



Natural Health Response

WITH DR. RICHARD GERHAUSER M.D.

Bloated Belly? The Bacterial BOMBSHELL Behind It Your Gurgling Guts Could Have a Surprising Cause...

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Do you ever notice an uncomfortable *bulge* in your upper abdomen?

Suddenly those pants that fit fine the other day now barely button. And that heavy sensation in your gut has you feeling like you gained 20 pounds overnight.

If this sounds familiar, then you know I'm talking about **bloating**.

Besides being painful and uncomfortable, bloating can also come with *embarrassing* symptoms like burping or passing gas.

Fixing the problem isn't about popping some Pepto—we need to address the underlying cause.

Today, I'll tell you about a **simple test** to identify if stubborn bacteria could be to blame for your symptoms. Even better... I'll reveal four surefire ways to beat the bloating *for good*.

Pinpointing the Culprit

Bloating (also called **dyspepsia**) can be caused by any number of

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Bloating can be caused by any number of factors: overeating, food intolerances or allergies, or even a gastrointestinal disorder like irritable bowel syndrome.

factors: overeating, food intolerances or allergies, or even a gastrointestinal disorder like IBS (irritable bowel syndrome).

Each has its own fix, like eating less, instituting an elimination diet to identify problem foods, or getting a medical workup with your doctor.

But at the end of the day, most cases of bloating are caused by *microorganisms fermenting the food in your gut*. This, in turn, creates **gas**.

It's like that Tupperware container in the back of your refrigerator with food that's turning green and fuzzy. You may also notice that those containers tend to become, well, *bloated*.

This is due to the gasses emitted by the fermenting process.

The same process happens in your gut, especially if you're suffering from a condition called **small intestinal bacterial overgrowth (SIBO)**.

The SIBO Breath Test

Normally, the stomach and the proximal small intestine are *sterile*. This is because the stomach's high acidity level doesn't typically allow for the growth of critters.

But if you don't have enough stomach acid—or if your food sits in your stomach for too long (called *low motility*)—it can create a perfect breeding ground for bacteria to grow.

Certain conditions (like type 2 diabetes) can slow down the passage of food through the stomach, while certain drugs

The Most Accurate Test for Low Stomach Acid (your doctor might not know about it)

A lack of stomach acid creates a perfect breeding ground for SIBO (small intestine bacterial overgrowth).

Unfortunately, pre-existing **low stomach acid** (hypochlorhydria) or **absent stomach acid** (achlorhydria) can be difficult to diagnose for both mainstream clinicians and alternative medicine specialists.

In my practice, if a patient came to me complaining of bloating or dyspepsia symptoms, I would perform the **Heidelberg pH Diagnostic Test**.

This test is not widely available yet, as very few practitioners understand its importance. But I've found it to be an extremely accurate way of determining if there is low stomach acid production, high stomach acid production, or no acid in the stomach.

For the test, the patient swallows a capsule on a tether. The capsule radios the pH level in the stomach back to a device I monitor. Then we test how quickly the pH recovers after drinking a precise amount of bicarbonate of soda.

To treat the symptoms of low stomach acid you can take a **betaine HCl supplement** before meals to help with the digestive process.

This can be combined with **digestive enzymes** and **probiotics** for even better results.

Conditions predisposing you to low stomach acid include the autoimmune disorder *pernicious anemia*, drugs like proton pump inhibitors, other acid blockers, *Helicobacter pylori* infection, low thyroid function, and gastric cancer.

(like proton pump inhibitors) can alter the pH and increase your risk of bacterial growth.

In either case, SIBO can occur as a result.

And unfortunately, this kind of bacterial overgrowth isn't always easy to identify.

Some symptoms are obvious, like gas, bloating, and distention. Sometimes it can produce symptoms that mimic other gastrointestinal disorders (like IBS).

But SIBO can also cause *less obvious symptoms*, like rosacea, anxiety, asthma, diabetes, or autoimmune conditions.

