

"A refreshing and innovative approach that can help millions. Filled with eye-opening research sure to motivate those looking for a proven, realistic diet."

—Dr. Mark Stengler, bestselling author and host of the national television show *Natural Healing*



The Every Other Day Diet

**4 Weeks,
12 Pounds,
2 Sizes.**

**The Diet That Lets You Eat
All You Want (Half the Time)
And Keep the Weight Off**

Krista Varady, PhD

The World's Leading Scientific
Researcher on Alternate-Day Fasting

AND

Bill Gottlieb, CHC



H Y P E R I O N

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KRISTA VARADY, PHD

AND

BILL GOTTLIEB, CHC

H Y P E R I O N

New York Boston

For my son, Gabriel; husband, Nicolas; and parents, Eva and Lou.

—Krista

For my darling wife, Denise, who loves me every day.

—Bill

[Introduction](#)

[Welcome to the Every-Other-Day Diet](#)

CUT BACK TODAY—CUT LOOSE TOMORROW!

Diets don't work.

You've probably read that statement dozens of times, if not hundreds. But even though "Diets don't work" has become a truism, it's not true. The truth is *diets don't work when you diet every day*. Diets don't work because no one can endure day after day of deprivation, cut off from the foods they love. Diets don't work because no one can follow their complex and artificial rules for weeks and months on end. Diets don't work because they're unworkable!

But the reasons why traditional diets *don't* work are the same reasons why the Every-Other-Day Diet *does* work—because it does away with daily deprivation and hard-to-follow rules. And you don't have to just take my word for it, because unlike other diets, the Every-Other-Day Diet has years of rigorous scientific research to back up its claims.

As a PhD in nutritional science and an associate professor of nutrition at the University of Illinois, I've spent the last 10 years conducting weight-loss studies on *modified alternate-day fasting*—a simple and science-proven approach to quick, permanent weight loss and lifelong weight maintenance. I've distilled that decade of systematic, successful research into a practical plan, which I'm presenting for the first time in this book, *The Every-Other-Day Diet*.

I want to take a moment to also introduce my coauthor, Bill Gottlieb, CHC, the author of 12 other health books that have sold more than two million copies worldwide, a health coach certified by the American Association of Drugless Practitioners, and the former editor in chief of Preventive Magazine Books and Rodale Books.

Bill not only brought his writing skills to *The Every-Other-Day Diet*; he also brought his skills as a veteran health journalist, working with me to find the latest scientific research, reported throughout the book. This book is infused with Bill's passion and professionalism as a health coach dedicated to the wellness of his clients and his readers.

In this introduction, I'll explain the difference between the Every-Other-Day Diet (the EOD Diet for short) and the other diets out there. I'd also like to tell you my own story of losing weight by dieting every other day. Then I'll provide a brief overview of the contents of the book and how to use it for weight-loss success.

So let's get started with a closer look at the crucial differences between every-day dieting and the

FORGET ABOUT DIET DEPRIVATION—WELCOME TO DIET SATISFACTION

Every-day diets are typically about deprivation—what you *can't* eat. They tell you what *not* to do. Here are the first five of the dieter's equivalent of the Ten Commandments, like

- Thou shalt not eat more than 10% fat.
- Thou shalt not eat more than 40 grams of carbohydrates.
- Thou shalt not eat meat.
- Thou shalt not eat wheat.
- Thou shalt not eat sugar.
- Thou shalt not covet thy neighbor's sugar.

So you try to obey your diet's unique set of commands, whether there are 10 or 100 of them. But you end up feeling frustrated. So you “sin.” You eat “bad” foods. You feel like a “bad” person. And then you repent. (“I’ll never eat doughnuts again!”) And then, inevitably, you repeat the whole self-defeating cycle all over again.

Why does this happen? As day follows night, dietary excess always follows dietary deprivation. When a food is forbidden, it becomes tantalizingly tempting, and you crave it. Are you on a low-carb diet? You're probably craving pizza. On a low-fat, plant-based diet? You're probably dying for steak. On a Paleo Diet? You're probably dreaming about cheese enchiladas. Eventually, you give in to those cravings. Maybe you even binge.

Another reason diets fail: hunger. Hunger is good. Hunger is *natural*. Hunger is your body's way of telling you that it needs fuel. The point of hunger is to let you know it's time to take in more calories. But weight-loss diets are about calorie restriction. (In spite of all the claims to the contrary by diet gurus who favor high or low quantities of carbs, protein, and/or fat, it's *always* calorie restriction that powers a diet's ability to help you shed pounds.) So when you diet, you feel hungry. Maybe even cranky. Maybe even depressed. Nobody can deal with daily hunger and its accompanying emotional stress for long. The Every-Other-Day Diet solves this problem by making sure that you don't feel chronically deprived.

Diets also present you with a complex and daunting set of rules to be obeyed—or else. They tell you *what* you can and can't eat. They tell you *how much* you can and can't eat. They often tell you *when* you can and can't eat. All those rules end up ruling your life. And that's no fun. So what if you could drop pounds and still...

Eat all you want!

The Every-Other-Day Diet makes losing weight easy. There's no long-term deprivation, and there's one simple rule:

Eat 500 calories on the day you diet (Diet Day), and eat anything you want and as much as you want the next day (Feast Day).

No keeping track of carbs, fat, or protein. No avoiding any particular food; all foods are allowed. No complex meal plans. And, yes, you diet only *every other day*. As I discuss at length in [chapter 1](#), my research shows you lose just as much weight on the EOD Diet as when you're on an every-day diet.

With every-other-day dieting, dietary deprivation never lasts longer than a day, and total dietary freedom is always just a day away. Now, you may be thinking to yourself, "There's no way that's going to work. I'm going to eat so much on Feast Day that I'll never lose weight." But the studies I've conducted show that overeating on Feast Day *doesn't* happen. On average, people following the Every-Other-Day Diet eat about 110% of their normal caloric needs on Feast Day. And they eat about 25% of their normal caloric intake on Diet Day. That's an average of nearly one-third fewer calories over two days—and a perfect formula for steady, safe weight loss.

Why don't EOD dieters binge on Feast Day? Because they're not feeling deprived! When you're on the Every-Other-Day Diet, you know you'll be able to eat whatever food you want, and all the food you want, every other day. You don't have to eat "like there's no tomorrow" because there's tomorrow right around the corner, and another one soon after that. The Every-Other-Day Diet solves the problem of diet *deprivation* with diet *satisfaction*.

MY PERSONAL STORY OF WEIGHT-LOSS SUCCESS ON THE EVERY-OTHER-DAY DIET

In this book you'll read many first-person stories from participants in my studies on the Every-Other-Day Diet, people who were officially classified as "obese" (about 30 pounds or more overweight) and who typically lost 20 or more pounds. But before I introduce you to those folks, I'd like to tell you my own story.

