

477: The Reason You Aren't Healthier with Brittney Zeedik



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With Your Host

Jody Moore

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If you have been trying to make some kind of a change in your health that you know will come if you can eat better and move your body more and drink more water and get better sleep, you know it comes from the basics, but why can you not get yourself to do the basics? Well, it's not because there's something wrong with you.

It's not because you are weak or undisciplined or lacking in willpower. I promise you that's not the reason. It's also not because you haven't found the perfect diet or the perfect meal plan or the perfect approach. There is no such thing. And yet there are actually lots of things that could work out there, right? It's not because you're missing some kind of critical information that you need to have. It's not any of those reasons. What is it then? Well, today, my guest Brittney Zeedik is going to clue us in on what might be the root cause of your problem.

I'm so excited to introduce you to Brittney who has been my coach for the last, I don't know, eight months to a year now. She's been my friend even longer than that. She is a fellow coach and was a client of mine even before that. She is a wife, mother of three, former hairdresser, and in her words, she is completely obsessed with how our bodies and minds work. She uses insulin-regulating supplements, lifestyle strategies, and coaching to help people feel amazing and empowered. And she's just an amazing resource, and I can't wait to share her with you today.

This is *Better Than Happy*. I'm your coach, Jody Moore. And on this podcast, my objective, just so we're clear, is to change what you've been taught and have likely believed about yourself up until now. Here's what I believe about you. I believe that what you think is real is mostly imagined. And what you imagine is actually creating what's real. I believe that in the ways you desire to achieve, you 100% have the capacity to succeed.

And finally, I believe that joy, love, and miracles are your God given natural state of being. And any time you feel far from them, the way back is much simpler than you think, but that's about to change. Are you ready? Let's do this.

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Jody: Brittney, I'm so grateful to you for taking the time to come here. What I wanted to do today is just talk to like my past self, which is kind of what I'm always doing as a coach who has learned so much over the years, but especially in the last six to eight months, since I started following you more closely about all things, metabolic health, about fiber, about insulin, and you've just really helped me so much. I was like, we've got to get Brittney on the podcast and share her brilliance with everybody. So will you take a moment and just introduce yourself and tell us what you do and why you do it.

Brittney: Yes, thank you. It is my pleasure to be here. And I'm glad that the message resonated with you. I think that the reason that this is kind of a sticky message is because so many of us are struggling with the same things. And it hit me hard kind of on a personal level because I went through a rough patch when my father was diagnosed with colon cancer at age 58. And we had all the best doctors and all the best medical intervention, and we were just totally shocked by this and thought for sure he was going to beat it. And unfortunately it was too late and all throughout his body.

And it kind of felt like, no, why? How could this happen? As we really were in the thick of his treatment phase, we were, of course, looking at everything, everything we could do to save him. We really learned a lot about how many signals his body had been giving him that things weren't quite right and that there was a problem.

And we just didn't realize that he had psoriasis. He also had high blood pressure. He had weight fluctuating constantly. He was probably pre-diabetic. I'm not sure if he was actually diagnosed, but I would guess that he was. He had skin issues in general, bowel issues. We had no idea that all of these things were connected. And once I started learning that and recognizing some of the things that had he known could have been really helpful, I felt really motivated to share as much as I could and maybe try to help somebody else from going down that same route and maybe

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intervening and empowering people, really, to realize that there are things you can do, but if you're struggling, you're not alone. So that's kind of how I got started on this.

Jody: Do you think those things were connected to him developing colon cancer?

Brittney: Yes, I absolutely do. And I also think that the same things that would have helped resolve those separate issues would have also, I mean, I can't say 100%, but very possibly prevented that even being an option, that he felt that.

And I hate to say this, but, you know, of course, looking back and reflecting a lot of the side effects of the medications he was on for, like, for example, his psoriasis, they were immune suppressing. And cancer was actually one of the main side effects of several of the medications he was on. Of course, we weren't looking into all of that. When a doctor gives you a medication, you just, you want to get better.

And so anyway, all those connections were drawn a little too late, but it's so great to know it now because we still have a lot of things we can do and so many people to help. And so I just feel like I'm on a crusade to help people.

Jody: That's awesome. Yeah, I hadn't really thought about it that way before because it's tough to say exactly what causes cancer, of course. It can be so many different factors, I think, but interesting theory that you have there of like that maybe even sometimes the treatment of these other problems that are easier to treat. It's really tough to treat cancer and some of these more extreme things that we're seeing commonly, but sometimes the treatment of these symptoms, I will call them, can actually be doing additional harm to our bodies.