If you've been living with any of these, talk to your doctor about getting the simple test that can identify (or rule out) SIBO, called lactulose breath test.

This test involves drinking the carbohydrate *lactulose* and then measuring the gases in the breath.

A test is considered *positive* for SIBO if hydrogen levels are greater than 20 ppm and methane levels are greater than 10 ppm after lactulose.

The 4 Best SIBO Solutions

The best part about SIBO?

There ARE solutions.

You can take steps to kill the bacteria, increase the speed that food moves through your system, and ultimately, prevent SIBO from taking over your body (*and your life*) again.

I've included the best SIBO solutions here.

I've found that implementing a combination of these treatments brings the best results. I also recommend working with your doctor to get tested and to find out which method could work best for you.

SIBO Solution #1: Antibiotics

Because SIBO is fundamentally a *bacterial* overgrowth problem, you can tackle the problem head-on with a course of antibiotics.

The most popular treatments include rifaximin and neomycin. These antibiotics are especially effective for SIBO because they are poorly absorbed. This allows them to stay in the intestines, which gives them a more local (as opposed to systemic) effect.

Studies of dosing have found that antibiotics are 91 percent effective at eradicating SIBO.

The antibiotic *metronidazole* can be used as an alternative if a different antibiotic is necessary.

If you take a course of antibiotics, taking the supplement **berberine** for 2-3 months afterwards can help reduce your risk of a SIBO recurrence. Berberine is a plant-based compound with antioxidant, anti-inflammatory, and antibacterial characteristics.

SIBO Solution #2: Herbal Therapy

If you want to avoid antibiotics, there are many natural herbs that exhibit antibacterial properties. Each contains "active constituents"—

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This is published monthly for US \$99 per year by NewMarket Health, L.L.C., P.O. Box 913, Frederick, MD 21705-0913



chemicals that destroy microbes—at varying levels.

One of the most effective herbal remedies for SIBO is a pure allicin product called Allimed®. Allicin is a compound derived from garlic that has strong antibacterial and anti-inflammatory properties.

I've found that Allimed® tends to work better if you've taken the lactulose test (see above) and scored high for methane gas levels. (This also tends to coincide with constipation.)

It's worth noting that, in my experience, there is a greater risk of a *Herxheimer reaction* with Allimed® than with antibiotics. Put simple, this is a *detoxification* reaction that happens in the body. It's short-term, and the symptoms are thought to be related to the release of toxins from dying bacteria.

These reactions aren't necessarily bad, but if the effects become too uncomfortable, you'll want to consider discontinuing.

Allicin products are available at www.allimax.us.

Other herbs that are beneficial for fighting off bacteria and defending against inflammation include goldenseal, **berberine complex**, **turmeric**, and **oregano**.

SIBO Solution #3: Diet

You can't talk about SIBO without mentioning diet.

The *Specific Carbohydrate Diet* is often used for inflammatory bowel diseases, but it can be effective for SIBO as well.

The goal of this diet is to restrict certain carbohydrates (like polysaccharides, some oligosaccharides, disaccharides, and polyols). This includes foods like grains, pasta, cereal, bread, sugar or sweeteners, starchy vegetables, and processed food.

These carbohydrates are believed to **promote** the growth of bacteria and yeast, which can result in intestinal injury, triggering SIBO.

Instead, the goal is to consume foods that are easily digestible and that break down quickly in your small intestine (foods like meat, eggs, beans, and nuts). The less time food spends there, the less chance it has to ferment.

SIBO Solution #4: Prokinetic Treatments

Another underlying cause of SIBO is **slow intestinal motility**. This occurs when food moves too slowly through the digestive system. The longer it sits in your intestines, the more time it has to ferment.

This can be helped with **prokinetic treatments**,¹ which are drugs that help your stomach empty faster.

A common drug is a low dose (50 mg) of **erythromycin** taken

at bedtime. This is an antibiotic that is also known to stimulate gut motility. Low-dose erythromycin is typically prepared in a compounding pharmacy.