I've never had that much weight to lose, but, like most people, I sometimes struggle with extra weight. In the past, I tried to lose that weight with every-day calorie restriction. But the diet that I find works best for me is the same diet I've been studying for nearly a decade, the Every-Other-Day Diet. Here's what happened...

Back in 1996, at the age of 17, I was on my high school swimming team, working out for two hours at a time, up to 10 times every week. I needed a lot of calories to fuel those workouts (and my growing body), and I ate a lot. But I never had a weight problem. I was 5'7", 135 pounds, muscular, and strong. When I got to college, I stopped swimming competitively, but I kept on eating the same amount of food as I did in high school. It never occurred to me that the number of calories needed to power my workouts would be too many calories for my somewhat sedentary scholastic lifestyle. And so I gained about 15 pounds—the classic "Freshman 15."

Fortunately, I was majoring in nutrition, so I was learning for the first time about calories and healthier food choices. With that new knowledge, I started eating more sensibly, and slowly but surely I lost the weight I'd gained. By late in my sophomore year, I once again weighed 135 pounds. And that's right where my weight stayed until I was 31 years old and got pregnant.

The final trimester of my pregnancy coincided with the holidays. I found myself at party after party, feeling free to eat anything and everything I wanted to eat. (No one judges you for your appetite when you're pregnant!) As a result, I ended up gaining a little more weight than my obstetrician would have preferred, putting on about 40 pounds, rather than the suggested 25 to 35 pounds.

After my baby was born, I expected to easily lose that extra weight. And why not? Shedding extra pounds had been a breeze back in college. But I was in for an unpleasant surprise. About 25 of those

extra pounds did come off quickly, which is pretty typical after a pregnancy. But the last 15? They stuck around. And I felt stuck.

Finally, after a couple of months, I put myself on a 1,300-calorie-a-day diet. And after six difficult months of daily deprivation, my weight was back down to 135. At that point, I figured the weight would stay off without my having to think about it. Wrong again. Over the next six months or so, the weight crept back on until I was back at 144 pounds. I couldn't believe it! I was eating healthfully, exercising, and was walking regularly. But here I was, overweight again.

Believe me, I didn't want to go back on a 1,300-calorie-a-day diet for months and months, enduring the daily struggle, and hardly see the scale budge week after week. I was ready for a different approach. And so I started using the very same weight-loss method I'd been studying—the alternate-day modified fasting of the Every-Other-Day Diet. And like the participants in my studies, I loved it. I didn't have to diet every day. I could eat whatever I wanted to every other day, and I could eat as much as I wanted to. Best yet, I saw *immediate* results, quickly losing the weight I wanted to lose. I went back to 135 pounds. And if I see the scale start to creep up by a couple of pounds—well, I just go on the Every-Other-Day Diet for a week or two, and the weight comes right off.

The Every-Other-Day Diet has worked for me. It has worked for hundreds of participants in my studies, all of whom have been 30 or more pounds overweight. And I'm sure it will work for you, with the certainty I think you'll share after you read [chapter 1](#) of this book, which presents the scientific evidence showing the effectiveness of the Every-Other-Day Diet. I feel quite passionate about my work and research, given the stakes: obesity is one of the biggest and most harmful health plagues of our time.

IT'S TIME FOR A REVOLUTIONARY APPROACH

The week I was finishing writing *The Every-Other-Day Diet*, the American Medical Association (AMA) decided to officially recognize obesity as a *disease*. (As a medical term, “obesity” is a reflection of body mass index, or BMI, a measurement of body fat. Medically, you're “overweight” with a BMI of 25 to 29.9, and “obese” with a BMI of 30 or over, which is generally 30 pounds or more overweight.) I certainly understand why the AMA made that decision.

Just about all of the participants in my scientific studies have been obese, so I know how difficult life can be for them. There's the discomfort of all those extra pounds. There's the struggle with self-esteem. And then there's the poor health: research links obesity to many other health problems, including heart disease, stroke, type 2 diabetes, cancer, osteoarthritis, gout, liver disease, sleep apnea, and depression.

In America, 36% of the population is obese and another 33% is overweight. Worldwide, 12% of the population is obese and another 22% is overweight. That's hundreds of millions of people worldwide who are weighed down by extra pounds. My sincere hope is that going on the Every-Other-Day Diet helps millions of them.

I began conducting research on modified alternate-day fasting because I knew that overweight and obesity were taking such a significant toll on the lives of so many people, and I saw that conventional every-day diets were failing to help them.

I was looking for a new way, a better way, to first help people lose weight, and then to help them keep it off for a lifetime. My scientific research on both weight loss and weight maintenance shows that the every-other-day approach to weight control offers just the help overweight and obese people

need. And I am delighted that now you'll be able to make practical use of my research by reading about and following the ~~Every-Other-Day Diet~~ and shedding those excess pounds once and for all.

HOW TO USE THIS BOOK

Like the Every-Other-Day Diet itself, this book is simple to use. I suggest you do the following:

Start by reading [chapter 1](#), which tells you about the scientific findings that support the EOD Diet. [Chapter 1](#) will fill you with confidence and enthusiasm about this unique weight-loss program.

Next, read [chapters 2 and 3](#) to orient yourself to Diet Day (500 calories) and Feast Day (unlimited calories). Once you've read them, you're ready to start the EOD Diet. But before you do, it will help to...

Check out [chapters 4 and 5](#) for Diet Day ideas. [Chapter 4](#) offers twenty-eight 400-calorie lunches, twenty-eight 400-calorie dinners, and twenty-eight 100-calorie snacks—all quick and easy to prepare and all delicious. [Chapter 5](#) guides you in selecting frozen, commercially prepared entrées that match the calorie requirements for Diet Day, and also offers snack ideas.

Read [chapter 6](#) to turbocharge the EOD Diet with exercise. This chapter looks at my research on combining EOD dieting and exercise to help you lose more weight and lose it faster.

Keep the weight off with [chapter 7](#). In this chapter, you'll find the Every-Other-Day Success Program, a science-proven way to keep off the weight you've lost. That's crucial, because five out of six dieters regain all their weight after one year. I'm happy to say that weight regain is unlikely to be your fate if you follow the EOD Success Program.

WELCOME TO FAST, EASY, AND PERMANENT WEIGHT LOSS

The Every-Other-Day Diet is simple and straightforward.

The Every-Other-Day Diet is easy.

The Every-Other-Day Diet is science-proven to *work*.

You'll lose weight fast and reach your goal weight.

You'll keep the weight off.

And you'll do so while eating all the food you want and any food you want, every other day.

