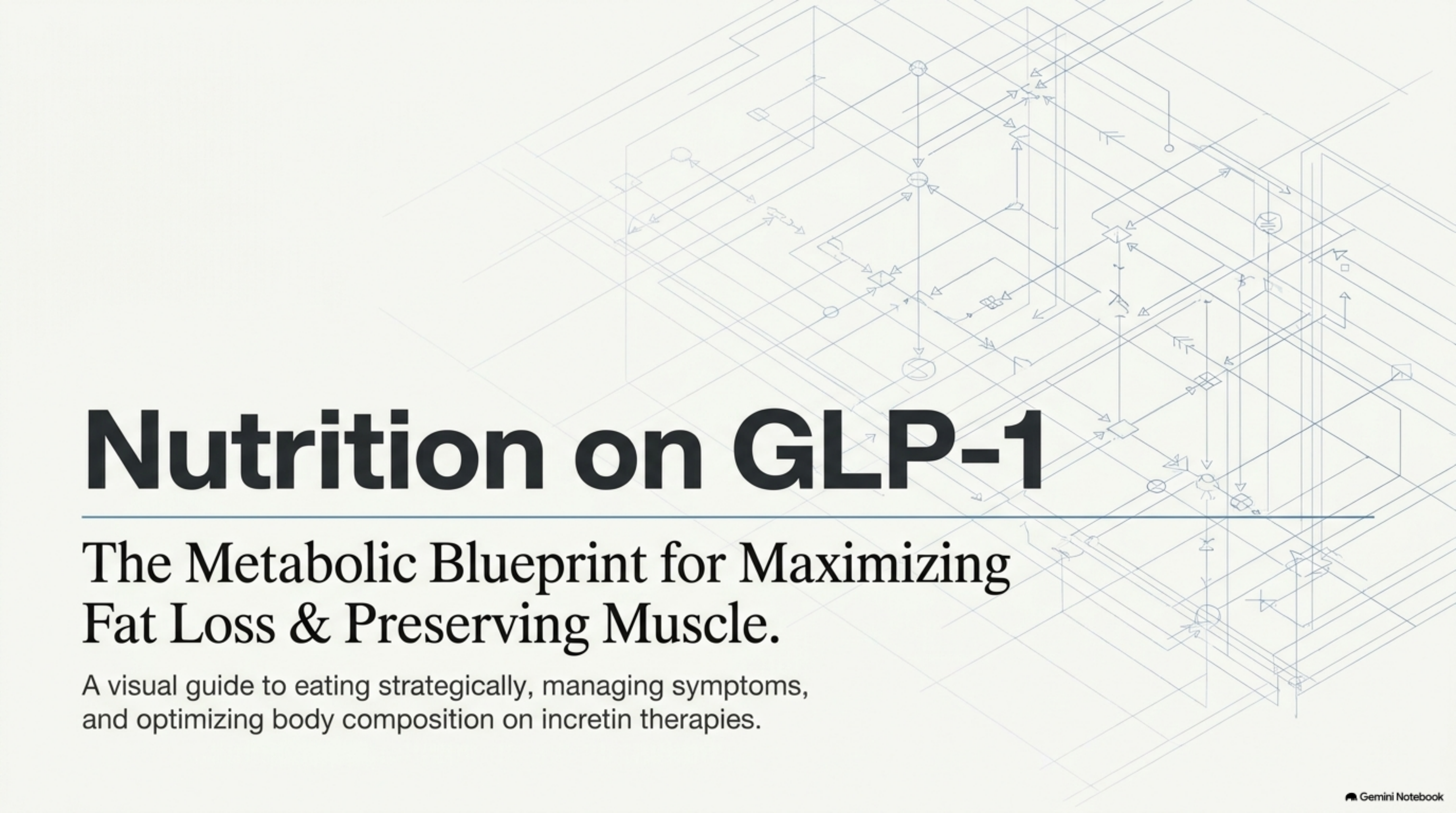


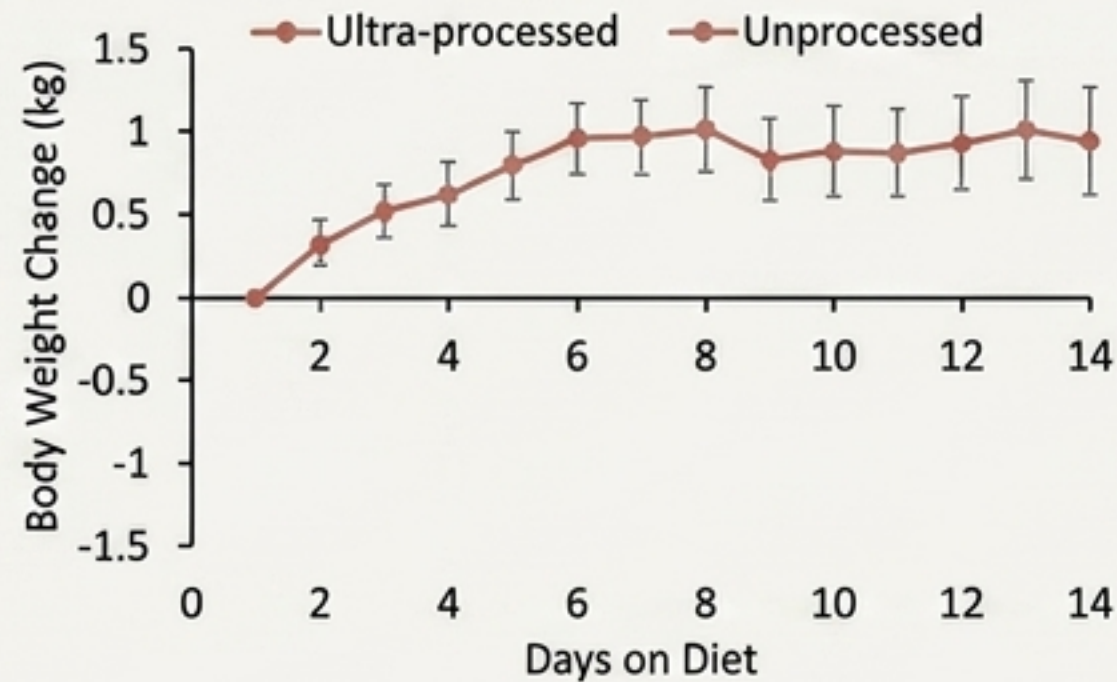


Nutrition on GLP-1

The Metabolic Blueprint for Maximizing Fat Loss & Preserving Muscle.

