutritional values are lower than most other products, which is why there is tomato sauce and

some seeds/nut products available for Phase 1. There are some tomato sauces that are store-bought which may be suitable for Phase 1 or 2 (Ex. Pizza Nova sauce is OK in small quantities – 2 tbsp only)

- > **13. I hear a lot about the Pizza Nova Sauce. Where can we get it, and why since we are not allowed tomatoes on phase 1, are we allowed this? Why can't I make my own sauce with the same ingredients?**

*******UPDATED 12/5/2015*******The nutritional information for **1/8 cup** of the sauce fits within the requirements for a “snack” on phase 1. Thus we allow it as an extra item based on the nutritional facts. Technically, we still advocate not using it on Phase 1, but since it does fit the requirements, we don't have an absolute reason to say no – but you must stick to the serving size. If you make sauce yourself, the recipe may be slightly different and may affect the nutritional value. Different tomatoes will have different nutritional info too We cannot officially and confidently calculate the nutritional info for your recipe, so we cannot allow you to make an exception to the rule of no tomatoes for phase 1. You can make your own sauce on phase 2 with the appropriate serving size.

- > **14. Is there any pasta I can eat for Phase 1? Can I eat Dreamfields pasta?**
Other than the noodles sold in the ONS (Shirataki noodles, tofu shirataki, miracle noodles, pasta slim noodles) there are no traditional noodles that are suitable for phase 1, or indeed phase 2. We have a new pasta called NuPasta available at ONS which tastes much more like “real” noodles. 1 package per serving on phase 1.

- > **15. Dr. Poon said no grain or dairy products, how come you sell noodles, bread and cheese in the ONS?**

All the products we carry in the ONS are approved for either Phase 1 or both Phase 1 & 2 by Dr. Poon. We have to restrict the serving sizes of these products, because while they are higher quality and better nutritionally than most grocery-bought items, they still contain carbs/fat/sodium. Same goes for the peanut butter and other products sold in the ONS. Do not substitute with store bought items unless you are sure the nutritional info is suitable for your phase.

- > **16. I know we're not allowed dairy products, so why are people posting recipes with cheese?**

There are a few exceptions to the no-dairy rule. There are a few allegro 4% cheese products that are suitable (with a small serving size of about 30g) on Phase 1. They are available for purchase in the ONS. You can also use 1 wedge of the light laughing cow cheese wedges. Cream in the milk is fine as well. You can have 1 tbsp max of the Philadelphia 95% Less Fat Cream Cheese, which will count as a snack. It is almost 0g fat, 1g net carb and 100mg sodium per tbsp. Read the labels, if in doubt, do not buy or eat it. Ask your doctor first if you are allowed – the doctor's recommendation should be the final word as they know your medical conditions and weight loss history/results.

- > **17. Why are we allowed cream but not milk in our coffee?**

Cream is lower in sugar than milk. Fat content is what helps to whiten your coffee. Most people do not measure the quantity they add to coffee, and go by visual colour-change only. To get the same level of whitening, you use less cream than milk, and therefore consume less sugar.

Whipping cream (35%) 1tbsp = 5.5g fat, 0.44g net carb.
Table Cream (18-30%) 1 tbsp = 4g fat, 0.5g net carb.
Half and half (10-12%): 1 tbsp = 2.5g fat, 0.6g net carb.
Light cream (5-10%): 1 tbsp = 2g fat, 1g net carb.
Milk (2%): 1 tbsp = 0.3g fat, 0.75g net carb.
Unsweetened almond milk: 1 tbsp = 0.16g fat, 0.06g net carb.

So, in order to get the equivalent amount of say, 4g of fat per serving (ie similar levels of whitening/lightening), you would need 1 tbsp table cream, 1.6 tbsp of half/half, 2 tbsp of light cream, 13 tbsp of milk, 25 tbsp of unsweetened almond milk. Meaning you will ingest 0.5g net carb for table cream, 1g net carb for half/half, 2g net carb for light cream, 10g net carb for milk, 1.5g net carb for almond milk.

So you can easily see why milk is not allowed, even for coffee, the net carb is very high. And you can see why half/half is preferred over the almond milk, and why we usually recommend that you use a higher % cream rather than a low fat cream. I use half/half myself and have no problem using table cream.

› **18. Can we have a bagel in phase 3?**

Bagels are high carb and can be high fat and sodium as well. Not recommended on any phase really, as it is basically the exact opposite of the foods we want to eat on this diet. There are low carb breads and bagels suitable for Phase 1 and Phase 2 at the ONS.

› **19. I know we can have Weight Watchers bread on Phase 2, can we have their other products?**

No – the other products like their bagels, are higher in carbs. The only WW bread product we can recommend on Phase 2 is the bread. 1 slice per serving which would count as an extra item due to the carb content

› **20. I've seen some Dream Bagels or Carbwise Bagels and breads at other low carb stores, can we eat them?**

While the label looks fine, we've not been able to confirm the actual testing results for the carbwise or dream bagels/breads. I've requested them several times to show the proof of these numbers (as we had interest in carrying it at the ONS), but they were unable to do so. Dr. Poon and I have suspicions about the products, because of ingredients, but also because in my experience, people have eaten it and seen their blood sugar go up - which according to this label, it should not. Therefore I cannot recommend this. If you eat it, do so at your own risk. The low carb breads and bagels at ONS have been properly tested and confirmed nutritional info, so take that for what it's worth.

› **21. How much water do I need to drink a day?**

You don't have to physically count the number of glasses or litres you drink. As long as your urine is a pale yellow, not clear or dark yellow, then you are drinking enough water. If it's dark yellow, you need to drink more. Average daily consumption should be around 2.5L. Do not exceed 4L per day, as it can cause health problems if you drink too much, especially on a low sodium diet. If you are thirsty, then drink. It is unlikely that you will be too thirsty while peeing pale yellow, but if you are, go ahead and have some water or tea etc. That's not a problem. In this case, you should listen to your body telling you to drink. However, if you find you are drinking and peeing and still feel thirsty even if the urine is clear, this can be a sign of a

diabetes-related co-morbidity called polydipsia, and you may need to get that checked out ASAP with your doctor. Here's some more info in case you are interested in reading about it: If you have a salty meal or eat out, then drink a little extra to help flush out the sodium.

› **22. What is the best margarine to use for phase 1?**

Any one that fits the Phase 1 requirements is fine. Olive oil and Light versions tend to be the best, but double check the labels.

› **23. Are artificial sweeteners safe?**

All of the major medical bodies, including the FDA, Mayo Clinic, American Cancer Society etc., all say that Aspartame, Splenda and other FDA approved sweeteners are considered as safe to use. There are some articles on the internet that claim to show how sweeteners are bad for health, but most of the time, the experiments they conduct are flawed, or they have competing products to sell etc. We've used them for decades, and have yet to see proof of any issues with their consumption, in terms of medical health. If you are concerned about them, then don't use them. You can also seek natural sweeteners such as xylitol, stevia and erythritol (which is the best of the bunch as it has 0 calories and also does not cause GI upset like other sugar alcohols and sweeteners can).

It's doubtful that you are consuming enough aspartame to cause any side effects. Most of the studies that show medical side effects, the concentration and dosage that they supply to the test subjects is WAY above any normal dosage anyone would ever consume.

Almonds, lima beans, red kidney beans, nutmeg, cherries, plums, apricots and peaches are all proven to contain highly poisonous compounds in their leaves and seeds (and often the raw fruits themselves) - but we as a society still actively pursue these foods and even promote their consumption! Rhubarb has poisonous leaves which contain a corrosive acid, even potatoes and tomatoes contain poison, usually either in the leaves or stems. You would have to consume a large quantity of these foods to be poisoned, similar to how you would have to consume a large quantity of aspartame to be poisoned, but somehow there's this huge uproar over aspartame, possibly because it is produced artificially and there is a worry that if it's not natural, it's bad for you. Natural things can kill you too. "When unripe, Jamaica's national fruit, the ackee, contains the toxins hypoglycin A and hypoglycin B. In the body, hypoglycin is converted to methylenecyclopropyl acetic acid, which can lead to vomiting, lethargy, unconsciousness, coma and even death. In 2011, ackee killed 23 Jamaicans and sickened 194 over a period of just three months. Don't worry, ackee is totally safe when it's ripe."