Ready to get started? Just turn the page.

CHAPTER 1

The New Science of Every-Other-Day Dieting

Study after study shows the Every-Other-Day Diet really works

When it comes to health and wellness, there's a reason we look to the accuracy and authority of scientific experiments to help us suss out what's truly useful and sound information from all of the baseless, specious, and fad claims and advice out there—to separate the proverbial wheat from the chaff: *Scientific experiments aren't based on hype and hope.*

A well-designed, well-conducted scientific experiment helps separate truth from wishful thinking, fact from fantasy. And a *series* of scientific experiments, testing the same theory and generating the same results (what scientists call *replicating* a scientific finding), creates a body of knowledge you can *trust* and then *act on*.

Given the importance of weight loss to our health and well-being, to preventing and reversing disease, and to restoring self-esteem, you'd think most diet books would be packed with scientific evidence that justifies their approach. But that's *not* the way it is.

Yes, there have been scientific studies on a few popular diet plans. For example, a study published in the *Journal of the American Medical Association* showed that overweight and obese women on the Zone Diet, the low-carb Atkins Diet, or the low-fat Ornish Diet lost a little bit of weight after one year of dieting—an average of 3.5 pounds on the Zone Diet, 4.8 pounds on the Ornish diet, and 10.4 pounds on Atkins.¹ (Yes, that's after dieting for *one year*. I think you'll do a lot better on the Every-Other-Day Diet.) However, most popular weight-loss plans don't have any scientific support for the approach. None. Zero. Zilch.

Why am I making such a big fuss over scientific support for the diet plans in diet books? Because the Every-Other-Day Diet *does* have a significant body of scientific research behind it. To date, I've conducted seven clinical trials involving nearly 400 people, and I have published the results in 2 scientific papers. My studies have shown, again and again, that the Every-Other-Day Diet *works*. The people in my studies lose weight. And in my ongoing, three-year study on weight maintenance sponsored by the National Institutes of Health, EOD dieters are keeping the weight off.

In other words, the Every-Other-Day Diet is a research-proven diet that you can *trust*. If you follow this diet, eating 500 calories on Diet Day and whatever you want on Feast Day, the scientific evidence

says you *will* lose weight. And if you go on the maintenance program described in [chapter 7](#), the Every-Other-Day Success Program, my newest findings show you *will* keep the weight off.

I know the Every-Other-Day Diet may seem too good to be true. I know you might be asking yourself, “Can I really lose weight eating anything I want, every other day?” Never fear. You can. And not just because I say so—because nearly a decade of rigorous scientific research says so. And since your trust in the science-proven effectiveness of the Every-Other-Day Diet is so important to me, I’ve devoted this chapter to sharing the research and studies that support my claims. I want you to know—really *know*—that the diet you’re about to undertake isn’t a novel idea that’s never been put to the test. It’s not based only on the experience of patients in one doctor’s practice (which is the case with many diet plans). And it’s not theoretical—an idea that seems to make metabolic and biological sense, but has little real-world evidence to show that it works.

By learning about the science of every-other-day dieting and by reading about my studies and the positive findings, you can embark on this new weight-loss program with confidence, conviction, and enthusiasm. So let’s start at the beginning: with my discovery of this diet, in the basement of a building on the campus of the University of California, Berkeley, where, in 2006, I was a postdoctoral fellow.

THE MICE THAT ALWAYS LOST WEIGHT

After I graduated from McGill University in Canada with my PhD in nutrition, I moved to California to do postdoctorate research in the Department of Nutritional Science at Berkeley. (A native Canadian, I was delighted to discover that “winter” in Northern California is just a series of rainstorms and that daffodils bloom in February!)

Under the guidance of my advisor, Dr. Marc Hellerstein, I investigated the effect of calorie restriction on cancer. There was already a lot of research on calorie restriction and longevity in animals; it showed that when mice are fed less food, they live up to twice as long as mice fed a normal diet. Furthermore, some of the biochemical mechanisms triggered by calorie restriction in longevity research are known to be anticancer. The mechanisms include slower cell division; lower levels of IGF-1 (insulin-like growth factor 1, a growth factor that stimulates cancer cells to divide and multiply); and lower levels of glucose, the main fuel for cancer cells.

Our research question was this: Can you put a mouse on the ultimate form of calorie restriction—fasting—so that the growth of cancer cells is slowed, but the animal does *not* lose weight? (In the research, scientists are always trying to isolate and analyze specific factors. In this case, we wanted to isolate the effect of *calorie restriction* on cancer from the effect of *weight loss* on cancer.)

But as hard as we tried, we couldn’t keep the mice from losing weight! We fasted them one day and let them eat all they wanted the next day. But they never ate enough calories on “feed day” to fully compensate for the total lack of calories on “fast day.” Sometimes they managed to eat 150% of the normal day’s calories on feed day. Sometimes they ate up to 170%. But they never ate 200% of the normal caloric intake on feed day to make up for the zero calories on fast day. And so they *always* lost weight.

My experiment had failed because there was no way to separate the effect of calorie restriction from the effect of weight loss. I was not a happy scientist! But a scientific investigation that seemed like a dead end can suddenly present a new vista of opportunity. And that’s just what happened: I had a eureka moment, an *Aha!*, a conceptual breakthrough when I realized that the mice always lost weight

on alternate-day fasting. The mice *always* lost weight. Could alternate-day fasting help us *humans* lose weight? If people fasted one day and then ate all they wanted the next day, would they always lose weight, just like the mice?

The concept of the Every-Other-Day Diet—using alternate-day fasting for *weight loss*—was born. It was time for me to say good-bye to the mice in the basement at Berkeley and move to Chicago where I had been hired as an assistant professor in the Department of Kinesiology and Nutrition at the University of Illinois at Chicago. There, I started conducting studies on weight loss. With people.

THE MAGIC NUMBER

When I looked closely at the scientific literature on alternate-day fasting for cancer and heart disease—studies conducted exclusively on animals in the laboratory—I found that many of the risk factors for the two diseases were lowered most effectively when the animals ate only 25% of their normal calories on fast day. Not 75%. Not 50%. Not 0%, or a total fast. Time and again, the healthiest percentage was 25%, or what I call a *modified fast*.

And the 25% level of calories on fast day did more than prevent and reverse signs of disease. It also prevented the loss of muscle mass the animals otherwise had experienced at 0%, when they were given no food on fast day.

Why was that important? Losing muscle mass while dieting is a disaster for weight loss and weight maintenance. That's because muscle (*lean body mass*, in scientific terms) is metabolically active tissue that burns a lot of calories. Lose muscle during dieting and you'll burn fewer calories after dieting and regain your weight—as fat! This is perhaps the key reason why 5 out of 6 people who lose weight gain it all back (and then some). So I decided that on fast day—the day called *Diet Day* in the Every-Other-Day Diet—people would eat 25% of their normal caloric intake, or about 500 calories. I was ready to recruit participants and begin my study.

