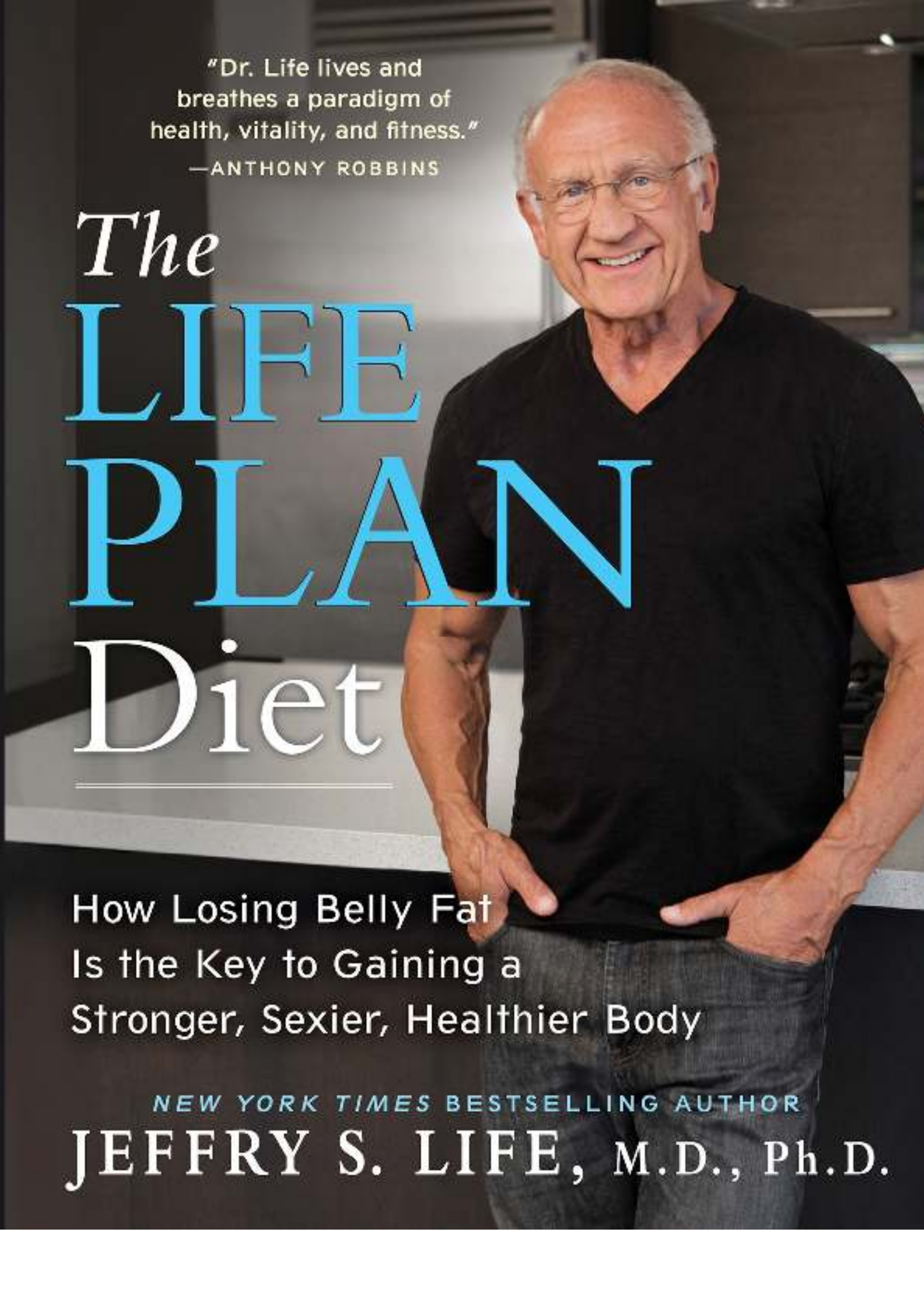


"Dr. Life lives and
breathes a paradigm of
health, vitality, and fitness."

—ANTHONY ROBBINS



The
LIFE
PLAN
Diet

How Losing Belly Fat
Is the Key to Gaining a
Stronger, Sexier, Healthier Body

NEW YORK TIMES BESTSELLING AUTHOR

JEFFRY S. LIFE, M.D., Ph.D.

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THE LIFE PLAN DIET

How Losing Belly Fat Is the Key to Gaining
a Stronger, Sexier, Healthier Body

Jeffrey S. Life, MD, PhD

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**To my wife, Annie, who was the first to motivate me to start this journey, and believed
that I could win the Body-for-LIFE contest in 1998. She has supported me and my
mission ever since.**

Introduction

By all accounts, I'm an incredibly lucky man. At 75 years old I'm in better health and in better physical shape compared to any other point of my life, and frankly, to most men my age and younger. I lead a vibrant, exciting life that includes travel and spending lots of time with my family, as well as continually challenging myself professionally and personally. While other men my age are set in their retirement, I can't stop thinking about the future: what else is in store for me and how I can continue to effect change. There is no secret that everyone, and everything, is going to age. My important message that I want to get out to men is that we don't have to get old as we age.

I'm also keenly aware that the last 16 years have been a gift, because if you knew me back then, you would have thought that by now I wouldn't even be here to write this book. And that's why my story is so important for every man to hear, because *I was you*. I know how to change the way you age because I have done it and am continuing to do the work today.

In early 1998, I was 59 years old, and I was honestly ready to throw in the towel. I had reached an all-time low in terms of my self-esteem, mood, level of fitness, and appearance. I had spent my entire career as a family medical practitioner in private practice in West Virginia and Pennsylvania. Even though my business was thriving, I had really lost enthusiasm for my work. Worse, I looked and felt like an old man. My joints and muscles ached, I had shortness of breath whenever I climbed just one flight of stairs, my clothes were tight, and my stomach was huge. My LDL (bad cholesterol) scores were sky-high, my HDL (good cholesterol) numbers were rock bottom, I was well on my way to becoming a full-blown type 2 diabetic, and I had just learned that I had advanced heart disease. On top of all this, my interest in sex was almost nonexistent. I suffered from erectile dysfunction, and I fought a daily battle with anxiety and depression.