Brittney: Right, and truly there's just so many lifestyle changes that we can make now to hopefully prevent, but sometimes reverse serious conditions. And it's not just with food. One of the main things I learned in the research with my dad was there was a doctor named Walter Longo who was very big

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on intermittent fasting and the things that could happen from that. And I really had no awareness around that whatsoever. And learning all the different things that that can do for you was incredibly eye-opening. And so now let's piece it all together.

Jody: Yeah, sorry to cut you off. Let's go there for a minute because there's a handful of topics that when I first started following you, which was maybe only eight months ago that I started like really seriously paying attention to the things that you were posting online. And if you guys want to follow Brittney online, I highly recommend it. She's MindBodyBrit on Instagram and TikTok. Are those the best places to find you?

Brittney: Yes.

Jody: Yeah, okay. So anyway, your videos were very informative and very engaging and quick little reels, you know, that I could quickly take something away from. And so I really loved it. And the things that you were teaching me weren't like brand new things I'd never heard of before, but you have this really great way of simplifying what can be complex topics sometimes and making it really applicable in our everyday life.

I remember years ago when I first started kind of experimenting with intermittent fasting, which I want to talk to you about in just a minute, but it was such a big leap from where I was. I tried to cut out flour and sugar and intermittent fast and do a whole bunch of things that I still think are probably really good for us. But I remember realizing, wait, I went from eating like Jody Moore has been eating her whole life to trying to eat like Gwyneth Paltrow. And I think maybe that's too big of a leap.

Brittney: Yeah.

Jody: I wish I was Gwyneth Paltrow, but I think I'm going to have to dial it back a little. And so I love how just they felt like doable tips and useful information. So let's just start with intermittent fasting. Tell us a little bit about what the research says. What is intermittent fasting? Why is it so

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good for us? And then we'll talk to anybody who was like me that was like, yeah, I'm never going to be able to do that.

Brittney: Well, let me just start off by saying that intermittent fasting goes against everything I was raised with. It's really the opposite of-

Jody: Breakfast is the most important meal of the day, we were taught, right?

Brittney: Exactly, exactly. And not only was breakfast the most important meal of the day, but we really - I mean, many of us grew up in this era of you got to keep your metabolism going, small meals, eating multiple times throughout the day was the way to not have your body think, uh-oh, I'm in starvation mode. I should store everything. Like, that was what I was taught. I actually had a dietician tell me that.

Jody: Me too.

Brittney: Right, right, and my household was a little bit of a food free-for-all. We just, there was no set meal time all the time. I mean, we would do like a big Sunday dinner, but, and I'm sure we did dinners, But if you ate an hour before a meal, nobody really cared. And if you ate before bed, nobody cared. And if you just wandered through the pantry 10 times a day, it was just fine, you know? I mean, my pantry looked like a cereal aisle and we had every good snack in the book. Our house was very, you know, social. And so if you, on your way to school, grabbed a pack of Gushers and some chips, you're good.

And so this whole concept of really eating less and having - it's kind of seen like our grandparents, right? It was like, you had three square meals and you didn't snack before supper or you'd spoil your appetite. And that just isn't what I did. And so it felt radical to me to not eat breakfast. It felt even more radical to not snack. Now I can see why I had brain fog and I felt hungry all the time and tired and felt like I needed that or I would actually feel light-headed and actually nauseous sometimes. I thought I had

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hypoglycemia. A lot of people experience They're like, "Oh no, I've tried it, and I feel terrible."

Jody: Yeah, that was me too.

Brittney: Yeah, and I thought that was because my blood sugar was getting too low because I wasn't eating. But what I now understand is that I was experiencing the crash from a blood sugar spike. What goes up must come down. So if you spike your blood sugar, then it crashes, and then that's how you feel. And so the goal is to not do that. And really, I mean, on a science-y level, every time you eat anything, whether it's a protein bar or a handful of Cheez-Its, they all elevate your blood sugar levels.

And whenever your blood sugar levels are elevated, then your body produces a hormone called insulin. And when insulin comes into the picture, it puts all that energy from the food that you just ate, it puts it away. It puts it into the cells that need it, your muscle cells, your brain cells, your liver cells, whatever. Keep your body functioning. And insulin doesn't come down as fast as your blood sugars come down. So your blood sugars come down and then your insulin starts coming down, but if you snack again, then it bumps right back up.

