

The Skinny on Menopause



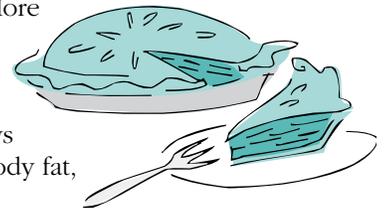
Many women are afraid of the infamous potbelly of menopause and predicted poundage. Bound to happen? Maybe not. With metabolic syndrome and diabetes out of control, researchers are looking at the “whys” of weight in general. And they’re uncovering some interesting answers on what turns up weight and turns down your ability to lose it. More importantly, these factors affect not only your waistline but positively shape your health risks, too.

I have discussed calories, body-mass-index and making good food choices in previous articles. You’ve learned about drinking lots of water, digestion and proper elimination. So I’ll assume you’re already doing everything right and you’re pretty diet savvy. After all, haven’t we all been on at least one diet at our age? So let’s find out the rest of the story.

Age & mitochondria. Metabolism slows down about 2% a decade after age 25, partly due to aging mitochondria. Mitochondria are the powerhouse in cells that convert the food you eat (proteins, carbs, fats) into usable energy to run everything in your body. Any energy we do not use is stored most efficiently in fat cells. Staying active motivates mitochondria and uses up the energy (fuel). If extra fuel is needed, mitochondria prefer sugar since it’s easier to convert to energy. If sugar is not available, fats are broken down into fatty acids and escorted into the mitochondria for fuel. This explains why exercise combined with dietary efforts equal weight loss. Optimizing the fat burning capabilities of the mitochondria with nutrients may help efforts also, particularly if you are lacking any of them.

Inactivity, lean muscle. Any time activity slows, we lose muscle mass and the ratio of muscle to fat shifts in favor of fat. This is especially true after age 40 when we can lose up to 5% a year. Since muscle weighs more, losing muscle may not show on the scales but your shape changes, with more fat distribution around the middle.

Sugar & Insulin sensitivity. After food is broken down, sugar travels via the bloodstream to cells to be used as energy. Insulin regulates blood sugar levels, signaling cells to pick up excess. If cells do not need the sugar (energy), they learn to resist the insulin signal and more insulin is released in response. More sugar for fat cell storage. (More about insulin-related fat under Stress & Cortisol). The glycemic index measures foods by how fast they raise blood sugar. Even if you don’t know the numbers, simply combining fats and proteins with carbs (sugars) slows the overall glycemic load of a meal and lowers post meal spikes. Fiber with and before a meal also slows carb digestion. Researchers found dieters who lost weight via the glycemic index lowered body fat, not lean muscle tissue. Remember lean weight is good weight for metabolism.



Stress & Cortisol. Another source of excess “energy” is stress. Under duress, the adrenals take over and pump out a hormone called cortisol. Cortisol preps the body for action (fight or flight) by breaking down fat and raising blood sugar levels for energy, while simultaneously turning off appetite and digestion. When the stress is over, cortisol then shifts the body back

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continued

into “normal” by increasing appetite to replace the used up energy. However, sustained stress keeps cortisol high and hunger turned on. Excess cortisol stimulates more glucose (sugar) production and yes, insulin. This excess glucose typically ends up stored around the middle, because fat cells in that area are more insulin sensitive. A higher than normal waist to hip ratio is a check. Measure waist circumference in inches and divide by hip circumference in inches. A healthy ratio for women is 0.8 or lower. Weight gain here is linked to diabetes and cardiovascular disease and part of that link may be inflammation.

"Fat" Inflammation. C-reactive protein (CRP) is an inflammatory marker for heart disease and is higher in metabolic syndrome and diabetes. Research reveals that fat cells produce cytokines and in that process, inflammation and c-reactive protein. Losing fat weight results in lowering CRP and perhaps the health risks associated with it.