The irony, of course, was that I was a physician certified in family medicine who should have known about staying fit and eating right. But that's exactly what the issue was: I didn't know. Like most in my profession, I had no nutritional or exercise training, and I knew nothing about the importance of hormone therapies and their relationship to healthy aging. As a result, I had become just another middle-aged doctor who was trained to disconnect the image in the mirror from the fact that my overall health was in massive decline.

Then, one day, I found a copy of *Muscle Media* magazine lying in my exam room. I took it home that night and read it cover to cover. I couldn't believe how physically fit these men and women were, and for the first time in my life, I was jealous enough to do something about the way I looked. I signed up that night for a lifetime subscription. Soon after, I started working with my first personal trainer, Ernie Bauer. When I walked into his gym I was met by a 50-year-old former Navy SEAL who took one look at me and said, "I don't know, old man. You look like quite a challenge." That was exactly what I needed to hear: His challenge would become my challenge.

One month into his balls-to-the-wall program I read about the first winners of the 1997 *Body-for-LIFE* contest. I looked at the before-and-after pictures of the participants and thought to myself, *These people can't be for real*. I was amazed at the way so many people were able to transform themselves in such a short period of time, from being fat and out of shape to being fit and lean. I showed it to Anna, my girlfriend (and now my wife), and she said, "If those contestants could transform their bodies so can you. You need to do this, Jeff . . . start now!" I didn't realize it at the time, but what she said would

become the pivotal moment that has truly saved my life.

I raced to have my “before” pictures taken, then I told Ernie what I wanted to do. I had just 19 weeks to make a significant change in every aspect of my life. I gave up all of my old habits—including drinking and eating way too much—and put myself on a low-glycemic/low-fat diet that I’ve been following ever since, and that diet is what forms the basis of the program outlined in this book. I started taking supplements and plunged into an exercise program that I was really not prepared for. Quite honestly, the first few weeks were pretty rough: I felt exhausted, sore, and beat up most of the time. Five mornings a week I would get up at 4:00 a.m. and drive to Ernie’s gym. I had to train very early in the morning so I could get my hospital rounds in and make it to my office by 9:00 a.m. Ernie taught me how to lift weights, how to build muscle and strength, how to eat clean, and how to lose body fat. He showed me how taking small steps consistently can turn into huge strides. Most important, he helped me reach down deep inside myself and maximize every last bit of my potential. He gave me the desire to set goals as high as possible and gave me the tools to reach those goals in small, yet precise, steps. He taught me the importance of working outside my comfort zone in order to achieve the changes I needed.

Nineteen weeks is not a long time to make a complete transformation, and there were many, many days when I thought I just wasn’t going to be able to make it. Yet gradually I began to see real results. My LDL (bad cholesterol) went from 164 down to 80, and I started feeling better and stronger. But the mirror told the story: I could see significant changes in my physique every time I took out my “before” photos and compared them to the new me. I was beginning to like the way I looked for the first time since I graduated from medical school in 1975.

I also became obsessed with the connection between what I ate and how I felt. I read everything I could about improving nutrition, and I began a master’s degree program in sports nutrition and exercise science at Marywood University in Scranton, Pennsylvania. I was taking classes with a highly motivated group of 20-year-olds while continuing to practice family medicine full-time and preparing for the Body-*for*-LIFE challenge. Yet for the first time in years I had all the energy I needed to make it through those grueling months. Looking back, I loved every one of those days.

By the end of 1998 I was just about to turn 60, and I had completed the Body-*for*-LIFE competition. I’d submitted my “before” and “after” pictures four months earlier. A few weeks before my birthday, Bill Phillips’s mother called and told me I was one of the finalists in my age category. Then, on Monday, December 7, I got a call from Porter Freeman, the 1997 winner in my age category, who was then and continues to be my role model. Porter immediately asked, “What would you do, Dr. Life, if you were the winner?” I thought he was just jerking me around until he told me the real news: I *was* the winner. In just 19 weeks I went from being a dumpy old man to becoming a Grand Champion body builder who had just won a brand-new Corvette and \$10,000 and transformed not only my physique but also my health.

I immediately started incorporating the program that I followed into my medical practice, trying to get every man who came into my office to experience what I had just gone through. Before my transformation I was practicing medicine the way I had been taught: providing care that was centered on treating existing disease. But once I realized how much better I felt by taking a proactive approach, I began to change my focus to disease prevention, and I attempted to get my patients to start improving their health through better eating and exercise. It was tough going at first because many of my patients were just like most American men: They thought that their chance of looking and feeling better as they got older was just about zero. But as they heard my story and saw my results, many of them started to come on board. I always started with cleaning up their diet, and then once they were beginning to see results I would get them on an exercise program based on their current health status. I stand by the

approach, which is why it is perfectly fine for you to start my program by changing your diet.

~~I continued to train consistently and ate pretty clean, but four years later, I began to notice that I was losing ground—gaining abdominal fat and losing muscle mass as well as strength, plus my energy and sexual function were beginning to decline again. It was frustrating, to say the least, because my regimen hadn't changed: I was training as hard as ever but not seeing the same results. Everything was becoming more difficult, whether it was getting up and practicing medicine, going to the gym, or making love with my wife.~~

Then, in 2003, I met several Cenegenics Medical Institute doctors, as well as Dr. Alan Mintz and John Adams, the founders of this nationally known medical practice. I learned then that they promote an exercise and nutrition program in combination with correcting hormonal deficiencies, which at the time was completely unconventional, cutting-edge medicine. I was intrigued, and I joined the Cenegenics physician training program in age-management medicine. At the same time I decided to get my own levels checked, and I learned I had major deficiencies in testosterone, DHEA, and growth hormone. That explained why I was losing muscle mass, strength, and endurance—and why I also was accumulating belly fat and battling low energy levels, sluggish thinking, and even depression. The diminished hormones also explained the other major wall I had hit: a decrease in sexual function.

I became a patient of Cenegenics in June 2003. Within two months I had already noticed profound changes in my physique and energy levels. My physician had corrected my hormone deficiencies while I continued my low-glycemic/low-fat nutrition program, combined with the right exercise and key supplements. I went from exhausted to exhilarated once again, and I also started losing belly fat and gaining clarity in my thinking, not to mention that my sexual function had improved. In January 2004 I became a senior institute physician for Cenegenics and moved out to Las Vegas, and I've been here ever since. In 2006, Cenegenics began using my image for their marketing campaign, which they continue to do to this day (but with a more recent photo, of course).

