THE SOUTH BEACH DIET
SUPERCHARGED
FASTER Weight Loss and Better Health for Life

Arthur Agatston, MD
with Joseph Signorile, PhD
THE SOUTH BEACH DIET SUPER CHARGED
OTHER BOOKS BY DR. ARTHUR AGATSTON

The South Beach Diet
The South Beach Diet Cookbook
The South Beach Diet Dining Guide
The South Beach Diet Good Fats/Good Carbs Guide
The South Beach Heart Program
The South Beach Heart Health Revolution
The South Beach Diet Quick & Easy Cookbook
The South Beach Diet Parties & Holidays Cookbook
The South Beach Diet Taste of Summer Cookbook

For more information on the South Beach Diet,
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We inspire and enable people to improve their lives and the world around them
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To South Beach dieters everywhere
who have achieved a healthier way of life

And, as always, to my wife, Sari,
and sons, Evan and Adam
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PREFACE

This book is a celebration and an affirmation. It is a celebration of the success of the South Beach Diet, and it is an affirmation of the wide acceptance of the healthy eating principles we have continued to advance since the original South Beach Diet book was published in 2003. These principles are simple: Choose nutrient-rich, high-fiber carbohydrates found in vegetables, fruits, and whole grains; good, unsaturated fats; lean sources of protein; and low-fat dairy.

This book also introduces a unique metabolism-revving exercise program that works. The program is based on the proven science behind interval training and core functional fitness.

For several years, readers of the original book and many of my patients have requested an update on the South Beach Diet. While the basic principles of the diet have not and are unlikely to change, volumes of new research have furthered our understanding of the importance of these principles. In fact, a major theme of mine when I speak to physicians and lay groups around the country is that the diet debates are over. We have progressed beyond the low-fat versus low-carb wars. We are at the point where there should no longer be confusion regarding the best diet approach for sustained weight loss and optimal health.

There is now a consensus of expert opinion that it is not the relative amounts of carbohydrate, protein, and fat that are important but their quality. Today, the basis of an optimal diet and of the South Beach Diet are one and the same. In fact, the healthy eating principles we stand by can be applied to almost anyone’s particular dietary needs. Our diet principles are reflected not only in the most recent recommendations of the federal government but also in the guidelines of the American Heart Association and many other organizations devoted to promoting good health.

We have learned a great deal over the past 5 years about how South Beach dieters can best apply our healthy eating principles to their hectic everyday lives. We have learned about the pitfalls that some dieters experience, and we have developed effective strategies to help them overcome these problems. One of these pitfalls is what I like to call the “You Can Never Be Too Thin” syndrome, in which people who have reached a healthy weight and look good still want to lose more weight. I explain why this is a problem that can lead to yo-yo dieting and even more weight gain (and what you can do about it) beginning on Chapter 6. We have also learned more about why some dieters plateau at a particular weight and what they can do to successfully rev up their metabolisms and continue their weight loss successfully. Furthermore, we have learned a great deal in recent years about how individual nutrients in foods and beverages can protect your health. This includes the phytonutrient resveratrol, which is found in one of my favorite foods (dark chocolate) and perhaps in one of yours (red wine).

Today we also know more about how and why the epidemics of obesity and diabetes have occurred, and ongoing research has taught us that the right diet is even more important than we thought just 5 years ago. In fact, in dozens of recent studies, the presence of belly fat has been convincingly associated with inflammation and appears to be a common denominator behind many of the diseases of the Western world. These fascinating new findings are helping us all better understand how to improve our own nutrition and health along with that of our families.

One criticism of the first South Beach Diet book was that we did not include more on exercise. While I have always been a strong believer in the health benefits of exercise and said so in the original book, in 2003 I didn’t feel that I had important new fitness information to communicate. At the time, our patient studies were done based on dietary changes alone in order to show the efficacy of the diet, and I didn’t want to dilute our exciting new approach to healthy eating. Today, thanks to some eye-opening personal experiences, I do have important and exciting new fitness information to offer in the form of a unique three-phase exercise program that dovetails perfectly with the three phases of the diet itself. To create the program, I consulted with two outstanding exercise specialists: Joseph Signorile, PhD, a well-known professor of exercise physiology at the University of Miami; and Kris Belding, a Miami-based Pilates teacher who has worked with my wife, Sari, and me for several years.

I have always considered the South Beach Diet and my goal to make it a lifestyle a work in progress. As new information becomes available, we do not hesitate to integrate it into our program. Naturally, as science marches forward, new developments in health, nutrition, and fitness may supersede or conflict with our current knowledge.
But even as new knowledge must influence our thinking, the core mission of the South Beach Diet remains consistent: to help you live happier and healthier lives.

My ability and that of my colleagues to successfully treat our patients has improved exponentially during my 30-year medical career. Practicing medicine is more gratifying for me today than ever before because of the advances in medical and nutritional science. I am thankful that I have the opportunity to share some of this important information with you in this new book.

Arthur Agatston, MD
It is impossible to thank all of the people—friends, doctors, and partners—who have supported the South Beach Diet and influenced my work over the years. However, I would like to acknowledge those who have participated personally in the development and creation of this book.

First, I want to extend my deep appreciation to the South Beach dieters who have contributed their moving success stories to these pages. Your achievements are an inspiration.

I would also like to thank my collaborator, Dr. Joseph Signorile, and my Pilates teacher, Kris Belding, for helping me develop the South Beach Supercharged Fitness Program for this book and for consulting on The South Beach Diet Supercharged Workout DVD.

Special credit also goes to Marie Almon, my nutrition director, who has worked with me for many years counseling South Beach dieters and who has contributed greatly to the new meal plans and recipes. In addition, thanks go to Mindy Fox for developing the delicious dishes themselves and to Samantha Cassetty, of SouthBeachDiet.com, for her nutrition advice.

At Rodale, I would like to thank publisher Liz Perl and my longtime editor and friend Marya Dalrymple, who has truly been a partner in the creation of this book. I would also like to acknowledge test kitchen manager JoAnn Brader, project editor Hope Clarke, photographer Thomas MacDonald, and the best art director ever, Carol Angstadt.

Finally, I must once again credit my friend Linda Richman for making a phone call so many years ago and uttering seven life-changing words: “My doctor needs to write a book.”

Above all, and always, I thank my wife and partner, Sari, and sons, Evan and Adam, for their constant support, enthusiasm, and love.
PART I
Living The South Beach Diet
Changing the Way America Lives

The South Beach Diet was always intended to be more than just a diet. In fact, it was originally developed to help my cardiac and diabetes patients lose weight in order to prevent heart attacks and strokes. As a cardiologist, I have always felt that the South Beach Diet is less about dieting and more about living a long, healthy, and active life. I wrote the original book in 2003 because I wanted to help change the way America eats. Now I have a new goal: I want to change the way America lives, not only by helping people eat healthfully and lose weight, if necessary, but also by helping them become more fit. We must begin to overcome the poor eating habits and sedentary lifestyle that are making us fatter and sicker with each passing year.

Over the past several decades, we have witnessed an unexpected epidemic of obesity in this country. One-third of American adults over age 20 are obese, and two-thirds of us are overweight. The number of seriously overweight children has tripled. Moreover, statistics show that 51 percent of Americans don’t engage in any kind of regular physical activity. The results have been catastrophic.

This epidemic of obesity is causing an array of health problems that is much broader than we doctors ever imagined. Beyond the cosmetic concerns that pervade our culture, the list of real problems arising from our toxic lifestyle is getting ever longer. A partial list includes—and you may want to sit down for this—heart attack, stroke, prediabetes, diabetes, many types of cancer, Alzheimer’s disease, macular degeneration, arthritis, osteoporosis, psoriasis, acne, depression, and attention deficit disorders. And this is just a sampling.

It also appears that if we do not reverse the health course that we are on, the cost in human and economic terms will reach crisis proportions. Our poor diet and sedentary lifestyle are already exacting a steep toll in terms of mortality and money. They’re responsible for an estimated 300,000 premature deaths every year and $90 billion in health-care costs, but I believe the real costs are much higher. And as the baby boom generation gets older, these health costs will likely continue to soar.

Sadly, this is not only an American problem. Just as our sedentary, fast-food lifestyle is being exported around the world, so are the attendant health problems. The good news is that now that we better understand what’s happening to us, we can start to create solutions.

A Sedentary Nation

In order to develop strategies to halt and reverse the epidemic of obesity, we must be aware of the trends that have gradually but inexorably brought us to the crisis situation we are in today. I have found in my practice that by putting patients’ current problems into a context they can understand, they can more easily become cooperative partners in moving toward solutions. Perhaps because I was a history major (not all doctors are bio majors), I also find that tracing today’s health problems back to their original roots is fascinating.

The truth is that while our bad diet and unhealthy lifestyle have been many decades in the making, the toxic changes in the way we live have really accelerated in recent years. Our DNA is designed to live, eat, and exercise the way our hunter-gatherer ancestors did, and it hasn’t changed substantially since that time. But we no longer live in the wild. We don’t have famine in this country to keep us thin. We no longer burn calories hunting and gathering our food.

On top of that, a completely sedentary lifestyle has gradually crept in, invention by incredible invention. Due to the march of technology, we sit in front of computers both at work and at home. Machines and gadgets lift, move, and carry things for us. We communicate by e-mail, and many of us don’t even walk down the hall to chat with colleagues as often as we used to! While studies document how much less physical exertion we’re doing, we really don’t need research studies to appreciate the trend. All we have to do is look around.

The preponderance of labor-saving devices, from tractors and forklifts to remote controls and the personal computer, has had a major impact on the number of calories we expend daily at home and at work. These devices have also had devastating effects on our muscles, bones, tendons, and ligaments. Sitting bent over at a computer for most of the day is simply not good for our health. In Chapter 5, “Boomeritis: The New Epidemic!” I talk about these evolving physical problems and their solutions. And in Part II of the book, I present the South Beach Supercharged Fitness Program. Not only will this 20-minute-a-day program help you burn more calories even when you’re not working out, it will also strengthen the key core muscles in your abdomen, back, pelvis, and hips. It’s your core
muscles that help you avoid the back pain and other muscle problems that so often result from our sedentary lives.

