



COVER STORY

FAST FOOD

Can intermittent fasting help you lose weight quickly and safely, prevent or reverse diabetes, or even lower the risks of dementia, cancer and heart problems? And can you actually stick to it? Dr Michael Mosley of the “5:2 diet” fame has written a new book about all this. He talks to Sarah Lang.

Sarah Lang is a *North & South* contributing writer.

When we speak just before Christmas, Dr Michael Mosley badly needs his holiday break. After all, he's had a hectic two years, even by his standards.

In 2017, the UK-based author, science journalist and medically qualified doctor wrote *The Clever Guts Diet*, which shows how an eating regime based on the Mediterranean diet can improve not just gut symptoms, like bloating, cramping and diarrhoea, but also boost the gut microbiome and overall health. Then, Mosley collaborated on the accompanying recipe book – and got some serious jetlag while flying in and out of various countries to promote the books.

Mosley – who also presents and produces BBC documentaries on science, health and human biology – gets stuff done. Late last year he wrote another book, *The Fast 800*, published this January by Simon & Schuster. It's the successor to his bestseller *The Fast Diet* (2013), which Mosley co-wrote shortly after reversing his newly diagnosed type 2 diabetes with a new-fangled approach: intermittent fasting.

Mosley's "fast diet" is now commonly known as the catchier "5:2 diet", because you fast on two days a week, not the other five. *The Fast 800* is, in part, an update on both *The Fast Diet* (revised in 2015) and Mosley's following book *The 8-Week Blood Sugar Diet* (2015). The former has helped numerous people lose weight and improve their health through eating between 500 and 600 calories on those two "fasting" days of the week. The latter has helped numerous people prevent or reverse type 2 diabetes (a blood-sugar disorder usually associated with being overweight) – and reverse pre-diabetes (raised blood sugars) – by eating 800 calories a day for eight weeks, without using medication. Of course, there are overlaps between the two diets and their aims and results.

People often stop Mosley on the street or tweet to say that one of his books changed their lives. His latest, *The Fast 800*, certainly isn't a case of cutting and pasting the other books together with a new title and a few tweaks to score more sales. Importantly, it describes strong evidence from recent years that shows the 5:2 can lead to health benefits from preventing diabetes through to potentially preventing dementia.

Mosley also outlines a new, step-by-step 5:2 programme which ups the fasting-day limit to 800 calories, and incorporates new methods and techniques. Bear with the numbers for a sec. In the first stage, Rapid Weight Loss, you eat 800 calories every day for two weeks – or longer – to activate the process of ketosis, which burns fat fast. In the second stage, the New 5:2, you eat 800 calories on two days of the week, and a Mediterranean-style diet on the other five days. In the third stage, Maintenance, you eat Mediterranean-style with no calorie counting but perhaps one fasting day. You can also skip the Rapid Weight Loss stage and go straight to the New 5:2.

As is his norm, Mosley, 61, became his own human guinea pig for the new regime. Now he's about to hazard jetlag again to spread the New 5:2 word.

North & South: Have you timed this book to come out right after people make New Year's resolutions?
Michael Mosley: Of course! That's when people are keenest to try something new.

N&S: What would you say to someone who complains you're flogging all these different diets and books: *The 8-Week Blood Sugar Diet*, *The Clever Guts Diet*, *The Fast Diet*, now *The Fast 800*?

MM: I'd say each book is a different way of viewing health – and different approaches suit different people with different priorities. But the books are also evolutions. With each, I've tried to build on and extend what I'd previously learned. For example, intermittent fasting is good for gut health. Something that's just come out – unfortunately, after this book went to press – is a big study showing intermittent fasting encourages the growth of anti-inflammatory gut microbes. The books are complementary – and this one draws together important elements of previous books, plus incorporates new science and new methods.

N&S: Why increase your earlier recommendation of 500-600 calories to 800?

MM: It's the magic number. The original numbers were, frankly, based largely on rat studies. Since

then, several 5:2 studies have shown that, in practice, many people are actually eating 800 calories. It's more comfortable. More doable. And we now know that, at 800 calories, you can still achieve significant weight loss and other health benefits.