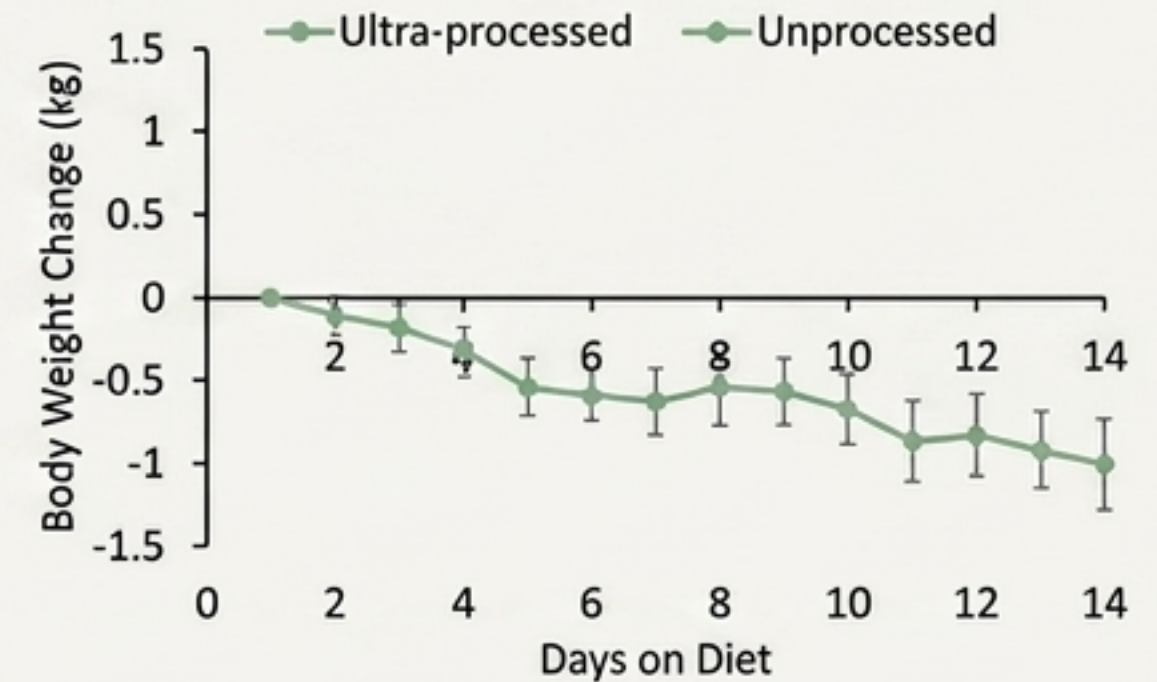
A visual guide to eating strategically, managing symptoms, and optimizing body composition on incretin therapies.