At this point, I have to make an embarrassing confession: even though I was about to conduct a study on every-other-day dieting in people, I didn't think the diet would work!

Why not? Well, many overweight people eat around 3,000 calories a day, and I couldn't imagine they'd be willing or able to eat only 500 calories every other day. And then there was my conversation at a medical conference with Dr. Eric Ravussin, PhD, director of the Nutrition and Obesity Research Center at the Pennington Biomedical Research Center at Louisiana State University. I told him I was thinking of conducting a study on alternate-day fasting for weight loss, allowing my participants to eat 500 calories on fast day.

“Don't even bother,” he said. And then he proceeded to tell me (to my surprise) that he and his colleagues had recently conducted a human study on alternate-day fasting, in which the participants ate zero calories on fast day. A study that didn't go too well.² First, he wasn't able to recruit anyone from outside Pennington to participate in the study, because the idea of fasting every other day seemed so onerous; he was forced to enroll Pennington professors in the study. Next, he couldn't even convince many of those professors to participate for all three weeks of the study. Of the 16 that started, only 8 finished. And even those who finished told him they hated alternate-day fasting. The families hated it, too. “I was so cranky and irritable on fast day that my wife wouldn't talk to me,” said Dr. Ravussin, who participated in his own study.

I had already planned to allow my study participants to eat 500 calories on fast day; my conversation with Dr. Ravussin convinced me I'd made the right decision. For successful every-other-

day dieting, you need to be on a *modified fast*, not a total fast. (In scientific papers, I sometimes call my approach ADMF, or alternate-day modified fasting.) You need to eat a small meal during the day so you can stay balanced emotionally and mentally, interact with people without blowing a fuse, and get through your workday efficiently and effectively.

In spite of my doubts, I went ahead with my study, recruiting people who were normal weight and overweight (not obese). My goals for the study were broad: to find out if anyone could actually stay on the diet for a few months, and if they would lose weight. Much to my surprise, they did both!

There were 32 people in the original study.³ Sixteen went on the Every-Other-Day Diet. The other 16 were the *control group*—they didn't diet or change their eating habits at all. After three months, my colleagues and I compared the two groups. Not surprisingly, people in the control group didn't lose any weight. But all of the every-other-day dieters shed pounds.

The folks who were normal weight at the start of the diet lost an average of 11.9 pounds after three months. Those who were overweight lost an average of 11 pounds. (A few of them lost as much as 20 pounds.) The overweight group also saw significant drops in bad cholesterol (low-density lipoprotein or LDL) and in high blood pressure. And most of the participants said they didn't find the diet difficult at all.

I had proven to myself that every-other-day dieting was a reasonable, effective approach to weight loss. People *could* eat 500 calories every other day on Diet Days, without difficulty. People *could* eat whatever they wanted on Feast Day and still lose weight.

As you can imagine, I was very excited about this first set of results. After all, just about everybody hates daily dieting. Don't you? You hate the endless weeks and months of nonstop deprivation. You hate the constant hunger. You hate the complicated requirements and rules. That's why you've probably quit most of the diets you've started. Who wouldn't? Daily dieting is a drag. But every-other-day dieting is a new and effective way for people to lose weight—*without* deprivation, *without* hunger, *without* rigid rules.

After the success of this first study, there were many other questions about every-other-day dieting that I wanted to answer, with detailed, careful, and repeated research:

- Would the diet work on the obese, or would they binge on Feast Day?
- How hungry would obese people be on the diet? So hungry they couldn't help but overeat?
- Could people exercise on Diet Day? And would they overeat when they exercised?
- Would the diet work if you ate high-fat food? Or was low-fat food the only way to go?
- How would the diet affect risk factors for heart disease like total cholesterol, LDL cholesterol, HDL cholesterol, and high blood pressure?
- How would the diet affect hormones like leptin, which play such a key role in appetite?
- Was there a way for people who lost weight on the Every-Other-Day Diet to *maintain* the weight loss?

Nearly a decade later, after six more studies on people and more than 20 published scientific papers on every-other-day dieting, I'm proud and delighted to say that these questions have been answered. In fact, it's only *because* they were answered that I feel comfortable presenting the Every-Other-Day Diet to the tens of millions of people who *really* want to lose weight and keep it off and not just be disappointed by another every-day diet.

Let's take a closer look at a few of my studies and what I discovered. To make it easier for you to follow the trail of my research, I've listed the year each study was published, the journal it was

BODY MASS INDEX—THE WAY SCIENTISTS MEASURE OVERWEIGHT

As you read the studies in the rest of the chapter, you'll encounter several common terms: *normal weight*, *overweight*, and *obesity*. However, nutritional scientists and other health experts use these terms in a very specific way: to indicate the level of *body mass index*, or BMI, a standard measurement of body fat. The three main categories of BMI are

Normal weight: BMI of 18.5 to 24.9

Overweight: BMI 25 to 25.9

Obese: BMI 30 and above

How do these three levels of BMI translate into actual pounds? Here are two examples: A 5'4" woman is normal at 130 pounds, overweight at 145 pounds, and obese at 174 pounds. A 5'10" man is normal at 160 pounds, overweight at 174 pounds, and obese at 209 pounds.

To figure out your BMI, use the BMI calculator at the website of the Centers for Disease Control and Prevention:

http://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/english_bmi_calculator/bmi_calculator.html

Just enter your height in feet and inches, and your weight, and then hit the "Calculate" button. I'm happy to say my BMI is 21.6; my coauthor Bill's is 22.4. The Every-Other-Day Diet for weight loss, and the Every-Other-Day Success Program for weight maintenance, which you'll read about in [chapter 7](#), helps both of us stay in the normal range.

2009, *American Journal of Clinical Nutrition*

The Every-Other-Day Diet works and is super-healthy, too!

A study in the *American Journal of Clinical Nutrition* was the first to definitively show that every-other-day dieting works to help obese people lose weight.⁴

My colleagues and I studied 16 obese people, 12 women and 4 men, with an average weight of 213.4 pounds and an average BMI of 33.8. All of them went on the diet for two months. For the first month, they ate frozen and other packaged foods for their 400-to 500-calorie lunches and 100-calorie snacks on Diet Day. (We distributed the lunches and snacks on a weekly basis.) For the second month, they prepared the Diet Day lunches and snacks themselves, after meeting with a nutritionist on our staff who counseled them about the calorie level of Diet Day and the foods and portion sizes that would help them stay at that level. (You'll find all the practical details for Diet Day in [chapter 2](#).)

