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Natural Fix: Rediscovering 'Valuable' Foods Our Bodies Need

Dr. McDonough:

We've all heard the term "You are what you eat," but is it true? And if it is true, just how much of it is true? An interesting topic on Primary Care Today. I'm Dr. Brian McDonough, and welcome to this edition. With me is Dr. Julie Gatza. She is cofounder of the Florida Wellness Center. I want to start, first of all, welcoming you to the program.

Dr. Gatza:
Thank you.

Dr. McDonough:

Dr. Gatza, my first question is—we hear that phrase all the time—what are your thoughts about it?

Dr. Gatza:

You are what you absorb, because I've had tremendous amount of people over the years come in who eat organic, who eat quite well, and yet they're not healthy, so it really is, what are they absorbing. And if you can't absorb what you're eating, then it's a lot of work for very little gain.

Dr. McDonough:

Now, I know in some of your work you talk about food versus un-food, and we have a physician

audience, and I know you're trying to simplify it, but from an audience of health professionals, what are you saying there when you make that differentiation?

Dr. Gatza:

Well, think about it. If you take a fish—a fish has healthy fats and enzymes and proteins and minerals—and you put it up against a box of french fries—unhealthy fats, no protein, no minerals, no vitamins—so what's actually happening is you're filling your body with mass, but you're not actually putting anything into the body that's valuable. And then, on top of it, you must absorb what you put in, so those french fries don't have anything in the first place, and then you can't absorb it.

Dr. McDonough:

And one of the things I know we've looked at—oh my gosh, the last 25, 30 years, talking about cholesterol and heart-healthy diets and those things—a lot of people have come out with products, products that are so-called low-calorie, no cholesterol, those things, but also a lot of products that really don't have much nutrition in them. It's hard for the consumer, isn't it?

Dr. Gatza:

It certainly is. And I always look at it from this point. I lecture to a lot of people, and often I talk about naturally fixing diabetes to elderly, and I say, "Would your grandparents be proud of your diet this week?" And they all sheepishly look around and giggle as they're eating their pancakes, and wherever they are, and the fact is we are not eating the food that we were supposed to be eating that this planet actually offers, and we've changed it and altered it and packaged it and radiated it and done so much to it that it's just no wonder we're so sickly and we're not doing well. It's not real food that we're eating, so we're eating un-food.

Dr. McDonough:

I'm Dr. Brian McDonough. My guest is Dr. Julie Gatza. We're talking about "You are what you eat," or more importantly, "You are what you absorb," and the entire concept. And how do we get this across to our patients? I mean, advertising is an amazing thing. From the time I know when I was a child, it was cereal commercials, frosted this, frosted that, the candies, the fast foods. I mean, that was Saturday morning cartoons, and I don't think it lets up for any of us, and they target every age group. What do we do to try to get the right message out?

Dr. Gatza:

Well, the first thing that I always have patients do is: 1. They're coming to see me for a reason. They don't feel good. So if that's the case, then I always say they're responsible for how they feel. The first thing they have to do is they have to eat protein and skip the cereal, skip the Pop-Tart, skip all the weird breakfast foods that America decides that you should be eating and start eating eggs and bacon

and sausage. And skip the toast; eat the protein. For lunch do the same thing, dinner do the same thing. Steamed vegetables are very, very commonly talked about as a good food, and it really is, but anything that comes from a package, a box or a can, I always say to my patients, “Try this for 2 weeks. See how you feel.” And they’re amazed that the drugs that they’re taking are not needed at all because they feel so much better. turn

Dr. McDonough:

You know, it’s interesting you mention that. One of the things I always try to do with my patients, I always try to relate to them and talk about things that I might be doing wrong. I think, largely, that’s helpful, because people see everybody’s human and we’re all battling through these things. And one of the stories I’ve told recently, because it has been recent, is trying to cut back eating after dinner. You know, eating at 10:00 at night, what can you do? And I was telling them—and it’s ridiculous—but how I rediscovered how great it is just to eat an apple at 10:00 at night; like that’s a really nice, healthy food, and you feel great. It satisfies me with that little urge you have at the end of the day, but it’s not like you’re having peanut butter and crackers or cookies or gosh knows what that people eat at that time of night.

