

DR SARA'S TOP 10 WAYS TO GET LEAN IN 2015

Sara Gottfried MD



WELCOME to Our Tribe!

Burn, Baby, burn! At least that's what I hope your body is telling your excess fat when you implement a new food plan or exercise regimen.

Whether you're a woman looking to lean out and rock your Lululemons, or a dude strategizing how to look more cut in your Robert Graham shirt – let's agree that hard science is sexy and even yummier when broken down into the most scientifically proven BIG IDEAS. That's what I'm going to share with you in this multimedia "book" you have in front of you. Print it out! Bookmark it online! Work it so it works for you.

Here's an overview of what you're going to learn in this Special Report that I put together just for you! It's never been released in this format before and it's my thrill to share the science and good time with you!

- ❑ **My top 10 ways to get lean** and burn fat – whether you're skinny fat (normal weight but body fat is on the high side), overweight or obese.
- ❑ **My private teaching videos** that teach further nuances of the 10 Ways.
- ❑ My **SPECIAL interviews** with other fat burners who are also dear friends, including Abel James and Alisa Vitti!
- ❑ My awesome **trackers** that move you from good to great fat burner!

I'm currently working on my next book (top secret!), which is all about how to activate fat burning in women. Beyond the boring stuff you've probably heard already, this **Special Report** features the past year of research I've been synthesizing for the new book! I can't give away all the goods, but you'll have enough to get you started on the path of fat burning.

It's your time!

To your best health,

Dr. Sara Gottfried MD



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Darling, It's Time to Reverse Fat Storage

Somewhere along the way, your body started storing fat instead of using it for energy. You turned on the thrifty genes, which helped us centuries ago when trying to survive a famine. This leads to fat gain, fatigue, moodiness, and internal starvation because your cells are not getting the fuel they need. In medical language, this is known as hormone resistance, and the basic story is that your body becomes numb to the hormones that control fat burning. Those hormones are insulin, leptin, cortisol, estrogen, testosterone, thyroid, growth hormone, plus a few others! Whew!

Every day we hear about a different diet, each one contradicting the last. *Eat more protein. Eat less protein. Restrict your fat. Eat more fat! Don't drink milk. Drink raw milk!* It's highly confusing and often not based in any scientific research. My goal for you with fat loss is to do what's sustainable: 1-2 pounds per week. Faster weight loss leads to rebound weight gain. Instead, follow these tips that are proven to help you with fat loss and to boost metabolism, sensibly and sustainably.

Hopefully by now you got the memo that burning fat isn't about cutting calories or clocking in more hours on the cardio equipment at the gym. Your metabolism is like a Macbook Air – with a little fine-tuning and the proven lifestyle tweaks, you can get it fired up to work more efficiently. Hopefully you're saying: "Dr. Sara, break it down for me!"

Combined with a healthy diet, here are 10 tips that will help you burn more fat and get lean.

Dr. Sara's Top 10 Ways to GET LEAN in 2015

1. Architect your day for fat burning... the night before!

People who get lean and stay lean are planners. They prepare. Here's your new nighttime ritual. Instead of watching the latest *Downton Abbey* or *24* (JackIsBack!), keep a small journal by your bed. Old school journals are better than a tablet or iPhone for notes because the backlight on those technologies will rob you of melatonin, which of course is important for fat burning.

Spend 5 minutes and write *what went well* over the course of the day. What did you do that increased fat burning (you'll know more about what those actions are as you make your way through this Special Report). Then consider the upcoming day and 2 to 3 actions you can add to the sequence so that you increase fat burning. Maybe you add a set of 20-25 push ups before your noon meeting, or you start your day with a hormone-balancing shake (see next item for recipe and links), or you decide you'll do the Dailey Method online video (see later in the report for links to my favorite high intensity interval training). Perhaps you ask your spouse to pick up wild-caught Alaskan salmon, broccoli, and coconut oil for dinner?

2. Drink a protein breakfast within 30 minutes of awakening

If you don't eat breakfast within about 30 minutes of waking, it's like getting into a car, not turning on the engine and expecting it to run. Even if what you have is simply three bits of wild bison or shrimp, eat some protein – it will repair your leptin. Here's what I do: I make a [protein shake](#) with the powder that I personally vetted. [Click here](#) to get some for yourself and enjoy this recipe.

Breakfast is what jump-starts your metabolism each day, especially when you eat a protein load such as pastured eggs or a protein smoothie with kale and fiber. You give your body the signal that it's time to start burning calories. Similarly, you need to cue your system to shut down appropriately at night. Don't eat past 7 p.m. if you can help it. Your organs need adequate rest to digest the day's meals, and they can't do that if you're indulging late-night cravings. An overnight "fast" (the time between dinner and breakfast) helps to ensure proper elimination, hormone balance and sound circadian rhythms – all factors that affect your fat stores.

Dr. Sara's WEIGHT LOSS SHAKE

www.DrSarasDetox.com



- 2 scoops Hormone Balancing Shake Powder (chocolate or vanilla)
- 2 scoops soluble fiber blend
- 1/3 cup fresh or frozen berries
- 2 handfuls chopped spinach or kale
- Filtered water to desired taste/consistency
- Handful of ice cubes (optional)

Blend and enjoy!

3. Clean up your act + detox

Sometimes stubborn pounds can be caused by a food allergy, intolerance or an overload of toxins in the body. Doing a detox two to four times per year can help eliminate endocrine disruptors (synthetic chemicals that can disturb hormone balance and cause weight gain), cleanse the liver and kidneys, and reset the body. For most people, this results in weight, and more importantly, fat loss.

Most of us aren't aware of how many high-calorie and refined foods we have in our daily diet. In the Detox that I offer online twice per year we burn fat by cutting out the most common foods sensitivities – the ones people are often unaware that they are allergic or sensitive to.

Join our next detox by getting on the priority list right here: <http://drsarasdetox.com>.

In the meantime, drink 65 ounces of water (about 8 glasses). Eat lean protein (approximately 4 oz. per meal, such as organic chicken, wild Alaskan salmon, ground turkey, grass-fed beef) and non-starchy vegetables (broccoli, brussels sprouts, dark leafy greens, cabbage). Cut out dairy and gluten, the two most allergenic foods.

There's nothing like doing a detox with an awesome group of likeminded people, so make sure to get on the list for the next one! By doing my detox you're clearing out toxins and old junk in your gut. It also stimulates elimination so you feel light and energetic.

[Hope you can join us!](#)



4. Fat burning nutrients proven to move the needle!

I believe that food is the best source of nutrients, but sometimes we need a good supplement to fill the gaps that we have because of genetics or high stress.

Here's a video from a recent live event where a participant asked about getting nutrients from food versus supplements (only 3 minutes!):

Given that most of us have nutritional gaps, here are the ones that make a difference when it comes to fat burning.