Over time, you can keep your insulin, the hormone insulin, elevated almost all day long. Often people keep it elevated all day long because the higher the carb load of the food that you're eating, the bigger the glucose spike, the bigger the insulin spike. And so if you have a lot of insulin in your blood, then it takes longer to come down. And if you're eating frequently. So we're kind of keeping insulin elevated two different ways, eating frequently and high carb foods, which we can talk about that in a minute, why our foods are so high carb.

But that keeps your insulin elevated. And then your cells, because insulin is always in the bloodstream and it's always sending messages to your cells. Hey, I have energy for you. Hey, I have energy for you. Hey, I have energy for you. Open up, I want to give you some energy. Your cells get burnt out

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on those constant signals and they kind of stop responding. It's like they tune it out. They tune out that insulin. And then insulin is there trying to get energy into the cells, but the cells have stopped listening. They're insulin-resistant.

And so the cell literally doesn't have energy. And so then you get another hunger craving or you need more energy because your cells are lacking, but it's not because there isn't enough energy available it's that the energy can't get into your cells because you're insulin-resistant. And so this is really where fasting becomes an amazing tool because if you just limit the frequency of eating, then you won't be sending those insulin signals to your pancreas.

Jody: Non-stop.

Brittney: Yeah, non-stop. And so now your insulin - think about like when you're sleeping at night, you're not eating, right? So your levels finally have time to come down. So technically while you're sleeping, you're fasting, right? You go about for eight hours or however long you sleep. And so you've already been fasting. And if you wake up and you just extend that a little bit, then you can allow your insulin to come down pretty low. And when it comes down low, it makes you more sensitive to it.

It's kind of like if there's background noise all the time, you know, you don't really notice it, but you turn it off and all of a sudden any little noise, you know, it can be jarring. I always think about like when I had little babies and if I kept a noisemaker on, we were good. We could just wander around the house. But if it was quiet, then the slightest door closing would wake somebody up. And so there's something to be said for that. Like we want to be sensitive to the signal of insulin. We have to have it not be constantly hitting us up. That makes sense.

Jody: Yeah. And I'll just say for me on a practical level, because I've worked off and on over the last four or five years with health coaches who've been amazing in helping me change my eating. And I was talking to one, this

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was probably six months ago, my health coach. And she said, "Do you need a break from really monitoring your food so closely and being in a calorie deficit? Like, is that kind of mentally exhausting for you?" And I was like, "No, it's not mentally exhausting. What I need a break from is that feeling of not being full."

And she was like, "What do you mean you don't feel full?" And this was before I started working with you and making the changes we're going to talk about today, but I was like, "I can handle being hungry for a while when I know lunch is coming up, but then after I eat lunch and I'm still not full, I need a break from that." And she's like, "We should be relatively satiated, not like stuffed." But because I was cutting out like the concentrated sugars and things, I was experiencing that insulin resistance.

Like I'd had plenty of calories and I had had plenty of nutrients, but the sugars weren't getting into my cells. And so I just like, without topping it off with something really concentrated and full of sugar or whatever, I was so insulin-resistant that I just never felt full.

So anybody that can relate to that, I know it can show up in a lot of different ways for different people, but for me, making some of the changes that we're going to talk to people about today, I was like, oh my goodness, I can feel full and still, when I want to, be in a calorie deficit and lose some weight. Not full all the time, not stuffed, but like full after I eat a healthy meal. And that has been mind-blowing to me. So anyway.

Brittney: Yeah, those constant cravings and that feeling like it's impossible to feel truly satisfied is such a strong indicator that you're insulin-resistant. And it's good to pay attention to that. Sometimes we talk about those things among friends and people are like, "Oh yeah, me too." And so then we just kind of were like, okay, I guess it's normal.

But then there are other times when you're sitting at a meal with somebody and they only finished half their sandwich and you're looking across the table like, I'm done with mine. Is she really not going to eat that? I could eat

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another half, you know? What's wrong with me? And then there's some shame involved in like, why am I never satisfied? Like get it together and you feel like you just need to, I don't know, buckle down and have more willpower. And that is so exhausting. So I'm glad you brought that up.

Jody: So intermittent fasting, I just want to kind of recap for people. It's just going a little bit longer without food, right? And I love what you taught me, Brittney, which was that, yes, ideally you would cut out a meal probably. I don't eat breakfast anymore. I don't eat my first meal till anywhere between noon and two. Some people prefer to not eat dinner or whatever, but it just extends, you just are sort of adding on some hours to when you already are intermittent fasting because you're sleeping, right? Ideally not eating between meals, but I will say that I'm less strict with myself.