Read Dr. Poon's blog post about Aspartame safety here:

<http://poondiet.blog.com/?p=951>

› **24. My package of Splenda says it contains sugar and calories, how come?**

From Wikipedia:

“Sucralose has no caloric content, and Splenda products have a lower caloric content than sugar. The actual caloric content of a single-serving (1-gram packet) of Splenda is 3.36 calories, 31% of the calories of a single-serving (2.8-gram packet) of granulated sugar (10.8 calories[10]). In the United States, it is legally labeled "zero calories";[10] U.S. FDA regulations allow this "if the food contains less than 5 calories per reference amount customarily consumed and per labeled serving".[11] Further, Splenda contains a relatively small amount of sucralose, little of which is metabolized; virtually all of Splenda's caloric content derives from the dextrose or highly fluffed maltodextrin "bulking agents" that give Splenda its volume. Like other carbohydrates, dextrose and maltodextrin have 3.75 calories per gram.”

› **25. Are all Splenda products the same?**

No. Some still contain sugar in them – the brown sugar Splenda is still partly sugar, so it is likely not suitable for Phase 1. Bulk plain Splenda seems to have the lowest carbs. Always check labels.

› **26. Are herbal or fruit teas OK?**

Most herbal teas are fine. Some fruit teas contain trace amount of sugar from the dried fruits. Check the label or company website, most have nutrition info listed. If in doubt, avoid it until you can confirm it with the group or your doctor.

› **27. I was wondering if eating so much fish and red meats is OK, or can you ever overdue it with the proteins, does it effect your cholesterol or hurt your liver or kidneys? Is there too much mercury with eating fish so often?**

Cholesterol actually partly comes from eating too many carbs. One of the main building blocks is the consumption of sugar and starch - by removing it from the diet actually you will lower your cholesterol and triglycerides - which is something we see a lot on this program. Lean protein is what we want to eat - some people associate too much protein with too much meat - meaning both fat and protein. We don't want a lot of saturated animal fats when we eat our protein, we want the good omega 3 oils found in fish and other free range meats for example. Fish high on the food chain tend to have more mercury in it, so that's why canned fish is only allowed a couple times a week. Local wild fish, even some farmed fish are lower in mercury. Some people are concerned that too much protein will hurt the kidneys or liver, but this will not occur if you have a healthy kidney/liver. It is those with damaged kidneys who may be at risk. Those people would have been screened based upon their blood test, and may not be suitable candidates for this program because they cannot handle it. If you have a healthy kidney though, you should not have problems with the protein in the diet.

› **28. Why can't I eat fruits on this diet? Where will I get my vitamins and minerals from? Why do you allow processed foods, but not fruits which are natural and “good for you”?**

Eating sugar, which bananas are full of, increases blood sugar and builds fat. Fat mass itself is a major reason why you develop many of these major diseases such as diabetes. High triglycerides is also caused by consumption of sugar. Even high cholesterol is caused by eating carbs, of which banana and fruits are. Fruits are basically 100% carbs + water, and a tiny bit of fibre, if you're lucky. People worry about vitamins and minerals, but if you do the research, you will see that most of the vitamins and minerals found in fruits, are found in better quality and quantity in other foods, especially green leafy vegetables and lean proteins and good fats, all of which we allow in unlimited quantities. These are much better for you because you get the nutrients you need, without having to go through 6 tsp of sugar every time you have a medium banana. That's 100 calories worth of sugar, in each banana, not much different than eating 100 calories worth of honey or sugar. What is a banana good for? The only thing people ever can say is, oh it's good for potassium. Well that 1 medium banana I cited above, has 422mg of potassium, but also 100 calories from sugar, and only 2-4g of fibre. The equivalent 100g of spinach has 4g of fibre, but also 4g of protein, to bananas 1g. It has 624mg of potassium too, 50% more than banana, and a total of only 24 calories. In the body, a banana's sugar/starch content is basically no different from the same white bread and processed sugars found in many products. It will still cause blood sugar to rise, leading to fat gain, and other medical conditions.

We want you to get all the vitamins and minerals and nutrients you need, we just don't want you

to have to wade through so much fat, sodium and carb, to get there.

Regarding the sweeteners/processed food question, we do not actively push you to eat those things. They are there to help you along with the program with variety, and to wean yourself off all the actual processed junk you were likely eating before. We still want you to end up eating as naturally and sustainable as possible. Dr. Poon's diet prescribes lean protein, green leafy vegetables and healthy fats. Period. Everything else is an extra. If you don't like artificial sweeteners, we have MANY natural ones available, and prefer those as well.

› **29. I can't find, or afford extra lean ground beef. What can I do? Can I use lean ground beef?**

From a website: "Take lean ground beef, which, according to the USDA, is defined as containing no more than 10 percent fat, which means it's 90 percent lean, right? Yes, but there's a catch: the percentage refers to product weight, not the percentage of calories from fat. This may be obvious to some, but many people don't know this, or at least don't think it through.

Here's what I mean:

According to the USDA, four ounces of lean ground beef (90 percent lean, 10 percent fat) is worth 199 calories, with 11g of fat. Given that there are nine calories in each gram of fat, 99 of those calories, or 49.7 percent of them, come from fat.

Similarly, four ounces of extra-lean ground beef (95 percent lean, 5 percent fat) is worth 155 calories, with 5.6 g of fat, or 33.3 percent of its total calories. "

Basically it is double the fat quantity, that's why lean is not allowed, ground meat must be extra lean. The lean ground beef is basically 50% fat by calorie. If it's a budgetary thing, you can find some resources online on how to lower the fat content of ground meats. It includes cooking it, draining fat, rinsing, pressing out the excess fat, and then cooking again in your recipe. It's a longer process, but it will save you a couple dollars on groceries.

› **30. I'm eating a lot of vegetables, but don't seem to be losing much weight? The vegetables I'm eating are part of the "unlimited" category. What am I doing wrong?**

The diet's philosophy is to eat lean protein as your main bulk of the meal, and to add fats and vegetables as side dishes and for variety. They are not meant to be the main sustenance of the diet. Your meals and snacks should always consist of good protein content. Protein keeps you fuller for longer, and it is unlikely you will overeat protein alone. While green leafy vegetables are technically listed as "unlimited", you still need to follow the principles of the diet, the main one here being that protein needs to be your main course. Have a salad along with it, or some grilled/steamed vegetables, but do not make a giant bowl of vegetables and 1 egg, and consider that following the diet properly. If anything, it should be the other way around, as in, a big tenderloin steak and a couple of shrimp, plus a few pieces of broccoli and a side salad. The nutrition we need on a daily basis comes largely from eating proteins and good fats, with the other vitamins and minerals coming from the green leafy vegetables. The darker green, leafier vegetables, are preferable to other vegetables as they tend to have the highest concentration of vitamins and minerals, and lowest carbs and calories overall. Spinach is best.

› **31. Which salt is better? Half Salt, BioSalt or No Salt?**

Half Salt and BioSalt are both recommended for this program. No Salt is not recommended. Table salt is 100% sodium chloride. No Salt is 100% potassium chloride and is bitter tasting. Half Salt is half table salt, half No Salt, and so is 50% less sodium compared to regular table

salt – but overusing it can still cause a bitter taste. BioSalt is a combination of several salts which results in a similar 50% less sodium compared to table salt, but with a different flavour profile than Half Salt. BioSalt also is made up of finer grains, easier to dissolve and since it is a smaller jar, you can take it with you on the go, but is a little more expensive than Half Salt.

› **32. I don't know what the proper serving size is for a product I bought at the ONS, can you tell me what the serving size is?**

The Ontario Nutrition website has a downloadable copy of the serving size list for all products sold in the ONS. <http://www.ontarionutrition.ca/Servingsize.html>

› **33. I bought a product at the ONS that I don't like, what should I do?**

If you have any unopened portions, bring them back to the ONS for exchange or store credit. If there is a warranty of quality control claim, bring the item, with the receipt, to the ONS for exchange or store credit. If the product is opened and you don't like the taste, offer it up for swap or exchange in the support group, or bring it to one of the local support group meetings to exchange, sell or give away to one of your fellow patients. Better than it going to waste. The ONS prides itself on carrying good quality products. In the event you do have a problem with a product, email doug@ontarionutrition.ca to discuss other options.

› **34. I found a product at another grocery store for cheaper than the ONS, will the ONS honour this price?**

Absolutely yes! The ONS has always tried to keep prices as low as possible, and are indeed the lowest, if not extremely competitive, in terms of pricing on the products that are sold. Rarely will you find anything for cheaper than at the ONS. In the event that you do, bring in a copy of the Canadian price advertisement, and the ONS will match that price on any item, so long as it's not a clearance or short-date sale that is being advertised, where the price is expected to be at or below cost.

