

Robb: Hey folks, welcome to the healthy rebellion radio wife. How are you doing today?

Nicki: I'm good. I'm good. Cold and rainy and got my Ugg boots on and my sweatshirt on and it's raining and we're, we're officially, well it's November,

Robb: Although apparently in like two days it's going to be 80 degrees again. So I have never lived somewhere that once it flip flops like crazy. Like I have never lived somewhere that I needed to use the air conditioning and the heater in the same day. And I mean like needed. Usually we'll put on sweaters and we'll do the, we'll try to be tough but like it'll go from like pretty damn cold to pretty damn hot. So yeah.

Nicki: Well and just day to day. We had a couple of days where it was like super, super cold and then the next day it's like almost 90 and you're sweating and it's humid again. It's been interesting. Definitely a very different climate than anything I've ever experienced.

Robb: Very different climate than the high desert.

Nicki: Yep. So your news topic du jour.

Robb: A really cool article, I did a piece on this in The Healthy Rebellion In The Lab. The Lab is a place that I go a little deeper dive. I don't take as much time to explain terminology and stuff like that. I'm kind of assuming that people are ramped up to speed. It's definitely accessible for most anybody that takes the time to do it. But we just kind of partition that stuff off a little bit because we have a lot of new people that are literally like brand new to any type of ancestral eating. Instead of blowing them out of the water with a bunch of detail, we have some great processes for getting them up and going.

Nicki: This is in the healthy rebellion community.

Robb: Yes. The paper was published in the Journal of Obesity and it's called Mobilization of Environmental Toxicants Following Bariatric Surgery. And so this is something that has been, I don't know if I want to say folk lore, but there hasn't been great data ... It has been suggested over time that fat loss might lead to a problematic toxicant exposure toxin exposure because fat cells accumulate lipid soluble fat soluble toxins from the environment. Then you might be dumping that back out into your body at a pretty high rate. There hasn't been great literature looking at that. Then these folks looked at a population that it was really kind of a slick design because whatever other limitations are with weight loss surgery, people lose weight and they burned through a mountain of fat typically at least for some period of time. And then they typically figure out a way of regaining all the weight unfortunately.

Robb: But what they found ... There was kind of an interesting distinction that folks that were born before 1976 had kind of a different toxicant profile than people born after 1976 and this may be reflects some of the environmental laws and the relative exposure that people have had with this over time. But they definitely did find that when people went through this bariatric surgery that they reached levels of toxicant exposure that could be injurious to the brain, to the kidneys, to the heart, to the liver, basically to the body. It

makes a case for doing things slow and easy, like people get really, really, really fired up about rapid weight loss and like we celebrate that and laud it but there's maybe a case to be made for a little bit of a slow and steady deal. I think that if you're following a basically sound dietary regimen that this is probably not going to be a big deal, like you're not going to induce such a caloric deficit that this is going to be a massive problem.

Robb: But weight loss surgery typically induces a massive caloric deficit and this is another one of the things that I have problems with regarding fasting. I actually am a fan of the idea that fasting might deal with the excess skin that some very overweight people have because of autophagy and all that. I think that that's all legit potentially, but there's the two big issues now for me historically, my main issue with fasting as a primary mode of reducing body fat, body weight is that people don't learn how to eat.

Robb: They learn how to not eat and then you get back to eating someday and now you've established no new eating patterns, no new eating habits, so I've had issues with it there. Then also from this perspective, if you are just consuming no calories at all, I could make the case that that you probably have an even more vigorous weight loss experience than people that underwent bariatric surgery because those people are at least eating something. It's an interesting paper. We will have it linked in the show notes. I did a pretty thorough breakdown on it in The Healthy Rebellion Lab.

Nicki: Awesome. All righty. Let's see. We have our podcast review t-shirt winner announcement. Let's see. We've got a review from Meg_Aggie. She says, ready to be a rebel after many years of listening to you and Greg, your interviews and your awesome wife Nicki on the paleo solution podcast. It was a given I'd subscribed to the Healthy Rebellion Radio. I need to listen often to keep myself from straying too far off the path I've chosen for health. I'm excited to be a part of the revolution now to gather all the questions I've never asked and be an active participant in the new adventure. Then she has hashtag B-T-H -O censorship, which she says is beat the hell out.

