





The Plant-Based Gut Health Program for Losing Weight, Restoring Health, and Optimizing Your Microbiome

FIBER

FUELED

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Dear Friends,

I'm excited that you're here! You have to understand, I am a man of science. It is the compass that guides my daily practice as a medical doctor. Don't get me wrong, we don't know everything. But I think there are many areas where we know enough to understand a path to better health. My book, *Fiber Fueled*, is that path...

In writing the book, it was an absolute requirement on my part that the science lead the charge in our quest to deliver optimal gut health. So while I hope you find it an enjoyable read, just know that swirling below the surface are more than 600 references. I reviewed well north of 1000 studies to prepare this book, and at one point had closer to 750 references, before I narrowed it down.

But despite those references, I completely understand how confusing these times are. You can have competing messages being propagated under the claim of "science." You can have doctors saying the opposite thing, and both overwhelming you with information. And then there's the internet, which has become the ultimate source of misinformation in the 21st century.

I want you to be a savvy customer. To have the fundamental tools to understand the basics of clinical research. To know what the hierarchy of research is, and to sniff out the pseudoscience or the quack doctor when they're present. My hope is that you'll end up discovering what you need to hear, even if it's not necessarily what you want to hear. I want you to be able to find the truth through all the noise out there.

And with that in mind, I prepared this guide to **The Science of Fiber Fueled**. I hope you enjoy it, and I hope it helps you in your quest to better health.

Onward together!

THE SCIENCE OF FIBER FUELED

RESEARCH 101: A BEGINNERS GUIDE TO NAVIGATING INCONSISTENT HEALTH INFORMATION

WHY DO WE NEED SCIENCE?

Because without it, we know NOTHING.

There are laws of nature that exist and our entire world is built around them. They are absolute and reproducible. When we properly understand them, we can manipulate them to our advantage.

They are working right now, literally as you read the words on this page. They are everywhere and all encompassing. Whether we choose to accept them and whether we understand them or not these laws will continue to exist and continue to be the force that drives how our world works. And how our health works.

Science is the process we use to understand these laws of nature. It is our window into fields like mathematics, physics, chemistry, biology and ecology – just to name a few.

Proper science builds understanding and that means we get closer to the truth. It's incredibly powerful and absolutely necessary when your health lies in the balance.

ON A MOST BASIC LEVEL, How do we learn about science?

Through observation and pattern recognition.

We just discussed that the laws of nature are reproducible. What this means is that because they are reproducible, they will consistently show up to create a pattern. Science is the process we use to identify and study the patterns that define the laws of nature.

Our search for these patterns can be called research. You don't have to be a total nerd like me to do research! Every single one of us is doing research every minute of every day, we just may not realize it.

When you shoot a basketball and the ball falls short of the rim, and you suspect it's due to not using your legs enough, you are conducting research. Next time, you'll use your legs more. When you notice that your temper is short because you didn't sleep well the night before, you are conducting research. Next time, you will try to go to bed earlier. And when you have spaghetti with a heavy dose of tomato sauce, then get heartburn – once again, research.

What most of us think of as research is the formal process of describing these patterns, but it's the same thing we're doing throughout the day. When a person uses their experience, they are invoking the patterns that they've noted and accumulated through the years.

Here's my point: It all comes back to research. Every single choice that we make is the result of our understanding of the laws of nature. Every single one. In order to make the best choices, we should take advantage of the highest quality research evidence available. And there is an agreed upon hierarchy of evidence.



WHAT ARE THE DIFFERENT TYPES OF STUDIES?

When we think about making our health-related choices, the question becomes "What is the evidence?" There's a hierarchy that exists that allows us to gravitate towards stronger science.

The lowest level is the simple observation. We call this an anecdote, or **case report**. All science starts with these simple observations. The problem with anecdotes is that we're looking for patterns, and a single observation is only one data point. That's not a lot of strength for pattern recognition.