The Quality Mandate: A Calorie is Not Just a Calorie



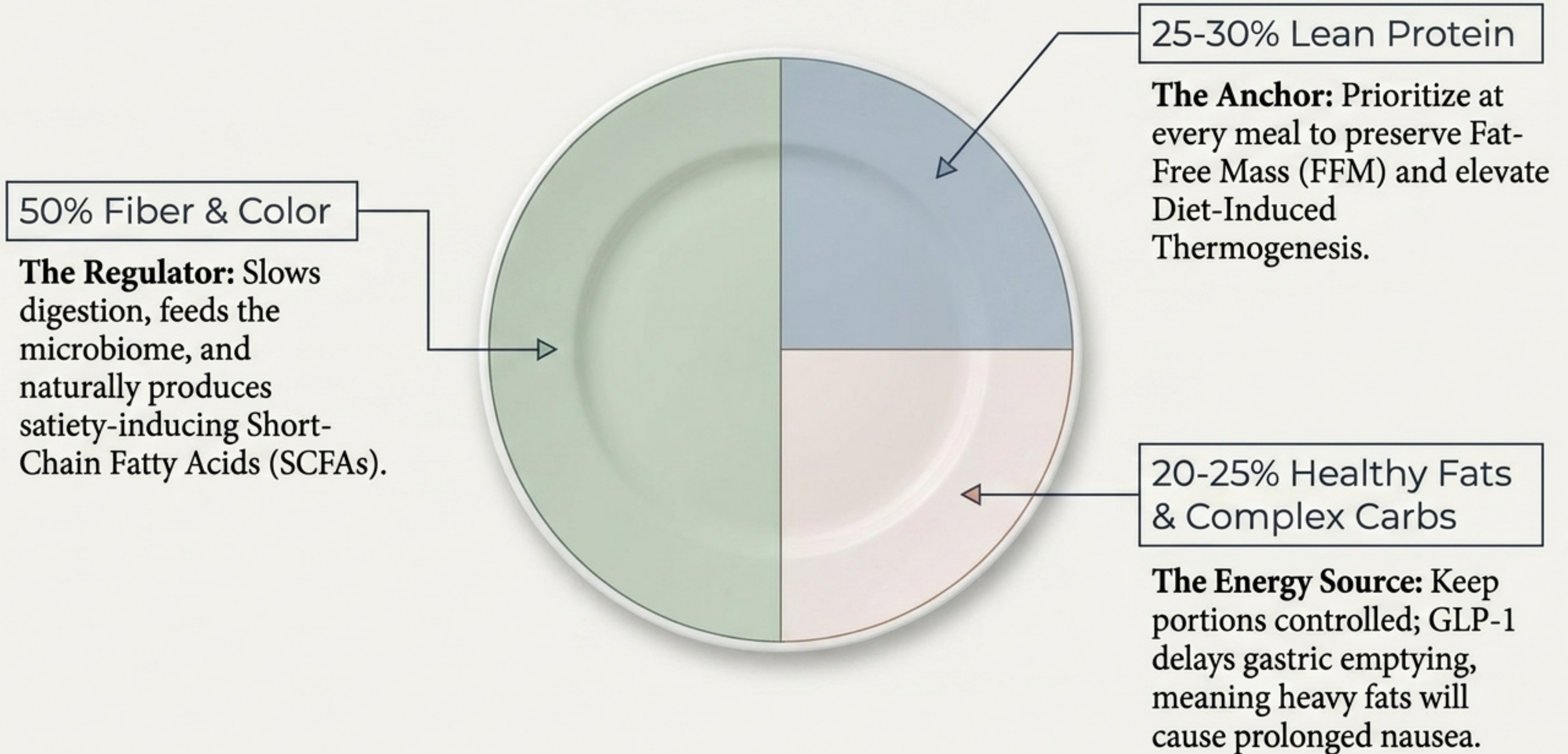
Ultra-Processed Diet: 500 excess calories consumed daily, ~2 lbs gained.

In an NIH clinical trial, diets matched perfectly for calories, sugar, fat, salt, and fiber yielded radically different results based solely on food processing.

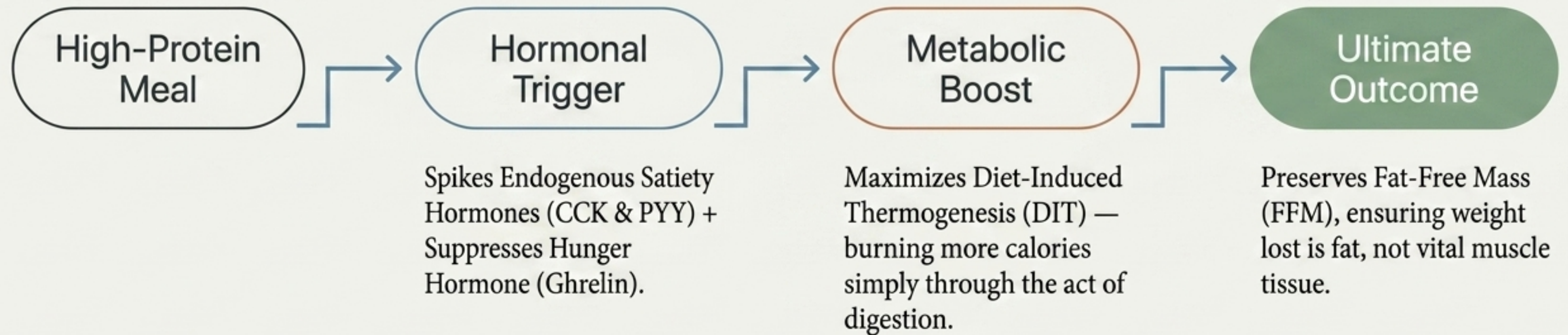


Unprocessed Diet: Natural satiety achieved, ~2 lbs lost.

The GLP-1 Plate Method



The Protein-First Mandate



Fiber: Cultivating a Lean Microbiome

The Mechanism

High-fiber diets feed gut bacteria, which break the fiber down into Short-Chain Fatty Acids (SCFAs).



