

May 4, 2026 Call Summary

- GLP-1 safety for weight loss discussed, with focus on a 25-year-old looking to lose 30 lbs and whether pharmaceutical or natural options are appropriate.
- GLP-1s considered safe when lifestyle changes—strength training, dietary shifts, adequate protein—are already in place, as weight regain is likely without them.
- Obesity recognized as a disease with neurological and genetic components; lack of results is not a willpower failure but a difference in brain chemistry and exercise response.
- Calibre (by Sarah Kennedy, New Zealand) highlighted as a natural, over-the-counter alternative that activates the body's own GLP-1 rather than suppressing it, targeting cravings over hunger.
- Titrating GLP-1 doses—starting low and working up—minimizes side effects; the key risk is not muscle loss but insufficient micronutrient density due to reduced appetite.
- Protein prioritization on GLP-1s must not crowd out colorful, diverse, micronutrient-dense foods; energy and strength decline when diet lacks variety.
- Microdosing GLP-1 for longevity and inflammation reduction is distinct from weight loss dosing and does not serve as an insurance policy against poor habits.
- Power Life fusion classes (barre, sculpt, heated room 92–98°F) assessed as unlikely to deliver true muscular fatigue or optimal strength gains; combining weights with yoga poses risks joint injury.
- Joy factor acknowledged as a valid reason to include non-optimal workouts, provided core strength, bone density, and recovery habits are not compromised.
- Dairy not recommended; full-fat preferred if consumed; whey protein flagged as inflammatory, especially for those with autoimmune conditions like Hashimoto's, lupus, or rheumatoid arthritis.
- Elimination-reintroduction protocol recommended for dairy: remove for 28 days, then reintroduce at full servings across 2–3 consecutive days to accurately assess sensitivity.
- Ghrelin and leptin levels are directly disrupted by poor sleep via cortisol; self-ordered labs via yourlabwork.com/flipping-50 or Quest Labs suggested when physicians are unfamiliar with testing.
- Extreme post-workout muscle weakness and fatigue described by Shanna flagged as abnormal; insufficient carbohydrate intake (resistant starches like sweet potatoes, legumes) identified as a likely contributor.
- Oxalate-rich greens (spinach, chard, beet greens) should be cooked rather than eaten raw, especially post-menopause; rotating greens and avoiding repetitive raw consumption recommended.
- Cynthia Thurlow's new book on menopause gut health noted as a relevant resource for members struggling with body composition or digestive changes.