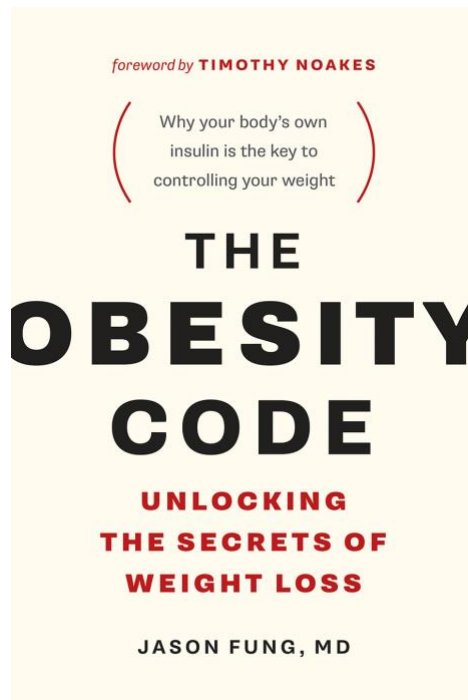




# *The Obesity Code*, by Dr. Jason Fung



Everything you believe about how to lose weight is wrong. Weight gain and obesity are driven by hormones—in everyone—and only by understanding the effects of insulin and insulin resistance can we achieve lasting weight loss and improved overall health.

In this highly readable and provocative book, Dr. Jason Fung sets out an original, robust theory of obesity that provides startling insights into proper nutrition. In addition to his five basic steps, a set of lifelong habits that will improve your health and control your insulin levels, Dr. Fung explains how to use intermittent fasting to break the cycle of insulin resistance and reach a healthy weight—for good.

## About the Author

**Dr. Jason Fung** is recognized as one of the world's leading experts on fasting for weight loss and diabetes reversal. His work has been featured in outlets such as the *Atlantic*, the *New York Post*, *Forbes*, the *Daily Mail*, and *Fox News*. He is the author of several books, including *The Complete Guide to Fasting* (co-authored with Jimmy Moore) and the bestselling *The Obesity Code* and *The Diabetes Code*.

Dr. Fung lives in Toronto, ON, where he also founded the Intensive Dietary Management Clinic that provides a unique treatment focus for obesity and Type 2 diabetes.

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## Author Interview

*The Obesity Code*, by Dr. Jason Fung



*[Excerpted from an author Q&A on [BeWell.com](#) by Dr. Frank Lipman. Read the [FULL INTERVIEW.](#)]*

**Dr. Lipman:** *If it is not calories, then what is the ultimate cause of obesity?*

**Dr. Fung:** It turns out that the problem with obesity is a poor distribution of energy, not the amount. Food energy is being diverted into fat storage instead of being used up. Insulin is the major hormonal regulator of this process.

Excessive insulin causes obesity. We can easily see this when patients are prescribed insulin for various medical reasons. Weight gain is an inevitable side effect. So obesity is a hormonal, rather than a caloric disorder. Once we understand that insulin is too high, then we can understand that weight loss depends upon reducing the high insulin levels.

Reducing refined carbohydrates is a well-known and successful strategy for reducing insulin. This is the basis of such diets as the Atkins. Most of us know that reducing sugar and white flour and starchy carbohydrates is a great way to lose weight. It is often remarkable that physicians who work with thousands of obese patients almost universally use diets low in refined carbohydrates. By contrast, academic physicians who do mostly research and do not work with patients instead counsel calorie counting. Those physicians who work with many patients understand the futility of calorie counting and have seen the benefits of reducing refined carbohydrates.

But this is not the entire picture. Insulin is the major driver of weight gain, but there are factors other than carbohydrates that increase insulin. The major player here is insulin resistance.

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**Dr. Lipman:** *Can you explain insulin resistance and what causes it?*

**Dr. Fung:** The major job of insulin is to push glucose into cells. When glucose stays outside of the cell, it is said to be insulin resistant. To overcome this resistance, the body increases insulin levels, which, of course, may lead to obesity. So insulin resistance is a major cause of increased insulin levels, but what causes this resistance in the first place?

Insulin itself causes insulin resistance. If insulin levels are too high for too long, the body develops resistance as a protective mechanism. As an analogy, consider what happens when you listen to music that is much too loud. You start to lose hearing, as your body develops resistance to this loud noise by tuning it out. In the same way, your body protects itself from too much insulin for too long by developing insulin resistance.

This is a classic vicious cycle. Too much insulin causes resistance. Too much resistance causes higher insulin levels. And the cycle goes round and round, all the while stimulating weight gain. This explains why obesity is so time dependent. Those who have been obese for a long time have a much harder time losing weight.

So losing weight depends upon decreasing foods that stimulate insulin, but also on breaking the insulin resistance cycle. Since resistance depends upon both high levels and persistence, the answer is to leave your body long periods of time with low insulin. In other words, let your body rest from the high insulin. Just as in the example with the loud music, if you leave yourself some periods of silence, this will break the resistance cycle.

**Dr. Lipman:** *So, how do you give your body a rest from the insulin?*

**Dr. Fung:** The best way is to have periods of time where you are not eating. In a word—fasting. This can be for 16 hours, 20 hours, 24 hours, or even longer. Giving your body a period of low insulin breaks the resistance and results in weight loss.