N&S: Compared with your first 5:2 book, this programme is based much more on the Mediterranean diet, isn't it?

MM: Yes. There's now overwhelming evidence for the benefits of the Mediterranean-style diet, rich in natural fats, fish, veges, nuts and legumes. Studies show it cuts your risk of heart disease, cancer, type 2 diabetes, depression and dementia. And there's now lots of strong science behind intermittent fasting, so *The Fast 800* combines these two approaches.

N&S: Explain the process of ketosis.

MM: The Fast 800 is a mildly ketogenic diet. You eat a much-higher ratio of fat and protein compared to carbohydrates than normal, especially during the rapid weight loss stage. Ketones produced by your liver see your body go from burning sugar to burning fat stores. Recent research shows ketosis is key to intermittent fasting – and surprisingly good for the body and the brain. It triggers autophagy: a self-repair mechanism to get rid of old, junky cells.

N&S: This process sees some people experience side effects, including intense hunger, headaches, light-headedness, and irritability.

MM: Some do, but all that tends to drop off after two weeks, sometimes earlier. Don't give up on Day 7. I predict after two weeks, you'll feel a hell of a lot better. The body adapts rapidly.

N&S: Don't many health professionals say ketogenic and low-carb diets are unhealthy and unsustainable?

MM: Many health authorities and nutritionists still see low-carbohydrate diets as the devil. Frankly, people who say the brain runs out of energy without carbs don't understand the basic science. Carbs are not obligatory. Certainly, very-low-carbohydrate diets are really difficult to sustain long-



Dr Michael Mosley's new book, *The Fast 800*, counters some old dieting myths with new science: "Frankly, people who say the brain runs out of energy without carbs don't understand the basic science."

term. And your microbiome needs some good quality complex carbs, for fibre, which is why you move onto the maintenance stage.

N&S: During the rapid weight loss stage, you may lose five kilos after two weeks, nine kilos after four weeks, and 14 kilos after eight weeks. This challenges the common advice against "crash dieting", right?

MM: Unfortunately, despite strong evidence to the contrary, we're told repeatedly that rapid weight loss is futile. Some well-informed weight-loss specialists have told me this drives them crazy, and it frustrates me too, because it's profoundly unhelpful yet it persists. We sort of vaguely believe these things because we were told them once many years ago. If you manage to lose weight slowly, terrific, but many people struggle that way. You can lose weight quickly and safely through the 5:2 – it's a matter of doing it right. And studies show rapid-weight-loss dieters don't

only lose but keep off more weight.

N&S: When so many diets fail, why does 5:2 work for many people? Because you're not restricting calories every day so are less likely to "blow it"? Because there are fast results?

MM: Yes, and 5:2 is flexible – people choose the days that suit them – and it isn't expensive. Plus, while some people struggle, others feel good physically. There's evidence that ketones stimulate production of the protein BDNF, a natural anti-depressant that stimulates the creation of new brain cells and connections.

N&S: My barista says he has better memory, focus and "cosmic clarity" when he's fasting.

MM: Taxi drivers have told me they drive better.

N&S: A recent story about intermittent fasting featured a photo of a slim woman staring at a plate which contained only a tiny carrot.

Is it a misconception that you eat next to nothing on fasting days?

MM: Yes. No one's advocating starvation. For starters, you must eat enough protein; 800 calories doesn't sound much, but the recipes in this book are filling and nutrient-rich. Spread the calories over two meals or three – many people skip breakfast. If necessary, try meal-replacement shakes.

N&S: You say that, on non-fasting days, it's important to eat Mediterranean-style and use portion control. If you eat lots of white carbs for five days, does that undo the good work?

MM: Two days of intermittent fasting are better than none. But I hope habits like eating more veges and protein would seep into non-fasting days. People are smart enough not to wolf down ice cream then. There are bastardised versions of 5:2 that say eat whatever you want on non-fasting days – I've never, ever said that.

