The Complete Guide To

MASTERING TYPE 2 DIABETES BLUEPRINT

The Simple Techniques To Increase Insulin Sensitivity Permanently

Your Complete Meals & All The Tools Included To Restore Normal Blood Sugar **In A Week!**

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DISCLAIMER

This mini-guide is designed to provide information about the subject matter covered. All attempts have been made to verify the information presented in this mini-guide. Neither the author nor the publisher assumes any responsibility for errors, omissions, or contrary interpretation of the subject matter. The purchaser or reader of this mini-guide assumes responsibility for the use of these materials and information. The author and publisher assume no responsibility or liability whatsoever on behalf of any purchaser or reader. The purpose of this mini-guide is to educate. Any perceived slight to specific individual or organization is unintentional. This book is the way to make better-educated decisions, find the root cause of Type 2 diabetes, and show ideas to master or eliminate in some cases. It is also intended to help you restore normal sugar level for optimum health, improve insulin sensitivity, and set you to master Type 2 diabetes through nutrition.

Dedication

This complete guide is dedicated to my beloved aunty, who died in a heart attack due to a long history of Type 2 diabetes. She was my inspiration.

And she is still my inspiration to help others to master Type 2 diabetes through nutrition (MTN).

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Chapter 1

What Dr. Sarah Hallberg Said?

‘Reversing Type 2 diabetes starts with ignoring the guidelines.’

Who is Sarah Hallberg?

Dr. **Sarah Hallberg** is the Medical Director at Virta Health, the first clinically-proven treatment to safely and sustainably reverse Type 2 diabetes without medications or surgery. Dr. **Hallberg** founded Indiana University Arnett's Medically Supervised Weight Loss Program, where she still serves as Medical Director.

She is the Medical Director of the Medically Supervised Weight Loss Program at IU Health Arnett, United States. Earlier 2015, she gave a presentation at a TEDx event at Purdue University, Indiana, and provided evidence that Type 2 diabetes can be reversed through nutrition.

To this date, her eye-opening presentation accounted for over 5 million views and is still growing. ***Many many people have received tremendous benefits from it globally.***

The Youtube/web link provided in the 'References section' below.

What Are The Current Guidelines?

Till 1997 fasting blood sugar of 140mg/dl or 7.8mmol/l was considered normal and healthy. An expert panel revised the guidelines and reduced the limit from 140mg/dl or 7.8mmol/l to 7.0mmol/l or 126mg/dl.

This means if you have fasting blood glucose more than 7.0mmol/l or 126mg/dl, you have diabetes. So, anyone who had a blood sugar between 7.0mmol/l to 7.8mmol/l or 126mg/dl and 140mg/dl, which previously used to be considered normal and healthy, was now a diabetes patient.

Worldwide 14% of the new population joined the list of diabetic patients. Later, it was exposed that the diabetes cut-off panel members were either paid consultants, paid speakers, or grant recipients of big pharma companies, who makes the anti-diabetes drug.

Further to make the situation worse, the ADA pushed the fasting glucose standard from 7.0mmol/l or 126mg/dl to 5.5mmol/l or 100mg/dl in 2003. As a result, suddenly, the number of diabetes patients in the United States increased from 8.3 million to 15.5 million in 2003.

And the number of diabetes patients in India increased from 1.3 million to 20 million in the same year, due to unscientific and commercial motives to lower standards drastically.

Today, more than 65 million Indian populations are being recognized as diabetic patients. And 34.2 million people in the United States have diabetes to date.

Remember, ADA is managed by big pharma companies that make anti-diabetes drugs, and that is what Dr. Sarah Hallberg is trying to educate people around the world.

Chapter 2

What Are The New Guidelines?

To improve the quality of life of people with Type 2 diabetes through nutrition, the 'American College of Physicians (ACP) published the four new (Peer Reviewed Evidence-Based) Diabetes Guidance Statements' in the '***Annals of Internal Medicine***' on March 6, 2018.

ACP or the American College of Physicians is a national organization of internists specializing in the diagnosis, treatment, and care of adults. They never receive any funds from any drug or food companies in any shape or form-which makes them the highest credible organization on diabetes research of all time over others.

