



## Fitness versus Fatness

### Research Update

Here is some surprising and encouraging news for older adults who struggle with their weight: being fit can reduce your risk of death even if you are overweight.

Researchers from the University of South Carolina studied adults over the age of 60 for 12 years. They found that those who were physically active had half the risk of dying compared to those who were inactive, regardless of how much body fat they had. Even obese individuals who were fit had less chance of dying than adults who were thin and inactive. Although being overweight and having a large waist circumference were associated with higher risks of dying, being unfit was the largest predictor of mortality for this age group.

This study is a good reminder of just how important exercise can be in healthy aging and longevity. Being physically fit can not only extend your life; it can also improve the quality of your life since it promotes mobility, balance and independence—factors that often decline with advanced age. If you are over 60 and mostly sedentary, I suggest that you add more activity to your daily routine. Get your doctor's permission first and then find an activity you enjoy. Good things to try are walking, dancing, swimming, gardening, yoga and tai chi. If you are currently active, see if you can improve your fitness by increasing the time, frequency or difficulty of your exercise.

# Bye, Bye Belly!

**T**here's been a lot of media attention on belly fat lately--and for good reason. Carrying extra weight around your middle, or being "apple shaped," is a risk factor for several health conditions, including high blood pressure, high LDL (bad) cholesterol, high triglycerides, insulin resistance and high blood sugar. These conditions can lead to heart disease, strokes, diabetes and even breast, cervical or prostate cancers.



**The types of fat we eat play a significant role in our weight and disease risk**

Experts believe that the presence of subcutaneous fat (fat under the skin) at the waist indicates that visceral fat (internal fat around the organs) is present, too. Visceral fat is not always visible since it is deep inside the body in the spaces surrounding our organs, but it is one of the most dangerous types of fat since it can actively release fatty acids and inflammatory and other reproductive hormones that contribute to heart disease, diabetes and cancers. These substances may also directly affect the liver and its role in blood sugar control and cholesterol production.

Most people associate "apple shape" with men and "pear shape" (carrying extra fat around the hips, buttocks and thighs) with women, and it is true that hormones can influence body shape. Being "pear shaped" and moderately overweight is not as unhealthy as carrying extra fat in the abdomen, since the type of fat that is stored in "pear-shaped" people does not produce dangerous hormones like the visceral fat in "apple-shaped" people does, but women can be "apple shaped" and therefore have the same amount of health risk associated with that shape as men do. Some post-menopausal women may also find that their formerly "pear-shaped" bodies are now "apple shaped," an

indication that their "pear-shaped" protection has been lost. Advancing age for both women and men plays a role in the development of deep abdominal fat, too.

In fact, being "apple shaped" may be a more important indicator of health risk than Body Mass Index (BMI) or weight alone. A good way to assess if you have apple-type health risks is to measure your waist circumference (just above your belly button) – 35 inches or greater for women and 40 inches or more for men is considered risky. However, there is evidence that health risks start to rise at smaller waist sizes, too. Body shape is due in large part to genetics, but while you can't change your genes, there's plenty you can do to improve your shape. Exercise physiologists have still not found a way to "spot reduce" your problem areas, but exercise and diet can make a big difference. Cardiovascular exercise is important for helping to reduce fat, and muscle building exercises help to improve insulin sensitivity and slow the accumulation of belly fat. Nutrition researchers have recently discovered that replacing some carbohydrates and saturated fat with the right types of "good" fats can make a big difference when it comes to making your tummy smaller.

For people in one major research study with a combination of excess belly fat and insulin resistance, switching from either a high carbohydrate, low fat diet (65% carbs, 20% fat) or a high saturated fat diet (47% carbs, 38% fat—mostly saturated fat) to a diet that emphasizes monounsaturated fat (47% carbs, 38% fat—mostly monounsaturated fat) helped

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*Bye, Bye Belly!* continued...

them lose belly fat and improve their insulin sensitivity. What this means for you (even if you don't have insulin resistance) is that replacing some of your starches like bread, crackers, rice, cereal, pasta, cookies and cakes, as well as most saturated fat like red meat, butter, cream and cheese, with olive oil, olives, nuts, avocados and very dark chocolate will help you lose some belly fat—especially if you also cut your total calorie intake. Extra virgin first cold-pressed olive oil should be the cornerstone of your healthy fat intake, though, so don't go thinking that you can just eat lots of dark chocolate and lose belly fat. Aside from monounsaturated fats, there is one other type of fat that aids in belly fat loss: omega 3 fatty acids. Other research has shown that eating omega 3 fats is especially helpful for "apple-shaped" individuals when it is eaten in place of saturated fats. These fantastic fats are found primarily in fish and, to a lesser degree, in flax seeds, canola oil and some fortified foods. Try to include at least one of these healthy monounsaturated or omega 3 fats at each meal. However, be careful about adding excessive amounts of "good" fats since they do contain more than twice the calories of carbohydrates or protein per gram.