› **35. What are the restrictions for Phase 1 and 2 snacks or extra products?**

Phase 1 products must be: <7g total fat, <2g saturated fat, <170mg sodium, <1g net carb, <10g sugar alcohols per serving. 1 serving every 4-5 hours maximum, and 1 product per serving only.

Phase 2 products must be: <7g total fat, <2g saturated fat, <170mg sodium, <5-7g net carb, <10g sugar alcohols per serving. 1 serving every 4-5 hours maximum, and 1 product per serving only. You also get 2 extra items per day on phase 2.

Save and use this chart to remind yourself which products are suitable and what the restrictions are:

Table 24. Ingredients of a Good Food Product (per serving)

- < 1 g of net-carb (sugar + starch + maltodextrin) for Phase 1
- < 5 g of net-carb (sugar + starch + maltodextrin) for Phase 2
- < 10 g of net-carb (sugar + starch + maltodextrin) for Phase 3
- < 10 g of sugar alcohol
- < 30 g of polydextrose + inulin
- < 30% of calories coming from fat
- < 6 g of total fat
- < 2 g of saturated fat (total fat : saturated fat > 3 : 1)
- < 30 mg of cholesterol
- < 170 mg of sodium
- No limit on protein and fiber

› **36. There are Atkins bars and Russell Stover bars at the ONS, can I buy other Atkins or Russell Stover products?**

You must be very careful and have a good understanding of how to read food labels. Most, if not all, of the Atkins products that are suitable for Phase 1 or 2 in some portion, are already in the ONS. The other products may be too high in fat, sodium or carb for this program, which is why they are not sold. Same goes for the Russell Stover products. If you don't know how to read the labels, or are unsure, take a picture and post it to the group. If you don't know, don't buy.

› **37. I bought some Atkins bars, but the back nutritional label shows that the carbs are higher than allowed on Phase 1 or 2, why are they allowed? How do they calculate “Net Atkins Count?”**

Here is the email response directly from Atkins regarding their calculations, testing, and Net Atkins Count. For our purposes, we can treat Net Atkins Count as being the same as Net Carbs, as they affect the person in the same way, in real world applications.

“Doug,

Thank you for contacting Atkins Nutritionals. Your question is one of the more challenging ones that we get asked in the Canadian market. The explanation below is wordy and will rely upon the Canadian user to trust the Science of Atkins and its principles when applied to packaged products.

To Start, as you may or may not be aware, Canadian labeling regulatory is much more restricted than that of the USA, Australia, or many European countries. The Canadian Advantage Chocolate Peanut Butter Bars (plus several other CDN Advantage Bars) are fortified with

additional vitamins and minerals to be considered / positioned as "Nutritional Supplements" for sale in Canada. Additionally, the Canadian government does not classify polydextrose (one of our main fiber sources) as a source of fiber in Canada. The Net Atkins Count is important when following the Atkins diet and using products as supplements. To arrive at the Net Atkins Count in the US, take the total carbohydrate count and subtract fiber, polydextrose, maltitol and glycerine.

However, the calculation for net carbs in Canada is more complex than that of the US. As an example on Canadian Indulge Chocolate Coconut: 19g Carbohydrates (2g) Fiber (4g) Sugar Alcohol (7g) Polydextrose should Equal: 6 grams of Net Atkins Count; however we list 3 grams of Net Atkins Count. Glycerine and Maltitol Syrup make up the remaining 3 grams but are given no measurement amount (grams) on the package. We best explain that the remaining 3 grams consists of a combination of glycerine and maltitol within the product formulations to achieve the Net Atkins Count. The Net Atkins Count is the only count based on the most advanced clinical testing of glycemic impact and shows on average just 2g of the carbs in the product impact blood sugar.

Published results of clinical testing can be viewed here: <http://www.nutritionandmetabolism.com/content/3/1/33> With this clinical data, we show our commitment to testing out Net Atkins Count claims.

In an effort to give you more insight into achieving "Net Atkins Count" for products in the Canadian market, here is the standard response from Atkins USA Customer Service to a USA inquiry:

"If a food has 11.5 carbs, 3 fiber carbs and 4 sugar alcohol carbs, you end up with 11.5 minus 3 minus 4, resulting in 4.5 net carbs per serving. (Note: next to the sugar alcohol count there is a * that notes the amount of glycerine included in the count).

The net carb number shown on the wrapper and packaging of Atkins products is the result of real tests on real human volunteers, and reflects the real glycemic impact on the test subjects. So that number is significantly more accurate in the real world you and I live in, than one arrived at by simple arithmetic. Fiber is sometimes split out into soluble and insoluble fiber. Neither will add to your carb count and both are important to your health. Fiber is sometimes referred to as "Dietary fiber," which is the same stuff only it sounds more scientific. Sugar is a carb and may be listed for the benefit of diabetics. It can either be natural sugar which is okay, or added sugar, which is not. The way you tell is check the ingredients list. If it's naturally-occurring sugar, it won't show up there. If it's listed as an ingredient, it is added sugar, and you should avoid the product. Just remember, net carbs equal total carbs minus fiber minus sugar alcohols, and glycerine. And rest easy, because the numbers given to Atkins products are as accurate as they can be because they're determined by actual clinical tests.

I sincerely hope that I have been of some help in answering your inquiry.
Regards, Charlotte Senior Information Agent Atkins Nutritionals Inc. 1-800-6-ATKINS(285467) Option 2 7:00am to 5:00pm Monday-Friday contactus@atkins.com"

› **38. I bought some chocolate, and there's some white stuff on top, what is it and is it safe to eat?**

The whiteness on the chocolate is a common thing with chocolate of all sorts. It is due to the

separation of the milk solids and fats, and can be caused by temperature fluctuation. From Wikipedia:

"A great deal has been written about chocolate fat bloom. To date, it is generally accepted that visual fat bloom in chocolate is the cocoa butter that has separated toward the surface.[citation needed] It is caused by:

Poor (incorrect or incomplete) tempering of the chocolate

Incorrect cooling methods, including covering cold centers

The presence of soft fats in the centers of chocolate-covered units

Warm storage conditions

The addition to chocolate of fats incompatible with cocoa butter

Abrasion and finger marking

There is no single universally accepted theory that describes fat bloom in chocolate. Current theories about fat bloom fall into two categories: polymorphic transformation and phase separation theory.[2]"

Chocolate that has "bloomed" is still safe to eat, but may have an unappetizing appearance and surface texture.

› **39. Does the ONS ship products? What about the breads and donuts?**

Yes, the ONS ships its products worldwide! We've shipped products to Australia, England, Italy, Turkey, Singapore and all over the USA and Canada. We are able to ship the breads and donuts to most locations within Ontario and Quebec. Our delivery standard is usually next business day delivery within Ontario and Quebec, with up to 3-5 business days delivery to the rest of Canada and the USA. Free shipping on most orders over \$150 before tax within Canada, restrictions do apply (package weight and customer distance from a major city centre is usually a factor). You can order online at www.ontarionutrition.com, by phone at 416-754-7979, or by emailing doug@ontarionutrition.ca. We are able to ship the breads and donuts, which are shelf stable for a week, as we ship them from frozen. These fresh/frozen items will be shipped at the customer's risk, as we cannot assume responsibility for the temperature of the courier warehouse/truck. We have shipped like this for several years though, with no problems with product quality yet, so purchase with confidence.

› **40. There's a product I want to order, but it's not listed online, what should I do?**

Place the rest of your order. In the "comments" box before completing your order, you can manually request to add whatever items you require. We will contact you directly before shipping to discuss stock and payment options (we accept Visa, Mastercard, Paypal, E-transfers, E-checks etc.) You can also email doug@ontarionutrition.ca to request additional products.

› **41. I found this product in another store – can we have it on Phase 1 or 2?**

If you are uncertain about a product. Don't buy or eat it. If you can, take a picture of the front as well as the nutritional facts and ingredients. Post it to the group and someone will likely be able to help you determine if it's good or not. To learn about how to read these labels yourself, please read Dr. Poon's Metabolic Diet Book as there is a whole chapter devoted just to reading labels. Also, please attend one of the Dr. Poon Label Reading Seminars, usually held about once a month at different locations. The order of seminars is generally Brampton -> Pickering -> Thornhill -> Bridgepoint, generally once a month or so, with possible breaks over the summer.

› **42. I'm looking through the "Files" section, but I can't seem to find a recipe, can you help me?**

You must scroll ALL the way down to the bottom of the page, as more recipes will continue to load as you scroll down. Once you get all the way down and no more recipes are loading, press "ctrl + f" on your keyboard (command + f on a mac), and type in your search word, then press enter. It will search all the files sections for your keyword in the files titles. Right now, there's no way to search the content of the recipe itself, only the title. Save the recipes you like on your own computer so it is easier for you to find. When uploading recipes, please include "Phase 1" or "Phase 2" in the title so that new patients will know which recipe they can try.

