

Nicki: It's time to make your health an act of rebellion. We're tackling personalized nutrition, metabolic flexibility, resilient aging, and answering your diet and lifestyle questions. This is the only show with the bold aim to help one million people liberate themselves from the sick care system. You're listening to The Healthy Rebellion Radio.

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Robb: Howdy folks, how are you? Welcome back.

Nicki: To another episode of The Healthy Rebellion Radio. I have Robb here standing next to me, which is a first for the couple of days.

Robb: Anew.

Nicki: He got waylaid by this thing called the flu.

Robb: The influenza.

Nicki: Yeah. At least that's what we think it is. You had fever, chills.

Robb: Headache. And my skin hurts.

Nicki: Which was really strange.

Robb: I didn't realize, but I started poking around and that's a, skin sensitivity is actually a super common characteristic of influenza.

Nicki: I've never heard of that symptom before.

Robb: I don't remember it. But it took me down for two days. I was pretty smashed. I feel pretty good today. Definitely back in the fight.

Nicki: We just had our quarterly live Zoom with our Healthy Rebellion community members, which is always a fun time. It's just, we get in and whoever shows up, shows up and we just shoot the shit and talk about everything from...

Robb: Fire ants to...

Nicki: Mountain biking to, what else did we talk about today?

Robb: It wasn't quite as broad today, but it was good stuff.

Nicki: Drinking alcohol.

Robb: Mountain biking, booze.

Nicki: The benefits of not drinking alcohol.

Robb: Some people don't do well on salads, but the vast majority of people would probably do better eating salads and a whole host of things.

Nicki: And apparently fire ants tastes like sweet tarts. Somebody mentioned that.

Robb: That's the claim.

Nicki: That's the claim. We're not about to go test out that... We should send that into MythBusters. I wonder how they would handle that?

Robb: Well, I haven't even done the simple, let me Google that for you, deal.

Nicki: Right, right. Okay. Let's see. This is episode 115. Let's see what else we have for you up front here. Oh, our rucking challenge starts tomorrow, which is today, if you're tuning in on July 1st. And we're doing 30 miles in 30 days. And for those of you that don't know what rucking is, it's basically walking with a weighted backpack. And that weight is obviously completely scalable to whatever your fitness level is. And some folks are going to tackle this doing a mile a day, and some folks are going to do more miles in fewer days. So however you want to tackle that. But we have a leaderboard all set up and folks are raring to go. So that's kicking off today actually, this releases.

Nicki: What else? What else? I think that is it for our community housekeeping items.

Robb: When is our next reset? Is it not till?

Nicki: September.

Robb: September, okay.

Nicki: We usually, we do January. Then we do April right before summer. Summer's a tough one to do something like that because so many people travel and there's different family visits and obligations and whatnot. So we wait till people are back in their routine of the fall and we kick it off in mid-September.

Robb: Cool.

Nicki: As that gets closer, I'll announce dates and all that good stuff. All right hubs, what do you have for a news topic for us today?

Robb: This is a piece from a magazine called Palladium, which I think somebody in The Rebellion actually posted this and it's called The Modern Diet is a Biosecurity Threat. And it's really cool in that it talks about Weston Price's work and the really remarkable health of pre-industrialized peoples in general. And particularly those folks that ate sufficient animal products and nutrient-dense foods to get fully formed dental arches, and phenotypical expression of height, and all those sorts of things.

Robb: They really make the case that our modern diet has gotten so bad that it is poised to bankrupt us. And this is stuff that I've been yammering about for a long, long time. And so nothing's as good as confirmation bias. So, there it is. But it's tackled from a very different perspective than I've done and it's quite readable, accessible. And it's a bummer that the basics of the ancestral health concept has fallen out of vogue. I guess everything comes and goes.

