

Announcer: [00:00](#) Welcome to a teaspoon of healing where we explore the pathways to wellness and vibrant living. Listen to personal stories of healing and interviews with experts. It's time to open a doorway to healing in your life through positive changes. Here is your host, Dawn DiMare.

Dawn DiMare: [00:18](#) Hi, I'm Dawn DiMare, and you're listening to a teaspoon of healing. This is episode 16 of the podcast. This week's topic is nutrition and my guests are going to talk about a whole food plant based diet. My guess are James and Dahlia Marin, both holistic registered Dietitians and they have a company called Married to Health and they are actually husband and wife in real life and they met in college, so we'll hear about that and when you're about their whole food plant based diet that they follow and they advocate and you will learn about how to handle picky eaters if you have kids and how to avoid getting prediabetes or even progressing to type two diabetes. And how did you beat sugar addictions and much more. James is also an environmental nutritionists. Talk a little bit about what that is. Dahlia is trained as a functional nutritionist. Dahlia is actually going to also share her personal journey of healing Hashimoto's and the cause. If you have any questions for me or if you want to be a guest on this show visit teaspoonofhealing.com.

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Dawn DiMare: [01:57](#) And before we get into our interview, let's hear from one of our sponsors Goff Tours.

Announcer: [02:08](#) Hi, this is Goff, owner of Goff Tours, specializing in standup paddle boarding or surfing lessons. I even do snorkeling. you can reach me here in orange county, has what you're looking for. You can contact me via email at golftours@gmail.com, or mobile number is nine, four, nine, three, three, eight, five, nine, three seven Goff Tours.com.

Dawn DiMare: [02:38](#) Hi. I'm Dawn DiMare and you're listening to a teaspoon of healing. Well today I have two guests with me. They're a husband and wife team from a company called Married to Health, James and Dahlia Marin. They are both holistic, registered dieticians. Hi, James and Dahlia.

James & Dahlia: [02:56](#) Hi. Hi everyone. Hi.

Dawn DiMare: [02:59](#) How you guys doing?

James & Dahlia: [03:01](#) Great. How are you doing?

Dawn DiMare: [03:03](#) Good. Doing well and thank you so much for being on the podcast with me.

Dahlia & James: [03:07](#) Thank you for having us. We're really excited.

Dawn DiMare: [03:10](#) So why don't you tell our listeners a little bit about your background and how the two of you met?

James: [03:15](#) Yeah, so we actually met in college, so I went to cal poly pomona and we met and fell madly in love with me there and it was. I'm just kidding.

Dahlia: [03:25](#) Oh no, he's over exaggerating. Let's take a step back. On my first day there, it was my very first day I went to my second class and I saw these big teeth again and they were in my first class, so we just ended up having three classes together in two days a week. And so that was like a seven hour span. So we just started out studying friends and yeah, and there were three of us along the way. We lost one of our friends, she switched majors, so it was the two of us who were made

James: [04:01](#) and then from there over time, you know, we were studying nutrition and dietetics, you know, fast forward a little bit. We started married to health kind of, as a facebook page basically because we're getting so many questions from friends and family and like what do we do for this and is this link and then on our facebook page or just sharing stuff nonstop. So it kind of just became let's start a page and let it just be a resource center for everyone. So yeah.

Dawn: [04:27](#) Oh okay. And then it grew into.

Dahlia: [04:28](#) Exactly. So then we got a website, we got clientele, we partner with medical groups, we get patients that we see online and in person and it just grew and grew and grew. So it's, it's really great. Yeah.

Dawn: [04:41](#) Okay. Awesome. So when did you first though, when did you decide you want it to be a dietitian?

Dahlia: [04:48](#) So that was kind of part of my personal journey to health. I as an adolescent and a teenager, I was always really unhealthy. My doctor, I would go for my checkups or you know, I was sick pretty often. So every time I would go, my doctor would just tell me you need to lose weight, you need to lose weight. And it was just kind of this more bullying type of comment rather than helpful. So it wasn't until I was 18 that I was having some issues with my ears. I saw an ear, nose and throat doctor who pointed out, hey, you have a huge goiter on your thyroid, you should probably see an endocrinologist, that thyroid specialist. So I went and in one day they diagnosed me with an autoimmune thyroid disease, hashimoto's, and I was also diagnosed with prediabetes and polycystic ovarian syndrome. And you know, as a young teenager you don't want to be told here's all this medication, enjoy your life, taking this, you know, let's see how it goes.

Dahlia: [05:49](#) and of course, you know, you start taking these medications, every medication is going to have side effects. So I just would wake up and I remember waking up just feeling like, ugh, I would say that every morning when I woke up, but I was just starting college and I thought I wanted to be a psychology major. I Took a few classes, thought wasn't my thing, and then this was happening kind of at the same time. So I took a nutrition class just for my own information and I really got a lot out of a really enjoyed it and just started sharing tips that I was learning from that class with others that I knew and that's when I kind of realized, hey, I really like this. I'm seeing the benefits of it in my life. This is something I want to learn more about. And you know, that's when I just started taking a few more classes. Nothing that I had committed to yet, but then decided to make that change and decided that, hey, I feel like this is really helping me. I'm seeing the benefits in my life and I feel like I can help other people along this journey that I'm on.

Dawn: [06:46](#) Wonderful. Now. So you have these conditions. So you had hashimoto's hypothyroidism and you had polycystic ovarian syndrome and pre diabetes and so now you're you field from those and you're thriving, you're really healthy. so was a lot of it through diet as well as the medications?

