

## Paleo Solution - 177

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Robb Wolf: Hey folks, Robb Wolf here and if it feels to you like we've been here before, it's episode 177 again because Gregg and I did this one yesterday and it didn't record so.

Gregg Everett: 177.3.

Robb Wolf: Yeah. Actually that's true because our good buddy while both Gregg and I were contemplating a Seppuku after this thing didn't record then our good buddy Jim Laird] pinged us and he's like hey man when are we doing a podcast and I'm like right fucking now, we're doing a podcast. So we tried to get Jim on the line but Jim gets like 15 dozen phone calls a day and the only Skype he had access to at the time was on the phone. So we put a bullet in that endeavor. We will get Jim here on the show here pretty soon. But yeah.

Gregg Everett: It was off to a good start.

Robb Wolf: It was off to a good start. So today's podcast is liable to be quick because -

Gregg Everett: Because we have lots of practice.

Robb Wolf: We had some practice and I'm completely over it by now. So dude, what's going on? Anything new from yesterday or anything new that we talked about yesterday that is still actually worth talking about today?

Gregg Everett: I don't really remember what we have talked about. I think I may have mentioned though that if you're a Performance Menu subscriber, you would have probably just gotten an email about 20 minutes ago about the new changes we're making. New website, new publishing system everything new and super jiggy, that's been a long overdue upgrade so you'll have all kinds of new reading options and that means the same old good PDF entire issue that we've always done since 2005, individual article PDFs, all the articles are going to be available in HMTL format. You can read them right on your little computer. I will also have a mobile website, you can read all the articles on your little fancy handheld doodads. You can even hit a little button and send that shit to your Kindle. God forbid --

Robb Wolf: Nice.

Gregg Everett: -- you have a Kindle but you know what a lot of you guys do so. You pretty much will have no excuses not to read that content now because you can read it in every way short of actually just hardwiring it into your brain.

Robb Wolf: And we'll be getting to that next year.

Gregg Everett: We're working on it now.

Robb Wolf: Perfect.

Gregg Everett: Plenty of subliminal messaging though involved with that process so. Fair warning.

Robb Wolf: I like that, I like that. So I have nothing to report other than AHS was cool, very, very tiring. We brought the baby so I was playing Mr. Mom from like --

Gregg Everett: I thought it was Paleo FX.

Robb Wolf: Did I say AHS?

Gregg Everett: Yeah.

Robb Wolf: Paleo FX.

Gregg Everett: It was tiring.

Robb Wolf: Oh, yeah it was tiring. Paleo FX, Austin, good times, some good food hanging out with good people. Travelling with the baby though was a whole other gig. Like we've done a lot of stuff like that and being Mr. Mom from like 6:00 a.m. until noon, Nikki running the front desk booth, the front desk, desk and doing the prisoner handoff in parking lot and everything, that was a long weekend but it was a lot of fun. But I'm slowly recovering and we're right back at it.

Gregg Everett: Nice. Okay. Sponsors which ones do we have?

Robb Wolf: Show sponsors. Performance Menu, go to [performancemenu.com](http://performancemenu.com). When you sign up for the Performance Menu, you get 12 of the most juicy delectable back issues you could ever dream of. Performance Menu, the Journal of Nutrition Athletic Excellence if you take yourself serious as a

trainer, a coach, a human being, you should sign up for the performance menu.

Gregg Everett: Yeah, if you didn't get the Performance Menu, you hate yourself.

Robb Wolf: Yeah, yeah, quit hating yourself. Love yourself. Read the Performance Menu. Well Foods, WellFoods.com of Whole Foods has evolved into Well Foods and there's a whole funny backstory with that. Someday, we'll actually have our shit completely together with that food company, but WellFoods.com, we have grass-fed whey protein, we have snacks, we have jerky, we have jerky that is both low in sodium and low in sugar because god knows that sodium and sugar are not paleo so you shouldn't eat it.

Gregg Everett: Do you have jerky --

Robb Wolf: No, I'm just kidding.

Gregg Everett: -- that's growing meat?

Robb Wolf: No but somebody did -- it's really funny. This gal tweeted me a picture of her eating handful of Edamame the steamed soy beans.

Gregg Everett: Yeah.

Robb Wolf: And I was like hey kid that's all you and she's like, oh I'm sorry that was the wrong act. And I'm like so what, you're just like pandering the different food gurus like what's...

Gregg Everett: Yes.

