

# What You Need to Know About Leptin

**Kat James**



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**David Stouder:** Welcome to the Humanized Podcast, it's all about personalizing your health. I'm your host Dave Stouder filling in for Rebekah Kelley today. Now our topic today will be "What You Need to Know About Leptin," and I want to make sure you got that that's L-E-P-T-I-N not lectin, which is a thing a lot of people talk about, but this is leptin.

If you don't know about it you should and you're going to find out about it as we talk with Kat James. And before I introduce Kat, I just want to remind everyone to subscribe. We've got all kinds of other podcasts, here at HumanizedHealth.com. Audio, video, transcription, and we'd also like to thank our lead sponsor, Village Green Apothecary.

Now I've known Kat for quite a while. She was introduced to me by a good friend and read her book— I'll just show you, this is her first book "The Truth About Beauty." I've read this book and she'll explain the title, but this is not about makeup or body care products, really. This is about inner beauty and how it reflects outward, and this to me is the best starter book for being healthy that I've ever seen. And besides being an author, Kat is a speaker, she's a leptin pioneer, an educator and the founder of Total Transformation Program. Now she's been called the master of self transformation by Self Magazine, as well as the Jane Goodall of leptin. She overcame life threatening autoimmune, liver, and eating disorders that nearly took her life. And then taught herself, and more than 200 people, how to make this transformation. And we're so glad to have Kat with us today.

Now, I said a little bit and I will do again. I think your "Truth About Beauty" book is one of the better books for people to get started, but tell us a little bit about you, about this transformation you had, and how we almost lost you.

**Kat James:** Sure. And it's more than 2000 people that I've helped and 25 years living along with people, five to 10 days at a time, six to eight times a year. So the foremost clinical expert on the hormone leptin says I'm the only person doing true observational research on this, but it started with my own story at the tail end of an eating disorder. After 12 years of that, I started not digesting, went to the doctor, they said my liver was failing. And rather than take the immunosuppressants they want me to take, and it's dismal, if you look into the track record of those drugs. I went to a health food store, which you could say initially, may have saved my life. Health freedom and access to supplements is absolutely critical. And so a lot of things got better. My liver, my horrible rashes, a few other things, but it was on one afternoon, after 12 years of white-knuckling my way through every single day, just to not binge myself into incapacitation, that I had a bizarre afternoon of freedom from those circular thoughts of food, and from a sense of impending doom and horrible anxiety. And I couldn't believe it when usually those circular thoughts are by 10:30, and 2:00 came and it was surreal to just know that I was pure productivity. People say, what did it feel like? And I say, it was like nothing. It felt like nothing.

The first time that my body didn't seem to have a ball and chain on it. And I said to myself, if it's the last thing I do, I'm going to make that last 24/7, took me almost two years of ruthless trial

## What You Need to Know About Leptin

and error. And I mean bizarre things that I eliminated that interfered with that magical feeling. And, at almost two years, an overnight event happened. I didn't know in the morning that it was the beginning of the rest of my life, but I never binged again. And my dopamine pathways had been healed, 10 dress sizes came off, and I ate like a different animal from that time going forward.

**David Stouder:** 10 dress sizes you said?

**Kat James:** 10. And, yeah, I was also called "Human pear," and I have very pronounced hips. That's why I went on the first diet. That first diet led to my first binge. I'm adamantly against fasting. People are vulnerable. In rodent studies, it causes rebound eating and also will make the next meal drug-like in a lot of rodents. And I believe that's happening because I work with people and they tell me, wow, it wasn't until I fasted and just stopped eating, that I had my first binge. And that was certainly the case for me. And I would wager, that is the case for people with most eating disorders.

**David Stouder:** Interesting. Well, now again, in your book, and I would recommend it to everybody, and because you've been in the beauty industry, you told me this once, that's why the title, "The Truth About Beauty" might in a sense, get people to think it's about, you know, something else. But, you've come such a long way since you wrote that book. And so we're going to talk about leptin. And I don't think I could give a great description of what it is. I know a little bit, really from you, but what is leptin, and why don't we hear more about it from anybody? Because I know it plays a critical role in your transformation, your ability to transform other people.

