

The Paleo Solution

Episode 91

Robb Wolf: Hey, folks. Robb Wolf here with Greg Everett. It's episode 91. It's not early in the morning but it feels early in the morning at least to me.

Greg Everett: It pretty much always feels early until about 1:00 or 2:00 for me.

Robb Wolf: And then it just feels late.

Greg Everett: Like it's worn down from the day so...

Robb Wolf: I have a 15-minute window in which I feel really optimized.

Greg Everett: Yes.

Robb Wolf: It's either lagging or crashing one or the other. So what's new with you, dude?

Greg Everett: Oh, man, not a whole lot. I'm going to build some new pulling blocks today hopefully if I'm feeling ambitious and that's about it.

Robb Wolf: Sweet. I have no such ambitions. I'm just working on some articles about performance, health and longevity and all that silly hookadook.

Greg Everett: Well, that's way harder than building stuff.

Robb Wolf: Not if you have my skill set with building things.

Greg Everett: Oh, well, good point.

Robb Wolf: I would end up with two fingers and a lot of ruined wood so...

Greg Everett: All right. Well...

Robb Wolf: Since we're super fired up, I guess we'll just jump in on this today.

Greg Everett: How's life post public seminars for you?

Robb Wolf: We still have one more seminar to do but it's good. We've got some forward momentum on the CME offerings that we're trying to put together. It's just a really long, really expensive process to jump through

all these silly physician-oriented medical education offerings but just basically chipping away at it. It could be a full-time job just trying to get that stuff done, but I just have to take an hour to here and there and between doing everything else.

We have one person who's kind of focused on that as her primary gig, getting that thing going. Then I have some input as well. Nicki is working with a couple of dudes from the original Expedia founding members on a business management software package, and that looks pretty interesting. So we'll be talking to folks a little bit about that. Keystone is clawing at my feet right now because he wants attention. And that's pretty much my life.

Greg Everett: Wow!

Robb Wolf: Yeah.

Greg Everett: You got a lot going on.

Robb Wolf: It's a complex scenario and I really don't deal with complexity very well. The multitasking deal I fail on pretty epically so...

Greg Everett: Yeah, that is definitely not my strong suit.

Robb Wolf: Indeed. Women are better at multitasking. I am absolutely sold on that one.

Greg Everett: It's true. When I work for the ambulance company, I used to pick up dispatch shifts every once in a while for extra money and by and large the male dispatchers were terrible, me included, and the female ones were totally calm, composed, handling like six calls at once. We get two calls at once and just the world would fall apart.

Robb Wolf: Yeah. We're just good at killing stuff and fighting and scratching ourselves. I think that's where we really shine.

Greg Everett: Yes. I know I do.

Robb Wolf: And then women are good at other stuffs.

Greg Everett: Yes.

Robb Wolf: So with that preamble, maybe we should get going.

Greg Everett: We should probably get going before we dig ourselves a deeper hole.

Robb Wolf: Sweet.

Greg Everett: Justin says, "Hi, Robb and Greg! Before going Paleo, I was a bug magnet every time I went outside during the summer. This year after going Paleo, I regularly go hiking with my non-Paleo friends." How can you have non-Paleo friends?

Robb Wolf: I don't know. The orthodox Paleo-ites will definitely bounce this dude out real soon.

Greg Everett: "And while they complain about the bugs and are swatting constantly, I have gone without bug spray and not really been bothered. After trying some low carb Paleo for the last month or so (and entering ketosis), I have been practically immune to the critters, and it got me wondering.

Google didn't lead to much, but it did lead to this study," and Justin has a link which we will include, "which showed that a handful of compounds produced by the body (including some ketones) could be more effective than DEET as a natural mosquito repellent. The problem is I don't know squat about biochemistry so I can't tell whether this kind of thing could really be attributed to Paleo. Is there anything to my experience, or is it pseudoscience? Thanks, guys!

Robb Wolf: This one is kind of an interesting one and here again I wish I could share more about the project that I worked on but I'll say this. I was exposed to both ketosis and bugs and usually I am also the bug magnet. And although I definitely was pestered by mosquitoes a fair amount, it was nothing like what it used to be in the past. So I've kind of had this experience also.

Like he mentioned, there's not a ton on the internet. I looked on PubMed looking under some Google search terms like blood sugar mosquitoes attract in and stuff like that. There's not a lot of good science out there, but there's tons of anecdotal information and then a little bit of fairly legit science that seems to indicate that mosquitoes definitely do hone in on folks with higher blood glucose levels.

So generally, when you're in ketosis, we're partitioning blood for the brain so we have relatively low blood glucose levels, higher ketone body levels obviously, and kind of the primary fuel that mosquitoes run off of. They're not very lipid driven. They're much more glucose driven. So it

makes sense that they're going to kind of hone in on high blood glucose levels. So that stuff all makes sense.

Eating Paleo, in general, really depends on how you're going about it whether or not you're going to be more in ketosis or not with the caveat that if you are metabolically healthy, I think we generally run a little bit heavier even if we're eating higher carbohydrate intake you do like a Kitavan type diet that's maybe 50-60% carbohydrate. But we're not metabolically impaired. We still have the ability to access body fats for energy particularly between meals; probably have a little bit higher ketogenic activity going on relative to a population that's metabolically challenged. I mean this stuff all makes sense.

There's a little bit of science out there that supports it. Not a ton. There's a mountain of anecdotal stuff of people just talking about "Hey, I'm a Type II. I became Type I diabetic. Bugs never used to bother me. Now they're all over me. What's the deal with this?" and similar deals with the Type II diabetics. Just different forms folks talking about this and how the Type II diabetic individuals seem to be like the bug magnet in their group of friends.