**Missing Our Nutrients**

Our unhealthy lifestyle is made even worse by our poor diet. Since we began growing fields of grain about 10,000 years ago and developed the ability to cultivate fruits and vegetables, the nutritional content of our foods has seriously deteriorated. This is because we tend to breed plants for hardiness, taste, and aesthetics, not nutrients. Today, the fruits and vegetables we find in most supermarkets are larger, sweeter, and better-looking than those our ancestors gathered. The problem is that they also have less fiber and fewer vitamins, minerals, and other nutrients than is optimal for our general health—not to mention our waistlines. Luckily, more and more Americans are embracing organic foods, heirloom fruits and vegetables, and sustainable farming methods, all trends that are bringing food back to its more natural and nutritious state. In Chapter 7, “Supercharged Foods for Better Health,” I recommend some foods with powerful nutritional benefits that can help you stay healthy and avoid the host of chronic and degenerative diseases currently affecting so many of us.

**A Nation Overprocessed**

Beyond our desire to cultivate and produce food almost exclusively to please our tastebuds, other social and technological trends have affected our food supply for the worse. A few generations ago, our great grandparents walked to local markets on a daily basis to buy whatever produce they didn’t grow themselves as well as fresh bread and other food for their families’ next meals. They could only travel to local markets and take home what they were able to carry. With the advent of the automobile and the home refrigerator, however, it became possible to travel farther to shop, and people could take home enough food to feed their families for a week or two. But for that to be possible, foods had to have longer shelf lives. This led to supermarkets and to food processing, which, unfortunately, removed important nutrients while adding substances like sodium and trans fats to prevent spoilage. In a sense, we began digesting our food in factories instead of in our intestines.

It’s only now that we are appreciating the deleterious effects these technological “advances” have had on our weight and on our health. In Chapter 3, “A Diet You Can Live With…For Life,” I discuss the health and character of a Mediterranean society that thrived without many of our modern advances, and I show you how we can learn from this remarkable example.

**We Must Act Now**

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5 YEARS of SUCCESS

**Deborah M., age 43: We Are Healthier People because of the Way We Live**

It was 2003, and my husband had very high blood pressure that wasn’t being controlled, even with medication. I was very overweight and knew that we both needed to make a change. The South Beach Diet had just come out, and I went to the bookstore to look over a copy. The first thing I turned to was the recipe section. It was great. I love to cook and was thrilled that I didn’t have to give it up.

After reading the book, I realized that I ate way too many bad carbs all day, like crackers and cookies. Once I stopped eating enriched white flour, I noticed a complete change in everything about me, including my mood and energy level, and I started losing weight. Within a year, I lost 45 pounds, and my husband lost 20. Although he still takes medication for high blood pressure, it’s now under control.

Now I’m the go-to girl at work for healthy-food questions. When we have luncheons, everyone knows they can count on me to bring in something healthy. I have learned how to take bad carbs out of a recipe and replace them with good carbs. I am passionate about telling people to read food labels! Don’t be fooled; buy only whole-grain products. If it says “enriched white flour,” find something else.

In 2005, we had an 11-year-old foster youth come to live with us. He was overweight and already taking medication for high blood pressure. He lived on junk food. We took him to a doctor, who told us that he shouldn’t go on a diet—he should start living a healthy lifestyle. I decided to give him the same healthy food
my husband and I were eating, but I told him he could eat as much as he wanted. He also started exercising. Simply by eating the right foods and being more active, he started losing weight fairly quickly. By the end of 4 months, he was off the blood pressure medication, and by the time he left us 18 months later, he had lost 30 pounds. While living with us, he learned how to read food labels and make good food choices. I hope he continues to live a healthy life. My husband often jokes that I should open my home to people who want to lose weight.

I am happy with my weight loss but even happier that my husband and I are healthier people because of the way we live and eat. I am a true believer in the South Beach Diet way of life.

If you’re like me, you find how we got into this sad state not only depressing but scary. But there is hope if we take action today. Because we finally understand so much of what has gone wrong, we can use our advanced technologies to turn things around. We now know that our increasing waistlines, poor physical fitness, and worsening health are not different problems but, rather, part of the same problem. We now know that what’s good for our waistlines is also good for our hearts, our brains, and our general health.

We must ask the food industry, including traditional and fast-food restaurants, to help make healthy food more convenient and convenient food healthier. We must supply our schoolchildren with nutrient-rich meals and make nutrition education and physical education integral parts of our schools’ curricula. We must reinstate the family table and, despite our busy schedules, try to provide fresh foods for our children on a regular basis. We must also create communities and workplaces where good food and exercise opportunities are readily available. These steps will make for a healthier, happier, more motivated, and more productive America. I guarantee it.

In the chapters that follow, I explain the lifelong benefits of adopting a healthy diet and fitness program. And in Parts II and III, I offer the specifics on how to get there. Whether you have 10 pounds, 100 pounds, or no weight to lose, whether you are active or inactive, helping you to become healthy and fit—for life—is the mission of this book. So read on and learn more. We can beat the epidemic of obesity in this country. And we can all become part of the solution.
The Basics of the South Beach Diet

Recently, an Associated Press story about the New York City subway system caught my eye. According to subway officials, a leading cause of subway delays is crash dieters who faint on the platform or on the train. That’s right—crash dieters who pass out and require medical help are a top cause of transit delays. Clearly, these folks are not eating properly, and they’re certainly not following the South Beach Diet!

On the three phases of the South Beach Diet, you will eat three meals a day and at least two snacks. You will eat until you are pleasantly full, and you will not walk around feeling dizzy or hungry. We don’t want you to skip meals or snacks. You’ll be eating satisfying portions of real food, including nutrient-rich, high-fiber carbohydrates (vegetables, fruits, and whole grains); lean sources of protein; good unsaturated fats; and low-fat dairy. You can eat dessert on even the strictest phase of the diet (in fact, we recommend it) and enjoy an occasional glass or two of wine with a meal after the first 2 weeks. South Beach dieters do not faint from lack of food on the subway, on the street, or anywhere else.

THE SOUTH BEACH DIET PHASES IN A NUTSHELL

In Part III of this book, “Supercharged Eating on the South Beach Diet,” beginning on “Getting Started on the South Beach Diet” Section, you’ll find all the tools you need to get started and proceed through the diet’s three phases. But I want to give you a quick overview right here, so you’ll understand its foundation.

**Phase 1:** This is the shortest and strictest phase of the diet, lasting only 2 weeks. Phase 1 is for people who have a substantial amount of weight to lose or experience significant cravings for sugary foods and refined starches. During this phase, you’ll jump-start your weight loss and stabilize your blood sugar levels to minimize cravings by eating a diet based on healthy lean protein (fish and shellfish, chicken and turkey, lean cuts of meat, and soy); loads of vegetables and plenty of salads; beans and other legumes; nuts; reduced-fat cheeses; eggs; low-fat dairy; and good unsaturated fats, such as extra-virgin olive oil and canola oil. You’ll enjoy three satisfying meals a day plus two snacks, and you’ll even be able to have some dessert. What you won’t be eating are starches (bread, pasta, and rice) or sugars (including fruits and fruit juices). While this may seem hard at first, your cravings will soon disappear, and you won’t feel hungry all the time. Remember that in just 2 weeks, you’ll be adding many of these foods back into your life. Also keep in mind that exercise during this and all of the phases of the diet is important to your overall health and will improve your results.

Phase 1 gives positive reinforcement because you lose weight fairly rapidly over the 2-week period, but the main purpose of this phase is to stabilize blood sugar and eliminate cravings. You then have much better control over what you eat. And while the rapid weight loss is exciting and gives you the incentive to keep on losing, it’s important to move on to Phase 2 to begin more gradual weight loss and the evolution from diet to lifestyle.

**Phase 2:** People who have 10 pounds or less to lose, who don’t have problems with cravings, or who simply want to improve their health can start the diet with Phase 2. If you’re moving on to Phase 2 from Phase 1, you’ll find that your weight will continue to drop steadily (although more slowly) and your cravings have subsided. You’ll gradually reintroduce many of the foods that were off-limits on Phase 1, including more good carbohydrates, such as whole fruits, whole-grain breads, whole-wheat pasta, and brown rice, as well as some root vegetables (like sweet potatoes). You’ll even be able to have a glass of red or white wine with lunch or dinner on occasion. Don’t be discouraged by your slower weight loss during this phase. Your goal is to reach a weight that’s healthy for you, achieve permanent weight loss, and develop a healthy lifestyle. Otherwise, it’s just a quick fix.

**Phase 3:** This phase begins once you reach your healthy weight. The principles of Phase 3 are guidelines for the way all Americans should be eating, even those who’ve never had a weight problem. At this point in the diet, you’ll fully understand how to make good food choices while maintaining that healthy weight. You’ll have learned the pecking order of foods (from good to not so good). You will know to choose a higher-fiber, nutrient-rich sweet potato over a white baked potato. You’ll know to choose brown or wild rice over white rice
and blueberries over watermelon and overall maximize your consumption of healthy fruits, vegetables, and whole grains. You’ll be able to easily monitor your body’s response to particular foods, and you’ll find yourself naturally making the right choices most of the time. Remember, once you reach Phase 3, no food is completely off-limits. You can enjoy a decadent dessert on occasion and will probably find you’ve satisfied that sweet tooth after just a few bites.

The goals of the South Beach Diet are to help you lose weight safely and stay healthy and fit for the rest of your life—and never walk around feeling famished and light-headed.

The South Beach Diet is not a high-protein, low-carbohydrate diet, nor is it a low-fat diet. It is a nutritionally sound diet that consists of a wide variety of wholesome foods and teaches you how to make better food choices for life.

Choose the Good Carbs

Do you know the difference between a good carbohydrate and a bad one? Many of my patients didn’t until we published our original diet book 5 years ago. In fact, until fairly recently, even many medical professionals did not know much about how carbohydrates differ. For instance, it turns out that fiber plays a very important role in what makes a carbohydrate good.

The concept of dietary fiber relating to disease was first introduced by Denis Burkitt, MD, a British army surgeon who served in Africa in the 1960s, but its role in nutrition did not become widely appreciated until the early 1980s. That’s when David Jenkins, MD, of the University of Toronto, introduced the concept of the glycemic index, a method of classifying carbohydrates based on their potential to raise blood sugar levels, which is in part due to the type of starch, sugar, or fiber they contain. (I discuss the glycemic index in more detail in the next chapter.) Additionally, it wasn’t until the last decade that we realized that high-fiber good carbs are also great sources of literally thousands of micronutrients known as phytochemicals, including the antioxidants that are essential for preventing disease and simply keeping us healthy.

When it comes to fiber, it’s important to know that there are two types—soluble and insoluble—and both will help you achieve your weight loss goals. Soluble fiber is found mainly in vegetables, fruits, legumes, barley, oats, and oat bran. It slows down digestion, so food stays in your stomach longer, making you feel satisfied longer. Insoluble fiber is found mainly in wheat, especially in wheat bran and other whole grains. It speeds up the movement of food through your intestines, thereby helping to prevent constipation.