Dahlia: [07:05](#) I would say mostly through diet. Early on I kind of decided that for the polycystic ovarian syndrome and the prediabetes that I didn't want to medicate myself for that I really saw lifestyle as a means to an end. So that was when I just started learning about eating less meat. I started kind of cutting out meat, eating more plant based foods and really saw how that helped my own health for my hashimoto's when I was first diagnosed my

antibodies and my thyroid stimulating hormone. So basically my thyroid levels were about 300 times as high as they should be. So I have now I take maybe five percent of the medication that I used to take for that. So I'm on John, just the very lowest dose available for thyroid treatment. But I've really put my. Because most people just keep going. So I've kind of come down the other way. So I've really brought my auto immunity down and I'm really managing it through lifestyle and diet and yeah, trying to be more conscious of my mental health and my physical health and trying to live my life the most functional. It's

Dahlia: [08:13](#) good to get context because so many people, I mean we see patients all the time with a thyroid issue and when you think of diabetes, that's a pancreatic issue and a cellular issue. And then PCOS. I mean so many. So many women nowadays have PCOS. So to tie it all together, I mean fast forward, what we know now is that this all encompasses our endocrine system and so when you look at foods, there are foods that can disrupt your endocrine system as well as environmental factors that disrupt your endocrine system. And that's why we're seeing so many people with diabetes, PCOS and thyroid issues because it's all part of this intricate and vital system and it's been attacked on a daily basis

Dahlia: [08:55](#) and just the strain that we're putting in our body. And with increased body fat, you have increased hormones. And I think that there's a lot of misconception, and I can say that firsthand, that I didn't understand what was happening to me. So I really chalked it up to my family history, oh my mom has diabetes, so okay, I probably will have it. Or oh my mom has a thyroid disease, or you know, my aunt, his sister, or whatever. I think I hear that a lot from my patients and I think that a lot of people feel that their genetics are a life sentence and they really don't understand that you can take control of that. You can definitely biohack your genes and you can override and really turn on and turn off different genes. Like I said, with food. So I think that we really are on a mission to teach others about that, how to use food as medicine because it can be poisoned, but it can truly, truly be medicine.

Dawn: [09:45](#) Absolutely. That's wonderful. And I really liked the point that you guys made that this is all tied together through the endocrine system. All these conditions and they're pretty prevalent and they all have that in common. And I think it's wonderful treating that with lifestyle as much as possible. Lifestyle changes and diet. Now, James, I wanted to ask you on your background. I read your bio and you are also an

environmental nutritionist as well as a dietician. So what is an environmental nutritionist?

James:

[10:11](#)

Right. So it's, it's like it says environmental nutrition. It takes into account the environment. So you're looking at synthetic chemicals, you're looking at your immediate environment, like what's in your home, whether you clean with, what do you wash your hair with, what makeup do you use, and also your more outer layer of environment, you know your neighborhood. Do you live by a big factory? Do you live by? I can't tell you many patients I have with autoimmune disease and come to find out, yeah, I did grow up next to agricultural field or I had a. I remember a case study back in my internship. She grew up next to a paper mill where they use lots of volatile chemicals to produce paper and the back. Then they would just dump it in the local creek where she would go play and swim. And so, you know, really environmental factors and something we always say is without a healthy environment you can't have a healthy body. And so this is kind of our holistic approach is where we get to know the environment, what's going on in agriculture, you know, what's going on in the plastics industry, what's been leached into our environment so that we can make our patients more aware and have that be a form of healing as well. So that's very important. It's

James:

[11:23](#)

so important not only for consumers but for health professionals to really, really try to teach your patients that and to really have an understanding of that not only is nutrition, what carbs and calories and things like that are going into your body and I think oftentimes it's very compartmentalized the recommendations that are given, but you know, really encouraging your patients to think about what's in your foods, food, what was in that soil that your food was grown in. Again, what we're exposed to and what type of environment was your food reason. Because that is going to ultimately affect everything that's going to affect your health

James:

[12:03](#)

as well. And if I can give example, not really quick to the biggest thing is there's a recent article, but this is something you've been telling patients for a long time and a lot known about this is bottled water. Like something educate our patients on is you've maybe seen that bottle of water that you buy in the store. It's an a vending machine and maybe it's, it's cooled down, but that bottled water has been on a journey. It was packaged in a plant that was probably not air conditioned. It's been in a truck or in a crate or unaware house where it was hot and it was hit and it was moved. And so this whole time with all these temperature variations and you know, different variations

and how it's been handled, you're going to get leaching of the plastic into the water. And so a lot of people who rely heavily on bottled water are also getting a lot of bisphenol a and a lot of other chemicals that happen to be endocrine disruptors. Like we talked about the endocrine system that are like bisphenol a in that wander. And so, you know, being aware of this and really demanding like, why don't we use them on glass, why don't we look into hemp and other renewable plastics, you know, it's really part of the conversation we have with our patients. Yeah,

Dawn: [13:15](#)

it's a wonderful example and your bottled water is so ubiquitous and more and more people are starting to drink out of reasonable bottles, which is great. Non plastics, but it's really, that's a really unique twist on it and it's really, it's really important. I like that. Have environmental nutritionist and now Dahlia you're also trained as a functional nutritionist. And can you explain for listeners what that is and a little bit about the work you do with that?