The Result

Clinical data links high SCFA production and densely interconnected microbial networks to leaner body types and resistance to obesity.

Actionable Metric: Target 25-30g of fiber daily from diverse, unprocessed plant sources to stabilize this network.

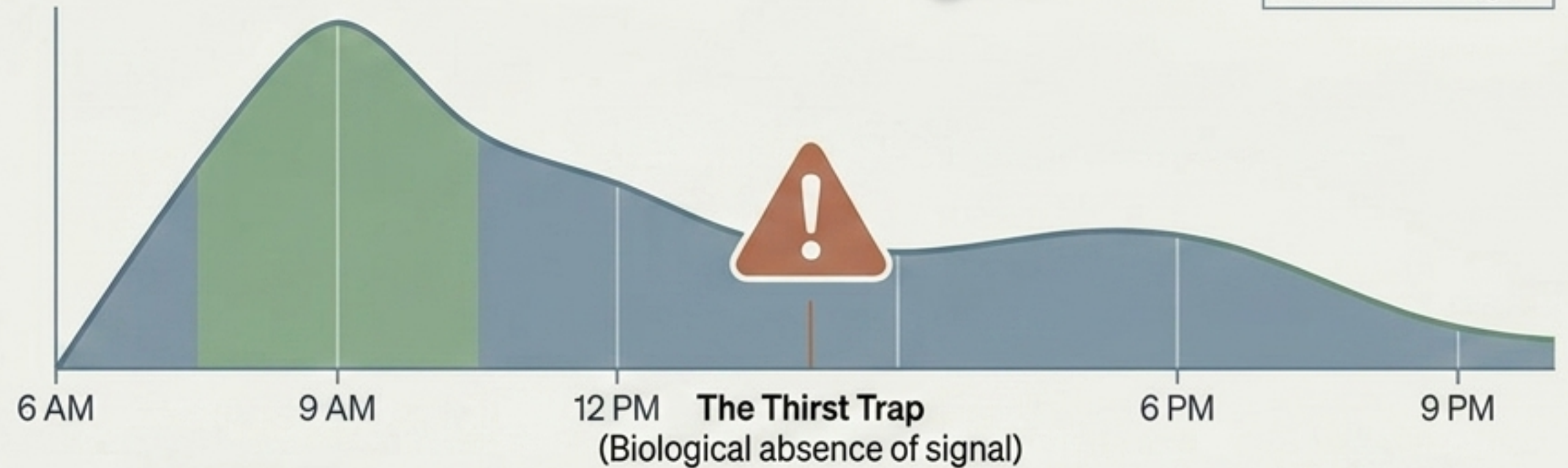
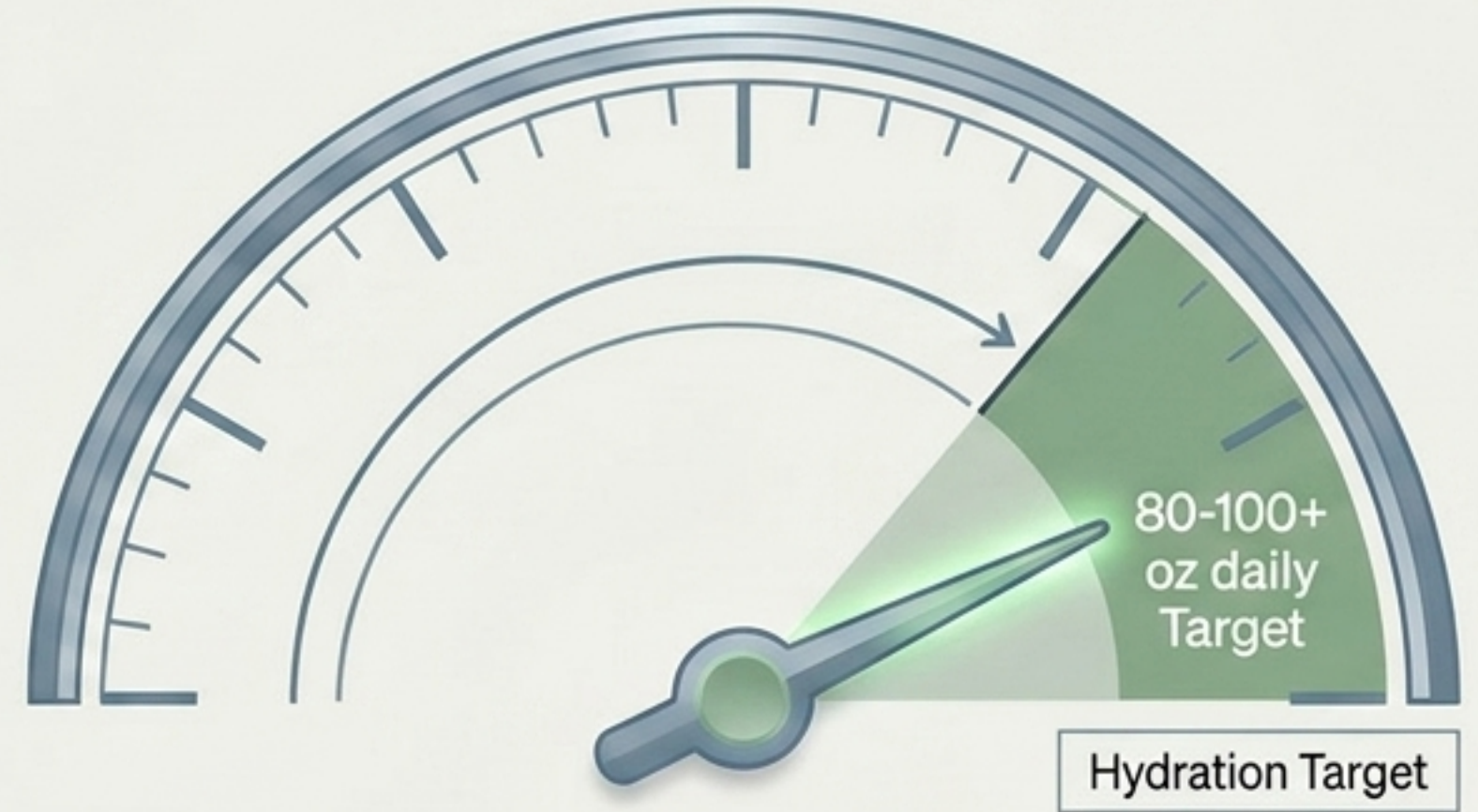
Overriding the Absent Thirst Signal