**Kat James:** Well, they injected it into rodents in 1994, Dr. Jeffrey Friedman, and we're pretty sure they had a blockbuster weight loss drug on hand because all of the rodents bred to be obese got slim, leptin is Greek for *thin*, and again, not the plant lectin that people hear about, L-E-P-T-I-N, right, and it's produced by the white fat cells, but not only the white fat cells, and they thought that all the receptors were just in the hypothalamus of the brain. Now they believe there are receptors all over the body. They used to think it was just for weight loss. Now, 30, 40,000 studies later, they know that it is the master hormone that balances all systems of the body, and it is the satiety hormone. It is the decider, when it's functioning, of how your appetite will be. And if you have an out of control appetite or burned out dopamine receptors, and that can even be just addicted to video games or online shopping and you know, we've got rampant burnout dopamine receptors reward systems that are broken right now, this heals it. I work with a neurologist now for almost 15 years, stem cell doctors, dentists, and it balances—again in the research, everything from the immune system, literally regulating immune cells, and the autonomic nervous system regulating, whether we are in fight or flight or rest and digest, then it brings you back to rest and digest. And is the great neuro-protectant. I can't make any claims, so I won't finish certain sentences today, but it is astounding what has happened, with out-and-out dementia and Parkinson's and ALS, I just speak in terms of transformation.

## What You Need to Know About Leptin

And you alluded to my book, "The Truth About Beauty," it's not the entire program. It will not get you leptin-sensitive. In fact, when I wrote the first edition, I did not know what I was harnessing in the people that were going on these cruises with me, etc. I just know that the same set of symptoms were going across the board, and across the board, you were having symptoms of a drop off of appetite while energy soars, the same as in the rodent studies. And you had an evening of energy, because leptin is the energy regulator, it activates the mitochondria, it activates AMPK, these are just the energy currency of the body. And it also, when you look at the things that the so called biohackers want to do, they want autophagy, which eats the body's dead proteins and keeps you young. They want to suppress a pathway called mTOR, and mTOR is a pathway that decides whether you are in cell replication, which is basically pro-cancer, or whether you are in cell remodeling, which cheats nature and will give you the longest, highest quality life.

But the problem with things that people say, like, "Is keto like this?" And the problem there is that you will inevitably eat too much protein. And excess protein not only turns to sugar, it can stress the kidney and liver, but also it sets off that mTOR pathway towards cell replication and there are so many other things that are always ensuring that you'll never be in sensitivity or functioning of leptin. And you can kind of liken that to insulin resistance. Everyone is leptin resistant, but a lot of people are insulin resistant. It's the same concept where the receptors don't work well anymore. So the functioning, the signaling of insulin, but before that, leptin is not happening anywhere. And the athletes, the Mets player, the season three trainer from The Biggest Loser, and also an Olympic athlete and an Oscar winning actress. These people are the picture of health. And I am always amazed that they have the same set of symptoms that happen, normalization of weight, but a change in muscle to fat ratio that is independent of exercise because of the freeing up of testosterone, a clearing of the head and deepening of sleep, a massive change in the microbiome and on and on.

**David Stouder:** And we get all of that from healthy leptin and healthy leptin metabolism. Is that what you're saying?

**Kat James:** Well, leptin is just leptin. It's healthy when it's working. And a lot of people will go online "Oh leptin, leptin... Oh, look at leptin food." There are no leptin foods. Foods don't contain leptin. Supplements don't contain leptin. And the foods that even the people who wrote the book about leptin, you cannot know what makes it happen unless you've done this living along with people and that is a frontier. And so it is guessing. And I see in every single Scientific book about leptin, and everybody can look at the science on leptin, but I see the menus and I'm like, not going to happen. Even alcohol in a tincture and it won't happen. Because we are metabolically wrecked.

We are wrecked epigenetically from our exposures, our parents exposures to high fructose corn syrup and the whole diabetes and obesity and psych drug era, came out of fat phobia, cholesterol phobia, ensuring that you could never be leptin sensitive, because the body has to be in a primarily fat-burning state, that keto can't bring you to, in order to be in leptin

## What You Need to Know About Leptin

sensitivity. And even the ketone strips will not show the kind of ketones that, if you are in leptin sensitivity, you won't see them there, because the research shows that you will use those ketones to fuel the brain much more efficiently.

