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PATHOGENESIS OF ALIMENTARY DIABETES AND SOLUTION BY LOSS OF 20% BODY WEIGHT, AND BY ATTAINMENT OF INITIAL HUNGER AS WELL AS OF LOW BG BEFORE MEALS

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Background: We attempted to train two diabetics as we suggested in the first abstract.

Objective: Diabetic people are different in this: they do not develop any hunger sensation after meal suspension.

Methods: We tried to implement this training in two obese, diabetic adults out of two consecutive recruitments. The two subjects consumed meals devoid of fats and carbohydrates (Very Low Energy Diet, VLED) for 6 to 12 months.

Results: At recruitment two diabetic subjects (out of two) showed a BMI of 39 and 33 and did develop neither a BG decline to 76.6 ± 3.7 mg/dL nor any hunger sensation after 2-days eating suspension. Both subjects lost 13%-20% of their body weight and recovered 76.6 ± 3.7 mg/dL of BG and hunger sensations before one – three meals a day, i.e.: went off diabetes.

Conclusion: Diabetes develops for inveterate conditioned intake (when previous energy intake has not been fully exhausted before meals), excessive fattening, excessive post-absorption emission of fatty acids from fatty tissues, permanent loss of BG decline to 76.6 ± 3.7 mg/dL and permanent loss of physiological signals of hunger. A healthy, non-diabetic life may be recovered from a painless loss of 20% body weight (No fats, no carbohydrates) and may be maintained by implementing IHMP at reappearance of hunger sensations. This means accurate energy intake planning instead of hunger endurance.

Biography

Mario Ciampolini has been Graduated from The University of Florence, Italy as Medical Doctor, with the specialties including Internal Medicine, Social and Community Medicine and Diploma in Pediatrics from the National University of Florence. Later on he obtained his post-graduation from National University of Florence and then started working at The University of Florence where he has continued his research. Presently he is retired from the year 2000.

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