



- Matthias: Guys, welcome to The Chief Life podcast. I'm Matthias: Turner joined by co-host Stacey Lee Turner.
- Stacey: Hey guys.
- Matthias: Today we are lucky enough to have Steph Lowe on the line. Steph, welcome.
- Steph: Thanks so much for having me.
- Matthias: So to give you a bit more of an introduction, the National Nutritionist, is your website and your hub but from there you've also created a whole heap of other content. You also run a podcast which is called The Real Food Reel, correct?
- Steph: Absolutely. We sure do.
- Matthias: You've also written some books. The Low Carb Healthy Fat Nutrition is the latest one. Before that you also had-
- Stacey: No, High Fat.
- Matthias: Sorry.
- Stacey: Low Carb High Fat.
- Matthias: No, Healthy Fat is the book name, sorry.
- Steph: Oh sorry.
- Matthias: And then The Real Food Athlete is the other one that you've written?
- Steph: Yeah, that's correct. Absolutely.

Matthias: I guess before we dive too deep into it, could you just give us a little bit more of a rundown on who's Steph Lowe?

Steph: Yeah for sure. I've been practicing as an LCHF, so a Low Carb Healthy Fat nutritionist since 2011. That's when I started The Natural Nutritionist but if we take a step back, I definitely had my own personal journey with food. I don't know how much time we've got but essentially, I had some issues with food. I'd probably call it disordered eating to summarize it, as a teenager. The flow-on effect for me which I can now see was because I wasn't eating any fats, which of course our brain needs to thrive, was some mental health issues that I definitely was pushed towards the pharmaceutical route. I never went down that route thankfully but I'm talking like 15 years ago now before real food was vogue, before we knew what gluten was really. I was encouraged by a good friend of mine to try going gluten-free. He thought that would help how I was feeling. I was super-skeptical but I was pretty desperate. I didn't want have to take pharmaceuticals. I wasn't feeling happy and I didn't really feel like I had another option. So I dove in. For me, quite, I guess mindblowing at the time, was that it was a real 180. Gluten-free was the catalyst, but it really led me to dive deep into the impact that food has on our overall health. We know gut health and the second brain, but we definitely now know the impact that food has on our mental health. For me it was really powerful to learn that firsthand all those years ago and it definitely was the catalyst for me to go back to uni and study nutrition so I could officially share that message as a qualified nutritionist, which is something I've been doing for over seven years now.

Matthias: That's super cool.

Stacey: That's awesome.

Steph: Thank you.

Stacey: I think having you said you didn't know how much time we had. We would usually go for about an hour, but let us know if you need to go before that. We love learning about the story behind the person because that is probably what led you to be where you are as it has in this case, that lived experience. It almost, correct me if I'm wrong, but it almost makes it ... having that adversity then allows you to have a better approach to help other people because you've experienced it yourself. Do you find that?

Steph: Yeah, absolutely. I think if you'd always just found food really easy, maybe if you'd always been at a really healthy body weight or never had any kind of health complications yourself, you wouldn't really have that ability to relate with your clients when they have challenges in whatever area it might be. I definitely, back in the day in say, my teenage years, I was what I felt was really overweight and it was a huge struggle. We all know being a teenager is not the easiest at times, let alone when you're carrying a lot of puppy fat. And I've always had that metabolism that needs a little bit more work. That's, I think, been the journey per se, but it has really allowed me to understand other

people's challenges. I do a lot of fat loss to this day, whether it be with athletes or general people that are looking to achieve that ideal body composition. And yeah, I agree with you, if you've got that firsthand experience of what needs to happen, there's no magic pill obviously, but it's the sum total of everything that we achieve.

Matthias: Yeah. When we go out and do nutrition workshops at gyms, we'll often tell our story just to let the guard break down because what we find is, until people hear that, they just think we're freaks. They like, "Well, you guys have it on track. You must have it easy."

Stacey: You guys find it so easy.

Matthias: It's like, "Oh yeah, we've all had our own nutrition journey. Like I think anyone in this realm probably has had some sort of nutrition journey that's going to lead them somewhere that wants to help others because it's like, 'Oh, that's what I was missing' or 'Oh, this is what works so well for me. How can I help everyone else now to see that as well?'"

Stacey: Yeah, I guess they've also chosen to see it as a blessing rather than a curse. They've kind of used it to then educate themselves and others rather than just being like, "Oh, why me? It's so hard kind" of thing. So it's really cool to see you being out there and helping everyone.

Steph: Yeah, and it was a hard story to share initially. Like I dive into sort of the deeper details of the story on my website for anyone that wants to learn more, but I remember feeling so vulnerable the first time I shared that story, but because it's helped so many people, I do keep talking about it to this day.

Matthias: Yeah. It makes it more empowering when it's like that as well. You're like, 'Oh, that person got a lot out of that. That's really cool'. Can you explain a little bit more like what is the low carb healthy fat nutrition? Is it essentially keto but your spin on it or is there a difference?

Steph: Yeah. Oh, I like this question. Yeah. So I use the acronym LCHF, which can be defined in a couple of different ways, but intentionally mine is low carb, healthy fat nutrition-

Stacey: Which I already got wrong.