But if we start to stack observations on top of each other, now we're building power in terms of our pattern recognition. Two or more anecdotes would be considered a **case series**. If we collect information about a large group of people, it's called a **cohort**. The cohort can be collected retrospectively or prospectively. We prefer prospective because this is less prone to bias because the data can be collected in real time whether than trying to be accessed and collected in hindsight. These cohort studies could include thousands and thousands of patients, allowing us to use powerful statistical methods to find patterns and actually have confidence that they are more than just chance.

But if we want to truly know what something does, the best thing to do is a **randomized, controlled trial**. *Randomized* means that people are randomly assigned to one of two different groups. *Controlled* means that one of the groups is going to receive a standard treatment, such as a placebo. It is even better if the investigators and study participants are "blinded", meaning they don't know who got what intervention until the study is done. This entire study format is designed to help us avoid bias because, as you'll see, bias is our biggest threat to quality research.



But there's a problem. How do you study rare events or things that can take years or even decades to occur?

It's impossible to do a randomized, controlled trial for diet and cancer or diet and heart disease. But those are our top two killers. So how can we study them?

The way to do this is to combine different modalities. We start with the large population studies like cohorts, and analyze the data to identify patterns associated with the development of heart disease or cancer. Then, we look at mechanistic studies. These may include **test tube studies**, **animal model studies**, or human studies using a **biomarker** or intermediary endpoint. *When multiple different layers of research all point in the same direction then you have tremendous power. And that's what ultimately leads to scientific consensus.*

All of this is to say that every type of study has its own strengths and limitations. Let me show you:

STUDY TYPE	DESCRIPTION	STRENGTHS	WEAKNESSES
BASIC RESEARCH (Animal models, genetic engineering, cell studies, biochemistry, genetic studies)	Laboratory research aimed at improving our understanding or prediction of natural phenomena.	Allows us to study mechanisms of disease in a controlled environment on a very basic level	These are not studies of real humans under real living conditions and therefore must always be taken with a grain of salt because they often do not translate
CASE REPORTS/CASE SERIES (anecdotes)	Description of a singular or multiple human experience	Can be used to form hypotheses or describe an experience for rare events (such as complications after therapy or treatment of rare conditions)	The weakest form of research, it has virtually no statistical power and therefore is highly subject to chance findings

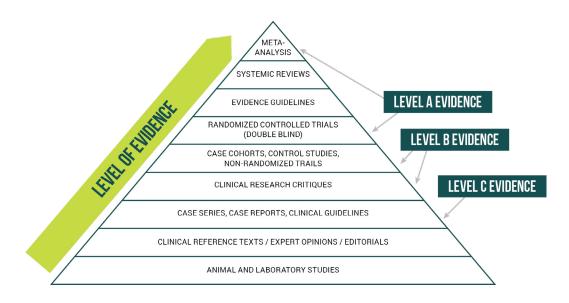
STUDY TYPE	DESCRIPTION	STRENGTHS	WEAKNESSES
EPIDEMIOLOGY STUDIES (Case control, Cross- sectional, Ecological)	These are retrospective methods to identify patterns and factors associated with health and illness states contained in a certain population.	Low cost, can quickly obtain data and information, highly useful for rare or slow forming or new diseases (like the Coronavirus), can identify associations that are followed up in further study	They provide association without being able to prove causation and there is a risk of selection bias and faulty recall
COHORT STUDIES (Prospective or historical)	A large population that is organized and monitored specifically to detect connections between exposure and development of disease	Strong statistical power and actual data monitoring the human experience over time	More expensive, can take years to develop, do not prove causation, may be unable to adequately capture rare or slowly forming events
INTERVENTIONAL CLINICAL STUDIES (Clinical trials involving drugs, devices, supplements or nutrition)	Groups are randomized with one receiving a specific intervention while another is the comparison group (placebo)	When properly done, these are the strongest studies available because they allow us to control and isolate to see the effect of an intervention	Extremely expensive, can take years to develop, may be unable to adequately capture rare or slowly forming events
SECONDARY RESEARCH (Systematic review and meta-analysis)	A systematic review is a methodical and comprehensive review of the research on a topic while a meta- analysis is when the data is compiled into one	When properly conducted they bring forward the best available evidence for a focused clinical question and attempts to reduce bias and pooling samples to increase statistical power and confidence	The details of the individual studies being compiled should be reviewed and understood and there is a risk that these studies are substantially different and not well suited for pooling data