- Robb:** But it's interesting, there was an interesting dust-up that I got peripherally involved with. Chris Masterjohn had a debate with a guy named Nick, I'm blanking on his last name. And Nick basically made the case that more or less the ancestral health model should only be thought about for early in life. And that later in life, it really shouldn't apply because there's not going to be selection pressure to favor an ancestral health approach. Which I think is wrong.
- Robb:** This is digging into the antagonistic pleiotropy that genes might be beneficial in youth and deleterious in older age, because once you get past reproductive years, it's less likely to see that thing, the negative thing selected out. I think so much of what gets trotted out for antagonistic pleiotropy is actually still just a garden-variety discordance, where we're just living in a way that's not particularly helpful for us. Usually diet and these bigger pieces of lifestyle like exercise and circadian biology and all that type of stuff.
- Robb:** But I still think that this ancestral health model is the holy grail for getting in and unpacking health issues. So this thing's a nice, easy read, well written, interesting piece that digs into that whole story.
- Nicki:** Awesome. We'll of course, link to this in the show notes.
- Nicki:** The Healthy Rebellion Radio is sponsored by our Salty AF electrolyte company LMNT. And whether you are working outdoors in the heat, gardening, manual labor, construction, all that good stuff, or playing outdoors in the heat, summertime is a great time to stay hydrated. And there's literally a flavor for every taste bud with LMNT. We've got classics like Citrus Salt, Orange Salt, Raspberry, and Watermelon Salt. And our limited edition, Grapefruit Salt. Two are more fun and spicy flavors like Mango Chili and Lemon Habanero. And of course, Chocolate Salt. LMNT has you covered. And you can grab yours at drinkLMNT.com/robb. That's drink L-M-N-T dotcom slash R-O-B-B.
- Nicki:** And we've got three questions for y'all today. This first one is from Krista on low CGM numbers with keto. "Hi Robb and Nicki. Love all the work you guys are doing. And I love Sacred Cow. I'm a 44-year-old woman who started a keto diet in November to combat 15 pounds of hormonal weight gain. A really stressful five years threw everything off, despite eating very clean, working out and prioritizing sleep, et cetera. I lost eight pounds right out of the gate. And a few pounds are still coming off very slowly."
- Nicki:** "At the start of my keto journey, I also discovered I have a histamine intolerance, or long COVID. And have modified my diet and done all the things to limit my histamines. My histamines have slowly but surely decreased, but I'm still not totally in the clear. With all that being said, I've been using a CGM, continuous glucose monitor to look at how my body interprets food for a while now, even before my keto diet. And my sugars have always been low, average around 90, but the numbers did increase with my histamines."
- Nicki:** "But now that my histamines are more under control, my numbers are back to normal, super steady, and never going above 110, unless during workouts. So finally, my question. In the last four days, my CGM numbers have gone super low. I'm averaging 65. I still feel completely normal. This is not a new CGM, and I'm sleeping normal despite it getting into the 40s. Nothing has changed in my life or diet."
- Nicki:** "My daily macros 1800-ish calories, 100 grams of protein, 40 grams of carbs, and the rest fat. I weigh about 135 pounds. And all my hormone levels are back to normal. I'm

working with a naturopath. My only thought is as my histamines continue to decrease, is this my new normal in ketosis or question mark?"

Robb: So one big thought that I have here is that I would do a finger prick test to just triangulate in on this and see if this is really a true number. And just basically validating that this is a real number. It might be. And it's worth mentioning that this is one of the interesting things with ketosis is that some people can run really rather low blood sugar levels and feel just fine.

Robb: I remember when I got done with the I, Caveman show, and Peter Attia has talked about this where there were folks that were in fasting ketosis, and these people were given a bolus of insulin and their blood sugars dropped to levels that would kill someone normally. And like, you would never get an IRB to sign off on this. Apparently Peter Attia did this and almost died from it. And the person who did it for him was like, I will never do that again, because it was super hairball.

Robb: But people who are not keto-adapted can feel really off just with a very modest blood sugar change. And the big deal is that the brain really seems to respond most negatively to big deltas in blood glucose. So if you've snuck up on a new normal, then the brain seems to adapt to that reasonably well. There are questions about whether or not if this is real. So let's say Kristin...