The results:

An average of 12 pounds of weight loss. After two months, the average weight loss was 12 pounds, a steady, healthy weight loss of 1.5 pounds per week. And the rate of weight loss was just about the same whether the participants were given frozen and packaged food or they prepared their own food. They just kept losing pounds, week after week.

Dieters lost fat, not muscle. Our EOD dieters also lost most of their weight as *fat*—11.9 pounds, on average, meaning that they shed only a few ounces of muscle. Losing fat rather than muscle is crucial in successful weight loss, because muscle burns calories. A typical dieter on other plans sheds 75% of

her weight as fat and 25% as muscle; the typical EOD dieter sheds nearly all of her weight as fat. That's probably one reason why my subsequent studies have shown that EOD dieters, unlike most other dieters, don't regain the weight they lose.

Their BMI fell. The average BMI also dropped to 29.9. Many people who were classified as *obese* at the start of the study were now classified as *overweight*. That's a significant and health-giving improvement: as BMI decreases from obese to overweight, so does a person's risk for many diseases, including heart disease (obesity doubles risk), diabetes, arthritis, and cancer.

There was very little cheating. Our records showed that, on average, the dieters managed to meet the 500-calorie requirement of Diet Day for about 9 out of 10 Diet Days throughout the two months of the study. This showed me that the Every-Other-Day Diet is a diet people *could* and *would* follow at home.

Cholesterol plummeted. We also saw big decreases in total cholesterol (21 points) and LDL cholesterol (25 points), decreases that lower the risk for heart attack and stroke.

Dieters had lower blood pressure. Systolic blood pressure (the upper number of the blood pressure reading, reflecting arterial pressure when the heart pumps blood) dropped, on average from 124 to 116. Lower blood pressure means a lower risk for heart attack or stroke.

Dieters had a slower heart rate and a stronger heart. The participants also saw a startling drop in average heart rate, from 78 beats per minute to 74—a sure sign of a stronger, healthier heart.

My scientific conclusion: The Every-Other-Day Diet is an “effective diet strategy to help obese individuals lose weight and to confer protection against coronary artery disease.” That's what I wrote (in the formal, restrained language of scientific discourse) in the *American Journal of Clinical Nutrition*.

For this book, I'll also state my conclusions about my studies a little more personally and enthusiastically: the Every-Other-Day Diet works—and it's really good for you, too!

PAUL'S STORY: “I'VE GOT TO CHANGE MY LIFE.”

Weight loss: 41 pounds

The evidence was conclusive for Paul Hussein, an international lawyer living in London and Switzerland. At 6 feet tall and 214 pounds, he was guilty of being overweight, and that extra fat—from eating a lot, and eating mostly high-fat food—was destroying Paul's health. His heartburn was so bad he had to take an antacid with every meal. He suffered from back pain. He had sleep apnea and snored. He felt tired all the time. He had type 2 diabetes and was on a medication to control his blood sugar. And he was a colon cancer survivor.

In August 2012, Paul was watching the BBC documentary *Eat, Fast and Live Longer*, which featured my research on alternate-day modified fasting (the scientific term for every-other-day dieting) along with other methods of intermittent fasting. He told us what happened next.

“I said to myself, ‘That's enough. I need to change my life—for myself, and for my wife and children. I need to go on a diet and lose weight.’”

Paul decided to go on the two-day-per-week pattern of dieting used by Michael Mosley, the program's host: a 500-calorie modified fast on any two days of the week, with unrestricted eating the other five days.

But the diet didn't work.

“I couldn't get a grip on my eating by fasting just two days a week,” Paul told us. “I overate so much on the days I wasn't fasting that I didn't lose *any* weight.”

So Paul went on the Every-Other-Day Diet. And this time, modified fasting worked. After nearly a year on the diet, Paul weighs 173 pounds—a loss of 41 pounds!

“One day of fasting followed by one day of feasting is the perfect diet for me,” he said. And weight loss isn't the only positive change that Paul has experienced. His heartburn went away. He stopped snoring. His back pain is better. His blood sugar level has normalized, and he no longer needs to take diabetes medication. And at his most recent checkup for colon cancer, the doctor gave him a clean bill of health.

"I also find that I'm thinking a lot more clearly when I'm in court," he said. "And I don't feel tired during the day like I used to."

We asked Paul what he liked to eat on Diet Day. "I eat a simple vegetable soup, or perhaps a small piece of chicken with a serving of whole grain like quinoa and I feel very good after that meal. If I feel hungry on Diet Day, I drink a glass of water, or distract myself with another activity.

"Every-other-day dieting has now become my daily life and I don't think I will ever give it up."

2010, *Nutrition Journal*

*Bingeing doesn't happen, hunger stops, and physical activity isn't a problem.*⁵

Now I knew that every-other-day dieting *worked* for obese people. But I wanted to know more details about the diet:

- How hungry did people get on Diet Day, and was hunger a problem for trying to stick with the diet?
- Were people bingeing on Feast Day?
- Were people so physically depleted on Diet Day that they engaged in less physical activity?

To learn the answers to these questions, I analyzed some of the data from my first study more closely. I discovered the following:

There was no overeating on Feast Day. I thought the obese participants in my study would eat a lot more on Feast Day to make up for the caloric restriction of Diet Day, but they didn't. On average, the dieters ate the same number of calories they always ate (and even a little less), consuming an average of 95% of their normal caloric intake on Feast Day. In other words, Diet Day was *not* followed by Overdo-It Day!

Hunger vanished. My colleagues and I asked the study participants to rate their hunger on the evening of each Diet Day, using a scale of 0 to 100; 0 was "not at all" hungry, and 100 was "extremely" hungry. After three weeks of dieting, the average ranking was 60. After four weeks, it was 50. And after seven weeks it was 35. In fact, after about two weeks on the Every-Other-Day Diet, most of the participants said they felt little or even no hunger on Diet Day. That's more good news, because it's constant, gnawing hunger that drives most people to cheat on or quit a diet.

Satisfaction with the diet increased week by week. Meanwhile, over the eight weeks of the study, satisfaction with the Every-Other-Day Diet went up and up. Using the same 0 to 100 scale, the study participants reported a satisfaction level of 35 in the first weeks of the diet, but a satisfaction level of 50 by week eight. In other words, their good feelings about being on the diet—and no doubt their pride in the results as pounds kept peeling off—increased week by week. I'm pretty sure you'll have the same experience.

Physical activity wasn't a problem, even on Diet Day. We measured the level of physical activity throughout the study by asking the participants to wear a pedometer, a device that measures the number of steps taken every day. Two thousand steps is about one mile, and most of us take between 4,000 and 7,000 steps a day.