The Problem

GLP-1 therapies centrally blunt the brain's thirst mechanism. If you wait until you are thirsty, you are already dehydrated.

The Metabolic Cost

Dehydration mimics fatigue, stalling metabolic processes and straining kidneys during rapid fat oxidation.

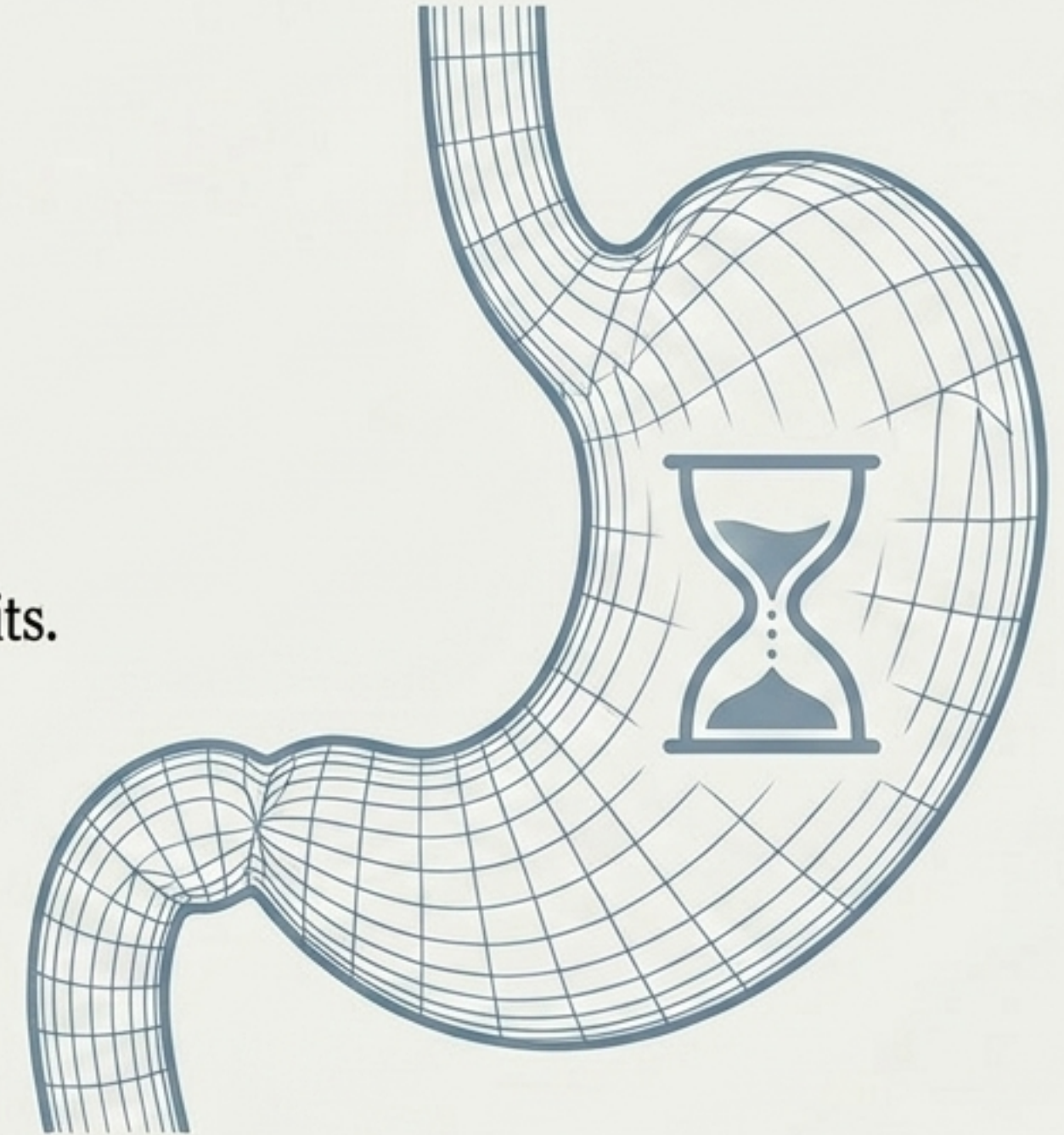


Pro-Tip: Pre-load water early in the day; **⚠** avoid drinking massive volumes during meals to prevent extreme early fullness.