Unfortunately, as I noted in the last chapter, fiber is often removed from grains during processing to produce a smoother texture and to extend the shelf life of breads and other baked goods. Without fiber, processed grains become essentially chains of glucose (sugar) molecules known as starches, which are devoid of nutrients. These starches are rapidly digested and converted into the simple sugars that can cause a sudden spike in blood sugar. In fact, a piece of white bread will raise your blood sugar faster than a teaspoon of table sugar will. That’s why highly processed baked goods and sugary low-fiber cereals are among the worst carbs you can eat.

Let’s say you typically start your day with a bowl of sweetened cereal or a Danish pastry. Your breakfast is largely free of fiber and nutrients and is converted into simple sugars very quickly. When your blood sugar rises, your pancreas (a small, flat organ that lies behind your stomach) responds by producing insulin, the hormone that facilitates the movement of blood sugar and fat from the bloodstream into your cells. This is a crucial step that ensures that the energy you consume in the form of food gets into your body’s tissues, where it is burned, stored, or incorporated into hormones in order to keep you functioning and healthy. But when you consume a meal of nearly pure starch or sugar, your pancreas has to produce more insulin than it normally does. Once that additional insulin kicks in, your blood sugar falls abruptly. While you may feel satisfied and energized for a while, relatively soon after your meal, when the sugar is cleared from your bloodstream, your blood sugar drops. And as your blood sugar drops, you feel tired, cranky, and hungry again.

It’s due to these exaggerated swings in blood sugar that many Americans are walking around much of the time in search of another sugary or starchy snack—a quick fix—to relieve their food cravings. Over time, this cycle will disrupt your metabolism, making you susceptible to a condition called prediabetes, or metabolic syndrome. (I will tell you more about prediabetes in later chapters.) Already some 40 percent of US adults ages 40 to 70 are affected by this condition, which, if left untreated, can cause an increase in heart attacks and strokes and eventually lead to full-blown diabetes.
Choose the Good Fats

More than a decade ago, when I first began suggesting to my heart patients that they should eat more good fats, it was tantamount to committing medical heresy. Today, nutrition experts unanimously agree that good fats are important. This is great news, especially for people who have suffered on very low-fat diets that left them feeling unsatisfied. In fact, diets that severely limit fat have proven very difficult to stay on. We need good fats because they’re essential for building cell membranes; for nerve, heart, and brain health (fats compose 60 percent of the brain); and for nearly all of the body’s basic functions. In addition, fats slow the digestion of carbohydrates and make food taste better, helping you feel satisfied. However, you do have to be careful about which fats you consume. Just as all carbohydrates are not the same, all fats are not the same. Some are good, some are bad, and some are really terrible.

Good fats are the unsaturated fatty acids our bodies need to survive. Unsaturated fats are either monounsaturated or polyunsaturated. Monounsaturated fats can be found mainly in olive, peanut, avocado, and canola oils. There are two types of polyunsaturated fats—omega-3s and omega-6s. Omega-3s are found in some nuts; flaxseed and other seeds; and all seafood, especially fatty cold-water fish such as salmon, tuna, sardines, and herring. Omega-6 fats are found in corn, safflower, and sesame oils and also in grains. Both omega-3s and omega-6s are called essential fatty acids because they are required by the body and must be obtained through food sources or supplementation. Omega-6 fats are dependent on interactions with omega-3s for their optimal health benefits, but omega-6s are considered good fats only when consumed in moderation and in proper proportion with omega-3s. A normal ratio of omega-6s to omega-3s in a healthy diet should be about 2–4:1. Currently, most Americans’ ratios are more like 15–17:1, largely because we eat a lot of omega-6-rich oils and a lot of grain-fed beef in this country, and grains contain omega-6s. (Grass-fed cattle and wild game, which eat a more natural diet, have relatively more omega-3s.) When too many omega-6 fats are consumed, they tend to be proinflammatory, whereas omega-3 fats are anti-inflammatory. Because we are getting too many omega-6s and not enough omega-3s, as a society we have, in a sense, become hyperinflamed. And, as more studies are showing, this constant state of inflammation can cause or exacerbate a range of health problems, from heart attack and cancer to Alzheimer’s disease.

Although I don’t generally recommend dietary supplements (I prefer that you get your nutrients from whole foods), I make an exception when it comes to omega-3s. In fact, to make up the shortfall, I recommend a fish-oil supplement for most people, especially those who don’t eat fish at least twice weekly.

The two active ingredients to look for in omega-3 or fish-oil supplements are EPA (eicosapentaenoic acid) and DHA (docosahexaenoic acid). If you read the supplement label, you will see the amount of these nutrients listed in milligrams (mg). You should take between 1,000 and 2,000 milligrams of EPA and DHA daily, with the approval of your doctor. For some conditions, such as a severe elevation in triglycerides, higher doses are recommended. Interestingly, DHA is present in large quantities in the brain and has been added to many brands of infant formula since 2002. We do need to be a little careful, however, even with the good fats. As good as they are, they are also calorie dense and should be consumed judiciously during all phases of the South Beach Diet. I suggest that you limit added oils to approximately 2 tablespoons per day (no, you don’t have to eat your salads dry!) and limit nuts to about ¼ cup a day. While many nuts do contain good fats, it’s too easy to unconsciously eat way too many.

Avoid the Bad Fats

Bad fats include saturated fats (often referred to as animal fats), which are found primarily in fatty cuts of beef, lamb, and pork; in poultry with the skin; and in full-fat dairy products. There are also plant sources of saturated fats, including coconut, palm, and palm kernel oils, but the jury is still out on how bad they are. In fact, research suggests that some of these plant oils may have health benefits. The really bad fats are trans fats, which are created when manufacturers add hydrogen to vegetable oil—a process called hydrogenation—to increase the shelf life and stability of foods. Trans fats can be found in stick margarines (but not in most soft tub or liquid margarines), vegetable shortenings, foods fried in hydrogenated oils, and many packaged snack foods containing hydrogenated or partially hydrogenated oils.

Most bad fats, especially the trans fats, deserve their bad reputation. We’ve known for some time that a high intake of saturated fats from animal sources is linked to a greater risk of heart attack or stroke because these saturated fats raise bad LDL (low-density lipoprotein) cholesterol. And we now know that trans fats not only increase LDL, they also reduce good HDL (high-density lipoprotein) cholesterol and may even play a role in metabolic problems, obesity, infertility, and many other health problems of the Western world. For these reasons, in
January 2006, the FDA started requiring food manufacturers to list the amount of trans fats on packaging.

5 YEARS of SUCCESS

DANNY S., age 42: My Insurance Policy against Weight Gain

I was one of the first people to go on the South Beach Diet; in fact, I was a story in Dr. Agatston’s first book. I’m delighted to be able to share my continued success.

I actually went to Dr. Agatston about 8 years ago because I had to lose weight—I was 6-foot-1 and weighed over 260. I was 35, and although my health was okay, I realized that if I didn’t do something about my weight, I could easily develop a problem down the road. I lost 60 pounds, and I’ve kept it off. The diet is my fallback, my insurance policy against weight gain. It definitely saves me from ever going back to that high weight. If I do put on a few pounds or find that my cravings have returned, I go right back on Phase 1 for a few days, take the pounds off, and reinforce my healthy eating principles.

Once I began taking off weight, I began to work out. I had never done any regular exercise before. I suddenly felt so much better, so much more alive and limber, that I no longer thought it would be a challenge to go to the gym. Now I weight train three times a week and do cardio five times a week.

The diet taught me what triggers my overeating. I know that bread is a huge problem for me, so I’ve learned to moderate it. I’ll only eat bread—mostly whole-wheat—in the morning. I rarely eat white bread. And there are a lot of other things besides a sandwich that I can have for lunch. If you’re really addicted to something, the desire doesn’t go away immediately, but you can learn how to control it. The good thing about the South Beach Diet is that you don’t have to give up any foods completely once you’ve reached your goal weight. It doesn’t make sense to deny yourself something for the rest of your life. The diet showed me that it’s possible to take off the weight you need to take off and then maintain it. If you do put a few pounds back on, it’s not the end of the world. You can go back on the right phase and take them off.

Choose Lean Protein

Protein foods are digested slowly and do not produce the spike in blood sugar that stimulates hunger and overeating. They also satisfy you, so you won’t be walking around feeling hungry all the time. On the South Beach Diet, you can eat lean cuts of beef, lamb, and pork; skinless white meat chicken and turkey; game meats; fish and shellfish; soy products; beans and other legumes; eggs; and fat-free and low-fat dairy products. The amount of protein you require varies, depending on your age, activity level, and any illness you may have. Young athletes, for example, need a lot of protein, while older, sedentary individuals require less. For people with kidney problems, protein may have to be severely limited.

Some people have asked me how a cardiologist can recommend that people eat red meat even though it contains saturated fat. I’m not advising anyone to eat a steady diet of high-fat cuts, such as brisket or rib steak, or to eat red meat daily. Lean cuts of meat, however, are excellent sources of protein, iron, zinc, and B vitamins. And, in terms of maintaining a healthy weight, it’s far more preferable to eat lean meat than to gorge on highly processed refined carbs.

This doesn’t mean that the South Beach Diet isn’t for vegetarians. Many vegetable sources of protein, such as soy and legumes (beans, lentils, chickpeas, and so on), are very satisfying. Vegetarians will also benefit from eating good monounsaturated and polyunsaturated fats, as well as good carbohydrates, from the wide variety of fruits, vegetables, legumes, and whole grains we recommend.

Go High Fiber

I’ve already talked a bit about fiber, but I can’t say enough about it. That’s because one of my goals as a cardiologist is to get people to eat more fiber-rich foods. I have no doubt that if they did, there would be far fewer cases of obesity in this country and around the world. Why? As I noted earlier, high-fiber foods slow the rate of digestion of starches and sugars, which blunts the swings in blood sugar that lead to cravings. It’s not surprising, then, that
people who consume higher amounts of fiber gain less weight when followed over a period of years. They just aren’t hungry all the time!