- **Food: coconut oil.** Coconut oil resets thyroid and metabolism. I use it every day on my porridge. You can also use it in cooking; particularly for medium to high heat (olive oil is not good for you at high heat). Coconut oil is great to sauté green beans — makes them crisp and delicious. With coconut oil the calories don't matter given its benefits.

- **Kit yourself!** Make it easy and [get my "I Feel Fat" kit](#).
- **L-Carnitine** is a nutraceutical made of 2 amino acids: methionine and lysine. In 2011, a good study showed that when you orally ingest 500- 1000 mg vegi-cap of L-Carnitine it reduces fat mass, increases muscle mass, and reduces fatigue. Simple result? Weight loss. L-Carnitine helps to sensitize your cells to insulin. One problem that leads to weight gain is being resistant to insulin so you need higher and higher insulin levels to deal with glucose in your body, which leads to more hunger and getting fat. Additionally, L-Carnitine has been shown to help balance neurotransmitters. All of these effects may contribute to weight loss.

5. Snooze To Lose

Remember those circadian rhythms I keep talking about?

They're like your body's master clock, governing when certain hormones are released based on your sleep/wake schedule. Do them a favor and get enough sleep! Very few people (about 6 percent) have the gene that allows them to get away with minimal sleep - around 6 hours per night. The rest of us need at least 8 hours. That's not just my opinion – check out Malcolm Gladwell's report on how concert violinists sleep on average an hour longer than musicians who become teachers. Otherwise, you're priming your body to store fat, feel sluggish and age faster. No thanks. That would be like falling down a hormonal flight of stairs, and we don't want that.



Watch my video right here where I bust the top 3 myths of sleep and how to sleep like a baby!



Here's a link to the PDF I mention in the video: [Your Sleep Log + 8 Rules for Optimal Sleep](#).

I already mentioned the importance of getting enough sleep, but just as crucial is getting quality sleep. When you don't sleep deeply each night, your cortisol levels rise and your body stores excess fat. In order to increase melatonin production – which helps to control your natural sleep-wake cycle – make sure you:

- Sleep in a dark room that doesn't have blinking or red LED/electronic lights
- Minimize outside noise with a fan or white noise machine
- Use the bedroom only for sleep and sex (which helps your brain disassociate the bedroom from stimulating things like watching TV or working).

6. Sooth Your Stress

Stress is one of the biggest obstacles to weight loss. It causes cravings, increases cortisol levels (and that triggers your body to store fat around the midsection), gives you monkey mind, and almost always prevents you from staying consistent with healthy habits. It erodes your will power. We need a pattern interrupt. Even if you can't effectively remove the stressors in your life, just include more things that bring you joy and pleasure – like time with friends, travel or a soothing hobby like yoga or reading. Work on integration and positive feeling states, such as gratitude, awe, or as my dear friend Brian Johnson likes to call it... arête.



7. Get Hormone Help

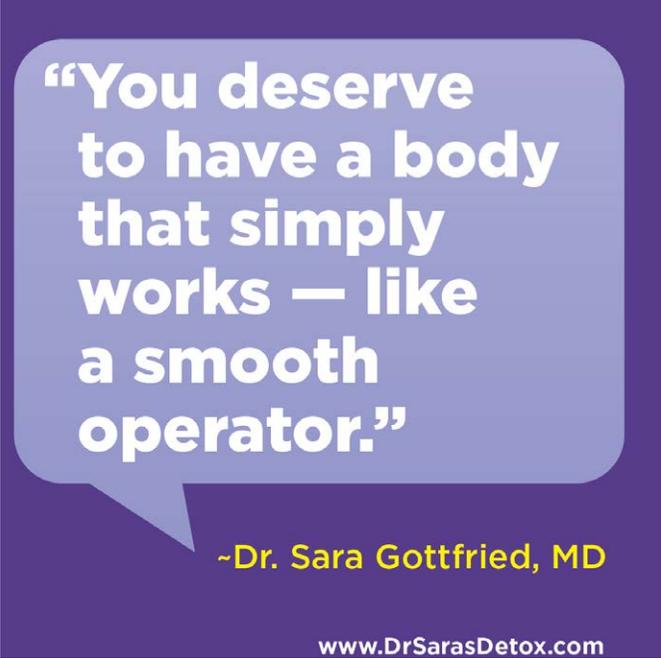
Extra fat can certainly result from diet and lifestyle choices, but there's often an underlying hormonal imbalance that's truly running the show. If you have a thyroid issue, high (or low) testosterone or overworked adrenals, for example, calorie counting or excessive exercise won't help you shed pounds. But if you address your hormonal imbalances, this gives your body the green light to return to a healthy weight.

Now, you've just bought my book on Amazon, where I have about 97 ways to soothe your stress! So get started, my friend! Here's what I'm working right now – [Inner Balance for creating coherence](#). I do it 10 minutes per day.

8. Balance Your Blood Sugar

It's not an exaggeration to say that diabetes (most simply the combination of diabetes and obesity) is becoming a matter of life and death in our country. This blood sugar condition often goes hand in hand with increased visceral fat (also known as the dreaded muffin top), cardiovascular complications, high cholesterol, metabolic syndrome, hypertension, and prediabetes.

Even being at a normal weight but skinny fat (your body mass index is normal, but body fat is increased) can dispose you to exercise-resistant weight gain and higher rates of mortality, so get your blood sugar tested as a precautionary measure. The good news about diabetes is that they're 100 percent reversible through diet and lifestyle changes that mostly involve reducing consumption of refined carbohydrates and sugar, eating more whole foods, bumping up the fiber, and targeting exercise to promote insulin sensitivity.



“You deserve to have a body that simply works — like a smooth operator.”

~Dr. Sara Gottfried, MD

www.DrSarasDetox.com

9. Skip the Scale

I'll preface this by saying that pounds can be an important indicator of how healthy you are, but healthy weight loss should be centered more on the idea of losing body fat and inches. Muscle tends to be denser than fat, so while you might not see the pounds disappearing on the scale, you can monitor true changes in your body by taking measurements of your waist, hips, upper arms, thighs and chest.

Also more important than the number on the scale is your body fat percentage, which you can usually have tested at the gym or through a company that performs body composition testing.

10. Pattern Interrupt! e.g., Eat With Your Other Hand

Your non-dominant hand, that is. Dr. Susan Albers reminded me of this great tip: Try eating and drinking with the opposite hand. It's a great way to interrupt autopilot patterns you have at meal times (like inhaling your food or guzzling wine too fast), and it can serve as a way to stay mindful on a daily basis.