Hacking Delayed Gastric Emptying

Because GLP-1 slows digestion, stomach capacity is rapidly reached. Sequence matters.

Tier 1: First Bites	High-yield proteins (Meat, Fish, Tofu). Maximize amino acid intake before fullness hits.
Tier 2: Second Bites	Fibrous vegetables. Essential for gut motility and SCFA production.
Tier 3: Last Bites	Complex carbohydrates and fats. Skip these if fullness is already achieved.



Rule of Thumb: Stop eating at the first sign of fullness.
The drug will sustain that feeling for hours.

Eating Through Peak Appetite Suppression



Liquid Nutrition

When solid food causes nausea, utilize high-quality protein shakes or bone broths. Liquids bypass delayed gastric emptying faster than solids.



Nutrient Density

Shrink the volume, maximize the payload. Swap voluminous salads for calorie-dense, nutrient-rich foods (e.g., nuts, seeds, avocado, Greek yogurt) to hit metabolic minimums.

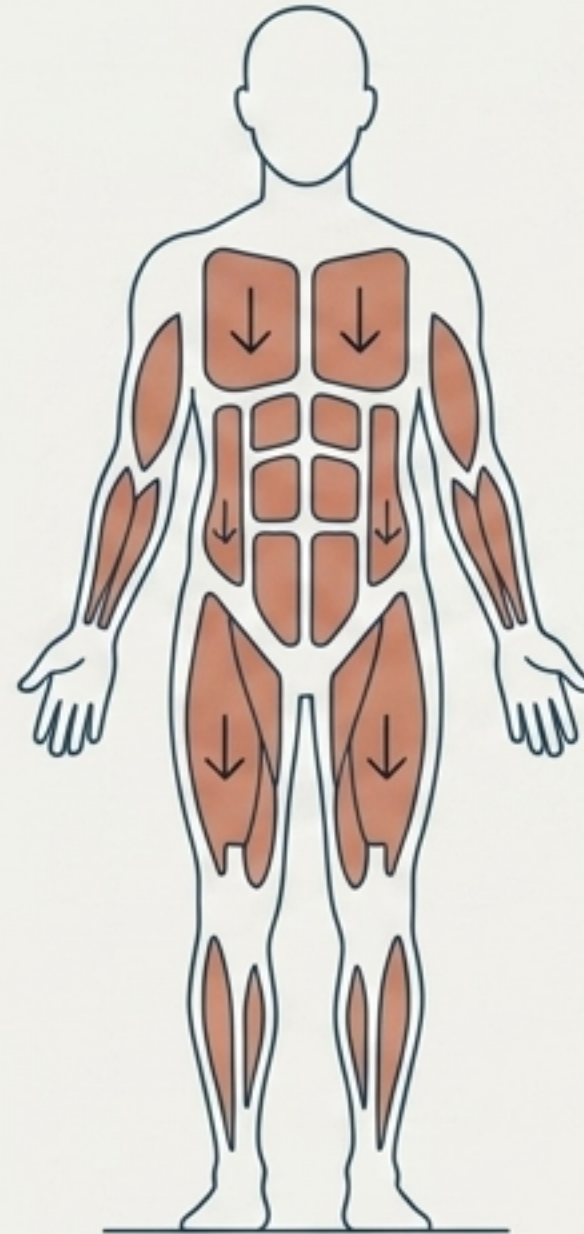


Scheduled Eating

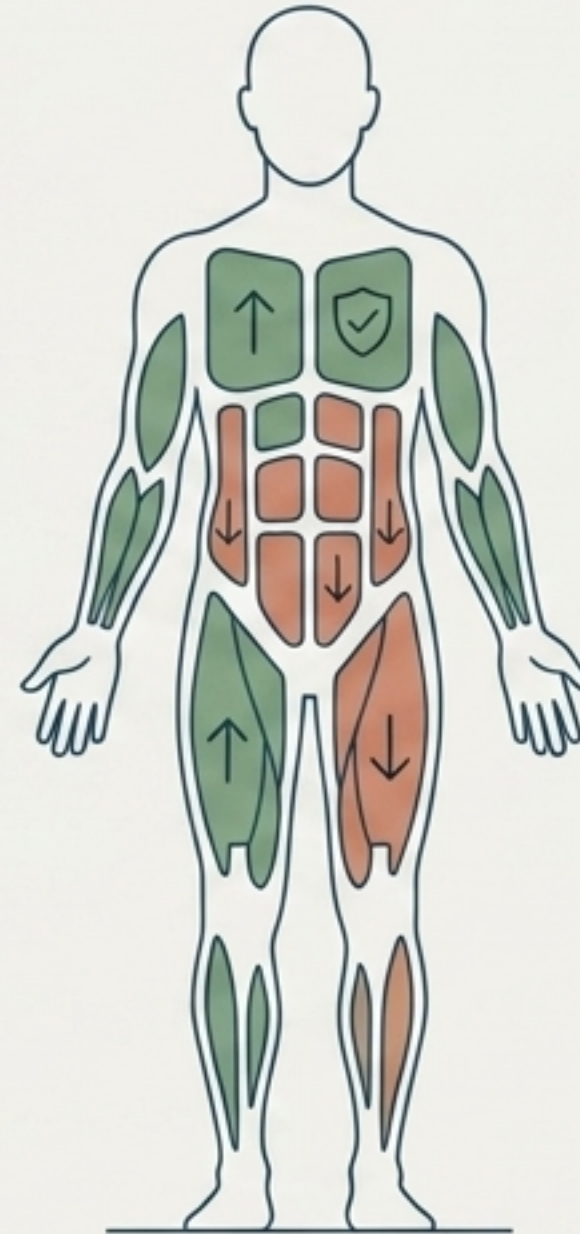