Robb Wolf: What's your deal anyway.

Gregg Everett: Can I get a retweet? Can I get a retweet?

Robb Wolf: So Well Foods has got a rebrand, check that out. We're going to have affiliate information up for those folks soon.

Gregg Everett: Pretty soon it's just going to be called food.

Robb Wolf: Yeah it will just be fud, fud.

Gregg Everett: [Laughs]

Robb Wolf: Like the Far Side cartoon.

[Crosstalk]

But yeah. FrontdeskHQ.com, Front Desk is your mobile solution for service-based businesses but it's not just mobile. We've had some people who are a little bit afraid about going mobile with their business or they're concerned that it would make things too easy, too streamlined, too fast, too dynamic and so they want to use Front Desk on their desktop or their laptop. That's just fine and dandy, that still works too. But Front Desk HQ really should be your mobile solution for your service-based business and we're talking anything from dog walking to stroller striding, automobile mechanics. We've even got some accountants and all kinds of wacky stuff on there but maybe gyms and that sort of stuff. But basically if you need to take payments, point of sale, eventually they're going to have I think maybe three months down the road, some very, very cool skill tracking and some other stuff. So interesting deal with Front Desk HQ.

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Also, many people go into business thinking that they're starting too small to think about being big, they don't have enough infrastructure. They think that they don't need a business software to organize what they're doing. That is wrong. You're starting off on the wrong foot. You need all that support. You need a little bit of infrastructure. You need some planning. The that Front Desk HQ's pricing is structured, if you make \$500 a month if it goes \$500 a month of billing goes through Front Desk HQ your charge is about 5 bucks. So it's a 1% of revenue and then as you scale up and you're making the big dollars, then they have some flat rate options for you. But you want to check out FrontDeskHQ.com.

Finally BunnyRanch.com. Go check out the Bunny Ranch, Dennis Hof, all the girls out there. They were featured on HBO's Cat House, super cool folks. It's sex, drugs, and rock and roll folks I mean what can I tell you. If you click on the link, you know the not safe for work all the rest of that jive yada, yada, yada caveat imputer so there you go.

Gregg Everett: Sweets. All right let's do this.

Robb Wolf: Okay. Let's get the content --

Gregg Everett: It's Paleo Snopes. Mike says, "Dear Greg Rob Scrotchty,--"

Robb Wolf: Which we commented on just yesterday.

[Crosstalk]

Gregg Everett: We'll just go ahead and skip that joke

Robb Wolf: I wasn't sure if the Squatchy was deloused for this thing or not so. Yeah.

Gregg Everett: "There are some mysteries that need solving out here in LALA land. I also think that your listeners would love hearing you debunk or validate these things as we in listener land either (1) respect your opinion or (2) find it very entertaining. Question 1, Freez the Fat.. I've been seeing billboards for this all over the place in Los Angeles. I've heard you talk about lipo being better than the laser treatment as it oxidizes fat. Was curious if you thought at that freezing fat would work and if it did was it harmful? Are these folks just bilking the public?

Question 2, transdermal Patches. There is a company called Age Force that sells patches for HGH, testosterone, and fat burning among others. I was curious what your thought was on this sort of treatment versus oral supplements? Are people just buying expensive self-adhesive stickers?"

Robb Wolf: So the freeze the fat deal if you get in and dig around on PubMed, there is some stuff on cryolipolysis. You know, I think it would end up being very similar to the laser treatment in which what they're trying to do is like obliterate these fats cells. But then what happens is the fat is –you know, these fat cells which were living entities and have the potential for it creating inflammatory cytokines and fun stuff like that, they get blasted into your system. That hits your liver. You've got an inflammatory cascade. It doesn't really seem like a great idea and when you look at their before and after photos, most of the before photos look better. I'm just kind of like are you guys all stoned? Like who's doing this?

So yeah, I mean it seems to do a little bit of legitimate subcutaneous damage to the adipocytes. But there again eat well, get some sunlight, push away from the god damn dinner table. Don't entertain this foolishness. But it is Los Angeles so you entertain all the foolishness you want to.

Gregg Everett: Yeah. I think you made a point yesterday that if it's on a billboard in LA, it's probably pretty safe to ignore it.

Robb Wolf: Yeah. I mean unless it's like a 976 number kind of gig then you know jump right in both feet on that.

Gregg Everett: They still have those.