Robb: That is a new hashtag.

Nicki: That is a new hashtag. But Meg_Aggie if you're listening to this, thank you for your review. And if you send an email to hello@robwolf.com include your shipping address and your T-shirt size and we will send you one of our Healthy Rebellion Radio t-shirts.

Robb: If we're on the ball the next time we record, we will have a Healthy Rebellion logo on the wall.

Nicki: Well, we might even be wearing a Healthy Rebellion radio t-shirt next time.

Robb: We might even ... Don't get it out of control there wife.

Nicki: I don't know. I don't want to get out of control. That's right. All right. This episode of the Healthy Rebellion Radio is sponsored by Four Sigmatic. The makers of the very popular mushroom coffee with chaga and lion's mane. It's a go to morning beverage to support

productivity, focus and creativity. And Rob, we've been drinking Four Sigmatic products pretty consistently for the past year now and yeah.

Robb: Yeah. We've been pretty consistent in that. I will go out and say that I found them before everybody else did, including Tim Ferriss, but I never get credit for that stuff.

Nicki: Do you want some sort of a badge.

Robb: A badge would be nice. I came up with Bulletproof coffee too, but I don't get acknowledgement-

Nicki: Do you want a badge for that too?

Robb: No actually I don't want anything to do with that. That was a terrible idea.

Nicki: But Four Sigmatic. They have an amazing line of products some with caffeine, some without caffeine. They've got coffees, matches Coco's, mushroom, elixir mixes. My favorite personally is the lion's mane elixir mix. And then Rob, you were, you were commenting about the 50 milligrams of caffeine, so they're the ones that do contain caffeine. It's 50 milligrams.

Robb: It's interesting when Dr. Kirk Parsley and I were doing our work forward and Naval special warfare resiliency programs, doc Parsley would, and this is kind of, it's crazy. But he made the case that in general about 50 to 60 milligrams of caffeine is your optimal dose for physical activity, mental focus about every two to four hours. People will routinely do 200 milligrams of caffeine. You know at a whack and the reality is that that's really not doing anything for you with regards to cognition or or physical performance. The irony is when they do drug testing for caffeine, the the level at which caffeine ceases to be an ergogenic aid and becomes an ergolytic aid and it actually damages performances where you would get dinged for for using caffeine. It's kind of nuts. He made the case that if you're going to use caffeine and most people do and there's arguments for doing that, there's great epidemiology that actually does support its use, but a little bit more of a modest approach might be better than really hammering down and going nuts on it.

Robb: A Darth Luigi, Louise, Phyllis in New York can drink a pot of coffee and then go to bed. I don't know if that's because he has no adrenals left or if he just like plows through this stuff at super high rate, but just kind of a hat tip to Four Sigmatic when they formulated this. Instead of going the usual like bodybuilder pre-workout deal works like 600 milligrams of caffeine and it's like no 50 milligrams, we'll get it done and it actually staying in that therapeutic dose range is a great idea. So hats off to them for that.

Nicki: Awesome. So if you're a coffee drinker who's looking for an alternative or even if you don't want to replace coffee but want a healthy creativity and productivity boosting beverage, go to foursigmatic.com and give them a try. foursigmatic.com/rebel R-E-B-E-L and use code rebel for 15% off your order.

Robb: Does it need to be capitalized or just any type?

Nicki: I think these days, most most codes are, well, I don't know. Insensitive.

Robb: Okay, perfect. Perfect. I'm insensitive to most things.

Nicki: Including case. Okay. Let's see. Let's see. Let's tackle our questions for the day.

Robb: Oh yeah we're doing a podcast.

Nicki: We're doing a podcast.

Robb: We're not just dicking around here.