It's interesting for me as a kid and young adult looking back now I realize that probably because some genetics, I've always been a little bit on probably the insulin resistant side and had a tendency towards that. So it kind of makes sense that -- I definitely have always been kind of that bug magnet individual. So not a ton of science, a little bit of science, lots of anecdote, and kind of interesting especially when you are the person that is getting chewed on all the time.

Greg Everett: Yes. And it's probably good the less DEET you can rub all over yourself.

Robb Wolf: Indeed. Indeed. Although it's funny, I worked in a supplements store one time and this seriously hippy family came in. I mean like the mom, the dad, the kids, the dog all had dreadlocks and they were like "We can't use DEET. We're going to Lassen Park. We're going to camp in this one area." I was like, "Dude, buy some DEET. Just take it with you for the love of God," because like I had backpacked in this area.

Other than one or two places that I've been in Central America or in Montana, there are some spots in Lassen Park that you can hardly see. The mosquitoes are so thick. This guy was like, "No, I'm not going to buy that stuff. It's supporting the man. It's Monsanto and this and that." I'm like, "Okay, dude, whatever." So they got some of the natural insect repellent. And these folks were back the following morning and then they

needed eight bottles of calamine lotion because to a person like they had welts on top of their welts on top of their welts.

I don't know. Whenever I think about the mosquito deal and the cost-benefit tradeoff of DEET, it's definitely not great stuff but relative to being awake all night and being eaten alive or if you're in some area where there's actually some West Nile or malaria or something, I'll let my live deal with the DEET and not get eaten alive. But remembering always tickles me pretty good just because I love hippies.

Greg Everett: Yeah. All right. Matt says, "Robb and Greg," there's no segues today.

Robb Wolf: You didn't even put chapter titles on this stuff.

Greg Everett: Yeah.

Robb Wolf: Awesome.

Greg Everett: "I'm an ardent listener of the podcast and really enjoy and appreciate all the information you give out for free. I follow pretty strict Paleo plus dairy after reintroducing it with no issues and usually directly post work out, and CrossFit 4 to 5 times a week – otherwise I'm working a typical office job – but I find that no matter how much I eat I rarely feel full. Have I just got my quantities wrong?

When I look at it on a plate it looks like I'm eating about the right amount. Before I went Paleo and was eating for mass/energy to play rugby I had the same problems of not being full despite 4-5 large meals that included a fair amount of carbs from grains, potatoes, et cetera.

A typical days food will look something like this: Breakfast: 3 eggs cooked in grass-fed ghee, one large banana, a handful of nuts, fish oil. Lunch: Large salad (Leaves, tomatoes, peppers, et cetera) about 5 to 7 ounces of meat/fish, 2 to 3 tablespoons of olive oil, apple. Dinner: Large piece of meat/fish cooked in ghee, vegetable with butter, occasional squash/sweet potato (approximately 3 times a week) and nuts.

During the day I'll snack on nuts (about 200g+ per day), fruit, raw vegetables, et cetera, and whenever I work out I drink 25 fluid ounces of full-fat, unhomogenized milk immediately afterwards. If I'm at home I'll also be eating spoonfuls of extra-thick cream straight out of the tub just to try and fill the gap. I'm 23 years old, 6'2", 85kg and about 8-9% body fat.

My question is: (a) am I simply not eating enough? and (b) what can I do to not feel so hungry between meals? There's only so many nuts one man can face eating in a day. Thanks in advance and keep up the good work."

Robb Wolf: Taking a peek at this, it seems skinny to me. I'm assuming --

Greg Everett: I would weigh 12 pounds if I ate that.

Robb Wolf: Yeah. I never eat only three eggs for breakfast. I'm more like 4 to 5 eggs than 3 to 4 pieces of bacon. Typically, my larger wax of carbs are post-workouts. I'm usually not having a banana with breakfast and stuff like that. But otherwise, it's -- I am definitely eating more than this and I'm weighing 165-170 pounds, something like that. So shooting from the hip I'd say you're probably undereating even -- we're more considering the snacking and eating 200 grams of nuts per day. I would just say up all of your quantities generally.

One thing in this and we've talked about it a lot in the podcast, if you're feeling hungry, there's a potential for undereating but I think for a lot of people too much carbohydrate, it's not as satiating as protein and fat so you have the protein and fat at most meals, save the carbohydrates for mainly post-workout and post-workout periods.

It's not ideal but for me I've been forced to train in the afternoon. So I usually start training about 3:30 and wrap up about 4:00 or 5:00-ish, something like that, 4:30 or 5:00, and then I do my post-workout carb meal and do a little bit more carbs after that if I had a really good burner which is not ideal for me but it works pretty well. But I'm definitely not hungry at all through the rest of the day. So I would say eat more, partition carbs post-workout, and that's pretty much it. Anything you can think of, chief?

Greg Everett: Well, yeah. I mean it seems like he's getting plenty of fat with all the snacking and stuff but that's one that stood out as (1) just not enough food overall but (2) the protein is pretty low.

Robb Wolf: Yeah.

Greg Everett: I mean three eggs in a meal, that's like 15-20 grams of protein maybe. That's nothing. You know what I mean? I can lick that off my lips right now. And then 5 to 7 ounces of meat or fish, that's better but maybe do two of those.

Robb Wolf: Yeah.

Greg Everett: And then dinner, the same thing. So I mean at 6'2" and 85 kilos, 187 pounds, that's pretty thin.

Robb Wolf: Yeah.

Greg Everett: I mean that's a little bit wispy. So I would definitely say -- at 22 years old and 8-9% body fat, you're probably burning pretty hot. So I would just be throwing a lot more protein in there and just more food overall for sure.

Robb Wolf: Without a doubt, yeah. If the body fat creeps up to 10-11%, I wouldn't freak out about that. Probably a better androgen levels there anyway, which again, you're 23 so that's not a huge issue. But definitely more food, partition some carbs, you should be good to go with that.