In addition to helping people maintain a healthy weight, fiber also plays an important role in combating a number of diseases. At one time, people were advised to load up on fiber as a means of preventing colon cancer. This belief was based on research that showed that countries with the highest rates of dietary fiber consumption had the lowest rates of colon cancer. While later studies put this theory into doubt, fiber does appear to protect against heart disease and type 2 diabetes. A major Harvard study of more than 40,000 male health professionals found that those who ate lots of dietary fiber—especially cereal fiber—had a 40 percent lower risk of coronary heart disease, compared with men who ate the least fiber. A study of female nurses, also conducted at Harvard, found that fiber had the same heart-healthy effects on women. And numerous studies have linked fiber consumption to a reduced risk for diabetes (see Chapter 7 for one example).

Today, the American Heart Association recommends eating 15 grams of fiber for every 1,000 calories consumed daily. That adds up to about 25 to 35 grams per day, depending on how many calories you take in. But most Americans don’t get anywhere close to this amount. In fact, the average daily intake is a total of 15 grams of fiber. That’s why I always remind people to keep eating plenty of fiber-rich whole fruits and vegetables, legumes, and whole grains.

Now that you understand the value of good carbs, good fats, lean protein, and fiber, you can see why they’re the mainstays of the South Beach Diet. You’ll find it’s easy to incorporate healthy nutrients into your meals by choosing what appeals to you most from the Foods to Enjoy lists in Part III. You can follow our suggested Meal Plans for Phases 1 and 2 verbatim, or use them to inspire meals of your own.

You now have the tools to eat great food, look great, and feel great. You’ll find it easier than ever to follow a healthy diet as a lifestyle.
A Diet You Can Live With…For Life

When we originally published the South Beach Diet in 2003, some people asked me about long-term studies documenting its value. Others questioned whether anyone can successfully stick to a diet. And over the ensuing years, some articles were written claiming simply that “diets don’t work.” This can certainly be true, unless the diet teaches you how to make better food choices and evolves into a healthy and sustainable lifestyle.

In that regard, I like to point out a diet and lifestyle experiment that lasted hundreds of years with remarkable success. It involves the inhabitants of the Mediterranean island of Crete. Of course, the people of Crete didn’t know they were part of an experiment. They didn’t know they were on a diet or participating in an exercise program. They didn’t weigh their food or count calories, carbs, or fats (in fact, their diet was relatively high in fat). They didn’t go to the gym. And they certainly weren’t walking around hungry. In fact, they were quite satisfied with a wonderful range of food choices. Yet even with this seeming lack of regard for diet and exercise, they were not overweight, and they enjoyed low rates of heart disease, diabetes, cancer, and other diseases.

How did they accomplish this? They were simply surrounded by a wide variety of fruits, vegetables, and whole grains. There were ample quantities of lean meats and fish. They consumed plenty of fat, but it was predominantly healthy Mediterranean oils, in particular olive oil. And there was, in fact, a great deal of exercise in the form of long walks and vigorous exertion as part of their daily routine. They were happy and healthy without working at it or even thinking about it. Unfortunately, today the Western lifestyle has found its way to Crete, and its men and women are looking more like Americans in both their abdominal girth and their health profile.

Why Is America So Fat?

In this country, our epidemic of obesity and diabetes really took off over the past 3 decades and has continued at a fast clip right up to the present. Coincidentally, the 1980s was when the federal government, along with medical groups such as the American Heart Association, began to aggressively promote the benefits of a low-fat, high-carbohydrate diet. This was eventually reflected by the first USDA Food Pyramid, published in 1992, which emphasized bread, rice, pasta, and cereals as the basis of a healthy diet. Fats and oils were to be used sparingly. Was this the wrong advice? Did it have a role in the fattening of America? I believe the answers to these two questions are yes and yes.

The national recommendations were based on what was felt to be the best scientific evidence at the time. Much, if not most, of the nutritional research we have today was simply not available back then. The rationale for the low-fat, high-carb approach was largely predicated upon population studies performed after World War II. The most influential were those conducted by Ancel Keys, PhD, a physiologist at the University of Minnesota. Dr. Keys looked at the relationship between diet, cholesterol, and heart disease in industrialized and nonindustrialized countries. Industrialized countries, such as the United States, had a high fat intake associated with high cholesterol levels and heart attack. Nonindustrialized countries had low-fat diets, low cholesterol levels, and low rates of heart attack.

A glaring exception in the nonindustrialized category was the island of Crete, which, as I noted above, had a relatively high-fat diet yet a low rate of heart disease. But Crete was considered a fluke and ignored at the time. So the United States went on a low-fat, high-carbohydrate diet and got increasingly fatter.

How did we go so wrong?

At the time of the national recommendations, the thought was that the new American diet would mimic the diet composition of the nonindustrialized world, where there was almost no obesity or heart disease. The problem was that in the national recommendations, no distinction was drawn between good carbs and bad carbs or between good fats and bad fats. While sugar was not recommended, starches (the so-called complex carbohydrates) were. It was simply not known at the time that low-fiber starches, such as white bread and potatoes, raised blood sugar just about as fast as simple sugars did. As for fats, studies showing the overall health benefits of good fats (such as omega-3-rich oils), including their positive effects on the heart, had not yet been performed.

In response to the conventional—and misguided—wisdom of the time, the food industry began to produce low-fat, low-cholesterol baked goods, including cookies and pastries, made with refined white flour and varying amounts of sugar. Most commercial baked goods also included coconut and/or palm oil, which had replaced the highly
saturated animal fats in these products when various groups complained about them. It was only when the American Medical Association published a position statement calling for clear disclosure to the public that tropical oils were just as highly saturated as animal fats that these plant oils began to be removed.

That’s when things got even worse. Tropical oils were replaced by hydrogenated or partially hydrogenated vegetable oils, the harmful trans fats I talked about on Chapter 2, which are directly associated with heart attack, stroke, diabetes, and other serious health problems. Ironically, trans fats were created as a healthier alternative to saturated fats, but they turned out to be worse. For years, most Americans (including yours truly) thought we could eat these starchy, trans fat-laden baked goods with impunity. We were mistaken. And we got fat.

How Eating Can Make You Hungry—And Fat

Thanks to ongoing research in the science of food, nutrition, and diabetes, by the early 1990s, I had a pretty good idea of where our diet had gone wrong. It became clear that as a society, in our attempt to limit fat, we were consuming ever-higher amounts of bad carbohydrates—in other words, more of the sugary sweets and refined starches that are essentially devoid of fiber and other nutrients. This was causing exaggerated swings in our blood sugar, which resulted in cravings for more refined carbs and the constant hunger that I described in Chapter 2.

The reason we were so hungry all the time also became clearer when I learned about the glycemic index, a measure of how the carbohydrates in an individual food can affect blood sugar. The foods that keep blood sugar nice and stable—the ones that don’t cause dramatic blood sugar swings—are those that are low on the glycemic index. These include whole grains, most vegetables, and low-sugar fruits (such as berries), which are digested slowly, making you feel full and satisfied for a longer period of time. Fiber is a major determinant in establishing a food’s glycemic index, but there are other factors as well, such as the degree to which a food is processed, how long it’s cooked, and its acidity. However, as useful as the glycemic index can be for guesstimating how certain foods will affect your blood sugar levels, it doesn’t tell the whole story. We have learned a great deal more about food and how it works in our bodies since the glycemic index was first identified. The expanded Foods to Enjoy and Foods to Avoid lists in this book reflect this growing body of knowledge.

It’s no wonder that back then my patients were getting fatter as they filled up on the high-glycemic carbs (the pastas, breads, and cereals made from white flour) that we were mistakenly recommending as a substitute for fatty meats and full-fat dairy. Once I understood more about the glycemic index, however, it didn’t take me long to see that these essentially fiberless, starch-laden foods were making our patients hungrier due to the swings in their blood sugar.

And, of course, the hungrier they got, the more they ate, and the more weight they gained. It was an endless cycle. And as they got fatter, they also became prediabetic and diabetic. Because of new research in this area, I also began to understand that there were just as many misperceptions about these diseases as there were about what constitutes a good diet.

Misunderstood Prediabetes

Most people mistakenly associate all diabetes with a lack of insulin, the hormone produced by the pancreas that clears sugar (glucose) and fat out of the bloodstream and moves it into the cells after meals. Type 1 diabetes, formerly called juvenile diabetes, is characterized by the inability of the pancreas to make enough insulin. But in prediabetes, which often leads to type 2 diabetes, the problem is not too little insulin but the resistance of cells to the hormone’s effects. In fact, in prediabetes, blood insulin levels actually remain high after a meal until the excess insulin finally opens the floodgates, allowing glucose to move from the bloodstream into the cells. This results in a rapid fall in blood sugar, which is known as reactive hypoglycemia because the reaction, or blood sugar drop (hypoglycemia), comes sooner after a meal than a normal, gradual drop would. It’s why the insulin resistance associated with prediabetes only exacerbates the already exaggerated swings in blood sugar and consequent cravings caused by bad carbohydrates. And it’s why prediabetics are almost always hungry again soon after a meal and tend to gulp down their food to bring up their sagging blood sugar.

Prediabetes typically occurs in individuals with a genetic predisposition to accumulating belly fat. In fact, you can recognize people with prediabetes on the street. They’re the ones walking around with large bellies and relatively thin arms and legs. They also tend to have high blood pressure, low levels of good HDL (high-density lipoprotein) cholesterol, and high levels of triglycerides (a fat-storage molecule found in blood and fat cells).

But how does prediabetes lead to type 2 diabetes? Over time, your pancreas tends to burn out from the stress of producing extra insulin to overcome the insulin resistance of your tissues and clear sugar and fat from your blood in
a timely manner. It is at this point that your sugar remains high for many hours after a meal and type 2 diabetes is diagnosed.

**IT WASN’T STRESS THAT MADE US FAT**

Many overweight individuals, including many of my patients, believe that their food cravings have to do with stress rather than blood sugar swings. They’re embarrassed by their lack of willpower and assure me that it’s the fight with the boss or the spouse, the 2-hour wait in traffic, or the kids’ bad report cards that made them wolf down that giant muffin, handful of candy, or piece of coffee cake. Even some scientists have suggested that our obesity epidemic is due to the psychological stresses of living in modern times.

While I acknowledge that some people do overeat to compensate in times of stress, I take issue with those who believe it’s the cause of our obesity epidemic. I like to point out that stress didn’t begin 30 years ago, and we didn’t start getting really fat as a nation until the 1990s—after the fall of the Berlin Wall that marked the end of the Cold War and before 9/11. The US economy was booming at the time. It’s also important to note that this was a period when the character of our food supply had changed and our physical activity was rapidly declining, largely due to increased use of the personal computer and other labor-saving gadgets.