Nicki: And it wouldn't be real if something was going haywire with the CGM?

Robb: So CGMs can have some squirrely readings because they are reading the interstitial fluid, not the circulatory fluid. And so there's a bunch of algorithms that are mathematical algorithms that are supposed to account for all these variables, and they're not perfect. And this is also why CGMs are great for seeing trends and really not great for identifying a pinpoint moment to moment blood sugar level.

Robb: So let's for a minute, assume that this is a real CGM reading. Some people suggest, and I don't know that they're wrong, that a consistent blood sugar this low could be problematic because with as much zealotry as the low-carb scene has around ketones are an alternate brain fuel and all that stuff, all that's true. But there is also a reality that in ketosis, even fasting ketosis, there is some basal level of glucose. This is why the blood sugar levels hit this really low steady state, and then never really change because there are still tissues, the red blood cells being some of them and the certain parts of the brain that just need glucose as a substrate.

Robb: Someone like Chris Masterjohn would remember this better than me, but also within the pentose phosphate pathway, we need a certain amount of glucose or glucose equivalence to be able to flow through that pathway, to be able to do nucleic acid DNA manufacture, and stuff like that. So this could be a problem long term. It might be something that needs to be addressed. So I would again, check to see if this is the real number. If it isn't, then I guess maybe change out your CGM probe and see if that changes with that.

Robb: If this really is the number, I guess then you're just going to have to ask the question, do you want to do anything to modify this? Maybe you increase your protein a little bit, which will generally bump blood glucose levels up a little bit. This freaks out people in the ketogenic scene, because they feel like if you suppress ketosis, then you're suppressing fat burning. That is absolutely not necessarily the case. It's all context driven.

Robb: Gosh, anything else? I think that's most of it. And that there can be legitimate, potential downsides to having blood sugar chronically that low. It may also be that she just rocks the ketogenic state. And for right now, she's just fine with this. It would've been interesting to know what her ketone levels were in addition to this, because Marty Kendall has done some great work at looking at the total energy status that is in the circulating blood, the total glucose, total ketones. We don't get to see the circulating fatty acid so it's hard to know that.

Robb: But maybe her ketones are quite high. And so that would allow for a lower average blood glucose level to be favorable for her. But it could be something that changes over time. Like she may not feel as well. Maybe she doesn't do as well. Or she may just be out on some genetic continuum where this is just fine for her.

Nicki: Definitely report back, like keep monitoring and we'd like to know...

Robb: Yeah, yeah, it would be nice to hear what the story is.

Nicki: Yep. Yep. What you find out.

Nicki: Our next question is from Sydney on kids and food. "I'd love to hear your approach to feeding your children at home and outside of the home with grandparents, vacations, birthday parties, et cetera. And how has that changed as they've grown? We've been able to just stick with our preferred food for the most part, since they've been so little, but we are encountering more and more occasions where there are things offered that we wouldn't usually let them eat in a million years. And we say no, but it doesn't always sit quite right. Thoughts? Not so much worried about offending others. More so thinking about the ideas and beliefs we are instilling in them around nutrition."

Robb: Do you want to take a stab at this?

Nicki: Yeah. This is definitely a challenge that I think all parents face as your kids grow because in the beginning you can control a 100% what they eat. And just as Sydney says, as soon as they get invited to a birthday party, it all goes out the window. And I think for us, we are now at a point where, well, fortunately, a good portion of the girls' friends also eat gluten-free. Or their parents do, and there's usually some option when it comes to dessert, for example.

Nicki: They do now have some friends that aren't. We have a spectrum. Zoe is our more gluten-sensitive kid. And if she gets a lot of gluten, she can upset her tummy, but she also gets a throat tick. And she's very aware of that. And so she now self-monitors that for herself.

Robb: The tick is I think embarrassing enough that she's like, so long as I can... If there's pizza, we'll bring some gluten-free pizza. Or gluten-free cupcakes or something for the birthday cake and stuff like that.