Greg Everett: Yeah. All right. Jennifer says, "Robb, I am a 51-year-old female who has recently begun the Paleo journey. I am 5'1" and on May 20th had a starting weight of 141 lbs and a number of health concerns. I was diagnosed with osteoporosis in my early 40's with an overall DEXA scan of -3. It was a surprise to me and the medical staff as well at such a young age.

Early treatment began with calcium supplements and oral meds (Fosamax, then Boniva, et cetera) which made me so sick with severe stomach pain that I had to be taken off the meds immediately. For the next 2 years I took daily injections in my stomach of a medication called forteo (restricted to 2 years of use)." Oh, that makes you feel confident.

Robb Wolf: Seriously.

Greg Everett: "My DEXA scans were increasingly better, but over the last few years began to decline somewhat. Next treatment (and current treatment as well) is an annual infusion of Reclast. Additionally, I have suffered from migraine headaches since childhood and over the past year or so have undergone weeks of physical therapy for chronic joint pain, back pain and swelling of my hands and feet and oddly enough some neuropathy as well.

Most recently, I've been tested for a number of autoimmune diseases to include MS, Lupus, RA and Lyme Disease (due to horrible skin rash on my left shin, joint pain and fatigue.) After 3 months on steroids and 4 weeks on antibiotics the rash finally subsided. P.S. None of the testing revealed anything definitive.

Today is July 19, 2011 and I am happy to report that my current weight is 126 lbs and I feel better than I have in years. No swelling or joint pain and no migraines since about week 2 of going Paleo.

My question and concern is about my continued osteoporosis treatment and your opinion about Reclast or if you feel my bones can actually heal and become strong as a result of the Paleo way. My last Reclast infusion was in December 2010 and I started Paleo in May 2011. Supplements include Carlson's Fish Oil and I have ordered Natural Calm and will begin taking that on a regular basis. Do you have any recommendations for the treatment of osteoporosis? Your advice is valued and much appreciated.

Robb Wolf:

Gosh! A lot of stuff going on here, but whenever I see migraines, this kind of systemic inflammatory stuff, it's interesting, used to in my head. I had the issues of metabolic derangement completely separate from autoimmune disease, but we now have a pretty good understanding that systemic inflammation underlies both of these conditions. If you think about the immune response, we have the innate immune response on the one hand which is kind of someone dumb, unadaptive, it's macrophages and whatnot. And dumb is just pain to get in comparison to the adaptive immune system which produces antibodies and whatnot.

All of this is a spectrum of our immune response and if we have inflammation, it can up regulate the immune response across the board, and this manifests in anything from metabolic derangement, insulin sensitivity, to autoimmune disease, to systemic inflammation. It just kind of runs the gamut. So what we have here is kind of interesting. This is where the wheels start falling off the wagon for folks where she's getting tested for MS and lupus and Lyme disease. You've got some diffused pain throughout the body. There's migraine headaches which we know are related to insulin-resistance in blood sugar crashes and stuff like that.

So we've got a bunch of different problems going on here. Additionally, we've got this issue of osteoporosis which if we do a little bit of digging on the osteoporotic process, the main issue with that typically is some sort of insulin resistance coupled with elevated cortisol levels which is very, very antagonistic to bone growth. It basically starts bleeding calcium out of the body and this is really -- I think the main vector of where we find osteoporosis brewing is basically an insulin resistance and inflammation in elevated cortisol levels. If we reverse all that stuff, we should be able to reverse the signs and symptoms of osteoporosis.

So where I would be with this, I would make sure that my vitamin D levels are good, somewhere around 60 nanograms per milliliter. You may need

to supplement with that. If you can get a lot of sun, that's good, however you go with that. And then from there kind of a lowish carb, didn't have to be super low but a little bit on the low side Paleo-type diet and some really good resistance training -- back squat, deadlift, press, push press, bench, pull-ups. I mean just get strong.

The main focus that you want to do is basically kind of like bodybuilding or powerlifting type stuff because you want to build bone mineral density via getting stronger muscles which are increasing the loading that you're putting across long bones. Basically, the more that we flex and torque on these long bones the thicker and more robust they become. So walking is okay for some of the -- like the spinal column and stuff like that, but we need some really vigorous loading to rebuild bone mineral density particularly in the hips and in the long bones, the hip articulation, the femur articulation, and all that stuff.

So what you do with this is you get on a smart strength and conditioning program, you eat Paleo, you get your sleep dialed in, all the standard stuff, you sleep in a pitch black room, you do all the cortisol and autoimmune protocols that are either for free on the website or found in the book, and then you check in with your doctor. As to whether or not you use the Reclast, I would just check in with your doc and see if he or she is game for you doing a lifestyle modification experiment to see if you can get as good or better results without the Reclast as with it.

And what you do is you give it a six-month run and you go lowish carb Paleo, get your sleep dialed, lift some weights, check before you start this protocol, check after you start this protocol and see where you're at. And then also it's nice that you have all of these earlier DEXA scans so that you can use those as previous baselines as well. And then it basically just plays out to do we see improvement and I would be shocked if you didn't see improvement by doing this.

But if you don't, then you've got the Reclast as a fallback deal. But I think it's too completely reasonable to reverse these signs and symptoms of osteoporosis. It's going to be an integrated approach to do it.

Greg Everett: That seems to be the biggest component that people either ignore or don't understand is that the bone is a living tissue. People tend to think of it like it's a chunk of cement that's getting worn away or something. So the only option is some kind of weird drug infusion into your stomach.