Nicki: Yep. We've got a question from Brian on how many meals per day when training. Brian says, I train Muay Thai two times a day. I start with a 10 kilometer run, then go into the training, go into training at the gym with pads and bag work, clinching, sit ups, pushups, et cetera, all fasted. Then I have two meals before my afternoon training and I was wondering what the optimal amount of meals and timing of carbs should be because I cannot find consistency with my energy and focus.

Robb: So I'm assuming from this that Brian is only doing two meals basically mid day. Like he doesn't allude to whether or not he has another meal afterwards.

Nicki: I hope he's doing a dinner. I think he's doing a dinner.

Robb: I like fasted training when the intensity is not super high. When you start doing pad on bag work. And I'm not saying, you know, some days doing this for mental toughness and and pushing the ability to use fat a little more efficiently, even under high intensity activity that that's all great. But it makes me a little nervous like do this starts even though I'm always like, never do a shake, don't do liquid food. Like this starts getting to be one of those things where I'm like, have a bowl of Greek yogurt with an Apple before this or something that works for your system. Whenever people ask for like an optimal amount of anything, it's so hard to say-

Nicki: It's so individual too based off of the volume.

Robb: Yeah. So incredibly individual, but I will say that if you're doing a ton of high intensity activity ... We approach these things like fasting and caloric restriction for in part of hormetic stress like it, a little bit of stress here improves our ability to deal with more stress there. Exercise is a big hormetic stress and although our Hunter gatherer ancestors were active, they were not actually doing two hours a day of Thai boxing with clench work and pads and bags.

Robb: And it's so you could make the argument that the exercise stimulus that that part of the allostatic load is enormous. And even from an biology perspective, it is. We don't

necessarily need nor want to really goose that hormetic stressor thing all that much more. I could really make a case for a small meal pre-training possibly. If you know that you're going to have much lighter days than maybe you do some fasting training, but I did Thai boxing and man it's really hard to be lazy on pad and bag work and if you're doing any type of sparring unless it is really agreed upon like super mellow stuff it goes glycolytic, you go anaerobic, it's just virtually impossible not to get into that.

Robb: I could make the case that some sort of pre-training nutrition on days that you suspect are going to be more intense and then the two meals in between that seems fine, but you probably are going to need at least some type of meal in the evening. We had a great discussion on the Healthy Rebellion around this stuff where folks are training later in the day and what's an optimum way to eat. And some people find that they do really well with just mainly a lack of protein and then they go right to bed and they sleep well. Other people notice that when they do that they're awake and they can't sleep and so some folks notice that a little bit of protein and carbs post-training in evening, not surprisingly, ends up making them a little more calm and sedate and better able to fall asleep. I guess the optimal here is tinkering with the frequency and then how you partition it such that your energy levels are consistent and your performance is good.

Nicki: Alrighty. Let's see. Our next question is from Adrianna on gallstones and Keto. She says, "Hi Robb and Nikki, I hope this finds you both well. I'm hoping you can shed some light on an issue that's recently surfaced after a recent trip to the ER, I was diagnosed with gallstones since it was my first attack and they aren't large enough to warrant surgery yet. I've been put on watch and wait. My doctor emphasized sticking with a low fat diet, but from the preliminary research I've done, I'm pretty sure it was the years of a low fat, high carbohydrate diet that contributed to this issue. I've been on the keto diet for several months but have been generally low carb for the past year. I'm 37 years old, a mom to two little boys under three and have about 40 pounds left to lose at this point. I'm most concerned with keeping my gallbladder but feel paralyzed when it comes to choosing the right diet.

Nicki: I thought I had it all figured out with the keto diet, but now I'm not sure how to proceed. I'm assuming that my increased fat intake on keto simply brought the gallstones to light and that it was not the root of the underlying cause. I can't tolerate high fat at the moment, instant pain, so I'm thinking that a paleo approach might be the best fit for me right now. I'd appreciate any insight you have on diet and gallstones and what I can do to minimize my risk of needing surgery or any supplements you'd recommend would be appreciated too. Thanks so much, Adrianna."