Sleep or lack of it. Do you need less sleep as you get older? No, but most people get less and the less sleep you get, the more likely you are to be overweight no matter what your age. One theory is how sleep affects two hormones that regulate hunger and satiety (fullness). People who slept less than six hours a night had increased ghrelin levels which triggered next day appetite. Leptin, which

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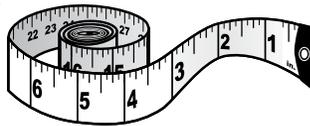
The Nutrients	What They Do For Weight	Suggested Dose
Acetyl L-Carnitine	Fuels production of coenzyme A to provide energy for fat burning.	500 mg twice a day
L-Carnitine.	Shuttle fats into mitochondria to burn as fuel.	500 -1500 mg a day
Alpha Lipoic Acid	Helps increase insulin sensitivity, improve uptake and metabolism of glucose. Supports liver function. Synergistic with Acetyl L-Carnitine to increase mitochondrial energy.	100 mg, up to three times a day
B Vitamins	Help digestion of fats and carbs, utilization of magnesium in energy cycle. Can be found in high potency multi-vitamin mineral complex or take as B-50 Complex.	One a day
Chromium GTF	Helps blood sugar control by promoting uptake by muscles, organs. Reduces insulin sensitivity. GTF is active form.	100 mcg up to 3 times a day
Colostrum	Supplies growth factor IgF-1 to help metabolize fat and increase lean muscle mass.	500 mg (25% IgG) up to 3 times a day
Digestive Enzymes	Replenishes enzymes missing in foods and diet needed for digestion and nutrient absorption.	Per Label Directions
Fiber	5 grams taken before or with meals slows glucose absorption by 20%.	15-25 grams daily in divided doses
5-HTP	Helps normalize brain serotonin to increase satiety.	100 mg before meals
Fish Oil (Omega 3)	Shown to stop the conversion of pre-fat cells into fat cells. Reduces systemic inflammation. *Can be a blood thinner.	1000 mg up to 3 times a day*
Green Tea Extract	Increases fatty acid utilization for energy. May inhibit fat absorption and increase fat elimination when taken with meals. Active components are EGCG 50%, catechins 80% and polyphenols 98%.	400 mg (decaffeinated) Extract 5-7 caps a day or 2-10 cups of tea a day
Magnesium	Energy cycle is magnesium dependent. Critical to mitochondria function. Glycinate form most absorbable.	Fibro-Care™ 2 tabs, 2-3 times a day
Menopause Support	Supportive nutrients to balance menopause symptoms.	Per Label Directions
Multi-Vitamin & Minerals	A high potency form will supply all B vitamins, magnesium and supporting nutrients.	Multi-Gold™ 1-2 caps (up to 6 caps daily)
7-Keto	Activates enzymes involved in metabolism by 5.4 % to burn about 100 extra calories. Preserves lean muscle so most of the weight lost is fat.	100 mg 1-2 times a day with meals
Systemic Enzymes	Reduce inflammation body wide, helps lower C-reactive protein.	Per Label Directions
Helpful Blood Tests: A.M. Insulin, Fasting blood sugar, Cortisol. C-reactive protein. RBC magnesium. Thyroid Panel (free T3, free T4, TSH). Cholesterol Panel with triglycerides. Other: Waist circumference monitoring.		

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signals fullness and curbs overeating, was decreased. Since leptin also influences the thyroid to run at a higher pace to increase metabolism—and acts on liver and skeletal muscles to oxidize fatty acids—next day tiredness may be more than just sleep deprivation. If you stay asleep long enough, the liver continues to break down fatty acids and sugar if it's healthy enough. Finally, deep sleep promotes production of growth hormone necessary for muscle tissue repair. Does that mean you really can lose weight in your sleep?

A Concluding Note. While a chart of proposed nutrients is included to help with weight loss, please note the suggested blood tests as well. Involve your doctor in your dietary efforts. Know your risks. You can only change what you know. Follow up with interval tests to track how you're doing. Remember, a healthy weight should be just that—*healthy*.



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