Following are some ways to make those subtle but important dietary changes:

Instead of	Try
A cheese omelet with a whole bagel	Omega 3-fortified eggs cooked in olive oil with a slice of flourless whole-grain toast
Cereal with 2% milk and a glass of juice	Plain oatmeal with walnuts, blueberries and unsweetened soy milk (see recipe)
Chicken salad sandwich	Tuna sandwich with avocado spread on flourless whole-grain bread
Energy bar	Carrot sticks with almond butter
Cheese and crackers	Guacamole with baked tortilla chips
Caesar salad	Spring mix with Marcona almonds, olives, olive oil and lemon juice
Pasta with meat sauce	Spaghetti squash with walnut pesto (see recipe card)
Breaded veal or turkey cutlets	Wild salmon with orange-olive tapenade (see recipe card)
Beef and broccoli stir fry with white rice	Stir-fried vegetables with shrimp and cashews cooked in canola oil
Baked potato with sour cream	Roasted baby potatoes tossed with olive oil and rosemary
Creamed spinach	Spinach sautéed in olive oil with pine nuts and currants (see recipe)
Cookies or cake	Dark chocolate (at least 70% cacao)

The trick to eating more of these healthy fats and losing weight is to eat the fats in place of less healthy fats and starchy carbohydrates. Simply adding these fats to your diet will likely result in weight gain. Making these changes will be easy at home since you can restock your pantry and control the ingredients that you put into the foods you prepare. It will be more challenging if you eat out a lot. Always request that your food

be cooked in olive oil instead of other fats at restaurants and replace starchy side dishes with vegetables. Order fish more often than chicken, beef, lamb and pork and skip dessert if you can (you can always eat a piece of dark chocolate when you get home). Additionally, it's imperative that you read ingredient lists and avoid foods that contain "partially hydrogenated oil" since this type of fat signals your body to store visceral fat, which would be counterproductive to your fat loss efforts.

Emphasizing healthful fats in your diet can be an exciting change since it will enhance the palatability of your diet and improve your health. I know it can be a little scary to eat more fat, since the importance of eating "low fat" has been drilled into us for so many years. What has changed is that now we understand that the types of fat we eat play a significant role in our weight and disease risk—especially if you are "apple shaped."

## Power Oatmeal Serves 3

1¾ cup *WestSoy* organic unsweetened vanilla soy milk  
 1 cup *Silver Palate* thick and rough oatmeal  
 ½ cup *Melissa's* organic dried blueberries  
 ⅛ teaspoon salt  
 ½ teaspoon cinnamon  
 ¼ teaspoon nutmeg  
 1½ tablespoons *Wholesome Sweeteners* organic raw blue agave nectar  
 ½ cup plus 1 tablespoon *Flanigan Farms* walnut pieces

1. Heat soy milk in a small pot over medium-high heat until little bubbles form on the surface. Stir in oats, blueberries and salt. Lower heat to medium-low and cook, stirring occasionally until the oats are tender and most of the liquid is absorbed, about eight to ten minutes.
2. Remove from heat and stir in cinnamon, nutmeg, and agave nectar. Place ⅔ cup oatmeal in each bowl and top with three tablespoons of walnuts.

## Spinach with Pine Nuts and Currants Serves 5

¼ cup *Sun-Maid* dried Zante currants  
 ½ cup very hot water  
 ¼ cup *Melissa's* organic pine nuts  
 18 ounces organic baby spinach, washed and drained, but not dried  
 4 teaspoons *Napa Valley* organic olive oil  
 1 medium *Melissa's* organic onion or two very small onions, finely diced  
 2 cloves *Melissa's* organic garlic, minced  
 ¼ teaspoon salt  
 ¼ teaspoon pepper  
 ⅛ teaspoon cinnamon

1. Soak currants in very hot water while you prepare other ingredients.
2. In a large, deep pot with a lid, toast the pine nuts over medium heat until lightly browned, stirring occasionally for about four minutes. Remove nuts and set aside.
3. Add the damp spinach to the pot and cover to wilt it, stirring occasionally for three to four minutes. When spinach is just wilted, transfer it to a cutting board and discard the green water. Coarsely chop the spinach and blot any excess water that runs out with paper towels.
4. Add olive oil to the pot and heat it over medium heat. Add onion and cook to soften, but not brown it, about 15 minutes. Add garlic and cook 30 seconds. Drain the currants. Stir in currants, spinach, pine nuts, salt, pepper, and cinnamon. Toss and cook about two minutes until everything is heated through.