N&S: You suggest people simultaneously practise time-restricted eating [TRE], where you don't eat during a 12-16 hour window, including overnight?
MM: Some people find TRE easier than 5:2 – anyone can use a watch. You get modest weight loss doing TRE on its own, but combine it with 5:2 and you'll see impressive changes.

N&S: Is there now good evidence that 5:2 can reverse type 2 diabetes?
MM: Yes. The strongest evidence comes from the DIabetes REmission Clinical Trial (DIRECT), a randomised, controlled study, with results published in 2018. Nearly half of the type 2 diabetics on an 800-calorie-a-day diet brought their blood sugars back to normal, despite having come off their diabetes drugs. If you're already taking insulin [often prescribed for type 2 diabetics after first-line medications like Metformin], be careful and consult your doctor. However, my GP wife, Clare Bailey, is currently involved with an Oxford University trial of type 2 diabetics both taking insulin and doing 5:2, and they're doing well. Similar trials are running.

N&S: The UK's National Health Service [NHS] originally called the 5:2 a "fad diet", but its recent "Top Diets Review" said 5:2 can be more achievable than dieting every day – and that 5:2 can lead to greater reductions in body fat, insulin resistance and other chronic diseases. Were you expecting that move?
MM: Actually, the speed of that move astounded me. Just after *The Fast 800* went to press, the NHS announced it's about to roll out a programme trying this 800-calorie approach with up to 5000 people who have type 2 diabetes, in the hope of reversing their condition.

N&S: Do you think New Zealand will follow the lead of the "Mother Country"? Currently, the NZ Ministry of Health's "Popular Diets Review" recommends the Mediterranean diet, but advises you consult your doctor before doing 5:2 – and doesn't recommend very low-calorie diets (800 or fewer a

day) over a short time period.
MM: I suspect things will change in New Zealand. In Australia, the CSIRO [Commonwealth Scientific and Industrial Research Organisation], an independent federal government agency, is looking at low-carbohydrate diets.

N&S: Given the new evidence, is it wrong for doctors to immediately suggest medication for type 2 diabetics or pre-diabetics without suggesting intermittent fasting?
MM: I'm surprised by how many doctors haven't heard of this approach. I think it's wrong if they don't look into it, or don't at least suggest patients investigate it. There's a fear patients will feel offended if their weight is mentioned, but actually they generally don't.

N&S: A couple of women have told me that, when they were obese, their GPs never brought up their weight. Both wonder whether that's because their doctors were overweight themselves. Another woman told her doctor she'd reversed her pre-diabetes [raised blood sugars] through 5:2, and the doctor didn't show any interest.
MM: I'm surprised [the latter GP] wasn't curious, because if a patient transformed themselves, I'd want to know how. And do you really want advice about weight loss from someone with weight issues? But please, do tell your doctors about 5:2 – that's how these things often spread.

N&S: Dementia is expected to affect 150 million people by 2050. It's as yet unproven that 5:2 could help prevent it?
MM: Frankly, we're waiting on US neuroscience professor Mark Mattson's current study to see if 5:2 can protect and boost the brains of people who are at increased risk of developing dementia. He says interim results are encouraging. His findings are expected to be out later this year. He'd previously done animal studies that show intermittent fasting can help combat memory loss and delay dementia.

N&S: You write that 5:2 can help prevent cancer, because carrying

too much fat or having high insulin levels are risk factors for cancer. What if you already have cancer?
MM: It's early days with research on that. But Dr Valter Longo, a human-ageing expert, found that time-restricted eating seemed to have a significant impact on the risk of breast cancer recurrence. He believes fasting has the potential to delay ageing and prevent the onset of diseases such as cancer and heart disease. On his "Fasting Mimicking Diet" [FMD], people eat 800 calories a day for a fixed number of consecutive days, mainly vegetables, olive oil and nuts. A dozen clinical trials worldwide are looking at FMD's effect on various conditions, including breast cancer in women who had already had chemo.

N&S: How might 5:2 improve your heart health?
MM: First, by helping you lose weight. Second, by improving your insulin sensitivity. And a small study showed 5:2 had a significantly bigger impact on blood pressure than losing weight by another method. Watch this space.