In 2007 I ran into another roadblock. I was almost 10 years into maintaining a healthy lifestyle and in excellent physical shape, yet my cardiologist was still concerned about my heart. Even though I was doing everything right, the advanced heart disease caused by my poor habits from the first 60 years of my life required that I get two stents. I was devastated, but then I realized that if I had never started taking care of myself I would not be alive at all. What's more, it's made me even more determined to prevent heart disease from happening to anyone else: This has become my mission in life.

And the rest, as they say, is history. It has now been 16 years since I began my complete physical transformation. I've been fortunate enough to be able to share my story with thousands of men all over the world so that they can achieve what I have: an enhanced level of fitness and great health. Best of all, not only do I feel great, but I've been able to improve my physique and my good health over all the years. In fact, in many ways, I'm stronger, healthier, and more fit than I was when I first got into shape. I've been able to stay strong and lean, reduce my cholesterol levels, reduce chronic or "silent" inflammation, reduce blood sugar levels, eliminate biomarkers for heart attack and stroke, and avoid diabetes. My exercise stress tests have continued to improve year after year.

Every day I'm grateful that I've been able to sustain this good health. And I'm absolutely amazed that at 75 years old, I have six-pack abs. Even though I exercise every single day, I'm still shocked when I look at myself in the mirror. I never would have believed that a 75-year-old man could have this body. I sure didn't believe it before I started. Now I believe it, because I achieved it. I look at all the guys I know in their 40s, 50s, 60s, and 70s who have huge bellies. I'm sure these men think that there is no way in the world they could ever, ever, have a six-pack. But I'm here to tell you that you can, and that's what this book is all about.

Other people I meet are just as astounded by the fact that I have a six-pack as I am. Once, when I was lecturing in Brazil, I was interviewed for a radio show and the host asked me if I had abdominal implants. I never even heard of that! But it just goes to show you how many people find it unfathomable that a guy my age can be in such good shape.

Having six-pack abs is not only my badge of fitness; it is also how I outwardly show the full extent of my internal health. In order to achieve a six-pack, you have to get rid of visceral fat, which is considered by most experts to be the single best predictor of heart disease. If you can have six-pack abs, then you have really reduced your risk for having a heart attack or stroke. Studies have shown that young men with weak abdominal muscles are at the greatest risk for dying early, before age 55. And if you're older, the impact your gut has on the rest of your health is profound, to say the least.

Now It's Your Turn

Whether you are 26 or 80 or anywhere in between, it's not too late to get with my program, which can literally change your life. And just as I did, we're going to start off by cleaning up your diet. The reason is simple: You can exercise 24 hours a day, but you won't get as much out of any of that time unless you are eating properly. My strategies for weight loss will help you evolve from a sedentary lifestyle to a more active one, but you need to start by eating right in order to fully support your exercise program.

Your first goal is to commit to the progressive Life Plan Diet for at least eight weeks, and then switch over to my first book, *The Life Plan*, and start adding vigorous exercise to your daily routine. Once you start noticing the changes that accompany weight loss—to your body, your thinking, and your energy levels—you'll be even more motivated to get to the gym. Besides building strength and muscle, a cardio workout will further speed up your body fat loss, and weight lifting will help you burn more calories all day long.

Having a six-pack means that I have a strong abdomen. However, you should know that even though I eat clean and exercise every day, I spend under 30 minutes a week working my abs. Sit-ups and crunches are not what gets you a six-pack: It simply comes from reducing body fat. That's why I'm convinced that you don't need rigorous exercise to get you on track to significant fat loss, especially if you are very out of shape. I want you to start dropping body fat immediately, because that will ultimately put you in a better position to successfully exercise—both physically and psychologically. You'll be more likely to achieve your goals when you aren't overwhelmed and can focus on just one part of the program at a time. Then, when you start to drop body fat and start to get in better shape, you can ease into a formalized exercise program and experience ever better results.

You should also know that this diet isn't exactly exercise-free. You will be doing moderate walking right from the beginning. You'll begin to build up your cardiovascular endurance slowly. This is especially important for men with a lot of belly fat. The little bit of walking will also keep your mind off your old, bad eating and drinking habits, and reinforce making better food choices as you follow the diet.

The truth is that foods we choose to eat profoundly affect our physical and mental health, our athletic performance, and how we age. Researchers are continuing to uncover the direct links between poor food choices and the frightening increase in chronic diseases such as diabetes, heart disease, obesity, and Alzheimer's disease. Yet even though I know exactly which foods will make me sick, and certainly make me look and feel older, it is often not enough to stop me from eating things I know are bad for me. It is a constant, daily battle for me and my patients; a battle that I have learned how to win, and one that you

can win as well.

~~I'm not going to lie to you: The challenging exercise program that I put myself on 16 years ago has~~ been easy to keep up with when compared to my continuing war with what I want to put into my mouth. My relationship with food and drink has always been the toughest aspect of my own personal health journey. Before my transformation, I ate too many of the wrong foods, and way too much of them—breads, white rice, ice cream, any and all chocolates, all kinds of sweets, breakfast cereals, fried foods; the list goes on and on. Like most men, I'm still battling with a borderline consumption disorder, and it doesn't end with food. I'm the first to admit that I can easily drink way too much. Even today, if I start eating the wrong foods or drinking alcohol it isn't long before I'm completely off track.

I also know that my experience with eating is similar to that of most of my patients. It's hard work to really eat clean and exercise properly, especially in the United States. There are so many easily accessible food and drink temptations, it's no wonder so many dieters fail. Most of us live in areas where we drive around all the time instead of walk, which is another reason why so many men almost unknowingly let their health go. Then, when they're totally out of shape, it's very difficult to start a program and make a significant difference. Yet I know firsthand that it can be done. If you can win the eating battle, you can win the war against excess body fat and poor health. By avoiding the foods and beverages that can make you sick as well as fat and can ultimately kill you, you'll see a complete reversal in the signs and symptoms of aging, and you will drop those unnecessary, unhealthy pounds and increase your metabolism and energy levels.