Here are the four new (Peer Reviewed Evidence-Based) Diabetes Guidance Statements:

Guidance Statement 1:

Clinicians should personalize goals for glycemic control or typical blood glucose levels in patients with Type 2 diabetes based on a discussion of benefits and harms of pharmacotherapy or treatment using drugs, patients' preferences, patients' general health, life expectancy, treatment burden, and costs of care.

Guidance Statement 2:

Clinicians should aim to achieve an HbA1c level between 7% and 8% in most patients with Type 2 diabetes.

Guidance Statement 3:

Clinicians should consider de-intensifying pharmacologic therapy in patients with type 2 diabetes who achieve HbA1c levels of less than 6.5%.

Guidance Statement 4:

Clinicians should treat patients with type 2 diabetes to minimize symptoms related to hyperglycemia and avoid targeting an HbA1c level in patients with a life expectancy of fewer than ten years due to advanced age eighty years or older), residence in a nursing home, or chronic conditions (such as dementia, cancer, end-stage kidney disease, or severe chronic obstructive pulmonary disease or congestive heart failure). The harm outweighs the benefits in this population.

Chapter 3

What Dr. Jason Fung Said?

On page XV, the author of 'The Diabetes Code,' Dr. Jason Fung said, ***'drugs won't cure a dietary disease'.***

And 'Heart disease is the major killer of diabetic patients. We've pretended that those glucose-lowering medications make people healthier, but it's been a lie. We've overlooked a singular truth: ***you can't use drugs to cure a dietary disease.***'

Dr. Fung is a Canadian nephrologist. He's a world-leading expert on intermittent fasting and low carb, especially for treating people with Type 2 diabetes. He has written many best-selling health books, and he co-founded the Intensive Dietary Management (IDM) program.

He was trained in Los Angeles and Toronto as a kidney specialist. He founded The Fasting Method (TheFastingMethod.com) to provide evidence-based advice for weight loss and managing blood sugars, focusing on low carbohydrate diets and intermittent fasting.

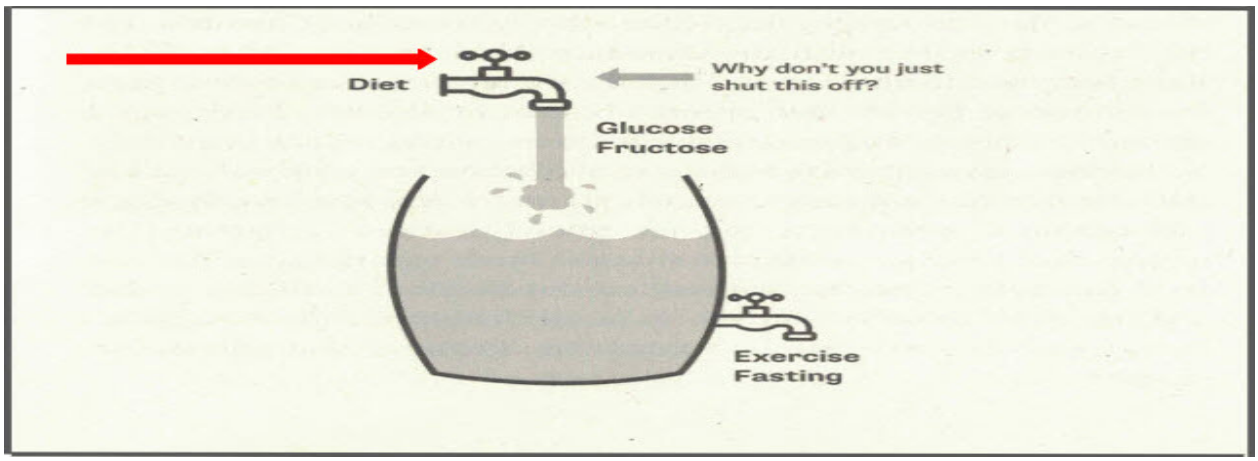
He is currently helping people with Type 2 diabetes to reverse it from his Toronto location.

On page 206, he also showed what measures cure Type 2 diabetes and what our current treatment protocol is following. And here it is:

And What Dr. Verner Wheelock Said?

If I had a flood in my house…
I would not spend day after day, week after week, or year after year to buying buckets, mops, and towels. I would not be inventing different types of buckets and more expensive mops or drainage systems to ensure the water drained away quickly.

