

THE HCG DIET: THE “CURE” FOR OBESITY?

My name is Dr. Teryl Boothe and I’ve been asked to write something up about the new weight loss program my wife and I completed in early November 2010. We were supposed to stop the diet after six weeks but we went eight, partly to see what would happen. We continued to lose weight, though at a reduced rate.

First some numbers: In eight weeks I lost 40 pounds and my wife has lost 26. I don’t know about inches lost because I don’t care enough to measure. I care about my waist size and how my clothes fit. All of my clothes are too big for me now, but I’m not replacing them because we’ll go on the diet again in January. I’ve got another 20 to lose.

I’ve been big for enough years that I threw away all my “skinny” clothes. My wife didn’t, though, and she’s wearing pants she had put in the back of the closet. My dress shirts don’t choke me anymore and I can button the top button on all of them now. Our faces are no longer fat and round like they were. Well, they’re still a *little* chubby but the moon faces we had are gone.

For the most part we weren’t hungry despite eating only 500 calories a day. Yes, you heard right: we ate only 500 calories a day for eight weeks. Sure our stomachs rumbled a bit and there were times when we really wanted to eat something more, but those times passed easily with water or some other non-caloric beverage such as yerba maté.

We had a reasonable amount of energy, certainly enough to accomplish all we needed to do in a day. We didn’t exercise because the instructions said not to start while on the diet. If you’re already exercising, that’s fine. Walking would be great, if you can. We didn’t take any “energy pills” or stimulants so there were no jitters or shaky hands.

We got up in the morning anxious to weigh because we knew we were losing weight practically every day. What other diet program has you weigh *every day*? None that I know of. Most tell you to weigh no more than once a week.

500 calories a day?

I bet you’re still stuck on that number. I was when I first heard it. I thought, “There’s no way anyone can last on a 500-calorie diet. They’d be starving!”

It’s true. If all you were doing was cutting calories you probably wouldn’t make it past three or four days eating only 500 calories. You’d feel terrible and be grumpy and snap at everyone. Your hands would shake due to low blood sugar and you wouldn’t be able to think clearly.

Yet we had none of those symptoms.

Why? Because about 2,000–2,500 calories circulated through our bloodstreams every day, enough to meet our bodies’ demands for energy. If we were only eating 500

calories, where did the other 2,000+ come from? It came from the fat we’d been unable to get rid of for years.

Let me explain...

Three kinds of fat

You have three kinds of fat in your body: structural, normal reserve, and nonessential. Structural fat is like packing peanuts in a shipping box: it surrounds, cushions, and protects important things like your kidneys, liver, and coronary vessels. You need this fat and don’t want to burn it off, ever.

Normal reserve fat is where your body puts calories you eat but don’t need right away. Think of it like a savings account in the bank: you don’t need it now but must have immediate access to it for when you do need it. Reserve fat is stored all over your body and you can pull energy out of it anytime you want.

Structural and normal reserve fat have nothing to do with obesity.

The last kind of fat, nonessential fat, is just that: nonessential. It serves no metabolic function other than acting as a storage depot for the excess calories you’ve eaten over the years. It’s different than normal fat in that once you have it it’s very, very difficult to get rid of. It’s locked up so tight it’s completely inaccessible except under the most dire of circumstances: starvation.

On a regular diet you’ll lose normal reserve fat and, if you can stay on the diet long enough, some structural fat (which you don’t want to lose). You will not touch the nonessential fat unless you starve yourself, literally. You have to be starving for more than two months before your body will start to dip into the energy stored in nonessential fat.

Next let’s talk about how your body controls where extra energy gets stored.

Meet your diencephalon

Since your brain controls everything in your body, some part of it has to be in charge of where all the extra energy you eat goes. That place is called the “diencephalon”. It’s part of your hypothalamus, buried deep inside your brain.

Think of your diencephalon like a bank account manager. When you eat more calories than you need, it has to decide which “account” to put those extra calories in. Excess carbohydrates can be stored in your liver in the form of glycogen, where it can be easily accessed. Glycogen is like your checking account: fast and immediate access. Carbs that don’t fit into your liver get turned into fat, and...

...your diencephalon, your “account manager”, parks all excess fat in your normal reserves, your savings account. This is how things work when everything is hunky-dory.

