

DR. SARA'S
TOP 20
PLATEAU
BUSTERS!



DR. SARA'S TOP 10 PLATEAU BUSTERS!

When people follow [The Hormone Reset Diet](#), they lose up to 15 pounds. We know this statistic from extensive and scientifically rigorous pre-surveys and post-surveys, performed on the thousands of people who have completed the program. However, this means that 50% of those who follow the diet lose more than 15 pounds, and 50% lose less. If you find yourself on the lower end of the weight loss spectrum, please don't fret. It usually means that something in your body, mind, or spirit needs a little extra love and attention. The purpose of this blog is to guide you to the most common 10 culprits, and to break through your weight loss plateau.

There's a good chance that there is a hormone issue occurring that needs one-on-one support with a health professional. Please contact your clinician, or work with one of the smart people that I've trained in my methods by [clicking here](#).

Now, onto my top PLATEAU BUSTERS!

1. Get your hormones checked. Work one-on-one with an enlightened hormone expert to get them into the optimal range. Many of those who go through my [Detox program](#) find that they only lose 2 pounds. They then get thyroid support, do the detox again, and lose 15 pounds. Hormone imbalances (estrogen, insulin, leptin, cortisol, thyroid, growth hormone, testosterone) that don't resolve with the Detox need one-on-one care. Get tested.

2. Redial in your carbs. Are you sure you're getting 25-49 net carbs each day? Are you getting 35 to 45 grams of fiber? This is extremely important for weight loss and resetting estrogen, leptin, and insulin. Use sparkspeople.com to calculate your carbs and fiber if you haven't already done this. Measure your macronutrients every day for the next 3 days. People with thyroid or adrenal issues, or those who are pregnant, trying to conceive or post-partum, or those who are highly stressed need more carbohydrates. People with diabetes, pre-diabetes, neurological conditions benefit from fewer carbohydrates. Aim for 10-15% of your calories each day from carbohydrates, and see how you do. Try dropping lower if your weight loss is at a plateau. Read more in [Why We Get Fat](#) by Gary Taubes and [The Paleo Cure](#) by Chris Kresser.

3. Your age by weight chart. This is an exercise that I've found to be very helpful. Make a chart of your weight over your lifetime – a graph with your weight on the Y axis, and your age on the X axis. My weight has varied as an adult from 115 in high school to 200 pounds when I was pregnant with baby #1 (yikes!). My age ranges from 18 to 47. My weight has gone up and down a lot, and it's good to graph it. The next step is to go back and indicate what was happening in your life that was associated with the weight gain and loss. For me, breakups always seemed to cause weight loss, and then I'd fall in love again, eat like my new boyfriend, and get fat. That stopped about 10 years ago, thank goodness. Now my weight goes up if I sit more, cut corners on exercise and working up a sweat, cut back on yoga, or if I have wine every night. Sadly, my liver and sleep can't handle alcohol very well. Analyze your graph, not just the past 2 or 3 weeks and see what the linkages are between your weight and what was happening in your life. This can yield some important insights that may help you break through a plateau. I'll tell you what helps me break a plateau: I exercise at least an hour per day, six days per week and break a sweat. Sometimes it's JUST DANCE on the Wii with my younger daughter, sometimes it's a hike after dinner with my husband, where we'll sprint a few times, and sometimes it's weight training at the gym. It's definitely giving up the booze for 3 or more weeks. I just gave it up for 3 months and lost 15 pounds. It's also sitting less – I set my iPhone to get me out of a chair, every 50 minutes to do 12 push-ups or a plank pose. I also practice yoga 5 days per week, sometimes just for 21 minutes but enough to reset my nervous system.



4. Heal your gut. Many of you have chronic constipation, gas, bloating, discomfort, and weight loss resistance – but you don't know that it's your gut that's the root cause. You must heal this. It's probably not the shake or the fiber; it's more likely that you have leaky gut and/or dysbiosis¹. Again, work with a functional medicine expert one-on-one for this problem. In the meantime, start learning about it and start to heal it.

