

## THE BIG IDEAS

### Overfat Stats

Defining the pandemic.

### Ab Fat

How's your waist-to-height ratio?

**900% --> 90%**

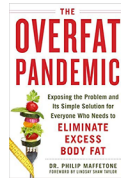
Do the math.

### Fixing Overfat: Step 1

Stop eating junk food.

### Fixing Overfat: Step 2

The Two-Week Test.



# The Overfat Pandemic

Exposing the Problem and Its Simple Solution for Everyone Who Needs to Eliminate Excess Body Fat

BY PHILIP MAFFETONE · SKYHORSE PUBLISHING © 2017 · 200 PAGES

“As it turns out, the number of overfat people is much greater than those who are overweight and obese. Yet something important is missing—a remedy. That’s what this book is about.

In order to understand the remedy for the overfat pandemic, we must consider our food supply. Though our ancestors knew how to eat, today mega-conglomerate food companies sell highly processed junk food to billions of people by convincing them it’s healthy, but it’s not. We’ll call these companies *Big Sugar* as an industry because they use the same strategy as Big Tobacco—gimmicks, deceptions, lies, and lobbyists to sell their products like illicit drug traffickers. It’s as profitable as the criminal cartels—actually, more. And for a real-life perspective, Big Sugar is more deadly than Big Tobacco.

While rising rates of chronic disease, lower quality of life, and years of dysfunction at the end of the lifespan, not to mention the emergence of genetic mutations, are bad enough, we just have to take a look around to see one obvious problem caused by food: the *overfat* pandemic. This book can help you escape it, if you choose. My goal is not to convince you that junk food is bad—there is already consensus on that among clinicians, scientists, and almost all of the public—but to give you that extra push you probably need to get through to the other side.”

~ Philip Maffetone from *The Overfat Pandemic*

*“New research shows that up to 76 percent of the world’s population is overfat, defined as excess body fat sufficient to impair health. Even people who are not overweight or obese can still be overfat.”*

~ Phil Maffetone

I picked up this book as part of my “binge on Maffetone” bonanza. :)

As we’ve discussed in our Notes on [The Maffetone Method](#), [The Big Book of Endurance Training and Racing](#), and [Fix Your Feet](#), Phil Maffetone is one of the world’s all-time great endurance coaches. In addition to coaching the best triathlete ever (Mark Allen), he’s also toured with The Red Hot Chili Peppers as their wellness coach (he considers them endurance athletes) and he’s coached legendary music producer Rick Rubin—helping him Optimize and lose over 100 pounds in the process.

He’s a fascinating, iconoclastic guy who’s been preaching the power of burning fat for fuel for FOUR decades—demonstrating that it’s not only an optimal approach to endurance fitness but to our optimal health as well.

In this book, Phil focuses his big brain on what he calls the “overfat” pandemic. He uses the word “overfat” to describe people who have “excess body fat sufficient to impair health.” Overweight and obese people fall into this category. AND... Even people at a “healthy” weight can be overfat.

In fact, according to his research, 90% (!!!) of Americans fall into the “overfat” category. (Yikes!)

He makes his case for why we should care about what he sees as the overfat pandemic and provides his simple solution to the challenge. It’s a quick, compelling read. (Get a copy [here](#).)

It's also packed with Big Ideas and I'm excited to share a few of my favorites and share some wisdom we can apply to our lives TODAY, so let's jump straight in!

## THE OVERFAT PANDEMIC

*"The concept of fat burning is important because stored fat is a great \*potential\* source of energy for everyday activity. In fact, even a lean person has enough body fat stores worth of energy to walk about 600 miles."*

~ Phil Maffetone

"New research published January 3, 2017 in the journal *Frontiers of Public Health* suggests that up to 76 percent of the world's population is overfat. While we think of those with excess body fat as overweight or obese, normal-weight adults and children can be and are overfat too. In addition, the overfat problem is not only found in inactive people, but many who exercise regularly—even some who are competitive athletes.