Nicki: She will have to clear her throat a lot when she gets a significant amount of gluten. So for example, they went to a birthday party about a month ago. This family is not gluten-free. And they had a wide variety of snacks from watermelon to cheese and crackers and goldfish crackers and all this stuff. And then the birthday cake was also not gluten-free. And often when I know this I'll bring something, but I can't remember what we had going on, but I didn't bring anything for the girls.

Nicki: Sagan can tolerate gluten and she loves all of the things. And so when she has an opportunity to eat stuff, she will. So she had some crackers and pepperoni, or salami. And Zoe opted not to have any of the snacks because she knew she wanted to have a small piece of cake. And so she made that trade-off on her own.

Nicki: We try, we explain why we eat the way we do. Now Sagan, I mentioned the two differences between the girls. So Zoe's our more gluten-sensitive child. Sagan is our blood sugar roller coaster kid. And so we have to really make sure that she eats very well, has a lot of protein before we go to anything like this. And we've stopped... Zoe's 10, Sagan's going to be eight in about four weeks. So we've stopped... We don't say no.

Robb: About the most that we will say is, so long as you're okay with the consequences. And we try to say it without a bunch of vitriol and really trying to manipulate them. It's just kind of reminding them.

Nicki: And we talked about food enough that they know. They'll be like, "Yeah, my tummy really doesn't feel good when I eat that." So they know. They have some awareness about how they feel and what foods elicit those feelings. And so they're making that choice, knowing that they're going to potentially feel bad after eating it.

Robb: Yeah.

Nicki: There's no perfect answer. I know some parents are just like, absolutely no, you're not going to have this stuff. But I think from our perspective, we want to give them as much information and let them make... Try to start making those decisions now within bounds, right? They're not going to go and just eat cake all day somewhere.

Nicki: We want to set them up for success. So like, you have to have your protein first, all of that same stuff that we've talked about. But they're going to be making these decisions on their own before too long. I think the biggest thing that you can help your kids understand is the relationship that food can impact how your body feels, and your skin. Zoe had her first little pimple because she's had some ice cream, cousins were here. She's had some ice cream, she's had more cheese, so the dairy piece. And we've talked about dairy. When you eat a lot of dairy, you tend to, especially the older you get, you can get some acne.

Nicki: And I had terrible acne as a kid. And all my uncles on my dad's side had horrible acne. I ate a lot of cheese and milk and all of that stuff. And had I known that in high school, I would've happily gone dairy-free to have clear skin. And so, we've talked about that a lot. And so Zoe will say, "Mom, I'm not going to have any." We're having tacos or something, "I'm not going to have any cheese because..."

Robb: Well, and we have some other friends that have a 14, 15-year-old kid and who suffered from pretty bad acne. And I just said, "Hey, if you cut out all dairy, a pretty good chance your acne's going to go away." And it was like, "Really?" I said, "Try it for a week." And this person did. And they were like, "Holy smokes! That's amazing!" And you think about kids, teenagers, high school, acne, pretty big goddamn motivator to get that right.

Robb: So now what this person does is we'll sneak in a little bit of cheese when there's nothing super important going on. And then if there's a dance or a date or something looming on the horizon, you tighten it up.

Nicki: Tighten it up.

Robb: People go on and on about the potential of creating bad relationships with food and everything. And clearly that would be a terrible thing to do. But I think that with a talking to these young people as if they were adults, because they're not really that far off at the end of the day. And just making them aware of consequences and really empowering them that, "Hey, this is your decision and you are in control. And we, as parents are not always going to be here to monitor everything you do. And it's up to you to figure out how you navigate this stuff."

Robb: And so far, it's been good. I don't know, both of our kids may do some tell-all documentary book about what horrible parents we were. And how we ruined their lives with food. But I don't think so.

Nicki: And on the grandparent piece too, I think with other adults that are around your kids frequently, I think touching on the behavior thing might be the cord that strikes the most.

Robb: There's a lot of leverage.