Another agent that I've had tremendous success with for various autoimmune and inflammatory diseases is **low-dose naltrexone** (LDN).

Naltrexone is an opiate antagonist used to treat alcohol and opioid disorders. But *low-dose* naltrexone can help with SIBO because it improves gastrointestinal motility by increasing the endorphins (our natural internal opiates), which regulates the immune system.

The low-dose version (1-5 mg) is typically taken before bedtime. This product can also be obtained through a compounding pharmacy.

Visit www.ldnscience.org to find a list of doctors and pharmacies that treat SIBO (and other conditions) with LDN.

A meta-analysis was performed on patients taking naltrexone versus placebo. The findings show that overall side effects were equivalent to the placebo groups, so it appears to be very safe. No one, however, has done long-term safety studies to my knowledge.

Visit the website for a full reference list.

Warning! OTC Eyedrops Causing Blindness and Death

Dr. G's Safer Solutions for Dry, Itchy Eyes

I've warned you in the past not to use eyedrops because they're ultimately a waste of money.

Today, I warn you against using them because new information shows **they could KILL you**. And that's not hyperbole.

Certain brands of eyedrops have

recently been tied to dangerous **bacterial infections** that have (as of this writing) resulted in...

- eight people losing their vision,
- four people having their eyeballs removed, and
- three deaths.

I'll tell you what you need to know to stay SAFE.

But I'll also give you real solutions to fix your uncomfortable, dry, itchy eyes for good (*without* eyedrops!).

Because you shouldn't have to risk your eyesight... or your LIFE... for comfortable eyes!

FDA Recalls Contaminated Eye Drops

The FDA recently recalled a few brands of over-the-counter (OTC) eyedrops because of contamination with *Pseudomonas aeruginosa*.

This particular bacterium is wreaking havoc because it tends to be **drug-resistant**.

If your eye becomes infected, you could develop symptoms like discharge, redness, light sensitivity, and blurry vision.

Most eye infections are treated with antibiotic eye drops. But, because *Pseudomonas aeruginosa* is drug-resistant, trying to kill it with eye drops is like spraying a water bottle on a forest fire.

That's why some people suffering from this infection have become blind or lost an eyeball. In some cases, the only way to stop the spread of the disease is to physically remove what's infected from the body.

In addition to the **three confirmed deaths**, 70 people across 16 states have suffered from these drug-resistant infections.

Dr. G's ONLY Eyedrop Recommendation

The only brand of eyedrops I recommend to my patients is **Optimel™**.

Optimel™ is made with pharmaceutical-grade manuka honey. Manuka honey is associated with significant improvements in dry eye syndrome and meibomian gland dysfunction.

Optimel™ decreases the bacterial load on the surface of the eye. This is critical for people who don't produce enough tears or have meibomian gland disease since they have an overgrowth of ocular flora that's thought to contribute to eye surface damage.

It is available at www.melcare.com.



The FDA recently recalled a few brands of over-the-counter (OTC) eyedrops because of contamination with *Pseudomonas aeruginosa*. See the list on page 5.

If you have ANY concerning symptoms of a potential eye infection, seek immediate medical care.

If not, thank your lucky stars first, and then toss your artificial tears in the trash. (Go ahead. I'll wait.)

Now that you can't rely on eye-drops for a short-term fix for your dry eyes, let's talk about safer solutions that can fix your dry eyes without risking your vision—or your LIFE.

Boost Natural Tear Production in 2 Simple Steps

The tragedy of this situation is that you DON'T need *eyedrops* to fix your dry eye symptoms.

Yes, they can give some temporary relief. But they're not a *long-term* solution because they don't hold a candle to the complex structure of your body's own natural tears.

Your tears are made up of multiple layers, each with different jobs. Together, this complex tear film rinses away foreign particles like dust, lubricates your cornea, delivers critical nutrients to your cornea, and protects your eyes from infection.