I extensively studied this pandemic with my colleagues Professor Paul Larsen and research assistant Ivan Rivera-Dominguez. While I've been referring to this condition of overfat my whole career, we were the first researchers to globally quantify those who are overfat versus overweight and obese, writing that the well-documented obesity epidemic is merely the tip of an overfat iceberg."

Let's start by defining and quantifying the Overfat Pandemic. Then we'll talk about how to check whether or not you might be overfat. Then we'll explore the cause and then chat about Maffetone's super-simple solution.

First, the definition. Maffetone and his colleagues "defined the condition of overfat as having sufficient excess body fat to impair health."

In other words, you can be at a healthy weight and still carrying enough fat to be unhealthy.

Here's a little chart they share to capture the global data:

Condition	Percent of world	Numbers of people
Overweight & Obese	39-49 percent	2.8-3.5 billion
Overfat	62-76 percent	3.5-5.5 billion

Maffetone also makes the point that the global numbers that approach 76% include those who are undernourished and underfat which is one of the reasons why they estimate that 90% (!!!) of the US population is overfat.

NINETY percent of Americans are overfat? That's nuts.

Reminds me (again) of Krishnamurti's wisdom that it is no measure of health to be well-adjusted to a profoundly sick society.

So... Why should we care?

Well, being overfat/overweight/obese is strongly associated with all the chronic diseases we don't want: "High levels of body fat can cause low-grade chronic inflammation, precursors to various downstream diseases, those that most Western people, and many others, will die from, including type 2 diabetes, heart disease, cancer, stroke, Alzheimer's, and many others. These, along with increased disease risks, reduce the quality of life."

P.S. Did you know that chronic diseases cost an estimated \$17 trillion globally? \$3 trillion in the US alone in 2015. Let's not contribute to those stats—other than doing our part to bring them down, of course.

## AB FAT

"Too much belly fat is bad. Also referred to as abdominal or central obesity, more than 30 percent of normal-weight adults and children have too much belly fat. Since it can occur in normal-weight non-obese people, a better term would be *abdominal overfat*, or ab fat. This problem contributes significantly to the overfat population.

*"Any workout can become anaerobic when the intensity of running, biking, dance, and other workouts is too high. While anaerobic efforts may burn more calories during the workout, the process does not train the body to specifically burn more stored fat calories over the next twenty-four hours."*

~ Phil Maffetone

*"Of course, most so-called energy bars are junk food too. They are really 'fatigue bars' because they zap our energy (right after you get that short-lived sugar rush). Likewise for sports drinks and other liquid beverages claiming to be healthy."*

~ Phil Maffetone

Abdominal overfat is particularly bad because, more than higher levels of fat elsewhere, this metabolically active fat has a potentially greater negative impact on health, regardless of a person's weight. Waist circumference has a direct correlation with the risk of developing heart disease, stroke, type 2 diabetes, hypertension, cancer, and other chronic diseases, in addition to its relationship to the overfat state.

Excess ab fat is built up in large part because refined carbohydrates, through the mechanism of insulin production by the pancreas, triggers the movement of fat stores in the body's periphery, from thighs and arms, for example, where it is less harmful, to abdominal deposits, where it's most harmful."

Ab fat. <- That's the place to look.

Robert Lustig is one of the world's leading endocrinologists and experts on insulin and fat. He echoes this wisdom in *Fat Chance* where he says: "When it comes right down to it, it's all about your middle. This whole obesity/health/longevity question centers on your abdominal, visceral, or 'big belly' fat—at least statistically."

Plus: "The simplest and cheapest surrogate for determining your health status is your waist circumference, which correlates with morbidity and risk for death better than any other health parameter. This is arguably the most important piece of information in your entire health profile because it tells you about your visceral fat. A high waist circumference translates into the 'apple' shape that tips physicians off to risk for diabetes, heart disease, stroke, and cancer."

Lustig tells us that our belt size provides the easiest quick measure of waist circumference. He says more than 40 inches for men and 35 inches for women is a likely indicator of visceral fat.

(Private question: What's YOUR belt size?)

