

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.

Nicki: The contents of this show are for entertainment and educational purposes only. Nothing in this podcast should be considered medical advice. Please consult your licensed and credentialed functional medicine practitioner before embarking on any health, dietary, or fitness change. Warning, when Robb gets passionate, he's been known to use the occasional expletive. If foul language is not your thing, if it gets your britches in a bunch, well, there's always Disney+.

Robb: Welcome back, folks. Welcome back, wife.

Nicki: Welcome. Welcome back from where?

Robb: Wherever it is we've been.

Nicki: Where have I been?

Robb: I don't know. A better place.

Nicki: A better place. This is episode 105 of The Healthy Rebellion Radio. We are thankful for you all for tuning in again for another episode. What have we got on the docket today, hubs?

Robb: Me watching you look like you're barely awake.

Nicki: I feel like I'm dragging a little bit today. I'm definitely a little on the sleepy side. I was telling... I had kind of a nightmare last night. I'm not going to go into the details, but yeah. I think I had a restless, kind of a restless sleep.

Robb: You were snoring when you fell asleep, for sure.

Nicki: Was I? Okay.

Robb: You were snoring like a chainsaw.

Nicki: Then there's that. Then there's that. Well, enough about all that. A couple of things coming up inside The Healthy Rebellion. On April 12th... I can't believe it's almost April. We're recording this on Wednesday, March 30th, but this episode releases on April 1st, April Fool's Day. This is not an April Fool's Day episode, but... Coming up in...

Nicki: On April 12th, we have, inside The Healthy Rebellion, one of our members and moderators. Jack Ruston is going to be doing a brunch cooking class with lamb and eggs and more. So that's by Ruston's Boneyard. He is amazing. I think everybody who is a member of The Rebellion can testify to the fact that Jack has some amazing culinary talents, especially when it comes to all things meat. And he's also just a solid, solid dude, great contributor to The Rebellion. So excited for that, upcoming again on April 12th.

Nicki: And then just a few days after that, on April 15th, we're going to kick off the next 30 Day Rebel Reset. So we'll do the kickoff call April 15th. That's followed by a week of seven-day carb testing for those that want to do that. That's optional. And then the actual 30-day reset starts on Monday, April 25th. So if that is something that you're interested in

participating in and you're not yet a member of The Healthy Rebellion, you can join us at join.thehealthyrebellion.com.

Robb: Very nicely done. For being almost asleep, you're just motoring along.

Nicki: I'm not almost... I'm just... Yeah. I'm here.

Robb: Dude.

Nicki: Okay. Let's see, what else, what else, what else? I think that is it for news in The Rebellion. What do you have for us for a new topic?

Robb: Sad news. Dr. Sarah Hallberg has died. She's been in a protracted battle with lung cancer, and she has never smoked. One of these mysteries of how she contracted, in particular, this particular... this type of lung cancer is that when they found it initially, it was in stage IV already, and she, at that point, had a very short window of time and theory to operate. And I think it's been four or five years since diagnosis until she died, but she... Just a really amazing person. She got plugged into Virta Health very early on.

Robb: Nicki and I were talking a little bit this morning and... A lot of people in... Well, I guess it's just the world. People are just kind of dicks, but... Some people have been critical of Sarah because she was very, very passionate about a ketogenic diet for type 2 diabetes. And I had chatted with some folks that were like, "Oh, she's a little overboard with it."

Robb: But the reality is that low-carb diet for type 2 diabetes fucking works. And when Sarah popped up on the radar, I think she did a TED talk in 2015, we were starting to see some physicians and researchers and whatnot that were championing low-carb and ketogenic diets, but... I guess I still remember being in this fight in the year 2000, 2001 and being on forums and in different places, and there were virtually no doctors. It was like Dr. Michael Leeds and his wife and a few people here and there, but it was kind of a wasteland of folks advocating for this kind of ancestral health, lower carb approach to things.

Robb: I guess, just wanting to acknowledge what an amazing contributor Sarah was to the space, the amazing work she did. She had a relationship with the Reno Risk Assessment Program because of the work that she did with the Indiana police and some of the risk assessment stuff that we helped to facilitate there and has been part of the Virta Health model. She leaves a family, three children, youngest child is 12 years old and...

Nicki: Heartbreaking.

Robb: Just very heartbreaking, very sad. So wanted to acknowledge that and just say thank you to her work. I believe that there is a fund being developed in her name to continue specifically looking at low-carb diet research in, specifically, clinical implementation for reversal of type 2 diabetes.

Nicki: Nice.