› **43. Can you organize the recipes in the Files section so it's easier to see?**

We've made requests to patients uploading recipes to include "Phase 1" or "Phase 2" in the title, and to make the title as descriptive as possible. The reason being is that the only way to search through the recipes is to search for keywords in the title itself (not the body of the recipe). The way to do this, is to scroll all the way to the bottom of the page – keep going, more recipes will load as you reach the bottom. When you finally reach the bottom of the recipes, press "Ctrl + F" on your keyboard, this will open up a small search bar. Type your keyword(s) into the search bar and hit Enter. It will search through the titles for you. You can also do this on any webpage. Save the recipes that you like on your computer, or print them out and organize them yourself however you like. Unfortunately Facebook does not have a way for us to organize the files differently.

Gene Van Dieman has creating a website separate from the Facebook group, where he lists the recipes in a different format which may make it easier to see the recipes. Please use the link below, but do be reminded that you should double check the recipes to ensure Phase 1 or 2 compliance. <http://www.van-dieman.info>

› **44. Why are there so many different Support Groups on Facebook? Can my friends see my posts?**

We started with just the 1 group, but due to Facebook changing its privacy settings, we decided to create 2 separate groups. One is called "Dr. Poon's Metabolic Diet Support Group (private)", this is the older group. The reason we have this one is because the (private) group is still visible to the public, meaning that any person on Facebook can search for the group. We treat this group as our public group, allowing people to get more information on the diet. The privacy settings are still quite strong, so while the public can see the group and its members, they cannot see any of the posts. Your personal posts will also not show up on your personal timeline, so your friends won't see your posts unless they are in the group, but they will see that you are in the group.

The other one is called "Dr. Poon Diet Support Group - NEW SECRET GROUP" - this is the newer group. This group's privacy settings are the strongest, and so provides the most private atmosphere for our members. The group is not viewable, or searchable by anybody on Facebook, unless they are personally invited into the group. Nobody can see the group, its members or its posts unless they are an invited member. To join this group, one must send an email to drpoondietgroup@gmail.com, including their name, which clinic they visit, and the email address where an email invite from Facebook should be sent, to invite them to the group. This group has the most activity now.

› **45. Who runs the Facebook Support Group? Are the posts being monitored?**

I, Doug Poon, am the one who created, and moderates both support groups. The original group

was started many years ago, and since then, I've been volunteering my time and effort to the groups, in order to help patients better understand the diet, and to provide feedback and answer questions. I do respond to questions 7 days a week, but sometimes I will take some time off for my own personal time on the weekends. I receive NO pay for doing this, I do this only to help the Dr. Poon diet patients that need help. While I do work for the Ontario Nutrition Company, I try not to be biased, and there is very little advertising or marketing that goes on (but I do want to make sure that this is known, so it's not like I am hiding this fact). While Dr. Pat Poon is my father, I have no direct affiliation with the Dr. Poon clinics, its staff, or its doctors, and receive no pay or benefits from them. My primary goal is to provide advice and guidance for the patients of the Dr. Poon diet. There are many “veteran” members in the group who contribute their time, energy and recipes to the group, and have done so for many years. My hope is that “each one, teach one” - meaning that as you learn and benefit from the group, that you in turn, teach and help others.

› **46. How do I calculate the net-carbs of a product?**

There are a few ways to calculate net-carbs, which is defined as Sugar + Starch content in grams. The easiest is to take “Total Carbohydrates” and subtract “Fibre” and any “Sugar alcohols” listed. This will give you the net carb total, which is sugar + starch content. Oftentimes starch is not listed on the label, so by doing this calculation, you will determine whether or not the product contains any starch. The Sugar + Fibre + Starch + Sugar alcohol content MUST add up to the Total Carbohydrates number listed.

“Dr. Poon’s diet is low in sugar, starch, saturated fat and salt. How much is too much? This handout provides you with a guideline for when you read the nutrition information of the food label. The actual amount can be modified according to the patient's needs, medications or medical conditions. Fresh and unprocessed foods usually have no food labels on them. The amount of sodium in those products will almost always be below the 170 mg per serving limit.

▪ The following information is copied from Chapter 12 of the **Dr. Poon’s Metabolic Diet Book**. You will find more information about label reading in this book.

- Ingredients of a Good Food Product (per serving):
 - < 1 g of net carb for Phase 1
 - < 5 g of net carb for Phase 2
 - < 10 g of net carb for Phase 3
 - < 10 g of sugar alcohol
 - < 30 g of polydextrose or inulin
 - < 30% of calories coming from fat
 - < 6 g of total fat
 - < 2 g of saturated fat
 - < 30 mg of cholesterol
 - < 170 mg of sodium
 - No limit on protein and fiber
- Net Carb: There is no scientific definition of net carb. Some companies use net carb to represent the simple sugars, and not the complex carbohydrate like starch. I define net carb as the sum of the sugar and starch. To determine the net carb of the product, you can simply add up the sugar and starch content of the food item. But most of the labels will reveal the sugar content, but not the starch content. Another way, and it is the easier way, to determine the net carb, is to subtract the fiber content and the sugar alcohol content of the food item,

from the total carbohydrate content. Whatever that number is will be the net carb, which is the sum of the sugar and starch content. If the food item happens to be a natural product, you can assume the sugar alcohol content is zero. Hence the net carb will be equal to the Total carbohydrate minus the fiber content.

- Do not attempt to count your daily consumption of net carb or sodium. It is too difficult to do and will not be that accurate. Just follow all the rules of the diet and you will be within your limit.
- Although there are straight rules given by the government regarding to food labeling, you will find that there are labels that do not add up or make sense. Once you find one mistake, you have to assume that the rest of the nutrition information is wrong also. Do not buy that product.”

› **47. I don't like my doctor, he didn't explain anything to me, what should I do? (in order):**

1. Ask questions. If you are confused or don't understand, ask the doctor there and then.
2. READ THE BOOK! The diet is based on the info in the book, even the doctors are trained with the book, so buy or borrow a copy and start reading!
3. Prepare a list of questions to ask your doctor at the next appointment.
4. Look it up on Google! There's a lot of info on the net.
5. Pose your question to the support group
6. Read Dr. Poon's blogs: <http://www.poondiet.com/blog.php>, there's over 450 posts already!
7. Email doug@ontarionutrition.ca for questions that do not pertain to the support group

› **48. I cheated a little bit / I had a big cheat, what should I do?**

There's no magic solution, just start back on Phase 1 and make sure to be drinking your water until your urine is pale yellow.

› **49. Should I do a cleanse after I cheat?**

No. Dr. Poon does not advocate “cleanses”. Just do Phase 1.

› **50. I can't make it to my appointment, what should I do?**

Call the office to reschedule. They will require 24 hours notice, or a no-show fee may be charged. This is because of the limited space and time the office and doctors have, no-shows are a waste of time and space that could be used to help treat other patients. You can also email the clinics. All contact info is listed on www.poondiet.com Thank you for your co-operation.

› **51. I'm getting leg cramps, what should I do?**

Leg cramps are a common side effect. Make sure you stretch well, and drink your fluids. Calcium Magnesium with Vitamin D supplements, as well as a potassium supplement, seems to help most people. Discuss the supplements and your health ,with your doctor before starting any supplement courses, as it is possible to overdose and/or affect your medications.

› **52. Why do they make me take off my socks when I weigh-in? They don't weigh that much!**

It's not due to the weight. It's because the scale must have skin to electrode contact in order to properly determine the body's composition (water, fat, muscle etc.). It sends electrical signals up one leg and down the other to take measurements of electrical resistance. With socks or, or even with wet feet, this reading may be interfered with and results skewed.