Robb Wolf: So I don't know. I don't know. Probably dating myself even mentioning that that --

Gregg Everett: Hah, get it? Dating yourself?

Robb Wolf: Don't ding. Oh and as to the transdermal patches, so these things the stuff for like the HGH and testosterone and whatnot, those are all these kind of homeopathic doses of this stuff which I just don't really get. They seem to have some other things like for DHEA and some pregnenolone and some stuff like that. I would need to see some kinetic studies on whether or not those things actually work. Like if theoretically they should like transdermal patches are a legitimate way to get hormones into people but whether or not the delivery system that those people are using is actually legit, I do not know. Like they have listed nowhere an indications of like transdermal kinetics or anything like that.

**[0:10:10]**

Gregg Everett: Well if it actually has the hormones in it, you can't. It's a prescription anyway so I don't understand the point.

Robb Wolf: Yeah. I mean you can do it. These homeopathic deals, they do it where you take some testosterone and you dilute it like 50 gazillion times and then theoretically it's supposed to work. But that's kind of funny too because the whole theory behind homeopathy is that you do the opposite of the thing. Like if you're allergic to poison oak, you have a little bit of poison oak in it and it's supposed to enliven you against poison oak. So it doesn't make any sense either on the homeopathic deal but if you want testosterone, you use testosterone. I guess you would use estrogen or something. I don't know. But homeopathy and I'm sure I'll win some fans on this is just the -- it's pretty wacky stuff so -

Gregg Everett: Okay.

Robb Wolf: Yeah. Yeah, yeah.

Gregg Everett: Banged that one out America.

Robb Wolf: [Laughs] Influencing friends, winning people something like that.

Gregg Everett: Yeah, talking dirty and influencing people.

Robb Wolf: Yeah.

Gregg Everett: It's what we do. Okay. Histidine for reduced inflammation and fat loss?  
[Laughs]

Robb Wolf: I like the question mark.

Gregg Everett: I always like these ones that just I start reading them like a statement and then I realize there's a question mark at the end. Okay. Tom says:

"Robb and Greg and Squatchy,

Thanks for all the time and energy you guys put into this show. It's the highlight of my week." Man.

Robb Wolf: Yeah we need to get you a better social life, man yeah.

Gregg Everett: "And the podcast drops on garbage day, so it's my reminder to pull the bin out to the curb. Thanks!"

Robb Wolf: It's garbage day today too. I forgot about that. Damn it. Oh man I got to take it out tonight.

Gregg Everett: Yeah. "I just read an article on [suppversity.blogspot.com](http://suppversity.blogspot.com) where Adele Mousa, the resident science guy for Superhuman Radio, detailed the potential anti-inflammatory, gut calming, and fat-loss properties of histidine. I won't rehash the entire article as there's a link below. I'm interested in your thoughts, especially as it pertains to supplementation in people who tolerate histidine-containing foods well. Thanks for everything, and I'm really looking forward to the nutrition cert!"

Robb Wolf: So histidine is a precursor for histamine and there are people who do better on low histamine diets but I think that that is kind of getting mixed up here. As to the histidine itself, there's not a ton of information on this but if the supposition here is that we heal the gut, reduce, inflammation, we might see some improvements in body composition from that, I would buy that. Like assuming that histidine does those things because when we start getting elevated cortisol, systemic inflammation, permeable gut, then we get this tendency towards non-alcoholic fatty liver disease. We get in kind of a pro-inflammatory catabolic state. We get an upregulation of gluconeogenesis, which is typically kind of breaking down the body's protein. So to the degree that histidine actually does what is being claimed here, it kind of makes sense. Any type of a protocol that heals gut, reduces inflammation I would probably argue is going to help you with some body composition goals.

Gregg Everett: All right. Okay. Barrett says,

“Greg and Rob,

A friend of mine recently brought me onto the idea of donating plasma for some extra cash. Up until now I have been donating red blood for free, just out of the goodness of my heart. But now that I know I can earn money from helping others out, I am all for it! My questions are these:

(1) Since plasma is a primary source for transporting proteins, including beneficial hormones for the body, should I be donating 1, 2, 3 times a week or will this degrade my hormonal panel? I like my state of health but do not feel like donating my hard earned hormones to someone who could give a shit about their sleep, food, or exercise?

(2) Is it detrimental to donate my red blood every 3-4 months, and my plasma weekly? Feel free to disregard this question, if you feel that donating plasma is making me less manly.”

Robb Wolf: Why would we disregard it?