Robb: So we'll definitely put some money in that, and we'll... When that gets fully flushed out, I will circle back and we'll check that out.

Nicki: And share that. Yup.

Robb: Yup.

Nicki: Okay. Let's see. The Healthy Rebellion Radio is sponsored by our salty AF electrolyte company, LMNT. If you eat low carb or keto, if you live or work in a hot environment, if you're active, if you struggle with muscle cramps, train hard, you need electrolytes. And if you care about the amount of sugar you put in your body, you'll want to try LMNT. It has all of the electrolytes you need without the sugar.

Nicki: And we are ramping up now into spring, which then comes summer and warmer temperatures and sunshine and outdoor activities, and also Grapefruit Salt around the corner. So you can grab your LMNT electrolytes at drinklmnt.com/robb. That's drink L-M-N-T dot com slash R-O-B-B.

Robb: Cool.

Nicki: Cool, cool. First question is from Barry on kombucha. He's wondering about SYNERGY brand with no added sugar. "Hi, Robb. I'm making my way through your Wired to Eat book, and I have started the 30-day reset plan. What's your advice on consuming one bottle of this kombucha per day with no added sugar but 15 to 20 grams of carbs per bottle from various fruit juices?"

Robb: So, Barry, the fruit juice is going to act metabolically the same as just adding sugar to it. So I think that people get lulled into a false sense of safety or complacency or what have you.

Nicki: Just because it doesn't have added sugar, it doesn't... I mean, it has naturally occurring sugar.

Robb: Yeah. And 20 grams is five teaspoons, approximately. And so, maybe it's okay for you, maybe it's not. I so often see folks... Let me put it this way. If your body composition is solid, if your sleep is good, if you're physically active, and you're just kind of wanting to experiment, then that's fine, but I just find that stuff... I would so prefer you eating an orange, which would be kind of a comparable amount of carbohydrate versus drinking a kombucha that has probably some orange juice in it.

Robb: The effects of the juiced product metabolically is just very, very different. The satiety is different. The nutrient profile is different. And so, this one's totally up to you, whether you do or don't do it, but fruit juice is not a benign item. It's also not the end of the world if the portion sizes are reasonable and it's not, overall, impacting your total caloric load and everything, but these things are easy to overdo. They definitely are tasty. They provide almost nothing from a satiety standpoint. You can shoot one of these down and l...

Nicki: Quickly.

Robb: Quickly, easily. And before your kidneys have even registered an increased fluid load, you want another one, both from the taste and the sugar impact and all that stuff. So I don't know if you should or shouldn't have one of these, Barry, but they're... I would, again, recommend a whole piece of fruit in lieu of drinking a bottle of kombucha.

Nicki: Mm-hmm (affirmative). Yeah. Really kind of depends on where you're at right now and what your goals are. If you are happy with your body composition and you're curious about it, it could be something that you could even test with the seven-day carb test inside the Health... You're reading that book, so there's instructions on how to go through that.

Nicki: But if you have a desire for improved body composition or if other factors are not as ideal as you'd like with regards to sleep, like Robb mentioned, and muscle tone and all of those things, then that might be something that you might not want to do on a regular basis.

Nicki: Okay. Our next question is from Rebecca. "Hi, Robb. I am a longtime fan, and we actually did meet at the Keto conference in Long Beach in 2019. I have a question, and hoping you can shine some of your light, which I trust immensely as a healthcare provider. I've been doing more research on dementia prevention, and the data is very skewed towards the Mediterranean diet, which increases whole grains and limits fats and proteins. As someone who believes in Paleo and keto for certain conditions, what has your research guided you towards for nutritional prevention of dementia? I look forward to your response."

Robb: Yeah. And really quickly, the funny thing about what the Mediterranean diet actually is, which it... There's not one single diet to it. It's different in Spain versus Greece versus Italy. There's some commonalities like olive oil and lamb and fruits and vegetables and some nuts and seeds, some seafood and all that, but there's significant differences too, but it is not as carb heavy. It is not as grain heavy in practical application versus the way that it's portrayed, American Council of Dietetics kind of story.

Robb: So that's just a thing to consider. I put two links in here. One is to a PubMed piece that looks at both prospective potential of therapeutic benefits from a ketogenic diet for various neurodegenerative conditions, and it's pretty darn impressive. The potential here is really rather impressive. I think it's worth at least kicking the tires on it. And I do think that there's a big spectrum on this.