But in the obese or chronically overweight, everything is *not* hunky-dory. They cannot keep weight off no matter what they do. Their diencephalons have been injured and have stopped functioning correctly. Less fat gets stored in the normal reserves and more gets shuttled off to the nonessential fat stores, where it sits locked up and out of reach.

Why dieting and diet products don't work

When you diet you take in less calories than your body needs to function. You're short of cash, so to speak, so your account manager gives you cash from your checking account (glycolgen). When that's empty (which happens quickly) it dips into your savings account (normal fat reserves). As soon as that's gone you start getting the shakes, you feel awful, you're lightheaded, and you can't think clearly. All you can think about is eating because you're starving.

Your malfunctioning account manager doesn't think things are bad enough yet so nothing is released from nonessential fat stores.

If you have incredible willpower and stick with your diet long enough your skin will start sagging and you'll look old because you store normal fat under your skin and now it's gone. You seem to lose weight in all the wrong areas—*your problem areas remain because that's where the unreachable nonessential fat is stored.*

When you start eating more food, which you will always do, a little of the extra calories will go back into the normal reserves, but the bulk of it goes into the nonessential fat account. Why? Because that's where your malfunctioning diencephalon puts it. This is why the chronically overweight always have a net gain in weight after trying to reduce.

The more years you yo-yo diet, the more your diencephalon thinks all extra calories should be put away for the rainy day that never arrives.

How to get rid of the nonessential fat

The only thing known to get rid of nonessential fat, aside from liposuction, which only produces temporary results, is *human chorionic gonadotropin* hormone (hCG). hCG is naturally found only in the body of pregnant women. It's released in great quantities to ensure that the developing baby gets all the nourishment it needs regardless of the mother's diet. If the mother has a low calorie diet, energy is released from nonessential fat stores.

That hCG could be used to "cure" obesity was discovered by a British medical doctor back in the 1950s. His name was A.T.W. Simeons. Making a long but interesting story short, Dr. Simeons began using hCG on obese patients in a small hospital in the south of Rome. He theorized, and proved true, that hCG injected into obese humans made them burn nonessential fat instead of normal fat while they

were dieting. He proved his theory on more than 10,000 patients.

This is how it works. My wife and I have been eating 500 calories a day but our bodies need at least 2,000 to function. Mine probably needs 2,500 because I'm much bigger than she is. To make up the difference, the account manager (diencephalon), under the influence of hCG, digs into our nonessential fat stores for the extra 1,500 calories (or 2,000 extra calories in my case).

The result is our bodies have the minimal energy they need to function normally, which is why we feel pretty good while eating only 500 calories.

hCG Diet Program Overview

Dr. Simeons injected hCG into his patients. We hate shots, so we chose to use professional homeopathic hCG, which causes an hCG-like effect in our bodies in the absence of the real hormone. These are drops we take under our tongue.

Regardless of what you think of homeopathy, if you even know anything about it, it works. As I said earlier, there's no way we could get by on 500 calories a day for 3+ weeks. **NO WAY.** The homeopathic hCG is having the same effect as hCG injections. Actually, in my opinion, it's better than the hormone injections. The product we're using has other components in it that make it a far more effective weight loss tool than plain hCG.

Back to the overview:

1. **Preparation.** You need to be prepared before you start the very low calorie diet (VLCD). You're given material to read and some important do's-and-don'ts. For example, you need good bathroom and food scales. Also, you'll start on the detox part of the program. A lot of toxic material has been parked in those nonessential fat stores and you'll want to make sure it leaves your body for good. Preparation takes a week or less.
2. **Fat-Loading.** To make sure your normal fat reserves are well stocked you will need to eat as much high-calorie food as you can get down your first two days on the hCG drops. This is necessary to prevent excessive hunger at the start of the diet. We did this (gladly). Our first day on the VLCD was rough. The second day was easier. By the third day we were used to it. Don't worry, any weight you gain during this fat-loading time will come right off. I lost 10 pounds the first four days of the diet.
3. **500 calorie diet.** You'll weigh yourself first thing in the morning (after going to the bathroom) the third day of taking the hCG drops. This will be your starting weight for the diet and you will begin the VLCD that day. You'll follow this diet for either 21 or 43 days, depending on how much weight you need or want to lose. *You must follow the diet exactly.*