BONUS TIP: Burst to Burn

Burst training, often called high-intensity interval training, involves exercising at 90+ percent of your maximum effort for 30 to 60 seconds, followed by 30 to 60 seconds of low-impact exercise for recovery. Just four to six sets of this type of training enable the body to burn stored glycogen (sugar) and continue to burn fat for the following 36 hours. That's right – swapping that boring hour on the treadmill for just 20-30 minutes of burst training is actually better for fat loss. Burst training also helps to raise growth hormone, which, second to cortisol, determines how much fat you store around your midsection.

I often travel, or as a busy mom, I just can't make it to the gym or track. On those days, I love to burst train using the Dailey Method. [Click here](#) for an inexpensive video training to download or stream that can help you get lean.

Remember that fat loss isn't something you can accomplish overnight or with a "magic bullet" solution. But by balancing your diet, getting enough rest and implementing a few lifestyle adjustments, you can ramp up your body's natural fat-burning abilities in no time. Lean body mass is one of the best indicators of health, harmony, and longevity – so track your body fat, and get lean. Your cells will love you for it!

An Interview with Abel James of Fat Burning Man + Dr. Sara!

Here's a recent interview with Abel James of Fat Burning Man on how to burn fat by balancing your hormones!

Enjoy!



The Hormone Makeover:

An Interview with Dr. Sara Gottfried and Alisa Vitti,
author of *Woman Code*

Dr. Sara: Hi, Everybody. This is Dr. Sara Gottfried and I am so excited to be with one of my best friends today, Alisa Vitti. She is the author of *Woman Code* and also the Founder of FLO Living. Alisa, hello.

Alisa: Hello, Sara. So happy to be here and talking about hormones. More people need to know.

Dr. Sara: It's so true. I want to give the long, rich bio but why don't you just tell our listeners who you are.

Alisa: Who I am is an integrated nutritionist and I focus on women's reproductive endocrinology and I help women use food as a lever to get their hormones working in the proper flow, pun intended.

This idea that women have to struggle with not feeling good most of the time is scientifically not sound and we can feel fantastic and women deserve to feel that way.

It's just great being able to give women access to this code of how to use food in this particular way to get their endocrine system working the way that they should, get their periods happy and healthy, getting them pregnant whether they need to do that with IVF or naturally and of course bringing their sex drive back online is always good, too. That's the long version.

Dr. Sara: We're going to talk about all of that today, right? I want to kick off with a question about the why. Why do we need to be proactive about our health, our hormones, our happiness, our relationships? Why?

Alisa: Well, I think it's a couple of reasons. The first is that we are in an environment now, externally to our bodies, that is really messing with our internal hormonal ecosystem. We are exposed to so many more endocrine disrupters than women were two generations ago. We see this in the epidemic rates of women struggling with menstrual disturbances like PCOS or fibroids or endometriosis as well as women who are dealing with infertility.

I think in 2010 there were something like ten billion dollars being spent on IVF treatments alone. Of course now there's a big race to create the first female Viagra. This has a lot to do with the fact that there are younger and younger women who are losing their sex drive. We're all so used to this idea of medicalizing our hormonal fluctuations.

That sort of leads to the second reason why we need to really focus in on this. One, it's not easy out there for your ovaries and your hormones. Two, if you don't have access to the right information you're going to be making choices about your health care that have really massive, long-term repercussions in the way that you experience your health overall.

There was a study that was published in 2009 by the NIH, the biocycle study, that showed that issues like PMS in your 20s and 30s, if left untreated, increase your likelihood post — menopausally of developing the big four diseases of inflammation — heart disease, diabetes, cancer, Alzheimer's. We've kind of got to figure this out so that we can live better now and feel great as long as we can.

Dr. Sara: That's the yummiest why ever. The world is not easy on our ovaries and you've got to pay attention to this stuff now in your 20s, your 30s, your 40s, because later on it's going to cause problems. Let's start to hit that lever. I say lever, you say lever. Let's start to hit that lever now.

For folks who maybe haven't seen your TED talk, and by the way you've got to see [Alisa's TED talk](#) because it just totally rocks. For those who haven't seen it they may not know that you, yourself, were challenged by some major hormonal issues. Can you share that story with us?

Alisa: Sure. I don't think I would be so passionate about periods and hormones if I did not myself suffer from a complete hormonal fallout in my early 20s. I was a student at Hopkins, fully planning to follow the OB/GYN track. I found myself struggling with massively irregular cycles. I had put on about 60 pounds in a very short period of time. My skin - face, chest and back, was covered in extreme cystic acne. I always love doing a little close-up because people don't believe how great my skin is.

Dr. Sara: Look at her skin, it's beautiful!

Alisa: It's amazing when you really start to appreciate truly how hormones affect everything when they start really affecting everything about your life. Not only was I struggling with all these physical symptoms but I was really struggling in my day to day life just waking up in the morning, going to sleep at night, maintaining

healthy relationships, maintaining my work productivity, all of that was really compromised because I was just not operating. My operating system was all off kilter.

It was really remarkable to go through this transformation and the inflection point, I would say, was that moment in the doctor's office where after much research on my own I came across a little article in an obstetrics journal about the condition that I had and had not yet been diagnosed and that had been going on for five or six years.

Getting that confirmation with my gynecologist and hearing that there was no way to correct the situation, that there was no treatment that she could prescribe that would address the underlying causes of why my body was not working, but that I would have to be medicated for the rest of my life for various issues that would sort of get compoundedly worse as this hormonal imbalance progressed, I thought there's got to be a better way.

That's sort of what changed my career track certainly. I got really interested in nutritional genomics and functional medicine and really looking at how do we manipulate the endocrine system and specific target glands with food and micronutrients.

The protocol was born from my experience, which is also really exciting that my body was able to take that food information, those micronutrients, just like food information and process it and bring itself back online. This idea that we do something to our health, we do something to our bodies is sort of semantically wrong.

We help facilitate, we enable, we maybe partner with, we also stay out of the way of what the body wants to be doing. That's a better way to think about it and it certainly was my experience and has been now working with women all over the world for over a decade, helping them with similar issues.

Dr. Sara: You really began your own path with this work when you were struggling with polycystic ovarian syndrome. I'm so glad that the gynecologist who said, "Yes, you have polycystic ovarian syndrome. Why don't you take this nice birth control pill for the rest of your life," I'm so glad that you didn't take that sitting down. Hooray for that, victory for Alisa.

Alisa: Yes, yes. My ovaries lead me in the best places. I just listen to them and it's all good. I have learned from a young age they're in charge.

Dr. Sara: This is really the woman code. Where do your ovaries lead you? Where does the wisdom of your body lead you? You got started with the woman code way back at Johns Hopkins, which is an unlikely place for the woman code to be born.