Dr. Gatza:

It’s exactly true. I do the same thing, and I often use that as an example with my patients. A lot of times people are hungry because they’re missing what they should be getting from the meal. So I often find that people hungry at night aren’t eating enough protein in the day, especially at breakfast. They’re on the fly, they’re drinking their coffee, they’re on the run, and around 11:00 or 12:00 maybe they decide to have some weird lunch, and of course they’re hungry at the end of the night. So even a person with a weight problem is starving. They’re malnourished and they’re not getting what they need, so that hunger that you’re feeling is often just the body’s desire for the proper nutrition.

Dr. McDonough:

I’m Dr. Brian McDonough. You’re listening to Primary Care Today on ReachMD. My guest is Dr. Julie Gatza. She is the cofounder of the Florida Wellness Institute. And obviously, you talk about wellness and diet, and it’s interesting when you mention breakfast. I mean, all of us—I know all of us in our practices talk with our patients about the importance of eating breakfast, but the reality is many people are trying to beat that clock. They now have emails they’re getting from the minute they get up, they’re texting people, they’re right on the treadmill, and they’re trying to get into work early and they figure, “Oh, I’ll just have coffee,” or “I’ll grab a piece of toast.” Just like you’re saying, they don’t take time for that breakfast. And I think a lot of breakfast foods, especially the staples, the old eggs—even if it’s turkey bacon, yolk-free, all these types of things—they got a bad rap for so long; people are afraid of them.

Dr. Gatz:

I know; it's so true. An egg is one of the best proteins you can possibly eat. Eighty percent of the cholesterol that a person makes is made from their own body. Twenty percent is only from the diet. So even though eggs are high in cholesterol, I've put my high-cholesterol patients on as many eggs as they actually want to eat, and their cholesterol has come down when we change what the real fact of the problem is. It's the extra junk stuff that they're putting, the carbs, the sugars, the coffees, and things that are toxifying the liver and keeping the liver from doing the job that it should. So, when we tell a patient to eat a protein—an egg, a bacon, whatever—they must have the enzymes in the body to also be able to break those things down. Otherwise, it's also not being utilized properly.

Dr. McDonough:

One of the interesting things—it's probably, we're talking 10 to 15 years ago—was the phenomenon of the South Beach Diet, the Carb-Free Diet, the Low-Sugar Diet. All of those things really made a run, and a lot of people lost weight, their cholesterol came down, but they weren't able to maintain that diet. They'd go 6 or 7 months on South Beach, let's say, and then they'd say, "I had to get back to other things." What is the best way from your prospective to balance it out, to try to maybe get that something that you can do for a long period of time?

Dr. Gatz:

I think the best thing you can do is 5 days a week follow a good diet, and then on the weekend have your fun. Don't go crazy, but eat the things that you've been sort of denying yourself for the week, or 1 day a week, but when you do something like that... or just minimal throughout the day. People eat way too much food, so they can't break down what they're eating in the first place, but the South Beach really hit the nail on the head as far as how our grandparents ate, truly. They didn't consume a lot of sugar. They weren't drinking coffee by the gallon. There were no Starbucks around. There was no packaged food and things you can throw in the microwave. It was just basic food. It was protein and vegetables and fruits and bread, of course, but the bread has been altered in our country so widely that bread is no longer the grain our grandparents ate.

Dr. McDonough:

Interesting points you're bringing up, and I agree with you in the sense that the diet has changed. One of the things people come to me and they say, "Listen, I'm trying to do this." And there's 2 groups again here as well: people who are doing quite well financially and they're middle class, but they really can't go to organic or Whole Foods or places where the prices seem higher, and they find themselves caught, or you have people who live in the city, especially in areas where it's more economically challenged, where they can't even get the fruits and vegetables. They're just not available. How do you deal with those people, because I'm sure you get them coming in as well, with the challenges

they're facing, even with the best intentions?