Gregg Everett: Disregard. Done.

Robb Wolf: Done.

Gregg Everett: Total fucking disregard.

Robb Wolf: Your argument is no longer valid. So you know I dug around and around on PubMed trying to find out if there's been any real studies in how plasma loss would change the effective dose of the hormones or depleting hormones. I couldn't really find anything one way or the other on it but my gut sense here is that we're not really going to see any type of a change. Like you're not going to register as being like hypogonadic because of donating plasma and all the sex hormone binding protein is gone and it's taking all the testosterone and DHEA, sulfate and everything with it. So I really don't think that that's a problem.

I think that there's some potential upside here with the red blood cell donation and that I think a lot of males are probably suffering from iron overload and probably suffering some oxidative stress from that. So get your ferritin levels checked, your iron saturation checked and generally people tend to better on it from an oxidative stress standpoint being at the lower end of the ferritin and iron saturation level. You know, you will find a sweet spot where you feel good and then you donate some blood



again and then you start feeling a little lethargic and kind of wonky and you've probably gone too far with that then you just adjust the frequency with the blood donation appropriately.

[0:15:31]

Both of these things seem like good ways to just kind of be a little bit of a public servant like it's definitely doing folks good by donating both the red blood cells and the plasma. People need this stuff. My dad used to do it and it really gave him a sense of enjoyment once or twice. He ended up meeting some of the people who benefited. He was actually doing apheresis so the platelet donation. He met some people who were benefiting from his donations and that was really cool for him. So I think it's legit from that standpoint. I don't really see a health downside. I see a potential health upside for getting rid of the potential iron overload.

Gregg Everett: Cool.

Robb Wolf: Bingo.

Gregg Everett: I mean I've worked hard to make my platelets and plasma and red blood cells. I'm not just going to give them away at all.

Robb Wolf: Well this guy is getting paid a little bit so.

Gregg Everett: True.

Robb Wolf: Yeah.

Gregg Everett: Okay. Fair enough.

Robb Wolf: But if they want your kidneys or something, I would broker a pretty high deal for that.

Gregg Everett: Yes.

Robb Wolf: Personally.

Gregg Everett: Oh, man. Okay. Liver AST & ALT levels high? Matthew says,

"Hi Robb,

I've been eating a paleo diet for over 14 months now. For the past 8 months, I've been regularly getting blood work to be sure I'm on the right track. 8 months ago, my AST and ALT levels were high, 65 and 86 respectively. My doctor, also paleo, suggested I reduce my alcohol and

Tylenol intake. I do not take any Tylenol and my alcohol consumption is a glass of wine about every evening. I watched my alcohol intake for one month and the numbers dropped to 21 & 32. 6 months later, after going back to my regular alcohol consumption, AST & ALT are back up to 70 and 44. What are your thoughts on the liver markers, AST and ALT? Should I be worried? Do I really need to cut out my love of good wine? What do you suggest? Cheers, Matthew.”

Robb Wolf: And you made the point yesterday cheers is very apropos here considering --

Gregg Everett: Right.

Robb Wolf: -- it's booze. So you know my thoughts on this are there's a huge spectrum in how alcohol dehydrogenase works in folks. That's the enzyme that detoxifies ethanol. Based on whether or not that's effective or ineffective then you can end up with some very, very toxic intermediates and that could be part of your AST, ALT elevation. Those are markers of kind of liver stress so it's something to keep an eye on. People who lift weights need a little higher protein. They will sometimes see the ALT, AST elevated a bit but that is getting a doubling of the numbers of a little bit concerning.

The other thought that I had with this is possibly, possibly with red wine, wine manufacturers are using gluten, gluten derivatives as a clarifying agent. Why in god's name they're doing this I have no idea but they are. I guess they're doing it because it works. But they're also creating gluten cross-contamination potentiality in the wine. So a couple of thoughts here: You could ditch the wine, go with just like a tequila, like an Old Cal margarita for a while, see what that does to your liver numbers. If they're still elevated then you need to make the cost/benefit decision of is the glass of wine each evening worth the potential of non-alcoholic or actually in this case it would be alcoholic fatty liver disease and also the increased potentiality of some type of liver cancer. I wouldn't say that these things are massively increased but whenever you're causing irritation to a tissue the potential for some sort of carcinogenic effect is increased. There's just no getting around that. So make sure that you are gluten free because gluten can definitely irritate the liver and elevate those enzymes and then possibly do a little bit of experimentation and see if ethanol is in fact the culprit.