4. **Stopping the hCG drops.** After either 21 or 43 days you'll stop taking the hCG drops but continue on the VLCD for an additional three days. This is necessary to help your system learn to regulate on its own again and for the effects of the hCG to completely leave your body. You might have to enter the three-week maintenance phase early if you start to feel very hungry.
5. **Maintenance Phase.** Three weeks. The purpose is to stabilize to your new weight and reset your diencephalon, your "account manager". You'll slowly start increasing your caloric intake by eating breakfast and larger portions for lunch and dinner. You'll slowly reintroduce fat and foods you weren't permitted to eat on the VLCD but you'll completely avoid starches and simple sugars. Continue weighing yourself every morning to make sure you stay within two pounds of the diet end-weight.
6. **Final Phase.** Same as the Maintenance Phase except you will start introducing sugars and starches into your diet in small servings. This three week phase is necessary to allow your new weight "set point" to take hold. Continue weighing daily to ensure you stay within two pounds of your new normal weight.

If you've lost all the weight you need or want to lose, you're finished with the diet. If you want or need to lose more, you can start up again at the end of the Final Phase and go another 21 or 43 days. If you need more diet periods after that they have to be further apart.

According to Dr. Simeons, here's what you can expect after you've completed your complete hCG diet program and have reset your diencephalon:

- You'll be like the people who are naturally thin and don't have weight problems.
- You're new normal weight will be maintained on a 1,800–2,500 calorie diet, depending on your body size, activity level, etc.
- You can overindulge now and then without gaining weight, but it will be difficult because you'll feel full sooner than you ever did before.
- You'll be free of the food cravings and hunger pangs you had before (assuming you don't have food allergies or sensitivities, which you probably do).
- Your body shape will be proportionate. Problem areas will be gone and parts of your body that may have been too thin or gaunt will fill out normally as your corrected diencephalon places fat reserves back in normal areas.

Frequently Asked Questions

1. *What happens if I cheat on the diet?*
When we cheated we either gained a pound or two or didn't lose any weight. We immediately returned to the VLCD and kept taking the hCG and detox drops and the gained weight vanished in a day or two. The downside of

cheating was, of course, we lost days where we would have been losing weight.

2. *Do I lose weight every day or will I have plateaus?*
A plateau is when you've been good about your diet but your weight loss stops. You shouldn't gain weight unless you've cheated or have begun your menstrual cycle (and maybe not then—my wife continued to lose while on her cycle and she usually gains five pounds). Plateaus are normal for some while others never have one. Both of us had them. It usually corrects itself in a day or two.
3. *I found some homeopathic hCG drops on the Internet.*
Be careful. You don't know how they were made or if they were made from human hCG. They might have used horse hCG, or worse. We chose a professional homeopathic hCG product sold by a company called Deseret Biologicals because it's made from human hCG in an FDA-monitored facility. Also, it's not just hCG: it's a complete and superior weight loss tool.
4. *What if I have to travel?*
Continue to take your drops and do the best you can with your diet. Take your scale with you; daily weighing is critical as it gives you immediate feedback about how you're doing. There are procedures to follow if you have to be gone for a long period of time.
5. *My work requires me to eat at restaurants.*
Again, you'll have to do the best you can. If it's not too awkward or rude, take your own food. If this isn't possible, ask your waitress to prepare your food according to your needs. (You'll know what I mean when you learn more about what you can eat.)
6. *Who can't do this diet?*
Pregnant women, of course. Not that they need to; they're producing their own hCG. People with gallstones may see their condition worsen because the VLCD contains almost no fat so the gallbladder doesn't get flushed. Dr. Simeons allowed gallbladder patients into his program if they agreed to let him remove their gallbladders at the hospital if necessary. Heart attack patients must wait at least three months and be stable before undergoing the diet.
7. *I have diabetes. Can I still do the hCG diet?*
Yes. If you're taking medication your needs will probably change. You should clear it through your physician.
8. *How do I know how much weight I'm supposed to lose?*
You'll know when your body is done burning nonessential fat: you'll become seriously hungry, the shakes will start, you'll be crabby, etc. This happens because you lack the added energy in bloodstream from the extra fat. If it's clear you still need to lose weight, this means your

body has had enough of the hCG for now. Simeons called this “immunity”. Stop the drops, finish your three days of the VLCD with no drops, and enter the Maintenance Phase. If you look pretty good it’s likely you’ve reached your new ideal weight and it’s time for you to end the diet (appropriately, of course).