Steph: ... I do live ... It's okay. A lot of people know it is low-carb, high-fat but I deliberately actually don't use the word keto or ketogenic. I explain this more in my upcoming book, but I think there's quite a lot of confusion and definitely this current division as to what the exact definition of a ketogenic diet is. A lot of people assume it's that 25 grams of carbohydrates per day, which we know has amazing therapeutic benefits. The research is clear how life-changing it can be for children with epilepsy. It's used again as a therapeutic agent for obesity,

Metabolic Syndrome, Type Two Diabetes, those cluster of diseases which we know are caused by insulin. So naturally ketogenic would be really helpful in those health, I guess crises. But I don't think a lot of us need to be having such a low intake of carbohydrates, especially when we look at our non-starchy veggies, our low sugar or low glycemic fruits and that resistant starch conversation, which we can have in that gut health area. We need to make sure that we have a personalized approach. So with low carb, yeah, it's lower than the food pyramid and that's a bloody excellent thing because the food pyramid tells us to eat 400 or 600 grams of carbohydrates per day from refined carbohydrates, which we know are not food. So I think we've got to use LCHF and personalize it.

So things like genetics definitely count but your current level of carbohydrate tolerance or intolerance and definitely your activity levels. If you're doing high intensity or glycolytic exercise, you won't be able to do that with 25 grams of carbs a day. People definitely try it and it ends pear shape. So I'm really passionate about making sure we think about low carb as being a sliding scale from as low as 25 grams of carbohydrates per day up to about 150, which is for someone who's lean, really active, tolerates carbs well and obviously maintains all those conditions with the 150 grams of carbs each day.

Matthias: So in regards to your healthy fats, is there a very finite window that you kind of look at or is it quite broad?

Steph: It's always going to be a seesaw. So if your carbs are super low then naturally your fats are going to be very high. So in that sort of Type Two Diabetes or that Metabolic Syndrome realm, we're talking about 5 to 10% of your daily intake from carbohydrates. Protein's usually fixed say about 20%. So then obviously our fats are going to be 70, 75, that really, really high intake. That's going to look quite different for someone who's doing maybe 20% carbohydrate or 25% carbohydrates. So it's going to obviously come down to your overall intake because that percent is a percentage of the total calories which will give you the total grams of carbohydrates per day. Yeah, the fats are going to be that seesaw relative to the carbohydrates. We focus on two main groups. Number one are the Omega 3s, our anti-inflammatory fats, so nuts, seeds, olive oil, avocado, you know the deal, but we're also including those really important saturated fats. So that's going to come from the pasture-raised animal proteins, certainly grass-fed butter, coconut oil, MCT oil, and you can take a deep dive into using things like tallow or lard, especially if you're in that real paleo realm but there are a lot of options. It just needs to be quality as that number one goal.

Matthias: Yeah, it's funny, I've got a lot of people at the gym that I work at, who are trying out keto. When I say keto in inverted brackets, it's because they said, "Well my friend's doing it and she eats a lot of cheese and I think that sounds great. So I'm going to start keto and I'm going to eat a lot of cheese each day and that will be it." I'm like, "So how many grams of fat a day are you doing?" She's like, "Oh ... "

Stacey: "I'm not counting counting."

Matthias: "No I'm not counting. I'm just doing it. I just don't eat as many grains or anything like that anymore." I'm like, "Oh my gosh."

Stacey: Yeah, taking the bits they want, but it's not the whole package.

Matthias: Exactly.

Steph: Yeah, I didn't actually say cheese. You would have noticed that.

Matthias: Exactly. I was going to say what is the approach to dairy in general with it?

Steph: Yeah, good question. I mean, I think dairy is a really individual decision. I think quality is going to be number one. Not many of us tolerate cows very well. We don't have the enzyme lactase as adults, so we don't have the ability to break down that milk sugar, that protein that's found in dairy. Some people tolerate like the A2 or the goat's cheese or even like the sheep's milk cheese a little bit better. I look at it as a sometimes food. I think one of the reasons why keto gets that criticism is because we see these plates of bacon and cheese, and we don't see any vegetable. We just don't see the balance with the rainbow and that nutrient density. We really want to make sure that plants are the hero of the dish. Definitely non-starchy veggies should be the bulk of what we're eating in a well-designed LCHF template.

Matthias: Yeah. Cool. No, that's really good to hear. And I mean like you said, it just gets misread and so many people ... or it gets a bad name is a good way to say it, I guess because of that.

Matthias: Have you heard of Dr Mercola? Are you-

Steph: Yeah.

Matthias: ... familiar with any of his work?

Steph: Yeah, for sure.

Matthias: Yeah, so it's really quite good and something that I really love about his work on the higher fat intake and low carb is all about making sure you get your fibers in and making fibers a non ... It's kind of like you don't have to pay for it that day. Like, "Hey, you can eat the fibers and it's not going to go towards your actual count of carbs for that day to some extent" but we're not talking about like, "Oh, Tiptop is the one, Mom" we're talking about like actual real food where you can-

Steph: Actual vegetables.

Matthias: Exactly. Vegetables. "Hey, don't count vegetables today because that's not part of your carb count", which I find is actually pretty cool.

Steph: Yeah, I think counting vegetables is honestly, it's ... Unless again, you've got this strict template that you're following to try and reverse a disease. I really think that we're missing the whole point if that's what we're cutting out, especially when we look at the impact of fiber on gut health and the importance of the prebiotics, which are often found in vegetables or predominantly found in vegetables. That's something I think that people who are taking that deep dive into keto aren't considering. So they're essentially starving their gut bacteria, which we know can have a whole host of problems and definitely needs to be avoided.

Matthias: Yeah.

Stacey: Yeah, for sure.

Matthias: So how about when you're looking into specific body types? Like I mean we've got the string beans compared to the rotund people, like what do you do in regards to those people? Is it always the same percentage of your macro nutrients or you do start to vary depending on what they're doing and what, I guess more so around the body type is what I'm asking?