Instead, 'I would find the source of the water and turn it off!'



Chapter 4

A Happy Tale of Ex. US President Bill Clinton

Due to a long history of Type 2 diabetes, former US President Bill Clinton underwent quadruple coronary artery bypass surgery on September 2, 2004. A stent placed in his heart, which he didn't like.

Due to complications, he had to go through surgery again on March 10, 2005. He underwent heart surgery back on February 11, 2010.

After research, he found that 82% of people who went through a plant-based diet from 1986, their heart's arterial blockage cleared up without any surgery.

Last, in 2012, Bill Clinton adopted a plant-based diet under the supervision of cardiologist Dr. Caldwell Essylystin, Dr. Dean Michael Ornish, Dr. T. Colin Campbell (author of China Study) & handful of others including Dr. Mark Hyman.

And since 2014, Bill Clinton is doing very well with diet only. He also recovered from his Type 2 diabetes. This is what he was sharing with CNN interview titled ***'Dr. Ornish on The Situation Room with Wolf Blitzer.'***

The link provided in the 'Reference Chapter' below.

Chapter 5

Why Not Keto or LCHF?

Carbohydrates help manage blood glucose levels that are of specific importance for individuals with diabetes. A report published in May 2018 in the journal 'Diabetic Medicine' shows that: while a keto diet plan might help control HbA1c amounts (a three month typical of blood glucose levels), the diet plan might also result in episodes of hypoglycemia. Hypoglycemia is a lethal fall of blood glucose, which is more dangerous than high blood sugar.

A few preliminary investigations indicate the keto diet could be effective and safe for particular individuals with Type two diabetes. But there is also the danger for lower blood glucose, particularly for those on insulin, as well as the keto diet omits particular food groups recognized to help those with Type 2 diabetes.

A report released in September 2016 in the journal 'Nutrients' highlights the benefits of whole grains. in controlling weight and episodes of high blood glucose. But whole cereals are off-limits on the ketogenic diet plan.

The foundation of the keto diet is actually achieving ketosis, an all-natural status in which the entire body turns burning body fat rather than carbs for energy. Throughout ketosis, body fat metabolites or ketones are introduced in the blood.

Individuals on the keto diet plan are actually getting sixty to eighty percent of their calories from fat. Fifteen to thirty percent of their calories from protein. And under five to ten percent of their calories coming from carbohydrates. Basically, ketosis rewires your metabolism, turning your body into a fat-burning machine.

However, the keto diet is not safe for everybody. And it is not suggested as a great diet plan for individuals with Type 2 diabetes. As a result of the possible medicine reactions that can happen, and that increases the need to take supplements and track essential micronutrients and macronutrients to manage Type 2 diabetes.

Additionally, individuals with kidney injury shouldn't use the keto diet since ketones can overwhelm the kidneys. Keto can create pressure on the kidneys and perhaps provide you with kidney stones.

Moreover,
-severe muscle loss is actually a possible complication of keto,
-the ketogenic diet can result in dehydration as well as a loss of electrolytes,
-as keto severely limits carbs, you might acquire nutrient deficiencies,
-bowel problems, like constipation, are additionally typical on keto,
-as the body of yours changes to ketosis, you will most likely have undesirable breath,
-your period on keto might undergo some changes,
-keto might lead to your blood sodium to dip, & keto might result in high cholesterol and a heightened risk of heart problems or heart attack.

(Note that heart attack is the number 1 reason for death for people with a long history of Type 2 diabetes. More on chapter 20, misbelief # 20.)

Chapter 6

A Very Important Message

The information found in this particular mini-guide will educate you about how you can reverse insulin resistance once for all. Don't undervalue the usefulness of this Mastering Type 2 Diabetes Through Nutrition (MTN) meals, because these meals are potent.

You may need to put into action these changes with the help of your doctor, if possible. Even in most cases, you may find your doctor is reluctant in this approach for some apparent reason. Many people living with Type 2 diabetes have discovered that this meal results in a substantial decrease in the requirement of their necessity for oral medicine, insulin, or perhaps both. Failure to lower the medications or insulin properly could lead to a life-threatening hypoglycemia crisis and fainting or death.