Robb: Yeah. Yeah. Interesting and complex topic and again, the whenever folks are tackling any type of dietary intervention, you ask the question why? Why are you picking keto as an example? And for some people they get a disproportionately powerful appetite suppression. Like they just aren't hungry. They motor along great, they have solid energy.

Robb: If you take the old Loren Cordain paleo diet recommendations, he had a paper that was macronutrient ratios for hunter gatherers in a modern context or some something along

that line. It was quite high protein. It had a fair amount of fruit and vegetables and whatnot. It was modest and fat. But if you took that basic template and then you know ... It's not hard to take that template and tweak it a little bit and it's Keto or tweak it a little bit and it's high protein paleo and both of those strategies are effective.

Robb: If we've seen one thing we've seen that people seem to benefit from more protein generally as opposed to less so going this direction shouldn't be problematic from a fat loss perspective. And you know, if you were getting actual symptoms around like kind of gallbladder pain from elevated fat intake, then clearly that's not a good thing to do. You can do things like supplementing with bile salts.

Robb: There's a product called Tudca, T-U-D-C-A forgetting what the acronym is, but in theory can kind of help with bile salt production and mobilization. I could argue for that being either good or bad in this context. So I don't know. I don't know what the answer is in that regard, but I just think as a baseline like looking at planning out your protein and carbs first. Have about a gram of protein per pound of ideal body weight, maybe three quarters of a gram of carbohydrate per pound of ideal body weight and then just backfill the fat, you know, at a rate or at a quantity that doesn't cause any type of symptoms. Seems like a pretty reasonable way to go with this and would definitely love to hear more from you when we do the live call. If she's able to jump in and we can flush them more. That sound, that would be great.

Nicki: Awesome. Let's see. Our next question is from Shane on white fish and insulin release. Shane says, "Rob, keep up the good work. You had some work posted from Marty Kendall on Facebook about different foods and their effect on insulin release. Insulin. Agentic. I have a question. Why does white fish cause a high amount of insulin release? Is this experiment or data only telling us part of the story? Was it Cod, halibut? With all the benefits of eating white fish, should we curtail the amount we eat based on this data? Maybe you could answer this in a future podcast."

Robb: Maybe we can. We'll we'll take a crack at it. This is where I should have seen this earlier on. 2000, 2001 the insulin hypothesis of obesity was hot and heavy and it was super compelling to me because it seemed to fit so much of my experience. I had been kind of a chubby kid, chubby teenager. I was never fat, but I was also never particularly lean and it just kind of that doughy, middle ground-

Nicki: Acne.

Robb: Acne. Which is awesome, particularly with the type of hair I have. When I went low carb it seemed like I could eat way more calories. I didn't have to monitor things particularly closely. I felt really good. My energy was, was really consistent. I leaned out particularly right in the mid section. All the evidence based nutrition folks would just poo poo this stuff. But it was really compelling to me.

Robb: There was kind of a light switch type thing so it was really compelling. One of the first things that kind of popped up that should have really spun my ears up and "Errrrr" Really? This is legit, was when the data on both white fish and beef came out with

regards to insulin release. It was portrayed for a long time within the low carbs scene that the only thing that releases insulin is carbs. This was the story. Then that story changed. Oh, beef and other things release insulin. Well don't look behind the curtain and all that stuff. There were all kinds of really complex fucking coping mechanisms with this. it's like, "Well also releases glucagon and that tweaks this, that and the other."

Robb: It was all just a lot of shuffling around to try to a procrustean bed. We were trying to bend reality to fit the narrative.

Nicki: The narrative that you wanted?

Robb: Yeah. And the reality here is, you know, the why behind this Shane is that branch chain amino acids tend to produce a pretty vigorous insulin response in the context of just generally good eating. It doesn't matter. Now where this might matter is if you layer both a high protein meal and a high carbohydrate meal and you're doubling up on the insulin release, and in fact it ends up not just being additive but multiplicative, that could cause some problems potentially. We get a blood sugar high, we get a really profound blood sugar low because we overshoot on insulin production and then we're cranky and we're hungry and we go eat and we overeat. And the overeating is really where the problem emerges.

