

What Does the Beyond Keto Lifestyle Look Like?

From Chapter 3 (“What is a Keto Diet?”) in *Beyond Keto* by Dr. Don Colbert

About one hundred years ago doctors at Johns Hopkins University and the Mayo Clinic were given the arduous task of trying to treat patients who suffered from seizures and diabetes. They tested different diets and found that when they reduced carbohydrate intake to almost zero, patients went into ketosis, and seizures usually stopped and blood-sugar levels usually normalized.¹

Was that the beginning of the keto diet? Not at all. You see, our bodies are used to being in ketosis. As nursing babies, we relied on the fat in our mother’s breast milk for our energy and development. We were in ketosis! And then we slowly transitioned off of it as we began to eat carbs and sugars.²

You might be wondering what ketosis is. When you were a baby and your body was burning fat for energy, you were in ketosis. As an adult it’s the exact same thing. When you are burning fat for energy, you are in ketosis.

Ketosis is the safe and natural state where your body burns fat for fuel rather than the usual glucose (a sugar in your cells).

Besides being in ketosis for your first year of life, you come pretty close to ketosis whenever you fast or go without food for twelve to fourteen hours between meals (such as eating dinner at 6:00 or 7:00 p.m. and then eating breakfast at 7:00 or 8:00 a.m.).

What Exactly is a Keto Diet?

You know what ketosis is. And you know that the normal American diet is a high-carbohydrate diet. After all, that is what the US Dietary Guidelines recommend, with carbs making up 45–65 percent of our daily intake!3

These carbs—whether from grains, breads, corn, rice, beans, fruits, potatoes, juices, sugar, pasta, sodas, or something else—are turned into glucose in our bodies to be burned as fuel. Extra glucose is stored in your muscles and liver as glycogen and in your liver, belly, hips, and thighs as fat. It's simply what your body does.

So, when exactly does this ketosis happen? It can only happen when you lower your carb intake enough for your body to shift from burning sugars as fuel to burning fats as fuel. For most people that number is going to be around 5–15 percent of their daily food intake coming from carbs. Yes, some need to dial that number back even further (less than 5 percent) before they lose weight, and it may take anywhere from two days to eight weeks to enter ketosis.

When carbs are reduced to below whatever your carb threshold is, you naturally start to lose weight. And don't worry, carbs are not required to live. You need proteins and fats to survive, but technically, carbs are not required to sustain life.

I have had people tell me there is no way they can survive without their bread or soda or chips or candy or ice cream, but they do. In fact, once they have gone without their must-have carbs and their bodies have adjusted to burning fat rather than glucose, they often tell me, "I don't crave it any more. In fact, I don't even want it."

The usual goal of most people on a keto diet is to lose weight, and when you reduce your carbohydrate intake to 5–15 percent of your calorie intake, your metabolism will eventually shift from glucose burning to fat burning. Patients

who are not insulin resistant, prediabetic, or diabetic can usually shift into ketosis in two to seven days. For those who are insulin resistant, prediabetic, or diabetic, it may take four to eight weeks to enter ketosis, or fat burning.

Not only is the keto diet low-carb; it is also a high-fat, moderate-protein diet. It looks like this:

- Low-carb (5–15 percent), from healthy carbs (e.g., green vegetables, salads, nuts, seeds, non-starchy vegetables, or others)
- High Fat (60–75 percent), from healthy fats (e.g., olive oil, avocado oil, omega-3—such as fish oil, nuts, small amounts of cheese, butter, cream, and so on)
- Moderate Protein (15–25 percent), from healthy proteins (e.g., wild fish, organic pastured eggs, grass-fed meats, pastured chicken and turkey, and so on)

Admittedly, this is quite a shift for most people. After all, it goes against the US dietary guidelines and our national habits, family culture, restaurant menus, food marketing campaigns, and personal preferences. But when you reduce carbohydrate intake to 5–15 percent, your body is going to go looking for fuel to burn. As a result, it burns fat, and the first fat to burn is usually belly fat. Nobody complains about that!

It's a Fact

When you first get into ketosis, the first fat to burn off is usually belly fat.

Not only do the high-fat and moderate-protein parts, the other parts of the keto equation help your body burn fat more efficiently, they also help keep you from being hungry, give you the energy you need, and restore your body.

Here is a quick snapshot that excites most people. A healthy

keto diet

- promotes weight loss (an average of one to two pounds of fat per week)
- often burns belly fat first
- reduces appetite
- increases energy
- increases metabolism
- promotes greater mental clarity (focus)
- reduces brain fog
- reduces the need for afternoon naps
- virtually eliminates sugar spikes or crashes
- keeps food cravings under control
- reduces inflammation, which usually means less pain.

We are taught that our bodies are mostly water, but let's say you remove all the water. Do you know what remains? Interestingly well over half your solid body matter is fat, a smaller amount is protein, and only about 1 percent is made up of carbs, similar to the keto diet!

Stay Focused on Your Goal

Your goal as you get on the keto diet is to focus on consuming healthy fats (around 70 percent of your diet) and moderate proteins (15–25 percent) and to keep your carbs low (5–15 percent). How long will it take for your body to shift from burning glucose to burning fat for fuel? It varies per person, depending on age; health; eating habits; if you are insulin resistant, prediabetic, or diabetic, exercise habits; and so on, but I tell patients that it can be as little as a few days

to as long as a month or two.

On average, I would say it takes about two to seven days for my healthier patients. But for patients who are insulin resistant, prediabetic, or diabetic, it usually takes four to eight weeks, and that's usually about right for heavier, older patients.

But the point is, keep going and you will get there. Countless health benefits await! {eoa}

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