I thought the study participants would feel less energetic on Diet Day and would take fewer steps. But that wasn't the case. The average number of steps on Diet Day and Feast Day were almost the same: 6,416 on Diet Day, and 6,569 on Feast Day. This was more good news: The Every-Other-Day

Diet doesn't slow you down!

My scientific conclusions: “These preliminary data offer promise for the implementation of alternate-day fasting as a long-term weight-loss strategy in obese populations,” I wrote in *Nutrition Journal*. I had made many additional discoveries about the Every-Other-Day Diet:

- Obese people could limit their food intake to one low-calorie meal and one snack per day and not overeat the next day.
- Hunger disappeared after two weeks or so on the diet.
- Physical activity didn't decrease on Diet Day.
- Weight loss was steady, constant, and significant.

My next and very important question: Could this diet help prevent and reverse heart disease? The answer, as you'll read in a moment, was an unqualified yes.

2010, *Obesity*

The Every-Other-Day Diet helps prevent and reverse cardiovascular disease—the #1 killer of people in the United States.

In my first study, the participants not only lost weight; they gained health.⁶ Specifically, they gained added protection against heart disease:

A 21% decrease in total cholesterol. Their total cholesterol dropped from 175 to 138 mg/dL, for an average decrease of 21%. Every 1% drop in total cholesterol lowers the risk of heart disease by 2%, which means the Every-Other-Day Diet lowered the risk of heart disease by a whopping 42%. Not a bad “side effect” of successful dieting!

A 20-point drop in LDL cholesterol. LDL is the type of cholesterol that can build up on an artery wall and clog the artery, causing a heart attack or stroke. After eight weeks, the study participants had an average drop in LDL from 102 mg/dL to 72 mg/dL. This took them right to the 70 mg/dL level that doctors try to achieve in patients at risk for heart disease by prescribing a cholesterol-lowering statin like Lipitor or Zocor. (Personally, I'd rather lose weight than take a statin, since these commonly prescribed drugs are linked to fatigue, muscle pain, memory loss, and other health problems.)

Triglycerides fell from 125 mg/dL to 88 mg/dL. Like cholesterol, triglycerides are a blood fat that can raise your risk of heart disease. The study participants went from the “normal” to the “optimal” level of triglycerides, as defined by the US government's National Cholesterol Education Program.

Systolic blood pressure fell from 124 to 116 mm Hg. Eight points might not seem like much of a decrease, but it meant the difference between some of the study participants being prehypertensive—just below the level where a person would be diagnosed with outright high blood pressure—and having a normal blood pressure level, below 120.

My scientific conclusion: “Alternate-day modified fasting may decrease the risk of coronary heart disease in obese individuals,” I wrote in *Obesity*, the world's leading scientific journal on the topic, in 2010. Given that heart disease kills 600,000 Americans every year, that's a very important finding.

THE EVERY-OTHER-DAY DIET IS SAFE

Over the years, I've often been asked about the *safety* of the Every-Other-Day Diet—after all, 500 doesn't seem like very many calories. Is it so few calories that EOD dieters could harm themselves in some way?

After studying hundreds of people on the EOD Diet, I'm happy to say that I've never seen a *single* health problem caused by the very low caloric intake of Diet Day or by the unlimited eating of Feast Day. Not a one.

In fact, I've seen just the opposite. Risk factors for heart disease normalize. Total and LDL cholesterol go down. Triglycerides decrease. Blood pressure is lower. Most importantly, of course, the pounds peel off—anywhere from 1 to 5 pounds per week, depending on how heavy the dieter was when he started the diet. And extra pounds are linked to a higher risk for dozens of different conditions and diseases, including cancer.

At the same time, unlike people on most other diets, the dieter doesn't lose calorie-burning muscle—and that retained muscle not only powers faster weight loss during the diet, but also sets the stage for postdiet weight maintenance. Many studies have linked increased lean body mass (muscle) to better health—even to longer life. So rather than posing a threat to health, the Every-Other-Day Diet improves health dramatically.

Of course, if you've got a chronic health condition like diagnosed heart disease, type 2 diabetes, or cancer, or if you're on any prescription medications, particularly drugs for controlling blood sugar, *you must check with your physician before starting the Every-Other-Day Diet or any weight-loss program.*

The EOD Diet (like most weight-loss diets) is not intended for pregnant women or women trying to get pregnant. It's also not for anyone with type 1 diabetes, where a modified fast might be harmful.

What about kids and teens? More than 30% of young people in the United States are now either overweight or obese. Could they benefit from the EOD Diet? The modified fast of the Every-Other-Day Diet isn't appropriate for the growing bodies of kids. However, I'm hoping to develop and study a version of the Every-Other-Day Diet for teens. Stay tuned, Mom and Dad!

Bottom line: The Every-Other-Day Diet is safe for just about everybody.

2012, *Metabolism*⁷

The Every-Other-Day Diet works even when you eat high-fat foods!

In my first two studies on every-other-day dieting, participants ate low-fat foods on Diet Day—because low-fat foods like fruits, vegetables, whole grains, and beans provide more filling bulk for fewer calories. But most Americans *don't* eat a low-fat diet. Just the opposite. They eat a high-fat diet with 35% to 45% of calories from fat.

Since I wanted the Every-Other-Day Diet to work for everyone, I needed to find out if it could work for people who eat a high-fat diet on Diet Day while still maintaining the 500-calorie limit. To that end, I conducted a study with 32 obese people, putting them on the Every-Other-Day Diet for eight weeks. On Diet Day, 16 people ate high-fat foods that delivered 45% of calories from fat. The other 16 ate low-fat foods, with 25% of calories from fat. We prepared the foods for both groups, and guarantee their fat content.

The results:

The folks eating high-fat foods on Diet Day lost MORE weight than those eating a low-fat diet. That's right: after eight weeks on the diet, those eating high-fat foods had lost *more* weight than those eating low-fat food—9.5 pounds, compared to 8.2 pounds.

They had trimmer tummies. Both low- and high-fat groups trimmed nearly 3 inches off the waistlines. Dietary fat didn't make anybody fatter.

They had healthier hearts. Both groups had healthy decreases in total cholesterol, LDL cholesterol, and triglycerides.

My scientific conclusion: “An alternate-day fasting/high-fat diet is equally effective as an alternate-day fasting/low-fat diet in helping obese subjects lose weight and improve coronary heart disease risk factors,” I wrote in the journal *Metabolism*.

Why did the people eating a high-fat diet lose more weight? Well, they were slightly less likely to

go off the diet on Diet Day, cheating 13% of the time, compared to 22% for the low-fat dieters. And think it's likely they stuck to the diet *because* it was high-fat and therefore more enjoyable and satisfying.

