

Hi everyone, so welcome to lesson nine of our Women in Fasting Masterclass. This lesson is a very important and super fun lesson, especially if you are a postmenopausal woman. Leading up to this lesson, I've talked quite a bit about my Five Pillars to metabolic health. I've even talked a bit to younger women who might be struggling with PCOS, or even women that are trying to conceive. At this point, at postmenopausal women, you might have felt a little bit left out, but I do hope that you have watched those lessons because all of those lessons were really leading up to this one, metabolic age versus biological age.

You may have heard a little bit about metabolic age, especially within the fitness industry. Sometimes when you go to the gym and you get a body composition test done, sometimes it'll come with some fun numbers, like what your metabolic age is. If you do your body composition test and your metabolic age comes out younger, you feel really good about yourself, but maybe if it comes out as older than your biological age, you feel pretty down in the dumps.

The good news is that I am here to explain to you what that actually means and what you can do about it. The only reason why metabolic age matters, at all, is because we can reverse it. And you cannot judge a book by its cover, regardless of what you think you look like, or even how you feel right now. The good news is that you can totally reverse your metabolic age and really feel better post menopause, than you ever did in your premenopausal years. And many of you probably can attest to this.

Your biological age is the age that says so on your birth certificate. Your metabolic age, however, has more to do with your metabolic health, which you, at this point, after our insulin resistance lesson, now has more to do with your hormonal health, with your insulin resistance, with your insulin status, where you are on that spectrum. Metabolic health is actually just another word for your hormonal health, and it's just a range that tells you where you are on that spectrum. Really, it's part of the same conversation that we've been having since lesson one.

You know all about the insulin resistance spectrum by now and how unfortunately we can bring ourselves up that spectrum, but fortunately we can definitely reverse and bring ourselves down that spectrum by learning how to manage insulin. I'm going to remind you of my Five Pillars to metabolic health, and these, of course, as of today, are going to become your five pillars to reversing your metabolic age.

So first and foremost, the Beyonce of the show, you must always focus and put all your weight and effort into TRE, Time Restricted Eating, full meals, no snacks, regardless of whether you're doing longer fasts or not. Second, you're going to put all your effort into eating earlier in the day, whenever possible. Of course, with the exception of some occasions, you want to try to get all your meals in before sunset. Number three, we're going to avoid feeding the insulin beast as much as possible, and we're going to choose the foods lower in the food pyramid, at least as the base of our diet.

Four and five is stress and sleep management. Now that you know that stress and sleep have a direct impact on your insulin resistance, you must also realize that stress and sleep management will have a major impact on your metabolic health. As women, we're often under the impression that we've been somehow cursed by having all of these complicated hormones,

when in fact, we should really be celebrating all of our hormones because our female reproductive hormones actually put us at an advantage over our male counterparts. All over the world, women tend to live longer than men. As women, we should learn and understand our hormones so that we can learn how to manipulate our lifestyle and take advantage of these hormones.

Our reproductive hormones, predominantly estrogen and progesterone, have an impact on our insulin resistance, and our insulin resistance will also have an impact on our reproductive hormones. This of course is more significant premenopause than it is post menopause. Premenopause we have a definite advantage over our male counterparts because our particular hormonal composition or environments puts us in a place where we actually have lower incidence of heart disease, we have lower incidence of visceral fat. Men tend to put more weight on their abdominal area region within their organs. So men tend to have more visceral fat, and that's what puts them at a slight disadvantage when it comes to metabolic health and longevity. And women tend to have more fat in the periphery, so in our limbs, and less fat in the abdominal area.

Now this all changes of course, post menopause. When we lose this advantage, we do notice that we tend to put on more weight around our midsection, as women, but some women premenopause notice this as well. The further up you are on that insulin resistance spectrum, the more likely you are, as a woman, to put on more body fat, especially around your abdominal area. Central obesity, as it is always called.

So now you can see how all of these things are actually connected. Post menopause, some women will begin to encounter concerns with weight, diabetes and heart disease, when they didn't have these concerns before. And the reason why that happened is because your hormones, your reproductive hormones were in check. And the fact that your reproductive hormones were in check and your insulin levels were in check, was this nice little hormonal milieu or environment that caused you to have really good metabolic health, as well as reproductive health. You probably didn't struggle with fertility. You didn't have diabetes or any of these other expressions of insulin resistance.

Why do things change for some women post menopause? You may think that insulin resistance is a chronic progressive disease, just like we're told about diabetes, but really what happens is that once we lose that hormonal advantage as women, so once you hit menopause, your hormones really do change quite a bit. You lose that estrogen advantage, and your progesterone levels also go down. What happens is that you are more prone to becoming more insulin resistant. During at least half of your cycle, we naturally lowered that insulin resistance. And so this will not happen post menopause, and that will put us, not in a worse place than men, but it puts us in a very even playing field with men.