The first step is to understand why you need to lose weight in the first place. Part One of this book will show you exactly how your weight—and specifically your belly fat—is affecting your physical, mental, and sexual health: three areas that men surely cannot let go. You'll learn how to determine how much fat you really need to lose and how much muscle you need to gain, and create a strategy based on your current health for moving forward so that you can assess all of the real, positive changes you can achieve.

Part Two then shows exactly how to shed those pounds. You'll learn how to choose the best foods that can improve your health and help you achieve your fat-loss goals efficiently. There are four distinct diets that work together: You'll move effortlessly through them, or choose the one that works best for you in terms of your current health, your existing exercise program, and your goals. The first is the JumpStart program, which is an excellent way to drop weight quickly, especially if you haven't dieted or exercised before. This new plan has gotten rave reviews from my patients, who have lost an average of 10 pounds in just two weeks. Most important, it's a total mind-reset diet that will transition you from bad habits to good ones in just a few days.

The remaining three diets have each been featured in my two previous books, *The Life Plan* and *Mastering the Life Plan*. In this edition, I've included more of Annie's meal plans, recipes, and food options for you to work with while you follow the Basic Health, the Fat-Burning, or the Heart Healthy Diet. You'll choose one of these diets to follow once you've completed the JumpStart Diet, and you can stay with any of these diets forever, or move up the ladder to a more restrictive diet when you reach a plateau or are ready for a new challenge. You'll move along at your own pace while enjoying foods you know that you're going to love. Once you're on the right track, you can add the rigorous exercise programs I've outlined in my other books for the best results.

Part Three adds the missing piece that almost all other diet books fail to include: how to achieve and maintain weight loss success as you get older. Women already know that it gets harder each year to lose weight and get into shape, but the truth is, it's just as difficult for men. The reason is an insidious drop in hormone levels. For men, correcting hormone deficiencies through either food, exercise, or medication

therapies may be the final piece needed for you to lose weight faster than ever, and keep it off. ~~Addressing declining hormone levels is safe and effective, and not doing so just may be what's holding you back from achieving success.~~

I'm thrilled that you've chosen to begin this journey with me. I know that if you stick with the program you simply can't fail. The only thing you'll lose is the burden of the weight you've been carrying.

LOSE WEIGHT AND GET MORE OUT OF LIFE

Age Management through Waist Management

The one area of the body that disappoints most men, especially as they get older, is their stomach. Abdominal or visceral obesity—what we often refer to as the pot belly or beer gut—is such a common occurrence that most men think of their expanding waistline as a rite of passage or a normal part of aging that can't be changed. This is, in fact, partially true: As men get older, they are at much greater risk for developing belly fat. But let me tell you, adjusting your belt a notch every few years is not “normal,” and it's the one part of your body that can eventually do you more harm than good. That's why this book focuses almost exclusively on lightening the load that's resting at your belly.

Belly fat results from an excess production of body fat that is deposited inside the abdominal cavity, packed between and around your internal organs. This is referred to as visceral fat and is composed of several types of fat deposits, including mesenteric, epididymal white adipose tissue, and perirenal fat. This combination is one of the reasons why it is so difficult to get rid of it. Another reason is human evolution. The male belly evolved to be the great repository for stored fat, which was burned as needed in order to keep our distant cavemen ancestors alive through periods of famine. Fortunately for most of us, famine is no longer an issue, yet our bodies are still programmed to desperately hold on to excess fat stores at the waist for a future need that practically never arises.

There are many factors that may cause an increase in the production of belly fat, which range from what some would consider the most obvious to what others find highly speculative. We do know that when a person takes in more calories from food than his or her body can expend, the excess is converted into body fat and stored for later use. When we continue this cycle on a daily basis the stored fat is never required, and therefore accumulates all over the body: in the arms, legs, and most noticeably, the belly. Yet we don't know exactly why some men store more excess weight than others. The widespread misperception is that it is simply the result of eating too much or exercising too little. While maintaining a proper diet and exercising regularly do matter, these environmental influences alone cannot always determine an individual's waistline. For example, many men who are overly fat eat a relatively clean diet, exercise daily, and still have trouble losing weight.

Some studies will point out that body fat may be related to the excessive consumption of one nutrient group over another, relating weight gain to eating too much fat or carbohydrates, or foods with gluten. This is why fad diets exist. Those are the ones that are based on a study or two that suggest you forgo one particular food group in order to lose weight. Yet the next year another study shows something entirely different. These fad diets are often hard to maintain because the results are often only temporary. When you entirely forgo a particular nutrient group you may achieve real weight loss, but then other physical or emotional stresses can arise that the body has to respond to, and instead of focusing on burning body fat your body simply gets used to your new way of eating. More often than not, after the end of a couple of weeks you're back to where you started in terms of your weight. Or worse, the body has overcompensated, leading to more cravings and weight gain. And all along the way you've lost the positive aspects those nutrients hold that the rest of your body needs to function optimally.

There has been real scientific evidence that the foods we eat can affect how we look and feel. Science is pretty much in agreement that highly processed foods are one of the major culprits of the obesity

epidemic here in the United States. Americans have a real dependence on readily available, highly processed food that our bodies rapidly assimilate into sugar and then mainline right into our bloodstreams, leading to insulin resistance and type 2 diabetes. However, there are also foods that can make a real positive impact on our health and our waistline. For example, we now know that the quality of protein one eats is inversely related to one's percent of abdominal fat. Quality protein is defined as having a high ratio of essential amino acids within each type of dietary protein. In other words, the less quality protein or the fewer essential amino acids we consume, the more at risk we are for developing abdominal fat. Essential amino acids are found in lean red meats, chicken, fish, protein shakes, some dairy products, such as cottage cheese and yogurt, beans, legumes, and egg whites. While you are following the Life Plan Diet, you will be having a quality protein in each and every meal, along with the proper amounts of the right dietary fats and complex carbohydrates. This perfect balance ensures that not only will you lose weight, you'll also be getting a full complement of all the nutrients your body and brain require, and you'll feel full and satisfied throughout the day.