N&S: When asked about intermittent fasting, Dr Fredrik Karpe from the Oxford Centre for Diabetes, Endocrinology and Metabolism said it's "very important to critically investigate health plans for interventions giving great promises". So many experts are still sceptical about intermittent fasting.
MM: I'm very sceptical by nature. But scientists have critically investigated all this – and still are. I sometimes collaborate on a few small studies. Mainly, though, I weigh up various claims and studies. People get understandably confused about conflicting evidence so, in the book, I explain different types of studies and the most reliable ones – particularly randomised, controlled trials. Government advice actually ranks amongst the weakest evidence. And I always look at, for instance, how big the trial is, who conducted it, who funded it, etcetera. Plus, I acknowledge gaps in scientific knowledge, and very much hope others will fill those gaps.

N&S: Back to the practical stuff.



Two examples, from *The Fast 800*, of an 800-calorie day: (left) boiled eggs with spiced asparagus soldiers, root vegetable turmeric soup and Spanish eggplant stew with chorizo; (right) smashed avocado on dark rye bread, sausage and mushrooms with spring greens.

“The Fast 800 is a mildly ketogenic diet... Recent research shows ketosis is key to intermittent fasting – and surprisingly good for the body and the brain.”

You've included lots of tips for doing 5:2, such as talking to others about the approach, writing things down, etcetera. How important are psychological techniques to success?
MM: Do your psychological techniques really matter that much if you feel starving? The practical steps are most important. For instance, actually doing the rapid weight loss stage will help change hunger hormones and suppress your appetite. However, psychology is clearly important regarding things like doing 5:2 with others, having clear goals, practising mindfulness, managing stress, and trying to sleep well.

N&S: If it's too hard, you say take a break?
MM: Yes. Perhaps try intermittent dieting. It seems counter-intuitive but the Australian MATADOR study's small trial of obese men showed

“two weeks on, two weeks off” was beneficial. The intermittent dieters lost – and kept off – more weight than men who dieted throughout. Why? Perhaps it counters dieting fatigue.

N&S: Plus everyone on a diet needs breaks, especially over the Christmas season! You also say that, if you find 5:2 difficult, try 2:5 where you eat 800 calories a day during the week and don't fast on weekends. That sounds much harder than 5:2.
MM: I'm being pragmatic. I'm providing a toolkit you can dip into to suit your needs. I think being overly prescriptive is unhelpful. For instance, it doesn't matter if you're 50 or 100 calories over or under.

N&S: On weekdays, my friend eats 1100 calories and exercises, then on the weekend eats junk food and drinks a fair bit of

alcohol. Is that bad for her?
MM: Our ancestors had long periods when they wouldn't eat much, and occasionally gorge, but there are no particular studies on this. Is she a decent weight, sleeping okay, and are her cholesterol and blood sugars under control?

N&S: Yes, and she's got a body like Charlize Theron's.
MM: I wouldn't knock her approach then!

N&S: Should people of a healthy weight do 5:2 for health benefits?
MM: The honest truth is I don't know. There's some evidence it can benefit slim people, but right now I'm reluctant to suggest it. I've just been talking to researchers about doing a study looking at healthy people on the 5:2 diet. We just need to find funding, because slim people are not any health authority's priority.

N&S: In the book, you note that people with certain health conditions, etcetera, shouldn't do 5:2, or should consult their doctor. And people who once had eating disorders shouldn't do it?
MM: I say that based on caution, not on science. One small study showed that people with current or past eating disorders actually do better on intermittent fasting, but I don't want to put anybody at risk, because as a doctor I've sworn to “first, do no harm”.

N&S: You do a lot. Do you overwork yourself?
MM: I write books relatively fast but, before that, I collect data, studies, people's stories, and talk to experts. I haven't totted up my hours, but, blimey, I probably should slow down a bit.