Robb: If people are earlier in this process, then I think a modest carbohydrate intake versus a very high carbon intake, and particularly a refined carbohydrate intake, is probably going to provide some benefit. And then this kind of leads into the second link, which is a YouTube video, Dr. Mary Newport talking about using just coconut oil for her husband who had dementia. Alzheimer's or dementia? I forget. Maybe I have dementia. But he benefited from that.

Robb: And the sad thing there was that they were mixing coconut oil, which has MCT in it, but isn't super high in MCT, so you could use a refined C8 MCT oil and get a much better therapeutic ketosis level, and they were just mixing it in oatmeal and stuff like that. They had a big fucking bowl of oatmeal. So still a huge glycemic load, but just... And even in that context, he ended up seeing some benefits, and there is some research that looks at a modified Atkins type deal. So not as restrictive, lower glycemic load.

Robb: There's also... I see a lot of parallels here. There's a low glycemic load diet with MCT that's used for epilepsy. And so, I see some parallels there. And that diet ended up working as well as the three to one, four to one, really, really strict ketogenic diet. Much easier to implement, much more latitude, but you're... Just think Paleo, modest carb Paleo-ish type stuff with some MCT oil at every meal.

Robb: And that seems like very reasonable things to do with my essential tremor stuff. I've been tinkering with some lion's mane mushroom, and I've been really impressed with that. And so, broadly, lion's mane seems to have some interesting benefits for neurological decline scenarios. And so, I'm just at the very beginning of digging into the research on that, so I will have more on that. But from a supplement perspective, the lion's mane might be a valuable thing to throw in the mix as well.

Nicki: Cool. Awesome. All right. Our third question for the week is from Borge. I'm not sure if I'm pronouncing that correctly. "Hypercarnivore Don Matesz claims we should stop adding salt." Borge says, "I chose a grabbing subject line there, didn't I? Since you are the salt, electrolyte guy," you're obviously so much more than that, "I just wanted to share this article with you." And he links to an article that we'll also have in the show notes.

Nicki: "Don is the author of two books, The Hypercarnivore and, more recently, Meats & Sweets." Yes. "Same as with Carnivore Aurelius and Paul Saladino, he's been swayed to add fruits and roots to his keto carnivore approach. But more recently, he started posting about his discoveries about sodium and that we should stop adding sodium to our foods as it will imbalance the potassium-sodium ratio. I would love to hear your thoughts on this. Maybe it's not important on a carb-based diet, but on a low carb/keto/carnivore diet where insulin is low, is it more important?" The research he refers to is from carb-based diets. And then he linked, and then there's another link.

Robb: Yeah. Before I launch in on this, I think Borge is on a couple of things here, which is that in a hyperinsulinemic, overfed Western diet scenario, folks don't really need more sodium. Interestingly though, they don't really benefit from reducing sodium. When we're talking specifically about hypertension, this is a ton of the stuff that I... I just feel like it's a little bit Groundhog's Day because I just did a talk for the UCSF Evolutionary Medicine-

Nicki: Symposium.

Robb: ... symposium, and it was about all of this type of stuff. And again, maybe I am developing some sort of dementia myself where I'm like, "Did I already talk about this?" But when we do a really honest look at the literature, clearly there's a linkage between, say, atherosclerosis and blood pressure, and there's clearly also a linkage between blood pressure and sodium. But it's not as simple as, "Reduce sodium and you will reduce blood pressure."

Robb: There's actually certain folks who... low sodium intake ends up causing hypertension because of the stress that is created in that scenario, and these people see elevated angiotensin and renin and epinephrine, and you only normalize that with an increase in sodium, which is kind of interesting.

Robb: And then other folks, they're hypertensive and we put them on low-sodium diets, and blood pressure goes down a tiny bit but not really that much, but those same people, if we fast them or low carb them, then the blood pressure drops remarkably. And there's kind of a rule of thumb around that. You get about a 1.6, 1.8 drop for every kilogram of weight loss if the individual is hyperinsulinemic and overweight and whatnot. So if the person's carrying 10 or 20 pounds extra and they're hypertensive and if they're able to lose that 10 or 20 pounds, you could have a really profound, much more profound change in blood pressure from altering the insulin side of the house versus, say going on blood pressure, modifying drugs, which offer no benefit for longevity and whatnot. So that's all that stuff.

Robb: How else do I want to tackle this? If folks have followed me for a while, they usually probably have a sense that I don't do a ton of character assassination stuff. But every once in a while, I feel a need for maybe mentioning a person's past and their character and things like that, and Don is an interesting person. He was very early in the Paleo diet scene. He was pretty tight with Loren Cordain. He and I had a number of interactions back in the early, early 2000s.