Dahlia: [13:39](#)

In my practice as a dietitian over the last five, six years, I've always kind of tried to take this deeper look into what's ailing my patients. I always try to ask, how's your sleep? How's your stress? Different things, because I know that they're all going to ultimately connect. Yeah. I wake up every night at midnight, 1:00 AM, 2:00 AM, yes. I crave salty foods. Yes. These are my trigger foods and that will clue me into on a deeper level why that patient is gaining the weight that they came in. They might come in just thinking that they're going to have a consult with me for weight loss and then they walk out realizing, okay, we're going to test for food sensitivities. We might have a hormone imbalance, we might want to try and detox. So I always try to dig deeper and find that root cause. These symptoms are all kind of just again, branches from this tree, but I want to dig deeper and understand, okay, what are at the roots of that tree?

Dahlia: [14:33](#)

What is causing all of these? Because ultimately symptoms are all usually connected. So I have been able to have the wonderful opportunity in my latest position to be actually formally trained in functional medicine. So as a functional dietitian with functional nutrition, again, you're looking for that root cause. You're digging deeper. You are touching on principles. Not only a western but eastern medicine. You are using diet, you are using meditation, you are using nutraceuticals and exercise and just kind of an all encompassing type of program. So it really is I think more comprehensive and like I said, it's a larger picture and it's not compartmentalized. I'm not ever going to tell a patient just have six ounces of protein and you know, the have

one cup of starch and there are different practices for dieticians, but I have seen great benefits that my patients have felt in their health and I really, really believe that functional medicine and functional nutrition is kind of our future. Most of my patients who come to me, they've tried every pill, potion and medication that's available out there and they're tired of seeing so many specialists. They're tired of feeling worse year after year and you know, tired of realizing that, hey, I'm too young to be having all these diagnoses. So it really is getting at the root of it and preventing further issues.

Dawn: [16:01](#) So you work with a lot of families that have picky eaters as well. Yet, how do you help families with really picky eaters?

Dahlia: [16:08](#) Yeah, so I was also very blessed in my life to work with a pediatrician and we learned a lot about feeding dynamics and that really, again, at the core, oftentimes with picky eaters, that's at the core where the feeding dynamics might not be 100 percent up to par. Of course you're going to also run into, okay, this child might have texture issues or this child might be tongue tied or you know, it might be having other reasons why they're not accepting different textures and flavors and foods. At the core though, I would say most of the families that I work with are putting I think too much of a focus on food and it becomes this constant battle between the child and the parents and I always just tell my parents that I work with what does the child control in their life. Do they decide where they go with who, when, what time?

Dahlia: [17:00](#) No, the only thing these kids really have 100 percent control of is what they put in their mouth and swallow. So sometimes it's just them really trying to take control and sometimes it's them just saying no, I said I don't want to eat it and I'm not going to eat it just because they want to say no. So we teach this division of responsibility in. This is an amazing practice by ellen satter and she has written wonderful books that really helped kind of guide parents along, feeding children of all different ages and stages, but she teaches us division of responsibility as parents, adults, caregivers, teachers, anyone who's responsible for feeding a child. Your job is to just buy, prepare and serve Healthy options. The parents, caregivers are in charge of where family's going to eat and that's it. And maybe what time as well, we are not in charge of telling that child how much they have to eat.

Dahlia: [17:58](#) If they have to take two, three, four more bites. If they like something or don't like something. I always try to encourage my family's not to put preconceived notions and those kids heads

or you know, a lot of times my daughter's friends, I'll offer at play dates. I'll offer her child something that leila is eating and the mom already answered. Oh no, she's not going to like that. Well, give her a chance to, you know, don't put that thought in her head that she's not gonna like that. So again, leaving it up to the child to decide what

Dahlia: [18:26](#) they're going to eat, if they're going to try it and how much. So no pressure and we have just seen it work with our daughter too. It's not a battle for us if she says no. Okay, cool. Nope, no worries. I wouldn't want someone to force me to eat something so I'm not going to do that to her.

Dahlia: [18:41](#) So we've really tried to encourage and really nourish this healthy relationship with food for her and an important part of that is not putting any certain foods on pedestals such as treats and desserts. We simply don't have them in our house. And she understands those are special foods for special days. So when she goes to birthday parties and things, she gets plant based treats, but you know, she understands that. She understands those boundaries. It's not, hey, if you finished this one piece of broccoli, you're going to have ice cream again because that puts broccoli down, that puts this ice cream on this pedestal and almost creates these food obsessions that kids create, so we've really tried to teach families how to do that and we understand it's not always easy. It can oftentimes be easier to live not such a healthy lifestyle, but it's very intentional. We're very mindful and teach her to be mindful with her nutrition as well and we are just seeing the benefits not only in her but in our patients who practice this.

Dawn: [19:39](#) I love that idea, but not putting a certain food on a pedestal because when you do give that reward of a tree, it kind of things, okay, the vegetable or whatever you're trying to, whatever it is, nutritious that you're trying to feed your kid that's lower than the ice cream or the piece of cake. That's a really good tip. I hope that'll help people. Now you mentioned plant based, so how long have you both been whole food plant based?