Other research points to abdominal weight gain as genetically predetermined: If your parents were overweight you might have a gene that predisposes you to the same fate. Others blame the environment, not the air we breathe, but the environment we create, or that has been created around us. Studies show that when you hang around with people who are overweight, you will gain weight as well. A 2007 *New York Times* article reported that studies of both animal and human populations put weight gain firmly in the hands of one's mother and her lifestyle choices during pregnancy. According to the article, it is surprising but true that mothers who ate sparingly during their pregnancy were likely to have children who grew into fat adults. Other studies point out that children are more likely to be fat if their mother smoked during pregnancy. While all of these things may be true, it's clearly too late to continue to blame your mother or your friends for your expanding waistline. You need to start taking responsibility for your own health, because it's your future that you must protect.

Our stressful lifestyle is another culprit. Elevated levels of the stress hormone cortisol are thought to contribute to abdominal obesity. Cortisol is the hormone released by the adrenal glands in response to a crisis. One of the most pronounced aspects of a high-cortisol state is a shutdown of digestive activity. During periods of stress, the brain instructs the body to prioritize its functions, and one of the first to go is the proper digestion of food. The body shifts its energy away from digestive functions and toward the extremities, making them ready for fighting or fleeing. If there was a real emergency, you would be glad that your body has this built-in intelligence. But this reflex works against you when stress is part of your daily existence, be it your work life, your home life, or even the way you are constantly worrying about your weight.

A secondary effect of cortisol is that it increases the production of insulin, the fat-storing hormone. Insulin is your body's most effective way of preserving calories gained from digestion and storing them for later use. Unfortunately, these calories are converted into body fat, and when there is excess cortisol production, this fat typically accumulates around and inside the abdomen. The cortisol/insulin response was created thousands of years ago when a common trigger of stress was famine or lack of food: The body responded by slowing metabolism and storing belly fat in order to tap into vital nutrients for later use. However, each time we stress about something, the brain recognizes the shift and will release more insulin, and your body will reflexively store calories instead of burning them.

As Your Waistline Grows, Your Health Plummet

Aside from the way excess belly fat makes you look, it is affecting the way you feel right now. Your weight affects every aspect of how your body functions. Carrying around more than 10 pounds of body fat can make you experience any or all of the following:

- Anxiety
- Back pain
- Cravings for carbs (French fries, pizza, beer) or high-sugar foods (fruit, ice cream, cookies)
- Cravings for food even when you know you're not hungry
- Depression
- Diminished sexual function
- Fatigue
- Feeling old
- Fluid retention and swollen legs
- Increased difficulty exercising
- Loss of stamina
- Low self-esteem
- Poor posture
- Shortness of breath
- Sleep issues
- Slow moving
- Sore joints
- Sore muscles

Your long-term health outlook isn't all that great either if you are carrying around a spare tire. In 2011, the American Medical Association officially recognized obesity as a disease, and one that is linked to a significant increase in your risk for developing other serious conditions, including heart disease, type 2 diabetes, high blood pressure, stroke, liver disease, sleep apnea, osteoarthritis, and Alzheimer's disease. Scientists have also come to recognize that body fat, instead of body weight, is the key to evaluating obesity and its adverse consequences to your health. In a 2013 article published in the *Journal of the American College of Cardiology*, researchers found that excess stomach fat is significantly more dangerous than fat located in other places on the body over the long term. The study revealed that people with excessive abdominal fat have greater risk of heart disease and cancer than those with a similar weight who carry fat in other areas of the body. In fact, there is no better indicator of premature death than a large belly. If you want to live a long and healthy life, abdominal weight gain is the number-one thing you've got to avoid. More important, it's never too late to get rid of the extra pounds you are currently carrying around your belly.

Belly Fat Is the Worst Kind of Body Fat

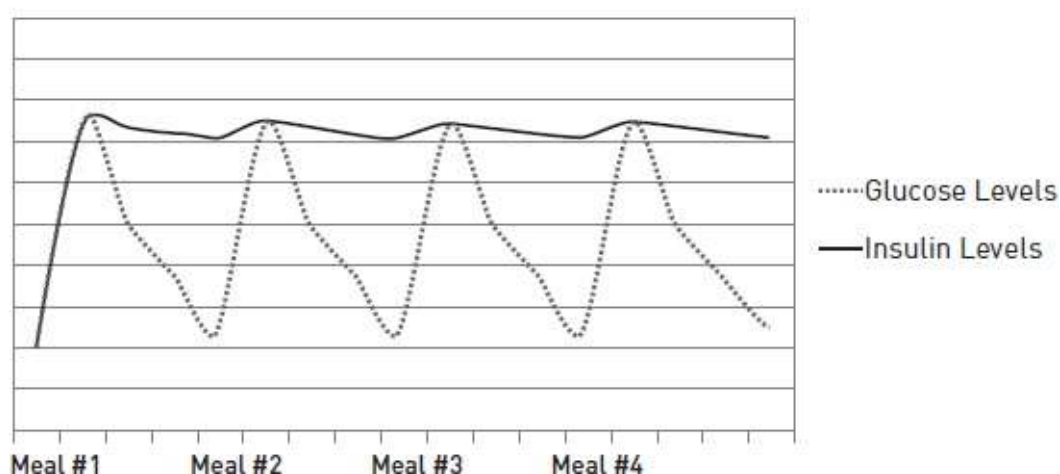
Belly fat doesn't just hang out quietly, like the fat on your arms and legs or under your skin (subcutaneous fat), or intramuscular fat, which is found within the muscle fibers. The belly is an especially dangerous place for fat to build up, because it is located close to vital organs and their blood supply. Abdominal fat can collect inside these organs, making them less efficient. And as it increases, your belly fat literally takes on a life of its own, and it begins operating as a separate organ that produces and releases free fatty acids and dangerous inflammatory hormones that affect your entire body, causing accelerated aging, heart disease, stroke, type 2 diabetes, cancer, and Alzheimer's disease. And the bigger your belly gets, the more it secretes these harmful by-products.

The first type of secretions is a group of inflammatory hormones called *adipokines*. Because these molecules alter blood-clotting mechanisms and blood pressure, decrease HDL (good), and increase LDL (bad) cholesterol levels and triglycerides, they can facilitate the development of insulin resistance and increase your risk of cardiovascular disease. These hormones and fatty acids are then released into the bloodstream and are directly transported to your liver, where they can interfere with insulin metabolism and create high insulin levels, poor blood sugar control, salt retention, high blood pressure, and inflammation.