Bottom line: The Every-Other-Day Diet works even if you eat high-fat foods on Diet Day. When it comes to weight loss, it's not fat that makes the difference. Or carbohydrates. Or protein. It's *calories*. Stick to the 500-calorie limit on Diet Day and you *will* lose weight.

2013, *Obesity*⁸

The combo of EOD dieting and exercise is unbeatable for weight loss and a healthy heart.

My first studies found that people didn't become less physically active when they were on the Every-Other-Day Diet, on either Diet Day or Feast Day. A modified fast didn't modify their capacity to move around. But, I wondered, what would be the effect of combining the Every-Other-Day Diet *and exercise*—not just daily physical activity, but a regular workout? Would people lose more weight than they would by dieting alone? Would their hearts be even healthier? My next study on the Every-Other-Day Diet attempted to answer those questions, by comparing people who went on the EOD Diet to people who went on the EOD Diet *and* exercised.

You can read all about this study in [chapter 6](#), “Every-Other-Day Dieting and Exercise,” but here's the super-positive bottom line: At the end of the study, folks who went on the EOD Diet and exercised had twice as much weight loss, had more muscle, banished more belly fat, lowered LDL cholesterol, and raised HDL cholesterol. The diet-alone group had only lowered LDL cholesterol.

My scientific conclusion: The combination of the Every-Other-Day Diet *and* exercise “produced superior changes in body weight, body composition [muscle and fat], and lipid [blood fat] indicators of heart disease risk, when compared to individual treatments,” I wrote in *Obesity*.

Or, to put it less scientifically and more plainly: if you want the best results, go on the Every-Other-Day Diet *and* exercise.

2013 “ObesityWeek” (a presentation at the yearly scientific conference of the Obesity Society, which publishes the journal *Obesity*)

My NIH-sponsored research shows that the Every-Other-Day Success Program works—with the postdiet program, you don't regain the weight you just lost!

As I've pointed out several times in this chapter, the sad fact of weight loss is that it's almost never permanent. In a study published in the *International Journal of Obesity*, only 3% of people studied maintained their weight loss after five years. Other studies are a little more positive (but not much). They estimate that 80% to 90% of dieters regain all their weight.⁹

Unfortunately, most diet books ignore this fact. Or they make an enthusiastic but baseless pronouncement about how you'll maintain your weight after the diet. They might as well be telling you to believe in Santa Claus. I think any diet book that doesn't give you a science-proven, evidence-based program to *maintain* yourself at the weight you reached on the diet—and that's just about every diet book out there, including most of the other diet books on intermittent fasting—is setting you up for disappointment, not to mention the health problems that can go with regaining the weight you've

lost. *The Every-Other-Day Diet* isn't that kind of diet book. It includes the Every-Other-Day Success Program, which you'll read about at length in [chapter 7](#).

In November 2013, several months after completing the writing of this book, and six weeks before its publication, I reported the preliminary results of that study at the annual "ObesityWeek" conference, the world's most prestigious conference on obesity and weight loss.

Dieters had only 1 pound of regained weight. In the first six months of the study, people were on the Every-Other-Day Diet, and many people lost a lot of weight (up to 45 pounds). In the next six months, the folks who were on the EOD Diet went on the EOD Success Program. My preliminary results showed that they regained an average of *1 pound*. Meanwhile, the control group—people who went on a standard, every-day, calorie-restricted diet for six months and then went off the diet—regained an average of 5 pounds.

I'm also happy to say that all the heart-healthy benefits of the Every-Other-Day Diet—lower LDL cholesterol, lower triglycerides, and less belly fat—were maintained during the EOD Success Program. The participants also had lower levels of blood sugar and insulin, a sign that they were less prone to developing type 2 diabetes.

It's been a long journey from that basement at Berkeley to a three-year, multimillion-dollar study sponsored by the National Institutes of Health; from the lightbulb of having a fresh idea to the light at the end of the tunnel for millions of people who have failed to lose weight on other diets, or who have shed pounds only to see their weight return.

My comprehensive research shows that the Every-Other-Day Diet is a wholly unique and effective way to lose weight and keep it off without daily deprivation, without hunger, and without complex and hard-to-follow rules. My research also shows the diet can help prevent and reverse several risk factors for cardiovascular disease, the #1 killer of Americans. And with all this positive research under my belt, I am very comfortable making you a promise about the weight you will lose on the EOD Diet.

WEEKLY, MONTHLY, AND TOTAL WEIGHT LOSS: THE EOD PROMISE

I'm sure you have one big question at this point: Just how much weight can I lose on the Every-Other-Day Diet? Well, I am happy to report that you can lose:

12 pounds per month. In my most recent research, many EOD dieters lost up to 12 pounds in the first four weeks of dieting, or 3 pounds per week—the promise on the cover of this book.

Up to 50 pounds. In my two- and six-month studies, some EOD dieters lost up to 50 pounds.

Of course, there's no *guarantee* you'll lose weight on the EOD Diet. In my studies, the rate of weight loss depended on how heavy my participants were when they started (the heavier you are, the more you lose); their level of motivation; and even the time of year when the study was conducted (it's harder to lose over the holidays). But if you eat 500 calories on Diet Day and whatever you want on Feast Day and stick to that pattern, it's nearly a certainty that you *will* lose weight at a steady rate until you reach your weight-loss goal, whether that's losing 10, 25, 50, or 100 pounds or more.

And when you have reached your goal, it's time to implement the Every-Other-Day Success Program, the lifetime approach to keeping off the weight you just lost. You'll find the practical details of the Success Program in [chapter 7](#). So what are you waiting for? Let's get started!

EOD—EASY AS 1-2-3!

1. The Every-Other-Day Diet has years of rigorous *scientific testing* behind it.
2. The Every-Other-Day Diet is *evidence-based*.
3. The results of the Every-Other-Day Diet are *real*.

CHAPTER 2

Diet Day

500 calories is easy, when it's every other day

Like other nutritional scientists, when I write up my studies for publication in journals, I almost never use the word *calorie*. Instead, I say *energy*, because that's what a calorie is: the amount of energy required to raise the temperature of one kilogram of water by one degree Celsius. Yes, a calorie is a measurable unit of heat, of energy, of *fuel*. If you ingest more calories than your body can burn, you store them (usually as fat)—and you gain weight. If you ingest fewer calories than your body needs for function, your body burns calories—and you lose weight.

Calories are the merciless mathematics of a food, of a meal—of a slim life, or a lifetime struggle with weight. And so we *count* calories, using books and apps and food labels and menus. And we *miscalculate* calories, gobbling up a low-fat food to shed pounds while overlooking the fact that it's sometimes loaded with high-calorie sweeteners. And we *debate* calories; a handful of experts claim that calories in some macronutrients like carbs burn differently than calories in others like protein or fat, spawning endless variations of low-carb/high-protein or high-carb/low-protein diets.