Steph: Yeah, no, for sure. I mean LCHF does have like a definition as to what it might look like. So the real kind of standard is that 15 to 20% carbohydrate, 20% protein, 60 to 65% fat. That's going to differ because if it is someone who's quite lean and very active then they usually have a fairly good carbohydrate tolerance, so we would push the boundaries and increase that percentage and bring down the fats accordingly. Some people need to go a little bit lower, but I would say definitely not the majority. We would do blood tests and look at things like blood glucose levels, HBA1C, which is that three-month trend of essentially our carbohydrate tolerance or intolerance. We do a whole host of inflammatory markers as well. And that can help shape that personalization a little bit more because we know that carbohydrate intolerance is caused by the food pyramid and it's reversible, right? So you might have to be on a lower percentage of carbs initially, but as your tolerance improves, you get more. So that's the whole point.

Matthias: Yeah, definitely. And so-

Stacey: Win-win.

Matthias: ... if you haven't got bloods, how do you gauge someone's tolerance to carbs? Is there anything that you do in particular?

Steph: Yeah, the big thing is looking at your meal-to-meal satiety, that magic S word that I use all the time. How long does it keep you full for? A lot of people find it completely mind-blowing that you can get, say five hours out of a meal. They're in that gym space definitely but a lot of us have been told in the past to eat every two hours to speed up our metabolism. That's one of the biggest myths in

the health and performance space, which is BS. It's definitely funded by big food. So satiety is the big one. So you set up that blood sugar control when you build your plate from your non-starchy's, your quality protein, your healthy fats, you're going to get that five hours as satiety and many people get even more. But if you don't, usually there's too many carbs, not enough fat or a combination of the above. So you've got to tweak what's on the plate and start to look at the meal-to-meal window. Then next in line is obviously what that overnight fasting window is. If you have a fairly low carbohydrate tolerance, you've got poor blood sugar control. You're needing to eat as soon as you get up. The thought of delaying breakfast would send you into a bit of a craze. So there are some signals as well that that natural ability to burn fat between meals and overnight.

Stacey: Do you also find though that when people are looking to lean up and you're getting them onto a more balanced approach of eating quality protein, non-starchy veg and good choices of healthy fats, they might still get hungry in a shorter space of time because they're at a calorie deficit? Or should they still have that satiety moving from that meal to the next meal?

Matthias: So you're talking about like that first initial period of transition of course?

Stacey: Yeah like when they've been eating a certain way and then we're choosing to get them eating a healthier way, to start achieving their goals and changing their tolerance levels. Do you find that there is going to be an expected period of hunger because of the transition or should they feel like they should immediately be able to have that satiety there?

Steph: So there's this metabolic gray zone thing that we talk about, which is the four to seven days where you're switching from being a sugar burner, someone that's eating lots of carbs, especially refined carbs, looking like the food pyramid, until your body can actually access fat as a source of fuel. So over that period of time, maximum a week, there's going to be, yeah, maybe some adjustments, definitely some detox. If you've been eating a lot of junk and sugar, that's going to be a part of the process as well. Hunger is also very learnt so you can have this ghost hunger at a time where you would normally eat. So breakfast is a really common one of that. People are always eating at 7:00 so they get up at 7:00 and they think they're hungry. A lot of the time we could have breakfast a little bit later but again, we've programmed the body to be eating at these fixed times. We've been very robotic and on the clock with our meal times for so long. So there's the unlearning of that. Interestingly, most people, at least a lot of us have calorie counted in the past. Unfortunately many people have done 1200 calories or less and when you do LCHF and let's say I start, let's just call it like a female client, she's 30 and she wants to lose body fat. Let's say I have put her on 1600 or 1700 calories. I mean the detail we have to go into to make her feel comfortable with that extra calories in the first place is where we spend a lot of the time because it's obviously what feels like a huge jump from someone that's probably been eating 1200 and starving themselves for how long. But the interesting thing is, obviously because the insulin response is low because the

carbs are low, we can burn fat so this woman can finally learn how to lose body fat without starving herself. And you can get really great meals if you divide that 1600 into three meals. Obviously they're really decent sizes and that's where you get the satiety value that five hours between meals as well.

Stacey: Yeah, for sure.

Matthias: Yeah, it's so interesting when we send someone a meal plan. They're like, "Oh my God, that's so much food. Are you sure this is for me? Have you seen my daily output?" I'm like, "Yeah, that's definitely for you."

Stacey: Yeah. "Don't you have any less than this."

Steph: Absolutely.

Stacey: "This is your minimum."

Matthias: Yeah, exactly. "This is your minimum." Yeah.

Steph: Yeah. And some people will be eating like 2000, which is mind-blowing for them, but obviously if you're more active and so on and so forth, those numbers just ... yeah, literally people fall off their chairs. You guys would've experienced that firsthand. So it's a really good lesson to learn firsthand.

Matthias: Yeah. We actually find commonly across Australia from what we see, people under-eat or over-eat the wrong macronutrients, is usually the big thing. And probably a combination of both really.

Stacey: Yeah. Everything you're saying I'm like, "Yeah, that's exactly what we're experiencing"-

Matthias: Yeah.

Stacey: ... but I think it's nice to be able to ask somebody else and then our listeners to hear that there are multiple health professionals around Australia that are focusing on like real health and eating real food and approaching this in a way that is, I guess unconventional, but hopefully becoming the new conventional.

Steph: Oh yeah. I'm not gonna stop until it is.

Matthias: Yeah.