- › **53. Why is my scale weight different than the clinic scale? Can I get one for my home?**
The clinic scale is MUCH more accurate than your home scale, even the top of the line models. The clinic scale costs thousands of dollars so it's not practical for anyone to buy for their home. Also, as a standard practice, the scale reading at the clinic is lowered by 2lbs every time, in order to account for clothing. This is why you don't need to strip down to account for your clothes. Just wear the same or similar weighing clothes each time you get weighed for better precision.
- › **54. I just started and am having a hard time on Phase 1. I am hungry, have headaches, feel dizzy, crave sweets etc. I'm also having a hard time with my energy, especially when I work out. What should I do?**
This is a normal side effect of cutting out carbs/sugar from your diet. Your body needs to adjust to the new diet and foods. Carbs are an immediate source of fuel, whereas body fat takes longer to turn into energy, so you may be a bit sluggish for the first 2 weeks – 1 month. There are some snacks available at the ONS which will help curb your cravings in the meantime. After the first 2 weeks – 1 month, most patients will start to feel much better as the body adjusts to the new foods, and starts to no longer crave the sugar it once did. Like an addict cutting out their drug of choice, cutting out carbs has a similar pathway and side effects. Make sure to drink lots of fluids and eat more protein than you would normally think is necessary. Protein will keep you full for a long time and also will help to rebuild some of the muscle mass you may have lost.
- › **55. I don't understand how many snacks and meals I'm supposed to have a day? What counts as a snack?**
You should eat when you are hungry, stop when you are full. Eat any time of day or night when you are hungry, as long as it is suitable foods. We don't count the number of snacks or meals – in fact, there's very little to differentiate between a snack and a meal – you should follow the same Phase 1 or 2 rules pretty much regardless of what time of day it is. Food is just food. The main reason we consider certain things “snacks” or “extra items” on Phase 1 is because they contain 1g net carb. This is the limit for Phase 1. So if any product contains 1g net carb, it should be considered a “snack” or “extra item”, and must be separated from the next one, by 4-5 hours. Now there are some exceptions to this rule. We are allowed unlimited lean protein and green leafy vegetables on Phase 1. If a product fits within the lean protein, or green leafy vegetable category, and contains 1g net carb as well, it may not need to be considered a “snack”. For example, the powerflax bread contains 3g fat, 1g net carb and 12g of protein per slice. To us, this reads like a lean protein, so we can consider 1 slice of the bread as a protein, and thus can have one other “snack” along with it – the PB2 peanut butter for example. Then you should wait 4-5 hours before having another carb-containing item. Remember that the goal for Phase 1 is to limit yourself to 20g net carbs or less per day. 1 gram or less per serving. Most of these are accounted for by the vegetables you eat, about 15g or so. So the other 5g is allocated for the several “extra items” or “snacks” you have during the day. By separating it out by 4-5 hours, you might have 3-4 of these extra items per day – thus staying below the 20g limit.
- › **56. I just started the diet, and I have a lot of extra energy, so much so that I can't sleep at night, is this normal?**
Yes it can be a normal side effect of the diet at the beginning. You are constantly making energy from your own body fat, so that may contribute to this slightly - as opposed to only getting

energy when you eat. Also, now because you don't have the extra carbs in the diet to give you that really sleepy feeling after you eat a big meal, your body may not recognize the sleep pattern/trigger. Also along those lines, hormones can change, because sugar creates such a strong hormonal reaction in the brain, removing it can cause the brain to change its hormonal processes slightly, which I'm not sure, but it seems possible that it could affect sleep pattern. Perhaps some exercise can help "bring you down" at the end of the night.

› **57. I just started the diet, and I lose 7-10 pounds the first two weeks, but have lost nothing this past week? What's wrong?**

This is normal, you may not see losses every single day, and it can be due to a various number of reasons why the number didn't change yet. As long as you are doing the same things you were doing in the first 2 weeks, there's no reason why you won't continue to lose weight the next 2, really. Just give it some time. This is also why we generally don't recommend people weigh themselves at home on a regular basis. It doesn't really do a lot to help the motivation on a day to day basis, but it can cause you to stress out pretty easily, especially if you see a gain - which does happen. Think of your weight loss progress as a graph of the stock market - ups and downs on a daily basis, but an upward or downward trend over longer periods of time is what we really care about, not the day to day trading.

› **58. I'm losing my hair, it's coming out much faster than usual, is this normal?**

Yes it is normal. When losing weight and changing lifestyle this quickly, it can cause a shock to your body. Your body may think it is starving, due to the change in diet and resulting weight loss, and may divert resources from building unnecessary things like hair, to other more important areas of the body. You may also (unlikely) be deficient in certain minerals or vitamins. From prior patients, we have found that increasing your omega-3 oils by consuming olive oil or supplementing with fish or flax oil (containing omega 3 and 6 in a 3:1 ratio), shampooing with a biotin-containing shampoo (several brands including Garnier have this), as well as supplementing with biotin itself (The ONS carries a very good biotin product – 5000mcg per capsule, and a high strength one too which has 10,000mcg, which is more potent than most pharmacy bought products), has helped many patients. Hair will begin to grow back within a couple of weeks as the body adjusts and the diet normalizes. We have not seen a patient go bald by doing this diet, so no need to worry.

Update:

The main supplements you should be looking at are Vitamin A, Vitamin D, Biotin, Zinc, Iron, Calcium, Magnesium, omega-3 oil.

Hair is made from these components, and of course protein. Women in particular can lose hair because of anemia, stemming from low iron. You shouldn't have low iron if you're eating enough protein. Don't be afraid of red meat, you need some, clearly - just take the lean portion. Eat more fish for the omega 3 and vitamins. All these things listed above are contained in all the proteins and fats you should be consuming. An issue arises when people doing this diet don't consume enough protein, and variety of protein. If you only eat chicken breast and salad everyday with no dressing, yes, you will of course be deficient in some things. Variety is important, as is eating more protein. If you are doing that and still finding you are losing hair after the initial shock to the body when starting the diet, then do a blood test to check for deficiencies.

Not everybody loses hair on the diet, only select people. I've done it on and off for a dozen years, as has Dr. Poon - no hair loss here. So if it is due to the diet, then everyone should be

losing hair, but that is not the case.

Another site for foods for hair loss, again citing omega 3, zinc, protein, iron, vitamin a, magnesium, selenium. You can see the suggested foods. All these foods we are allowed on phase 1. Flaxseeds, salmon, tuna, kale, beef, eggs, chicken, turkey, dark leafy greens, red meat, broccoli, swiss chard, spinach, halibut, shrimp, sardines. If you eat all of the above foods on a weekly basis, I would be very surprised if you are deficient in anything. Some of the other foods are phase 2 suitable too, like the yogurt.

Here, the nutrients you need for a full head of hair—and the foods that pack them:

Omega-3 Fatty Acids

Good for more than your brain, omega-3 fatty acids nourish your whole noggin. The essential nutrient reaches both the hair shaft and the cell membranes in your scalp, nourishing the follicles and promoting healthy hair growth, according to Batayneh. Plus, they add elasticity to your hair, preventing it from breaking off and ending up in your shower drain. But get this—the body can't produce omega 3-fatty acids on its own; whatever you eat is what your body gets. So dig in!

The foods to eat: Flaxseeds, walnuts, salmon, tuna, kale, Brussels sprouts, rapeseed oil.

Zinc

Boosting tissue growth and repair, zinc helps keep your scalp and hair stay healthy. It also regulates hormones (testosterone included) in the body and helps maintain production of oil-secreting glands on the scalp that help your hair grow. There's no need to go overboard, though. High levels of testosterone are actually linked to hair loss, Bauman says. According to the Office of Dietary Supplements, 11 mg a day is all you need. While it's not proven your body will go on a T rampage if you consume too much zinc, there's no need to tempt hair follicle fate.

The foods to eat: Chickpeas, wheat germ, oysters, beef, veal liver, roast beef.

Protein

Quick chemistry lesson: Your hair is pretty much pure protein. So if you don't eat enough for both your muscles and hair, you'll have bulging biceps—but a bald head. And even if you do hang onto your hair, eating too little protein can turn it gray, Bauman says. Eat a diet rich in high-quality, naturally occurring protein. Wait, you're a veg or a vegan? No worries. As any good meatless eater knows, protein abounds in more than just animal sources.

The foods to eat: Greek yogurt, eggs yolks, kale, peanuts, beans, peas, lentils, tofu, chicken, turkey.

Iron

When it comes to healthy circulation, eating enough iron is clutch. Iron helps deliver blood to the body's cells. Neglect the nutrient and your blood can't carry enough oxygen to your scalp for good hair growth, says Bauman. "Many doctors have seen a correlation between treatment for iron-deficient anemia and an increase in hair growth," Batayneh adds.

The foods to eat: Dark leafy greens, whole grains, beans, red meat, turkey, egg yolks, clams, mussels, oysters.

Vitamins A and C

Both vitamins contribute to the production of sebum, the oily substance that your hair follicles spit out. Nature's hair conditioner, it keeps your hair from breaking off. Plus, vitamin C increases the amount of blood-boosting iron that your body can put to use, says Batayneh. While some vitamin A is good for your scalp, more than 15,000 IU a day can actually spur hair loss, says Bauman, who notes that the recommended daily allowance of

the vitamin for men is 5,000 IU a day.