N&S: Has anyone asked you if you're just in it for book sales?
MM: Regularly. Mainly online. When one person asked that online, I replied “It's all free online”, in my articles, and there's a website for each book. But some people prefer something they can hold and flick through. Money has never been my main motivation. I just really want people to know this stuff.



Rachael Lane is a 5:2 convert, calling it a “way of life” rather than a diet.

JOHN COLLIE

Way of Life

After Christchurch teacher aide Rachael Lane had three children, her weight “spiralled out of control” and into obesity. “I hated photos of myself. I’ve always had weight issues, but hated diets where you ‘go hard out’, deprive yourself and it’s too difficult.”

Then she heard a radio interview with Michael Mosley and watched his BBC documentary *Eat, Fast, Live Longer*. “I read about the science and thought I’d try 5:2 – for my health, not just my weight. It’s the only diet I’ve ever managed to stick to.”

Rachael, 45, and husband Jared Lane have done the 5:2 diet for five years. “It was easiest to do it together, eating the same and supporting each other.” On Mondays and Thursdays, she eats 500-600 calories while

Jared aims for 600. On fasting days, she usually only has two coffees until dinner.

“Sometimes I text Jared saying ‘I’m so hungry!’ But you learn it’s alright to be hungry. I did initially go to bed dreaming about what I’d eat the next day. But I’d actually wake up not that hungry. It’s difficult at work morning teas, but I tell myself ‘wait until tomorrow’ and when tomorrow comes, I often don’t want it.”

Jared is cagey about his weight, she says. “Maybe he cheats at work!” However, Lane, who once weighed 100-plus kg, has lost close to 25kg. It’s easier to move around, and she doesn’t wake up sore anymore. “I’m still overweight, but I’m okay with being this size – though currently I’m ‘Christmas-sized.’”

Her diverticulitis, a painful intesti-

nal disease, still flares up but not as often. “The 5:2 might help me avoid future health problems, but the immediate payoff is shopping in normal clothing stores.”

On non-fasting days, the pair don’t restrict their diet. “But we’ve organically started eating fewer carbohydrates. When we eat carbs, though, I crave more. I do love potatoes and pasta. Restricting calories every day takes the joy out of food – and you feel guilty when you crack.” She and Jared recently started time-restricted eating, eating only between 10am and 6pm twice-weekly.

“Various friends have started doing 5:2, too. Only one woman raised her eyebrows, like ‘Oh, you’re on the snake oil.’ But compared to fad diets out there, this is actually sustainable. For me, it’s a way of life.”

“[After fasting] I have a great feeling of lightness.”

IN 2012, ELIZABETH Chisholm discovered during a routine “over-60s” check that she was pre-diabetic and had high cholesterol. Then 62, she was shocked. At 66-67kg, she had a healthy BMI (albeit at the upper end of the range). “My grandmother had late-onset diabetes, so I decided to take action – but I didn’t know how, exactly, because I had a pretty healthy diet. Then, on a flight, I saw Mosley’s documentary on fasting.”

She’s now been on 5:2 for six years. For three years, she ate only 400 calories on Mondays and Thursdays. Initially she felt good – not overly hungry, though a bit “brain-foggy” mid-afternoon on a fast day. “On the first few fast days, I had trouble sleeping, but then found everything quite easy. I have no breakfast except a cup of tea, miso soup for lunch, and nearly all 400 calories for dinner. The next morning, I have a great feeling of lightness.”

She lost 5kg in 18 months – not a particularly quick weight loss (partly due to breaks during holidays). But she reached 61kg, and her blood sugars and cholesterol returned to normal.

Chisholm now fasts only one day a week (eating 500 calories) to avoid losing too much weight, given a family history of osteoporosis. Her husband “is the same healthy weight no matter what he eats” and eats her fast-day dinners, adding some more food. For two years Chisholm has done time-restricted dieting (not eating between 6pm and midday the following day). Now 68, she weighs 60-62kg.

“I feel great. I appreciate the beautiful, nutritious food I eat, and with other food I think ‘my body doesn’t need that.’” She won’t go up to 800 calories, as what she’s doing works for her.



Lou Draper quit 5:2 after a month: “I couldn’t face two days of fasting.”