Robb: If you've found your sweet spot with regards to glycemic load, the insulin properties of eating protein are at worst benign and at best super important because you need some amount of insulin signaling it. It doesn't need to be enormous. But this is some of the stuff that Peter Attia noticed being ketogenic for a very long time is that his basal insulin level was like undetectable. He started suspecting that some problems were merging because of that. He was following kind of the classic four to one three to one protein fat deal. So it was kind of low protein and very high fat and so he really wasn't getting much in the way of insulin signaling potentially because of the way that he was eating. I guess the long and short of this is just that it elevated insulin in this context just doesn't really matter. In different contexts it may matter like eating protein and carbs together. If you're really insulin sensitive, then eating protein and carbs together as part of a bodybuilding type diet might totally be awesome. But if you're someone like me, then it's kind of a disaster.

Nicki: Got it. Okay. Our next question is from Margo on adequate potassium. "Hi Rob. Do you know where the recommendation came from that says that adults should consume 4,700 milligrams of potassium per day? Unless you want to down beat greens and avocados and a few other few foods all day long. It's kind of difficult to consume that much potassium daily from low carb foods. And given that the recommendation is to not take too much potassium in the form of supplements, you're supposed to get most of it from food. Could you please discuss this topic on a future podcast? You've always been very helpful answering my questions at conferences. Thank you so much."

Robb: Cool. I would disagree a little bit that if we are eating a generally whole food based diet, meat, vegetables, nuts, seeds, getting 4,700 milligrams of potassium a day shouldn't be that hard from even a low carb approach. You don't necessarily need to do like beet

greens and stuff like that. It is really interesting that the emphasis in the story has been put on potassium and we, we should generally get more potassium in our diet generally than sodium, but we've really kind of thrown the baby out with the bath water. We definitely do need sodium. We've seen that supplementation with sodium is really helpful for folks under a lot of different circumstances. It's funny. It's another one of these things. It's like, "Oh, you have a cramp. Well eat a banana or eat an avocado and and it's the potassium."

Robb: It's really not the potassium. When folks are given a lethal injection, it's typically a form of potassium that causes a heart cramp and that's it. Again this isn't like trying to vilify potassium. We want good amounts of potassium, we want the appropriate amounts of sodium, calcium and magnesium and really the whole kit and caboodle there. In general if we're focusing on whole on processed foods, it just kind of comes out in the wash. The way that we formulated element was such that it really plugged the sodium need dramatically and because we were getting pretty good amounts of potassium and magnesium from a whole food based diet, it was just plugging the gap on those things a little bit. You're looking up something maybe tie in with potassium?

Nicki: I was just curious where, what are the primary potassium containing foods that she might be eating?

Robb: Everything that's not processed food. That's the thing that tends to be pretty good. If we want to get down the rabbit hole a little bit, this is one of the cases for like if you cook meat, like grilling it on a barbecue or something like that. Clearly is great for flavor, but you can lose the mineral content and whatnot and so it's kind of a case. Frequently when I cook at home, I will cook some meat in a pan like pan sear it and maybe we'll finish it a different way, but then I will cook veggies or other things in the pan because of the drippings in part, both flavor, but there's also nutritional value. They're not the least of which is the mineral content.

Nicki: Awesome. Okay. Our next question is from Jonathan on asthma and food sensitivities. Jonathan says, "Hey guys, thanks for the great content. My girlfriend's son who is 11 has severe asthma, and in listening to your content, I'm thinking there may be a wheat gluten or dairy intolerance that is causing his issues. What do you recommend as the best method for checking those food sensitivities other than an elimination diet?"