Robb Wolf: Yeah. It's an unfortunate thing. When you dig around in the literature because folks are typically looking at sedentary metabolically deranged

people, then it's just kind of an if A, then B kind of extension that people lose bone density over time as they age. Similarly, it's kind of an if A, then B deal that we lose muscle mass as we age. We definitely do lose muscle mass to some degree but we find in the reactive populations, in hunter-gatherer populations that sarcopenia and osteopenia is not a normal condition and it does not progress anywhere near the rates that we see in westernized populations.

So our medical community is a little bit blinded in this because our normal population is assumed -- normal is taken to be who is walking through the door. It's not looking back and looking at a baseline. What's really healthy should be the basis or normal. In fact, virtually nobody is healthy at this point. So we assume that there's no fixative other than pharmaceutical intervention and it's completely wrong.

When we look at this stuff with Fosamax and Boniva and some of this stuff, it's funny. It will improve a DEXA scan, it will make the bones thicker, but it doesn't prevent fracture. It may actually increase fracture rate because what this stuff does is it kind of aggregates -- what do they call it? The microcrystalline hydroxyapatite I think is what the actual bone matrix is made of but a really important element of that is the scaffolding almost like rebar made out of protein. But the way that the Boniva and the Fosamax work, they don't really work synergistically with that rebar element of the reinforcing proteins. It just aggregates calcium.

I think somewhere in maybe three years ago I did a pretty lengthy blog post on this. So what we find when we really look at the outcomes, the purpose behind all this stuff, why do we care about osteoporosis at all? We care because if somebody falls, they break a hip and potentially they die from that. They die due to complications breaking a hip, breaking an arm, something like that because the bones are weaker.

So we want thicker, stronger bones but in fact when we look at the outcomes with Boniva and Fosamax, the bones may become thicker but they are not actually any stronger. They may actually be more brittle than not doing any intervention at all.

Greg Everett:

Awesome.

Robb Wolf:

Yeah. And then you've got a plethora of side effects with it and we completely ignore the fact that the change in nutrition and lifestyle especially reversing metabolic derangement, reversing inflammation, and getting people lifting weights like two days a week like doing a full body circuit routine two days a week is plenty to rebuild both muscle mass and

bone density and dramatically improve health and lifestyle outcomes. It's a 30-minute full body circuit done on Monday and Thursday is enough for a 50 to 80-year-old population to have great health outcomes, great muscle mass, good bone mineral density.

If we're taking care of these other elements, and we're talking about an hour a week of exercise in the gym and then hopefully the rest of the time is spent being active and doing some other stuff because, we definitely need more activity than that to really be as healthy as we could be. But it's minimal interventions and we're just not educating people on this stuff.

Greg Everett: That's correct.

Robb Wolf: And apparently, I've perked up a little bit because I'm jabbering like a wild man now so...

Greg Everett: It's okay. It's what people pay you for.

Robb Wolf: Indeed. Indeed.

Greg Everett: All right. Michael says, "Hi Robb and Greg, hello from England! I've been Paleo for about 18 months, totally get it and am grateful for your work. I'm slowly but surely convincing my wife that this is how we should both be eating. We are expecting our first child in October 2011 and are starting to discuss how we will feed him or her (after breastfeeding).

Whilst my wife agrees that our child will likely be better off eating meat and vegetables, she is concerned that cutting grains out completely will cause problems. Given that our child is unlikely to avoid grains for its whole life, we would not want it to experience a potentially dangerous over-reaction when he or she shares pizza with friends years from now.

What do you think? Could excluding grains lead to intolerance? Could it be a good idea to include some grains in a child's diet to build up resistance? Many thanks."

Robb Wolf: God! This one, I don't know why and I'm really not being a dick. I'm really not trying to attack folks. I don't know why this one just gets my goat, the kid deal. The thing is that you don't build up a resistance to this stuff. I don't know how to explain that to people anymore clearly like it's in the book. I've written about it a ton on the blog. I've talked about on the podcast. Like I said, it causes me to almost go fetal on this thing. You've got a window of time with the kids and this is pretty well understood,

Fasano's work on gluten resistance and gluten intolerance and autoimmune diseases.

If you keep a kid gluten and dairy free up until the age of five, you decrease their likelihood of developing Type I diabetes by about 80%. So what you are actually doing is allowing the child's gastrointestinal tract to actually develop and become as robust as it can be by avoiding the grains, legumes and dairy.

Additionally, you're saving yourself and the kid a mountain of suffering because what we see again and again and again is that people -- maybe the mom ate Paleo during the pregnancy and she did pretty good and then they go from breastfeeding to weaning and then they start introducing things like Cream of Rice and Cream of Wheat and the kid starts getting GI problems. And they start getting whacky poops, they start getting colicky.

But everybody assumes that this is normal because all kids end up having this. But we're slowly getting a bigger pool of people that are actually feeding their kids this way and we just don't see any of these GI problems. If you check out Everyday Paleo, if you check out Growing Up Paleo, you've got two moms with four kids between a lot of them. There's a bunch of other people out there with their kids and they're feeding them all Paleo. These kids are doing shockingly well.

My nephew, Kaden, is like the 99th percentile on everything except his body weight like his height, his developmental capacity, everything is off the charts except the fact that he's lean and not fat for his height and his weight and age and all the rest of that stuff. So that's the only thing missing with this.

The concern about whether or not the kid is going to have some mega overreaction down the road, they will probably have a reaction if they had pizza when they're five, but the thing is that they're probably in a spot then where they probably will not develop Type I diabetes. But the thing is this is something that folks have to get. It's a game of roulette to some degree, Russian roulette here in that anytime you introduce some sort of a gut irritant to a human being or any type of organism, you've got a potential for problems to arise.