*Our registered dietitian has a Masters in Public Health. However, she is not a doctor and her nutritional recommendations are general in nature and not tailored to specific health problems. Talk to your physician or other qualified health care practitioners concerning particular health issues or before beginning any nutritional program.*

# Foods for Fertility

Although the connection between diet and fertility has not been studied extensively, health researchers at Harvard have found some evidence that certain dietary and lifestyle practices can make a difference for women who are trying to get pregnant. It seems that practicing at least five of the eight fertility factors that they identified decreased ovulation-related infertility in healthy women by 69% as compared to healthy women who practiced none of the fertility behaviors.

According to the results of the Nurse's Health Study, the following eight factors improved women's chances of ovulating:



## 1. Eliminate trans fats and emphasize monounsaturated fats and omega-3 fats.

Trans fats (called "partially hydrogenated oil" on ingredient lists) are not only bad for your heart and your brain, but they interfere with ovulation, too. Eliminating all partially hydrogenated oils – which are usually found in commercial baked goods, fast food, fried food, margarine, shortening, cookies, crackers, some cereals, breads, energy bars and candy bars – from your diet is important for boosting fertility. Minimizing saturated fat to less than 17 grams a day is also recommended.

Most Americans eat about 10 times more polyunsaturated fat than they do monounsaturated fat, but the researchers recommend that women eat roughly equal amounts of monounsaturated fat and polyunsaturated fat. It's easy to get plenty of polyunsaturated fat in your diet, since it's in most processed and prepared foods, but women should minimize those foods and instead focus on their intake of the most important polyunsaturated fat, omega 3 fatty acid, which only comes from sources like salmon, anchovies, black cod, white fish, sardines, tuna, herring, halibut, and, to a lesser extent, walnuts, flax seeds and some omega 3-fortified foods. Eating more monounsaturated fat also takes some effort, since it is found mostly in extra virgin first cold pressed olive oil, avocados, seeds and nuts (not peanuts).

## 2. Get dietary protein mostly from plant foods instead of animal foods.

In the study, the nurses who ate most of their protein from animal sources had 39% more ovulatory infertility than women who ate most of their protein from plant sources. Eating two vegetarian meals a day would be a good way to execute this suggestion. Examples of plant-based proteins are soy beans, soy nuts, tofu, soy milk, tempeh, textured vegetable protein (TVP), lentils, garbanzo beans, black beans, kidney beans, cannellini beans, pinto beans, split peas, almonds, walnuts, pecans, cashews, pistachios, sunflower seeds, pumpkin seeds, sesame seeds and tahini, but they recommend limiting soy products to one serving a day. When you do choose animal proteins, your best bets are fish and eggs with poultry eaten

occasionally. Try to minimize your intake of beef, lamb and pork as much as possible since they are associated with increased risk of ovulatory infertility.

## 3. Replace simple and refined carbohydrates with slow-digesting carbohydrates.

Whole intact grains, starchy vegetables, beans, legumes, non-starchy vegetables and fruit can all help control levels of blood sugar, insulin, and other reproductive hormones related to ovulation. This is another good reason to minimize processed food, since women who ate the lowest quality carbohydrates were 92% more likely to have ovulatory problems than women who ate the highest quality carbohydrates. Instead of fast-digesting carbs like refined breakfast cereals, white breads, white rice, pasta, mature potatoes and crackers, try oatmeal (not instant), muesli, granola, barley, quinoa, flourless whole grain bread, brown rice, wild rice, whole wheat pasta (slightly undercooked), baby potatoes, orange

sweet potatoes, peas, corn and winter squash.

## 4. Eat one to two servings of full-fat dairy products a day.

This may be the most surprising recommendation of all, since it is so contradictory to our belief that nonfat dairy is generally the healthiest choice. The researchers found that women who chose nonfat and low-fat dairy products had much higher rates of ovulatory problems than the women who ate full-fat dairy. The reason for this, in short, is that all dairy products contain both male and female sex hormones, but most of the female-type hormones in milk, such as estrogen, bind to fat; therefore, when the fat is removed or reduced, then the majority of hormones that remain are the male type hormones, like testosterone, as well as other hormones that suppress ovulation. The full-fat dairy products, on the other hand, contain the full gamut of sex hormones. Whole milk seemed to have the best results in terms of increasing ovulation, and the authors recommend one to two daily servings of full-fat dairy, ideally with one glass of whole milk each day plus two half-cup servings of ice cream a week.