Maffetone arrives at the same waist data a little differently and a little more conservatively in terms of what qualifies for overfat status.

He encourages us to calculate our "waist-to-height" ratio and tells us: "Over the years, various forms of waist measurement have been used, but the best current one is the waist-to-height ratio (WHtR). This is accurate for adults and children of both genders around the world. While it doesn't indicate percentage of body fat, for which there is no scientific consensus of normal and abnormal, a WHtR of .50 and above measured at the level of the belly button (umbilicus) indicates being overfat, defined as excess amount of body fat to impair health. For example:

- A person with a 30-inch waist and height of 62 inches: WHtR = .48; normal fat.
- A person with a 36-inch waist and height of 70 inches: WHtR = .51; overfat.
- The key message is simple: **Our waist circumference should be less than half our height.**"

(Private question: What's your WHtR?)

## 900% INCREASE IN JUNK FOOD → 90% OVERFAT IN US

"One reason for the explosion of the overfat pandemic over the last forty years, and why it continues with no indication of stopping, is that the pandemic is continuously being fed the very foods that cause people to become overfat. Junk food is cheap and widely available, people are addicted to sugar, governments continue recommending it, and most health-care organizations have not done much to remedy the problem. National survey data in the US, for example, has indicated that during these decades, consumption of refined carbohydrates has increased by up to 900 percent."

What's the primary cause of the overfat pandemic and its associated chronic diseases?

*"The story is clear, as is the research: exercise can potentially, significantly, contribute to better physical, biochemical, and mental-emotional health, which includes tuning your metabolism to be better at fat-burning. However, this is not true of either extreme-a sedentary lifestyle or overtraining."*

~ Phil Maffetone

*"We call devices that measure heart rate 'heart-rate monitors,' but you could also call them 'fat-burning monitors' since monitoring your pulse rate during exercise is the best way to promote fat-burning both during and after your workout."*

~ Phil Maffetone

That 900% (!!!) increase in refined carbohydrates might be contributing, eh? Think about it...

- 900% increase in refined carbohydrate consumption. (Aka junk food.)
- 90% overfat population.

Could it be that simple? Gary Taubes makes a similar case in his great book [The Case Against Sugar](#). Check out the Notes for more. For now: "When Isaac Newton paraphrased the concept of Occam's Razor, he did so by saying, 'We are to admit no more causes of natural things than such as are both true and sufficient to explain their appearances.' This was rule number one of Newton's 'rules of reasoning in natural philosophy' in his Principia. So is it necessary to posit multiple aspects of diet and lifestyle—multiple causes—to explain the presence of these chronic diseases that associate with Western and urban lives, or will one suffice? Sugar, for example."

## FIXING OVERFAT

"The overfat pandemic was preventable decades ago. It is preventable in its ongoing pattern of growth. Now we know that it's also reversible. This can be accomplished with three key suggestions that will be defined, emphasized, explored, and discussed throughout the book, making the process of self-health management an easier one for you:

1. Stop eating junk food.
2. Determine your level of carbohydrate intolerance.
3. Adjust your eating to changes in carbohydrate intolerance that occurs with age."

So, quick recap thus far: The overfat pandemic appears to be significant. It is caused, at least in part, by the excess consumption of junk food. Therefore, the remarkably simple solution is to STOP EATING JUNK FOOD.

Sound too simple to be true?

Well... If you're overfat (or overweight or obese), why not give it a try? Make it a game and see what happens if you simply eliminate all the added sugar and refined flour in the junk food you (and your family!) consume.

You know what might happen? You might just take a HUGE step forward in Optimizing your health, energy and happiness while moving toward your ideal lean body weight.

Stop eating junk food. That's Step 1 of Maffetone's approach. Step 2? That's our next Idea...

## THE TWO-WEEK TEST

"Once you've taken that first big step—removing refined carbohydrates, including the added sugars and other junk food from your life—you most likely will immediately start burning more body fat, storing less, getting leaner, and becoming healthier. It's amazing how many miraculous effects I've seen after this one significant step. It begins a journey of better health and fitness, and causes you to rely on habits such as label-reading and learning to better understand your body and brain, while always being aware that Big Sugar wants to get you back as a customer.