With that said, with Kaden, we'll give him some corn chips once in a while and stuff like that. We just kind of see how he does. He doesn't seem to have any GI problems with it so every once in a while we're out at Mexican food, get some corn chips. Anytime he's had any type of a gluten

exposure and it's always been accidental up till this point, he has serious gastrointestinal problems for a couple of days. Exposing him to that every day would cause him to have a level of inflammation in the gastrointestinal tract that I guess we could call resistance to some degree, but then the kid is at a base level of being sick and compromised all the time. So I kind of make this a little bit analogous to at some point your kids may go out and have cocaine and heroin.

Greg Everett: Hopefully.

Robb Wolf: Hopefully because that's where the good life is. So do you give them the cocaine and heroin as kids so that they build up a resistance to it? It seems --

Greg Everett: What's your question?

Robb Wolf: Greg like, "I may have extra kids so I can dig into the stash." I mean that's maybe getting a little bit wild or far afield but I -- we haven't had kids yet. We're looking forward to having kids. All I can tell you is from my perspective you have this shocking opportunity to grow up your kids in a way that we didn't have the benefit, we didn't have the opportunity. I didn't have the opportunity of being raised largely grain-free which would have probably dramatically improved my health as a kid, just shockingly.

So what I'm saying to you guys is that when you have your kids, you've got an opportunity to do right by them in a way that was never an opportunity for us, our generation, because our parents just simply didn't know about this. We didn't have this information at hand. So you drive the boat however you want it with your kid. Like I always say with this, I'm not trying to turn it into a religion.

I'm not trying to make it some sort of orthodox Paleo-like kind of gig. But when the kids come into play, I guess I get a little bit more protective and I draw a little bit more sturdy of a line in the sand because they don't have a say in the matter. They don't know any better yet, and you as parents do. You have an opportunity to allow your kids to grow up and be healthier in a way that most people don't understand currently.

What I'm imploring upon you is that your kids will be better off without the grains, without the legumes, generally without the dairy. If you want to throw in some grass-fed butter on their veggies, fine. If they have any types of signs and symptoms, GI distress or autoimmune type things going on, then ditch that stuff. That's just kind of my whole deal. Once the kids become older, they're 10, 12, something like that, they're

certainly not adults but I think they're certainly old enough to make their own decisions and they're going to start hanging out with friends and going out and doing whatever, then you teach them these wacky life skills of consequences.

You do something and there are consequences associated with it. You explain to them that there are maybe foods that may not make them feel good and they have some health consequences associated with it and you start teaching them value systems based around consequences and it starts with food and then they're not neurotic about their food but they understand that eating certain things may have untoward effects on their health, and then they make decisions about whether or not that's a viable cost-benefit decision for them and they start growing up and being actual like whole human beings instead of not being able to make decisions on their own.

But they've got a protective period of time that I think we as parents it's - - I don't know. I don't want to get too moralized about this but I think you have a really big opportunity to do good by your kids and I guess I'll leave it at that. But you're definitely not going to do better by them giving them grains, legumes, and dairy earlier. I am absolutely sold on that. I've written a ton about it. There's plenty of other information related to it. So I guess that's my shtick on it.

Greg Everett:

Sounds good.

Robb Wolf:

Greg is like, "For the love of God, shut up, Robb."

Greg Everett:

Yeah, when you said you were tired, I was hoping to have quick answers.

Robb Wolf:

Apparently not.

Greg Everett:

That's cool. You're easily wound up.

Robb Wolf:

Yup.

Greg Everett:

All right. Brissia says, "First I want to thank Robb, though it might sound like I am exaggerating; I want to thank him for giving me my life back." Why did you take her life, Robb?

Robb Wolf:

I'm kind of a vampire in a way.

Greg Everett:

"Long story short (or as short as I can make it without putting you and Andy asleep), I was diagnosed with fibromyalgia at age 19 (2001) but

Doctors suspect I've been suffering symptoms as early as 14. In a time pre Cymbalta, Lyrica, and all those other wonderful cocktail crap drugs, I was told there aside from stuffing myself with pills there was little I could do. I think she meant 'that.' This sent me into a depression downward spiral, I became a hermit, lost friendships, severed family ties and alienated myself from anyone who didn't understand I was a 19-year-old trapped in the body of a crippled bitter 90-year-old.

Fast forward to 2011 almost a decade later and I find the Paleo Solution. I am 3 months in and I have never felt better. I am more energetic, bouncy and happy than I ever was at 19 (and everyone around me has noticed). I finally feel like myself, the inside matches the outside at last. I Have tried re-introducing certain items into the diet (legumes, tubers) but found it that as soon as I do the joint pain comes back, weak but it's there. I then found podcast 48 (love love love the podcasts BTW) and heard you talk about Fibro, and seems to me that for Fibro peeps its better off to stay Paleo 100%?

So finally, the CrossFit question.... how to start? (I've been doing some small stuff at home like air squats, burpees, et cetera) but I want to join my local CrossFit Center. What should I tell the trainers? I just don't want to set myself back by taking up on exercises my body might flare up on. Suggestions? Ideas?

Other info: age 28, 5'3, highest weight 163 YUCK! lowest weight 110 (from starving) current weight on Paleo: a slender and firm 123 lbs," and then there's a big smiley face. "And again, thank you, thank you, thank you! Xoxoxo." A winking smiley face.

Robb Wolf:

Well, Greg and I both enjoy 5'3", 123 lbs, and firm. That's all going in the right direction. The question was about the CrossFit deal but just -- this links right back into our first question where obviously some signs and symptoms of systemic inflammation. This sounds really, really similar to what I had going on before going Paleo and reversing all the gastrointestinal problems that I had. Not surprising at all that the legumes and tubers might be problematic.

This again is why I'm a little bit of a nutcase on -- if people want to give this stuff a shot, you really go full-bore for 30 days, grains, legume, dairy free. If you got signs and symptoms to systemic inflammation and autoimmunity, do the autoimmune protocol additionally. We cut out nuts and seeds except for coconut perhaps, tomatoes, potatoes, eggplants, peel, any type of peels off you tubers, maybe even avoid tubers

completely, and the game plan with that is try to get people healthy and then they can reintroduce some tinkering.