There's no more willpower either. And a lot of people say. "You know, I just don't even— I'm on keto, it's amazing. You know, I don't really have hunger." But it will come back because there are too many loopholes. Excess protein turns to sugar. There are so many food loopholes that will not allow resensitization to the hormone leptin. And so it's just— even Jason Fung, who is arguably Canada's star who made keto and intermittent fasting a thing with his Obesity Code book, during a radio break on my show, he said "We can't make happen outside of a lab, what you've been doing for 30 some years." Because they just— it's a culinary thing. It's a cultural thing. It's an ideological thing. It's an economic thing. And people like certain things, man, what makes something happen in real life, is just totally different. So it was really important that I make it so that the woman I was, you may have that image, that before picture from my book, that woman would have been scared to death to come to this retreat that I'm doing. And she would have been scared to death because she would have thought that it was about self deprivation and having great willpower and self-discipline. And it actually is not. Leptin, once that signaling is back and the circulating leptin, which comes from your white fat cells and tells the brain how overweight or underweight you are, because it will normalize you whether you're overweight or underweight, and it will stop you in the middle of a plate of mouthwatering food. And you can't even have one more bite. And that is an insane concept for someone who couldn't not binge one day of my life for 12 years, and I white knuckled my way through every day, not to binge, and I still binge. I was completely strapped in on a roller coaster that would not end, and this cut it, shut it off.

**David Stouder:** Now, I want to try and suss out a little bit of specifics on this idea of leptin, because I'm sure it's new to everybody listening. At the same time, I want to point out, I would really urge all of our listeners to go to your website, TotalTransformation.com. Because I get, with the complexity in what you're talking about, I think that's why you encourage people to work with you. It's not like, "Here, don't eat this, eat that. Take a supplement and good luck. It's almost like you need to really have the experience to understand it. But, I guess what I would want to say or want to hopefully get out of this interview, is what are some of the main things that are disrupting our leptin? Like if you had to pick a few major things that people could start to do to start moving in the right direction. What would that be?

**Kat James:** Unfortunately, we can't undo our parents' choices, okay. So what undid our leptin made us epigenetically different than humans were in the fifties, at least in this country. And people were more leptin sensitive in Europe and other countries. So you have our first generation that many kids will die before their parents. You have the diabetes epidemic and the weight and you have the psych drug era. All of it is connected, not only with leptin sensitivity, but what are called epigenetic marks. And our dear late friend, Bill Sardi, he's the one I heard call it that term, "epigenetic marks," and that is fat phobia, cholesterol phobia and high fructose corn syrup.

## What You Need to Know About Leptin

And long after you stop eating that. Because I went to eating healthier foods, but I was locked in, that I was too late. My dopamine receptors were burnt out. And anyone who's addicted to video games and shopping and we have so many— the kids have so many more things working against them right now. So their threshold, this is where the individualization comes, their threshold for having their blood sugar spiked is different than everyone around them.

What I do is by feel, not by number, and it is incredibly empowering when you can know by symptoms, when you are resensitized rather than numbers. Because on all things hormonal, even with bioidentical hormones, thyroid symptoms tell the tale. And the unmistakable symptoms, when you've gone low enough in and stopped spiking your insulin, and you spike leptin before you spike insulin, you lose leptin sensitivity before you lose insulin sensitivity. So we are leptin resistant before we become insulin resistant. And as we go in that direction, you are going to have to regain sensitivity or it's just a no-go. And it is not intuitive, but everybody has a different threshold at which they do that and our parents and our frequency and severity of blood sugar spikes as a young person, medical interventions, antibiotics, and so many things affect our metabolic, what I call, thresholds. And that is where something spikes my blood sugar that doesn't spike someone's child's blood sugar, because they have a different threshold. And if I've really had a binging past, anyone who had that erratic or call themselves a sugar addict, and they have a very much lower threshold at which their blood sugar spikes.

And so it's a different way, a different threshold at which they can regain sensitivity to the hormone leptin than their healthy counterpart. But working with the athletes really surprised me because they don't have the weight problem, but they have energy crashes, adrenal problems, allergies, skin problems, sleep problems and anxiety, you know, it's not just the weight thing.

**David Stouder:** I see, so when you work with people, and I'm sure you do work with people that are overweight and are looking for, you know, leptin normalcy to help them. But when you're working with people, what you're saying to me is it's not just like you can take somebody's numbers and decide what to do. The reason you really like to do these transformational workshops is because you need to spend time with somebody to help them feel their own symptoms of their own signs, so they know what to do. It's not like a set blueprint that everybody can stick to or it's close for everybody,

**Kat James:** Much more empowering and one person's life— one person is going on rafting trips, 15-day rafting trips, they don't cook, and they are metabolically having a totally different threshold, and so you deal with all of it, because my goal is to make it happen long term. And there's a lot more than just the mechanism, even the order in which you eat, and the timing.