Belly Fat and Diabetes/Insulin Resistance

Produced by the pancreas, insulin is a hormone that regulates blood sugar levels (glucose) and fat metabolism. Every time you eat, insulin is released to help your body use or store the glucose it gets from food. When men follow the typical American diet they eat highly processed foods that spike their blood sugars. These foods result in elevated levels of insulin that persist throughout the day, and their bodies begin to lose sensitivity to their own insulin. This causes insulin resistance—the first step toward type 2 diabetes. This type of diabetes is caused by poor nutrition and lack of exercise: As body fat levels increase, insulin sensitivity plummets.

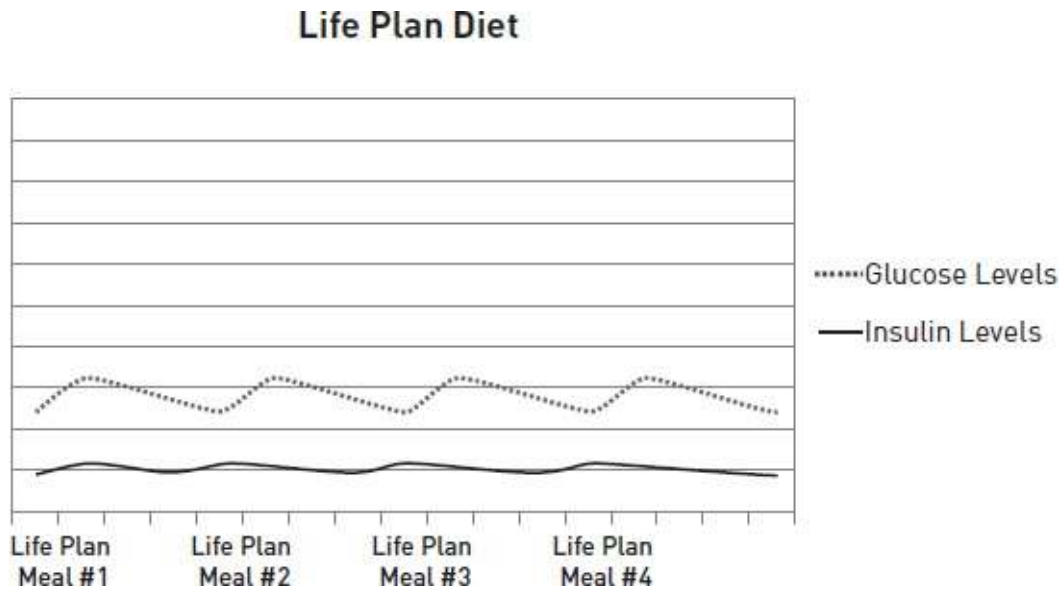
Typical American Diet



As insulin sensitivity drops, insulin secretion from your pancreas increases, triggering a multitude of changes, which include damage to the lining of your body's blood vessels (endothelial dysfunction). Insulin also interferes with the enzymes that break down fats in your blood, and with your kidney's ability to get rid of sodium (causing high blood pressure). Insulin resistance is associated with chronically elevated levels of insulin and blood sugars (although blood sugars can be normal, especially early in the disease) and is present in most people with cardiovascular disease. High insulin levels also adversely affect your

body fat percentage, aerobic capacity, muscle mass, strength, and immune function, all of which make even more difficult to exercise. For all of these reasons, excess levels of insulin may be the single most important factor in accelerating the aging process.

Insulin not only promotes big bellies, but also prevents our fat cells from converting their stored fat into the free fatty acids that we can use for energy. Because we are unable to tap into this huge energy reservoir, we get tired and hungry between meals when our blood sugars are low, and we are subsequently driven to eat more sugar-rich foods to satisfy our energy needs. This promotes a vicious cycle of unstable blood sugars, elevated insulin levels, and uncontrolled eating, which persists and actually worsens over time. But when insulin levels are kept low you not only reduce your risk for both diabetes and heart disease, you are much less likely to convert calories into body fat. All insulin-related problems can be avoided by following my Life Plan Diet, which is specifically designed to keep blood sugars and insulin levels low.



Another problem with living with elevated blood sugars is *glycation* (or glycosylation), the process which glucose that's floating around in your bloodstream becomes attached to proteins and nucleic acids and produces new, very dangerous chemical structures. Ninety-nine percent of all cellular activities depend on the vast array of proteins in our bodies, and when sugars bind to them they become dysfunctional and create major problems. These glycated proteins are called *advanced glycation end products* (AGEs), and they attack collagen, which is used to make ligaments, tendons, and other connective tissue important for muscle strength and growth, as well as nucleic acids, which are vital to the synthesis of new protein. Glycated proteins become very "sticky" and adhere to the inside walls of blood vessels, causing endothelial dysfunction, which leads to vascular dysfunction and arterial plaque. This then obstructs blood flow to the heart (leading to heart attacks), brain (causing strokes), and the hands, feet, eyes, muscles, and other vital organs. In extreme cases, a lack of blood flow to the extremities can necessitate amputation. Over time the function of all of our cells and arteries becomes seriously compromised, resulting in significant health consequences, including both mental and physical deterioration. Glycation is considered to be one of the most significant biological markers of aging. However, when glycation rates are controlled and kept low by the right nutrition, insulin levels are also kept low. Doctors can measure glycation by using a blood test called *hemoglobin A1c*. If you follow nutritional specific nutritional recommendations in combination with my exercise program you can minimize glycation and add 10 to 15 years to your life. That is, 10 to 15 additional years of vitality, productivity, and great health—not 10 to 15 more years in a nursing home.

One of the major goals of this program is to enable you to increase your own production of the necessary male hormones, including human growth hormone (hGH). hGH is measured as IGF-1 (Insulin-like Growth Factor 1). As the name implies, Insulin-like Growth Factor 1 is structurally related to insulin. These two hormones share the same receptor sites on cells, creating a competition in which only one hormone will be predominantly effective. Because you need to optimize growth hormone levels to achieve great health and quality of life, my plan is designed to effectively manage your insulin, which will help you achieve healthy levels of growth hormone on your own. A nutrition program that focuses on keeping insulin levels as low as possible will enable you to increase your own natural production of IGF-1.