You can do some things like milk thistle extract, the standardized silymarin extract, or alpha-lipoic acid, some selenium, some other liver support processes you know, that would help with glutathione

production and whatnot. But that would be maybe down the road or if you choose to continue drinking booze and it's causing you problems and you do some liver support to help maybe mitigate some of those problems.

Gregg Everett:

Sweet. Okay. Darren says,

"Hi Robb,

Firstly, thanks for the book. I am finding it very informative and inspirational with respect to what I can do to improve my health.

Anyway a few weeks ago, I was diagnosed primary sclerosing cholangitis, an autoimmune disease of the liver which apparently leads to liver failure. Right now, my symptoms are a slight dilation of the biliary duct as seen by MRI and elevated liver enzymes (specifically alkaline phosphatase but also AST and ALT) at about 1.5 x normal. The advice I was given by my doctors was stop drinking alcohol and we will monitor you – that was it. No diet change, no exercise, nothing else! I don't want to sit and wait for liver failure!

I want to start paleo. I have already stopped drinking alcohol, eating sugar, and I am pretty much gluten free. However, I am wondering if I should have any concerns about paleo relating to load on the liver or bile production. I am an engineer but I have no medical background so while I can understand the technical arguments in your book, I'm not really sure about extrapolating them to my condition.

I would really appreciate any comments you may have with respect to my situation and I would be very curious if you have ever worked with anyone who has or has had PSC.

PS: Prior to the diagnosis, I was a little overweight and a lot like the Charlie character in your book. I'm also Caucasian/Australian and 46 years old living in the US."

Robb Wolf:

See, I've never worked with anybody with PSC but as each day goes by we see more and more people with different autoimmune conditions that have tinkered with paleo and had some really great success. So it seems to me that you know like if I were in your situation, I could make a pretty good argument for an autoimmune paleo with the macros kind of steered more towards the Kitavan side of things. So lowish protein, lowish fat, higher carb, carbs coming from yam, sweet potatoes, fruit, veggies, all that sort of stuff. So there could be a pretty strong argument

for keeping protein and fats low, protein low because of the deamination process that is –I wouldn't say it's massively liver impacting but it's a little bit of impact on the liver. And then avoiding any type of a ketogenic state would potentially be beneficial, although that's interesting because we have seen some folks with autoimmune conditions actually benefit from ketosis. So that would maybe be something you would have to tinker with down the road.

But ideally we get you eating a Kitavan type macronutrient ratio just do a little Googling around on that. You can track that down. It's about like 10% to 15% protein, similar levels of fat and then the rest come from carbs like 60% from carbs.

Then the same deal as the previous guy like the liver support, silymarin extract, alpha-lipoic acid. Clearly you run all that stuff by your doc but I think if you ask your doc, hey if I eat a relatively low protein, low fat, high starch diet, the starch mainly coming from roots, tubers, and a little bit of fruit, does that seem like it would be a safe thing for my liver. I suspect that your doc would say yes. But you know clearly run that by your doc. If you do that milk thistle extract and everything, run that also by your doc to make sure that they're cool with that clearly.

Gregg Everett: Cool. Okay. Paleo for over a year, now can't stand meat. Edward says, "Rob, I've been eating Paleo for over a year and have found success in my goals to effectively lose weight.

So now, over a year in, a strange turn of events has happened... I've stopped being able to stomach most meat. Seafood is okay, but beef, chicken and pork are causing me much disgust. When I'm eating meat now, I'm so repulsed that I throw up. When I go to the meat counter, I'm having a hard time stomaching it. So now, I've moved to a more vegetable based diet. Any idea why the sudden change of heart for meat? I've always been a big fan... I love meat, I crave it. Now it's repulsing me."

Robb Wolf: So the only thing that I could think of, Gregg and I went pretty far down the rabbit hole on this one yesterday and I --

Gregg Everett: You're pregnant.

Robb Wolf: Yeah, you're pregnant. Are you craving pickles and ice cream also? So you might for whatever reason have developed like hypochloridia, low

stomach acid. You can get checked for that. You find a functional medicine doc, find a doc out of the paleo physicians network that deals with GI stuff. You could also do some tinkering with a product like either Now Food, Super Enzymes or the Paleologics Adaptogest and see if that improves your situation like it makes the meat more palatable.