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As mentioned before, there is a hierarchy to our research. We're supposed to give priority to the highest quality research. That's not to say that the strongest study automatically wins, but rather we need to weight the evidence

When you're thinking about research, here's the method that I personally follow and used in writing this book:

- 1. Start with your question. For example, "What is the strongest predictor of a healthy gut microbiome?"
- 2. Do a thorough review of the published medical literature.
- **3.** Look at the entire body of evidence that you discovered in your review.
 - A. Does it all point in the same direction? If all layers of evidence point in the same direction laboratory, translational, population-based and interventional studies then you have very strong scientific power. This is how you rapidly form scientific consensus
 - B. Are there discrepancies? Does one study say one thing, while another study says the opposite? Then this needs to be rectified. In doing this, you need to look at the details of the study to have a complete understanding of the strengths, weaknesses, and limitations of the studies. Most of the time, we are going to prioritize the findings coming from the studies higher on the hierarchy systematic reviews and meta-analyses, randomized trials, prospective cohorts. Not always, but most of the time.



In writing *Fiber Fueled*, you will find that I opted for the highest quality evidence wherever available. For example, I was fully aware that there have been numerous books villainizing legumes and whole grains. Most of the arguments that have been made have been selectively sharing with you the animal model and test tube research. But when I looked at the weight of the evidence, I saw quite clearly how healthy these foods are. It was incontrovertible. And so I shared with you the high quality studies – systematic reviews and meta-analyses, randomized trials and large scale population studies – that consistently demonstrate that humans live longer and healthier lives when they consume legumes and whole grains.

Take a step back for a moment and consider what I've just told you. You have been sold fad diets through the years that are cherry picking animal and laboratory studies but ignoring systematic reviews and meta-analyses, randomized trials and population studies. Take a look again at our pyramid of evidence. You are being fed low quality research while the opposing high quality research is being ignored. You now understand that that's a formula for misinformation, not high quality science. So should we be surprised that these fad diets never stick, and that ultimately we discover that they don't really work? Of course not, because the science is WEAK.

CAN YOU PROVE ANYTHING WITH A SINGLE STUDY?

Generally not. Here's the thing... It always starts with a clinical question. For example, "Are whole grains healthy or not?"

In *Fiber Fueled*, I share with you a systematic review by Dr. Dagfinn Aune and a team of epidemiologists at the School of Public Health of the Imperial College London. It was published in the British Medical Journal, one of the top medical journals in the world, in 2016. In it they did a systematic review of 48,380 studies, of which they included information from 45 cohort studies relevant to

whole grain consumption and human health. These were studies from around the world. And in this one systematic review, they yielded a powerful result – increasing your daily whole grain consumption by just two pieces of whole grain bread rewarded the participants with a reduced risk of coronary heart disease, cardiovascular disease, and total cancer as well as lower likelihood of death from all causes, respiratory diseases, infectious diseases, diabetes, and all non-cardiovascular, non-cancer causes.

Sounds convincing, right? And it is in fact a systematic review and metaanalysis, which is at the top of the pyramid. But in order to properly answer the question, we should be doing a complete review of the available evidence, and then consider the weight of the evidence. If the weight of the evidence, including that systematic review and meta-analysis, supports that whole grains are healthy then we need to stand in support of whole grains.