Alisa: Very. Very unlikely, and I know you say that with all the insider hilarity that goes with it. Yes, but I think because I was in such a masculine model of produce, produce, produce that not only was my body going through this experience of hormonal imbalance but I was also really profoundly aware of, through looking at the different hormonal patterning, what sort of emerged through the neuro-hormonal sort of chemistry was this, for me, the essence of feminine energy and how that works in a day to day experience.

It was really healing on so many levels to connect with, and I say very cheekily, my ovaries. Truly.

Dr. Sara: This is where I really want to dive in. You and I love to have a conversation that's kind of from the cells to the soul. I so appreciate that your work is on that arc and connecting more and not just relying on maybe the immature masculine, the produce, produce, produce message. That doesn't work so well in the female body.

Maybe we could start with what's so bad about produce, produce, produce. What does that do hormonally? Maybe even before that, what is a hormone? How do you define hormone when you're trying to explain it, say at a cocktail party?

Alisa: Fabulous, I do that all the time. Hormones are the language that's being spoken between the glands of your endocrine system. It's a chemical conversation. If you were to travel to any country, and I have traveled. I've had the privilege and pleasure of traveling to many foreign places and the places where I have the most pleasure oftentimes are where I can speak a little bit of the language.

What does that facilitate for someone when you can speak a little bit of the language? You get to interact with the locals, you get to buy more interesting produce and you get to haggle for your stuff. It's more fun and you feel like you had a real experience of maybe living there for the time that you were there.

Versus when you walk around without speaking the language you really feel very disconnected, you kind of are staring at the map hoping you stumble across the right restaurant and the right experiences and everything is very surface.

It's very similar, the relationship that you have with your body. It's based on whether or not you have some facility with this language that is this chemical conversation that's being had. It's being had whether you like it or not so I say when in Rome get a little Italian going.

Similarly, when you happen to be existing in a body, and this is true for men, too, but we're going to just focus on the ladies today. When you happen to have this dynamic hormonal patterning it's happening anyway, it is the most logical thing if you really think about it to learn what that is, what it feels like, what it looks like, how it works and how you can interact with it a little bit.

Maybe even beyond just feeling good all the time, which is very easy to do once you figure out the code, maybe even you could start to leverage it to get more done with less strain on the body. Which cycles back to your other question which is this concept of from the cells to the soul. Really, none of us are getting healthy just to get healthy. Not even myself. I don't eat vegetables because they're good for me.

I say that and I eat a lot of vegetables. I eat vegetables because I know which micronutrients I'm getting and at what time during my cycle and what that's going to provide for me so that I can then go and take that particular energy that I'm creating in my internal ecosystem and go do something with it out in the world. Whether that's have a conversation with one of my favorite doctors on the planet or whether that's to give a talk somewhere or whether that's to be with my hubby in a particular way and be really emotionally connected to him.

I can use that chemical conversation to my benefit, to my advantage. That's really what's in it for women to get access to that woman code.

Dr. Sara: Super juicy. I think we all are like, "Tell us, tell us, tell us the woman code." Before we get to the woman code I just want to maybe sketch out what it looked like for you when you were pre - code. When you were more of a pusher and a producer and I can just sort of see you in the library at Hopkins trying to make things happen and not really work in alignment with your ovaries. What does that look like? What does that look like for people?

Alisa: Hormonally what's happening when we're pushing, and you know this but I'll just share, it actually ends up increasing our testosterone levels as cortisol levels are higher. Then that suppresses oxytocin. This creates a particular imbalance for women because we thrive in an oxytocin rich environment.

This is why women feel so good, like you and I right now, this is so much fun because it's you and me not just you or me. That's a very important distinction, that it's this collaborative energy where we get to connect and communicate and do fun things together, boost oxytocin levels and it feels really good. That's the feminine from a hormonal standpoint, in one way, in one sense.

What it looked like for me was just a whole lot of that cortisol-heavy, DHEA-low, testosterone-heavy kind of energy. It feels very on the one hand you feel kind of, I don't know, what's the word? Frenetic. At the same time you feel sort of exhausted. Simultaneously. You just never feel really good. You don't feel easy. You feel mostly uneasy all the time. There's this kind of tension that doesn't help you propel yourself forward. It just sort of has you spinning like a top in place.

That's kind of not very productive, when you think about it. It's not good hormonally and it's not good in your life. You need to actually make forward motion if you're trying to create.

When I sort of applied the hormonal piece from looking at the cycle to this, let's say, cortisol, testosterone, oxytocin conversation it got really interesting because then we're looking at what's happening with estrogen and progesterone in concert with that and how can we use those neuro-hormonal shifts to our benefit to, let's say, maybe subtly shift the ways in which we're boosting oxytocin each week of the cycle. That's really cool.

Dr. Sara: Yes, it is.

Alisa: I know that turns you on because you're a nerd like me. Listen, self-proclaimed. What's really fun is figuring out of course there are parts of you that love to communicate but have you paid attention to the fact that there are times of the month where that's just more easy for you than other times?

For example, so many women complain about how they have so much on their to-do list but they can't get certain things done even though they keep putting them on their to-do list. There's a certain cocktail of estrogen to progesterone that really facilitates you wanting to bring things to completion.

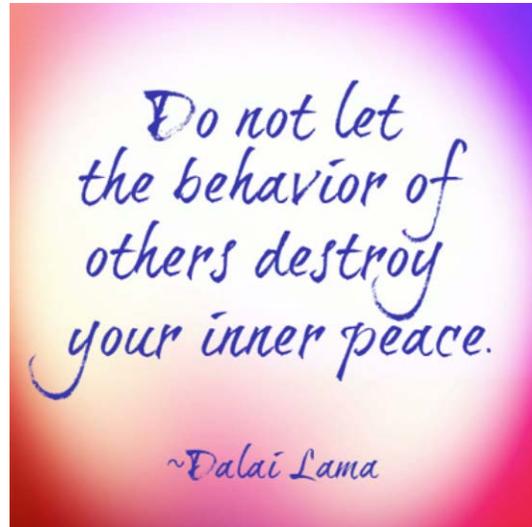
Knowing when that is, just taking that negative inner dialogue, sort of cutting that off at the knees if you will by appreciating these hormonal distinctions is, for me, otherwise I'd be like I have to get more and more and more done all the time. It's sort of this never-ending state of this burden of productivity, the same degree of it each and every day regardless of what's happening with your body. It's very unsophisticated.

When you have access to better technology - how many of us use actual paper calendars anymore? Now we have the iPhone and all of our calendaring apps and whatever you're using. Why would we go back if we can go forward? We have this really amazing natural form of biotechnology in our bodies and I just want to see women using it more.