The other thought here and this is kind of a little wacky but folks months ago asked as us about the tick bites that were causing people to become allergic and so on. Curious if that might be, something that could have happened but usually with the tick bites and the subsequent meat allergies it's anaphylactic kind of process. So it's not so much gastrointestinal or kind of vomiting kind of deal. It's throat closes up, hypovolemic shock that whole story. But that's what I got. I would look into hypochloridia type symptoms and the way that you would deal with the hypochloridia is some sort of a digestive support.

Then also this is just going out on a limb, you know getting checked for the tick bite and potentially Lyme disease actually now that I think about it. Lyme disease presents like this too. Oftentimes people who develop Lyme disease also develop an aversion to meat. At the end of the day if you eat seafood and paleo carbs and that's great, that will be perfectly healthy. It's just a little bit limited in obviously the variety and the ease of being able to eat that way.

**[0:25:21]**

Gregg Everett:

Okay. When catabolism is the goal. I didn't even notice this little smooth transition yesterday but now I get it. Squatchy, son of a gun. Brain says,

"Hi Robb and Greg,

My wife is an actress who is currently doing her best to break into the film industry in Los Angeles. She's feeling confident and has landed some decent roles in a few independent and short films so far (only been out in LA for 8 months). However, one thing she is concerned with is the sad fact that actresses need to be as thin as possible, as the camera adds 10 lbs. She needs to lose about 10 lbs. without adding any noticeable muscle. So, what would you recommend for a training protocol? She says she would be fine with even losing some muscle in the process. I realize that could potentially hurt her metabolism, but losing the muscle (especially in her quads) would not be a negative in her book. She has an athletic build, 5'6", 130 lbs. currently. Any insights would be much appreciated. Thanks so much."

Robb Wolf:

This one is easy.

Gregg Everett: You know what with all the technology you have like you can shoot a movie with a freaking iPhone now, why can't they make lenses that shrink people 10 lbs.?

Robb Wolf: I don't know.

Gregg Everett: I think is bullshit.

Robb Wolf: Maybe we need to start our own film company.

Gregg Everett: There you go. I mean they can make fat mirrors and skinny mirrors in stores right to trick you women into like hating yourselves and buying other clothes. So why can't they do it with cameras?

Robb Wolf: I'm sure they do but maybe they just purposely make everybody chubbier. Just to be mean. That's how mean Hollywood is. They act like they're givers but they're not folks. They're mean.

Gregg Everett: Yeah. It's possible.

Robb Wolf: So the legit answer to this is easy. Run Forest run. Like cardio, cardio, cardio, low protein. Make sure that you're getting adequate iodine so that we don't see your thyroid tank. Don't go so crazy that you start getting cortisol dysregulation otherwise you'll end up with a pooch at your belly. But it's basically don't lift weights. Don't do any resistance training. Lots of cardio. Do some yoga so that you have long thin muscles and all that sort of jive. As Greg said yesterday, some Pilates and you're pretty much there. So what you do is you look at the people who come into our gym who are weak, skinny, and scrawny and these are distance athletes who do a little bit of stretching and that's apparently --

Gregg Everett: Usually not very much stretching.

Robb Wolf: Yeah, usually not very much stretching but if there is any then you know they're doing some Pilates or some yoga and we have people who are sarcopenic and skinny and if that's the goal then that's the way I would do it. Just retro-engineer it that way.

Gregg Everett: Yeah. Okay.

Robb Wolf: Dude this one was a long one yesterday.

Gregg Everett: This --

Robb Wolf: Dang.

Gregg Everett: -- hopefully I can remember --

Robb Wolf: Nab it.

Gregg Everett: ..my incredibly articulate answer here.

Robb Wolf: You covered a lot of good stuff on it so.

Gregg Everett: Okay. Research on deadlift form. Eric says,

“Okay, so this may be unconventional and heretical; Greg may even spit in my face but what’s the deal with rounded back deadlifting, and deadlift form?

All I’ve read from form warriors is “rounded back, bad!” with no real science behind it. The best I’ll get is conjecture or anecdotes on how the body works, which you know is great science. When I actually look into the literature, I can’t find anything besides some on biomechanical differences between squat and dead, and conventional/sumo pulls. Some say upper arch is fine (like konstantinov) if it feels good and you train for it, but pretty much everyone says lower back arching is bad.