Not even the *best* artificial tears can do that.

The answer here is NOT to suffer from dry eyes for the rest of your

life. If dry eye syndrome is left untreated long enough, *it can damage your cornea and impair your vision*.

Instead, the BEST solution is to help your body produce *more of its own* natural tears. You can do that in two simple steps:

1. Cut out what is reducing the quantity and quality of your tears.
2. Add in treatments that can increase your natural tear production.

And when you do, you won't miss those risky eyedrops ever again.

Step #1: Address the Underlying Cause

If you want to fix your dry eyes, you must limit their exposure to **artificial light**.

Staring at the television, computer, and smartphone screens all day, exposure to blue light at night, and not ENOUGH exposure to natural sunlight during the day can affect the **quality** and **quantity** of your tears.

Artificial light has an abundance of blue frequencies and a lower amount of orange and red frequencies. This is bad news for your eyes because the blue frequencies have more energy, which can be more damaging.

The list of studies linking blue light exposure to dry eye syndrome is getting longer every day. Limiting blue light at night is [step number one](#) if you want to boost your body's natural tear production.

Here are the best ways to limit exposure to blue light at night:

- Cut down on exposure to screens.
- Wear blue light-blocking glasses.
- Download special blue-blocking software for your tech screens, such as Iris for your laptop.
- Limit lights at night.
- Avoid using your smartphone or computer in the dark, as your pupils will dilate, causing them to take in more blue light.

Step #2: Restore Natural Tear Production

While exposure to blue light at the wrong time of day is a key CAUSE of dry eye syndrome, RED light frequencies can *improve* markers of dry eye syndrome.

In fact, light therapy has been shown to help treat chronic meibomian gland dysfunction, a common cause of dry eye.

Meibomian glands are tiny glands in the eyelids that help lubricate the

eyes by producing the oily layer of tears that slows their evaporation. If the glands don't make enough meibum, or become blocked, it can result in dry, itchy eyes.

A form of light therapy called **intense pulsed light therapy (IPL)** can help fix dry eyes by resolving meibomian gland dysfunction.

In one study, IPL was **92 percent effective** at unblocking clogged meibomian glands.

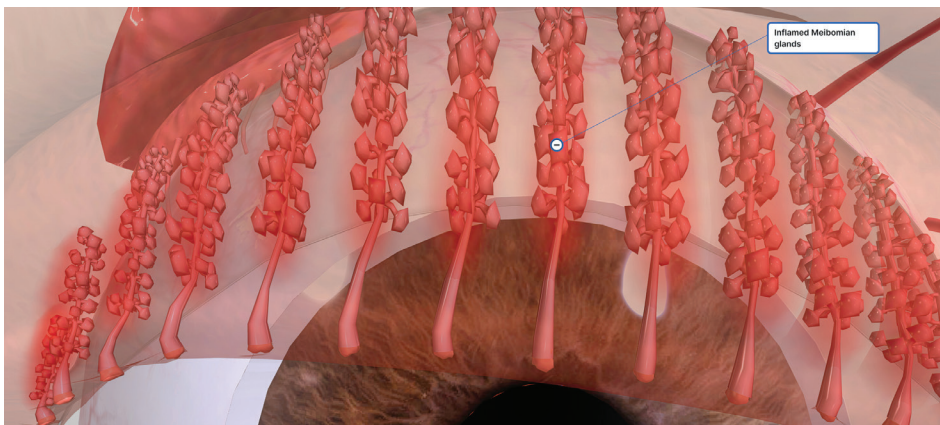
Another study showed that IPL improved symptoms in 89 percent of patients with meibomian gland dysfunction.

Researchers believe that the heat from IPL unclogs the glands and destroys bacteria that can cause swelling and block the glands. This allows your eyes to start producing their own tears again.

The results are *even better* when IPL is combined with another form of light therapy called **Low-Level Light Therapy**.