I, again, often won't eat until two and then I'll eat dinner at like six. And sometimes I will have a snack in between that. That's my eating window, but I just have a pretty long fasting window. But for some people in the beginning, that might feel too extreme. And I will say, I was one of those people who was like, I love breakfast, I wake up starving hungry, I will never be able to not eat breakfast.

But Brittney and I both use a supplement, a Unimate supplement, which we'll tell people at the end where they can get if they want, that makes it doable. So you can find really healthy ways to support yourself. But I would say for anybody considering intermittent fasting, even if you just decide, okay, I'm going to stop eating after dinner, not have a snack before bed, and now I'm extending it by a couple of hours, or I'm going to bump my breakfast from 7 a.m. to 9 a.m. And just try bumping it out an hour or two can be really helpful, right?

Brittney: Yeah, and I think my go-to tips when somebody's brand new to intermittent fasting are number one, when you eat your meal, try to eat your food in order, where you're eating whatever's fibrous on your plate. And when I think of fiber, before I thought of like cereal and I thought of, you know, Wheaties and things like that. But I actually think veggies, you know?

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Jody: Because it says fiber on these boxes sometimes. High in fiber.

Brittney: Yes, it's a little confusing. I'm actually talking about veggies. So if you're looking at your plate and you have broccoli, chicken, and rice, you would eat the broccoli first, or at least a couple bites of it, and then you'd eat your chicken, and then you'd save your carbs till the end of your meal. And the reason for that, I mean, it really goes against every restaurant in America where you get the bread first or you get the chips first. So I'm asking you to kind of go against the grain here, right?

But if you rearrange the order that you eat, it will make you feel full longer and it will make the not snacking or the waiting longer till your next meal so much more doable. And then the other part is that if you are aware of like, rather than trying to cut out certain food groups, that has always been really challenging for me. But if instead I just think about what I can add to help me.

So like you said, we can talk about some of these things we've added, these plant-based products, but also adding more protein into your diet, adding more healthy fats like avocado and olives and coconut and raw nuts and things like that. Those things will really help you. They're filling, first of all. There's only so much steak you can eat, right? And so if you fill up on those types of foods, then you don't have as much room for the carbs and you won't have as big of a blood sugar spike, which means you won't have a crash, which means it will be easier for you to go longer.

Jody: Good point. So you mentioned fiber. Let's shift and talk about that a little bit now. Again, I've heard before that fiber is good for us. The health coaches I've worked with in the past, who I really like, I've done like macro counting. So with your macronutrients, you have protein, carbs, and fats, and you're just kind of trying to monitor, especially making sure you're getting enough protein has always been my focus. And then carbs and fats, we kind of balance out, however.

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So my coaches in the past, fiber is what we call a micronutrient, right? It's not a macronutrient. So it's not like the first thing that we pay attention to when we're trying to lose weight or even gain muscle necessarily, but they would always kind of look at it and be like, "I wish you were getting more fiber." And I would go, "Yeah, I'll try." But it was, you know, I don't love veggies and, and I'm not even a big fruit person. Like berries have a lot of fiber, apples have fiber, things like this. So I was constantly like trying to get fiber, but it was challenging to do.

And once I was diagnosed pre-diabetic back in January and then started really executing the strategies you teach and making fiber a real priority, both in my food and with a supplement, again, that we can tell people they can try out. My mind was blown at the difference it made in, first of all, like you said, how full I felt, how satiated I felt and how my body responded, my digestion, my overall metabolic health. I was like, no, fiber is not just like, we probably should get some more fiber, at least for me. I'm like, fiber matters as much as how much protein I am getting.

Brittney: Yeah, okay, well, this is a soapbox that I could really stand on. I feel real passionate about this because there is a recent statistic, 93% of Americans, and this isn't happening in other countries too, but just looking at just America, 93% of Americans are metabolically unhealthy.

Jody: Okay, what does that mean?

Brittney: That means that, well, first of all, Well, that means only 7% of us are metabolically healthy. If you're in a room of 10 people, nine of the people are struggling with their metabolic health. That means that within these five categories, either diabetes, we're going to call it, but you might not be diabetic yet. You might just be insulin-resistant. You might be pre-diabetic and not even know it. And that we can expand on.