Another thing I’ll read is that round-back injuries grossly out-number those with normal form, but where are these numbers coming from? Also, where is the differentiation between training habits? Rounder backers might be more aggressive in pushing the pounds (and thus unintentionally round-backing), rather than being conservative.

Can I get anything on this besides hearsay and dogma, and what the ‘experts’ say?” Apparently, we are not experts so we can clear this up for you. “This feels like the low-fat craze all over again. I ask this because my form (lower) degenerated on a 100% max lift today, but I felt totally fine. As a climber and grip enthusiast, I’ve had my fair share of falls, breaks, snaps, etc. I’m confident in knowing what is bad and good in terms of injuries. This doesn’t feel bad to me in low dosages and volume (and of course, a healthy body).

Be right back, gotta get my anti-shit flinging armor on.”

Before I forget, because I forgot to address this yesterday, the idea that you have decided that round-back deadlifting is safe because you did it

one time and it didn't hurt you, I don't mean to be mean but that's stupid. When I was in high school I worked at a bike shop, I worked at several throughout my life. I'm actually quite good at it and what I mean good at it, it means stuffing eggrolls into the seat tubes of peoples bikes when we're packing them to ship.

Robb Wolf: [Laughs]

Gregg Everett: But I had a boss when I used to always be on the grinder and I was an asshole, I never wore eye protection. He's like you know what all it take is once and that's some of the best advice I've ever gotten in my life. It's like you can get by – I did a lot of grinding with no eye protection and I still have both functioning eyes. But you know, what his point was all it takes is one fucking metal sliver to pop up in your eye and now you got a bad eye. You look all weird and it's going one direction and the other one is focused on the person and it's cloudy and people are like, little kids are scared of you and running away and you have no depth perception. So the point is if you do it one time that is certainly not proof that it's safe so --

**[0:30:26]**

Robb Wolf: You maybe just got lucky.

Gregg Everett: Yeah. You're up here bashing people for giving you anecdotes and theories and stuff but shit, man, you can't use that one time to disprove that. Okay. Now to the real answer.

Robb Wolf: So you know yesterday you made a really—I made a brief point about the fact that the spine is really good at bearing a load straight up and down. It has curvature to it, a kyphotic curve and a lordotic curve. It's a little bit like a suspension bridge. When you start pushing it anterior, posterior or you know side to side underload, that's when we start getting some problems. This is like the lift and twist off and whatnot and then great. You made a really good point that you know, the upper back is already in a kyphotic position and so accentuating the kyphosis is really not as big a deal as far as disk compression relative to the low back being in a lordotic position. When you move that into a kyphotic position, you're getting much more severe disk impact, which I thought was a really, really good point.

Typically, like we just don't tend to see upper thoracic injuries from really heavy pulls. Most of the injuries are low back and I think that it's because the low back like you said you're really moving it through a large range of



movements down in the intervertebral disks when you're shifting from a neutral lordotic position into an anteriorly compressed kyphotic position.

Gregg Everett:

Yeah, exactly and then the one other thing to add to that too is that once if you think about the spinal extensors and how they're attached to the spine and the leverage they have, which is not great as it is. But once you take that lower back into a forward curve, now essentially those extensors just have no way to really hold the spine in place you know what I mean? You've taken that mechanical advantage or disadvantage to such a great degree that you're basically just hanging on connective tissue. So if you want to spend a lot of time just dangling your spine on the connective tissue only under great loads then I just don't see that being a great idea.

Now all that being said, I don't think that round-back lifting is necessarily injurious or problematic. I do think it can be totally healthy and beneficial and a good idea if it's introduced properly, if it's dosed properly. Especially if you are adequately mobile and you are someone who trains this sort of way kind of regularly in other words that you tend to train kind of in a multiplanar fashion and you have a lot of kind of more complex movements. Rather than say a weight lifter who's straight up and down it's all really just a single plane kind of thing, very bilateral and simple. I think you'll be okay. But that doesn't mean doing max deadlifts with a round lower back is a good idea.

Those are two different things and I think that was a final point that I made is that you need to decide what your priority is. Is your priority lifting, dead lifting as much weight as absolutely possible like a competitive power lifter or is it being able to move a good amount of weight but be able to do a lot of different other activities and be able to sustain those activities in your health for a really long period of time. Because those are two completely different things and maybe not completely not mutually exclusive but they're definitely headed in different directions. So you could say well I can lift more with a round-back. Well of course you can, anyone can because it's easier, that shortens the lever and you have less to do. But that doesn't mean that it's going to be a good idea long term.