The foods to eat: Swiss chard, spinach, broccoli, sweet potatoes, pumpkin.

Magnesium

Magnesium is the fourth most abundant mineral in the body and is needed for more than 300 biochemical reactions—hair growth included, according to the National Institute of Health. But research from the Medical University of South Carolina shows that 68% of U.S. adults don't get enough of the essential nutrient, contributing to increased inflammation in the body. Another result? Hair loss. Batayneh notes that magnesium deficiencies have been linked to hair loss in both men and women.

The foods to eat: Almonds, spinach, cashews, lentils, brown rice, halibut.

Selenium

A trace element that helps the body make selenoproteins, which regulate reproduction, metabolism, DNA synthesis, and immunity, selenium also stimulates hair follicles to encourage new growth. Scrimp on selenium and your body will churn out way too much selenoproteins, leading to hair follicle abnormalities, reduced growth, and hair loss, according to one 2010 study published in PLoS ONE.

The foods to eat: Brazil nuts, tuna, halibut, shrimp sardines, ham.

› 59. Do I need to exercise on Phase 1?

Exercise is important for this diet, but since it is such a drastic change in lifestyle, we recommend waiting for 2 weeks-1 month at least, before starting up your exercise program, since your body is still adjusting and energy may be low. Most people find that they will perform better and better as they continue on the diet, but the beginning can be arduous. Start slow and work your way up. Exercise, especially weight-training, is very important for increasing the muscles mass, which will increase your metabolism and make it easier to lose/maintain weight, as well as for your cardiovascular health. 30 mins-1 hours a day of weight-bearing exercise is recommended.

› 60. When am I done this diet?

The general goals are to get your BMI below 25, fat % into normal range and to have most/all of your medical conditions back under control. Most people tend to concentrate on the BMI, however, BMI is only an indication of weight vs. height. There is such a thing though as being "flabby skinny" - meaning that even though someone might be below BMI of 25, they can have a very low muscle mass and thus very high fat percentage and mass. This is also unhealthy and something you often see in people who do very low calorie diets, where muscle mass is lost and not regained. Remember that the goal isn't just to lose the weight no matter the cost, we want you to be healthier too. The two weight-related goals are to get your BMI below 25 (23 for Asians) and to get your body fat % to within the normal ranges as well (about 33-34% or less for women, 20% or so for men). Of course everybody is different and have different personal goals, medical goals, weight loss goals etc., so with the help of your doctor, you should set your own goals, ones that you can maintain for the rest of your life. You're never really "done" perse, as this is something to continue to keep on top of for the rest of your life.

› 61. I see there is a seminar for “xxxxxx” location. Will there be one coming to “yyyyyy” location soon?

We rotate from location to location in order. Seminars are done about once every month or two, whenever we have time. These are free seminars and do take up a whole day for the staff, so we cannot do them more often than we already do. Please make the effort to attend one if you

are having difficulty with the diet or reading labels.

› **62. I just started/restarted the diet. I'm not feeling hungry, but I do feel lightheaded or nauseous, what should I do?**

Keep in mind that weight loss doesn't happen in a vacuum. You lose fat because your body is using it for energy (the same way a bear doesn't have to eat when it hibernates, and doesn't feel hungry - it just uses up its fat storage). This process, called ketosis, in addition to creating calories from fat which give you energy (thus depressing appetite), also creates ketone bodies, which act as an appetite suppressant as well. That said, you still should be consuming good quality protein every couple of hours. You may not FEEL hungry, but your body does need those nutrients. Feeling lightheaded is a symptom of not eating enough. Drinking more water will help flush out some of the waste products you are producing from burning fat.

If you're not hungry, then stop eating, but don't skip too many meals or you just end up losing muscle mass. Protein at every meal is a must in order to provide the building blocks for your muscles.

› **63. Should we be trying to find junk foods that fit within the program, or should we be trying to eliminate non-essential foods from our diets?**

Best way is to eat cleanly as much as possible, just your fresh veggies and proteins. This is what we want in the end, to be sustainable just on fresh produce. However, in order to get there, some people need a more gradual introduction to the new lifestyle, that's where these non-essential foods play a role. Rather than eating the wrong items, you can "wean" yourself off of those high carb or fat foods, and replace it with a healthier non-essential food. After a while, many people will go completely off those foods and just stick to the main fresh produces.

Some people will find they have an easier time sticking to the program if they have snack options available to them. So in that way, you are doing yourself good by controlling what you eat and being allowed to have snacks. Other people will find that they have a hard time when presented with too many options, and have a difficulty with self control. They may require more rigid structure to be successful, so I'd say for those people, perhaps fewer snack options would be better.

It's tough to say which way is more effective in the long run. That's why we have that option. Do what you know you can handle. Don't rely purely on self-control to do a diet, because self-control only lasts so long, when compared to the cravings that can build up over time (it's a hormonal thing - so sometimes you just have to satisfy the craving somehow. Better with a healthier treat than going all out).

› **64. I recently got pregnant, or recently gave birth. Is this diet OK during pregnancy or for breastfeeding?**

You will need to discuss with both your diet doctor and family physician what to do during the pregnancy/breastfeeding stage. They may provide you with a modified diet. Please ensure that you speak to your doctor(s) once you know you are pregnant so that they can best counsel you on the proper diet to follow.

› **65. What are some treatment options for occasional constipation?**

There is a small difference in the terms "constipation" and "change in bowel movement". It is very common to have less frequent bowel movements on Phase One and Phase Two. Bowel movements that occur three times a day, or once every three days, can both still be considered as normal. However, if you have hard bowel movements, or if you wish to have more frequent

bowel movements, you can try the following methods. Avoid laxative abuse.

- Drink enough fluids so that the urine colour turns pale yellow
- Increase exercise
- Increase your green leafy vegetables
 - Fiber supplementation from the drug store:
- Sugar-free Metamucil or Metamucil tablets
- Benefiber
- Prodiem Plain or Caplets
- PGX
 - Fiber supplementation from the Ontario Nutrition Store:
- Bran Crispbread with or without sugar-free fruit spread
- High-fiber Hot Cereal with water
- SMAPS Cereal with sugar-free Almond Milk.
- Smackaroos cracker
- Flaxseed meal
- FiberSprinkle
- Carbquik Baking Mix
- Sugar-free Nut & Flax Granola
- Nutracleanse
 - Mild laxative from the drug store:
- Stool softener such as sodium docusate (Colace)
- Mineral oil
- Milk of Magnesia
- Senokot
 - Mild laxative from the Ontario Nutrition Store:
- Senna tea
 - Sugar Alcohols: over consumption of certain sugar alcohols can cause a mild laxative effect.
- Sugar free gummy bear
- Sugar free meringue
- Sugar free Jelly Belly

› **66. What kind of supplements should I take?**

If you follow the diet and are eating a variety of proteins and vegetables, you will be obtaining all the nutrients your body needs from your food. However, if you are a picky eater and/or suffering from certain medical conditions, you might consider taking some additional supplements. In our diet program, the following supplements are considered optional. Follow the directions on the bottle.

Available at the Ontario Nutrition Company:

- › Dr. Poon's Metabolic Supplement: Promotes better metabolic rate and muscle gain. Contains good amounts of antioxidants.
- › CMX: A cinnamon extract which can help with diabetic and cholesterol control.
- › Cinnamon Biotin Chromium: Good for diabetics, hair loss and promoting muscle gain.
- › Biotin: A kind of B vitamin that can help with treating hair loss during dieting.
- › Raspberry Ketones: Weight loss support.
- › Ultra B12: Contains B complex vitamins and vitamin C, which can provide energy support.

Good for vegetarians to provide B vitamins and energy.

- > Flax Oil Capsule: Provide the daily requirement of omega-3 and omega-6 fatty acids. Helps to improve the cholesterol profile and hair loss. Less fishy taste than fish oil.
- > Glucosamine Sulfate with or without Chondroitin: Useful for patients with osteoarthritis.
- > Calcium, Magnesium, Vitamin D3, Zinc soft gel: Bone health
- > Chelated Iron: Enhances absorption of iron for patients with anemia or low ferritin.
- > Phase 2 Starch Neutralizer or Nutrilite: Can help block the digestion of starches (but not sugar). Good for the occasional cheating or vacation.