Hyperglycemia or high blood sugar is toxic for the organs and or the whole body. But dangerously low blood sugar or hypoglycemia is worse. And this happens when mistakenly or accidentally any Type 2 diabetes person uses double doses of oral medications, insulin, or both.

Many doctors are not aware of the strength of plant-based whole food nutrition and might be reluctant to decrease your medication dosages adequately. You must monitor your blood sugar very thoroughly as you change the diet (step by step) using the tools provided in this mini-guide.

Note that you will find most physicians will be reluctant, but they should have the best interest in helping you live well to prevent severe long-term health complications. Your explicit expression will surely motivate them to help you. This is their responsibility too. After all, above everything, this is your health.

If you're presently taking oral medicines for high blood pressure or maybe for lowering cholesterol, this MTN meal plan will reduce your blood pressure and cholesterol levels considerably.

Work closely with your physician (if needed and if possible) or follow instructions on how to avoid and prevent hypoglycemia events in this guide in chapter 8. To prevent severe and life-threatening hypoglycemia that can come up mainly from not reducing oral medicine and or insulin use accordingly when taking part in this (well-engineered) meal plan.

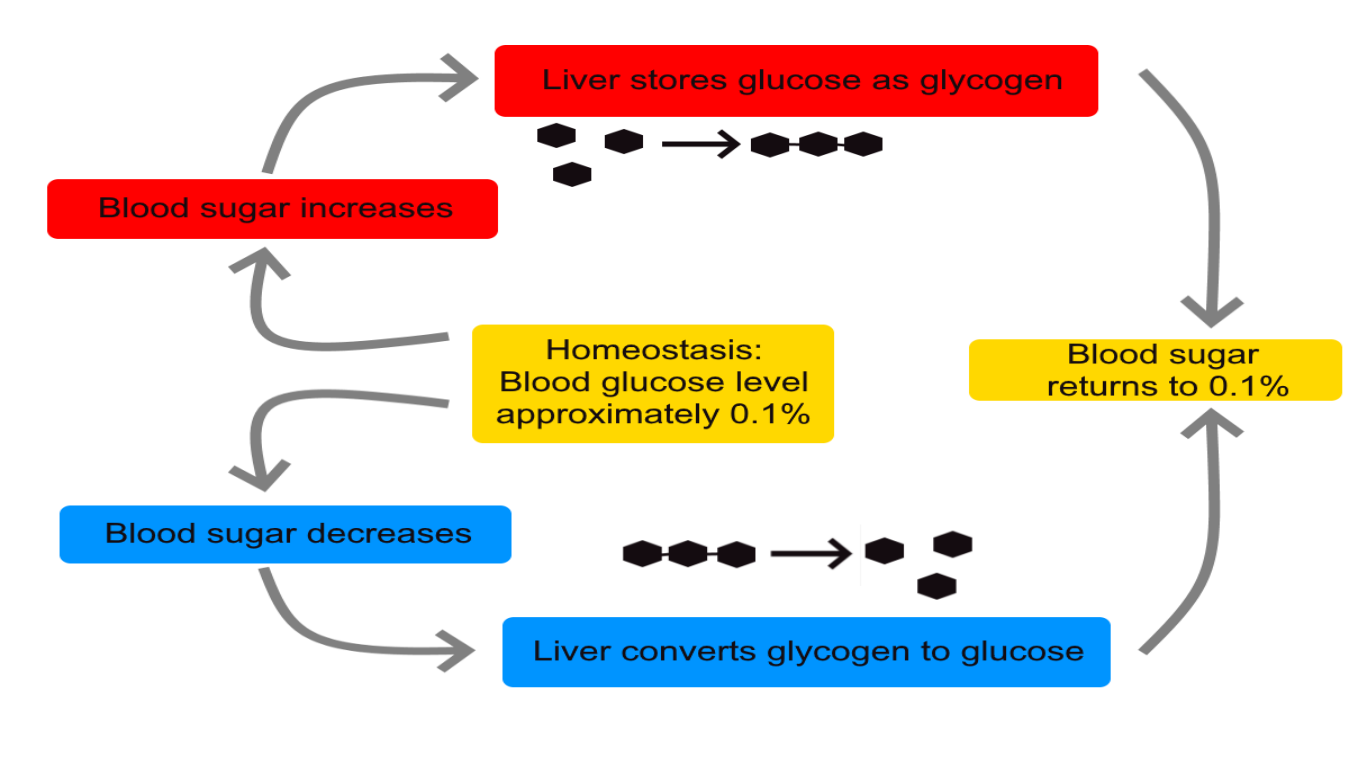
Chapter 7

Who Is This Not For?