The point is, it was in the midst of peace and prosperity that America became so fat. With what we know today, it’s clear that it was not our psychological state but what we ate and how sedentary we became that was the primary cause.

During the prediabetes phase, most people’s fasting blood sugar is borderline, normal, or even low. For this reason, many of my patients initially believe that their risk of heart attack and stroke increases only if they become diabetic. This belief is wrong! During the prediabetes phase, when fasting blood sugar is still normal, insulin resistance is present and it takes longer to clear fats and sugar from the bloodstream. It’s that extra fat hanging around after a meal that often penetrates the walls of the blood vessels supplying the heart muscle, brain, and other organs. This is the origin of the atherosclerotic plaque that clogs these vessels and eventually leads to a heart attack or stroke. And, yes, this can and does occur during prediabetes, well before type 2 diabetes is diagnosed.

Again, this is relatively recent information. Prediabetes was first described in 1988 by Gerald Reaven, MD, of Stanford, and we’re still learning about the havoc it wreaks on our blood vessels and overall health. I talk more about the origins and the health implications of prediabetes in Chapter 6, “Bye-Bye Belly Fat.”

**Creating the South Beach Diet**

Armed with the conviction that our problem was not too much fat or too many carbohydrates in our diet but the wrong fats and the wrong carbs, I decided to try a good-fats, good-carbs diet on myself and on my patients. I also chose to recommend lean sources of protein that didn’t have excess saturated animal fat.

I decided on a three-phase approach, with each phase having a distinct purpose. The first phase would be strict and last just 2 weeks. It would jump-start the diet and get rid of cravings. While studies had shown the positive psychological effects of early rapid weight loss, we intentionally did not want this rapid weight loss to continue for too long. Not only would dieters miss out on key nutrients in fruits and whole grains but, over time, rapid weight loss would become counterproductive. For this reason, we designed the second phase for slower weight loss, so that my patients could learn how they reacted to whole grains and whole fruits as they gradually reintroduced them. It would be an educational stage and a transition from diet to lifestyle. The third phase, or maintenance phase, would become a permanent, healthy lifestyle and a guide for the way we should all eat, whether or not we need to lose weight or improve our blood sugar and cholesterol levels. Because studies showed that well-timed snacks help prevent the sugar lows that can bring on cravings in the late morning, late afternoon, and/or evening, I included what I called strategic snacking on all the phases, but especially the first phase, of the diet.

I felt that this approach was not only a true departure from the nationally recommended low-fat, high-carb diet at the time but also from the then-popular low-carb, high-fat diet and severely fat-restricted diets. I didn’t want to give my heart patients a high-fat diet that included liberal amounts of saturated fat that might accelerate their heart disease, nor did I want to severely restrict total fat. First, in my experience, patients had great difficulty adhering to such a diet. Second, with a low-fat, high-carb diet, I had seen patients’ good cholesterol decrease and their
triglycerides and blood sugar shoot up. Third, I wanted my patients to have the benefit of good fats; studies had convinced me that they were good for both the heart and general health. In addition, having a certain amount of good fat in the diet made the food taste better and improved satiety and compliance.

**The First South Beach Dieter—Me!**

My interest in finding the ideal diet went beyond concern for my patients, however. In fact, it was a little bit selfish. I had had my own bad experience with the low-fat, high-carb approach and had gained weight due to what I now realize were very poor choices when it came to carbohydrates. I had even developed my own middle-age fat-storage depot where my once-trim belly used to be. Furthermore, I found I was running out of steam in the late afternoon, which often led me to a mad dash to the doctors’ lounge, where I would inhale a low-fat (but sugary) muffin and a cup of coffee to help me make it through the rest of the day. I now realize that this was a sign of reactive hypoglycemia due to insulin resistance and that the refined carbs and sugar I was eating only exacerbated the problem.

So I designated myself as the first candidate for my new diet. I was amazed to observe my belly fat start to disappear in just 2 weeks, and I quickly felt energized. I no longer needed to make those late-afternoon dashes to the doctors’ lounge to hike up my falling blood sugar.

With the confidence and excitement that resulted from my own experience, I recruited Marie Almon, MS, RD, at that time the chief clinical dietitian at Mount Sinai Medical Center in Miami Beach, to help me develop meal plans for each phase of the diet, based on the principles of nutrient-dense, fiber-rich carbohydrates; healthy fats; and lean sources of protein. When this was accomplished, we began counseling patients, explaining the three phases and handing out photocopies of the Foods to Enjoy and Foods to Avoid lists and the meal plans.

I was amazed by my patients’ success. After years of frustration with the low-fat diet, I was now witnessing wonderful results as their belly fat seemed to melt away and their cholesterol improved, triglycerides dropped, and prediabetes and early type 2 diabetes reversed. I was also surprised and gratified to learn that my patients were mailing and faxing their photocopied diet guidelines to friends and relatives around the country. (Of course, this was before e-mail!)

**The South Beach Diet Goes Prime Time**

Because of the diet’s success, we began sharing our results at national meetings. First we reported consecutive cases, and then we undertook a small clinical trial. We compared our good-fat, good-carb approach to what was then called the American Heart Association (AHA) Step II Diet, which was very low in fat and high in carbohydrates (it has since been supplanted).

Of a group of 60 overweight participants, half went on our diet and the other half went on the AHA Step II Diet. After 12 weeks, five of the low-fat dieters had dropped out, but only one of the South Beach dieters had quit the program. In the end, the South Beach dieters lost nearly twice as much weight as the low-fat dieters and actually had greater improvements in their blood fats. Notably, their blood triglycerides improved dramatically. Just as I had, they lost a lot of belly fat (which was significant when measured by their waist-to-hip ratios; see “Why Your BMI Can Be Misleading” on Chapter 6). The low-fat dieters did not have the same success.

In spring 1999, after we presented our results at a national meeting of the American College of Cardiology in New Orleans, a Miami TV station asked me if they could offer the South Beach Diet to their viewers. I said fine, and hundreds of South Floridians went on the diet and lost weight. The response was incredible, and the South Beach Diet series became an annual event for the station for 3 years running. I continued to prescribe the diet to my patients, and people urged us to write a book. Its publication in 2003 seems like yesterday.

**Scientific Support: The Diet Debates Are Over**

In the 5 years that have passed since the publication of the original book, we have received thousands of testimonials documenting people’s good results on the diet. You will find stories like Jen P.’s (above) throughout this book. There have also been numerous scientific studies reaffirming our healthy eating principles, including, notably, the importance of good fats and good carbohydrates. In fact, the latest USDA Food Pyramid, released in January 2005, reflects these same principles.
living THE SOUTH BEACH DIET

Jen P., age 43: Now I Love Life and All the People in It

I have found a new life with the South Beach Diet. In April 2006, I was 41 years old, 5-foot-6, and 156 pounds. I weighed 30 pounds more than I had before I got married in 1997. I was smoking two packs a day and drinking a whole pot of coffee before 10:00 a.m. for an energy boost. I never ate breakfast, and I never exercised. My meals consisted of fast food and anything processed that I could eat on the run. My total cholesterol was 287, and that was with medication. But I didn’t care.

Then two things happened that made me take stock of my life. First, my grandmother died. She had been living with my mother with the help of hospice care, but I helped take care of her the last week of her life. I had been very close to my grandmother, and this was very difficult for me. Then, just 3 weeks later, my father died suddenly of a stroke. His death was shocking so soon after the loss of my beloved grandmother.

Following the funerals, I felt a strong, overwhelming need to live and cherish every moment of every day, I decided I needed a complete overhaul of my lifestyle. My supervisor at work told me that she was on the South Beach Diet, and it was working really well for her, so I decided to give it a try. I bought the book and followed the Phase 1 guidelines to a T. I lost 8 pounds during those initial 2 weeks and had more energy than I’d had in years. I started walking outside. I could go only a mile or so at first, but I did it every day until I had the strength to walk 3 to 5 miles on some days. My speed increased, too.

I knew it was time to quit smoking. Being on the diet made it easy because I already had a fridge packed with raw vegetables to munch on. Also, I could always walk when I felt the urge to smoke. I did it—I quit smoking and never gained back an ounce. I continued to lose 1 to 2 pounds a week while on Phase 2 and tried another type of exercise. I bought a bike and rode it on a bike trail we have in town. I hadn’t been on a bike in more than 20 years, and now I can ride the whole trail (22 miles). I also bought a kayak and some dumbbells, exercise videos, and a treadmill so I could walk when the weather got cold.

Within 2 months, my cholesterol went from 287 to 155. My doctor couldn’t believe it. Six months later, with my doctor’s permission, I went off my cholesterol medication completely.

I also joined a gym for the first time and love all the exercise classes. I’m always telling people on the SouthBeachDiet.com message boards about my exercise routine. We also share recipes all the time. I actually learned how to cook from those wonderful people.

I met my goal of losing 30 pounds more than a year ago. It took about 7 months, and I have been working hard at maintaining it. Sometimes I’ll regain a few pounds, but then I just go back to eating like I did when I was on the first couple of weeks of Phase 2, and the weight comes right off. It’s very simple.

Another added benefit of the diet is that I’ve made new, healthy friends at work, at the gym, and in my neighborhood. I wasn’t a very pleasant person to be around before South Beach. Now I love life and all the people in it. I didn’t just find a new lifestyle with the South Beach Diet—I found life!

And there’s much more going on. Food manufacturers are now required by law to list the amount of trans fats on their food labels, and many have simply removed these terrible fats altogether. In New York City, restaurants are currently banned from using most frying oils containing artificial trans fats and will have to basically eliminate artificial trans fats from all their foods by July 2008. Many more cities are sure to follow. When we watch TV today, we see more and more advertisements for whole-grain foods. And the terms good carbs, good fats, and glycemic index are now common in both the media and our daily conversations. These are all clear signs that the diet debates—and diet confusion—are over.

Here’s just a small sampling of the scientific studies that support our diet philosophy.

**Low fat a failure.** In 2006, the Women’s Health Initiative Dietary Modification Trial reported the results of a 7½-year study involving nearly 49,000 women between ages 50 and 79. One group followed a low-fat diet, decreasing their fat intake to 20 percent of calories. They were informed that the diet was not intended to promote weight loss and were encouraged to maintain their usual energy intake by replacing fat calories with calories from other sources. The other group, the control group, received diet-related education materials and continued to eat a normal, higher-fat diet. Researchers found no benefit to the low-fat diet in terms of cardiovascular health, nor did it reduce the occurrence of breast or colorectal cancer.