No Way

Wellington PR consultant Lou Draper tried 5:2 a year and a half ago. “I ate 600-ish calories a day and lost about half a kilo a week.” But she quit after a month. “I couldn’t face two days of fasting. It took the joy out of everything. I couldn’t string a sentence together at work. I was so tired and grumpy.”

She didn’t wait to see if those initial side effects would fade. “I couldn’t tolerate it any longer. If it had been 800 calories, as Mosley recommends now, it may or may not have been manageable.”

Draper, 38, has long been a yoyo dieter and says she’s still overweight. “I’ve tried so many diets. All of them, I reckon. I usually lost around two kilos before quitting, because they’re unsustainable.”

Last year, she earned credentials

online through reputable Canadian-based company Precision Nutrition, and is now one of its online nutrition coaches (not a qualified dietitian).

“My friend swears by 5:2, but it doesn’t work for everyone. People can get quite ill on so few calories: lethargy, malnourishment, if they aren’t getting enough nutrients. And 5:2 is harder for people who absorb fewer calories than others.”

She’s finally found an approach that works for her. “I eat a balanced diet: mainly wholefoods, plus I prioritise hydration, exercise and sleep. I don’t weigh myself, but my clothes fit better. Obsessing over calorie counting is the wrong approach for many people. You can be eating really well, but stress, sleep etcetera are more important than measuring out 12 almonds. People struggle to handle massive change. Just eat better quality food and leave it at that.”



KEN DOWDIE



Left: Lots of water and black tea helped prevent headaches and constipation when Mosley tried the Fast 800 himself. Above: Fish and vegetables – a good bet when dining out.

Super Size Me

For *The Fast 800*, Dr Michael Mosley experimented on himself.

As I mentioned in the introduction, when I was researching this book – and following my own personal rationale that I should try the programmes I recommend – I tested out the Fast 800, by putting on weight and then seeing how quickly I could lose it again.

Before starting, I did a range of tests, including measuring my fasting glucose, my blood pressure, my weight and my waist. The tests showed I was basically healthy. I came in at 172lb (78kg), with a waist of 32 inches (81cm), blood sugars and blood pressure both excellent. Time to undo all that. To put on weight, I stuck to a relatively healthy diet but increased my consumption of starches. I ate more bread, potatoes, rice and pasta, plus the occasional biscuit.

Here's an entry from my diary: 'It's

now a couple of weeks since I started doing my experiment and the biggest surprise has been that, so far, I have put on remarkably little weight. I think my body has just got used to my current weight and is resisting my attempt to pile the fat on. In some ways that is immensely reassuring. I could get used to this new lifestyle.'

It didn't last.

'It's now a month into my experiment and the scales are beginning to move. My blood sugar levels are also starting to rise. The strangest and most unsettling thing is that I am now really beginning to crave sweet things again. I find it almost impossible to pass a shop and not buy a small bar of chocolate. Clare says that I am beginning to snore again and she is anxious that I stop soon.'

In the end, it took me nearly four months to put on 14lb (just over 6kg) and by then the rot had really set in. My blood sugars were almost back in the diabetic range. My waist had ballooned to 37 inches (94cm) and my blood pressure was in the red zone. I felt hungry much of the time.

I was doing a lot of filming during that period and I worried that people would notice that I'd put on lots of weight and ask why I had allowed myself to go to seed, but no one did. It helps that when I put on fat, it is mainly internal. Wearing baggy shirts also helps.

My wife told me I was beginning to look older. I was sleeping badly and feeling increasingly moody.

So, after a final, indulgent summer holiday in Greece, I knuckled down to losing weight. I started by doing the

Very Fast 800 programme [the Rapid Weight Loss stage], sticking to 800 calories a day, and using menus from this book. I included TRE [time-restricted eating, which means eating within a relatively narrow time window each day, usually 8 to 12 hours], doing a 12-12 programme. My plan was to finish eating by 8pm and then not eat anything till at least 8am the next morning. So, how did I get on?