That also includes things like polycystic ovarian syndrome that's really common in women and several other things. So diabetes, cholesterol imbalance, hypertension or high blood pressure, weight management, and

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heart disease. So if you struggle in any of those five categories, I think it's two or more of those categories than you are technically in the 93%, which is most of us.

So I always like to kind of think about it in the analogy of a classroom, that if you have one or two kids in the class that are failing, then might be something going on with the kids. But if the whole class pretty much is failing, then you kind of have to take a look at what's going on with the system and the class, right?

Jody: The teacher.

Brittney: With the teacher. And so in this case, I mean, we also can look at the most recent study was 93% of Americans are not getting enough fiber. And I just can't help but think that there's a correlation between those two numbers. Because it just so happens that dietary fiber is helpful for heart health. It helps with weight management. It helps with blood sugar balance. It is fantastic for your gut health. It helps with hormone control.

So there's all of these things, basically every single category that is in that metabolic health problem area, fiber is a solution for. And it was quite a while back in the, let's say like 1950s-ish is when it started ramping up, that food makers started getting smart about how to make food at the grocery store more palatable and more addictive.

And then in the 90s, it really got serious where we had teams of scientists that were like, okay, how do we make it so when you first bite into it, it gives you a surge of pleasure, but then it leaves you on not the best note so that you want another bite. And I mean, this is how smart they were, right?

And they figured out that fiber is not super palatable. It doesn't taste as good when the fruit isn't bigger and sweeter. It tastes better bigger and sweeter with less fiber. And carrots, and that's for fruits and vegetables, that also happens to be true for grains. And so if we can take the fiber out of the grain or out of the produce, if we can minimize that fiber, then the food will be more palatable. People will want more. And great news, fiber is

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so filling that if we take it out, the food's not as filling, which means people will buy more. They'll be able to-

Jody: Yeah, sorry to interrupt you. It's kind of the difference between brown rice and white rice, right? Like brown rice, just not as tasty, not as satiating, not as pleasurable because it's still got some of the fiber in there versus the white rice where it's all been removed. It's just softer. It's a little bit sweeter.

And for me, even I think about like when that choice comes up in a restaurant, would you like brown or white? And I always know the brown's better for me. I should get that, but I kind of want the white. I feel like the white rice makes me feel full immediately faster. It takes longer for me to feel the sensation of the brown rice, but the brown will keep me full longer. Right? Anyway, okay, sorry, continue.

Brittney: And that's such a good observation to realize that like your brain is like, ooh, I know the hit of pleasure from that one. That really comes from our ancestry. Out in the wild, when we were picking the berries, the sweet ones were good for us and the bitter ones were poisonous. And so this all really goes back to - and this is why the scientists are so brilliant, right? Is they go, oh, we know, we know what is innate. And so they really have gone after that. And so I actually just grabbed a packet of Uncle Ben's brown rice the other day and looked on the back and it had less than one gram of fiber.

Jody: Yeah, I was going to say, even the brown rice nowadays.

Brittney: Yes, and the wholewheat bread and all of the things. I mean, even the cereals, everything you can think of that is made from a whole grain. Corn pops made of corn, right? Like grains, things that should be packed with fiber is just not.

Jody: It's just being altered is what you're saying.

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Brittney: Processed. Everybody always talks about processed food. This is processed food. It's taking out the satiating components, the things that make you feel full longer so that you consume more of them. I mean, one of the most simple examples is like juice, right? Because if you juice a fruit, you have the carby, sugary part on one side and you have the fiber-

Jody: That you throw away.

Brittney: Yeah, the throwaway on the other side. And if you think about like, okay, it took three apples to make that glass of apple juice. Well, you can drink that apple juice alongside a meal. But if you ate three apples, you wouldn't be, you probably couldn't finish the three apples.

Jody: Right. And explain, I know this is hard because you do such a good job online with your visuals, but what does the fiber do that makes such a difference?

Brittney: So, okay, if you think about the fibers, I mean, chia seeds are kind of a good example because you can really see that, but you think about when a chia seed hits water, it kind of plumps up and it gets almost gelatinous a little bit. Same thing kind of happens with oats, like whole grain oats, when you mix them with water and cook them, they get kind of thick and gelatinous.

So it technically is in the carbohydrate category, But in nature, carbohydrates always come packaged with fiber. There's never an example of a carb that doesn't also have fiber. Even sugar, we think about the white, granular stuff. But in nature, it came in like a stick, like a fibrous cane that if you sat and gnawed on for a while, you'd get a couple ounces of sweetness out of it, right? Who wants to do that? So we've processed it and separated it for you.