Robb: Good question. And I feel like I've done this one before because I actually screwed up my computer and we had to rerecord this one. I get that in this context, like the elimination diet seems a little onerous, Jonathan, it sounds like you're taking some interest in this young man but not your kid. He's 11 years old. Like can be a lot of stuff-

Nicki: Going to school, getting exposed to all- - yeah. Wanting all of the standard foods.

Robb: A lot of stuff to unpack there. The food sensitivity testing is kind of a mixed bag. Some of it works pretty well, some of it not so much. So much of it requires pretty good interpretation skills and you typically still need to get in and test and tinker with things. The elimination diet is just kind of the gold standard. It's kind of a bastard at times, but

it's really a gold standard. We've had an example around this in our own home, which you did a great job of explaining the first time but I screwed up the computer, we'll see how it went.

Nicki: I'll give it a second shot. We include dairy in the form of cheese, mainly for our girls.

Robb: Some yogurt.

Nicki: Some yogurt. I'll eat it occasionally. Robb not so much. Girls eat cheese and I brought home this kitten about three weeks ago, which was this complete moment of utter insanity. And as soon as I brought it home I was like, "What the heck did I do? This is, we don't need this."

Nicki: But anyway, he's a great little cat. But right around that time Zoe started maybe having this like tickle thing in the back of her throat and she was constantly clearing her throat, like *ahem hm*.

Robb: And it was just constant.

Nicki: Constant. And you know, "Sweetie, what's wrong? Mom it just feels like I have something in my throat." So we're like, "Okay, what are we eating?" Obviously this kitten, she's, she's got a little bit of a cat allergy, so there's an extra allergen thing now running around our home and then we started paying attention to what she's eating. We don't do gluten at all, but we do do the dairy. So started omitting the cheese-

Robb: Well we were wondering if it was eggs or if it was nuts. And so it was a little bit of a rope dope. We pulled out eggs, didn't change anything, pull out nuts.

Nicki: And then we went to dinner with some friends that came in from out of town and I went this cute little restaurant here in new Braunfels and there was a creme brulee for dessert. So that was ordered, shared Zoe ate a fair amount of it and driving home from the restaurant that night, it was just like-

Robb: She sounded like she was beat boxing.

Nicki: Constant like, *hnn ahnn hnn*. I was just like, "Oh my God, we got to figure this out." So clued-

Robb: It helped us narrow down, "Okay maybe it's dairy."

Nicki: Narrow down the dairy. Yeah, because it was just a big whack of dairy there. Cut it out and markedly improved within 24 hours. And then she had, what did she have? She had something that had-

Robb: She had like a Quest cookie that has whey protein in it and immediately it resumed.

Nicki: That has why protein in it and it resumed.

Robb: Then ironically, like every once in a while we'll make some gluten free kind of French bread rolls mainly for the girls. But we just had butter on it and Zoe started clearing her throat from that. And this was like the ... It's the, you know, cows grazed on the Buddha's pasture and milked by the Dalai Lama

Nicki: Actually a really amazing butter. It's from a local Texas farm that's like amazing.

Robb: It tastes amazing. Both the girls love it, it looks amazing, tastes amazing and Zoe seems to react to it. It's not as bad as cheese, but we definitely narrowed this stuff down and I'll get ... Maybe she would be reactive on a food sensitivity test, but those things are not a free lunch either. Like kids need ... Depending on which one you use or it's a blood draw or there's this or that, you know, are putting irritants under the skin so that things, isn't just like this super easy thing to deal with. But what's interesting is we pulled out the cheese and then where normally she would play with the cat and kind of get a rash and get sneezy from that.

Nicki: Now she's not sneezing.

Robb: She's not sneezing with the cat. This is where I'm kind of like allostatic load, like total stress load, like the total allergen load or the total immunogenic load matters as well.

Robb: We moved to Texas. There's way more stuff that grows here. I don't know if that's a little background irritant that she has, but it's really interesting that now that she's largely removed the dairy out of the cycle. She doesn't react the same way to the cat as what she did before. So it's kind of like cat or cheese, although I think at this point, because it is interesting, it got worse once the cat arrived so the cat could have pushed things over such that cheese was a bigger deal.