5. Carb intolerance. This is related to that last plateau buster, and can cause gas, bloating, and weight loss resistance. Carbohydrate intolerance is pretty common and usually directed toward a certain group of foods called FODMAPS. FODMAP is an abbreviation for Fermentable Oligosaccharides, Disaccharides, Monosaccharides And Polyols. These are short-chain carbohydrates, which are not completely absorbed by the gut and can be easily fermented by gut bacteria.² Because these carbohydrates aren't completely absorbed by the gut, they exert an osmotic effect and increase fluid movement into the colon. This can cause symptoms of irritable bowel syndrome such as pain, gas, and diarrhea. Carbohydrate intolerance is almost always a sign of messed-up gut flora. When carbohydrates remain undigested in the small intestine, they provide food for bad gut bacteria, and when bad gut bacteria are killed by the immune system, they release toxins. Those toxins can cause all kinds of symptoms ranging from brain fog and depression to leaky gut, skin conditions like psoriasis and eczema, and weight loss resistance. If you are sensitive to FODMAPS, a low-FODMAP food plan can help.

DR SARA'S TOP 20 PLATEAU BUSTERS!

6. Exercise. Weight is determined 75% by food and 25% by exercise, although this may vary based on your genetics. For instance, the exercise component is higher in my sisters and husband than it is in me. This means that you need to dial in the food as you've done in our



21-day program, but that's not the entire story. Sweat more. Mix up your exercise routine. If you're overweight or obese or ill, get the green light first from your doctor, but push yourself with exercise, if possible. Walk after dinner. It's an important cleansing process after eating. Do burst training as I've described in *The Hormone Reset Diet*. Try chi walking, or a barre fitness class either in person, which is best, or online.

7. Heavy metals like mercury and lead can lead to weight loss resistance. Work with a functional medicine clinician to test your heavy metal burden.

8. Infections such as parasites and yeast overgrowth can also cause weight loss resistance. Work with a functional medicine clinician to get your stool tested.

9. Try hypnosis. I mentioned this previously. Check out my favorite program that I do most mornings during my quiet time. SaraGottfriedMD.com/hypnosis.

10. You may have **additional food intolerances**: eggs, nightshades, tyramine, etc. You may need to give these up.

11. You may not have **reset insulin** if you're still getting hidden sugars, such as from balsamic vinegar. Get curious about where sugar is hiding and remove the enemy. Hidden sugars may keep you hooked and craving it.

12. Sleep more.

13. Give up grains. You may have done this already, or some of you may have just given up gluten. I believe grains cause weight loss resistance, so out with all grains.

14. Genetics. Test yourself. Go to Pathway.com and do the Pathway FIT.

15. Try tapping for weight loss. I loved *The Tapping Solution for Weight Loss & Body Confidence: A Woman's Guide to Stressing Less, Weighing Less, and Loving More* by Jessica Ortner, and found it to be helpful. It is especially helpful if you're a highly sensitive person.

16. Double up your detox packets. Many of those on my [Detox program](#) find that it takes more than 2 or 3 weeks to reverse years of bad habits and toxin accumulation. You may have delayed weight loss as you come off the [detox packets](#), as some of our detoxers have found. Be patient and trust the process.

17. Are you a food addict? When you have weight loss resistance, you need to confront this issue honestly. We know that about 20% of women are food addicts, higher rates than we see in men. The more rigorously honest you can be about whether this is part of your own truth, the easier it will be to get the help you most need. [Take my free food addiction quiz](#) to assess your relationship to food.

A few specific tips to help your food addiction:

- Often bingeing is related to the stress hormones (like cortisol) being out of order. You may want to measure yours and get some help one on one with a clinician or nutritionist.
- You may need a more intense approach. One program that worked for me and is FREE is Twelve Step. I didn't find Overeaters Anonymous to stop my bingeing, but I found tremendous peace and abstinence in FoodAddicts.org. Check it out, and I hope you are able to stop suffering and get onto the really important things that you have ahead for you in your life.