And so the fiber, if you just take the actual fiber, like, I think people don't realize how literal this is. Like, think about a stalk of celery. You can see the fibers.

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Jody: You try to bite it and you get those strings.

Brittney: Yes.

Jody: Those are fibers.

Brittney: That is true for, you know, grains, foods. If you think about whole wheat, what it looks like in the wild, and then you think about the fluffy white flour that we make cookies with, there's bran in between there. And the bran is the fiber. And so when you're consuming fiber, it mixes with your stomach juices and it kind of forms this viscous-y jelly mesh. It gets gelatinous a little bit, like a chia seed.

And what happens with that is it goes in and it hits your intestines and your stomach, and it actually happens to be the food that your gut microbes eat. Your body doesn't even have the enzymes to break it down. So we sometimes think of fiber as roughage, right? It's just for digestion. But no, it's actually food for the the bacteria in your gut that we have trillions of.

And if you are anything like me, then you probably have spent most of your life eating the same five fruits and vegetables. And so you really only have been feeding a very specific group of gut microbes. And if you've been eating food from the grocery store, anything that's in a bag or a box with a barcode, then likely it has little to no fiber. So it's not feeding anything in your gut.

And so then you end up with skin issues and psoriasis and eczema and acne, and you end up with inflammation and bloating and gas and leaky gut and autoimmune issues and mental health issues, really, because the gut microbes that are in there, they actually communicate with your brain.

We know this really well when it goes the other way around, when we're stressed about something and we feel it in our stomach, right? It's a two-way communication, though. The same way that our stress levels can cause us to have gut issues, the same thing is true where our gut health also communicates with our brain on its food preferences.

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And if it's an army of bad guys in there, then it's asking you for all the carbs and sugars. And so you can actually change that and start getting an army of good guys in your gut asking you for the right types of foods. But with the food system, the way it is, all of us are deficient. We don't have that communication going well for us. And so we just have a ton of problems, headaches, mental health issues, gut health issues, and on.

Jody: I hope that what people hear when you listen to Brittney talk about this is, I feel like there's so much, like you said, stigma and shame, and what's wrong with me? Why can't I eat better? Why can't I take better care of my health or lose the weight or whatever it is. And it's really tough to do in the environment we have been raised in and are still living in given our current food supply.

I did read a book from, I don't know, some doctor about how to address basically insulin-resistance and things. And after like a lot of chapters, finally he got to the solution and he was like, never eat anything that comes in a can, a box, a bottle, Like, the only foods you are allowed to eat, he preferred that you grow your own veggies and fruit and you make your own bread from, like, I was like, there is no way I can - I'm going to try to eat more whole foods, less processed foods, yes, but there's no way I could never ever eat anything that comes - I was like, are you kidding me? This is your solution?

Again, I think that it's important that we are clear that would be ideal for all of us. And anybody that's up for that or whatever changes you can make in that direction, great. But in the meanwhile, I use some help. I have a fiber packet that I mix into water and drink before my meals. And I just supplement with help that will, again, everyone will tell you how to go get that if you want it. But I just really want people to know that they don't need to feel ashamed or guilty because it's just, it's not our fault.

Brittney: Yeah, I mean, when you're told most of your life, eat less, move more, that's the solution, when the reality is that the communication between your gut and your brain is muddled because you haven't - the food

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systems that are in place and the foods that are at the grocery store are blocking the signals that are necessary. I mean, this is very real. The hormone response is not as it should be because the foods are modified and aren't as they should be. And so it's not a you problem, it's a system problem.

And so knowing that's actually great news because you can go, okay, what can I do then? And for me, I'm like you, Jody. I love the idea of growing everything I eat, but it's not happening anytime soon for me. So I read this one fantastic book that I highly recommend called *Fiber Fueled* by Dr. Will Boltzowich. And he is gut health expert. He knows everything there is to know, top to bottom. And his answer to every gut health issue is fiber, okay?

And a lot of people go, oh, fiber hurts my stomach. Well, you might have to start really small and slowly build up because it will help rebuild your gut, but a lot of our guts are very damaged. And so it's going to be a process, but ultimately he recommends 30 forms of fiber a week.

Jody: That's a lot.

Brittney: That's a lot harder, right? And so I'm very grateful too, that I have a fiber supplement that has over seven. The ones at the grocery store have like one form of fiber. This has over seven. So you are adding to your diversity and they're all foods that I don't normally eat, that the fibers come from.