Dr. Sara: This is so juicy because I think that we know that there's an issue with our modern lives, right? Trying to get so much accomplished, we've got the highest rates of connectivity. Women right now are the least happy that they've ever been in the history of the world.

Alisa: Allegedly.

Dr. Sara: Clearly we're at a crisis. As you mentioned, this condition, polycystic ovarian syndrome, which I think is a terrible name, it's the most common endocrine abnormality that we see in women of reproductive years. I don't even like to say that because we know that you can start to see polycystic ovarian syndrome in utero. You can see it before puberty. You can see it after menopause, it's a serious issue after menopause.



PCO is one of the ways in which I think there's evidence that the woman code is not being followed. Another one is just kind of the garden variety that I experienced in my 30s where I had high cortisol, it was blocking my progesterone receptors. Progesterone is like nature's valium. I was just a total cranky pants. I was in couple's therapy and I had a little too much alcohol each night because I was trying to soothe myself.

I think it's so important to realize that we could be more intelligent; we could be working smarter with our menstrual cycle and not working against it. That point that you're making about kind of the communication and another juicy point that you made - I'm just trying to recap these lovely points that you made.

Alisa: Lay it down, Sara.

Dr. Sara: This is such a huge one. When you're trying to accomplish all those things that are on your to-do list and you're feeling like what is wrong with me, why can't I get this stuff done? What if we looked at the biology instead of assuming that there's a moral failing? That's a very powerful intervention.

Alisa: Thank you. For me it was born out of, of course, trying to accomplish things in my life and having a very sensitive system. It's been such a gift in a lot of ways that my endocrine system's very delicate. I can't get away with half the stuff most people do when it comes to keeping their hormones healthy. And that happened for me at such a young age.

One of the things that I was doing, of course, I think in my early 20s, like so many people try to do, is let me figure out how to be more productive with my time management. I tried Franklin Covey's thing with the rocks and the sand and whatever and the saw. So many aggressive tools, I didn't really get that. Then the Tony Robbins rapid planning method. It's very scary, you have to go very quickly.

The premise was I'd buy the binders, I'd sit down and I'd fill it all out. Then maybe I could get through it a week or two but then something would change and all of a sudden my ability to engage that system wasn't working as well.

I just tucked it away as an observation and I thought, okay, it's me. Clearly I am just lazy, ineffectual and I cannot follow this system and it's not the calendar. The calendar's this inanimate object and it's just me.

Later as I was working on the code I remember having this beautiful, full-circle moment thinking, "Oh my goodness, it wasn't me, the system was just this whole linear approach that was not incorporating my cycling biochemical shifts."

For me it was great because then I was able to create a whole time management system based on these shifts and it's amazing. People asked me last year, for example, how was it that I launched this online platform? We have the world's first online hormone improvement platform, which is so cool. I love using technology for health care.

I wrote a book, I planned a wedding and I got married all in the same year. People are always asking me how did I do that in one year. I mean, I still look relatively fresh and happy and healthy.

Dr. Sara: Yes, you do.

Alisa: It's all because I leveraged that sort of forward-vector motion of cyclicity. It's so much easier to get more done, to go farther faster when you're not trying to do the same thing each and every day, each and every week, but you're really leaning into the fact that the situation in your internal ecosystem is going to change. Plan for it and then watch things unfold much more quickly.

Dr. Sara: Everyone's just like, "Okay, I'm leaning in. Tell me how to do this." They need to read your book.

Alisa: We need to have a conversation with Sheryl Sandburg about leaning in. We need to have a little bit more leaning into our hormones at work.

Dr. Sara: Very true, she put out that entire field of study. How can we start to unpack this for our listeners? Where do you want to start? Do you like to start kind of day one, week one of the menstrual cycle? What would make the most sense?

Alisa: There's always a two-part process. The first part is you have to do the clean-up work. If you want to get to the fun, to the play, to the goods, and I want to see you playing, that's great. It's a whole hormonal dance to get to the place where it actually sounds like music and not like something you shouldn't be listening to. You need to do a little clean-up work.

First just evaluate where you are. Are you struggling with hormonal issues? You know what the symptoms are. If you're dealing with PMS and you think that should just be the butt of your jokes, again just go online and Google the biocycle study and you might change your tune about why that's not funny.

Just look, if you're dealing with any of the issues that, Sara, you've shared so much on your site. On my site you see all these different hormonal symptoms from fatigue to stubborn weight to low sex drive to just mood destabilization, if you feel like a different person several times out of the month on a sort of repetitive pattern something's going on with your hormones.

Take a look and just get present with that and be real and acknowledge that that is what's problematic for you, that you don't yet need another potion or lotion or supplement to try to quickly feel better. We have to drop that approach. Acknowledge that there's something off.

Then I would really take a look at the first three steps of the woman code protocol really go into this clean-up phase. It's all about blood sugar stabilization and adrenal support and estrogen metabolism. Doing that in the right sequence is so, so critical.

For example, trying to bypass the first two steps by going straight to detox and doing like an extreme detox juice, I drink green juice every day. To do some sort of crazy intervention in that way can actually make you feel a lot worse because you're unpacking all sorts of hormonal toxins into an internal environment that's not well prepared to handle them.

You kind of need to do it in the right sequence. I think that's the hard work. That might feel a little bit like a new adjustment but it really becomes easy if you do it in little bits and pieces. We like to break it down into the most digestible forms. Again, you're using food so it's something that you're just changing every meal, every day.

Dr. Sara: This is powerful. I wonder, could we just give our listeners a few strategies, maybe related to blood sugar stabilization? I think a lot of our listeners may not even know, both men and women may not even know that it's blood sugar instability that's the reason why they're a cranky pants, why they don't want to have sex, why they would rather have a cupcake instead of a green juice, for instance.

Alisa: Or a cupcake instead of sex!

Dr. Sara: Yes.

Alisa: All that, all of that. I'm going to reference Star Trek. The prime directive of your endocrine system is to safeguard the transport of glucose to the brain, the heart and the muscle tissue. There are several subsystems that really are there as checks and balances, just in case you screw that up. I'm assuring you that you're screwing that up on a regular basis, especially if you're having symptoms like you feel headachy a few hours after a meal or you feel jittery or you feel tired.

Any of these are signs of hypoglycemia, which is a fancy pants term for low blood sugar. If that's happening you're just having this excessive amount of insulin. It's all of this confusing, that very specific hormonal cascade, that keeps that chemical conversation in balance. It's so essential that we start there for that reason.

If you want to give a sign of good faith to your endocrine system the quickest that you're on board, you've figured out the fact that you actually have a role to play and that you're here, you're going to do your part, eating for blood sugar stability is the fastest way to your endocrine system's brain and heart to let it know that you're helping out.