Robb: And then ironically, just about the time that Paleo started getting popular, about 2010, 2012, Don went completely off... in my opinion, off the grid of reasonable thought. He had this post, thoughts on... Or it was called Farewell to Paleo, and I think this was 2012. And ironically, Don has since taken this post down. But in that post, he basically said, "Wow, what a quaint experiment this was, but emulating caveman dietary patterns is so dumb. What a fool I was. I'm now eating tons of whole grains," and he was a huge advocate of tofu, ironically. He pretty much went vegan, which...

Robb: If people want to experiment, that's fine. That's totally fine. That's great. But it was this kind of weird about-face and everything that he had been doing was wrong, and he had a similar take-down to what he's done here on the sodium piece. Animal diets cause all these problems. And he has since done a pretty thorough job of expunging that stuff off the main internet. You can still find all that stuff off of the Wayback Machine.

Robb: But Don did that for a number of years and pretty much alienated everybody that he had been friends with at that point. And then he kind of had this mea culpa and he's like, "Well, maybe this vegan thing isn't working out. I'm super depressed. I'm having all these health problems." And now, I guess, he's the carnivore guy. He's not just a carnivore, but he is a hypercarnivore,-

Nicki: He's the hypercarnivore.

Robb: ... for fuck's sakes. And so, here's the other ironic thing with all this stuff, which is just going to be me being a cranky old shit. But for me, all the way along, when I've looked at this carnivore stuff, it's like... Some people clearly benefit from a legitimately all-meat diet, and in some people, it's like one-cut carnivore, like rib eyes, I think, the Petersons.

Robb: Mikhaila and Jordan are still kind of in that rib eye-or-nothing deal. I'm not 100% sure, but I think that that's kind of the case. But I also recognized early on that some people would be okay with some fruit and some veggies, and this is kind of how this thing has played out. So all these folks now who were like, "Paleo sucks. Carnivore is the way to go." And then you motor a little bit forward, and now it's like, "Oh, well, here's carnivore, but we're just eating fruit and tubers too." And it's like, "That looks a lot like Paleo, I guess, minus the salads."

Nicki: Mm-hmm (affirmative).

Robb: And so, I just wish that people would... I don't know. I was...

Nicki: Well, they're experimenting and they're finding what works for them. It's just kind of crazy in our modern world where everything's like an Instagram post and my... Whatever line in the sand you can draw or carve out that makes you unique and special and elevates your...

Robb: I guess that's the ass-chapping part of this. I do a lot of like, "Hey, this is what I'm doing now, and I'm experimenting." But there's been a lot of like, "This is the fucking way," and then the way changes and the way changes and...

Nicki: And now it's the way plus this thing, and the way plus this and this, and... Yeah.

Robb: And it just gets old.

Nicki: Yeah.

Robb: It works, I guess. I would feel like a fraud doing that.

Nicki: People like the flashy new thing, the new rebrand.

Robb: Yeah.

Nicki: Yeah.

Robb: So there's that stuff. And then back to what Don actually posted, I think a lot of the material that he has here... It's a piece at fullrangestrength.com/salt-promotes-atherosclerosis. There's a lot of good material here. I think that there's a lot to this, but it's in the context of an overfed, insulin-resistant individual. And I also think that Don ends up getting the cart before the horse where he is talking about and he references a chemist that he interviews talking about the relative ratios of potassium to sodium, the importance of chloride in this potential atherosclerotic process and whatnot.

Robb: I think there's a lot of truth there, but what's getting missed is that when people shift to a minimally processed, largely whole food-based diet, they're getting a lot of potassium, a lot of magnesium. It's typically a very alkalinizing diet generally, even though I don't think that that's nearly as big a deal as what folks try to play the whole thing out to be.

Robb: And then in that context, the amount of sodium that you consume should be based off of what your needs are. And if you're physically active at all and, at all, in a consistent clip, you're going to really benefit from more sodium. And I just don't see... The concerns that I see raised here, again, I think are valid from the perspective of, "You're overfed, you're inflamed, your insulin levels are high, and we're throwing a bunch of sodium on top of that."

Robb: But we're pretty well-understood that... Particularly if people are on the lower carb side of things, the keto side of things, the natriuresis of fasting is causing a remarkable loss of sodium specifically. And if we don't address that through diet, we will pull sodium out of the bones. When we pull the sodium out of the bones, we're also pulling calcium out of the bones, and I think that there's a whole cascade of negative issues there.