James: [20:03](#) We've both been whole food plant based. Going on seven years now, it was a progression, you know, something an analogy I like to give our patients is that, you know, you're climbing a health mountain and I think a lot of us come into it like, oh, you, you know, it's, it's almost like go to mount everest and I'm going to climb that today with no guide, no tools, no gear, and you're insane, right? People will be like, that's impossible. So it's the same thing with your health and your lifestyle. You know, you

have this mountain to climb, but it's going to be so much better if you have the right gear and the right tools and the right guide and then you're going to be taking selfies and having fun and it's going to be a good adventure. And just with that, you know, it's taking it step by step. So we didn't just overnight become these whole food, plant based experts. It took time and it was progress and we slowly eliminating things and, and. Yeah. So I think that journey is probably in total eight or nine years because it took us a good two years being vegetarian or pescatarian and then. But almost seven years fully. Yeah. Begin plant based. Yeah.

Dawn: [21:05](#) Excellent. So now what kinds of conditions have you found with your patients that you might recommend a plant based diet to? Do you think there's any conditions in particular that it might help?

James: [21:15](#) I call it almost a shotgun approach. It helps almost all conditions, especially any conditions you see a dietitian for. So I mean yeah, I found I deal more with parkinson's and diabetes so and it. And it works wonderfully. I mean it's kinda the same, I want to say structure and skeleton, but the details will change a little bit before diabetic or someone with parkinson's. Definitely gi issues. It's so great. I mean it's so beneficial. You know, you have over 85 plus years of research and peer reviewed research behind this information and so it's really, really a well researched diet. It's really. And it's even more than a diet. It's a lifestyle. So there's, I'd probably say indian all conditions can benefit

James: [22:00](#) and definitely from the right whole food plant based diet because we shy away from calling ourselves vegan because chips are vegan and oreos are vegan and oftentimes we hear, oh yeah, I was vegan and I was so unhealthy, which is true. You can be. So it's really seeking out again, those unprocessed whole foods that are plant based and ensuring that you're including a variety. If you are only eating a handful of different vegetables, a handful, you know, just tofu in white rice everyday of course you're going to become deficient. So it's really being thoughtful, eating a rainbow every day, including different grains, beans, seeds, nuts. But we've absolutely, like james was saying, so many conditions. My one of my favorite patients recently came to me. She's 82 years old and she has chronic kidney disease. She has hypertension, she has a very mild diabetes, but she was in the end stages of kidney disease and she knew her next step was going to be dialysis and that was her fear and she was determined not to go on dialysis.

James: [22:58](#) So I said, alright, I'm going to help you. It's going to be kind of a big change. She was the one determined to climb that mountain right away, so I was ready to guide her along that. We got her tons of resources to take to her nephrologist, her endocrinologist, offer specialists. I made sure she thoroughly understood how to balance that whole food plant based diet, and I'm so happy to say that in just four months, her all of her kidney labs, all of her renal numbers are improving. We would say there's almost nothing that a plant based I can't improve. So yeah, that's from patients that we've worked with who have cancer. That's kids. That's adults. Hypertension. Definitely. So many gastrointestinal issues can be mitigated and relieved. A plant based diet,

James: [23:46](#) a migraines, headaches, joint pain, gout, acne, acne. Yeah, that's a huge one too. So you can go more superficial issues but still issues none the last because if you suffered with acne and severe acne, it can be quite debilitating and a lot of the treatments out there can also cause many more symptoms that especially a young person, if you're 18 through 25, you don't only think about and because you're going to hit you when you're 40, 50 or 60. So yeah, even things like acne, I mean it has huge benefits.

Dawn: [24:20](#) So now think there's somebody with a sugar addiction and they come to you and they want to stop the cravings for sugar. How do you like wean people off sugar and meat? Meaning we're like the added sugars, not the sugars in fruits or I don't know if they have to give up fruit. I've heard about diets like this or to get rid of sugar addiction, you have to get rid of all fruits for awhile and then react. But mainly the ones that are in this is speaking from me because I'm recovering from this. I'm trying to go on the sugar detox and all this stuff. The refined sugars, how d and that's such an addiction nowadays. So how do you, how do you work with people to get them in if it's a problem for them? You know, maybe some people don't have a problem with it. I mean, I sure do. So at your work with people like that.

James: [24:59](#) Oh, that's a great question. I think. I think a lot of people do and yeah, I want to make it very clear. Refined sugar is basically like a type of added sugar and I want to make it very clear that it's not the same as fruit sugar. I can't tell you. Yeah. How many patients we educate on that and even though their health professionals or people in the natural products industry, you know, added sugars not the same as fruit sugar. And so it's very important to understand that analogy I like to give is a drug analogy because you take the coca plant, which is a plant that's been used for thousands of years by different indigenous tribes.

You chew on the coca leaf and it would give you energy and it would help you, you know, doing your daily chores or whatever you did thousands of years ago, and along the way we took the coca leaf and we made cocaine and then from cocaine we made crack cocaine.

James:

[25:47](#)

So this hierarchy of increasing the processing and the refinement of this product is very similar to corn. For example, you've had corn for thousands of years and it's helped populations thrive, but then in the last way, 80 to 100 years, we've taken corn and we made corn syrup and then from corn syrup we made high fructose corn syrup. So it's very, very similar to cocaine and crack cocaine, illegal drug in the sense that it's. It's a drug. I mean you look at the research on sugar and it's highly addictive. It's obesogenic. The more you refine and process that, the more dangerous it gets, and so it puts you at risk for all these metabolic diseases which we call metabolic syndrome as well as you know, a neurological issues, gut issues. So you just have these host of issues that arise and it's coming from this complete refinement of this food and I want to also be very clear that even organic refined sugar or if it's gavi, organic cane sugar, now the new one is organic coconut nectar.