Some of the things that you can do would be to increase some saturated fat to help stabilize blood sugar. So many women eat like a low-fat, no-fat, no-carb, fresh air kind of diet. I say that very tongue in cheek, but we tend to be extreme when we're not happy with how our bodies are looking and feeling. Over time this is really hard on blood sugar stability.

Even just adding a half an avocado at a meal or throwing in a few almonds can help stabilize blood sugar. Using supplements like chromium picolinate and conjugated linoleic acid can really help when it comes to insulin sensitivity, especially for women who have PCOS, for example. The chromium will help the sugar get into the cell and the CLA will help balance the insulin production. It's really, really great. You can get those at your health food store.

You can also eat for chromium. There's a huge supply of it in romaine lettuce, so you can eat a ton of that as well. You can put that into your green juice. Those are some simple ways. Another one of my favorites is using cinnamon. Cinnamon is a known blood sugar stabilizer so sprinkling that into and on everything is a great way to keep your blood sugar stable throughout the day while you are doing the clean-up work.

These should be looked at as supplemental activities such that you're bringing your body back into a place where you're able to have appropriate insulin response and appropriate blood sugar stability. That comes through weeks and months of eating right for your metabolic type so that you're not swinging the pendulum of your body's sugar response in either extreme.

Then you're not going to need to kind of do triage with food in this way. You'll be able to use food in a more broad spectrum way. Does that make sense?

Dr. Sara: Makes total sense. When I lead my detox programs, the cleanse programs that I lead, I often will have people test their fasting blood sugar in the morning because it's so inexpensive to get just a little fasting blood sugar device.

I find so often that people prick their finger in the morning, they test their fasting blood sugar and we know that really the target is between 70 and 86. I can tell you so many people have a level much higher than that. They're in the insulin resistant phase, which is part of the problem here when we're talking about polycystic ovarian syndrome, at least in many of the folks who suffer with it. We know that one in two Americans -



Alisa: And with generalized infertility, right? Idiopathic infertility where there's some sort of issue with ovulation. We know that insulin has a direct effect on successful ovulation. Even if you don't have PCOS and you think your periods are normal but you're trying to conceive, sugar is part of the solution.

Yes, I think having those tests are really valuable because it puts you more in the driver's seat. You really start to see the relationship that you have to this sensitive conversation that's being had and you can impact it and improve it with changing up your food.

Dr. Sara: Beautiful, I love it. Now, I think it might be worthwhile since you brought up infertility, I would love to talk a little bit about infertility. I think this is another place where there's such a gap between what you get in conventional medicine and what people get when they read the *Woman Code*.

I would love to just maybe hit some highlights of if you're struggling with having a baby or if you are thinking about having a baby, what are some of the things that you want to be thinking about when it comes to the menstrual cycle and how you can activate the woman code?

Alisa: You have to audit what's happening with your period as soon as possible because it will tell you pretty decisively how easy it will be for you to conceive and maintain a healthy pregnancy. You know I was on Dr. Oz recently and I had my famous — it was just a fun idea I had, let's simulate the sort of four patterns of menstrual blood color and texture to help women really look before they flush so they can really audit their cycle for a whole host of hormonal imbalances. Infertility is something you can gauge based on what's showing up for you every month.

You don't have to wait to be surprised by trying to conceive, you can really look at what's happening with estrogen and progesterone every month and how am I doing with that ratio. That's really going to be telling you so much about how this is going to go for you.

Certainly if you have something like PCOS and you're not ovulating or you're not menstruating, that's a big issue you'd like to address sooner rather than wait until the moment you want to conceive, right? If you have fibroids or ovarian cysts or endometriosis you want to address those things as soon as you can.

Infertility has become this bigger issue and idiopathic infertility where there's no known cause because of dietary changes and because of the overload of xenoestrogens in the environment that end up in our food and in our bodies, women are just struggling at younger ages with this issue.

Add to that, it's kind of like a perfect storm of women being on birth control pills at younger and younger ages when they start. I know, I know. I love talking about this with you because you can bring that gynecological voice of reason, which is we just know about brain development, right? That your brain is not finished developing until you're 21.

Dr. Sara: Wait, my brain's still developing.

Alisa: Well, you know what I mean. I know, there's still brain plasticity.

What would Daniel say? Yes, it's all possible. That specific conversation between the pituitary gland and the ovary, that needs those pubescent years to really get well established. By putting a teenage girl as young as 13 and 14, which is happening in, as you know, huge quantities, putting these girls on this birth control pill, synthetic hormone replacement at such young ages, it's kind of an experiment that we've not done before.

You are shutting off that conversation between the pituitary gland and the ovary. That is the function of the pill, that's how it works. Then whatever pre-existing hormonal imbalance is there, as you come off of the pill 15 or 20 years later, which women can easily find themselves doing, you're faced with all of the hormonal imbalances you may have not realized you had and you have a shorter period of time in which to deal with them.

For me, there's that issue. Then finally you have so many women just flocking to assisted reproductive technologies as a solution, a medicalized solution to bypass any sort of work that they might be able to do on themselves. Frankly, I think when you walk into an IVF center there should be posters of avocados everywhere and other healthy foods, but avocados especially because there's a study that shows that women who ate three avocados a week during an IVF cycle had a three and a half greater successful outcome versus women who didn't.

For the huge failure rates of IVF, this is a major competitive edge when you're trying to get to your goal. For me, really if you're thinking about conception you want to think long-term and you want to think about a pre-conception nutritional plan. We do that with women all the time.

We help them address and assess any sort of menstrual issues that may six months, nine months down the road when they're ready to conceive, get that sort of all handled. Then look at any other chemical issues that they may have been exposed to, really get that all chelated out. Then, of course, get them working in cyclical harmony so their cortisol levels are down, DHA levels are up. This is good for during the pregnancy, helps prevent post-partum depression after the pregnancy. There's so much that you can do to really hack your hormones short-term and long-term to get pregnant easier. Of course, certainly if you're going to do IVF and that's something that you have to do, you definitely want to make sure that you're accessing your code before you even start so that you can maybe hit it out of the park the first time and not have to do multiple rounds and over-stimulate your ovaries and all of that.

I only had a small thing to say about fertility, I'm sorry.

Dr. Sara: Oh my gosh, that was so valuable. You covered a lot of territory.

I love your message about the birth control pill. I think there's a time and a place for it and frankly the problem is that we don't have enough good forms of contraception out there. We need more of them. I think the ones that mess with the conversation that's happening between your brain, your hypothalamus, the pituitary and your ovaries, it's not good. It's not good.

Just beyond messing with that conversation we know that it shrinks your testosterone levels, your free testosterone levels. You want testosterone to be in the Goldie Locks position, not too high, not too low. Same thing with all of these hormones. You want oxytocin not too high, not too low. You want cortisol not too high, not too low.