Steph: But the counting thing, I just wanted to say like, I don't know if you guys are the same, but people are resistant to counting or to logging. I don't want someone to be in jail and do it forever, but how do you know what you're eating if you don't know what you're eating, right?

Matthias: Yeah.

Steph: So when you add healthy fats, yeah, they're more than double the calories per gram of a carb and a protein, so quite easily you can get the calories up. That's mostly a good thing, but you can still eat too much, right? You can still eat too much avocado or too much total percentage of calories from fat, so you've got to get into Easy Diet Diary or My Fitness Pal or whatever you guys use and learn because it's a really important educational piece.

Stacey: Exactly and then once they've had that initial period of logging and understanding, then they can go to a more intuitive eating style because they kind of know how much their body needs and then do a recalibration every now and then.

Steph: Hundred percent. Love it.

Stacey: That's awesome.

Matthias: So how about when you were working with more specific sort of people like, "Hey, I want to come and I want to gain some muscle." Is Low carb, high fat going to be a good diet for this?

Steph: I definitely think it can be personalized in the right way. They're definitely going to be that top-end, 150 grams of carbs per day. We can go up to 200. The definition changed a few years ago down to that 150. Essentially in that instance, I use this concept, which is carbs-to-the-plate last. Now, not everyone understands that straightaway when I talk about it, but really we don't want the more complex carbohydrates like the sweet potato to displace the greens and the proteins and the healthy fat. So we need lots of plant material, small portion of quality protein, then we add our healthy fat. Then of course we can have whether it's the sweet potato or maybe it's a banana or nut smoothie or whatever that looks like, a whole food carbohydrate.

Someone that's really active that wants to put on size might be able to have like quite a few portions of complex carbohydrates across the day, but they still want blood sugar control. They still want maybe three hours between meals for that digestive ease, that practical and logistical side of not having to literally carry like 14 eskies with you around during the day. We've got to think about the longevity of some of these programs where it's literally just like buckets of food 24/7.

Matthias: Yeah, yeah definitely.

Stacey: And because you do have such a good emphasis on quality of food, do you work out somebody's percentages and give them their grams of each macro for the day and then guide them on the food options as well? Like with essentially a

meal plan? Or is it more like, "Okay, here's a list of areas that you should look at now, go have a play and see what you can come up with"?

Steph: A bit of both. Like I don't personally love meal plans because no one follows them. No one follows them to a T. I think initially they can be a really good guide for someone to see, "Oh. Yep, that's what I mean by carbs-to-plate last" or "That's how I fit veggies in at breakfast" because that's something that people haven't done like historically, at least in the west. So it can give someone a really good idea of how to start, but I break down. I spend more time talking about that build your plate. So how many veggies? What size of the palm or the grams of protein? How many portions of fats? Because then you can just put together a meal.

I don't know about you guys, but I think probably 9 out of 10 meals that I make is not from a recipe book. It's just putting together, making sure it's on a plate and in my mouth, in about 20 minutes so that you're obviously not taking up a lot of time and turning this into something that's not sustainable.

Stacey: Totally. Yeah. We call it building the puzzle.

Steph: Yeah, nice.

Stacey: So making sure you've got all three macros every time you eat. Then like essentially, we are a meal-planning company, but I often will get to a workshop and say, "I don't give a fuck about the meal plan." It's actually just a vehicle of education, like an easy way to show you recipes and what components are protein are carbs are fats and then you can move it around like you pick, 'Okay, which protein, which carb, which fat do I want today to build the puzzle'" So yeah, very similar concept there around..

Steph: Yeah. I think that's a really important lesson because people get so stuck to it and then when it's not there, they don't know what to do but (threw my microphone around here). I'm getting excited- they don't know how to eat beyond that meal plan and then when it stops, shit hits the fan. So it's really important that they know how to move things around and there's preferences and families and busy lives to factor in as well.

Stacey: Yeah. You just made me think of mindset, like how you said nobody follows it and then they do feel like they failed because they set themselves up on this pedestal to go, "I have to follow this exactly as it's written." It's like, "No, you don't. It's just a way of helping you to understand what real food is" and then changing their perspective around how to ... I guess put themselves into like what is failure and what is success. It's like redefining it for them. So do you center any of your stuff around mindset because obviously food is food and we can tell them what to do, but then there's the compliance piece as well.

Steph: Yeah. And compliance is huge, right? Like that's where it's really fascinating because there's so much horse-to-water being a nutritionist. Like I can't follow you around. I can't cook your meals for you. There are other companies that can do that but yeah, a lot of it is about getting them to understand that it's a lifestyle, not a diet, as cliché as it sounds. I'm very happy with someone's 70/30 or 80/20. What I mean by that is we're not trying to find that magic perfection that doesn't exist. It's really about starting something that you feel is a forever thing. I think LCHF is just real food. So technically all of us should be thriving off our own version of that. There's no point doing something that you can do for 8 or 12 weeks and so it is breaking down some of those barriers, if there's been that sort of diet mentality in the past, which usually is all or nothing unfortunately, which we know doesn't work.

Matthias: Something that I love is the ... around your book, *The Real Food Athlete*, we get a lot of people come to us who think because they're an athlete, they can get away with eating certain foods-

Stacey: Whatever they want.

Matthias: ... like, "You know what? I look good, so therefore I must be-

Stacey: Really healthy on the inside.

Matthias: "... healthy. Yeah. So I'm just going to keep doing what I do." And they come to us and they're quite blown away with the amount of like vegetables and micronutrients we're pumping into them. Then all of a sudden they find a new good, like that new level of good, which is amazing. It's like ... I think people, and this is cool because the low carb healthy fat is a big thing for it as well, a big advocate for it, but it's like we need to get away from that flexible dieting scheme of, if it fits your macros.