So it sounds like this is exactly what she did. She got healthy and then has reintroduced certain items and just kind of system checks to see how it goes and she gets a little bit of inflammation. And then for her I think it's kind of a question of, "Okay, I know if I have a sweet potato, I may be a little bit cricky for a couple of days but I really want to have one because I'm hanging out with family and my mom makes this awesome sweet potato dealio."

So you do it but you understand some of the cost-benefit there, but it's an informed decision on that stuff. So the CrossFit question, the CrossFit scene is really, really, really unfortunate, in my opinion.

Greg Everett: That's a good way to put it.

Robb Wolf: It is because the big falling out that we had really was an outgrowth of the fact that I was pushing this Paleo plus CrossFit kind of concept. But very early on I started pushing for a moderated volume and intensity of pushing the CrossFit deal. Early in the very beginning of CrossFit it was mainly couplets and triplets and it was some pretty smart programming relative to what we see today but then they decided to go down this path of elite athletics. It's funny.

A bunch of the arguments that I had with Greg Glassman and with boners like Tony Budding and stuff like that, they really don't have a scientific background in any of the stuff. I was relating to them that I would have CrossFit facilities that had adopted Paleo. We were seeing things like the reversal of Huntington's disease which ended up spawning a UCLA/UCSD study related to Huntington's disease and gluten-free diets and Paleo which is actually going to be getting underway here pretty soon.

We saw just tons and tons of reversal of multiple sclerosis and rheumatoid arthritis and all this sort of stuff, and for whatever reason, instead of adopting this health orientation into the system, they booted us because they didn't understand the technology. They always need to be the one with the upper hand and the final answer and all the rest of that and if they're not the authority on a topic, then they've got to kick the authority out so that they can appear to be the authority.

But the opportunity that was lost for CrossFit was that they drove the boat towards elite athletics theoretically in the form of CrossFit games competition. I'll tip my hat to the people competing at this point like

they're beasts. They're typically beasts that were really good athletes in other arenas and then walked onto the CrossFit scene and kicked everybody's ass which is exactly what we've been talking about from the beginning with all that stuff. But the problem here is that the culture has focused around elite and volume and intensity and beat down and there's very, very little directive towards ramp up or progression or anything like that.

My wife wrote the On Ramp Program. We've written numerous articles about the importance of progression instead of scaling. The first time that you walk into a gym you should not be exposed to the deadlift via Diane workout, 21-15-9 deadlift handstand push-up. Giving the person a piece of PVC and saying "Well, we're going to scale it because we're beginner" is horseshit. It's fucking stupid. You need to be exposed to complex motor patterns in a dedicated progressive way so you don't start people with the deadlift in a metabolic program. You just flat don't do it.

So the problem here that arises, there are tons and tons of CrossFit facilities. Lots of them are actually advocating Paleo at this point, like the Paleo Vs Zone discussion has been pretty well met and the Zone lost, Paleo won. Done. But then the question still arises, do these facilities have a beginner's program whether they call it on ramp or elements or whatever? Do they have a dedicated beginner's program? Do they understand the difference between progression and scaling? Do they understand or have the capacity to offer personal training where appropriate. So do they have the screening program?

When somebody comes through the door and they're like, "You know what? You've had a bunch of fibromyalgia and chronic fatigue and stuff like that, I recommend that you either do personal training or small group training for a month to two months until we get you ramped up and we see how you respond to volume and intensity and then we can think about introducing you to our elements class and eventually you can graduate into level one. Does the facility offer all that stuff? If they don't, then it's a problem.

The funny thing is it's not just a problem for the clients. It's a problem for the facility because they'll guarantee that the facility would make more money if they had all of that infrastructure in place. But everybody that was talking about that infrastructure has been kicked out of CrossFit. So where the hell is that information coming from? Well, it's still coming from somewhere. It's just not coming from HQ.

For them that's a really big problem when the best information related to training and progression and all the rest of that comes from entities other than the governing body because then the governing body is no longer the power seat. They're not longer the place that people look to for information. So that's all a bunch of political back story and other bullshit that I probably shouldn't get into. But the long and short of this is that I don't know if it's okay for you to go to your local CrossFit facility, and that's a crying shame.

There should have been some sort of QA/QC, Quality Control/Quality Assurance, such that I could easily with no reservation say, "You should absolutely go check that place out." They'll be able to take care of you because I know they've got some sort of a beginner's class, they've got some sort of a screening program, and I'm virtually certain that you're going to go in there and not get broken because you're entering the game with some preexisting conditions that absolutely leave you open to things like rhabdo and other really serious problems to say nothing of elevated cortisol problems from overtraining.

So that's really -- this is sincere. Obviously, I've got a bunch of fairly angry feelings at the CrossFit HQ scene, but it's a failing on their part that we don't have a network of gyms that we have at some level of assurance that almost anybody, medical professional or otherwise, could refer people to them and to know that it's going to be a safe, enjoyable experience, and we absolutely cannot do that.

That's unfortunate because there's a bunch of people out there doing this stuff and I'm sure that they've generally got good intentions and if they had been given better skills, if people had been keep in the community to provide better skills to these people, we would have a better product offer across the board and we could help a lot more people. But we don't give a shit about that.

What we give a shit about is some perceived elitism and we could give a fuck about helping people that have conditions like this even though something that looks somewhat like CrossFit plus a Paleo program in the community and lifestyle and all that stuff can save lives. But we could give a fuck about saving lives when we got the CrossFit games and all the rest of that stuff.

Greg Everett: Well, I mean the main problem is that Brissia is just a week performer.

Robb Wolf: Yes, so we don't give a fuck about week performers.