1. Category A - strong will power
2. Category B - moderate will power
3. Category C - weak will power
4. Category D - no will power

Refer to the following table to understand how you may adopt the MTN meal plan to restore your normal blood sugar level.

Category	Category A	Category B	Category C	Category D
Individuals attitute towards life.	These are the people with strong will power. They can follow the MTN meal plan for more than 90-95%.	These are the people with moderate will power. They are willing to follow the MTN meal plan up to 70-75%.	Those are the people with weak will power. They are willing to follow the MTN meal plan up to 40-50%.	Those are the people with no will power or desire to change.
Flexibility	This category of people wants to restore blood sugar as soon as they can.	Follow the meal plan 100% on breakfast & lunch. For dinner, you may continue your routine, but don't forget to add 300 gms of raw, colorful vegetable salad.	Follow the meal plan until noon (breakfast + snacks). Continue with your routine lunch and dinner, but add 300 gms of raw colorful vegetable salad in each meal.	They do not deserve to be healthy again.
Time of total restore	Short time	Moderate time	More than moderate	Will remain diabetic life.



What Is Type 2 Diabetes?

In a simple word, Type 2 diabetes is nothing but an imbalance of glucose homeostasis.

Type 2 diabetes, the most common diabetes type, is a condition that happens when the blood glucose also known as blood sugar, is pretty high. Blood glucose is the primary source of energy or power and comes primarily from the foods you consume.

In other words, **homeostasis** is an automatic process by which **biological** systems tend to maintain stability while adjusting to conditions that are optimal for survival.

There are many **types of homeostasis** in humans, including the regulation of body temperature by the hypothalamus, the constant surveillance and functioning of the immune system, control of blood pressure via sensors in the walls of arteries, the pH balance maintained by the lungs.

Among them, the regulation of blood sugar via insulin is 1 of the prominent. **When the homeostasis of blood sugar becomes unstable, the level of sugar in the blood rises. After a long time, this appears as Type 2 diabetes**, followed by prediabetes or gestational diabetes.

What Are The Symptoms of Type 2 Diabetes?

Those are the primary and often hidden Type 2 diabetes symptoms.

Moreover, the following symptoms are categorized as diabetes fatigue or diabetes depression. A person with a long history of Type 2 diabetes could develop Alzheimer's disease and suffer from diabetes fatigue or diabetes depression. We will discuss more in the following chapter.

What Is Glucose or Sugar?

What is sugar? The sugar we all know is also called table sugar or regular sugar, mainly made from either beet sugar or cane sugar.

As you can see, the three monosaccharides are glucose, galactose & fructose. And three disaccharides are maltose, lactose, and sucrose.

This sugar is a di-saccharides means two monosaccharides bonded together and become sugar or sucrose. In this case, One glucose monosaccharide and one fructose monosaccharide make up the disaccharide or sugar, which is 50% glucose and 50% fructose.

The glucose digests in the stomach and goes to the bloodstream, faster than fructose & galactose. On the other hand, fructose and galactose have to be converted into glucose in the liver, before they go to the blood.

The maltose (disaccharides) is the worst among all of them for people with Type 2 diabetes. See the chart below.

MONO-SACCHARIDES

GLUCOSE	GALACTOSE	FRUCTOSE
Honey	Animal milk	Fruits
Agave	(Dairy products)	Dry fruits
Molasses	Celery	Fruit juice

DISACCHARIDES

MALTOSE	LACTOSE	SUCROSE
(Glucose+Glucose)	(Glucose+Galactose)	Glucose+Fructose)
Pancake	Milk/Cream	Table sugar
Bagel/Pizza	Yoghurt	Cakes
Hamburgers	Ice-cream	Chocolates
Malt-o-meal cereal	Butter	Sweet sauces