And as I show you in *Fiber Fueled*, this isn't the only evidence to support the healthful properties of whole grains. In Chapter 2 I shared the study by Genoni et al. where a long term paleolithic diet, devoid of whole grains, was associated with changes in the gut microbiota that increased the production of TMAO, a blood marker that's been connected to increased risk of heart disease, stroke, diabetes and chronic kidney disease, among others. Then in Chapter 4 I shared additional prospective cohort studies, systematic reviews and meta-analyses further connecting whole grains to reduced risk of heart disease, stroke, and diabetes, among others.

I spoke before about looking at the entire weight of evidence. When it comes to whole grains, there is consistency among the highest quality evidence – whole grains heal and are anti-inflammatory.

WHAT IS BIAS AND WHY IS IT THE BIGGEST THREAT TO SCIENCE?

Bias is the conscious or unconscious prejudice that one has towards a particular topic. It's a very loaded, complicated matter because bias can be unconscious. If you believe a certain thing to be true, you may not even realize that you tend to favor the studies that confirm what you believe to be true

This is a huge problem when it comes to science. The highest quality science comes from a place where we relieve ourselves of any and all bias, and allow the research to speak to us. As I've already laid out, you use the weight of the entire evidence to determine what the science is saying to you.

This process relies on the absence of bias to be true and honest. If there is bias by the researcher, then it will translate in the results. According to a study published in the British Medical Journal, industry-sponsored research is four times more likely to yield a positive result than unsponsored research. This is a huge problem.

But it's equally problematic in our interpretation of the research. If we have a bias that we seek to fulfill, whether conscious or unconscious, then we are much more likely to interpret what we read through that context.

It's one thing when we have our unconscious bias. But it's a much bigger problem when it's overt and conscious. The more overt our bias, the more aggressive we will be about twisting research to make it what we want it to be.

Sadly, you see this happen online. There are people who seek out the source that tells them what they want to hear. They then elevate that source, while simultaneously discrediting the opposing view.

Another example is the "expert" who has an agenda. Unfortunately, there are

people who make a living off of an idea. Independent of the scientific merit of that idea, if they make a living off of it then they are going to be far more likely to support that idea through their interpretation and dissemination of research. In some cases, this is mild. But in others, it can lead to people who flat out reject the scientific consensus and choose to promote ideas that fall somewhere on a spectrum between bad research to misleading to flat out lies. It's scary because they only drag you further away from the truth.

HOW CAN WE FIND THE TRUTH Among all the noise?

I have to tell you, I'm quite fearful of people and their conspiracy theories. I've heard so many patients tell me their theory that organized healthcare, including doctors like myself, actually want people to be sick so they can make money off of them. Wow. That's terrifying to imagine. But it's also completely untrue.

No one goes to medical school, devotes their life with long days and nights of work and routinely taking call in the middle of the night, just so they can inflict harm on people for their own self gain. Let me be real – if it was about the money I would've gone into banking.

After college, I earned a medical degree and a master's degree, spent 8 years working 80 hours a week in my residency and fellowship for less than minimum wage, accumulated massive loans that compounded their interest, and at the age of 34 finally emerged on the other side able to start my career. Life would've been a lot easier if I chose a different path, and with the grades that I obtained in order to get myself into medical school I had plenty of options of what direction to go.

But with that said, there are definitely people out there who have an agenda. Just because they tell you what you may want to hear doesn't mean that they

are telling you what you should hear. Just because they are a doctor doesn't mean that they are telling you high quality research or the truth.

We have to be prepared to find the highest quality sources and the truth among the noise. Trust is an important concept. We need to be careful who we are trusting with our health - it's too important. And we have to get away from seeking out the opinion that tells us what we want to hear. We have to be willing to find the person who tells us what we NEED to hear, instead.