Greg Everett: You can't come in and you morph on day one then we just don't have a use for you. But yeah, in all honesty, I actually did get an email through Robb's site asking me to stop being so diplomatic about my answers about CrossFit. But I'm going to continue being diplomatic because I'm trying on this new mature, wise, whatever bullshit and plus there's more fun to this and then Robb did it.

But in all honesty, you can try a local CrossFit center but make sure it's one that doesn't actually do CrossFit. And I know that sounds facetious but I'm being dead serious. We were a CrossFit affiliate for a couple of years and we didn't really do CrossFit despite what Greg Glassman and what have you believe. Just because there were back squats and push-ups doesn't mean it's CrossFit.

So like Robb said, find people who are actually qualified and experience and weren't just delivering pizzas two weeks ago. All CrossFit affiliate means is that you have a valid credit card and that's what it comes down to.

Robb Wolf: And at one point, that meant that you maybe didn't even attend a seminar. At this point I believe that you have to be at least level one anointed, but at one point it didn't even mean that you had even shown up at a seminar yet.

Greg Everett: Well, level one is just an indoctrination. It's not any kind of certification.

Robb Wolf: Right, right. The long and short of it is go meet the people, ask them, "Do you have the beginner's program?" If they don't, ask them why they don't. "Do you offer personal training?" If they don't, ask them why they do not. And then ask them, "Have you heard of the On Ramp curriculum written by Nicki Violetti? Not by folks who have plagiarized it and then published it in the CrossFit Journal. They even plagiarized the --

Greg Everett: The incorrect page.

Robb Wolf: Yeah, the incorrect mathematical notation that we've been using. And someday we may actually do something about that but --

Greg Everett: Oh, amateurs.

Robb Wolf: Jesus, man!

Greg Everett: But honestly, go in there and tell them exactly what your situation is, like "Hey, I have fibromyalgia, blah, blah, blah" and if they give you a blank stare, then it's a pretty good bet they have no idea how to handle you.

Robb Wolf: Yeah, and just keep looking, just keep looking from that point. Rutman's Max Effort Black Box programming is really, really good stuff. There are some other folks out there like I think Invictus posts some of their programming. The Catalyst WOD is great but --

Greg Everett: Probably not very great.

Robb Wolf: -- very lifting oriented so maybe not appropriate. There is some good stuff floating around out there. But I would just kind of knock on doors and ask them some questions and see what type of trainer, what type of approach they are. If it sniffs pretty good, then give it a shot. That said, if people will take this general idea of functional movements and appropriate intensity and progression and ramp up and everything, I think it could be amazing for you.

If they throw you into the mix and just assume that you're going to do 20 to 40-minute chipper and they're just going to scale it for you and that's your day one workout, then we've got a huge problem there. So it's going to set you back.

Greg Everett: Yeah. In all honesty, personal training is obviously very expensive and it's tough for anyone to afford that three to five days a week. But if you can find someone who will work with you one-on-one even once a week but then write a program for you for a few other days outside of that gym, something you can do at home.

And like Robb said, have some kind of -- especially at this point, very basic straightforward progression, learning these movements and then practicing the movements and then training the movements. After a little bit of that and seeing how you respond to it, you probably will be okay to go into classes at least that are programmed intelligently and implemented well, not just, you know. If the gym posts the CrossFit.com workout, that's their workout, then --

Robb Wolf: Keep walking.

Greg Everett: Yeah, just get as far away from there as possible.

Robb Wolf: James and Cheryl got themselves in hot water in one of these talks by basically just saying, "I don't think that the dot com WOD is appropriate for most people."

Greg Everett: Most people. I wouldn't let anyone do that.

Robb Wolf: I wouldn't either but he was being diplomatic enough to just say "most people" with the caveat in there that maybe you've got some monsters freaking nature that's going to come in and dominate that stuff. I think that that's a very honest assessment. And yet again, you provide an honest assessment and instead of either having dialogue or discussion on the topic, you just kick the person out.

So another one of our best coaches and brightest minds in this functional fitness scene, they get ousted for basically saying, "I don't really like the dot com programming." I think it's inappropriate for most people particularly beginners.

Greg Everett: They say right there though -- I mean admittedly what's their line of "the CrossFit.com Workout of the Day is meant to exceed the capacity of the world's fittest people." So they've said right there it's appropriate for no one. It doesn't make any sense.

Robb Wolf: Then I guess when you agree with them, that's when you get kicked out.

Greg Everett: Yeah. You can't have it both ways. You can't say, "Yeah, jump in on this workout, but no, it's harder that you could or anyone could handle."

Robb Wolf: Oh, you do get to have it both ways when you run some sort of an Orwellian kind of gig were you just keep changing the story to suit your needs --

Greg Everett: That's not what I said.

Robb Wolf: -- so you can always be right.

Greg Everett: All right. Well...

Robb Wolf: Yeah. Enough on that to some degree. Obviously, I've got a lot of emotion on this but a lot of it -- it's not just that I got booted out of CrossFit and shit like that. I legitimately want to help people and there was a huge opportunity lost by CrossFit HQ turning its back on the health and longevity potentiality of this, just a huge opportunity loss. It will likely never be re-met at all in general, definitely not under their banner.

There may be some other opportunities to kind of unite that idea at some point down the road. It's just a huge opportunity loss. It could have helped a lot of people and it would not have diminished the ability to push the Crossfit Games, the Elite Athletics, or any of that stuff at all would have actually lended more credibility to it to be able to say, "Hey, we can modify this stuff for a ton of different situations." I'm not just talking about scaling. It goes way beyond scaling.

Greg Everett: Well, now that we've entered the Reebokian era, it's certainly a lost cause.

Robb Wolf: Yeah, yeah.

Greg Everett: All right, moving on.

Robb Wolf: Yeah, somewhat.