**Mediterranean diet a winner.** In 2006, a Spanish study (the PREDIMED Study) divided 772 adults at high risk for cardiovascular disease into three groups. One group ate a low-fat diet, while the other two ate a
Mediterranean-style diet that, like the South Beach Diet, was rich in fruits, vegetables, whole grains, seafood, lean meats, and good fats. One of these two groups was allowed additional olive oil (1 liter—about a quart—per week), and the other was allowed additional nuts (30 grams—about 1 ounce—per day). The results: Both groups following the Mediterranean diet had better blood sugar, better blood pressure, and better ratios of good HDL to bad LDL cholesterol than those in the low-fat group. Those following the Mediterranean diet also had a reduction in C-reactive protein, a measure of inflammation, in their blood. (You can read about the health implications of inflammation in Chapter 6.)

Low-glycemic best against insulin resistance. Studies comparing the low-glycemic approach to other diets have confirmed our good results. In a 2007 study led by nutrition pioneer David S. Ludwig, MD, at Children’s Hospital Boston, 73 obese young adults were placed on either the standard low-fat diet or a low-glycemic diet. All the participants were tested before the study to determine whether they were high-insulin secretors, which would mean that they would be especially sensitive to high-glycemic foods. These same people would be likely candidates for prediabetes (metabolic syndrome). After 18 months on the diet, the high-insulin secretors lost more than 12 pounds on the low-glycemic diet. Those on the low-fat diet lost only 2.6 pounds. Those following the low-glycemic diet also lost more body fat and, remarkably, did not regain any weight. Both the high-insulin secretors and those with normal insulin response did better on the low-glycemic diet than on the low-fat diet in terms of two important numbers: Their HDL, or good cholesterol, went up, and their triglyceride levels went down.

Support from around the world. In a 2007 Australian study, researchers at Children’s Hospital at Westmead in Sydney, Australia, reviewed six randomized control trials from Australia, France, South Africa, Denmark, and the United States, comparing low-glycemic diets with other diets. They found the low-glycemic diets to be more effective in terms of overall weight loss and a decrease in body fat. Furthermore, those on the low-glycemic diets had a greater reduction in overall cholesterol and bad LDL cholesterol.

I could cite many other studies, but they all tell the same story. Healthcare professionals universally agree that our focus should be on nutrient-dense, fiber-rich carbohydrates; healthy sources of unsaturated fats; low-fat dairy; and lean sources of protein. The principles of the South Beach Diet are here to stay.

Over the past decade, the South Beach Diet has helped millions of people lose weight. For many, following the diet was the first step toward adopting a healthy way of life. Many of them also went on to engage in some form of regular physical exercise, often for the first time in their lives. (I wish they all had.)

There’s no question that being active is key to maintaining a healthy weight. And the good news is that even the busiest individuals can fit exercise into a South Beach Diet lifestyle. Just as I have learned more about the nutritional value of certain foods in the last 5 years, I have also learned what type of exercise is best for revving up your metabolism and speeding weight loss. And working exercise into your life is a lot easier than you might think. Just turn to Chapter 4.

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**living THE SOUTH BEACH DIET**

Louisa O., age 38: Lost 50 Pounds of Pregnancy Weight

I’ve been struggling with my weight problem since I was young. I’d tried all kinds of diets: the string bean diet, the cabbage diet, the soup diet. You name it, I’d tried it. They all worked for a while, but I always gained the weight back.

I gained 50 pounds during my pregnancy, and I couldn’t seem to take it off. After 3 years of breastfeeding, I was still 40 pounds overweight. I was wearing size 14 and couldn’t fit into anything smaller than an XL. I love fashionable clothes and looking good, and I wasn’t able to find anything I liked in my size. I looked years older than I was.

I was miserable about my weight. I had been invited to a wedding and told a friend of mine that I didn’t even want to go because I was so depressed about how I looked. She gave me a copy of The South Beach Diet for Mother’s Day. She had been on the diet herself and told me how great it was. I told her that diets didn’t work for me and that I didn’t want to bother with it. She encouraged me to read the book so I would understand why this diet was different and healthier than the ones I had been on before.

I read the book and I finally learned what I had been doing wrong. I was eating too many starchy carbs—white rice, white pasta, white potatoes, and white bread—and very little protein. I decided to try the diet and
see if I could lose the weight before the wedding. I found the diet easy to follow. I started eating lots of vegetables and lean protein, like white meat chicken and lean pork, as well as whole grains, including brown rice, whole-wheat bread, and whole-wheat pasta. I found I wasn’t always starving like I was on other diets. That was the best part for me.

It was pretty easy to lose the 40 pounds. I was not only eating tasty food, but it was healthy. I now weigh 140 pounds and I’m wearing a size 8 dress! And I haven’t regained the weight.

Today I follow Phase 3. On the South Beach Diet, you acquire new habits and you learn which foods are healthier for you. I’ve learned to make better choices. I even enjoy some dessert now and then because I can. But I still eat lots of vegetables and lean protein.

I love myself again. Everyone comments about how great I look and how much weight I’ve lost. I am happy, I have energy for my daughter, and I have regained my self-confidence.
Supercharge Your Metabolism

My patient Susan, who was prediabetic, had lost more than 20 pounds on the South Beach Diet. Although she looked and felt a lot better, she wasn’t happy. She still wanted to lose another 5 to 10 pounds but was having difficulty doing so. No matter what she did, she couldn’t seem to lose more weight. She asked me, “Couldn’t I just go back to Phase 1? I had no trouble losing weight back then!”

I strongly advised against it. Phase 1 is designed for people with cravings and substantial weight to lose, not for someone like Susan, who had only a few pounds left to shed. More important, Susan’s cravings were gone, and her blood chemistries were normal. In cases like hers, cutting back on calories and once again limiting nutritious food choices like fruits and whole grains could be counterproductive and potentially lead to yo-yoing (see Chapter 4).

If Susan wanted further safe weight loss while continuing to follow the healthy eating principles of the South Beach Diet, she had only one option: She had to burn more calories. And the most efficient way to accomplish this was by engaging in the most efficient form of regular exercise. That meant more or better exercise, and that was exactly what Susan didn’t want to hear. She was already getting up at 6:00 a.m. to spend, as she put it, “one long, tedious hour” walking on her treadmill before getting her kids off to school and going to work.

“Don’t tell me I have to spend more time on the treadmill,” Susan complained. “I just can’t get up any earlier!”

Susan was pleasantly surprised when I explained that she didn’t have to spend more time exercising to burn more calories. She could actually jump-start her metabolism and burn more calories in less time by making some changes in her exercise routine.

I told Susan that doing more of the same wasn’t going to work. Her body had become accustomed to operating at her new weight and her current activity level, as often happens after a period of successful dieting. In fact, the most common complaint of dieters is what they call hitting a plateau. I’m sure many of you have experienced it.

Depending on our intrinsic metabolism, we all have different set points where our weight will plateau, even though we may be doing exactly the same thing we’ve been doing all along to lose weight. There are, of course, those lucky people who are born with a naturally high metabolic rate and who never have to diet or worry about hitting plateaus—they’re the people we all love to hate because they seem to be able to eat anything and not gain weight. It simply doesn’t seem fair!

Susan, like most of us, wasn’t so lucky. Her problem was that her metabolism was stuck in neutral. Her body had adjusted to her need for fewer calories, so she was neither gaining nor losing.

Her only healthy and sustainable solution was to change her exercise routine and shift her metabolism into a higher gear. In other words, since Susan did not inherit a fast metabolism, she would have to rev it up herself.

Do More with Less

I advised Susan to switch to an interval training program. In interval training, you alternate between short bursts of intensive effort and easier recovery periods, as opposed to working at a steady, continuous, and potentially monotonous pace. While this book focuses on walking, just about any form of exercise can be done in an interval training mode, including swimming, running, biking, elliptical training, and even strength training.

Here’s the advantage: When you work at a higher intensity for part of the time, you end up burning far more calories and fat in less time than you would if you were working out at a steady pace. And there’s a bonus: With interval training, the higher the intensity of the exercise, the longer the afterburn; that is, you will continue to burn more fat and calories after you’ve completed your exercise session. As you become more fit and develop more lean muscle mass, you increase your basal metabolic rate even further. This means you’ll burn more fat and calories while you’re going through your daily activities, and even while you’re resting.

Don’t let the term higher intensity scare you. It’s true that you may be working harder than you’re used to for short periods of time, but you will have plenty of time to recharge during the easier recovery periods. Interval training is not just for the very fit. It works just as well for people who are not as fit and is even being used to help cardiac patients and people with lung disease get back in shape. That said, I do recommend that you talk with your doctor before embarking on this or any exercise program, especially if you haven’t been exercising.

Susan was also missing another important component of fitness—a core-strengthening program to develop the muscles in her back and abdomen and increase her overall strength and flexibility. Susan’s treadmill workout
focused on her cardiovascular system, but she needed to do something more to further improve her muscle tone and bone density.

Due to a natural decrease in hormones and to reduced physical activity, both men and women tend to lose muscle and bone as they age. For women, this drop in hormones occurs fairly abruptly during menopause and typically causes a drop in metabolic rate. Consequently, postmenopausal women invariably find it much tougher to maintain their weight.

For men, the drop in hormones—what is called andropause—is more gradual, but it too results in a slower metabolism and weight gain with age.

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**living THE SOUTH BEACH DIET**

**Barbara P., age 58: Making Giant Leaps One Small Step at a Time**

I had always been a yo-yo dieter, but I had reached a point where I finally had my weight under control. I was slim, I looked good, and I felt good about myself. Then about 4 years ago, I broke up with my boyfriend, and I lost it. I began eating everything fattening I could get my hands on. I’m over 5-foot-8, so it took a while for the weight to become noticeable. But 50 pounds later, when I weighed 195, I looked terrible. I had a beautiful wardrobe but didn’t fit into any of my favorite clothes. I was six sizes larger than I had been, and the worst part was that I had to buy clothes I didn’t like at stores I didn’t enjoy shopping in. The funny thing is, I never stepped on a scale. I didn’t want to know what I weighed. I pretended it wasn’t happening.

Friends don’t tell you you’re getting fat; they don’t know what to say. But a close friend of mine who had lost weight gave me a copy of *The South Beach Diet*. I didn’t open it. I was seeing a therapist, and he kept after me about my weight. He became my conscience. We talked about control issues. I now realize that I had just given up—for me, weighing 195 pounds was basically throwing in the towel.

You can’t imagine how devastating it is not to feel good about how you look. How you feel about yourself, your sense of attractiveness—or lack of attractiveness—spills over into all aspects of your life.