Steph: Oh my God. I agree. I hate that so much.

Matthias: I know, right. Like in so many people-

Stacey: "I can eat a donut for my carbs Matty"

Matthias: Or ... Yeah. And if I can, you can. But what about when you're 80 and you are looking back at your heydays and you say, "Oh, I used to be able to eat that. Now I'm fat and I can't do anything." They go, "Now I've got disease"

Steph: "I actually have given myself Type Two Diabetes."

Matthias: Yeah, yeah, exactly. Like you did or are you just saying?

Steph: No. No I mean people do.

Matthias: I was like, "Oh did what?"

Steph: Like they don't make that connection because, could you imagine if I had Type Two Diabetes, that would be interesting. No like, you could only think about the long term implications of the refined carbohydrates-

Matthias: Exactly. Exactly.

Steph: ... but for an athlete, for me, the penny drops when they realize that food can either be anti-inflammatory or inflammatory and we know what we're trying to create as an athlete. Right? That anti-inflammatory environment is everything for your recovery, which equals your performance. That's obviously how we get the longevity out of our training sport, whatever it might be. So yeah, you might feel like it fits your macros, but if it's full of inflammatory ingredients, you're going to be impacting your recovery. And that's the last thing you want to do.

Matthias: Yeah, yeah.

Stacey: For sure.

Matthias: On our nutrition coaching program, it's like a 13-week minimum program, that's where we actually get to help people to understand like, "We're going to teach you how to count and do everything, but we're going to teach you how to do it properly. We're not talking about going out and eating donuts every day because that's your carb count. It's like, 'No, we need to make sure you're eating good quality food, making sure you're getting enough fiber in, making sure we're hitting your micronutrient numbers because without that stuff, you start to feel like shit."

Stacey: I love that you did mention about longterm, like longevity. How do you get people to care about that? Because obviously the three of us will care about prevention rather than treatment and we're thinking, "I want to drop dead when I'm however old rather than like a slow, horrible decrepitness later in life." So how do you help people to see that now when they're just like, "No, YOLO, I'm going to live out and eat whatever I want and I'll just deal with that later. Future Stacy's problem."

Steph: Yeah. Yeah. I always start by reframing someone's goals, like they're allowed to come to see me for fat loss or whatever it might be, but their number one goal needs to be health, because you can't have one without the other. So we sometimes spend a lot of time talking about that. Like let's talk about my made-up, 30-year old female that wants to lose body fat. Yeah, that's her number one goal and if she can't fit into her jeans, like she doesn't care about what she's going to look like when she's 70 right then, but I do. I think if you can change someone's focus especially away from the scales, then what they do say to you, "Oh my God, I feel amazing. I'm finally not hungry every two hours." Or, "I'm finally not feeding myself with chocolate or sugar or caffeine at 3:30 or 4:00. My

digestion's better. My sleep's better." All these amazing day-to-day benefits, which are the first benefits that you see. You're not going to see fat loss first, I hate to break it to you. It's going to be a little bit slower than crash dieting and losing water and losing muscle, but it's not yoyo-ing, right? Once it's off, provided you don't obviously reverse your ways, it's off forever. You've changed your entire metabolism and that's the key.

Matthias: Yeah.

Stacey: Going on from that, like yes, they're seeing all those awesome benefits, and then if the emphasis is not being on the scales, they will naturally start to lose weight without even noticing. And I love the thing you said at the start when we first started talking was around body composition. Because muscle-to-fat ratio is so much more important than the number on the scales because they could be gaining muscle whilst they're losing fat and the number on the scales isn't going to shift but ...

Steph: We know that.

Stacey: But yes.

Steph: A lot of people find that one a really hard one to believe.

Stacey: So swapping the bathroom scales for kitchen scales and being more conscious of what they're eating rather than how much they weigh. That's really great.

Steph: I agree.

Matthias: So in regard to your podcasts, you've done 185 episodes I think you've released? Or thereabouts?

Steph: You have done your research. Yes.

Matthias: So with that, is there anything that you ... like any episodes that you're just like, "This is my gem. This is the ones that I want to recommend to everyone." Like if one of our listeners are listening to this and they said, "I want to go check out" what's the episode they should listen to?

Steph: Well I'm massively into gut health at the moment. So we haven't spoken too much about that today, but recently I recorded an episode with myself and Elly, one of the other practitioners that works for me at TNN and it's called Detecting Dysbiosis. We had a lot of amazing, a kind of conversation on social media and questions interest on that because A) gut health is a really vague topic, but B), I think a lot of people are getting it wrong. So we went through a lot of the myths and broke down a lot of what we see on Facebook these days because that's what people are talking about, but it's not a one-size-fits-all approach. So that

was a really awesome episode that was released only a couple of weeks ago now.

And I love talking about longevity and things like time-restricted feeding. So there's a few episodes, one sometime back, I did with a researcher. His name is Dr Satchin Panda and he researches time-restricted feeding and that was super interesting. So I'll send the link for that one to you guys as well.

Stacey: Awesome.

Matthias: Yeah, cool.

Stacey: Very cool. And while we are talking about gut health, because something I love to talk about to other nutritionists is around this stuff. Obviously there's so many different options and suggestions out there. Can I ask you about your opinion on legumes? A lot of people say that they need to be activated before we can utilize them but then there's a lot of people saying that plant-based is the way to go for anti-inflammatory, whereas I've heard it the opposite. So I was just curious to see what your research has led you to.