Robb: I would also just throw out there, follow this approach with absolutely no sodium added to it and come do two hours of jujitsu with me today, and wear a gi and we'll have the room 80 degrees, and then we'll motor along and you can do your hypercarnivore diet, and then we'll do it again tomorrow, and then we'll do it again the next day and the next day and the next day. And by the fifth day, you're going to be... You're going to have a cramp so large that it's going to start from your anus and finish in your earlobes, and you're just going to die from it.

Robb: And that could have all been prevented by just adding a little bit of sodium to the mix. Some people need a lot more than others, but that three to five grams per day seems to be a reasonable place to be. We have some very solid all-cause mortality research, which is epidemiological in nature, but it is so uniform across cultures that we see increased lifespan and decreased all-cause mortality at sodium intakes between three and five grams per day. And when you start getting below that, when you start getting above that, in general, then we start seeing problems. But I would say that within an athletic population, we have a caveat there because these folks are losing a lot of sodium.

Robb: We've done work with NHL teams where these NHL hockey guys will... And they're big dudes. They're over 200 pounds but they're not huge, but these guys will lose 10 grams

of sodium and 10 pounds of water in a hard practice or a game. And you're telling me you're just going to hypercarnivore yourself back to being okay the next fucking day without replacing that? It's just so devoid of context, and it's just kind of funny.

Robb: And again, Don had some really... A very smart guy. And early, early on, he had some very interesting insights on some stuff. He had some insights that... And I don't think Loren would admit this now because Loren is also kind of an unethical turd in many ways. But a bunch of the research avenues that Loren ended up doing, I would say a decent number of those where people like Don saying, "Hey, Loren. Have you thought about this?" And Loren, "No, I hadn't thought about that." And then he would go investigate it, and to Loren's credit, three, six months later, there would be a paper published on that topic.

Robb: He would get a kernel off the topic, and then he would go to town. The paper that Loren published on EGF, epithelial growth factors, was something that I put on his radar back in, shit, 2000, maybe 2001. I forget, but very, very early on. So anyway, what else can I flail around here with this? I don't... I think that there are aspects of this that are accurate, again... And Borge kind of touched on this within. Probably smart to be...

Robb: Adding salt to an already insulin-resistant, hypertensive individual is not going to help things. But interestingly, curtailing salt in a hypertensive, insulin-resistant individual isn't really going to help things that much either. That's not the main driver. The main driver is the insulin-resistant state that is causing the body to retain sodium by hook or by crook. And so, once you start eating this more carnivore, hypercarnivore, carnivore with fruit or honey or crickets or whatever the fuck works that day,-

Nicki: Or Paleo. Low-carb Paleo.

Robb: ... or this thing that we call moderate-carb Paleo, Paleo minus salads, then I think that you're probably going to... Especially if you are fairly active, you're going to want to add some sodium to things. And something that folks miss in this, we look at the Hadza, a little bit of the !Kung San and whatnot, those folks are active, but they're not mega-active and they're not mega-active every day, and there's maybe a lesson to be had from that.

Robb: But if you want to maintain anything, like a modern fitness regimen, doing jujitsu, doing CrossFit, or whatever, it's actually an activity level and an intensity that's probably higher than the ancestral norm, which is probably important just to offset some other considerations of our otherwise sedentary diet, or sedentary lifestyle, but... Oh, what the fuck is my point? I completely lost my train of thought. I really am getting dementia. What was my point?

Robb: Oh, just the activity level, you're probably going to... So these folks don't necessarily salt their food all that often. Maybe occasionally they get some access to it. But they will be active one day and then not particularly active the next day or the next day or the next day. And I think if we live like that, with the other perks and also challenges, then you might not need to do the sodium. So the sodium might actually be a little bit of a patch for the way that we live in a modern world, and also the fact that we probably are artificially eating fewer carbs than what a lot of these modern groups are eating. I don't know. I don't know.

Nicki: The cramp from the anus to the earlobe was... I like that one. I like that one. Okay. I think that was our third and final-

Robb: It better be the last.

Nicki: ... question this week, hubs.

Robb: Might be the last podcast-

Nicki: Ever.

Robb: ... of this show.

Nicki: Yeah.

Robb: Yeah.

Nicki: Just put the nails in the coffin and...

Robb: Yeah.

Nicki: Well, folks, thank you for tuning in for another week. I hope you have a fabulous weekend. Thanks for joining us. And please remember to check out our show sponsor, LMNT, if you don't want to get a cramp from your anus to your earlobe. And you can find those electrolytes at [drink L-M-N-T dot com slash R-O-B-B](http://drink-l-m-n-t.com), and we'll see y'all next time.

Robb: Bye, everybody.