Now you're ready for the second step, determining your level of carbohydrate intolerance, which will help you fine-tune your metabolism even more.

Specifically, this step can help you discover how much natural carbohydrate foods such as fruit, lentils, beans, natural grains, honey, and others you tolerate, without even experiencing mild adverse effects. In the early 1980s I developed a process whereby an individual can evaluate themselves—feel what it's like to be affected by too much carbohydrate. It's called the Two-Week Test."

*"There is nothing radical about the notion that refined carbohydrates are unhealthy, there are many radical diet plans that make it seem like all carbohydrates are deadly. They're not. Finding your level of tolerance is what's most important, then eat only healthy carbohydrates."*

~ Phil Maffetone

*"Of all the clinical tools I developed and used for assessment and therapy throughout my career, the consistent results from the Two-Week Test surprised me the most—and still do—specifically regarding how a person can go from one extreme of poor health to vibrant health in a short time. It's simply a matter of removing a major stressor—refined carbohydrates—in a person's life and allowing the body to function the way it was originally meant."*

~ Phil Maffetone

*"We don't really have a health-care system—it's disease care, and one that is among the most successful revenue-generating industries in history. The system discourages people from getting healthy by addressing symptoms instead of treating the causes of illness, and by keeping the elderly alive longer, a period when medical costs usually soar."*

~ Phil Maffetone

So, again, step 1 is to remove all the REFINED carbohydrates from your diet.

Although our culture is (literally!) addicted to all the added sugars and flours in all the refined-carbohydrate junk foods we eat and their presence is UBIQUITOUS—from the cafeterias in elite prep schools and hospitals to Fortune 100 break rooms—no one serious about Optimizing is going to argue that these refined carbs should be a part of our diet.

Yet... As [Emerson](#) says, it will take something truly heroic in you (godlike he says!) to do what you feel is right. As he says: *"And truly it demands something godlike in him who cast off the common motives of humanity and ventured to trust himself for a taskmaster."*

<- Yep. That's about right.

So... We take that first step and remove all REFINED carbohydrates from our lives. (APPLAUSE!!)

Now... The question is, what quantity of NATURAL carbohydrates can you tolerate?

This is part of Maffetone's "Two-Week Test" which a) we've talked about in our other Notes and b) I REALLY like because c) it accounts for the fact that we're all individuals.

Maffetone isn't saying that ALL carbs are bad and that EVERYONE needs to be on a ketogenic diet tomorrow. (Hah.)

He is saying, however, that we'd be wise to TEST OURSELVES and see what our personal level of tolerance for carbohydrates looks like.

[Check out The Two-Week Test on Maff's site here.](#)

Basic idea: Start by making a note of how you feel on Day 1. Then eliminate all refined carbs AND all natural carbs for the two-week test. That means none of the obvious junk food stuff like donuts and Cheetos. AND... None of the other highly refined carb products like breads and pasta. THEN, for the two-week test period, you'll also eliminate things like potatoes and corn and rice.

(Note: Is that a moderately-challenging project? Yes. But, I might be shouting, PLEASE REMEMBER: It's a LOT EASIER to PREVENT chronic diseases than it is to RECOVER from them. So... If you're feeling it, get your motivation up to 212° and crush it.)

What will you eat instead? Check out the site for the details. Two weeks. Test it.

How will you feel after that test? Odds are, you're going to feel a LOT better.

Then, you begin the next phase and start adding back NATURAL carbs. Note: There's a big difference between "natural" carbs and "refined carbs." The refined carbs? Those are (at least should be!) 100% gone forever. As in, non-negotiable, "I care about my health and the health of my family way too much to go back!" style.