James:

[26:56](#)

So you know, food companies become very, very keen and very smart on the trends and they're going to evolve with them. But just because it's organic or it's coming from a coconut or it's coming from that gavi plant, it still means that your risk for organic diabetes, right? It's still gonna be a detrimental to your health. So again, but this isn't saying that you have to never have added sugar. You're going to be a perfect little robot. But it's just, you know, being aware and being conscious that you know, whether it's organic or if it's vegan or whatever. Refined sugars, refined sugar, and you really want to be aware of how much you're eating.

Dahlia:

[27:34](#)

And I think a lot of people are not aware. The average adult and child in the United States, they consume over 20 teaspoons of added sugar a day. And that's the average, the average. So some people, when I used to work with the pediatrician, some kids were eating upwards of, you know, 30, 40 teaspoons of sugar a day and those were usually the ones who were having the schools provided breakfast and lunch. If you just kind of take a look and really write down what you or your kids might have throughout the day, it creeps in and little places, a little on the cereal, then some juice and then you know, fruit snacks and the cookies and lunch. And then, uh, you know, another juice box and a little here. A little, yeah, granola and you know, it all really does amount to quite a bit every single day.

- Dahlia: [28:19](#) So again, a really helpful tip that we like to give is that stuff's all well and good and we are not those perfect little robots, but we try to limit it. And again, home should be this secure, happy, healthy place. So you want to really ensure that you're not creating, again, those food addictions or feeling guilt and restricted in your own home. So keeping those treats outside of your house. Okay, we're going out to dinner tonight. Oh, let's have a treat. It's someone's birthday party. Let's celebrate with them. We're going to have some cake, but again, we're not having cake like substances for breakfast and you know, including them for lunch and dinner. It's really being mindful and being educated on how to identify the different ingredients. There are hundreds and hundreds of different names they use for refined sugar and just like James said, they know we're getting smart and we're catching onto them. So everyday. I'm sure there's new names so we can't figure it out. And then to pull it back to the original question, it is, so
- James: [29:19](#) On beating your sugar addiction is just being aware on how much sugar you're actually getting. It's that awareness and we always say, don't read nutrition facts, read ingredients, and become aware of how much sugar you're actually intaking. So you are then aware of your problem because if you end up calculating so and, and, and a great way, and for those of you listening, you can write this down. Four grams of sugar going to equal one teaspoon of sugar. And so the way you're going to know if it's added sugar or if it's natural sugar is by reading the ingredients. So if in the top five ingredients are seeing words like dextrose and sugar and cane sugar, and there's even now there's organic brown rice syrup, so you know anything with syrup or you know those sugary words, you can bet that a majority of that sugar in the product is coming from added sugar.
- Dawn: [30:09](#) There's so many different names now, so it's hard to keep track
- James: [30:12](#) so many different. And something cool too. I want to mention this as a lot of people don't realize, again, it's making these connections and realizing that your whole body's connected. Where I always ask my patients what, what is saliva? And they look at me funny like, what the heck are you talking about? Like what is live? Well it's, you know, we don't really think about this, but saliva has basically filtered blood. We have these little in our, like mandibular jaw, like in there we have these little filters and it filters our blood and it makes saliva. And so if your blood is full of sugar, if, if it's gonna affect your hormones and yourself signaling and everything, your saliva has that affected the way you taste is affected, your taste buds are effect is

you're more likely to crave and want more sugar. However, he started to make these little changes and realize, wow, this yogurt has how many teaspoons of sugar this granola has, how many teaspoons of sugar?

James: [31:05](#) You start to kick that out. Your saliva changes, your taste buds change. You start to become more aware of the suite tones in a beat or you know, changes and you stop craving them as much. Exactly. And again, just like James was saying, the more sweet that you're used to having, the more bitter in the more foreign the vegetables are going to taste. So it's really, you know, consciously trying to swap out as much as possible. And those bitter tones, those sour, bitter, you know, really savory, like something like a turmeric or something like a savory illness of a beat. Those are things that actually killed the bad microbes and promote the good microbes. So you know, the bad microbes are facilitated with all the sugar and they're almost playing a trick on you. They're like saying, oh this is too sour, this is too bitter, don't eat that, eat more sweet, and it's this crazy like feedback loop and you got to just try and break that. YEah.

Dawn: [32:06](#) And other bad microbes. They're feeding off the sugar as well. Just like in your teeth when you get dental caries and cavities, they're. They're feeding off that sugar. That's the. Now if somebody is prediabetic or now or even like full blown type two diabetes or can they get help and reverse their condition? I am assuming that prediabetics can say it has progressed to type two and they reverse it a bit with diet or is it too late?

James: [32:29](#) Oh yeah. Let me, let me clearly say that a majority of diabetes. So let's, let's get all the diabetes in the United States. So what research shows is 90 to 95 percent of those diabetics are type two diabetics, meaning that it is 99 point nine percent lifestyle factors that caused you to get prediabetes. Type two diabetes. Okay. With that said, prediabetes, 100 percent reversible type two diabetes can also be 100 percent reversible, but there's a but so the but is how far along you are and how much damage you've done to your body. So there's a certain point where you've done too much damage and an example would be, you know, you're getting neuropathy, you're damaging nerve cells, you're basically killing your nerve cells in your fingers and toes and, and all over your body, and that's why people need to amputation of a toe or a finger. Then that can lead to nephron empathy, which is damage to the kidney. Once you damage your kidney to a certain extent, there's really no coming back. So yes, I want to say type two diabetes. Prediabetes is reversible. It's just the damage. It's just to what extent of the damage you've done. That is the only thing that can be