9. *Do I continue to take my medication and supplements?*

Don’t discontinue any medication without talking to the doctor who prescribed it for you. Dr. Simeons wrote you don’t need to take vitamins while on the diet, but that was in 1960. I think you should keep taking your supplements although I would stop high-fat supplements like flax seed oil and fish oil.

10. *How do I know how much to eat on the Maintenance and Final Phases?*

By what your scale says every morning. You’re supposed to stay within two pounds of what you weighed at the end of the diet. If you lose more than two pounds, you know you need to eat more food. If you gain more than two pounds, you know you’re eating too much and will have to do a “steak day”: drink nothing but fluids during the day but don’t eat until dinner, when you’ll have a large steak with a raw tomato or apple. The extra two pounds or so should be gone the next morning.

11. *Can’t I keep losing weight on the Maintenance and Final Phases?*

You shouldn’t. Any weight you lose after you stop taking the hCG drops will come from normal fat reserves, which means you’ll gain it back. You’re new ideal weight is what you weighed when you started the Maintenance Phase.

Other aspects of the diet

Average Daily Loss. Divide your total weight lost by the numbers of days you’ve been on the VLCD. When you know this number you’re not so worried about plateaus. My average daily loss was .71 pounds. Most people average half-a-pound to a pound per day. Those who need to lose 100 pounds or more might average two pounds a day while a female who only wants to lose ten pounds may take the entire 21 days to do so.

Cosmetics. Dr. Simeons forbade his patients to use any cosmetic product with fat (oil) in it. The fat, no matter how small, will get absorbed and can affect weight loss. I’m not sure it’s as critical to be this strict with the hCG homeopathic drops as it is with the injections. It may be important for some people but not for others. We’re recommending that everyone be strict about this at the start of their diet.

Water. Water consumption is critical for good weight loss. People think if they drink too much water their body will retain it and they won’t lose weight. Nothing could be

further from the truth. If your body is forced to retain water it will do so at all costs. Drinking insufficient amounts of water will strain the kidneys and lead to constipation.

Dieters should drink *no less than 64* ounces of good water every day. Closer to a gallon is better. Please don’t drink tap water unless you absolutely have to. At least get one of those inexpensive filters that screws onto the faucet; they work well and refills are available everywhere.

Miscellaneous. Dr. Simeons wrote about patients feeling “euphoric” while on the diet. We had times like this, where we just felt great. It wasn’t the rule, however. My wife had been losing hair like crazy before the diet but stopped while on the drops. My knees no longer hurt when climbing stairs (probably because they’re propelling 40+ fewer pounds uphill). All the digestive issues we had stemming from over-eating are gone.

Conclusion

This diet was easy to do because it produced fantastic results. I lost ten pounds the first week! For those kinds of results I can put up with having to weigh most of what I eat, hunger pangs now and then, not eating out, and all the other things this diet requires me to do. If I had only lost a pound a week I would have quit after two weeks.

The biggest hurdles to overcome are mental. Many are sure they’re going to starve on only 500 calories a day while others don’t think they can give up certain favorite foods. You have to just push through all that and get started. Most of you will be like us: you’ll lose 5-to-10 pounds in four or five days. Imagine how encouraged you’ll be! After that the motivation comes easily and temptations to stray from the diet fail because you’re losing weight practically every day.

Also, you have Dr. Simeon’s promise from working with over 10,000 people on his hCG Diet: *When you’re done you’ll be more like all those naturally-thin people who have no problem controlling their weight.*

One last thing. Many people with serious food cravings are allergic or sensitive to those foods. This can be problematic after you’ve completed the diet. If you’re someone who has a history of food cravings you might need to have your food allergies and sensitivities corrected either while you’re going through the diet or afterwards. Fortunately, we do that at our office.

Dr. Teryl Boothe

P.S. Because of our success with the hCG Diet, we’ll be adding it to the services we offer at our chiropractic and allergy treatment center. **We’ll be discounting the weight loss program by \$200 until we’re up and running full speed. Get started NOW and save some serious money!**