For people who have super-efficient testosterone receptors they may feel just fine on the birth control pill but if you have less efficient testosterone receptors, if you have more of a Hummer receptor, as my friend Andrew Goldstein likes to call it, then you might have low sex drive. You might have vaginal dryness. Up to 25 percent of women on the birth control pill have vaginal dryness.

They're 19 and feeling like, "Why do I have a vagina like the Sahara desert? This makes no sense to me. I'm not in menopause."

Alisa: Absolutely, and then your boyfriend or your partner is thinking, "What did I do? What am I not doing?" When you're not on the pill then you can really start to play with your hormonal changes and have a really cool sexual experience week over week in your cycle, really playing to your strengths from a hormonal standpoint.

It's really fun to clue your partner into that and have them work on that with you. So many women look at their hormonal changes as something that would interfere with their sexual expression, but in fact it's quite the opposite.

Dr. Sara: Let's go there. We know that somewhere between about 40 and 60 percent of women have low sex drive.

Alisa: That number is just too high.

Dr. Sara: It's way too high. Especially if you've been in a long-term monogamous relationship, after four years that's when really you can notice a change when it comes to sex drive. I think it's important to see that the answer's probably not going to be in the bottom of a pill bottle. The female Viagra has not been discovered. Yes, there was a recent New York Times article about this new smart drug.

Alisa: You know what was so great about it? The women that were on the placebo and the women who were taking it had the same exact sort of response to it. They all came to the same conclusion, which is my sexual response is so much more complicated and integrated than just feeling turned on.

While Viagra's a really great solution for men with cardiovascular issues that result in issues with an erection, with women it's not this exact one-to-one performance issue. It's a whole other thing.

I would say in my experience working with patients on this issue over long periods of time, if you can get into hormonal harmony and partnership with your cycle in your 20s and 30s, and really get into the subtleties of how those hormones affect your sex drive while you are under the impression that your sex drive is at its peak, even though we know for women sex drive is meant to increase as we go along the age continuum as opposed to men.



When you, let's say, move through the experience of peri-menopause you're going to be much more finely attuned to the shifts in your body such that you'll be able to communicate with your partner even better and say what it is that you might need and get more pleasure out of that experience than if you're just sort of feeling like it used to just be ready to go all the time and I didn't need this much foreplay and I didn't need all this other stuff and so something's wrong with me.

If you're always right there hand in hand with what's happening with your body in real time and what it is that you might need sexually then there is no falling off the sexual cliff, there is no before and after, there is no I was juicy before and now I'm all dried up. That doesn't happen, doesn't have to happen.

From your partner's standpoint I always joke, we don't keep like a chore wheel at home or anything. We do keep track of where I am in my cycle because this enables my husband and empowers him to appreciate what kind of dates he should be planning. Are they dates where we're going out and doing new things or we're with friends or we're home? What kind of dates are we having? Are you sending me to the spa? That could be a date.

Also, what kind of sex we're having? How much foreplay? Is it more Tender Is the Night or Fifty Shades of Grey? What kind of sex are we having? He knows how to mix things up based on where I am in my cycle. To us, and we've been together for five, six years now, there is none of that experience of we're monogamous and therefore things have kind of cooled off in terms of our desire for each other. Because it's changing every single week and that's been the case since we started dating.

It's just more of the same, more change, more fun, more new stuff. That's what keeps it fresh for us. Again, leaning into your hormones can be a path out of the zitegeist of it's going to get old and then I'm going to get old and this whole thing is just going to be a hot mess.

Dr. Sara: No, no, I feel like we always have these decision points between grow or die, start the decline. I think it's so important to realize that if you're not making a choice, if you're not choosing to grow the default is that you are going to start declining.



I want that for our listeners, but I can also hear them saying, "I really like what your husband is doing. How do I train my guy to do that?" Or maybe there are some guys listening who are saying, "I could do that. How do I do that?"

Alisa: Yes, actually I have a lot of men writing in telling me that they've read the book and that it is like their tactical manual for interacting with their girlfriend, their wife, even their daughter in a better way. Of course, understanding and appreciating everyone's hormonal changes allows, affords a man a heightened degree of gender intelligence that will allow him to be in a better position in relationship to all the women in his life, whether that's in the work place or at home. It's only a benefit.

I would specifically pull out chapter five of *Woman Code* and read that right away if you're a guy. Go there first and then you can back track to anything else that you want.

Dr. Sara: Okay, that's super yummy, super yummy. I could talk to you for hours and hours. I want to like reserve the next trip that we have together and plan that. We only have you for a short amount of time. You're on east coast time. I want to maybe start to finish up by asking you if you had to pick one needle mover for the women who are listening to us today, if you had to just pick one tip, one thing to do, one practice, what would it be?

Alisa: Always with the good questions. Well, to get the most bang for your hormonal buck I'm not going to give you a tip about what the right food is to eat to triage your symptoms because that's boring. You can Google so much of that information now. It's pretty straightforward.

What I am going to do is tell you to start paying attention to and identifying the physical cues that are indicative of where you are in the four phases of your cycle. If you can just start with that and then, of course, you, too, should be reading chapter five of *Woman Code* to really pick that apart. If you can simply start to appreciate where you are and make that something that is more than second nature because it is your first nature to have this be your continuous state of cyclical flow.

If you can pay attention to what those shifts are it's going to change everything about the way that you think about your body, your life, your relationships, your sex drive, your fertility, the way you manage projects and time at work. It's just going to change everything. You're going to become naturally curious about how you might use this to your benefit.

If I could give you that one game changing experiment it would be that, to simply pay attention to what's going on with your mood, your energy, your cervical fluid, your water retention. Where are you in the cycle? We all know when we're having our menstrual period, we all know that. The other three weeks, where are you?

Not doing it from that arbitrary, calendaring way, but really feeling when you're shifting from phase to phase. I go into depth in the book about how you can really feel that out on an emotional and physical level so you can really gauge that so intimately. It will just transform your relationship with your body and really serve you so well.

Dr. Sara: This is huge. I mean, you're talking about attunement, radical attunement and how health is really an inside job. Hormonal harmony is an inside job and it starts not with some expert saying, "Here's what you should feel at this time or this time," but start with what you feel and know to be true inside your body. I think that is very powerful.

Alisa Vitti, you are phenomenal. I'm so happy to have you with us today. Tell me, for folks who want to learn more what should they do? How can they find you on the internet? Give us your info.

Alisa: On the interwebs, bring me your ovaries. Go to FLOLiving.com/WomanCode. You can download and get access to all of these great cycle syncing videos, learning more about how do you leverage your cycle in each phase and how your live and eat for that. Of course, get the book immediately and start to have that information at your fingertips. You can pick that up anywhere books are sold, Amazon, Barnes and Noble, Target even.