## 5. Take a prenatal multi-vitamin that includes plenty of folic acid and iron.

Folic acid and iron are especially important for increasing ovulation, but the multivitamin as a whole is also important for improving fertility and growing a healthy fetus. A prenatal vitamin that contains at least 400 micrograms of folic acid and 40 milligrams of iron is recommended. Additionally, a diet that is rich in these nutrients is imperative. Folate (the food form of folic acid) is found in lentils, black-eyed peas, pinto beans, garbanzo beans, romaine lettuce, asparagus, okra, spinach, Brussels sprouts, broccoli and other vegetables and whole grains. Iron is best consumed from plant sources, such as tofu, pumpkin seeds, blackstrap molasses, lentils, kidney beans, fortified

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breakfast cereals, artichokes, edamame, barley and nuts. Some research suggests that male partners could benefit from taking a standard multivitamin (not a prenatal one) since folic acid may boost sperm production.

**6. Drink mostly water and consume coffee, tea and sodas in moderation, if at all.** Being well hydrated is an important factor in fertility, and water is the healthiest way to hydrate. Coffee and tea (caffeinated or decaf) seem to have no effect on fertility when consumed in moderation (one to three cups a day), and the same goes for alcohol when it is consumed at a rate of one glass daily. However, the consumption of any of these beverages beyond moderation will probably negatively affect fertility and the practice of drinking alcohol and/or caffeine during pregnancy and preconception is controversial, so it may be best to take a break from these beverages.

Soft drinks, diet and regular, were also shown to diminish fertility. Women in the study who drank two or more caffeinated sodas a day had 50% more ovulatory infertility than women who drank soda less than once a week. Sodas with and without caffeine affect blood sugar and contribute many extra calories to the diet, both of which contribute to ovulatory infertility. Male partners may want to consider giving up caffeine and alcohol to promote successful conception, too.

**7. Both female and male partners should get their weight into the healthy range, a.k.a. the “fertility zone.”** The researchers explain that this is a range of weights for your height that maximizes fertility by regulating ovulation. For women, that optimum range is defined as a Body Mass Index (BMI) between 20 and 24. BMI is a quick and dirty way of estimating if your weight is right for your height and a BMI of 19-24 is considered healthiest. Here is the equation to use to calculate your BMI:

$$\text{BMI} = \text{your weight in pounds} \times 703 \div (\text{your height in inches})^2$$

If your BMI is above 24, they recommend lowering it to be as close to 24 as possible, but they found that losing just 7.5% of your current weight can be enough to improve fertility. For those with BMI under 20, they recommend trying to gain five to ten

pounds. Although they weren't able to define a fertility zone for men, they do emphasize that being overweight affects men's hormones, too, and overweight men seem to produce sperm that are less robust. Therefore, overweight male partners should aim to lose 7.5% of their body weight or get as close to a BMI of 24 as possible. Although losing weight is not always easy, the reward of conceiving a healthy baby is an excellent motivator.

**8. Start an exercise program if you haven't already and keep exercising if you already have started.** In the study, nurses who exercised vigorously for at least five hours a week had the lowest risk of ovulatory infertility. Exercise can help improve fertility when you exercise within a certain range of time and intensity that is right for your body since it helps to moderate hormone levels. Women who are at a healthy weight should aim for about 30 minutes of vigorous exercise a day. Women who have a BMI above 25 should try to get 60 minutes of exercise daily to help them get their weight into the “fertility zone.” Underweight women should be more moderate in both the time and intensity of their workouts, since over-exercising can impede ovulation and prevent weight gain. In addition to your everyday activities, the researchers recommend a combination of aerobic exercise, strength training and stretching, with aerobic exercise being the cornerstone of your program.

Getting pregnant is easier for some couples than it is for others; age, genetics, weight, diet and lifestyle are all contributing factors to fertility. While you can't control all of these risk factors, you can make some healthful alterations to your diet and lifestyle and the eight factors I outline here are a great starting point. Remember that your goal should be to practice five of these eight factors, but you are certainly encouraged to aim for all eight. Few if any of the nurses in the study were able to achieve all eight elements, but the researchers speculate that the more of them you are able to achieve, the more successful you will be in boosting your fertility.



## Jessica's February Store Appearances: Body Fat Testing\*

Jessica will be offering complimentary body fat testing and answering your questions about weight loss, food and nutrition.

### Encino

Friday February 22, Noon

### Pacific Palisades

Monday February 25, 4:00 pm

### West Hollywood

Tuesday February 26, Noon

### Century City

Thursday February 28, Noon

### Tarzana

Friday February 29, Noon

### Valley Village/North Hollywood

Friday February 29, 4:00 pm

\*Testing method is Bioelectrical Impedance and is not appropriate for people with pacemakers or osteoporosis, pregnant women or children. Be well-hydrated for most accurate results.

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