So the myth that men lose more weight than women, and quicker than women, is actually not true at all, as you can see from this. The only difference is that women will often find that because of their menstrual cycle, they're really not understanding what is going on and why they lose weight sometimes and they gain weight at other times. And that just feels frustrating. Whereas men, because they don't have this cyclical pattern, once they figure out how to lose

weight, will lose weight in a seemingly more linear fashion, but we are comparing ourselves to our premenopausal environment and the way that our body reacted to dieting premenopause.

There are some other environmental and lifestyle factors that may cause women to have a harder time losing weight than men. And so you might think that it's because you're post menopause, when really, in fact, it's just a history of dieting, your metabolism having slowed down because of doing too many low calorie diets. It might have a lot to do with your habits. Maybe as a woman in your household, your role was to cook or take care of the children, and so you might find that you maybe snacked a lot more than your male partner, and that might put you in a higher insulin resistance state. This is really something I'd like you to think about because it's very likely that this could be happening.

Maybe you're male partner, it looks like he's very thin. He's a TOFI, thin on the outside and fat on the inside, and you just don't realize it. The reality is that you can be in a much better metabolic health post-menopause than you were premenopause. If you compare yourself to a premenopausal woman, you might have a lot lower insulin resistance, and you might be a lot younger metabolically.

Consider a woman that was never insulin resistant in her premenopausal years, and then she goes on and is now post-menopause. If we compare this woman to a younger woman, who unfortunately has a high degree of insulin resistance, like a woman with Frank type of PCOS, it is pretty obvious that even if this postmenopausal woman now starts to gain some weight and have some health concerns, it's very likely that she's a little bit lower down on that insulin resistance spectrum than this younger PCOS woman. The good news, either way, is that both the PCOS young woman and the postmenopausal woman, who's now struggling with weight, can both improve their reproductive health, their metabolic health, and reverse their metabolic age.

Now that we understand that metabolic age is really just a representation of your longevity and your hormonal health, we understand that by understanding our hormones and learning how to manipulate particularly insulin, we can't really manipulate our reproductive hormones, unless you choose to go on hormone replacement therapy, but if we learn how to manipulate our insulin levels, and we learn how to reverse insulin resistance, not only can you lose weight and reverse all the insulin resistance, but you can also reverse your metabolic age. 60 really can be the new 40, as people now claim. And I know that you hear that all the time, and you definitely want to be one of these women.

So let's start by talking about what your plan can and should be. As a postmenopausal woman, you're struggling with insulin resistance more now than before, that it is now more important that you address your TRE, Time Restricted Eating, and that you make sure that every single thing that raises insulin goes into your eating windows and not outside your eating windows. It's of utmost importance that outside of your eating windows, you are only consuming things that have an insignificant or a null insulin response, such as plain water, black coffee, and herbal teas.

If you need a fasting aid while you're fasting, that is absolutely fine. These are called training wheels or crutches, and they're there for you whenever you need them. Just make sure that

you're using and utilizing the most appropriate fasting aids that are going to give you the best results. The very first and most important fasting aid is distraction. In between meals and during your longer fasting periods, make sure that you are busy doing things that don't focus on food. So this might mean changing up a little bit of your roles at home at times.

Number two, obviously an appropriate fasting aid is bone broth. It might help you add in a few extra electrolytes and a little bit of energy, if you need that when you're fasting, but remember to keep your fasting aids to a very short window. So once you're done drinking your bone broth, put it away and go on with your day and your fast. We tend to nurse our coffee if you put something in your coffee, like sweeteners or dairy or any nut milk or creamers. That is going to put you in this higher insulin state, which is not a fat burning state, it's a fat storage state. It's a retention state, not an elimination state.

Rather, have a Bulletproof coffee that has a pure fat, such as coconut oil, butter or ghee, and, or cocoa butter. I know that Bulletproof coffee made with these pure fats don't taste the same as coffee with cream or creamer or nut milks, and there's an obvious reason for that. It has a very different insulin response, one versus the other. This is why the coffee with a creamer and the dairy and the nut milk tastes so great, and you want more and more of it and why you want to nurse it. It's because it's raising your insulin a little bit at a time, every sip that you take.

If you're somebody who struggles with loose stools, while you're fasting, chia seeds in water might help. If you're somebody who struggles with heartburn, when you first start fasting because of a history of GI inflammation, like gastritis in GERD, then having some chia seed in water throughout the day, again, two or three times a day, you wouldn't be nursing this chia seeds in water. Some people, at the beginning of their journey, do put chia seeds in their large water bottle, and they sip that throughout the day. That is a fact, and they don't do this forever, they do this for a period of time because they might have a very uncomfortable heartburn sensation, but eventually they will either bring this into much shorter periods and maybe only have it once or twice a day. And eventually they eliminate this fasting aid like every other one.