irreversible. Hopefully that makes sense. Um, yeah, 95 percent or

- Dahlia: [33:51](#) So oftentimes type one diabetes clearly, you know, has a hard time reversing. However, sometimes because it's a child who's living with that disease, it goes mismanaged. So they're suffering from diabetes, very unmanaged type one diabetes because they are depending on their insulin to do all the work for them and they're continuing to eat a very nutrient poor diet oftentimes will help type one diabetics better manage their diabetes, maybe require a little less insulin, maybe feel a little bit better, have less hospitalizations, have less just poor control of their diabetes
- James: [34:30](#) because. And to give it a little more bad news, but then I'll give some good news with type one diabetes. You may think, well, there's nothing I can do. I'm just on insulin. Let me not really control my diet, what we're finding out. Then as you can then become a type one diabetic and a type two diabetic combine because you're on, you're a type one who's taking insulin, but if you are continuing to eat poorly, not exercise, not do these lifestyle factors, you can then become insulin resistant to your medication. So now You need more and more medication, more and more insulin, and your body's not listening to it because you're in such a bad place in your lifestyle. So then you get type one and type two diabetes combine. Now that's the bad news, but the good news is even now we're seeing even with type one diabetics, we're seeing that the environment plays a huge role.
- James: [35:22](#) Now remember, like what we said earlier is that the pancreas is part of this endocrine system were being exposed to endocrine disrupters. A lot of times if you can kind of see that exposure drastically reduced exposure of endocrine, you can bring back some of those beta cells in your pancreas and you can start producing some insulin again. You know, it varies. You know, and this is very rare. This is pretty new, but we're seeing some bring back pancreatic function. We're seeing drastic decrease in insulin even in type one diabetics and they're living way better quality of life. Yeah.
- Dawn: [35:58](#) I hope that helps a lot of people because you know, definitely the type two diabetes, it's pretty. It's pretty common. It's pretty common nowadays and that's hope it can revert. Let's hope that trend can reverse in the future. I think people are waking up a little bit, especially to the lifestyle factors and the refined sugar

James: [36:16](#) And even. And to give us a stat on that really quick is where we are now roughly at one and two with some form. Yeah. And this isn't. So a lot of the numbers you hear, oh no, it's, it's more like 30 percent, which is still pretty high like one in three, but one and two is what we say for people with any type of insulin resistance or a lack of insulin sensitivity or some kind of a glucose recognition issue is you, you, it's basically now at 50, roughly 50 percent of the population has some sort of prediabetes, type two diabetes, type one diabetes, gestational diabetes or type one point five diabetes, you know, this is, there's all these different diabetes and levels of diabetes and so when you take them all in combination, you have these issues. So yeah, look and looking for like 50 percent. so it's really alarming. And this is where, you know, the call to action is being aware. You know it, it does start with reversing that sugar addiction. It goes back to being aware, have that awareness of what you're eating, reading ingredients and things like that.

Dahlia: [37:24](#) Yeah. This has progressed over just two generations, really. two to three generations. We used to call it type two diabetes, adult onset diabetes. Now it's just one of the types, one of the five types, so it's becoming more common. I think it's also unfortunately becoming more normalized and it's becoming this thing that we just say, oh yeah, you know, when you're older you're going to have diabetes and it shouldn't be because it wasn't. No, absolutely not, so it doesn't have to remain that way and I really hope that that can change too.

Dawn: [37:55](#) What would people like you and more and more people, you know you're waking people up and more and more people are. Let's hope that that will change in the future. instagram is a place where you can find out a lot about nutrition and you know, there's kind of an instagram world of many different like what celebrity nutritionist on instagram and there's all different types. How does someone differentiate the information they're looking at and now you guys are both registered dietitians and you're also, you know, you do holistic nutrition and what first of all, like what is it like to have that title, the rd in this kind of world where there's just these, a lot of them are uncertified. They don't even have a certification at all. some do. And how does somebody sift through all that information that they see on instagram because there's a lot of pretty pictures and there was a lot of really fun stuff, but what is basically what's based in science and what's not, what's going to help them and what isn't

Dahlia: [38:47](#) for those kinds of trying to determine themselves and establish themselves in the social media world is to really find your niche.

There are so many people out there talking about so many different things. And again, some people, their main goal is to just put out really beautiful pictures and they're not so concerned with how healthy it is. Summer, you know, really focused on protein. Some are really focused on, you know, macros and different things. So I think for us that, that was really important for us to figure out, okay, what's our niche? So our page at married to health, we're all about plant based nutrition. We also put a focus on feeding families and really, you know, encouraging families to cook healthy. We show what we eat, what we feed our daughter, we try to share as much of that, just science based knowledge that we have and put out that credible information so that way people can identify that when they're looking for those concrete signed spaced answers that, you know, we're a place to go and not all pages are even trying to do that, not on pages one to do that. Somebody just just want to put out beautiful pictures and that's great, but yeah, you're, you're really going to kind of speak to who your followers are and

Dahlia: [39:57](#) you know, really kind of give them what they want. Right. And so I think yeah, I think simply said is look for a link. Like if they can't provide at least one link for what they're saying or if you're seeing something on instagram that's like rubbed some geeky and salt on your face for bit and it's like wait a minute, and if they can't provide at least one link or even tell a case study, which is the one of the lower forms of, of references, there's not at least a handful of case studies of people that have found a benefit then don't do it, you know, or at least at the very least look into it more yourself, you know, do your own research and don't just rely on something from instagram because yeah, there's a lot of people who liked the pretty pictures and want to just put creative stuff out there, but it's not really based in science. So you gotta be careful with that. Yeah. So I say just look for a link roughly. I mean to simply put that, yeah,