> **67. I'm eating a lot, but never seem to be full. What's better for increasing protein intake, eggs, protein shake or chicken?**

More fluids and vegetables (fibre) can help bulk up the stomach to create a feeling of fullness by filling the void. The shirataki noodles serve that purpose well. More protein and good fats will keep you fuller for longer, keeping in mind protein takes about 30 mins to digest, so you won't feel full until a bit after your meal. Perhaps a protein shake in the morning/mid day can help with the hunger as it will deliver a quick boost of protein to the system. 1 large egg white only contains 4g of protein, that's 16 calories. Even a cup of egg whites contains just 26g of protein. roughly 110 calories, but also a bit of carbs and a lot of natural sodium (400mg per cup), so actually in some cases, good protein shakes are a healthier, easier and better alternative when you need to really boost the protein intake. If you don't add enough fats to your eggs, you can see why you may be hungry if you only ate 100 calories. For comparison, 1 cup of cooked, chopped chicken breast has 230 calories, 5g of fat (only 1g saturated), 104mg sodium (very low), 0g carbs, and 43g of protein. So cup for cup, actually the chicken breast is preferable to the egg white in terms of delivering good protein content. The equivalent weight (140g) of cooked salmon has about the same amount of calories as the chicken breast, but more fat and a bit less protein. Just something to consider. You could eat 1/2 cup of egg whites, a chicken breast, or two, a slice of the flax bread and some fried spinach for breakfast. You won't be hungry after that!

> **68. I don't want to eat egg whites anymore for breakfast, what can I eat?**

Check out the Food Diary where people post their meals and the files where recipes are posted. Don't limit yourself to traditional breakfast items... Mix it up!

You can purchase products from the ONS, such as Cinnamon flax buns, Sensato hot cereals, cold cereal (smaps or hi-lo), Carbquick (for pancakes and muffins), protein shakes, protein bars, low carb breads and bagels, Chocolate Chia pudding, LC pancake mix, reduced sodium Turkey bacon, A slice of ONS cinnamon bread toasted with LaNouba Orange jam, Tuna with veggies etc...

Or you can make your own breakfast products (freeze extras), with tons of recipes in the files. Some examples are mug muffins (many variations...), homemade hot cereal, breakfast muffins, egg muffins, mini quiches, flax pancakes, hard boiled eggs, iced cap with protein powder, or any other leftovers... have dinner for breakfast!

> **69. Why are only certain fats and oils allowed on this diet? What's the significance of Omega 3 and 6? I heard Canola is bad for you, why do we allow it?**

Canola actually has a higher omega 3 content and ratio than olive oil, which is why we recommend it for cooking applications. Olive is best for raw applications. Any oil we consume is for the purpose of getting these omega 3 and 6 essential fatty acids (we want more omega 3 than 6, ideally in a 3:1 ratio)

Here's a useful table for comparing oils to give you a visual idea.

<http://www.exrx.net/Nutrition/FatComparison.html>

For this chart above, we want only a little light yellow, we want as much blue as possible, and we want as little purple/pink as possible, and the dark yellow as much as possible is good too, for our oils. You will see that flax is among the best if not the best. The reason we don't cook with it though is it doesn't hold up well to heat (225 F smoke point) and does impart some taste (ie not neutral tasting). Canola is best as you can see (they flip flopped the smoke point C vs. F values by mistake, in case you get confused). Olive oil is the second best choice.

<http://www.exrx.net/Nutrition/FatComparison.html>

› **70. I have PCOS, how will this affect my weight loss? Will it be harder to lose weight?**

As others mentioned, PCOS weight gain is largely attributed to the insulin resistance - meaning the body cannot properly process the sugars and starches you consume, in order to use it as energy. So when you consume sugar and starch, it just floats in the blood stream and is stored as glycogen, and eventually, fat. Also, PCOS causes excess male hormones to be produced in females, thus leading to other complications such as facial hair, acne, irregular periods and weight gain, especially in the abdominal area (just like men). Since the insulin is less effective than normal, your body will overproduce it, if you continue to eat sugar and starch, and so, you will have very high insulin levels which triggers those male hormones, as well as other diseases like diabetes, sleep apnea, infertility...ie...metabolic syndrome.

The way we fix this, is basically the same way we "fix" diabetes. If you don't have sugar and starch in the diet, or consume foods that raise the blood sugar level, it doesn't really matter if you have insulin resistance, because there's nothing that you are consuming which requires insulin's mechanism in the first place. By following this diet, we remove the sources that trigger insulin production. If your body's not making insulin, then the male hormones aren't triggered, and as the insulin levels decrease, so do the accompanying diseases. Losing just 10% of the body weight (ie phase 1) can provide visible results in this regard. This is also why many patients who do this diet suddenly become pregnant very quickly after starting, even after trying for a long time with no success.

You may experience a little bit of a slower loss at the beginning, but generally speaking, since you are eating the same foods, and after the initial period, most of your body's mechanisms return to "normal" compared to other patients, you should be able to achieve relatively the same results as someone without PCOS.

- › **71. My Friends/Family/Dietitian say that completely cutting out carbs is bad for my health, and that we NEED to eat some carbs for good health, especially the brain. Is this true?** One important fact that people often misunderstand, is that even though we are not EATING carbs, our body can still CREATE carbs from other compounds such as fat. So you do not need to physically consume carbs, to include carbs in your "diet". Fatty tissue (ie body fat) is composed of a compound called triglycerides. Triglycerides are made up of 3 fatty acid chains, plus a glycerol molecule (a carbohydrate - sugar alcohol). When fat breaks down, this glycerol molecule can enter the glycolysis pathway directly (the same pathway that ingested carbohydrates can take) and be used as energy. It can also be converted back into glucose (a carbohydrate - sugar) through gluconeogenesis. Therefore, by burning body fat, actually, you can create carbohydrates for your body to use!

This is also why even when you don't eat sugar or carbs at all, your blood sugar still does not ever drop to 0. Through burning fat, you can create your own supply of carbohydrate.

Here's a VERY useful and interesting article on this topic from the American Journal of Clinical Nutrition, pretty much one of the forefront journals on the subject:

<http://ajcn.nutrition.org/content/75/5/951.2.long>

"The currently established human essential nutrients are water, energy, amino acids (histidine, isoleucine, leucine, lysine, methionine, phenylalanine, threonine, tryptophan, and valine), essential fatty acids (linoleic and α -linolenic acids), vitamins (ascorbic acid, vitamin A, vitamin D, vitamin E, vitamin K, thiamine, riboflavin, niacin, vitamin B-6, pantothenic acid, folic acid, biotin, and vitamin B-12), minerals (calcium, phosphorus, magnesium, and iron), trace minerals (zinc, copper, manganese, iodine, selenium, molybdenum, and chromium), electrolytes (sodium, potassium, and chloride), and ultra trace minerals (4). (Note the absence of specific carbohydrates from this list.) "

"Thus, although carbohydrate could theoretically be eliminated from the diet, the recommended intake of 150 g/d ensures an adequate supply of glucose for the CNS (central nervous system). However, it appears that during starvation (a condition in which the intakes of carbohydrate, protein, and fat are eliminated), an adequate amount of substrate for the CNS is provided through gluconeogenesis and ketogenesis (6). The elimination of dietary carbohydrate did not diminish the energy supply to the CNS under the conditions of these experiments. Second, carbohydrate is recommended to avert symptomatic ketosis. In the largest published series on carbohydrate-restricted diets, ketosis was not typically symptomatic (7). "

"The most direct way to determine whether carbohydrate is an essential nutrient is to eliminate it from the diet in controlled laboratory studies. In studies involving rats and chicks, the elimination of dietary carbohydrate caused no obvious problems (8–,12). It was only when carbohydrate restriction was combined with glycerol restriction (by substituting fatty acids for triacylglycerol) that chicks did not develop normally (13). Thus, it appears that some minimum amount of a gluconeogenic precursor is essential—for example, glycerol obtained from fat (triacylglycerol) consumption."

"The usual way to discover the essentially of nutrients is through the identification of specific deficiency syndromes (4). I found no evidence of a carbohydrate deficiency syndrome in humans. Protein deprivation leads to kwashiorkor, and energy deprivation leads to marasmus; however, there is no specific carbohydrate deficiency syndrome. "

› **72. In the maintenance stage are we allowed some bread or pasta or potatoes?
Or should I start trying to reconcile myself to it?**

A tiny amount is allowed. The idea is about 10g net carbs max per serving on maintenance. Just to give you a taste of it. Of course, if you are maintaining well and doing lots of exercise, you can afford a bit more. Everyone is different, and you will have to know what your body can and cannot handle in terms of carb content. Even when you reach maintenance, if you go back to eating carb heavy meals, you will certainly regain your weight, so this is about learning your body and how it reacts to certain foods.