So it's giving me some diversity that I wouldn't otherwise get. And if I'm going to eat whatever food I'm going to eat, at least I'm bringing it back to nature where I'm adding the fiber back in with whatever the carbohydrate I'm about to eat is. It's helping balance it the way that it was intended.

Jody: So if you guys want to see what Brittney and I use, you can go to jodymoore.com/fiber. We'll have everything linked there for you. I want to give people lots of options and tools and resources. So you mentioned that

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one book, *Fiber Fueled*, would you recommend that book for people that want to learn more about this?

Brittney: Yeah, it's so great. It's really good.

Jody: What other books do you like? Or what have you studied if people want to learn more?

Brittney: Yeah, okay. So a few of my like favorite resources, because some people have a diagnosis. They know that they have a metabolic issue. They know they have diabetes or high cholesterol or gut health issues or high blood pressure. They know they're overweight, right? Like there are some categories that are obvious. But for a lot of us, we haven't gotten a diagnosis, but we have skin tags. We have skin pigmentation issues. We have brain fog. We have constant cravings. We feel tired all the time or tired after we eat.

Jody: For me, the way I kind of check myself and how I'm doing metabolically is hunger and digestion, like bowel issues. So sorry for the TMI people, but I coach some people sometimes who are working on changing their eating habits And they're like, well, I'm never hungry. I don't get hungry. And I'm like, that's actually not a good thing. You should be getting, you shouldn't have extreme low blood sugar, but you should have a reasonable amount of hunger from time to time when it's time to eat.

So either too extreme of hunger or not hungry enough, but also then like you should be regularly having bowel movements like every day, multiple times a day, ideally. So whenever one of those two things is off for me, I kind of pay attention like, first of all, am I drinking enough water? Am I getting enough fiber? Hormones can affect that a little bit as well, but those are two really easy ways to assess your own metabolic health. Okay, sorry, go ahead.

Brittney: No, perfect. So I think it's just important that we kind of state like some of the signals that, hey, you might be in this category, even if you

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don't have a diagnosis, here's some of the signs. Then you can go to these resources.

So with intermittent fasting specifically, I have just loved the *Fast Like a Girl* and the *Menopausal Reset* by Dr. Mindy Pelz. She talks a lot about fasting with your hormones and women can't fast like men. They can't fast the exact same way every day. We have to change it up a little bit and we have fasting calendars that we can give you guys and lots of great stuff that summarize these books. But if you want to go read the whole thing, it's a fantastic read.

I also love Dr. Jason Fung. He has *The Obesity Code*, *The Diabetes Code*, *The Cancer Code* now is his recent one. Those are kind of the intermittent fasting resources that are great. *Why We Get Sick* by Dr. Ben Bickman addresses insulin-resistance. And he talks a lot about how insulin is causing so many problems for us.

And then it's called *The Glucose Revolution* by Jessie Inshels. She is the one who has really, I mean, her book is a bestseller and it's very practical, but she shows you lots of insulin-sensitizing strategies, not just in food order of eating, which is kind of her go-to best thing, is what she's known for, is eating food in order, but also exercise you can do after eating to reduce your blood sugar or weight training. She gives you so many great practical lifestyle strategies. So those are kind of my main go-to's that I recommend.

Jody: Okay, love them. And if you go to jodymoore.com/fiber, if you want to learn about the supplements and things that we take, we'll also link the fasting calendar there that Brittney's talking about. And we can even list some of these books. They'll be in the show notes, but so many great resources out there to help us.

Last thing I kind of want to talk about, I know we're running out of time, but I know you're a certified coach like myself. We both love the world of thought work and we're both believers in managing your mind. And sometimes

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we're just overeating in order to avoid emotions and all of that. The way I kind of think about it is there's, when it comes to changing your own eating habits, there's biology and psychology that have to be addressed, right?

I was just talking to a friend of mine who's been just getting a lot more fiber and executing some of these strategies. And she was saying like, "Yeah, it is fascinating how actually I'm less hungry. I have less cravings. I actually don't have to eat breakfast anymore. I go between meals without snacking." But then when she and I were both talking about how it's kind of disappointing all of a sudden you're like, wait, I do still though - like what's going to be the joyous part of my day if it's not going to be a cinnamon roll in the morning or what have you, right?

So there is psychology work to be done and that is one of the things that I'm going to be addressing just for anybody listening in Make Peace with Food, which is coming up. We're going to talk about both the biology and the psychology, but we're going to go really deep on the psychology part.