When evaluating your experts, I'd encourage you to consider these points:

- 1. What qualifications do they have to make them an expert in the field?
 - A. Beware the person speaking outside of their expertise. Just because they went to medical school doesn't mean they are qualified to speak on any and all related health topics. I'm board certified as an internal medicine doctor, but I would never claim to be a heart expert or brain expert. There are people who do years of training on those subjects and I am not one of them.
 - **B.** You should also be careful with the person who "claims to be an expert" but doesn't have the formal training. These people will often make claims that they know more than those who have formal training, which is an attempt to erode confidence in the institutions that train our best and brightest.
- 2. Is there something they want you to purchase?
 - **A.** For example, do they claim to have a supplement that will fix the problem that they helped you identify? Beware the person who is pushing you towards a purchase where they actually reap a financial reward.
- **3.** Do they make claims along the lines of, "Everyone else is overlooking or missing this one important point, and I have discovered the solution to all of your problems."
 - A. Beware the "lone wolf" who claims to have the cure all. Or the person who claims that the entire scientific world is missing a key point, and that they have found that point. Almost every single time, they are promoting bad science. Once or twice a generation a scientist will make claims such as these and

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subsequently prove to be right – but those are the ones that we give a Nobel Prize too. They're not the ones peddling a fad diet. There are zero authors of a fad diet who have been considered for a Nobel Prize.

- **B.** You should look to see who else supports the assertion of this person. Is there literally anyone from the scientific community willing to step forward and agree with the principles? Or is there universal rejection by the scientific community? Are their only supporters the ones who share the same beliefs? These are all things to consider.
- **4.** Do they overtly promote low grade science (test tube studies, animal studies, anecdotes) but ignore the high quality evidence (systematic review and meta-analysis, RCTs, prospective cohorts) that say otherwise?
 - **A.** These are overt signs of an agenda. The only way to get your argument to work is to ignore the research that stands in the way.
 - **B.** Be wary of testimonials, which are meant to convince you of something without necessarily having the science to back it up.
- **5.** Do they consistently reach the same conclusion, even when they are presented with research that would suggest otherwise?
 - **A.** If they always seem to figure out a way to reach the same conclusion, no matter what research you throw their way, then it seems that they likely have an agenda that they're trying to fulfill.
- **6.** Have they taken a position that is anti-science? Claiming that research is flawed and therefore shouldn't be trusted, or that everything is corrupted and therefore cannot be trusted?
 - **A.** These are arguments made with the intent of tearing down or marginalizing research, which once again is an overt sign of an agenda. You tear down or marginalize research that doesn't fit your agenda because it stands in the way of your argument.
 - **B**. Be wary of the person who shoots down science by saying, "I'm a unique individual and that's not true for me!" Science is not perfect and we do not

expect it to predict everything, but it is our tool to draw closer to the truth and to degrade it based upon a single individual's experience is effectively the same as prioritizing anecdotes over high quality research studies.

A FEW CLOSING THOUGHTS.

It's a more confusing time than ever, and that's largely due to the internet and the absolute flooding of our mind with information. It seems like everyone out there is hoping to get in our head and alter our thoughts with their ideas. It is our responsibility to act as the gatekeeper. We need to determine which information we choose to accept and let in. If we opt for high quality information, it brings us closer to the truth and we can use that information to enrich our lives. If we allow low quality information, feed our biases, or choose bad experts, then we will end up less healthy and confused. Now more than ever we need to use the concepts that I've laid out in this document to find that higher quality information. And then, we need to help our friends and family find this information by elevating and celebrating high quality information when you find it. If you enjoyed this research guide and found it helpful, tell your friends to check it out. If you loved my book, share it on your social media. If you found a podcast that was useful, do an Instagram story about it.



AND NOW, WITHOUT FURTHER ADO, All 600+ References from Fiber Fueled!:

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CHAPTER 1

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CHAPTER 10

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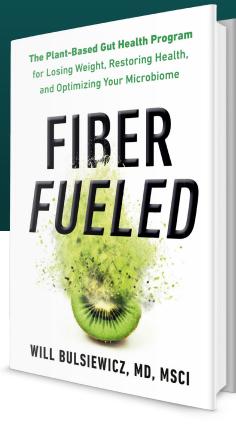
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