Abandon “intuitive eating.” The drug chemically alters intuitive hunger signals. Set alarms for 3-4 small, structured eating windows to prevent dangerous calorie deficits.

The Sarcopenia Risk: Protecting Fat-Free Mass

Weight Loss



Metabolic Fat Loss



The Danger:

Severe calorie restriction on GLP-1 without adequate protein leads to the catabolism (breakdown) of Fat-Free Mass (muscle).

The Consequence:

Losing muscle destroys Resting Energy Expenditure (REE). A lowered REE guarantees rapid weight regain if medication is stopped.

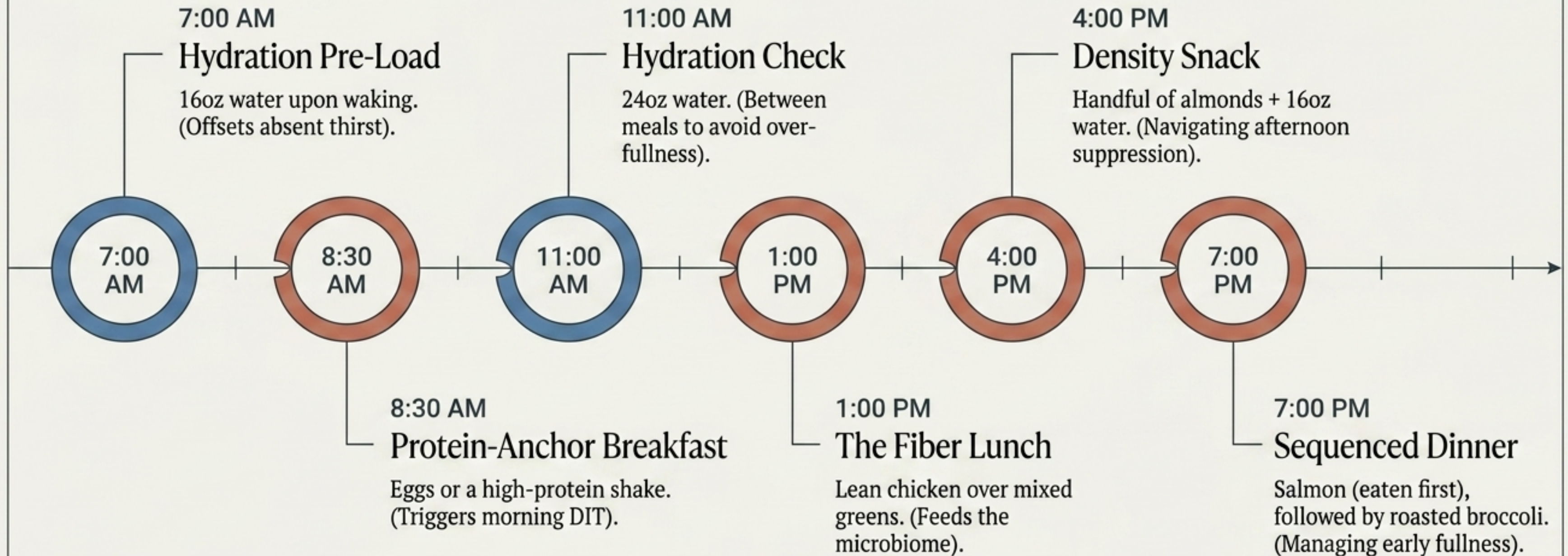
The Defense:

Maintain a high-protein diet (triggering Diet-Induced Thermogenesis) combined with resistance training.

Mechanism:

This signals the body to keep the muscle and burn the fat.

The Blueprint in Action: A Sample Day



Closing the Gaps: Targeted Supplementation

Drastically reduced food intake requires strategic supplementation to avoid the micronutrient deficiencies commonly seen in rapid weight loss.

