

Patient:

Date:

Monday 15<sup>th</sup> April 2019

**Comments:**

- You have wished to see me about four main issues: lack of energy (“*very tired mid-afternoon and at the end of the day*”); building-up of anxiety; waking-up “*depressed*”; and weight gain around the middle (“*getting big inside*”). In short, you feel that you are “*ageing*”, you want advice to “*revitalise yourself*”!
- You have also warned me that you are “*hypochondriac*”. I have to agree because you were troubled to learn about apoE genotype that might show increased risk to develop Alzheimer’s disease, even though you have consented to this genomic test... which shows perfectly normal risk with two E3 alleles. These imply embarking on high-*fat*/low-*carb* diet, which I agree sounds counterintuitive given abdominal fat.
- You must understand that belly fat always comes from **sugars** and **carbs**, not from **fats** that don’t make E3 carriers gain weight. They must avoid all forms of **carbohydrates** that include **fast sugars**, **fructose**, **grains** (in this case above all **gluten grains**), **starches**, and not surprisingly **alcohol**; you drink too much!
- Obvious reason for binning **gluten** (besides the fact that it feeds belly fat: please read *Wheat Belly* from American Cardiologist William DAVIS!) comes from presence of mildly positive antinuclear antibodies, modest manifestation of autoimmunity. Your best tool to eliminate such antibodies consists in healing the gut wall thanks to the removal of all **grains**, as you also react against **corn** and (more severely) **rice**.
- I remind you that **grains**, by essence, don’t fit well E3 carriers; plus they contribute to high triglycerides together with **wine** and **beer** excessive intake. The latter beverage contains **barley** to which you react, besides being a **gluten grain**. Getting rid of all **grains** together with reducing **fructose** and indulging on **oily fish** will help improving your unhealthy breakdown between ‘bad’ LDL and ‘good’ HDL cholesterol.
- Generally speaking, fatty molecules such as cholesterol, triglycerides, and fatty acids show higher than expected because of sluggish metabolic drive. I blame this on high stress that blocks conversion from thyroid prohormones T4 into active hormones T3 (see very low urinary T3 level). Stress also depletes adrenal global precursor prohormone pregnenolone that leads to insufficient progesterone (I like to call it the “*serenity hormone*”, plus it boosts sleep quality) and also to shortage of stress hormone cortisol...
- Your endocrine support treatment will address all those stress-related issues. Gentle non-prescriptive glandular GTA will increase T3 levels; please take twice a day given short T3 life. Besides, optimizing three critically needed conversion cofactors - selenium (SEOSJ), zinc (ZNIPY), and magnesium (MGTDL) - will boost T4 to T3 conversion that should recover when you will feel happier given wild DIO2 genotype. Adrenal support will show very straightforward thanks to directly relying on the missing prohormones, pregnenolone and DHEA that are seen as food supplements in the US, but request prescription in Europe.
- Wild (understand ‘good’) OGG1 genotype SS doesn’t impose **intermittent fasting**, but you have to know that moderately enlarging the fasting window between end of last meal and beginning of first meal on next day spectacularly helps losing belly fat. Taking berberine regularly does the same while it cleanses gut microbiota. To enable you manage all those dietary changes, I suggest you see my nutritionist who would provide a nice **eating-plan**, not something frustrating but rather an enjoyable new way of eating.

Georges MOUTON MD