Greg Everett: One of these days what we have to do is record a full-length podcast just on CrossFit and then not publish it.

Robb Wolf: That would be fine. It would almost be like the breakup letter that you don't send or something like that.

Greg Everett: Exactly.

Robb Wolf: Yeah, totally, totally. That would be hilarious.

Greg Everett: Although --

Robb Wolf: What we do with that one is we make it a paid download online.

Greg Everett: I was just going to say I was sold on the site so...

Robb Wolf: We make that one a paid download and it's like 50 bucks, like you got to really want to listen to that one.

Greg Everett: Yeah. All right. Turridu says and I guarantee I'm mispronouncing your name so I apologize. "Hey Robb and Greg, I would like to hear your thoughts regarding a weight 'set point.' I'm male, 44, 5'8", 207lbs, and have been Paleo for about two years. I'm dealing with some cortisol issues and adrenal fatigue, and have been having an impossible time losing weight. That said, I don't ever seem to go above 207. Even after

falling off the wagon (i.e. a week in Paris), the weight doesn't seem to budge either way.

Someone was trying to explain to me that this is just the weight my body wants to be at, and that's that. Please tell me that's not true. How do I tell my body that it really wants to be 180 lbs?

I eat very clean, around 2000 cal/day and have been very low carb, but am trying to up my carb intake to around 100-150 gms/day. I get two strength training sessions in a week and the other five days try to walk for an hour, do yoga, or some such low-stress exercise. Thanks!"

Robb Wolf:

The set point deal, I don't know how much science there is on it, but there's a lot of anecdotal stuff out there. Martin over at Leangains has written some really good stuff on the set point deal and Greg and I have talked about this. Martin is usually looking at it from a standpoint of trying to ramp people down to a lower body weight and get them lean -- really not so much body weight but increased level of leanness.

Greg and I have talked about this in regards to trying to bring people up to, say, like a heavier weight class in O-lifting or powerlifting or something, and usually the best way that you do that is the stepwise approach where, say, like you make a 5 or a 10-pound change, maybe a 5% body weight change or something and then maintain that for four weeks, eight weeks, 12 weeks or whatever, then make another push.

But my gut sense on this is that the body definitely has some sort of a set point and it takes significant work to undo that. I did this mass gain deal a couple of years ago. It was a horrible idea. I had high cortisol. I had low androgen levels. The results were horrible, and I've always been --

Greg Everett:

Yeah, but you were jacked.

Robb Wolf:

Yeah, like jacked in the box. And the funny thing is that before that I was always like the really lean, pretty muscle -- whatever else went sideways, I was always lean. I always had 12 pack kind of thing going on. I was always really lean. So in addition to all the stress, all the cortisol, and then the big food intake and the big dairy intake which the dairy ends up kind of exacerbating that metabolic derangement, I got fat in mainly insulin-resistant fat. And then after that, I tried leaning out and, man, it just wouldn't happen.

It was interesting like that that insulin-resistant fat around the waistline I feel was kind of feeding into additional cortisol problems. We definitely

know that different fat located around the body can cause some different signaling with regards leptin and ghrelin and stuff like that. And dude, I had a hell of a time, and then this project that I did, I ended up losing 16 pounds in eight days. I basically starved which isn't great, but the interesting deal with that, the insulin-resistant fat, gone.

My love handle dealio is just done and it's really interesting. Androgen levels seem to be better. I'm actually getting some conformational blood work on that. Everything seems better. My sleep is better the whole deal. I'm slowly adding some muscle mass back up and all that sort of stuff, but I'm not gaining body fat right around the waistline.

So it is interesting that -- I think there is something to the set point and really what you've got to do like if you want to be leaner, you've got to figure out, okay, what is it that's going on in your life with the stress. You got to get a handle on that. You just have to get a handle on it. And then you may need to do some sort of fairly vigorous calorie restriction and tweaking things. If you've got some adrenal stuff going on doing the 100-150 grams of carbs a day is probably a good idea particularly post-workout.

Play with that and see how you respond to it. Hopefully, we see some amelioration in the cortisol issues. If we just see you getting fact, then obviously we need to shift gears. But you might need to do some uncomfortable calorie restriction for a period of time. If you're at 207 lbs, stairstep yourself down to about 200 lbs and maybe 197 lbs and then maintain that for a period of time like eight weeks and then do another stairstep down and then maintain that.

It's going to take some work and the work is going to have to address the adrenal issues, but it's also going to have to address to some degree the set point kind of gig. You know, Gary Taubes talks a ton about this stuff in Good Calories, Bad Calories. The information is definitely out there on the set point. You can change it, but it takes some pretty serious work.

Greg Everett:

Cool.

Robb Wolf:

Sweet. Thanks, chief. Anything new brewing with you? Do you have a seminar coming up anytime soon or...?

Greg Everett:

Thankfully, no.

Robb Wolf:

Okay.

Greg Everett: So I finally have a bit of a break now. We don't have another real big meet until December and I don't have another seminar until January. So I get to catch up on all the projects I have on the back burner here. So hopefully, before December we have a couple of new products coming out.

Robb Wolf: Nice. Right on.

Greg Everett: But I'm not going to talk about those because I can't guarantee they'll actually come out in that time frame.

Robb Wolf: Perfect. Cool. Let's see here. We've got the Ancestral Health Symposium popping up. I think this podcast is going to go either immediately before or immediately after we've got the final Paleo Solutions seminar that's going to occur in Boston. So if you want to get in on that action after that it's going to be medical professionals only kind of gig. Yeah, I think that's about all I have for the moment. So thanks, man.

Greg Everett: You bet.

Robb Wolf: Okay.

Greg Everett: All right.

Robb Wolf: Talk to you soon.

Greg Everett: See you.

Robb Wolf: Bye.