It took a while for me to deal with my weight. I took it one step at a time, and sometimes they were pretty small steps. About 3 years ago, I was visiting some friends in Naples, Florida, and it was bathing-suit time. I think that’s where it finally dawned on me how my life was really being controlled by my weight. I saw and felt what I had done to myself and where it was all going. There wasn’t a remote possibility that I was going to put on a bathing suit. I thought, *Here I am, I’m not that old, I’m a pretty attractive woman, and I can’t wear a bathing suit.* And I’m not talking about a bikini; I mean a plain old one-piece. I realized that I was really messing myself up big time. I took that first step—literally. I went to the hotel gym and walked on the treadmill for a short time. I felt pretty good afterward, and when I got back to New York, I joined a health club, hired a trainer, and began working out regularly. I had a coupon for the health club hanging on my refrigerator for about a year but never did anything about it. I took it off the refrigerator and used it.

I finally reached the point where I was ready to read *The South Beach Diet*, which had been lying around my house for about a year. Once I started it, I couldn’t put it down. With every page, I gained new insight about food and eating. Like, what’s a good carbohydrate? I learned what foods I could eat and what I should avoid. I used to think that I shouldn’t eat bread, but I learned that you can eat bread as long as it’s 100% whole wheat, whole grain, or another high-fiber type, which digests more slowly than white bread. The glycemic index was a new concept for me. I learned how nutrition affects how the body works. I learned about my metabolism, like how to speed it up. I used to think that if you don’t eat, you lose weight. I was completely wrong. I learned that if you don’t eat, your body thinks it’s being starved, and your metabolism slows down. I didn’t know any of this before.

I started making changes in how I ate, a little at a time. I learned not to let myself get hungry, because when you get too hungry, you tend to want to eat more. I learned that you have to keep your blood sugar levels even to prevent cravings. To this day, I always walk around with healthy snacks. I carry small bags of nuts such as almonds or walnuts and little cherry tomatoes or low-fat cheese wedges because I don’t want to get hungry.

I didn’t actually go on the diet right away; I just incorporated a few things. I wasn’t ready to give up sugar yet, so when I went to Starbucks and ordered my usual cappuccino, I asked for fat-free milk instead of whole. That was my big concession when I weighed 195! I realized that that was okay; I didn’t feel deprived. I was ready for the next step. I remember thinking, *I don’t need to eat a sandwich for lunch. Maybe I can have just the meat and a salad,* Or instead of eating white bread, I ordered whole-grain bread. When I started taking off a
little weight just by doing these simple things, I was motivated to keep going. I saw that this was very doable, and it wasn’t making me unhappy. That’s when I decided to go on Phase 1 and really do the diet as written.

It took 2 years, but I took off all the weight I’d gained. I fit into my old clothes again. I wear tight, sexy jeans and can still wear sleeveless tops. I feel like my old self. I’ve just made another big step—I posted my profile on Match.com. I feel good about myself, and I’m ready to start a new relationship.

I walked into a friend’s office recently, and she said, “You look better than you’ve looked in your entire life.”

She’s a straight-shooting woman. It was a very exciting moment.

In both men and women, decreased hormone levels and decreased physical activity also diminish the quantity of muscle (and bone). Since muscle requires more calories to maintain than fat, less muscle means fewer calories burned, which further slows metabolism. By maintaining your muscle mass with exercise, you can help overcome the natural decrease in metabolic rate.

That’s why, as you age, it’s so important to keep your metabolism revved up. If you want those muscles to be metabolically active—if you want to burn more fat and calories—you must use them. I therefore recommended that Susan follow the South Beach Supercharged Fitness Program, described in Part II. Before she could protest that she was already pressed for time, I showed her how she could do an even more effective cardio and calorie-burning program in half the time she was already spending on the treadmill (and achieve core fitness and greater overall muscle tone on alternate days).

### The Pounds Melted Away

Here’s how we transformed Susan’s 1-hour treadmill program into a fat-busting, calorie-devouring interval training program. I instructed Susan to cut her treadmill time back to about 20 minutes every other day. Instead of walking at a constant pace for her entire workout, as she had been doing, she should mix it up. That is, after a warmup, she should alternate short bursts of walking very fast with recovery periods of slower walking. (See “PHASE 1: Supercharged Fitness Program” Section to get started on Phase 1 Interval Walking.)

Depending on the workout goal for the day, Susan could do several fast-slow intervals within 20 minutes. As her endurance improved, she would be able to spend more time doing fast spurts and less time in the slower recovery periods, gradually adding more repetitions if time permitted. In addition, she wouldn’t be bored: When you do interval training, your workouts vary so they’re more interesting, and the time seems to fly by.

Another benefit of the program was that on alternate days, Susan would strengthen her core muscles, which she had been neglecting by doing only cardio.

Susan was skeptical but agreed to give it a try.

When I saw Susan about a month later, I didn’t have to ask how she was doing. I could see the good results with my own eyes. Those last 10 unwanted pounds were fading away. And, thanks to the core component of the program, Susan was standing straighter and looking stronger and better toned.

### The Conventional Wisdom Is Wrong

At this point, many of you may be thinking, *This contradicts nearly everything I’ve been told about exercise.* And you’re right, it does. In the past, we believed that the best way to burn fat was to work at your training heart rate, which is about 60 percent of your maximum heart rate. Once you knew your training heart rate, you were told to take your pulse or wear a heart-rate monitor during exercise to make sure you maintained that level. You were also told that you needed to work for at least 20 minutes before you started burning fat. We now know that this simply is not true.

Interval training is not new. Endurance athletes like marathoners and professional cyclists have used this technique for years to help them perform at higher levels. But now there is growing evidence that interval training can also be a huge boon to nonathletes who are trying to lose weight and improve their fitness. An abundance of good science supports interval training as a great way to burn fat and calories, and research also shows that it provides better results than working at a constant moderate pace for longer periods of time.

In a 2007 study conducted at the University of Guelph in Ontario, researchers had women in their early twenties do an interval training program consisting of 10 sets of 4 minutes of hard cycling with 2 minutes of rest between each set. After seven 1-hour sessions over 2 weeks, all eight women in the study showed a 36 percent
increase in fat burning. This finding held true for women who were fit, as well as for those who were less fit. So much for the myth that you can’t burn fat working at a high intensity! The women also showed a 13 percent improvement in cardiovascular fitness, which means their hearts and lungs were better able to send oxygen to working muscles, which is important whether you are working out or simply going about your daily activities.

Burn calories is critical to shedding pounds and maintaining a healthy weight. And on the calorie-burning front, interval training is the clear winner. A landmark study conducted by Darlene Sedlock, PhD, and her colleagues at Purdue University found that it took only 19 minutes for a high-intensity exercise group to burn the same 300 calories that it took a low-intensity group 30 minutes to burn. Even more interesting, the high-intensity group continued to burn more calories long after the exercise period ended, compared with the low-intensity group.

In another study, conducted jointly by Baylor University and the University of Alabama, researchers compared continuous low-intensity exercise performed for 60 minutes to a high-intensity interval training program alternating between 2-minute periods of work and recovery, also for 60 minutes. The participants were eight women between ages 23 and 35. Researchers found that the interval training protocol burned 160 more calories per day than the low-intensity training method, or about 800 calories more per week when the exercises were performed five times a week.

The point is that if you want to burn more calories, you need to work out with greater intensity. But don’t worry, we’re not telling you this so you feel compelled to get on the treadmill for an hour a day. In fact, we’ve already seen some excellent results with women we’ve put on our 20-minute-a-day Interval Walking program. Not only have they lost excess pounds, but they’ve lost them in trouble spots like the waist and hips.

Studies also reveal that interval training is more effective for normalizing blood sugar and correcting bad blood fats (such as LDL, or low-density lipoprotein, cholesterol, and high triglycerides) than conventional exercise, making it ideal for cardiovascular health. This means that interval training is a wonderful choice for people at risk of developing prediabetes and diabetes. And it’s particularly effective for burning away belly fat, the dangerous visceral fat that is the bane of many men and women in midlife.

**HOW YO-YO DIETING WORKS AGAINST YOUR METABOLISM**

The human body is designed to combat adversity. While this was good for our prehistoric hunter-gatherer ancestors, it’s not necessarily good for us when it comes to dieting. Hunter-gatherers faced frequent periods when food was scarce. What saved them from starvation was that during times of famine, their metabolisms switched into low gear, permitting their bodies to run on fewer calories.

Unfortunately, this innate survival mechanism doesn’t help modern dieters, especially those who are impatient and want to take off a lot of weight very quickly. When people go on severely restricted, low-calorie crash diets, they do lose a lot of weight at first. But then the survival mechanism kicks in. Their metabolisms slow down and weight loss stops or becomes much harder, which is exactly what they don’t want to happen.

Furthermore, when caloric intake is drastically restricted, it’s not just fat that’s burned to maintain blood sugar levels and provide energy; it’s also protein from muscle and bone. Muscle requires more calories to maintain than fat does. When we have less muscle, we burn fewer calories, even at rest.

And this is just the beginning of a sad cycle for many people. It’s impossible to stay on a low-calorie, high-deprivation diet for a long time. We just get too hungry. To feel better, we eventually break down and start eating normally. When this happens, we start packing on the pounds, gaining more weight than we carried before because our metabolisms have slowed. When we get fat again, we freak out, go back on the low-calorie diet, and—you guessed it—inaudibly slow our metabolisms even more. The cycle repeats itself over and over again. And we get fatter and fatter.

We call this cycle yo-yo dieting. You lose weight quickly, gain it back again, and then have to lose it all over again, only to regain again—in spades. Each time you yo-yo, you decrease your metabolic rate and ultimately wind up working against yourself.

The bottom line: Deprivation diets don’t work. Gradual weight loss does. By making the healthy food choices on the three phases of the South Beach Diet, you never starve yourself; you keep your metabolism working efficiently; and you lose weight slowly, steadily, safely, and permanently.

There’s yet another reason interval training is preferable to conventional training: It prepares you better for
living in the real world. Consider this. Do you take your training heart rate when you leave the house in the morning and stay at that level for the whole day? Of course not. You’re constantly speeding up and slowing down as you go about your activities, whether you’re getting up from a desk, running for a bus, or chasing after a toddler. Our lives are actually built around interval activities. Therefore, an ideal fitness program should prepare you for the kinds of physical demands you encounter every day. And interval training does just that.