1 medium potato, about 2.5" diameter, will have about 35g or so net carbs, about 150 calories

coming directly from starch and sugars. So it really is just a little taste here and there, it will not be a big part of your diet, ever. The reason is that it takes a lot of exercise to burn off this amount of carb - and if you do not burn it off, it WILL turn into fat. It doesn't matter if you are on this program or not, eating a large quantity of starches such as bread, potato, rice etc., without doing the requisite exercise to burn it off immediately, WILL cause you to gain fat. Period.

For reference, 1 cup of cooked rice is 45g net carbs (180 calories), 1 slice of regular white bread is 12g net carbs (48 calories), 100g of cooked pasta is about 25g net carbs (100 calories).

To burn off this amount of calories from carbs, for a 180lb person, you have to run about 2km at a decent pace (in about 15 mins), to burn off about 140 calories of carbs. So as you can see, that 1 medium potato, or 1 cup of rice will require you to run about 2km to burn off. If you can do that, then sure, your body can handle more carbs and still maintain the weight - but if you're sedentary, those calories from carbs will quickly become fat.

If you have one serving of this type of carb at each meal, per day, roughly adding 500 calories of carbs to your diet per day, you will expect to gain around 1lb of fat, per week in doing so. Something to keep in mind.

Yes, some people might respond differently to different foods because of factors like gut bacteria differences, but ultimately, while they may have a varying level of response, the response is still there. It may be less or more than the next person, but it's still there. The blood sugar still goes up, there is still an insulin response, and if excess carbohydrates are consumed and not burned off by the body, then yes, there will be fat gain. The sugars will not just disappear - they have to go somewhere, either they are used up by the body, or pushed into fat cells. You will not excrete it through the urine, that is a medical condition associated with diabetes and kidney problems.

A lot can depend on the person's muscle mass too, as well as basal metabolic rate. Some people may have a slower or higher metabolism because of their resting heart rate, or total body muscle mass. But at the end of the day, there are certain processes in the body that are very much the same from one person to the next, unless there is an underlying disease or genetic disorder that causes a difference in response. In Dr. Poon's book there is some insight into the issues with testing based on GI alone, and why Glycemic Load (GL, which is GI multiplied by the net carbs in the food) is probably a better way to analyze foods and the body's response to them. How foods are prepared also have an effect on GI, as does what other foods are simultaneously consumed. He gives an example which compares a low GI food like strawberries, to an even lower GI food like prunes. But because prunes actually have more net carbs than strawberries, in the body, the prunes will actually cause a higher insulin response than the strawberries. So GI is not necessarily an accurate way to judge foods.

But at the end of the day, the fact of the matter is, whatever you ate or did in the past, got you to the place you are now. So it's clear that those foods are foods that cause you to gain weight and create the medical conditions you have. It's very likely that the foods you ate in the past which caused this insulin response and resulting weight gain, are the same foods that have now been removed from your diet in Phase 1. This is also why it's important to learn about your body by slowly reintroducing certain foods in Phase 2 and Phase 3, and monitoring yourself by going to the clinics, to see how certain foods may cause an increase or decrease in fat or water content in

your body.

Think about it, if you don't eat food, you won't gain weight. It is impossible to gain weight if you don't eat at all. The only way to gain weight is to eat. If you gain weight, it's due to the foods, either quantity or quality, you ate. What kind of food or how much, causes weight gain, can vary from person to person, but ultimately, it is ingested food that caused the gain. So if you gained weight in the past, there is something that you ate that caused it for you. Meaning given the conditions you personally have, what you ate in the past, is not a way of eating that will allow you to maintain or lose weight. By eliminating the things that caused weight gain, it is likely you will maintain, or lose weight.

Canada Food Guide and whole food diet is not designed to lose weight, or even maintain weight. The Canada food guide is there only to provide you with enough nutrients and calories so that you are not deficient. That's all it is. It is also a requirement of the Canada Food Guide that you do 30 minutes of moderate exercise a day, something most people don't do.

Furthermore, this is not just about losing weight for the sake of the number. Remember, we are primarily focused on improving medical conditions associated with the weight. This is something that few programs or diets, including the study you cited, focus on. They focus only on the scale number. Sure you can eat many different ways to lose weight Jenny Craig, Weight Watchers, Bernstein, Atkins - all these programs will help you lose weight if you follow it, and they all do it in different ways - but improving health and medical conditions is a totally different ball game, and this is why we have designed this program in this way. Not just to help people to lose weight - that's really the side effect of eating this way. It is to improve health first and foremost. This is why the program is OHIP sponsored, because it is proven that eating this way will improve these certain conditions, and as a by product (with some level of causation), you will lose weight.

Calorie counting diets, or GI based diets will work for you if you want to lose weight. Eat fewer calories, or cause fewer GI spikes than you expend, and you will lose weight. That will work for anyone. So maybe your Italian friends eat lots of carbs, but because they don't eat much fat or protein, they end up with a low calorie count at the end of the day, and may be pencil thin. But you don't see inside their body - maybe they have medical conditions, maybe their blood sugar is not under control, maybe they have high cholesterol. Lots of Chinese people look very skinny, and they eat lots of carbs too, but diabetes is still prevalent in the population, as is high blood pressure and cholesterol. Looks can be deceiving.

OTHER NOTES

- **This post is made by one of our successful Dr. Poon members (Thanks Laurie), who wanted to share her experiences and tips:**

“Often newcomers ask for tips, so I thought I would put together a list of the things that worked for me, that aren’t necessarily in the FAQ’s – and are in fact – just my opinion. Many will disagree – and that’s good too. Sorry for the lengthy post, but I have a lot to say!

- Read the FAQ, the clinic sheets if they are available to you, and the book if you can (it’s available at the Toronto Public Library). Then read them every week until you have them memorized.
- Understand that this journey will not only impact your wallet (fresh food is expensive), but your free time as well. To get the most out of this plan, you will need to find time to exercise, to prep your meals for the week, participate in this group, and shop more thoughtfully. You are worth this effort.
- Before you post your first question, take an hour one evening, make yourself your Poon beverage of choice and read as many posts on this site as you can. You will learn a lot just by the posts written in the week before you joined.
- Take another hour or two to read through the recipes posted in the files tab of this Facebook site (or at Gene’s blog) copy and paste or book mark or do whatever you need to do to save the recipes that you think you/your family would like so that you have a bunch to choose from when you get bored. You won’t regret it. Other than the support, the recipes are the most valuable tool on this page.
- Look under the events tab for a support group near you – go – especially when you have fallen off the wagon. It’s great to get together with like-minded individuals.
- Participate in this group, again especially if you are going through a hard time. It will keep you engaged and connected with people that care and will help you get back on track
- Review the Monthly Food Log Posts for ideas on what others are eating. Post your meals in the food Log to provide ideas to others and hold yourself accountable! All you need to do is enter one comment in the post, and everyone’s food entries will be sent to you daily.
- Understand and accept that you will make mistakes. We all do at the beginning. Fortunately the beginning of this journey is the most forgiving – and it will not likely affect your weight loss. Note: a mistake is not the same as a cheat! Don’t cheat – the worst thing that can happen is when a cheat DOESN’T affect your weight loss. Makes it easier to do it again. I’m not perfect by any stretch of the imagination, but I also never leave home without a plan. I prepare for any meal/party and never leave things up to chance by assuming I’ll find something Poon friendly where I am eating. I read the menu and choose beforehand, or bring my own food.
- Go to one of Dr. Poon’s seminars – the first one I went to was in Brampton – and I live close to Pickering. It was worth the 90 minute round trip drive. You’ll learn about label reading and how this plan works.
- Speaking of label reading - take ownership of learning how to read nutritional labels and how to determine if a food product is acceptable. While the group is here to help, it’s very freeing to be able

to go into a grocery store and know right away what is good and what is not. It will take time, but makes this journey easier in the long run. The FAQ has a lot of good info on how to read labels.

- Last but not least question everything. Give it the smell test. There are a lot of well-meaning people who post recipes that aren't perfectly Poon friendly (Yes, some of these are even in the files), or food products that don't exactly meet the guidelines. Just because someone posts it, doesn't mean it's acceptable. By learning to read the labels, you yourself can determine if it's a good product, and make the decision to eat/not eat it. Learn to rely on your smarts – I know you have them! It may take some time, and until you are comfortable with reading labels, stick with what's on the sheet the doctor gave you and the items in the ONS store. I don't say this to discourage anyone from asking questions, but to encourage you to own your eating plan. It's very empowering.

I hope this helps someone – Good luck on your journey!”