Controlling insulin levels is the primary objective of my nutrition plan, because it is the key to longevity and a disease-free life. This can best be achieved by eating small, frequent meals throughout the day and carefully limiting your carbohydrate choices to those with a low-glycemic index (mostly vegetables and nontropical fruits and only a few types of whole grains). It is also important to always eat a high-quality, low-fat source of protein with every carbohydrate.

A study in the *American Journal of Nutrition* compared diets with the same number of calories but different protein-to-carb ratios. The diet with a protein-to-carbohydrate ratio of 0.6 (similar to my Life Plan Diet) keeps insulin levels low and maintains a positive protein balance. The diets higher in carbohydrates and lower in protein, such as the American Heart Association Diet (with a protein-to-carbohydrate ratio of 0.25), tend to increase insulin secretion and produce a negative protein balance, allowing your body to begin breaking down your own muscle mass to provide energy for your body. That's why when you structure your nutrition program around keeping blood sugars and insulin levels in check and increasing protein you will get another big benefit—increased muscle size.

In just four to seven days of eating “clean” you will have your blood sugar and insulin levels in the ideal metabolic range, and by two weeks into the Life Plan Diet you will no longer be plagued by feelings of fatigue, hunger, deprivation, and cravings. You'll experience a marked improvement in your mental focus, exercise endurance, strength, and leanness. When your body fat disappears and your muscle mass increases, your insulin resistance will also diminish, taking a huge burden off your pancreas so that it can now secrete less insulin throughout the day. What's more, the greater your insulin sensitivity, the more effective you become at removing sugar from your blood and tapping into your fat stores for your energy needs, leading to even more belly fat loss. *It's physiologically impossible for you to burn your body fat for energy when your insulin levels are high.* You'll also reduce your desire for consuming extra calories because your body can now tap into stored body fat more efficiently. You literally become a fat-burning machine!

Belly Fat and Inflammation

Inflammation is the body's way of initiating healing. It is a complex biological response of vascular tissues to harmful stimulants or irritants. The classic signs of inflammation are pain, redness, and swelling, which occur as a protective attempt to remove injurious stimuli from the organ they are attacking. For example, when you have an allergic reaction, the vascular tissues in your eyes and nose may swell up, causing pain (headache) and redness in the eyes. However, when you remove the offending allergen, the inflammation ceases.

Inflammation that is unregulated can result in excessive internal activity and tissue destruction, which can lead to a host of diseases. This type of chronic inflammation can occur only internally, and you may never realize that it is taking place. That's why chronic inflammation is often referred to as “silent

inflammation.” This insidious form of inflammation is thought to be at the root of all of the age-related diseases, and is caused by prolonged levels of elevated insulin, which you now know occur with carrying around excess fat. The men whom I see in my practice who have elevated inflammatory markers all have big bellies, and as I said earlier, their belly fat itself is causing this continuing inflammation.

The good news is that the fix is relatively easy. By reducing belly fat through diet you will reduce insulin resistance and thereby inflammation. Then you will be able to dramatically slow the aging process and prevent or reverse serious disease. The best way to decrease the production of insulin is by following a noninflammatory, low-glycemic diet that controls insulin production, like the one in this book, which is rich in lean proteins, omega-3 fatty acids, antioxidants, and minerals. These include colorful vegetables, brown rice, yams, and sprouted grain breads.

Belly Fat and Heart Disease

When we compare the types of body fat on men to women, men have close to twice the amount of belly fat. It’s been hypothesized that this difference in the location of body fat is the primary reason that heart disease is more prevalent—and more deadly—in men than in women. If your waistline is greater than 38 inches measured just above your belly button, you’re at a higher risk for developing two or more risk factors for heart disease. These include glucose intolerance (elevated levels of blood sugar), insulin resistance, dyslipidemia (abnormal cholesterol—low HDL and high LDL—and high triglycerides), hypertension, and inflammation. The reason that I’m so committed to treating men before they develop any of these risk factors is that the number-one symptom of heart disease is sudden death.

Inflammation is intrinsically connected to all phases of cardiovascular disease. One serious outcome of inflammation is atherosclerosis (plaque buildup), which occurs when artery walls thicken as a result of the accumulation of fatty materials such as cholesterol and triglycerides. Atherosclerosis is a chronic response that involves an increase in inflammatory white blood cells, which is promoted by an increase of LDL or “bad” cholesterol and a decrease of HDL or “good” cholesterol. Atherosclerosis can begin in childhood as a result of damage to the endothelium (the thin lining of the arteries). Most heart attacks and strokes occur when a blood clot forms in inflamed plaque, cutting off the blood supply to the affected heart or brain tissue. The fatter you are in and around your waist, the more likely this is to happen, because of the chronic inflammation you are producing in your blood vessels.

Take my experience as an example. When I was 60 I learned that I had advanced, chronic heart disease involving my coronary arteries, which began back in my 20s. According to my cardiologist, what saved me from an early death was my wife, Annie, motivating me to enter the *Body-for-LIFE* contest along with the healthy aging program I have been following ever since: a combination of low-glycemic, low-fat nutrition; supplements; a vital exercise regimen; and correcting my hormone deficiencies. This combination helped me get rid of my gut so that I was able to decrease inflammation and stabilize my heart disease. I’ve learned over the past 16 years that everything I put in my mouth can either heal me or kill me. Knowing this has totally changed my attitude about food and drink. Now it’s much easier for me to make the right choices so that I don’t continue to form plaque and promote silent inflammation that could lead to a heart attack or stroke. If I had known the importance of making good, healthy food choices when I was in my 40s, I would have been able to totally prevent my coronary artery disease. The program that I’m outlining in this book will guide you along the path of healthy eating that I wish I had known about and started decades ago. You’ll have the knowledge I was missing, and you will avoid ending up among the 70 percent of men who die of heart disease prematurely simply because they have made bad lifestyle choices. Heart disease may still take me out of this world, but I definitely know that

it does, I have delayed it by many years as a result of all the healthy things I promote in my books and on my website.