Understanding the fundamental, underlying cause of obesity results in simple, successful strategies for weight loss. There are two important questions in obesity. What to eat? We all pretty much agree here. Reduce processed foods. Reduce white flour and sugars. Eat lots of vegetables. However, we ignore the second, crucial question: When to eat? We don't need to eat more frequently to lose weight, we need to eat less frequently. Eliminating snacks is a simple way to reduce the frequency of eating. Our grandmothers already knew the truth. No snacking.

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## Why All Diets Work, and All Diets Fail

### *The Obesity Code*, by Dr. Jason Fung

There are two prominent findings from all the dietary studies done over the years — all diets work, and all diets fail. Whether it's the Mediterranean, the Atkins, or even the old fashioned low-fat, low-calorie, all diets in the short term seem to produce some weight loss. However, by six to twelve months, weight loss frequently plateaus, all-too-often followed by a relentless regain, despite continued dietary compliance.

First, let's analyze a few diets to understand their approaches to achieving better health and weight loss.

#### **Low Calorie / Low Fat Diet**

This is the standard diet recommended by nutritional authorities such as Health Canada and the US Department of Agriculture. We are all likely familiar with the tenets of gradually reducing daily caloric intake in the hopes of losing weight. The truth, though, is that these diets have been tried over and over and have failed. Real world studies of patients estimate the probability of success using this strategy at 1-2% at best. This reinforces the generally held notion that such caloric reduction diets fail.

#### **Low Carbohydrate Diet**

The prime example here is the Atkins diet. The underlying basis of these types of diets is that carbohydrates, not calories, are the prime factor in causing obesity and are severely restricted in these types of diets. While initial studies were quite promising, the longer-term studies of the Atkins styled diets failed to show much improvement over the standard diets.

The clinical experience mirrored the study results. Initial weight loss is indeed much better on the Atkins diets. This initial enthusiasm led to the widespread adoption of this diet in the late 1990s and early 2000s. However, longer-term results were difficult to maintain, and the number of followers soon fell.

#### **Paleolithic Diets**

The Paleo diet takes a new and different approach. Rather than restricting calories or certain macronutrients (fat or carbohydrates or protein), it restricts processed foods. The main focus is to eat whole natural foods in their natural form. While it can be very successful, the Paleo diet suffers from problems of cost and convenience. These whole foods can be expensive and time consuming to both acquire and cook from scratch.

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## Low Glycemic Index Diets

This diet uses the Glycemic Index of Foods to determine which foods may be fattening. While there was some initial enthusiasm, the general lack of results has made this less popular. Both short term and long-term results were underwhelming. Blood glucose is not the main driver of obesity, so diets that target lowering glucose are not generally successful.

**So, all diets fail.**

**The question is, why?**

Permanent weight loss is actually a two-step process. There is a short-term and a long-term problem. The hormone insulin acts on the brain to determine a body set weight or fat thermostat. In the short term, various diets will result in weight loss successfully.

However, once weight drops below that set weight, the body activates mechanisms to regain that weight, much like a thermostat regulates the heat in a house. Obesity is a hormonal disorder and long-term weight loss is dependent on turning down our fat thermostat, by reducing the hormone insulin in our bodies.

*In The Obesity Code, Dr. Fung explores the latest in nutritional science and provides specific, practical guidelines for weight loss that can be maintained as a lifelong healthy lifestyle.*

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## Discussion Questions

### *The Obesity Code*, by Dr. Jason Fung

1. Have you or someone you know experienced chronic obesity, Type 2 diabetes, high cholesterol, or any other dietary diseases? If so, what were these individual challenges and their impacts on daily life?
2. Did you or they ever try any prescribed treatments (not including Dr. Fung's central advice) for these dietary diseases – whether medically prescribed insulin, other medications, surgeries, or other dieting approaches? If so, what were the results? And were they temporary or lasting?
3. Why does Dr. Fung call the low-fat, calorie reduction model of weight loss a “cruel hoax” – and have you or friend ever experienced the vicious cycle of weight loss and gain he describes from following it?
4. According to Dr. Fung, regulating the body's insulin by controlling primarily “when” you eat is the best way to combat obesity. Explain how he says this works.
5. According to Dr. Fung, the “stress hormone” cortisol also plays a part in obesity. Given the stress connection to obesity, what should a good weight-loss plan include or not include?
6. Dr. Fung offers many vivid explanations and analogies to clarify complex biological processes. Do you find these generally easy to understand? Which are your favorite or resonated with you the most?
7. At times, Dr. Fung is critical of the medical establishment, government health agencies, and the “weight loss industry.” Mostly, he feels they are too collectively focused on treating the symptoms, rather than the causes, of obesity or on selling expensive products to combat it. What do you think of his criticisms?
8. Have you or someone you know ever attempted a diet plan that included intermittent fasting? If so, what was your or their basic approach? What was the result? And was it temporary or lasting?
9. In the book, Dr. Fung addresses many of the most persistent myths about fasting. What are some of the main myths, and how does Dr. Fung respond? Do you find his arguments convincing?
10. The final chapter begins with a quote by Marie Antoinette: “There is nothing new, except what has been forgotten.” How does this relate to intermittent fasting? Are there any other ways of thinking about fasting that help make it seem less “radical” as a nutritional approach?

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