Supplement	The Physiological Gap (Why)	Clinical Action
 Electrolytes	Low-carb/low-calorie states rapidly deplete sodium and potassium, causing profound fatigue.	Add to morning hydration pre-load.
 Vitamin D3 + K2	Crucial for bone health; deficiency is highly common during major body composition changes.	Daily supplementation.
 Iron / B12	Reduced intake of red meats due to early fullness drastically lowers iron levels.	Monitor via bloodwork; supplement if fatigued.

The Mechanism Meets The Method

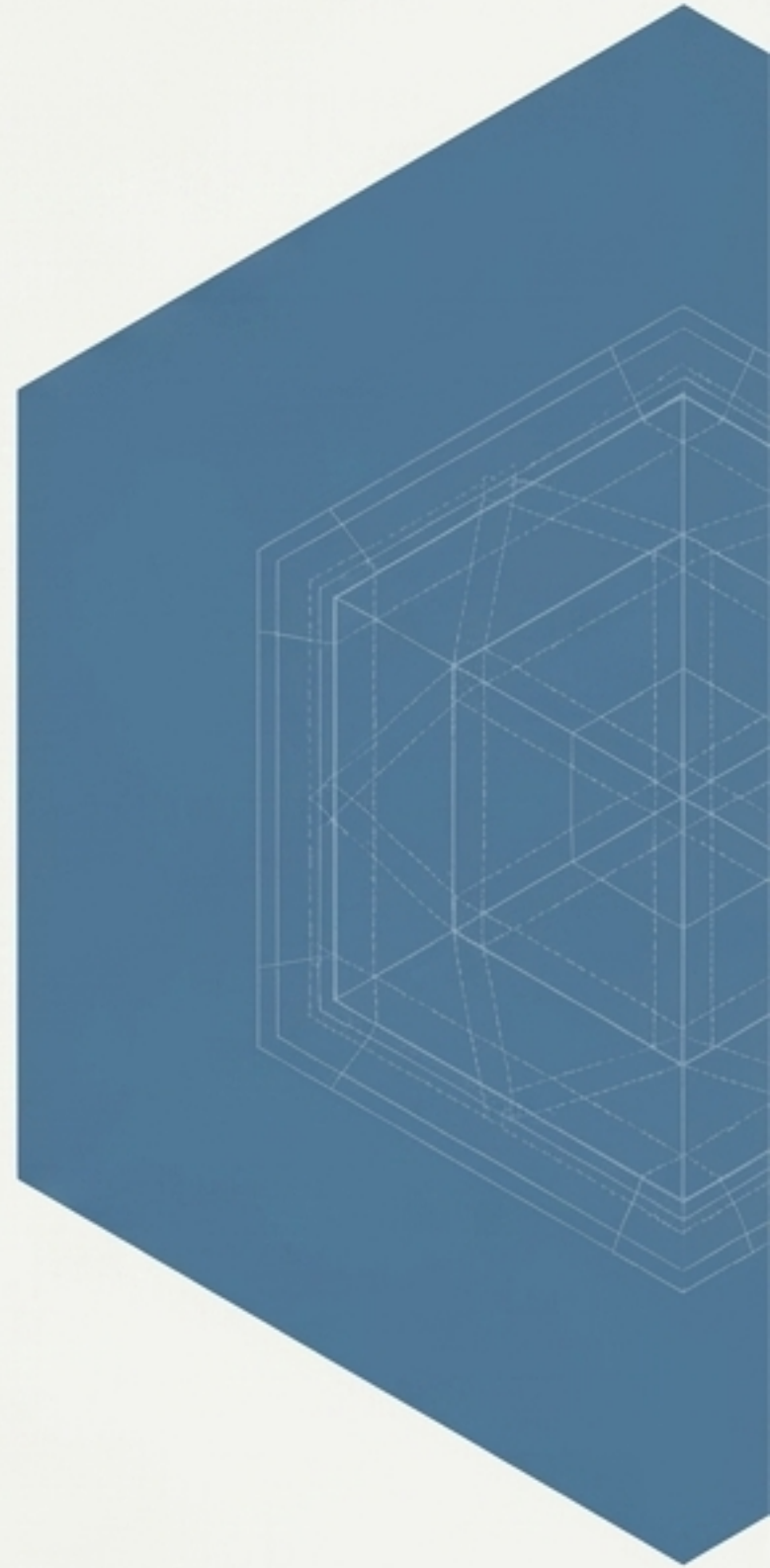
The GLP-1 Effect	The Nutritional Antidote
Delayed Gastric Emptying	The 'Sequence of Eating' (Protein First)
Extreme Caloric Deficit & Muscle Catabolism	High-Protein Diet & Diet-Induced Thermogenesis
Central Thirst Suppression	Scheduled 100oz Water Protocol
Altered Intuitive Hunger Signals	Scheduled, Nutrient-Dense Eating Windows

Initiate Your Blueprint

1 **1. Calculate your daily protein floor.**
(Minimum 0.8g to 1g per pound of target body weight).

2 **2. Secure a 32oz+ water bottle and set refill milestones.**
(Do not rely on thirst).

3 **3. Restructure tomorrow's breakfast.**
(Make it your highest protein meal of the day to trigger Diet-Induced Thermogenesis early).



Master the mechanics of your nutrition, and let the medication amplify your results.