Nicki: Because again, like with Sagan, if she goes too long without having protein or she doesn't have enough protein, and then she gets something more processed, she turns into a little demon. And her behavior obviously changes.

Robb: So dramatically changes.

Nicki: I don't know Sydney, how your kids are. But if any of them have something like that, that's great leverage with a grandparent or a caregiver or anybody that they're around. It's like, hey, make sure... This kid really needs to have a big chunk of protein and minimize this stuff because they turn into a demon.

Robb: So if they're going to have mac and cheese or something, then they get a hamburger or a piece of chicken or something with it. It doesn't have to be all paleo or all low carb or what have you. But just little things like that. I think I've mentioned on other podcasts, we have this speed bump deal, where you got to eat through your protein to get to the carbs. And that's a pretty good strategy. And I think that's something that grandparents and other caregivers, and especially if the kid does have like you said, a behavioral response, it's like, do you like the well-fed kid better than the poorly-fed kid? Because you're the one dealing with it.

Robb: Or if they're feeding them like shit, and then they hand them off to you and you're dealing with it, then you also have some pretty good leverage. It's like, "Hey, this isn't cool because when I feed them, they're fine. And then when you drop them off to me after feeding them garbage all day, they're a basket case and they are a hazard to themselves." And again, it doesn't have to be perfect, but just a balanced plate of some protein, some carbs, and some veggies. That will go a long way towards balancing stuff out.

Nicki: Yeah, yep. Hopefully that helps some, Sydney. I know there's lots of parents in The Rebellion that have... This topic comes up around and around because it's hard feeding kids.

Robb: It is. When they were younger, I had a much harder line with this like, "Oh, when they get hungry, they'll eat." And then there's a reality that one kid likes crispy bacon and one kid likes slippery bacon. And so you want your kids to eat. And so you try to make some crispy and some slippery bacon. And one kid likes chicken better than the other

one. So you start doing what you can to accommodate it because there is... If the kids just like, "Okay, I'm good. I don't want to eat this because they just don't like it." And then they're a basket case because they didn't really eat well enough then you're shooting yourself in the foot.

Nicki: But we also don't make separate meals for people.

Robb: We don't. We don't.

Nicki: I make a pretty decent chicken tortilla soup that Zoe loves and Sagan doesn't care for it. But Sagan really likes my Thai green curry and Zoe doesn't care for that. And every couple of weeks they each get to have the thing that they don't like.

Robb: And we remind them each time, "Hey, you remember that one that you ate that you liked? Well, your sister doesn't like it. And so you both get to eat one of these that you don't like."

Nicki: You can whine but you're going to deal. All right. Our third question this week is from Doug on coffee enemas.

Robb: Why does coffee enema get a musical-?

Nicki: I don't know. It just strikes me as funny. Okay. "Robb, I've been a huge fan of yours for years. Thank you for all your content and all you do. I especially appreciate your integrity and truthfulness on all subjects. I have a family member who is trying to cure eczema with an elimination diet. What remains is mostly meat, fish and a limited selection of fruit, along with a little bit of white rice."

Nicki: "This person is lean, strong and very healthy, but has recently suffered painful outbreaks of eczema. The guru we are following in doing this elimination diet recommends coffee enemas. Unfortunately, despite the enthusiasm of this guru and many others on the interweb, so there is a surprising paucity of information on them out there."

Nicki: "The closest thing to a theoretical explanation is that a vein in the colon leads right to the liver and the caffeine or coffee stimulates the liver to pump out lots of bile which aids in cleansing and flushing. I know, I know, cleansing and flushing and detoxes are mostly bullshit. But anecdotally people seem to really love these coffee enemas. What's the truth?"

Robb: I really don't know what quote, the truth is. The thing that I've seen, and again, this is also observational, anecdotal. But I feel when people start down the coffee enema track, it's just like the gateway drug for a bunch of other insane stuff. And I just haven't seen great outcomes with it.

