

THE ZONE COMPARED TO OTHER DIET PROGRAMS

Most diets, including high-protein diets, only create deprivation, hunger, and fatigue in the hope that enough weight loss is generated to fit back into your clothes, at least temporarily. Every week at the check out counter you will find hundreds of magazines touting the newest diet usually developed by some Hollywood celebrity. These diets always fail, because they are so nutritionally unbalanced. It is impossible to follow them for a lifetime. This is why the Zone is not a diet. It is a life-long food management system that provides tremendous flexibility in your food choices to achieve the hormonal goal that guarantees permanent fat loss. That hormonal Holy Grail is to maintain insulin in the Zone; not too high, not too low.

With that as a background, let's look at some of the popular diets and see how they stack up against the Zone. Remember the Zone was developed as a "drug" to treat heart disease and diabetes, with the added long-term benefits of permanent fat loss and increased longevity. On the other hand, most diets are nothing more than short-term weight loss programs because they can't be followed on a lifetime basis. As a result, you always return to your old dietary habits that got you in trouble in the first place. The reason these diets fail is because they are hormonally flawed.

Atkins diet This is the most extreme example of the high-protein diets. You simply can't go around over-consuming protein (often rich in saturated fat) and think good things will be the long-term result. Sure you lose weight quickly, but much of that initial weight loss is primarily due to increased urination to eliminate abnormal ketone bodies. However, on the Atkins diet you are virtually guaranteed to regain the weight because continual ketosis adapts your fat cells to become "fat magnets". Furthermore, the high saturated fat intake increases the viscosity of your cell membranes so that over time your insulin receptors become less responsive resulting in an increase in insulin levels. The result is that fat regain is inevitable. In addition, some very nasty long-term health risks like the increased risk of heart disease due to increased lipid oxidation also occurs in continued ketosis. The Atkins diet is based on protein gluttony just as long as you don't eat any realistic amounts of carbohydrates. An extreme diet, like the Atkins diet, is totally unbalanced. Millions of people have tried this diet before, have lost weight, and then regained the weight back and more. History will repeat itself again.

Ornish diet This is a very-low fat diet that is the complete opposite of the Atkins diet. On this program your goal is to consume as little fat as possible, and eat lots of carbohydrates. Since fat has no direct effect on insulin and carbohydrates stimulate insulin, this dietary approach is also hormonally flawed in terms of your long-term goal to control insulin. More disturbing is the fact that in a small group of cardiovascular patients who followed this diet for five years, they suffered twice as many fatal heart attacks than a similar control group who followed the less restrictive American Heart Association diet. This has prompted the Nutrition Committee of the American Heart Association to state:

"Because very low fat diets represent a radical departure from current prudent

dietary guidelines, such diets must be proven both advantageous and safe before national recommendations can be issued."

The Ornish diet is based on carbohydrate gluttony just as long as you don't eat any fat. This diet is just as extreme as the Atkins Diet.

Carbohydrate Addicts Diet This is a diet program that defies logic. Assuming you are a carbohydrate addict, why would you reward yourself with a high-carbohydrate meal once a day that feeds your addiction? On this program, you eat two high-protein meals and then reward yourself with a high-carbohydrate meal. This is like going to an Alcoholics Anonymous meeting and telling everyone they can go to a bar for one hour each day to reward themselves for being sober most of the day.

Sugarbusters This is the Reader's Digest version of *The Zone*, even though some of the information is simply dead wrong (like glucagon being a fat burning hormone). This diet assumes if you simply remove refined sugars from your diet everything will be OK. Yet, as incredible as it may seem, each day begins with a high-carbohydrate breakfast guaranteed to increase insulin levels, which is not OK. Furthermore, this diet has no quantity restrictions. Excess calories do count, even if they are balanced. Any excess calories you consume at a meal will force the body to increase insulin levels and thus move you out of the Zone. In addition, excess calories also force the body to produce more free radicals to process incoming food, thus accelerating aging. Nor does this diet give you information on how to fine-tune your diet for your personal biochemistry since we are not all genetically the same.

Protein Power This diet starts off with a high-protein diet, and then switches to the Zone for maintenance. I have high respect for the authors, and as responsible physicians they strongly recommend taking a potassium supplement while you are following the high-protein phase of their program. Personally, I think that starting yourself squarely in the center of the Zone and then making any necessary adjustments in the balance of protein to carbohydrate to maximize your insulin control makes more nutritional sense. Since clinical studies have shown that you will not lose excess body fat any faster on a high-protein diet than the Zone, why not just start yourself in the Zone? It is an easier approach for making permanent lifestyle changes.

American Heart Association diet This diet is less restrictive on cholesterol and fat intake than the Ornish diet, but still relies too heavily on high-density carbohydrates like grains, starches, and pasta (in other words, it follows the USDA Food Pyramid). As a result of increased carbohydrate intake, insulin levels can increase on this diet. Ironically the number-one risk factor that best predicts future heart disease is increased insulin levels. Perhaps not surprisingly, the number of heart attacks is once again rising in America.

Mediterranean diet This is the diet used in the Lyon Diet Heart Study, which demonstrated a 65 percent reduction in fatal heart attacks compared to a control group who followed the American Heart Association diet. Like the Zone, the

Mediterranean diet keeps saturated fat intake low, stresses the increased consumption of fruits and vegetables, and the liberal consumption of Omega-3 fats. As good as these recommendations are, the Zone actually encourages the consumption of even more fruits and vegetables than the Mediterranean diet, with a corresponding decrease in the intake of unfavorable grains and starches. Therefore, the Zone will lower insulin to a far greater extent. The Zone also recommends even more long-chain Omega-3 fats than the Mediterranean diet, which is important for the cardiovascular, immune and nervous systems. You should consider the Mediterranean diet as a less sophisticated version of the Zone.

When compared to all of the popular diets, the Mediterranean diet is the most similar to the Zone in terms of balance and moderation coupled with common sense. However, the Zone would lower insulin levels to an even greater extent than the Mediterranean diet because of its increased fruit and vegetable consumption and corresponding decrease in the intake of grains and starches. The Zone would also have more long-chain Omega-3 fats than the Mediterranean diet does. Finally, you would consume fewer total calories (thereby increasing longevity) following the Zone compared to the Mediterranean diet. Considering all the improved hormonal benefits of the Zone compared to these other popular diets, why would you want to try any other dietary program?

Dr. Barry Sears 2004