I think all those diets are high fad/low results. As a scientist who has devoted her professional life to studying calorie restriction, I can tell you with 100% certainty that if you eat food that contains less energy (calories) than your body requires, you will burn stored energy (calories) and lose weight. That's a scientific fact, like the law of gravity. Call it the Law of Calorie.

The Every-Other-Day Diet helps you obey the Law of Calorie in a completely new way. The Every-Other-Day Diet doesn't ask you to know and track the exact amount of calories in every food and beverage you ingest. (Good luck with that.) The Every-Other-Day Diet doesn't ask you to deprive yourself of calories every day, leaving you feeling hungry and frustrated. The Every-Other-Day Diet has one simple-to-follow, calorie-based rule:

Eat 500 calories one day (Diet Day)—and eat whatever level of calories you want the next day (Feast Day).

This chapter presents the practical details of Diet Day: how to successfully go through the day with minimum (or no) hunger and maximum chill. Want to start burning calories and losing weight? There's no time like Diet Day.

How Low Can You Go?

When you're not on a diet—when your every-day pattern of eating is aimed at *maintaining* weight—you probably consume somewhere between 2,000 and 2,500 calories a day. (The US government's Recommended Daily Allowance [RDA] for calories is 1,600 to 2,400 calories for women, depending on age and activity; and 2,000 to 3,000 for men.)

When you go on a diet—when you want to burn more calories than you consume and shed pounds—you submit to the eating pattern nutritional scientists call *calorie restriction*, usually limiting your daily intake to 1,000 to 1,500 calories a day. Some dieters, however, decide to consume even fewer calories. Why?

Maybe they're extremely obese, with 100 or more pounds to lose. Maybe they want to lose weight very quickly. And so they go on a *very low-calorie diet* (VLCD), with a daily intake of about 800 calories.

And then there's the Every-Other-Day Diet, where, on Diet Day, you consume 500 calories. Is that doable? Is that even *safe*? Yes and yes. Surprisingly, 500 calories can provide a lot of hearty eating: one (or even two) satisfying meals a day, along with a snack. Find that statement hard to believe? Just check out the yummy recipes and meal suggestions in [chapters 4](#) and [5](#). You'll soon find that Diet Day is very doable and very delicious.

Some folks feel hungry on Diet Day for the first week or two of EOD dieting. (Later in this chapter you'll find plenty of tips to help you get through the hunger pangs of those first few weeks.) But my studies show that the hunger quickly resolves: the folks in my studies report they *don't* feel hungry on Diet Day after two weeks or so on the diet. Hunger just goes away.

Bottom line: The experiences of hundreds of EOD dieters show that one day of modified fasting isn't all that hard—particularly when it's followed by a day of all-out dietary delight.

Why 500 Calories?

As I discussed in [chapter 1](#), my first scientific studies on alternate-day fasting for weight loss—the genesis of the Every-Other-Day Diet—were on mice. These studies tested many different levels of alternate-day calorie restriction, trying to determine the perfect level for healthy weight loss. I tried 75% of normal caloric intake; 50%; even 0%—a total fast. And the winner was 25%.

At 25%, the mice had the *maximal* amount of weight loss with the *minimal* level of muscle loss. In other words, they lost fat but not muscle. And retaining muscle while dieting is a must for health and long-term weight maintenance. Also, 25% of calories also produced the best improvements in risk factors for heart disease and type 2 diabetes.

Subsequently, my studies on people have confirmed that 25% is the perfect percentage for every other-day dieting: 500 calories, if you normally eat 2,000 calories a day. At that percentage, you lose weight quickly, steadily, and healthfully. Obviously, 25% of normal caloric intake is a different number for different people. If you're a 6'3" man weighing 205 pounds, the normal level of caloric

you burn is a lot different than if you're a 5'2" woman weighing 150 pounds; the bigger the person, the more calories needed to maintain weight. In my scientific studies with groups of people, we carefully determine 25% of normal caloric intake for each study participant, using a precise formula and double-checking it with a sophisticated medical test.

Unfortunately, I can't offer you that kind of individualized determination of 25% of your normal caloric intake; it's just not possible outside of a highly controlled scientific experiment. But here's the good news: an individualized version of the EOD Diet is *not* required for it to work. Why not? Because my studies have allowed me to determine a consistent average caloric intake on Diet Day: 480 calories for women and 520 calories for men. You don't need a degree in mathematics to figure out the average of those two numbers is 500. Which means that

- 500 calories on Diet Day is the average amount of intake among the hundreds of people who have participated in my studies and successfully lost weight;
- 500 calories is the *science-proven* level of calories for efficient weight loss; and
- 500 calories is the level that *works*, no matter what you weigh when you start the Every-Other-Day Diet. And you should weigh yourself when you start the diet and every day thereafter.

EIGHT TIPS TO MAKE DIET DAY WORK FOR YOU

Tip 1: Weigh Yourself Every Day

How often should you check your weight when you're on the Every-Other-Day Diet? In my studies we encouraged the participants to weigh themselves *every day*, and to average the weight of the most recent Diet Day and Feast Day. For example, if you weigh yourself the morning of Diet Day and you weigh 148 pounds and you weigh yourself the morning of Feast Day and you weigh 150 pounds, your current weight is 149 pounds.

Why do I think you should weigh yourself every day? Maybe you've heard that you *shouldn't* go on the scale every morning, because it can be discouraging to discover you haven't lost much weight or that it keeps your focus on short-term success rather than on permanent weight loss. But that's not what scientific studies show. They are *pro-scale*. Here are some very revealing results:

After one month of weighing, participants had 3 extra pounds of weight loss.¹ When researchers at the Minneapolis Heart Institute studied 100 obese people over six months, they found that people who weighed themselves every day lost *1 pound more* for every 11 days they self-weighed. In other words, if you weigh yourself every day for a month, you lose about 3 pounds more than folks who don't. In fact, the folks who self-weighed were *10 times more likely* to lose at least 5% of their body weight during the six months of the study. "Self-weighing may be a strategy to enhance... weight-loss programs," wrote the researchers in the *American Journal of Preventive Medicine*. I agree!

When those same researchers reviewed 12 studies on self-weighing and weight loss, they found that 11 of the studies showed that self-weighing was linked to more weight loss and better weight maintenance, and also to not becoming overweight in the first place.

Daily weighing doubles weight loss. In a two-year study of more than 1,200 obese people conducted by scientists at the Marshfield Clinic Research Foundation in Wisconsin and reported in the *International Journal of Behavioral Medicine*, those who weighed themselves daily lost more than twice as much weight as those who weighed themselves monthly.²

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