But then there's this biology part where, again, I think when I first started talking to you, Brittney, it really opened my eyes and helped me remove some of the shame because I'd been like, what's the matter with me? I'm a coach. I know this stuff. I've been able to execute it in my business, been able to execute it in my parenting and my relationships. Why can I not get the food thing down?

And I think in the end, biology will win out. Like your hunger will just keep coming at you until you answer it. So tell me kind of, I know I just answered the question, but I also want to hear the way you think about this topic.

Brittney: No, I couldn't agree more. I think that you could look at both sides. You could do all of the thought work in the world, managing your mind, learning what to do with urges, and then you still could have physical cravings that are like you're talking about, biology, physiology, that will eventually win because of our survival brain.

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And then vice versa, you could have all of your physiology perfectly managed. You could have your cravings all stabilized. I mean, I am an example of this right now. I've kind of figured it out. I've gotten pretty stable and I've been able to maintain a really healthy set point for over a year now.

But that does not mean for one minute that I, for the last 40 plus years, my answer to almost every emotion was food. And so even though I don't physically need it, my brain thinks it does. And so there's that whole side to manage. I mean, every night of my life after putting my kids down, so I guess not my life, but since I've had kids, roaming the kitchen for one last little thing was like self-care to me.

And so there is so much that you still really need a coach on, not to mention that you may know what to do, you may learn these strategies we're teaching you, and you may feel like, oh yeah, it's actually helping, but knowing what to do and actually doing it are two different things. And if you know what to do and you're not doing it, you probably need some coaching.

So I just think that, of course, they work together, right? And of course, you really can't have one without the other. I love that there are multiple people I've talked to that felt terrible about themselves because they just, why can't I resist an urge? What is wrong with me? And lo and behold, they were insulin-resistant, right? So you just need both.

Jody: Yeah, you do. I need both anyway, most people do. So we have so many resources we've given you here today. I don't mean to overwhelm anyone. I just wanted to really let you hear Brittney describe all these things, because she's so knowledgeable and she's been studying it for so long. She really has just helped me tremendously.

Again, I was just talking to one of my employees today and she is responsible for going back through old coaching calls and pulling little clips and things that we share online. And she's like, "Jody, I was looking at videos of you just from February and just your face looks different." And I

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was telling her, yeah, in the scale, you know, I've lost probably five pounds since February, not tons of weight, but I am not inflamed like I used to be. My inflammation is better, my bloating has gone down, like my body has changed and I just feel more energized.

So again, I attribute that to the coaching work that I continue to do and also addressing the biology side that makes it possible for me then to manage my brain around it. So Make Peace with Food, I'm going to be covering both of these things. I'm going to go into more depth on the biology and the psychology. So if you're just interested in like kind of trying out some of these supplements or reading some of these books or getting Brittney's fasting calendar or whatever, head to jodymoore.com/fiber.

If you want to try out Make Peace with Food for \$29, we're going to work together for four weeks and really execute all of this, and that's at jodymoore.com/food. So if you're not interested in any of this topic, it doesn't help you. No problem. I hope you got something useful out of today, but otherwise, Brittney, again, give Brittney a follow. She's at MindBodyBrit, and I'm telling you, she's just a wealth of knowledge and so generous. Thank you for coming on today, Brittney.

Brittney: Oh, my pleasure. And to anybody who listens to this podcast, but hasn't gone and looked at Jody's feed lately, you will see that she is reverse aging. Like her skin looks younger and glowy, and I'm telling you, whatever you are doing is reverse aging you.

Jody: Okay, I have this before and after picture, because one of my other coaches was like, you should take another picture. And it was from the back, right? Like I see the front of me all the time, but I rarely look at the back of me. And I was dying at the difference in, let's just say it, my back fat.

And I, a little bit, want to share it online only to inspire people, but I also - it's very vulnerable to share online. And second of all, I'm not always - like we're not trying to just plug quick weight loss solutions here. And I just think

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there's a lot of things I need to consider before I share it online. But I don't know, we'll see. If everybody wants to see it, I might share it online.

So I'll probably just put it on that page, jodymoore.com/fiber. Let's do that. I think I have a video there where I talk about things and I'll put it in the video. If you want to see it, go check it out. And then maybe one day I'll get brave enough to share it on Instagram or something. But Brittney, I love you girl.

Brittney: Love you too. Thanks for having me. What a pleasure.

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