So if you really want to add some round-back lifting in, I would some lighter weight kind of more volume, straight-legged deadlifts, you know, stand on the blocks, you can get that full range of motion. Make sure you're nice and flexible though so you're not doing it to absolute extreme. You know, stuff like bench press, wind mills, that sort of thing where you're getting odd angle sort of wacky back and trunk related stuff

that most people avoid. But again dose it very carefully and smartly and build up to it slowly. Be conservative. Don't be a hero.

**[0:35:03]**

Robb Wolf: Don't be a hero Johnny.

Gregg Everett: Okay. Wow last one.

Robb Wolf: Sweet.

Gregg Everett: Okay, I predicted 35 minutes and damn it we're going to miss that by like two minutes. Okay. Question about sleep, Cal says,

"G'day Robb and Greg.

I'll forgo the proverbial ass-kissing (pretend it's right here) and dive straight into my question.

Does it really matter which times of day you sleep? I'm aware I should be aiming for 8 to 9 hours per night, but I've fallen into the hideous habit of bedtime around 3:00 a.m. and waking up at midday. I'm only 22. I have the habits of a teenager. Yeah, I never grew up. Stop judging me.

So while I get the requisite, excuse me, 8-9 hours of sleep, does it matter that my sleeping pattern is completely fucked up? Or would I be healthier and more successful with fat burning if I were in bed before midnight? Oh yeah, I am looking to lean out and lose fat and shit." I think he means lean out and lose fat and shit not lost fat and shit.

Robb Wolf: And take a shit.

Gregg Everett: Yeah. "I've never really found a concrete answer on this. Love to hear your thoughts."

Robb Wolf: Yeah. I mean there's great literature, there's great anecdotal support of going to bed early basically you know, following the course of the sun. The sun goes down and you go to bed, the sun comes out you get out of the rack. Inevitably, like if you take somebody and you stick them in a camping situation, you turn off the power. Like the way that you fix this and I mentioned this yesterday is you go outside, turn off the electricity to your house. You don't have the internet, you don't have the TV, maybe you turn off your cellphone until its battery goes dead but if you don't have electricity and light and sound and titillation and everything going

on, you're going to go to bed earlier. Like there's just no two ways about it.

So and this is one of the requisite things that we see if people are really trying to lean out, they need to sleep a good chunk of time but they tend to do better with earlier sleep. This goes back into the HbTA access and cortisol production and whatnot. When we are exposed to daytime light or indoor incandescent bulbs or even standard like tungsten bulbs, we have some blue and green wavelengths of light in that mix. The blue and green wavelengths of light tend to suppress melatonin production. Red wavelengths of light tend to enhance or not enhance melatonin production but they allow the production of melatonin. So you know getting normal broad spectrum wavelengths of light into your eyes late in the evening tends to keep cortisol elevated and tends to suppress melatonin production. So you know if you want to lean out this is one of the places that is a really smart place to start.

Clearly good nutrition and a slight caloric deficit and all that sort of stuff is pretty Jim dandy in helping that too. But getting your sleep dialed in like literally it seems like people who are on the same basic calorie intake but they sleep a little better, go to bed a little earlier it seems like they just get leaner. I don't know if that's violating the laws of thermodynamics or, you know, somebody like Allan Ergon is going to have a kitten over that or something. But it just seems like people sleeping better, sleep in a little earlier, it seems easier for these folks to get leaner.

Gregg Everett: Yeah.

Robb Wolf: Yeah.

Gregg Everett: I agree.

Robb Wolf: Okay.

Gregg Everett: Cool man.

Robb Wolf: Are we good? Das ist gut?

Gregg Everett: I hope so.

Robb Wolf: All right folks.

Gregg Everett: I'm definitely not doing this one more time.

Robb Wolf: No. No. If this one goes tits up on us then I – episode 176 may have been the final episode of the podcast so, oh.

[Laughter]

Robb Wolf: Okay.

Gregg Everett: Okay.

Robb Wolf: Thanks to the listeners. Thanks everybody who came out to Paleo FX. Thanks to our sponsors. Thanks to Gregg. Keep your eyes open for good things coming from the Performance Menu. Anything else?

Gregg Everett: I don't think so.

Robb Wolf: Sweet. All right, man, will talk to you soon.

Gregg Everett: Okay.

Robb Wolf: Bye.

Gregg Everett: See you.

**[0:38:54] End of Audio**