Dr. Gatz:

I've never asked anybody to eat organic. It's just a bonus if they do. I've never had anyone have to shop at Whole Foods. Their regular grocery store on the outside aisles has pretty much everything that they can have. If you're going to spend \$5.00 for a McDonald's lunch, you're going to actually be sickly, so you're just paying for sickness. And everyone wants to justify why it's okay to have something on the fly, but really, if you sit down and you get chicken in bulk and you make some chicken or you Crock-Pot it and you have it a couple of days and you eat leftovers, I mean, it's very economical to feed a family just the basic foods if you're not going wild and trying to be organic. I mean, it is just what a body needs, sort of like we need to shower daily. Sorry, water costs, so does food, from the point of you're just going to be sickly if you're going to try to be cheaply eating.

Dr. McDonough:

I know the millennials get hit for a lot of things, but one thing I've noticed in this group of patients is many will food prep. They'll actually prepare their foods for the week. It seems to be very trendy. They've discovered cooking much more, better than my generation I will say, but I think that's important as well. Kind of taking a page out of that book, they're buying food, but they're varying 2 or 3 days out so that they'll have time for that.

Dr. Gatz:

That's exactly right. And you know, it's one of the smarter things that can be done. And you know what? Our ancestors did the same. You know, whatever was made, they made a lot of it, and we ate it for a couple of days. My mom did that with 5 kids, Crock-Pot cooking, and soups, and make a chicken, and then make the soup from the rest of that. There is so much value to it, and it's really not that expensive to cook. It may take 30 more minutes in your day to do it, but the fact is you're raising a healthy family; you're going to be feeding your body with correct nutrition and hopefully get the absorption that you need. One of the biggest things that I've seen with the problem with absorption is people aren't making enough enzymes, and it's usually because of the fact that they haven't been eating correctly for years and they can't break down the food, so we always suggest that a patient takes a very high-quality enzyme. We use something called AbsorbAid, and it breaks down 70% more of the food per meal than you were getting if you didn't take it.

Dr. McDonough:

What are some of the signs of enzyme deficiency?

Dr. Gatz:

Ha-ha, you name it. Pretty much digestion is the basis of all disease, digestive problems. So you can

have all the gas and bloating and constipation and stomach pains and the indigestion, but then, what you didn't know is you're also getting the fatigue and the weight gain, and you can't sleep, and your hormones are imbalanced, and you have skin problems. So everything starts with digestion, which is why you have to handle that one first. I mean, you can throw a lot of vitamins and nutrients and things at the system, but you must digest things before you actually try to fix the body.

Dr. McDonough:

You're listening to Primary Care Today on ReachMD. I'm Dr. Brian McDonough, your host. My guest is Dr. Julie Gatza. We're talking a lot about nutrition, absorption of foods, the types of things, the challenges that we face. If you had to give advice to your patients, and I know you do, what would the top 3 things be for them to be as healthy as they possibly could be if they just kind of came in to you and said, "I'm not feeling right. I've got to get in better shape. I want to begin exercising, but where do I go from here from a dietary standpoint?"

Dr. Gatza:

First thing I would have them do is stop the coffee, the tea and the soda pops. That keeps you from absorbing. It changes how the acid breaks down the foods that you're eating, so most people that are drinking those things are tremendously changing how they absorb. Number 2, eat more protein. Number 3, take an enzyme when you eat, and when you do that, you'll break down the food that you're actually consuming.

Dr. McDonough:

If there has been a story I've done with my medical reports in the last 20 years that has repeated over and over again consistently, it's been the value of the Mediterranean Diet. What's your feeling of the Mediterranean Diet and what it brings to the table, so to speak?

Dr. Gatza:

It's one of the best tasting ones, and it definitely handles everything that I'm talking about. It's the proteins, it's the vegetables, the fruits, but it's also clean food, and there's so much flavor to it, and there's so much variety to it. So when you eat a Mediterranean diet, you can do it every single meal and you can have 21 meals within a week and never really repeat it because there's so much variety in the way that you can prepare that food.

Dr. McDonough:

Dr. Julie Gatza, thanks for joining us on Primary Care Today on ReachMD. I really appreciate your taking the time.

Dr. Gatza:

Thank you very much, Brian.

Dr. McDonough:

This is Dr. Brian McDonough. If you missed any of this discussion, please visit ReachMD.com/PrimaryCareToday. You can download the podcast. You can learn more about the series. Thank you for listening and Being a Part of the Knowledge.