Maffetone says that there are really only two distinct cuisines: Healthy food and junk food. Healthy food is *"real, naturally occurring, unadulterated and unprocessed, and nutrient-rich. If you can grow or raise it, it's real. Included are fresh fruits and vegetables, lentils and beans, eggs, real cheese, whole pieces of meat (such as fish, beef, chicken), nuts, seeds, and similar items."*

As you add back some natural carbs like berries and other low-glycemic foods (again, check out the book or his site for the details), ask yourself, "How do I feel when I eat this?"

That's how you identify your level of carbohydrate intolerance. Yours will be different than mine (which happens to be high—carbs and I don't get along particularly well) and different than Maffetone's. The question is: What is it? Then, we simply tailor our lives to Optimize.

Essentially, maintaining our optimal lean body weight (and the energy levels that go with that!) is all about controlling our insulin levels. Sugar and refined, high-glycemic carbs tend to jack our



*"There may appear to be a lot of information in this book, especially if it's new to you and even if much of it is quite different from what you used to think. Implementing it, though, is really quite simple. Eat real food and avoid junk."*

~ Phil Maffetone

insulin up (then down!), leading to fluctuations in our energy levels and weight and mood. Get insulin under control and the rest follows.

Let's go back to Robert Lustig for some more wisdom from *Fat Chance* before wrapping it up. He tells us: *"Insulin, in common parlance, is known as the diabetes hormone. Diabetics inject insulin to lower their blood glucose. But where does the glucose go? To the fat. Insulin's actual job is to be your energy storage hormone. When you eat something (usually containing some form of carbohydrate), your blood glucose rises, signaling the pancreas to release insulin commensurate with the rise in blood glucose. ... Insulin then tops off the liver's energy reserve by making liver starch (called glycogen), and shunts any amino acids from the blood into muscle cells. Excess fatty acids, or blood lipids, are cleared into fat cells for storage for a 'rainy day,' where they get turned into greasy triglycerides (such as the fat surrounding your steak). There is no energy storage without insulin—it is the key that unlocks the door to the fat cell to let energy enter and subsequently be stored as fat. Insulin makes fat—the more insulin, the more fat. And there it sits . . . and sits . . . for as long as there is insulin around. When the insulin levels drop, the process goes in reverse: the triglycerides get broken down, causing the fat cells to shrink—when it happens, that's weight loss!—and the fatty acids reenter the bloodstream and travel back to the liver, where they are burned by the liver or other organs. In this way, by cycling our insulin up and down, we burn what we need, and store the rest."*

And: *"There is no fat accumulation without insulin. Insulin shunts sugar to fat. It makes your fat cells grow. The more insulin, the more fat, period. While there are many causes of obesity, excess insulin in some form is the 'final common pathway' for the overwhelming majority of them. Block it, and the fat cells remain empty."*

In short, one more time: Want to be optimalfat instead of overfat? Optimize your insulin.

How will YOU Optimize \*your\* insulin just a little more today? Here's to being the change, Optimizing our lives and the lives of our families, communities and world as we heroically meet the myriad of challenges facing our world today,

B

**Brian Johnson,**  
Chief Philosopher

If you liked this Note,  
you'll probably like...

[The Case Against Sugar](#)

[Fat Chance](#)

[Eat Fat, Get Thin](#)

[Fat for Fuel](#)

[Why We Get Fat](#)

[Always Hungry?](#)

[Bright Line Eating](#)

## About the Author of "The Overfat Pandemic"

PHILIP MAFFETONE



Dr. Philip Maffetone has been a private practitioner, health and athlete coach and consultant, published independent researcher, respected pioneer in the field of complementary sports medicine, and internationally recognized educator and author in the fields of nutrition, biofeedback, exercise physiology, and athletic training over the course of his forty-year career. Since 1977, he has used the term "overfat" and has recommended low-carbohydrate and healthy fat eating.

## About the Author of This Note

BRIAN JOHNSON



Brian Johnson loves helping people optimize their lives so they can actualize their potential as he studies, embodies and teaches the fundamentals of optimal living—integrating ancient wisdom + modern science + practical tools. Learn more and optimize your life at [optimize.me](https://optimize.me).