Well, it was easier than I feared. Perhaps because I am used to occasional fasting, sticking to 800 calories a day was not as challenging as I thought it would be. I knew what to expect, which helps, and I imagine that my body is more used to "flipping the metabolic switch". I was certainly hungry and a bit grumpy to begin with, but after a few days the cravings and the bursts of hunger passed. Mostly.

Since I was trying to fit this rapid weight loss diet around a busy filming schedule, I had to combine using meal replacement shakes when I was on the road, with recipes from this book when I was at home. On a couple of occa-

sions, I had to go for business-related meals, but I managed to stick to fish and vegetables.

The weight loss was fast and the metabolic changes impressive. In the first four days I lost 6lb (2.7kg), some of it water. My blood sugars and my blood pressure also fell. Optimistically, I tried to tighten my belt by a notch. Not there yet.

I kept up my exercise regimen, but I did notice that going for long walks or runs was tougher than it had been. Although I was in mild ketosis (I used my ketone sticks to check), my energy levels were definitely lower.

I was gugging back lots of water and black tea, so neither headaches nor constipation were a problem.

I had some bad moments, including one occasion when I was stranded on a railway platform at 10pm, not having eaten that day, with nothing for company but a chocolate machine. Fortunately I didn't have any change, or I would probably have cracked.

There were lapses. There was an evening when I gave myself a night off and drank several glasses of wine, followed by way too much cheese. And another occasion, when I gave into one slice of hot buttered toast, then another. But on the whole, I stayed on track.

After two weeks, I had managed to lose 11lb (5kg) and get my blood sugars and blood pressure back to normal. I could have continued on the rapid weight loss programme but I thought this would be a good moment to switch to the 5:2.

As an experiment, I did my fast days back-to-back (Mondays and Tuesdays) and noticed, thanks to my keto measuring sticks, that I was in mild ketosis for some of the first and most of the second day. Doing exercise became easier. I could push myself harder without feeling drained.

I continued to eat the Mediterranean-style menus from the book on my fast days and eat more freely on the non-fast days. I also returned to drinking wine on my non-fast days. It was, dare I say it, easy.

Three weeks and five days after I started, I was back to my previous healthy weight and everything else had returned to normal.

What had I learned?

- That this diet is very doable.

- That if I let myself go, then the diabetes and other health issues will return.
- That what I eat really does affect my mood.

• That TRE helps, but it is tricky to stick to rigidly if you have a social life. That said, I will persist with trying to do it on as many occasions as possible, as I think the science is convincing.

Where do we go from here?

It is six years since I first suggested that intermittent fasting might offer a new and exciting alternative to the standard 'slow, steady, eat low-fat' message. Today, I am more confident than ever that it does.

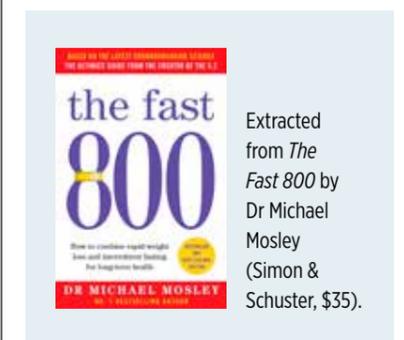
I am stopped on the streets almost every day by people who want to tell me about their weight-loss success. Do I mind? Not at all. I love feedback and even if we never cross paths, you can always get in contact with me or the Fast 800 team via the website [thefastdiet.co.uk].

Just as importantly, I feel the science is coming along in leaps and bounds. Although there are still some very important questions that remain unresolved, answers are on their way.

So will Professor Valter Longo's Fast Mimicking Diet turn out to be as revolutionary as his early studies suggest it might be? Will Professor Mark Mattson's 5:2 study on the brain open the door to a new way of combating dementia? Will doctors and other health professionals respond positively to the latest research showing just how effective a rapid weight loss diet can be?

I'm obviously hoping the answers to all these questions will be "yes".

Intermittent fasting has changed my life. I hope it changes yours. +



Extracted from *The Fast 800* by Dr Michael Mosley (Simon & Schuster, \$35).