Dahlia: [40:53](#) dr google, you see a lot of information good and bad. So again, like james was saying, do your own research, find credible sources, peer reviewed sources. And just again, always with science also look to who's funding that study because of course, you know, if you're gonna look at a study about beef and it's funded by the beef council, maybe not

Dahlia: [41:15](#) most unbiased information. So again, always just look for that credible science fact information, right? So I like and you know, dr khan a really speaks out on this and he has a great approach and I have the same approach or we have the same approach, which is I want to first point out the similarities we have. So

with someone who promotes a whole food plant based diet and someone who promotes a keto diet, I think we have a lot more in common than we don't, which is maybe surprising for a lot to hear because keto diet promotes no refined sugar. They promote, eat more leafy greens, they promote eating more fruits and veggies roughly. You know, so we're, we're trying to do a lot of the same things, drink more water, exercise, you know. So there's a lot of similarities. And then when we start to differ is more on the amount of animal products.

James: [42:05](#)

Right? So ketogenic diet, saying, no, no, your evolution and your physiology is wrong, don't run off glucose runoff, ketone bodies, and so you want to be in this, in this glucose deficit to where you're running off ketones, so you're burning fat and you're using fat as energy. That's the basis of the ketogenic diet for those that don't know, kind of background. And so it's this idea that burn fat as fuel instead of glucose. However, if you look at our entire physiology, if you look at anthropology a little bit, and I don't claim to be an anthropologist, but from what I do know and what we researched is, look, let me ask you and the listeners, you know, what is the animal that can run the longest distance? Do you know don cheetah? Maybe that's the fastest one. That's the fastest, right? And I think that's what, what we go to take a guess.

James: [43:02](#)

Okay. So it's no idea. It's the human to human. Okay. It's us, it's a human. So we are, we are an animal and we, we run, we were able to run the longest distance. There's, there's actually a race, and I want to say it's like in Russia or it's in the Netherlands, I think where they do this, this annual race, you guys can google it, look it up, or they do a, it's a, it's, it contains humans and horses and they race each other and I think it's going on on the ninth year now, and out of those nine years, three years, a human actually beat the horse, and so this was the longest distance running and so when you look at human physiology, how we're made, you look at, okay, how we store carbohydrates, so we store carbohydrates in our muscle in the form of glycogen, and that's basically for this time released fuel when we're running long distances.

James: [44:00](#)

So you know, the keto diet says, no, forget all that. No, no, no, forget glycogen. Forget the fact that every single cell in our body runs off glucose, which is a carbohydrate. You're going to run off fat, and then the keto genic people say, well, there's longterm studies. I recently read a longterm study. What would you consider a longterm study done? I guess it depends. I would think something at least over 10 years, but I could be wrong. Right. No, that's good. Yeah, I was. That's roughly where I would

say the long and and this. This was a title of a key to genic study. It was a longterm key to genic diet. I don't remember the title exactly, but it had a longterm in the title. The study was done over a six month period and so six months is not very long at all. And so you know, when you look at a longterm diet, I'm interested to see you. I have yet to see a ketogenic study that goes for 10 years, 15 years, 20 years. How long can someone actually be key to genic? Meaning they're not ringing off glucose, they're running off fat and that's, you know, I would say not going to be healthy and you look at the majority of the research out there, that's not something you could do long term.

Dawn: [45:13](#) I don't think of this. The kids with epilepsy, I believe it's something like that, like it's useful for that, but that's a very small subset of the population.

Dahlia: [45:21](#) Yeah, absolutely. Right. And then again, you ask the question, well how long is that good for him? Because a lot of times, for example, we give something called an elimination diet and that's to help kind of figure out what kind of a basically gastrointestinal issues you have and how we can best help that. But elimination diet, we're not going to keep you on for a year, two years, five years, 10 years and, and so that's somewhat similar with epilepsy is we're not going to keep them on the keto genic back for too long. It's Just to kind of see how things are going. It's to kind of wade through some of the water and do almost a therapy to enhance certain aspects, but it's not something longterm that's done. Yeah. So that's the big Difference. and I could probably talk more, but I think one last point is also what I have to call the second half of the story because you so Much in the news so much you hear of like eggs are good, no eggs, no cheese is good, cheese has protein, no cheese is bad.

James: [46:17](#) And so, you know, you have To look at, you know, yes, our body needs cholesterol, you know, yes to a certain degree our body needs saturated fat, but the amount in these animal products, right, you're not just getting cholesterol and saturated fat, you also get trans fat, which we know is as horrific for your body that comes from an animal. And not only that, you're getting a lot of these fats you don't want. Let's also talk about what you don't hear in those studies on cnn or men's fitness or whatever. You don't hear about the environmental toxins that are also in animals. And so it's so funny in the context of a pregnant woman, we seem to all agree on this, right? When you're pregnant, we say, don't eat swordfish or shark or you know, big fish, you avoid sushi because of the mercury and heavy metals.