Really, the other fun thing that we do is we have a weekly video newsletter that goes out, a blog. If you want to see me chatting with you, a talking head for a few minutes every week, just really speaking to the questions that I know you're all sending me on our Facebook page, which is [Facebook.com/FLOLiving](https://www.facebook.com/FLOLiving), it's a really great way for you to have a forum to ask questions and get them answered.

We're just here. Food, Love and Ovaries, that's the name of the game over here with Woman Code.

Dr. Sara: I love it, Food, Love and Ovaries. Alisa Vitti, thank you so much for being with us today. It was such a pleasure and honor to have you.

Alisa: Thanks for having me.

Dr. Sara: Alisa Vitti, author of the *Woman Code*. You've got to get this book. Go check out FLOLiving.com. Thank you, Alisa. I will see you very soon. Thanks, everybody, for joining our conference today. We'll see you next time.

Top 10 Measurements and Trackers for Hormones, Sleep & Fat Burning

One of the most important aspects of the fat burning that you'll hear me stress again and again is the importance of *measuring* your results! This will help you get a clearer snapshot of your current health, as well as the progress you're making.

Here is a list of the top 10 measurements and trackers I recommend you use regularly....

1. Waist Measurement

Supplies Needed: **Soft tape measure**

Instructions: Start at the level of your navel and bring the tape measure all the way around your waist. Make sure it's not too tight, and that it's parallel with the floor. Don't hold your breath while measuring! Write down your measurement in inches or centimeters.

2. Hip Measurement

Supplies Needed: **Soft tape measure**

Instructions: Start at the level of your hips (wherever is widest around) and bring the tape measure all the way around in a circle. Make sure it's not too tight, and that it's parallel with the floor. Write down your measurement in inches or centimeters.



3. Weight

Supplies Needed: **Scale**

Instructions: Always weigh yourself first thing in the morning, before eating breakfast. Write down your weight in pounds or kilograms.



4. Body Fat %

Supplies Needed: **Body fat scale – or visit your local gym**

Instructions: It's easy to get fixated on the number on your scale, but body fat can actually be a much more accurate indicator of health and fitness. You can purchase a special scale to measure yourself at home, or visit your local gym to get the measurements done for you.

5. Hormone Quiz Results

Supplies Needed: **Computer with internet or The Hormone Cure book**

Instructions: My Hormone Quiz has been formulated to help you quickly identify which of your hormones & neurotransmitters are rockin' steady – and which ones need TLC immediately. You can take the short version of the quiz online at www.thehormonecurebook.com/quiz, or get your copy of *The Hormone Cure book*, which contains the full-length version.

6. Sleep (Self-Assessment)

Supplies Needed:

[Your Sleep Log + 8 Rules for Optimal Sleep PDF](#)

Instructions: Sleep is critical to fat burning. At a minimum, you should record the quantity and quality of your sleep each night, using the sleep log I've created for this purpose.



7. Sleep (Use a Tracker)

Supplies Needed: **Up, Zeo, Fitbit, or similar**

Instructions: To take your sleep tracking one step further, use a tracking device, such as the [Up](#), the [Zeo](#), or the [Fitbit](#), which will tell you how much of the night you spent in deep sleep, how long it takes you to fall asleep, and more.

8. Fasting Blood Sugar

Supplies Needed: **Glucometer, test strips, lancing device, lancets, and control solution (optional)**

Instructions: Always measure your fasting blood sugar first thing in the morning, before eating breakfast. You may also want to measure 2 hours postprandial (after eating a meal).

For details about why you should bother in the first place, and how to go about it, check out this blog article I wrote on the topic:

[Turn Your Insulin into Jillian Michaels \(Part 1\): Test Your Blood Sugar.](#)

You can also read the follow-up article here:

[Turn Your Insulin into Jillian Michaels \(Part 2\): Manage Your Blood Sugar.](#)

9. pH Level

Supplies Needed: **pH Test Strips**

Instructions: I recommend testing the pH of your urine first thing in the morning. Instructions are typically included with the test strips, and generally consist of letting some of your urine hit the test strip mid-stream, waiting a few moments, and then comparing the color of the test strip to the colors on the package to find out your current pH level. Your pH level is an important measure of overall health.

10. Daily Steps

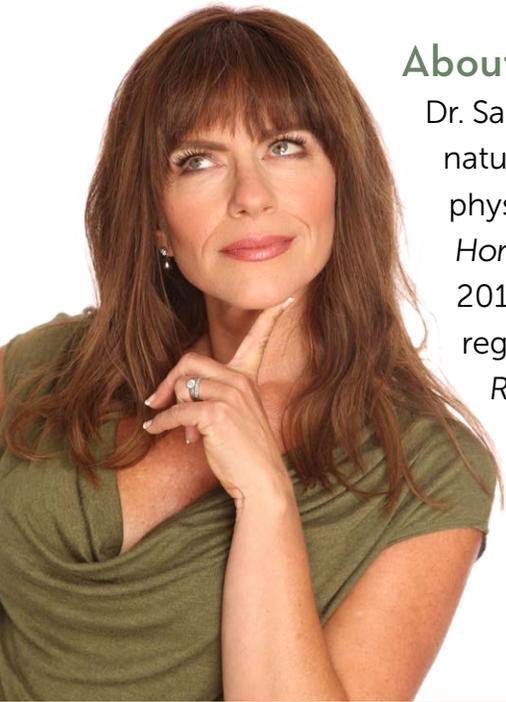
Supplies Needed: **Up, Nike+ FuelBand, Fitbit or pedometer**

Instructions: Tracking your total steps per day is one of the easiest ways to help you monitor and increase your daily activity. I recommend using a tracking device such as the [Up](#), the [Nike+ FuelBand](#) or the [Fitbit](#) – or you can also use a regular pedometer.



Final Word

If you can only take one action because time is short, sign up for our next detox by getting on the priority list right here: <http://drsarasdetox.com>.



About Dr. Sara

Dr. Sara Gottfried, M.D. teaches women how to balance their hormones naturally so they can rock their mission. She is a Harvard-educated physician, speaker and *New York Times* bestselling author of *The Hormone Cure* (check out the new paperback from Simon & Schuster, 2014). She is board-certified in Obstetrics and Gynecology, and is regularly featured in magazines such as *Cosmopolitan*, *Glamour*, *Redbook*, *O Magazine*, and *Yoga Journal*. Known for effortlessly blending the seriousness of women's health with playfulness and humor, Dr. Sara's mission is to help women lose weight, feel great, and be vital from their cells to their soul. Work with her online by joining her semi-annual detox for 21 days! Learn more at www.saragottfriedmd.com.

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