When researchers tested this **combined light therapy** on people with difficult-to-treat evaporative dry eye disease, after three months, they found...

- Ocular Surface Disease Index significantly reduced in 95 percent of patients.
- Tear breakup time increased by 72.3 percent.



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Recalled Eyedrops

The FDA has recalled the following eyedrops due to bacterial contamination connected to the current outbreak:

- **EzriCare Artificial Tears Lubricant Eyedrops** (implicated in the current infections)
- **Delsam Pharma Artificial Tears Lubricant Eyedrops** (linked to the current infections)
- **Delsam Pharma Eye Ointment** (recalled due to possible microbial contamination because it is produced by the same manufacturer)

Additional recalls that are not related to the outbreak include:

- **Clear Eyes Once Daily, Eye Allergy Itch Relief** (due to a failed impurities test)
- **Purely Soothing 15% MSM Drops** (may not be sterile)
- **Brimonidine Tartrate Ophthalmic Solution, 0.15%** (faulty caps could lead to unsterile solutions)

If you have any of these products, toss them in the trash. Then follow the steps in this article to boost your body's production of natural tears.

- The function of the meibomian glands improved by 80.8 percent.
- There were significant reductions in inflammatory markers within the tear fluid levels.

These results remained steady after six months as well.

You can also expose your eyes to red frequencies by spending time in the sun during the “golden hour” at sunrise and sunset.

Internal Solutions for Dry Eyes

When you're suffering from chronic itchy, dry eyes, it can be easy to think that putting something **ON** your eyes is the best way to lubricate them.

But multiple clinical studies have shown that certain **supplements** are remarkably effective at boosting your body's own tear production and improving dry eye symptoms from the INSIDE.

Maqui Berry Extract

The first one is the extract of a plant native to South America called **maqui berry**.

In a small study, taking 60 mg of maqui berry extract for two months led to a long-term 45 percent improvement in tear production and a 72 percent improvement in dry eye symptoms.

In a larger randomized, controlled clinical trial, taking 60 mg of maqui berry extract led to an **89 percent increase** in tear fluid after just four weeks.

This went hand-in-hand with improved ocular symptoms like eye dryness, reduced eye fatigue, and better quality of life.

Life Extension has a product called Tear Support with Maqui Bright® in capsule form, available at www.lifeextension.com.

Omega-3 Fatty Acids

The second nutrient that's effective against dry eyes is **omega-3 fatty acids**.

In one study, taking fish oil supplements led to:

- a **20-fold improvement in tear breakup time** (a measure of how long tears protect your eye), and
- a **four-fold improvement in symptoms of dry eyes** (compared to placebo).

Because fish oil can quickly degrade when placed in a capsule, I recommend getting your omega-3s through fish and seafood.

Visit the website for a full reference list.

Reverse Type 2 Diabetes? Yes, You CAN!

(But... Weight Loss *Isn't* the Answer)

If you have type 2 diabetes, you have *hope*.

Now, I'm not talking about hope for maintaining your quality of life or reducing your risk of complications.

I'm not even talking about hope for managing your blood sugar levels...

I'm here to tell you that you have hope for **REVERSING** your diabetes.

It is possible to **STOP** taking your medications, regulate your blood sugar levels, and finally be **TRULY cured**.

Thing is, it's **NOT** about losing weight.

Instead, researchers have identified a hidden fat source clogging up key organs that regulate blood sugar control.

I'll show you exactly how to shed this *hidden fat* and get rid of your diabetes for good.



Many people—including most doctors—believe that **obesity is the biggest risk factor** for type 2 diabetes. However, there are two other primary contributing factors to diabetes that don't involve body weight—your liver and your pancreas.

Cracking the Case of "Skinny Diabetics"

Many people—including most doctors—believe that obesity is the biggest risk factor for type 2 diabetes.

That's simply not the case.

There are plenty of obese people who *don't* develop type 2 diabetes, while

some normal-weight people do.