Belly Fat and Metabolic Syndrome

Metabolic syndrome occurs when your excess weight affects all of the above-mentioned conditions. It is a cluster of abnormalities that include high blood pressure, increased blood sugar, excess belly fat, and abnormal cholesterol levels. These conditions occur simultaneously, increasing your risk for diabetes, heart disease, stroke, cancer, and Alzheimer's disease (all of the age-related diseases). Metabolic syndrome is also linked to sexual dysfunction.

However, metabolic syndrome is completely and totally preventable and reversible. Weight loss, exercise, and correcting hormone deficiencies are the keys to preventing this disease as well as losing belly fat—especially belly fat.

Belly Fat and Asthma, Snoring, and Sleep Apnea

A recent Mayo Clinic study has linked sleep deprivation to obesity. The study found that people who achieved fewer than five hours of sleep a night consumed 549 additional calories during the day. In another 2012 study published in the *Journal of Clinical Endocrinology & Metabolism*, it was shown that a poor night's sleep can activate the appetite-controlling part of the brain, increasing levels of hunger throughout the day. We also know that being overweight is one of the causes of sleep apnea, which can disturb sleep patterns all night long.

Men who have large bellies have trouble breathing day and night. This is because they have difficulty moving their diaphragm, a sheet of internal skeletal muscle that extends across the bottom of the rib cage and separates the thoracic cavity (which contains the heart, lungs, and ribs) from the abdominal cavity. The diaphragm is where respiration occurs: As the diaphragm contracts, the volume of the thoracic cavity increases and air is drawn into the lungs. But when your belly is full of fat, your diaphragm cannot move down to expand your lungs, and this obviously interferes with your ability to breathe. You end up taking shorter, shallower breaths, which inhibit your ability to fully oxygenate your blood and send oxygen to all your vital organs. The buildup of belly fat is a very slow process, so men don't realize their ability to take air into their lungs is impaired. Most will attribute their shortness of breath to aging or being "out of shape," but not to their belly fat. I should also point out that it really doesn't take much belly fat (5 to 10 pounds) to profoundly affect your ability to breathe. Just carrying an extra five pounds will cause me to feel short of breath, and I'm in excellent athletic shape.

This whole disturbance is analogous to women during pregnancy, who have trouble taking in enough air. But pregnancy is a temporary condition that ends as soon as the baby is delivered. Pregnant women know why they are short of breath; most men with belly fat don't. Men who carry around belly fat can't resolve poor breathing habits, and in fact, their breathing gets worse as they gain more weight. These are the folks who are likely to be hospitalized for asthma and other respiratory problems. A 2003 study in the journal *Chest* reported that 75 percent of patients treated for asthma at the emergency room were overweight or obese. What's more, abdominal obesity affecting pulmonary function occurs more often in men than in women.

The same problem occurs at night, with potentially more devastating results. Obstructive Sleep Apnea Syndrome (OSAS) is another breathing problem that affects overweight men. If you have been told that you snore loudly, wake up in the middle of the night gasping for air, or feel constantly fatigued in the

morning, you may have OSAS. Sleep apnea refers to the phenomenon of sudden breathing interruption during sleep. It disrupts the stage of sleep in which you experience rapid eye movement (REM) and prevents you from attaining a good night's rest. In the worst case, it can kill you, because you are depriving your brain of the proper levels of oxygen. During sleep, when oxygen levels naturally start to decline, people with sleep apnea lose the automatic stimulus to keep breathing. When this happens, oxygen levels drop and carbon dioxide levels increase, which forces breathing in short bursts that can be violent enough to wake you up.

Sleep apnea occurs when two different issues converge: poor sleep position and excess body fat. Together these cause airway blockage in both the chest and the neck, resulting in both snoring and sleep apnea. The greater the blockages, the louder men snore, and at the same time, the blockages lower the air volume as well as overall oxygen levels in the blood.

Many overweight men are most comfortable sleeping on their back, causing additional pressure on the diaphragm, which interferes with their breathing. Sleep apnea can be resolved by using an external CPAP machine, which forces air and oxygen into the lungs all night long. If you already use a CPAP, continue to use it while you lose your belly fat. Once you've lost the weight, get another sleep study and you may be pleasantly surprised that you don't need it anymore.

Belly Fat and Sexual Dysfunction

The absolute most important component in my mind to sexual dysfunction is belly fat. When men successfully lose belly fat their self-image improves, and their performance improves. However, there are also some physiological reasons why men have problems with their sexual function. Although the public is vastly more educated about erectile dysfunction, or ED, thanks to those ubiquitous ads, many men are still embarrassed by their lack of performance and hesitant to talk to their doctors. Yet it's critical that you do address the issue head-on, because, aside from living with a disappointing sex life, your sexual function is actually a window into your total health. Your ability to maintain an erection and achieve orgasm on an average of three times a week is a key benchmark that you're healthy and physically fit.

Erectile dysfunction, which is defined as the persistent inability to attain or maintain an erection, affects over 30 million American men, an estimated 34 percent of men age 40 to 70. It is directly associated with cardiovascular disease, hypertension, diabetes, and metabolic syndrome. In fact, one of the first signs of heart disease is a reduction in penile hardness. An August 2010 study in the *Journal of Sexual Medicine* showed that typically men begin having ED issues four to five years before their first heart attack.

Erectile dysfunction is directly connected to another type of "ED," this time concerning the endothelium, the lining of your blood vessels, which is associated with circulation. Endothelial dysfunction can be the first rung of the atherosclerosis ladder, leading to heart disease and stroke. The penis is actually composed of an extensive endothelial surface interlaced with smooth muscle. Atherosclerosis (plaque buildup in your arteries) can occur throughout the body. So if the arteries supplying your heart with blood have atherosclerosis—or heart disease—it's not surprising that the smaller arteries of your penis are affected. For that matter, because of their size, the arteries of the penis narrow sooner than the arteries to your heart. This is exactly why ED is an early warning sign for heart disease and may be a predictive sign of stroke later in life.

But before you start popping those little blue pills, take off a few pounds. Close to 80 percent of men with moderate to severe erection problems are overweight or obese, which leads to the silent inflammation we discussed earlier. Although this time it's not so silent, because when the penile arteries

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