So you might be wondering how you can test for metabolic age. As I mentioned a little earlier, this might be something that you get done at your gym when you check for body composition, or if you've ever had a DEXA scan done. It doesn't really matter what the number says, it's kind of like the number on the scale. What matters is how you feel. Rest assured that every time you lower your insulin a little bit, and you reverse your insulin resistance and your insulin resistance expressions a little bit, you are reversing your metabolic age. And consequently, you are increasing your quality of life, but also your longevity potential.

So in the last few lessons, I went over some protocols, some fasting plans for younger women and premenopausal women that still have a cycle. I also went over some protocols for weight loss in general, and I also went over some fertility protocols. I now kind of want to tie all of those together, for you postmenopausal women, or people that are trying to reverse their metabolic age and people who just generally want to feel better and younger.

So as a postmenopausal woman, if you don't have a cycle, then of course, what you can do is you can use the monthly calendar to create a plan for yourself. The plan is no different if you're trying to reverse insulin resistance and if you're trying to get rid of some of these expressions,

such as obesity. So if you're trying to lose weight, or if you're trying to lower your blood sugars, the plan is not all that different, except that instead of using your menstrual cycle as a guide, you would use the monthly calendar. So let's say that on your calendar, you would choose a week of the month where you would have less or no social engagement, so that you could do a longer fast. A three day fast is obviously a lot easier to fit into your social schedule than maybe a five or 10 days, so you'd have to choose the weeks appropriately.

In order to prepare for that extended fast, it would be wise of course, to do some fat fasting for a few days just before, as a bridge to prepare your body and yourself to start fasting. So you would do a fat fast, let's say for two to five days, where you would either continue on with your alternate day fasting plan, if that's what you're doing the rest of the month, and then on your eating days, you would choose the foods on the fat fast list. What you will notice always and every time that you fat fast appropriately is that your insulin levels drop significantly. You might notice some weight loss. You might notice some changes in inches. You might notice if you're diabetic and check your blood sugars that your blood sugars drop significantly while you're fat fasting. And as this is happening, of course, your insulin levels are dropping further and further down, and putting you into this deeper healing and fat burning mode, which then leads more easily into a fasting state.

So when you start fasting after a fat fast, you're already in this lower insulin, higher energy state. And so fasting then becomes easier. Because your insulin is lower, you have less craving, less hunger, more energy, and you're already fat burning and using that for energy. So you might do a three day fast, a five day fast, or even a longer fast than that. So when you break your fast, you are now ready to continue on with the rest of your monthly plan.

Remember that how you break that extended fast is going to determine how you feel and how you eat for the remainder of the week and for all those days to come. Really avoid getting into this guilt and reward sort of cycle that we sometimes get ourselves into by fasting longer when we've eaten poorly and then rewarding ourselves with eating poorly once we've done a longer fast. So choose how to break your fast appropriately. Having a lower insulin meal to break your longer fast really is a great idea so that you don't have a huge regain in weight once you go back to eating, so that you don't feel super bloated, so that you don't have an insulin spike, and then that will put you into a state of hormonal binging. You'll feel like binging, and it isn't because of your extended fast, but rather because of how you broke your fast.

If your plan is to lose weight, the best plan for you to follow, even after an extended fast, are the 60/40 protocols and the alternate day fasting schedules that we talked about in the other lesson. Whether you go back to the 24 hour alternate day fast, or you go to the 42 hour alternate day fast, or the 48's, or even the 66's, which I joked are the Formula 1's of the crew, then that's what you do for the remainder of the month. So even though you don't have a cycle, you can put this into your monthly calendar where you do a slightly longer fast, preceded by a fat fast for a few days to make that extended fast a little bit easier.

Now, when you're ready to break your fast, you break it with either one meal, on your break fast day, and then two meals the next day because you want a nice full eating day, which is two meals, before you start fasting again. And then the day after that is a fasting day. Then you continue on the rest of the month with your alternate day pattern, and your alternate day fasting



pattern can change. One week you can do the 24's, another week the 42's, another week the 48's.

Beside that longer fast that you do once a month, you might want to do a 72 hour fast more frequently. So maybe you'll alternate one week you'll do the alternating 42's for weight loss, but the next week you do the 72 plus 24 for further healing and reversal. And then as you get closer to the end of the month in the beginning of a new cycle for you, even though it's not a menstrual cycle, you prepare by fat fasting in order to do another longer fast. And this is your healing phase. This is part of your healing journey.

I'm going to share with you a blog post that I wrote about metabolic age, and I'm also going to share with you a presentation that I did all on menopause and metabolic age. Please reach out to me in our community forum under the special thread for this masterclass. I would be happy to talk to you there. Also, we will be having another Q&A session, so if you haven't already, please send in your questions [masterclass@thefastingmethod.com](mailto:masterclass@thefastingmethod.com). And I look forward to seeing you in that session. Talk to you tomorrow. Bye guys.