18. Get a stool analysis and look at your skinny microbe versus your fat microbes. One great test is [UBIOME.com](#) for \$99.

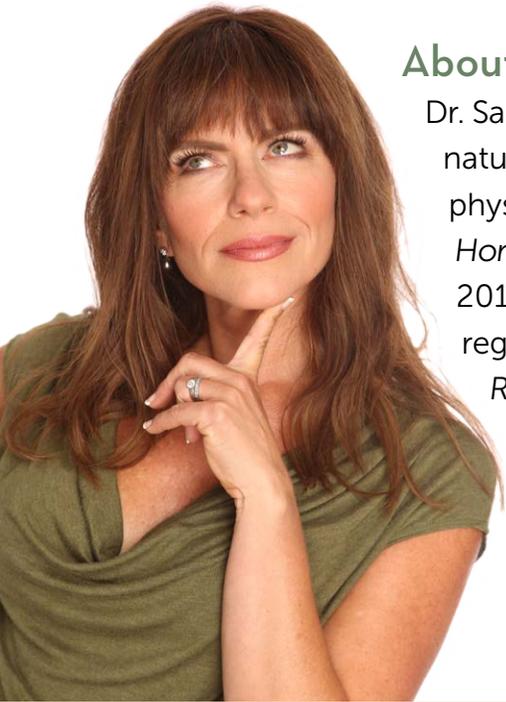
19. Consider modified intermittent fasting. As its name implies, intermittent fasting (IF) involves alternate periods of feasting and fasting. My action plan: IF isn't for everyone and could create potential long-term problems. For women, IF can potentially crash your metabolism and even lead to hormonal imbalances. In other words, proceed with caution. You can get most of IF's benefits without hunger or deprivation by closing your kitchen after an early dinner, thereby creating an approximate 12 – 14 hour window where you shift into fat-burning mode (bonus: Most of that fasting will occur while you sleep.) Eating dinner at least 3 hours before preparing yourself for sleep (including minimizing that screen time!) gives you a little bit of that IF edge. Doing this helps ensure you'll get a better night's sleep, which helps love up your cortisol and ghrelin hormones—going a long way towards helping with your weight loss.

20. Get an accountability partner. It's been proven to double your weight loss efforts. One easy way to find a partner is to get on the list for our next Detox, [right here!](#)



¹ Bures, Jan, Jiri Cyraný, Darina Kohoutová, Miroslav Förstl, Stanislav Rejchrt, Jaroslav Kvetina, Viktor Vorisek, and Marcela Kopacova. "Small intestinal bacterial overgrowth syndrome." *World Journal of Gastroenterology*: WJG 16, no. 24 (2010): 2978.

² Barrett, Jacqueline S., and Peter R. Gibson. "Fermentable oligosaccharides, disaccharides, monosaccharides and polyols (FODMAPs) and nonallergic food intolerance: FODMAPs or food chemicals?." *Therapeutic Advances in Gastroenterology* 5, no. 4 (2012): 261-268.



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.

Medical Disclaimer

Information provided in this document is for informational purposes only. The information is a result of years of practice and experience by Sara Gottfried, MD. However, this information is NOT intended as a substitute for the advice provided by your physician or other healthcare professional, or any information contained on or in any product label or packaging.

Do not use the information provided in this document for diagnosing or treating a health problem or disease, or prescribing medication or other treatment. Always speak with your physician or other healthcare professional before taking any medication or nutritional, herbal or homeopathic supplement, or using any treatment for a health problem. If you have or suspect that you have a medical problem, contact your health care provider promptly. Do not disregard professional medical advice or delay in seeking professional advice because of something you have read in this document.

Information provided in this document and the use of any products or services related to this document by you DOES NOT create a doctor-patient relationship between you and Sara Gottfried, MD. Information and statements regarding dietary supplements have not been evaluated by the Food and Drug Administration and are not intended to diagnose, treat, cure, or prevent any disease.