If type 2 diabetes were just a matter of excess weight, how do you explain this?

A recent study on "skinny diabetics" (people with diabetes who are in the normal weight range) revealed two primary contributing factors to diabetes that **DON'T** involve how big your jeans are.

Even more significant?

The folks in this study were able to REVERSE their diabetes when they addressed these underlying factors.

Calorie-Restriction Is Key

Researchers conducted a unique study of diabetics with a normal BMI.

Despite not needing to lose a significant amount of weight, the volunteers were put on an **800-calorie restricted diet** for 2-4 weeks, followed by 4-6 weeks of gradually reintroducing normal foods.

They *also* stopped taking all of their glucose-lowering medications.

This cycle was repeated up to three times until the patients lost 10-15 percent of their body weight.

Remarkably, 70 percent of these individuals went into **remission**.

Meaning, they **no longer suffer from type 2 diabetes**.

This isn't just exciting... *It's revolutionary*.

And it wasn't because people lost fat from their *belly*... but because they shed it from their liver and pancreas.

See, even though the patients were normal weight, MRI scans showed that **before** the diet, they had excess fat in their *liver* and *pancreas*.

But after the diet their **liver fat** levels plummeted from 4.1 percent to 1.4 percent. And their **pancreatic fat** levels dropped from 5.8 percent to 4.3 percent.

As a result of shedding fat in these **organs**, the activity of their insulin-producing beta cells returned to normal.

“

Remarkably, 70 percent of these individuals went into remission.

”

Why the Liver and Pancreas Matter

Everyone has what's called a **personal fat threshold**. This is the amount of fat your body stores under your skin—the kind you can see in the mirror and makes you go up a size in your jeans—before it dumps excess fat into your organs.

This threshold looks different for each person. Some people store more fat under their skin before it ends up at their organs... whereas for others, there may not be much under their skin but it's storing up quicker in their organs.

THIS is why you don't have to be overweight to have type 2 diabetes.

It's *also* why focusing on weight alone isn't the answer to type 2 diabetes.

Taking steps to **reduce the fat** in your organs is.

You see, your liver and pancreas work hand-in-hand to control the supply of glucose to your body. But when they're gunked up with fat cells, they get sluggish and stop functioning properly.

Fat in your **liver** is a problem because the liver is a main source of the body's production of sugar.

Fat in your **pancreas** is a problem because the pancreas is the source of insulin, the hormone that shuttles glucose out of the bloodstream and into the cells to be burned for energy.

Calorie restriction works because it dramatically reduces fat in your liver *and* pancreas.

3 Other Ways to Slash Liver Fat

This study made two things clear:

1. It's possible to CURE your diabetes.
2. Extreme calorie restriction is an effective way to do it.

Einstein's Energy Solution

When it comes to preventing or reversing diabetes, even though I'm a fan of eating right and exercising, these are secondary to your light environment and **collecting electrons**.

The sun's light interacts with biomolecules through the electrons present in the molecule by converting light's energy into electric current that we use to sustain life.

(This is the photoelectric effect discovered by Albert Einstein.)

You already know how to get more sunlight. A free, easy way to build your store of electrons so that you can activate that light is by **grounding** to the earth.

Electrons will move from the earth's surface into your body while barefoot on natural surfaces like dirt, grass, rock, concrete, the beach, or a creek bed.

Wood, plastic, asphalt, and indoor floor coverings are poor conductors of electrons.

The minimum amount of grounding per day should be **20 minutes**, but the longer, the better.

But it's not the ONLY way.

Despite these dramatic results, most people I know can't follow a restrictive diet like this long term.

So while it works... it only works if you stick to it.

Fortunately, there are other ways to reduce liver fat that don't involve extreme calorie restriction.

Option #1: Change WHEN You Eat

The study I detailed above focused on how much you're eating. But adjusting WHEN you eat can produce the SAME results.

