

How to Customize Paleo for Particular Needs: Case Studies — Part 1

Hey, everybody, in this section we're going to go over a few studies on customizing diet and nutrition for particular needs.

The first case is M.L., a 44-year-old female who was 5'9" and 163 pounds when she first came to see me. She suffered from her current migraines and also lack of energy throughout the day as well as trouble sleeping through the night. She'd been on a very-low-carb diet for a year and a half when we first met. You'll find that this is common in your patient population, especially those who have been following a Paleo-type diet. In M.L.'s case, it wasn't really intentional, it was just that when she cut out the Standard American Diet type of carbohydrates like bread and grain-based desserts and pasta and all that sort of thing, she didn't replace them with Paleo-friendly carbs, so she quite unintentionally ended up on a very-low-carb diet. As soon as I saw her and looked at her list of symptoms and saw her diet, I suspected that that diet, while it can be beneficial in certain conditions, was actually harmful for her.

So I had her slowly increase her carbohydrate intake over the course of several weeks until she was eating about 30 percent of calories from carbohydrate. Her sleep improved dramatically, five months later she was having no problems at all sleeping through the night, and of course that improved her energy throughout the day. I also evaluated her for HPA axis dysfunction, which she did have, and we addressed that, and that led to further improvements in energy.

Before we go on to the next case, I just want to emphasize how significant this single change can be, adding more carbohydrates back into a patient's diet. I've had patients with a whole array of strange and somewhat mysterious conditions who'd seen doctors all over the country come to me, and we were able to address their problems just by adding more carbohydrates back into their diet, to the point where it's kind of embarrassingly simple, and I've definitely laughed about that with several patients in that situation. A very-low-carb diet can have its therapeutic use in people with neurological conditions, and in some cases people who need to lose weight rapidly who have significant blood sugar issues, but for the average person, it's really not a good choice in most cases, so please do keep that in mind.

All right, let's look at a case study that involves the importance of meal frequency and timing. So, S.M. is a 55-year-old female who's 5'11" tall and weighs 168 pounds. She had no medical history other than an appendectomy at 19 years old; however, she felt really fatigued on a daily basis. We tested her cortisol, and her free cortisol was low. Her goal was to get more energy and feel as though she was prepared to head into older age. As I said, she didn't have any really significant health problems; she just wanted to feel more energetic.

Dietary Recommendations



Increase overall
caloric intake



Spread calorie
intake over the
course of the day



Smaller more
frequent meals

So after looking at her diet, it seemed like she had a tendency to undereat, and this was particularly a result of not eating breakfast or skipping breakfast or just not eating very much at all early on in the day, and then recognizing that she hadn't eaten much at night and trying to make up for it, but unfortunately still falling short in terms of her calorie intake. My recommendation was to increase her overall calorie intake, starting at 1,600 calories and working her way up from there, and then two, spreading her calorie intake over the course of the day instead of just accidentally eating most of her calories at night. We also focused on eating smaller, more frequent meals instead of just two or three big meals a day, as she didn't like eating big meals, and that was one of the reasons she would often skip eating.

Given her HPA axis issues, I also recommended some adaptogenic herbs, as well as some other supplements to support the HPA axis like vitamin C, B complex and magnesium. I also gave her some pro- and prebiotics to help improve her digestive function and her appetite.

Okay, so lifestyle recommendations for her included some more yoga and meditation. She already had a kind of loose yoga and meditation practice, but the idea here was to reset the HPA axis and help manage stress and improve cortisol secretion.

So S.M. felt an improvement in her energy within a few days of implementing this protocol, and she felt significantly better after a few months. So the immediate change was likely due to the impact of balancing her blood sugar and then providing enough calories for her activity, and then the longer-term changes were more a result of addressing her HPA axis function.

In the general population, overeating is certainly more of a problem than undereating, but you'll find that in some patients, particularly those who have some awareness of health and who are eating a Paleo type of diet, undereating can be as big of a problem, or at least in my practice it's fairly common, and that can lead to a whole range of symptoms such as fatigue and insomnia and depression, anxiety, and paradoxically, in some cases it can lead to stalled weight-loss efforts

because the body does everything it can to hold onto every calorie because the undereating activates these kinds of starvation mechanisms. So if you're not doing this yourself, you should have a nutritionist on staff that advises the patient on how to count how many calories they're eating and make sure they're in the range that they need to be in. I don't recommend people counting calories every day of their life, but to do it at least a few times and to make sure that they're in the range that they need to be in to support their activity levels is a really important undertaking. If you're not going to do that yourself, it's a good idea to team up with a nutritionist that can help your patients with that.