Nicki: A bigger deal.

Robb: And yeah, I think so.

Nicki: So, gosh, Jonathan, I think, you know, if you have a good relationship with this kid, then maybe explaining to the best of your ability that food can affect how we feel. It can affect the symptoms that we have and that especially if he's an active kid and he wants to participate in sports and, obviously asthma can limit a lot of those activities. If you can kind of approach it from an angle of this can help you not only feel better but do some of these things that maybe you want to do and give it a shot and just give it a give it a shot for a short period of time. Because that's what we kept saying to Zoe because she'd be like, "Mom, but I love cheese." And I'm like, "We know, but we need to figure out that, you know, this isn't normal. What's going on with your throat and we need to figure out what it is. And there's plenty of other things that we can, you know, that you can eat and we'll, we'll figure that out."

Robb: Nikki figured out it's not no bake, but it's like minimal bake, these little-

- Nicki: There's something called an, I'd never had them but apparently people have grown up with them. They're called night-night cookies and so you make them with egg whites and I did it with Swerve. Normal recipe calls for sugar. Egg whites, Swerve and some chocolate chips and you just, you whip the egg whites, you add in a little bit of the Swerve the chocolate chips and you just dollop it on on a baking sheet and put it in. You heat the oven to 350 and then turn the oven off and then put the tray of in the oven and close it. You never open it again. You do this right before bed, let it sit in there all night long and in the morning they're done. And she loved them.
- Robb: What I was telling her was, She was really upset and I'm like, "Give us a chance, we'll go find some alternatives. Cause there's virtually always an alternative.
- Nicki: There's tons of recipes online for dairy free, nut free, gluten free.
- Robb: We talked her off the ledge and then the next day she tried it and she's like, "Mom, Dad, these are amazing." I'm like, "I know and we will find other things. So you know, is this an okay trade off?" And she was like, "Yeah, this is cool." Talking to them about the fact that there can and will be other options as he grows up. He may grow out of this stuff. It may not be as big a deal looking at other environmental influences like cats and dogs could, could be a consideration there. Then one final fight was the technique that I learned from Nerd Fitness when talking to kids. Just ask them, if he has like a favorite superhero like Ironman or something like that. It's like, "What do you think he eats? And you think he might avoid these things to be healthier?" And apparently the nerd fitness people have some really good success with that.
- Robb: Another one on the books wife?
- Nicki: That was our last question for this week. Thank you guys for joining us. Remember to grab some mushroom coffee from Four Sigmatic, the sponsor of today's show, you can go to foursigmatic.com/rebel and enter code rebel R-E-B-E-L to get 15% off your order. And finally, we are so incredibly humbled and impressed and excited for the Healthy Rebellion community. We've got some amazing people in there and it's just, I think it's surpassed our expectations for how...
- Robb: I had about a 60% thought that I'm like, nobody's going to show up to this thing.
- Nicki: Nobody's going to show up or that could we really create a place that's more supportive and encouraging and different than what is on normal social media? And I think, I mean, it's only been 12 days but it's-
- Robb: The people, what they're saying and they're ecstatic with it. I actually really enjoy what I'm doing for the first time in like 10 years because it's like the interactions are meaningful and you're getting to know people and it's pretty cool. I've been really humbled and it's a very, very cool thing to be a part of.

Nicki: If any of you listening would like to join us, you can go to join.thehealthyrebellion.com and I think that's a wrap. Okay. Let's see. Oh, please leave us a review wherever you get your podcasts, listen to your podcast. We'd love a review. Please subscribe and-

Robb: and if you liked the podcast and you give us a favorable review, pay attention a little bit to how many stars you give it, because somebody that was like, Robb and Nicki are the best people in the world and then it was like a four star review and we're like, what's going on there? And then actually they came back and amended it to five, which was awesome, but kind of funny.

Nicki: Yeah, kind of funny. Anyway, thanks guys and we'll talk to you next time.

Robb: Bye.

Nicki: Bye.