Intermittent fasting involves alternating between periods of eating and not eating. You can start with 12 hours of eating and 12 hours of fasting. Then increase it to 8 hours of eating and 16 hours of fasting. (That's what I do.)

And, in fact, I *prefer* intermittent fasting to calorie restriction for weight loss, and here's why...

Most people typically lose the same amount of weight with either program. But while weight loss from calorie restriction causes both muscle AND fat loss, with intermittent fasting, you'll lose FAT while *preserving lean muscle mass*.

This is a big advantage of intermittent fasting because muscle is *metabolically active* and important for optimal function.

In addition, **intermittent fasting has been shown to decrease fatty liver.**

Plus, studies have shown that intermittent fasting *reduces* appetite and food cravings, so you don't have to worry about being hungry all the time.

It's the easiest solution I know of to fight fatty liver and type 2 diabetes.

Option #2: Change WHAT You Eat

If reducing liver fat is ultimately the key to reversing type 2 diabetes, making a few changes to WHAT you eat can also help.

In fact, a handful of dietary changes have been shown to reduce liver fat *even when you don't cut back on calories*. These include:

- Reducing dietary carbohydrates
- Reducing fructose in the diet (which is half of the table sugar molecule)

Additionally, the Mediterranean diet improves fatty liver and insulin sensitivity in people with non-alcoholic fatty liver disease (NAFLD). This is likely due in part to the high amount of fish (which provide omega-3s) in this diet.

Numerous studies show that omega-3 fatty acid supplements improve NAFLD.

Option #3: Fix Your Light Environment

Ultimately, after treating many patients with type 2 diabetes over the past 40 years, I've concluded that **fixing your light environment** one of the most important factors in combatting the root cause of the disease.

Doing so accomplishes two vital things that impact how your body stores and utilizes energy:

1. Setting your circadian rhythm
2. Activating key biomolecules

Sunlight at sunrise contains red, infrared, and blue frequencies that are necessary for setting the master clock (the suprachiasmatic nucleus) located in the hypothalamus. This is connected to diabetes because your master clock regulates...

- **Beta cell clocks** (which impact insulin production and secretion)
- **Skeletal muscle clocks** (which regulate insulin-mediated glucose uptake)
- **Hepatocyte clocks** (which regulate insulin-mediated glucose production)

Not surprisingly, then, evidence shows that circadian disruption impairs beta cell function and insulin sensitivity, which results in impaired glucose metabolism.¹

That brings me to #2: **Activating biomolecules.**

Late morning sunlight has ultraviolet A light, which activates biomolecules that help regulate weight and metabolism.

An example is proopiomelanocortin (POMC), which is cleaved into a bioactive molecule called **melanocyte-stimulating hormone (MSH)** by the stimulus of ultraviolet light.

“ Intermittent fasting has been shown to decrease fatty liver. ”

MSH helps regulate body weight, appetite, and metabolism.

Ultraviolet-B light is critical for producing vitamin D from cholesterol in the skin. Several studies show that low vitamin D levels are a risk factor for developing diabetes.

On the flip side, exposure to blue light at night can increase your risk of diabetes and obesity.

One reason is that blue light at night contributes to **leptin resistance**. Leptin is the hormone that oversees fat *burning* and keeps track of fat **storage**. It also impacts food cravings.

Where the leptin signal is turned off, hunger and carb cravings occur, and fat storage *increases*, especially in the liver and pancreas.

How's Your Liver Doing?

If you're wondering about your own **personal fat threshold**—and whether your liver is silently accumulating fat—you can ask your doctor to test you for non-alcoholic fatty liver disease (NAFLD).

Typical tests include blood tests of liver function or a visual test to show the appearance of your liver (like a CT scan, MRI, or ultrasound).

If you're *already* living with type 2 diabetes and want to take steps to reverse it, you have many choices for combatting the buildup of liver and pancreatic fat.

The best choice for you is the one you will follow.

Visit the website for a full reference list.