James: [47:08](#) Okay? But somehow, magically, when, when we're not pregnant, we then say, yeah, let's go get sushi or yeah, let's go eat some beef and you know, and somehow we don't apply that to our life as a whole. And then somehow we don't apply that to other adults, right? It's only for pregnant women, but we have to remember what's happening is called bioaccumulation. so this bioaccumulation happens to all big mammals are animals, whether it's a big, you know, we gotta remember it's a big bluefin tuna or if it's a big pig on a farm. And tHis goes again to something I said earlier where you can have a healthy environment without a healthy body, right? Or you can have a healthy body without a healthy environment. And so this applies to your food. If your animal's unhealthy than if you eat that animal, you can't expect to be healthy.

James: [47:59](#) And so this is part of that bioaccumulation. This is part of when you eat the animal, you're also going to eat the toxins, the date, pesticides, you know, you also get something called endotoxemia. So when they're kind of chopping up the animal and the big meat factories, they're not doing it carefully. They're not doing it to consistently. There's going to be feces everywhere. That's why back in the nineties, you had that big Jack in the box ecoli outbreak, which set the standard for heating and reheating meat, but the idea and something everyone needs to understand is you can eat me anD kill the microbes, but those microbes create toxins. You know, you hear a mycotoxin, all these different toxins that can be created. Those toxins don't die because they were never alive. You can Heat them. You could throw acid on them, you could do whatever you want, but they're not going to die because they're not alive, and so when you eat this burger patty or whatever, chicken breast, if the animal's sick, plus it's filled with antibiotics, plus it was maybe exposed to heavy metals and pesticides and ben.

James: [49:07](#) You Have those endotoxins. You're getting a huge inflammatory response and that combined with the cholesterol, trans, that saturated fat, etc. Etc. Creates this perfect storm where then you start to get atherosclerosis, right? You get those, that calcification in your arteries and you know, etc. Etc. You get diabetes, you're inflamed. Your, your gi system is inflamed, you know you. So it goes down this negative domino effect where you create this perfect environment for disease. So yeaH, that was a long answer, but you see how it kind of all connects and it's this big kind of domino effect. YeaH,

Dawn: [49:49](#) no, that was extremely helpful for people to understand. No, that was really good. I appreciated that because, and I'm sure

our listeners will appreciate it because there's a lot that goes into that. It's not just the fat as much as the cholesterol, like you said, which was, which we do need in certain amounts, but there's just so many other things that feed into it

- Dahlia: [50:09](#) and like you said, with the fact that it's not a one size fits all. I think people don't realize that animals are the only, you know, food that produce cholesterol and every person produces a different amount of cholesterol. Some people have familiar hyperlipidaemia, which means they've produced more cholesterol than. So of course that person has already overproducing or hyper producing cholesterol is probably especially going to want to steer away from something like quito or a diet that's really, really high in that cholesterol.
- Dawn: [50:40](#) Well, thank you guys so much for joining the podcast today. Is there anything you want to add before we sign off? And I'll also Get your contact info. but anything else you want to add about what you guys do?
- James: [50:51](#) I guess I want to say our mantra plants protect. I want to say tHat it's not about perfection, it's about progress. So think back to that mountain analogy where, you know, as long as you're taking one step each day, that's great. Doesn't have to be this huge, amazing progress each day, but as long as you're moving forward, you know, you're not going to be perfect. But it's, it's not about perfection, it's about progress.
- Dahlia: [51:13](#) And I just would say that would that progress. You want to progress with those around you. It's hard to send a changed person into an unchanged environment. Um, and if you feel like it's beneficial for you than your family will benefit from it as well. Right?
- James: [51:26](#) And then be that example for your family, whether it's your immediate family or your extended family or your work family or your church family, you know, you make a biG difference. I think we don't realize the impact we make and even the impact of voting with your dollar. That's huge. I got to shout that out when you can change the economy anD to shout something out to you. I know we didn't get into organic. Maybe we could come on again and get more into other stuff. But um, but you know right now the studies say is if we can get the organic market to 16 percent, I think we're roughly at like seven or eight percent right now. If we can get the organic market to 16 percent will see a dramatic decrease in the price of organic. We'll see a majority of food companies going organic and so it's huge, you

know, and I think a lot of us think stuff needs to be 100 percent right?

James: [52:12](#) I need to be 100 percent perfect. I need a, you know, organic has to reach a 100 percent. Oh my gosh, that'll never happen. No. It's these little tipping points that happen in our life and our community and our economy. And you'd be surprised how little it takes and it all starts with you deciding to make change, right? Yup. And so if I guess if, if anyone wants to reach us, you can reach us@marriedtohealth.com. You can send us an email through there. You can follow us on instagram. We're at at married to health, facebook, married to how we also have youtube and so we do all this to provide resources. We give a glimpse of our life because we are the health professionals that practice what we preach. We're not saying one thing and in our with our patient and going home and doing another. So we like to show and be and give more resources every day. So depending if you're signed up on our newsletter or on our social media, you can see what we do.

Dawn: [53:07](#) Yeah. Wonderful. Thank you very much, James and Dahlia for joining me today on a teaspoon of healing and hope to have you guys back.

James: [53:15](#) We could talk about organic

Dawn: [53:21](#) Oh yeah. You're welcome. And Thank you. Thank you and have a good rest of the day. You're listening to this episode of a teaspoon of healing. If you have any questions for me or for my guests, visit my website, teaspoon of healing.com. Click on contact, fill out the form and I'll get back to you. When you're on my site. You can read my blog. Listen to previous episodes, download show notes, or transcripts. Stay tuned for next week's episode. I will have intuitive empath, Morgan McKean on the show. You won't want to miss this one to you next week.

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