Steph: Yeah, I think it's going to be individual. So people that have leaky gut or some sort of an autoimmune issue or fairly poor digestion, whether it's like a typical IBS or bacterial overgrowth in the small intestine, they're probably not going to tolerate legumes straightaway. They are the fermentable carbohydrates. They probably don't have the digestive capacity for those foods. So there might be a 30-day elimination phase. Then the ability to like test things like activating the legume to see if that makes a difference, but then from there, I think that a lot of people when they fix their gut, so when the underlying issue is treated, they find that they can tolerate small amounts.

We do a lot of testing in the clinic at The Natural Nutritionist and we look at certain bacterial strains. There are some that feed off legumes like chickpeas and obviously other foods, but I think when we've got this diversity, we create this rainforest which is that internal ecosystem that we want inside our gut. If we're in this little box eating chicken and broccoli or whatever it might be, we're going to have this barren forest and we're not going to have the capacity to digest food so that vicious cycle continues. We've got to get away from, like if it's real food, technically you should be able to tolerate it, if you've addressed the underlying issues and you're in that state of health.

Stacey: Yeah, that's a cool tactic to come from.

Matthias: Yeah, definitely. So in regards to what's actually exciting you about your practice and then also functional medicine in general at the moment?

Steph: Yeah, I think definitely we're still doing heaps of gut health and one of the tests that we run is, it's by a company called Bioscreen and that looks at the entire

microbiome, so bacterial overgrowth, what bacteria is missing, the entire picture/snapshot, sorry. So it's like a window into your soul and that really excites me because we can personalize gut health. Everyone's drinking kombucha. I see a lot of yeast overgrowth. What is kombucha? It's a yeast. So we've really got to think about do we actually need these particular bacterial strains? Too many overgrowths are caused by the over-consumption of probiotic foods and beverages and I think there's too much like one-size-fits-all when it comes to gut health as well as like foods like broth or gelatin and collagen. There's a lot of ethical issues that I see that people have with these sorts of foods, but some bacterial strains grow off those foods. So if you're a vegetarian or a vegan, I think we've got to explore what your gut looks like so we can look at, all right, is there an alternative? Sometimes there's not and clients need to change their ethical decisions, which I would never force on someone, but I definitely respect when someone does that for the broader health goal. But in terms of functional testing, I just think test, don't guess. It gives you so much information so that you can take this advice, but look at, "Alright, how can I optimize this for my health and my goals." It's not going to look the same forever because we all have different phases of our life, like whether we are fasting or not, whether we're doing more low-intensity or more high-intensity training and we should periodize our nutrition and our health in line with those sorts of factors. It can't be black and white when it comes to nutrition.

Stacey: Absolutely.

Matthias: Yeah. And I think so many people look for that one-size-fits-all. Or you hear people who eat the exact same thing, like you said, the chicken and rice everyday.

Stacey: Or broccoli.

Matthias: Or chicken and broccoli every day. It's like ... We've had people that get ... they've eaten the same thing for the last three years and then all of a sudden they start to get bloating and it's like, "Oh, why is this happening? I haven't changed anything." It's like, "That's why, because you haven't changed anything."

Stacey: Yeah. And then the lifestyle factors come in and not thinking about stress and environment ...

Steph: Do you chew your food?

Stacey: Yeah. "Are you eating slowly? Which nervous system are you in right now?"

Steph: Oh well we ... It's a good point because we create food intolerances by over-consumption so we call it the ceiling effect. Like you can eat eggs every day until you eat that egg and then you hit the ceiling and you have this full blown

intolerance that could be bloating for some people. It's like extreme fatigue. Other people, it's a complete evacuation out the other end. Like your body speaks loud and clear, but you can avoid all of that really by getting into like food prep or whatever it takes to make sure that you've got variety across the week. I think that's really important to keep it quite simple, but to get lots of colors, different proteins, different fats and so on.

Stacey: And essentially heeding the warning signs, right? You said like if some people getting like rushing out the other end, but a lot of people kind of go, "Oh that's just my normal. I just have to live with it." But it's like, well what goes in has to come out and how it comes out tells you how your body is tolerating it. It shouldn't be blocked or it shouldn't be fast-flowing. So people need to start listening to those and explore that a bit more hey.

Steph: Yeah, definitely. And people as a rule don't like talking about their poo but as a nutritionist, that's what we talk about all the time.

Matthias: yeah.

Steph: And I think constipation is probably a more common topic that we talk about because there is that link with colon cancer. But I have a much bigger problem with diarrhea because we see these longterm nutrient deficiencies. Like you were saying, the transit time is so important for the nutrients to be absorbed out of the food and for us to get the benefits from the food that goes in the mouth. So if it's going straight through you, there's no transit time and there's no time for breakdown and absorption. You are what you eat, but you are what you absorb. So diarrhea is not normal. We do the sesame seed challenge where you drink the sesame seeds and you time how long it takes to come out the other end. 12 to 24 is normal, but it's not common unfortunately so there's a lot that can be done. It's a very important area to address.

Stacey: Yeah. That's cool.

Matthias: That's an interesting one. I don't know how to do the sesame seed.

Steph: I've got a podcast on that one too.

Matthias: Yeah, there you go. I did actually see that you guys did have, or you did a podcast recently with ... I can't remember who it was, but it was on enemas.

Steph: Yes.

Matthias: Obviously this comes into optimizing health and talking about cleansing the system. When do you recommend people do enemas? Is this something that is a common practice for you guys at the TNN or not?