And you can't allow your brain to perceive times of famine, because if your brain perceives a famine, you will go into a fat-storing, primary sugar-burning, a state that we're only supposed to be in in a famine. And you do famine well. You do fasting well. You don't do fasting well if you're really in leptin sensitivity.

## What You Need to Know About Leptin

**David Stouder:** Interesting. Well, it's funny that you said that, I've had some success in my life with fasting, and of course, intermittent fasting is like a big deal. But I wanted you to go back and with that point, you're saying it's almost like going on crash diets and losing weight, it works for some people, but you're like 99 percent bound to gain it back. And that's the same thing with fasting? It's like, you're liable to start yourself on a cycle that's not going to be healthy?

**Kat James:** Yeah. And in rodents, there was rebound eating after fasting and in rodents the next meal became drug like.

And I absolutely see— it was stunning to me, I never had biases, only outcomes to look at. And it was amazing as I lived along with these people. I'm doing my 135th retreat right now, we're on a break. And the amazing thing is to see what happens when they finally allow their brain to think that they're back in famine mode by not eating or trying to fast. It is absolutely dismal and it doesn't work. And so there are rules that are just the opposite of what people are told. Don't eat before bed and all that stuff. And you actually lose bone as a sugar burner. And everybody, again, is in a primary sugar burning mode. Even if you burn fat, it doesn't mean you can't burn fat. But they're in a primary sugar burning mode, and when they are, you see bone loss. Because as Dr. Ron Rosedale, the foremost clinical, not practical, but clinical expert on the hormone leptin said, and I asked him, I said, "How come there's bone loss in people?" And he said, because you're no longer using the sugar from the protein in your bones to keep your blood sugar level stable while you're sleeping and your mouth changes and all these crazy things. And people sleep longer when they do the opposite of what they're told. And I do have to really get past cholesterol phobia silliness when I work with people.

**David Stouder:** Yeah, that's a whole nother topic. Our aforementioned late friend Bill Sardi, I say that little book he wrote said, *How to lower your cholesterol phobia*. Well now I would really, again, I would encourage everyone to go to your website, TotalTransformation.com, and I just want to point something out here. I first met Kat at a trade show and we talked for a little bit. I was impressed and then I got her book, that I held up here, and if you look at her 'before' picture kind of just looks like a you know a frumpy old lady sort of semi overweight. You know, she looks like somebody you might see in a doctor's office or something. I don't know. I am not trying to criticize anybody.

**Kat James:** That's what my niece said. My niece said, "Aunt Kat you look like you're an old lady, like you're 50." And I go, "What?" And that was decades ago. And I said, "Oh, 50 doesn't have to look like that at all."

**David Stouder:** Well, it doesn't. And now I think I've known you for about 20 years, Kat. And, for 20 years, you have been slim and fit and healthy. So obviously what you're doing works long time. Like you said, you've worked with thousands of people. And so look, folks, some of us, we've tried a lot of things to be healthy. And maybe we've had some successes and then failures. But I will tell you, just from knowing Kat, that if you've kind of hit the wall several times

## What You Need to Know About Leptin

and come up against it, okay? Then I would really like you to maybe— now do you do things in person, but do you also do things online? Like, tell me a little bit about some of the retreats and things that you do.

**Kat James:** Sure. I like to go to places with beautiful kitchens in beautiful settings so that people don't feel like they're caught inside while they are doing intense stuff and physically having a real time biochemical change in their bodies at the same time that they are learning how to do this long term.

**David Stouder:** And as you were talking about you pick good locations, like, how long are these retreats? Like, how long does it usually take for somebody to go from where they are to being pretty firmly on the road to healthy leptin and healthy results?

**Kat James:** I call the biochemical thing “crossing the Rubicon,” and there's preparation that you do leading up to it so that that crossing is comfortable, not uncomfortable, because everyone comes from a different place. They may not be making the enzymes that they're going to be making. They may have other things that they need to stop doing— maybe coffee, alcohol, et cetera. And by the way, nothing that they stop doing is anything that they want after they flip into this other state of being.

And, so it's very fast. I used to do 7-day, 10-day programs. Now I do 5-day programs. And 7 or 10-day cruises, et cetera. And it's at 72 hours, this is the science. Your liver will run out of glycogen, which is its primary fuel sugar fuel when you are a sugar burn, which is a famine state, fat-storing state. And that comes to an abrupt end. But in a sugar, primary sugar burning state, where you are running on your glycogen, your brain is perceiving a famine. And so we are training the brain to perceive times of plenty and it just depends where someone's starting and someone could be ideologically stuck in fat phobia, et cetera, and others have a longer path. I don't want them to stop everything all at once. So that is in what I call the prep phase leading up to the program and, but when they are on site with me, it's five days and they have to do the prep.