Nicki: So full disclosure, I've never done one of these, but I do know that Kelly Brogan who works with a lot of people coming off of prescription psychiatric medication, part of her thing is meat and coffee enemas. And I don't know what the science behind it is, but I know she's pretty...

Robb: It is supposed to stimulate these detox pathways and it's theoretically, you're going to restore toxicants in the liver and release of bile salt will in theory dump that stuff. And then so long as you excrete the bile salts, then you're offloading some of that stuff.

Robb: I guess it's one of these things where if from a just purely empirical standpoint, you could give it a shot. I would just caution folks that what I see, what I've seen happen is that people get hooked on this stuff. And I don't know if there's a euphoric piece to it, or what exactly. I think the deal is that the pH of the colon is such that the caffeine isn't actually absorbed. And so that's part of the deal with that. But I've just seen people not really thrive on this, and just end up in this kind of cul-de-sac.

Nicki: I guess my question for Doug is, and again, I haven't followed many people that recommend this, but is this a thing that they typically have you do it ongoing, like weekly?

Robb: Oftentimes they do.

Nicki: Okay.

Robb: Yeah. Or what I find is that people get stuck in this, and then they start doing more and more extreme dietary interventions. There's a big cross section of vegans that used the coffee enemas too.

Robb: I really like Kelly Brogan. I like a lot of the work that she does. But she was one of these people that was advocating early in COVID that cell phone towers and 5G were causing COVID and causing the spread of COVID. And I did a piece on that. And again, I think I'm mature enough to be able to compartmentalize things where I like these chunks of her work, and then these other chunks of the work, I don't really sign off on. And I don't think less of her. I just disagree with where that position is. And somehow that's like I'm a horrible human being for, "Well, I agree with you here. And I disagree with you there."

Nicki: For what used to be the normal way that people approached relationships.

Robb: Yeah, yeah. I got eaten alive when I said to her on that particular topic that, "With respect, but I think you're really missing the bigger picture here." Oh man, God, I just got jumped on with both feet. But again, I guess you could make a case to give this a shot and just see how it goes.

Robb: I would just keep your eyes open to the potential that this becomes a habitual need versus it actually being a legit solution. And I know with eczema and psoriasis and some of these skin issues, like changes in the gut microbiome, which can occur during the healing process. I mean, this is one of the crazy things about the gut microbiome and testing it and trying to know anything about it, if you sneeze, it changes. If you watch a scary movie, it changes. If you watch a happy movie, it changes. The gut microbiome is just like this completely moving target.

Robb: I think so many people make all these claims about how we can manipulate it to benefit. And I think most of it's bullshit. The main thing is that we have some theories, like some people do better with fermentable fiber. And some people do better with less fermentable fiber. And that some people have issues with different plant-based toxicants and some people have immune cross-reactivity to dairy and eggs. And so you really at the end of the day, the clinical outcomes is where you got to hang your hat.

Robb: And so in that regard, I would say give the coffee enemas a shot for a month. Let's just give it a month, see how you do. But be wary of the potential that this is like sucking you into a never-ending process.

Nicki: Kind of needing it.

Robb: And needing it. And is it really the thing that's facilitating this healing process? Versus getting some sunlight on your skin, exercise, good community, and finding some dietary regimen, which this like meat, little bit of white rice, some fruit. That seems pretty good. It seems like a spot that a lot of people end up arriving at that they do pretty well with.

Nicki: Sounds good. All right. That was our third and final question this week. Any parting thoughts, hubs?

Robb: I got nothing.

Nicki: You're ready to go lay down?

Robb: I'm ready to go lay down. I've been pumping my legs a time or two so I don't flop.

Nicki: I know, poor guy, he was flat all day for the last two days and most of this morning, and rallied to do the show. So anyway, thank you all for joining us again. Remember to check out our show sponsor LMNT, drinkLMNT.com/robb. That's drink L-M-N-T dotcom slash R-O-B-B. Have a happy and safe 4th of July weekend. And we'll see you next week.

Robb: Bye everybody.