Stacey: And can it be overdone?

Steph:

Yeah, it's interesting. So that podcast was with myself and Kirsty Wirth from Kultured Wellness. We actually did the podcast because a lot of people don't know about it and when you first start talking to a client about an enema, the look on their face, like, you've literally got three heads I cannot fathom. Like, "Do you know what an enema is?" And they're like, the penny drops. Anyway. It's an ancient detox tool. So it was used back like before the war. Essentially there's lots of different types of enemas, like the solution can be ... you can do a water enema, which is used very much in a medical sense. That particular podcast was more about the use of coffee which has that beautiful rich concentration of palmitic acid, which directly helps bile production and helps your body ... it gets rid of all the waste. But with any kind of gut health protocol, most people are undergoing some sort of an antimicrobial treatment where they've actually got to cause this natural die-off, of whatever's living in there in too high a number, that if you don't support your detox, you will suffer. There's something called a Herxheimer reaction where the bacteria that are being killed release endotoxins and if those endotoxins get back into the blood and cross the blood-brain barrier, you're going to get symptoms like brain fog or fatigue or our more typical digestive symptoms. So a coffee enema is an amazing way to support general detox, but definitely during that treatment protocol, because the endotoxins go out with the enema, so they end up down the toilet rather than recirculating. So a lot of people finally get to the point when they're feeling okay with starting to introduce enemas because they know they're doing this sort of gut healing protocol. And it's a big part of it to make that gut protocol definitely more tolerable and to try and mitigate any of those quite common side effects. You don't want a Herxheimer reaction. You want to be able to get the body flushing those toxins out.

But yeah, the podcast was pretty eye-opening for a lot of people, but it has really made it I guess a more common conversation to be having rather than it being like an underground kind of chat, which it was, I think for some time. I mean it's been part of the Gerson therapy in that whole cancer realm for a very long time and that's where people are probably more common or more aware of it, but it has some amazing health benefits for all of us.

You can't really do too many to answer the second half of your question. Yes a lot of people say once they start enemas their bowels then get lazy and they can only go via enema. So sometimes that leads to the assumption that, "Oh my God, the enema has caused the lazy bowel. Have I done too many?" But usually it's kind of showing you that deeper issue. There is a problem with your natural transit time or your natural digestive capacity. So you can't really overdo it, but most people would definitely find it overwhelming if I said every day. So I tend to say, "Let's start with one a week and see how you feel." Most of the time the client naturally increases the frequency because they feel so amazing. They start to get a little bit more addicted. So I let that be a bit of a slow burn because ultimately one is better than none, right?

Stacey:

Yeah, absolutely.

Matthias: I can't quite remember the name of it but something like an angelic flush and there's one here in Brisbane I know in Wellstone or one of the places near Wellstone. It's literally like a half hour session where you go in and it pretty much flushes the system. From what I've heard from people using this system, it's absolutely incredible. You step off of it, you just have like this new life of energy from using the angelic flush which is ... As far as I'm aware, it's kind of like a seat that you sit on that has the enema and then you've got to the toilet right next to you. So you just flush until you're completely cleansed out.

Stacey: So it's like going somewhere else to do it rather than doing it at home?

Matthias: Exactly.

Steph: Yeah. So that might be more like colonic irrigation, which is a little bit different-

Matthias: Yeah, a bit different.

Steph: ... but definitely in Melbourne there's a few enema options as well. So yes, you can go in and book your appointment, a bit like a solarium back in the day. Not that I ever went to a solarium, right? You do the water enema first and then you do the coffee. It needs to be held for like 12 to 15 minutes. You work your way up to that of course but that's the end goal. Yeah. And you can go in and it's a much easier process. Of course there's like the time and kind of financial commitment to it, but definitely if it's something that is new to you, it can be a really great first place to learn it as well.

Stacey: Absolutely. I love that you've done a podcast about it because sometimes as you say, people will look at you like you've got three heads when you tell them about it whereas you can just go, "Hey, I want you to learn about this thing. Can you please go listen to this podcast?"

Steph: My God. That is why I wrote articles and record podcasts because I get asked the question that many times and I'm like, "Right. Instead of me writing an email every day ... "

Stacey: Yes. "Check this one out then come back to me if you've got any other questions."

Matthias: Makes it so easy. So the new book.

Steph: Yes.

Matthias: Low carb Healthy Fat is just ... or Healthy Fat Nutrition, sorry. When did it get launched?

Steph: No, we're still printing actually. So the pre-sale is on now.

Matthias: Got you.

Steph: We're launching at the end of November, so Booktopia and Amazon currently have it available. Booktopia has it at an amazing price at the moment. So I think that's kind of like the launch price, the cheapest you'll be able to access if that's interesting to you. It definitely goes through a lot of the topics that we've covered today, but we also have developed example meal plans for those that want a bit of a guide at least to start. Then there's over 150 recipes, all of which are gluten-free, refined sugar-free, focusing on the quality ingredients and packed full of nutrient-dense wholefood ingredients.

So yeah, that's been a really amazing project for me to work on and I cannot wait to get my hands on a copy.

Stacey: That's awesome.

Steph: I haven't seen it printed yet.

Matthias: Before the launch then, are you doing a tour? Are you doing some sort of media releases? Obviously podcasts are a great source for that. What else are you using?