And it's pretty predictable that everybody looks different before they leave. And I mean, I'd have them bring their blood pressure cuff, I have them bring their glucometer. It's astounding. And the mental clarity that comes, the depth of sleep that comes in people who haven't slept through the night in 12 years. You know, the smell and taste that comes back after people haven't had it for two— I mean, it's an amazing thing just to look at people change in those five days and then to hear what goes on. So it doesn't take very long and people say, I've heard good things. I'm going to give it six months and I go, if you want to give it a week and a half, you're going to know if this isn't the best thing that you've done.

And I had no reason to leave the incredible, lucrative, glamorous career that I had, when those 10 dress sizes came off, I was in front of all the PR companies, I was working with celebrities



## What You Need to Know About Leptin

and on TV all the time, and quoted in all the magazines. And I just didn't care because if they, if they weren't, no one was gonna ask me what I did to transform myself and my life beyond recognition, that gets old. And so I, seven years writing that book and it is a great— like you said, a starting place, David, because it tells people upgrades and it gets them out of certain kind of brainwashing about calories and stuff like that. And The Biggest Loser trainer season three said she goes, "Oh my gosh, it was about the food, not even the exercise." And she was working out twice, even three times to keep— to get her weight off when she had Cushing's and this just stopped at all. It went for a year, six drugs and all of a sudden, boom, it just came off. And the muscle to fat ratio changes so much independent of exercise that I've had trainers truly believe their client was on steroids and not work with them anymore because freed up testosterone is where it's at as far as muscle.

**David Stouder:** Wow. Well, to review a little bit. So what you've just told us is leptin, which probably none of us talk about, and only a few of us have maybe heard about, that this is really a master hormone. And, in a sense, all these hormonal imbalances that we think about insulin, thyroid, testosterone, estrogen, they're downstream of leptin, I think, is what you're telling us. And so that you can make some adjustments downstream and get some benefits often not lasting, because you haven't fixed the ultimate problem, and that is leptin.

**Kat James:** Yeah, it's piecemeal for the rest of your life. It's like, "Oh, I'll go to this doctor and that specialist" and all that. But, you can look up *thyroid hormone synthesis*, you'll come to leptin. You can look up *uric acid and kidney function*, you go to leptin. You can look up anything that's hot that month— it's one of my favorite things to do is just look up leptin and autophagy or neuroplasticity, and it is a governing factor, even in the microbiome. And so it is, like you said, to do that is going to put you on a different trajectory. And you will not be— you know, some people say, "Oh, well, the program might be expensive" and yeah, you can do it from home, I would suggest the one where I can do coaching with you and individualize it. This is something that people who aren't self starters should not do the basic jumpstart. But, it's just something that people need to know is going to save tons of money and change your mouth. I mean dental savings alone is going to be amazing. I haven't been to a dentist since 1995, by the way. And so it changes everything. It makes you low maintenance. I used to need all these creams. I used to have dry skin and rashes and all of this stuff. And you become very low maintenance.

**David Stouder:** Well, Kat, thank you. This has been pretty amazing. I really think this is something you're living and breathing, but as you said, I don't think most people really have heard of leptin or think about it. And I'm going to do some more research. And obviously there is a lot of other information we can find at [TotalTransformation.com](http://TotalTransformation.com)?

**Kat James:** And I can share some images if you want to include them, my before and after and other people's before and afters

## What You Need to Know About Leptin

**David Stouder:** Yeah, actually, maybe we'll add that to the post. But, thank you. It was nice to interview you, you and I have talked plenty of times. We've done radio interviews in the past, and I just have to say personal recommendation folks, Kat is the real deal. And especially those of you that have really struggled with your weight, with eating disorders, with a lot of hormonal imbalances, if you think about it, if you could straighten out this one thing, most everything else falls into line, if I'm hearing you correctly and why not go there. So let me thank you Kat and remind everybody to go and subscribe and get access to all the videos, podcasts and transcripts from all of our thought leaders on personalized health at [HumanizedHealth.com](http://HumanizedHealth.com). Kat, thanks again for being with us.

**Kat James:** Thank you and thank you for all you do to educate people, David. I really appreciate it.