Steph: Yeah, lots of podcasts. So we're sort of teeing those up for a little bit later this year and then early December, I'll be doing a tour basically for most of December up until when people start to knock off for the festive season. And yeah, we're organizing media so I've been lucky enough to publish Low Carb Healthy Fat Nutrition through Hechette which is a publishing house in Australia. I obviously have a bit of a schedule that I'll step into, so hopefully you'll see me on TV and hear me on radio as well. So I'm really looking forward to that. I've kind of had to clear my client schedule for December, but it's been something I've been working on for years now. The book deal is my number one bucket list item so I'm very excited to be achieving that.

Stacey: That's awesome.

Matthias: Oh that's super cool.

Stacey: Yeah. Congratulations.

Matthias: Yeah, exactly. And so was it-

Steph: Thank you so much.

Matthias: Was it a very similar system that you did for The Real Food Athlete or is this a whole new experience?

Steph: Yeah. Self-publishing is such a hot, like a different world. It was an amazing experience but it's up there with one of the more stressful things that I've done. So when you get a publishing deal and you have like three or four editors combing through and it's beautifully designed and they organize all the printing and all the media, like people say to me like, "Was it hard work?" It hasn't felt like that at all. Obviously there were periods of work with the writing and editing and it sort of went like a bit of a rollercoaster because when it's at their end, you don't do anything on it for a little while. It's now a couple of months of not much because it's being printed and obviously distributed and all the things it has to have to happen for it to end up on the shelf. So yeah, it's kind of been just lots of fun really. I hope I always feel that way about it.

Matthias: Yeah, because you get so many-

Steph: It's been so exciting.

Matthias: ... writers that talk about it being a really terrible process. So that's a really refreshing thing to hear. So that's good.

Steph: Other people have sort of asked me how long it took me to write. It literally took me four days. Like I shoot myself up to Queensland, like went in lockdown, no social media, no emails, but technically I've been writing it since 2011 when I first started my company because it's the myths that we've been busting over the years. Like all the conversations around the cholesterol and saturated fat, the snacking myths, the carbohydrate fallacy, this is my jam, right? So technically I could write it straight away because I've been talking about it for so long.

Matthias: Yeah, yeah. Stacey's actually going through a very similar process at the moment where she's actually going the self-publishing route at the moment. It's been pretty interesting, but what did ... So your writing process for this one was four days. How about your previous book? What did it look like?

Steph: Oh gosh, it feels like a lifetime ago now. Yeah. I don't even remember how long it took me to write. Again, it's sort of more like that collation of stuff I've been working on. The Real Food Athlete is obviously more targeted towards athletes. I see a lot of different clients, but I've definitely got that niche, more of the insurance world and we see a lot more crossfitters these days as well. I think it was just more of a process in terms of putting it together because you haven't got the team to create this beautiful document with all the font and all the images and all the layout. So you do that all yourself or like I did at least anyway. So that was a lot of work once it was written but not yet published. So that was where a lot of the work was for me.

Matthias: Yeah, I know. Like for Stacey it was kind of like, "Oh cool, well I've done the work now. I've written it. Then it's got to the self-publishing stage and it's like, "Oh you need pictures. You need this and you need that" and-

Stacey: It's a process.

Matthias: Yeah, it's been a process definitely.

Steph: I know. I don't know if I'll ever do that again.

Stacey: Yeah.

Steph: If I have to.

Matthias: Yeah, definitely. No, that's really cool. I guess if there's any tour stuff you want to send on I can put that in the show notes as well. That'd be great.

Steph: Yeah, I'll definitely be coming to Queensland.

Matthias: Sure.

Steph: For sure.

Stacey: How awesome.

Matthias: All right. Very good. And if not, we can touch base later, but we might start to wrap up as we're coming to end of time. One thing we do is we've got two questions we ask all of our guests. The first one being for you, Steph, is, what is your biggest driver? Like what gets you up daily and makes you do the things you do?

Steph: My biggest passion is to help the world understand that health starts with what you put on your plate. Definitely number one.

Stacey: That's awesome.

Matthias: That's cool.

Stacey: You can tell when a person's thought about this before because they just answer it straight away.

Steph: Better have your mission statement.

Matthias: Exactly.

Steph: For when you get a little bit tired or over it, which doesn't happen that often, but you still got to keep reminding yourself that bigger goal. It's like chipping away for that underground diamond. You've just got to keep on chipping.

Stacey: Absolutely. Well, so the final question is what's your biggest fear? Is there anything that scares you?

Steph: That's a really good question. I'm not prepared for this one. Falling out of a handstand. I've got this fear about being upside down and I've been working on it so much that I used to actually squeal when I would do a handstand in a yoga class. I've gotten rid of the squealing but-

Stacey: Progress.

Steph: ... I still have fear to work on about being upside down. I'm really trying to work hard on my inversions now as well. That's probably not a massive one, but it's definitely something that's top of mind at the moment.

Stacey: I mean being a yogi, you would know that obviously what you learn on your mat is relative to what's going on in life. So maybe you have a fear about going upside down, but then what esoterically or-

Stacey: ... does that connect to? Yeah.

Stacey: Start digging deep on that one.

Steph: good point.

Stacey: Awesome. Thank you so much for your time. We really appreciate it. What are your handles for people to reach out to you on socials?

Steph: Everything at is @thenaturalnutritionist. So I'd probably hang out mostly on Instagram. You can check out more of my stuff over there but my online hub is thenaturalnutritionist.com.au. So there's presale information about the book, definitely the podcast. If you want to work one-on-one with myself or the team, you can learn more on our website as well.

Stacey: Amazing.

Matthias: Great. Thanks so much for joining us, Steph.

Stacey: Thank you.

Steph: Thanks guys. It was a ball. It had so much fun.

Stacey: Awesome. Cheers.