How Interval Training Works

How does interval training work? It switches your metabolism into high gear and increases your demand for energy (calories) so that you burn more calories and fat. Think of your body as a car. When you drive in stop-and-go traffic, you burn a lot more gas than when cruising along at a constant speed. With gas prices so high these days (let alone our desire to use less fossil fuel), that’s the last thing you want to do when you’re driving. But it’s exactly what you do want to do to burn maximum calories and fat during exercise. And that’s how interval training works. Every time you work hard and then slow down, you waste energy and use up calories. And what it’s costing you are those extra, unwanted pounds.

Debunking Those Exercise Myths

Many of you have heard metabolism mentioned in connection with weight loss, but unfortunately, few people actually understand what metabolism is all about. If you want to look great in your bathing suit, fit back into your “thin” clothes, prevent diabetes, and maintain a healthy weight for life, you need to know how to make your metabolism work for you, not against you. So bear with me while I give you a brief lesson on metabolism.

In a manner similar to how your car runs on gasoline, your cells run on a substance called adenosine triphosphate, or ATP, which is made in all the cells of the body. You need energy from ATP to run your body’s systems as well as to perform your day-to-day work. ATP is, in a sense, your only energy source, and it’s replenished by the food you take in daily, as well as the fuel stored in your body as fat or glycogen (the storage form of sugar). ATP is what’s converted into the energy you need to contract your muscles and perform all of your bodily functions. Using ATP for energy is analogous to burning coal in a furnace to run a steam engine. The burning coal heats the water that makes the steam that propels the engine.

At the peak of endurance training, athletes like Lance Armstrong require roughly 6,000 to 9,000 calories a day to keep their muscles working for extended periods of time. It seems like these elite endurance athletes must spend most of their nonexercise, nonsleeping time eating just to keep up with their training muscles’ demand for energy. For most of us, however, all the fuel we need for a regular exercise and weight loss program is easily consumed in the healthy meals and snacks we should be eating every day.

Another key point to understand about metabolism is that there are two types, and each one burns different fuels. Aerobic metabolism requires oxygen to make ATP and can use both sugar and fat as fuel. Anaerobic metabolism doesn’t use oxygen to make ATP and burns sugar and a compound known as creatine phosphate, which is made in the cells, for fuel.

If the words aerobic and anaerobic are familiar to you, it’s because we also use them to categorize different types of exercise. Aerobic activities (sometimes called cardio), which can be done for a long duration, include walking, cycling, rowing, and working out on a treadmill or an elliptical trainer. Since these are done at a relatively low intensity level, you can usually maintain your performance using the aerobic systems of the body. Therefore, by breathing more deeply and more frequently and having your heart beat faster, you can deliver sufficient blood and oxygen to supply your muscles’ needs without accumulating excessive waste products that can fatigue your muscles. Anaerobic activities, such as weight training, jumping rope, and sprinting, work muscles at a high intensity and consequently require energy faster than the aerobic systems can supply it, even though they’re working as hard as they can. The result is that your working muscles rapidly build up waste and tire out. Therefore, anaerobic exercise cannot be sustained for long, and you’re forced to reduce activity to a level where aerobic metabolism once more dominates.

There are several misconceptions about exercise in general and anaerobic exercise in particular. One of the biggest myths is that you can burn fat only by doing aerobic exercise. This idea is based on a misinterpretation of the fact that fat is an aerobic fuel, and it has led to a second, more insidious myth: When you work at a high-intensity anaerobic level, such as during interval training, you shut down your fat-burning machinery. This is simply not true; it’s based on a misconception about how your metabolism operates. We were once taught that the body can be in only one mode of metabolism at a time—either aerobic (burning sugar and fat) or anaerobic (burning sugar and
creatine phosphate).

In reality, as you exercise, your body slides freely between aerobic and anaerobic metabolism. Depending on the activity, your body may favor one type over the other, but it’s never exclusively in aerobic or anaerobic mode. You’re never actually burning just sugar, fat, or creatine phosphate. You’re burning all three fuels simultaneously. But, depending on your activity, you’re burning more of one than another.

When you do interval training, you’re repeatedly moving from high-intensity work to low-intensity work, and you’re also moving along the metabolic spectrum. You can’t maintain a high-intensity level for too long because you’ll get tired. Tiredness occurs for several reasons: First, you rapidly burn through your high-energy fuel, creatine phosphate, while you’re still burning sugar and fat. Second, your muscles make lactic acid and a number of waste products, which contribute to fatigue. So, to cope with this fatigue, you slow down and move into your low-intensity recovery period. During this recovery period, you’re not only burning off lactic acid as fuel, you’re also using fat and carbohydrates aerobically to replenish creatine phosphate and ATP. This allows you to do the next high-intensity spurt and continue to burn more fat and calories.

FRINGE BENEFITS

Okay, you know that exercise can boost your metabolism and help you burn more fat and calories. But here are some other wonderful benefits you can get from working out.

Enhanced sex. If you want to get in the mood, get out your running shoes. Numerous studies have linked regular vigorous exercise with more frequent sexual encounters and enhanced sexual enjoyment for both sexes. A 2003 study of male health professionals found that men over age 50 who were physically active reduced their risk of erectile dysfunction by 30 percent. A study conducted at the University of British Columbia found that 20 minutes of intense exercise appeared to stimulate sexual response in women. About 15 minutes after the workout seemed to be the optimal time. Maybe couples should consider doing their workouts together!

Increased energy. Think you’re too tired to exercise? The problem could be that you need to get off the couch. Researchers at the University of Georgia analyzed 70 different studies on the impact of exercise on more than 6,800 subjects. The bottom line: Ninety percent of the studies reported that when sedentary people completed a regular exercise program, they experienced more energy and less fatigue, compared with people who did not exercise.

Better brainpower. Around age 40, the human brain begins to shrink, causing age-related changes in mental function, such as memory problems. Until recently, we believed that an aging brain couldn’t make new brain cells. We now know that it’s possible to make new brain cells well into old age, but there’s one catch: You have to work at it. Specifically, you have to do your cardio. A study of 60-to 79-year-olds conducted at the University of Illinois at Urbana-Champaign found that when people did 1 hour of aerobic exercise three times a week, their brains actually grew. More brain cells translate into better mental function—yet another reason it’s smart to exercise.

Longer life span. Exercise can add years to your life, according to a 2005 study published in the Archives of Internal Medicine. Researchers examined the medical records of more than 5,200 men and women who participated in the Framingham Heart Study, a groundbreaking study that has gathered information on diet, lifestyle, and health over a 40-year period and is still ongoing. People with even moderate levels of physical activity gained up to 1.5 years of life, and those who did more intense exercise lived, on average, 3.5 extra years. My belief is that not only did the more active people live longer, but they probably enjoyed a much better quality of life.

The really exciting news is that with every additional interval, you burn an even higher proportion of fat. This is because with every subsequent interval, you require more and more oxygen for both the work and recovery portions. This means that you slide further and further toward the aerobic systems and use both fat and carbohydrates to rebuild the creatine phosphate and ATP needed for the next interval. However, you can still maintain higher levels of activity than would be possible during aerobic training at a constant pace, because the recovery periods allow replenishment of ATP and creatine phosphate and removal of waste products. The bottom line is that more energy is used, with more and more of it coming from the aerobic use of fat. And one last happy thought: The more you train, the more fat you burn during recovery.
As good as it is, intense interval training isn’t for everyone. It must be customized for people with certain orthopedic problems or serious heart conditions. Again, my advice is to check with your physician before starting this or any other exercise program.

And please, before you do any exercise, read the next chapter, “Boomeritis: The New Epidemic!” to make sure that you’re exercising safely.
Boomeritis: The New Epidemic!

From my discovery of baseball at the age of 5, I have always loved sports and have played just about all of them. Unfortunately, as I got older and spent more time in the office and at the hospital, pickup basketball, soft-ball, and touch football gradually faded into oblivion, except for occasional games with my two sons. My major athletic endeavor became tennis, which I played competitively in my youth and spent summers teaching. I also jogged on a regular basis (and had for years) and did short spurts of ice hockey (yes, ice hockey in Miami), karate, and Rollerblading. About 10 years ago, I gravitated to golf. I had to give up some of the more taxing sports because as I got older, I tended to get nagging injuries—particularly shoulder, low-back, and knee pain. I was not alone. Not surprisingly, the preponderance of such injuries among baby boomers like me has come to be known as boomeritis.

About 3 years ago, I began doing core training with Kris Belding, the Pilates teacher who designed the core functional fitness part of our exercise program, and I was amazed at how much better I felt. My overall strength and flexibility greatly improved, I felt younger, and I stopped experiencing the boomeritis aches, pains, and injuries that previously seemed to occur on a regular basis. And I finally fulfilled one of my mother’s longtime admonitions: “Stand up straight!”

While I was at home in Miami Beach, I had no trouble following my usual exercise and diet routine. But like so many people who travel a lot for business, I wasn’t always as diligent on the road and occasionally gained a few pounds during my travels. (I didn’t always follow my own advice about being prepared with healthy snacks.) Also, I found it difficult to put enough time into a cardio workout that was necessary to complement my core training.

Fortunately, about this time, I was lucky enough to meet my collaborator on this book, Joe Signorile, PhD, who teaches exercise physiology at the University of Miami. Joe told me about the benefits of interval training and convinced me that I could burn more calories and achieve a higher level of fitness in a shorter period of time than I was currently spending on my workout. While I had heard about interval training for competitive endurance athletes, I was unaware of its potential benefits for the rest of us. I reviewed the scientific literature he suggested and was convinced that interval training for nonathletes was an important advance.

The beauty of interval training—which, as I explained in the last chapter, involves doing short bursts of high-intensity exercise followed by an easier recovery period—is that you can do it wherever you are and adapt it to any activity.

As fate would have it, about the same time I met Joe, my friend and patient Mel was raving about his experience with boxing. I knew that Mel had boxed as a teenager, and I was surprised to hear that at age 72, he was back in the ring, albeit with a trainer. Mel’s wife, a former professional dancer, and I had been trying to get him to do regular exercise for years, but he was quickly bored by conventional workouts. I was delighted when I heard that he had kept up with his boxing lessons for more than a year—and it showed. His energy level had increased immensely and his blood chemistries, blood pressure, and weight all reflected the benefits of his time in the ring.

Those of you who are unfamiliar with boxing may not know that it’s one of the most demanding of all sports. In fact, boxing is possibly the ultimate in interval training, with 2- to 3-minute rounds of intense exercise followed by a rest period.

I had always heard that boxers are among the fittest of all athletes and was curious to give boxing a try as a way to work intervals into my own cardio program. I was referred to a fabulous boxing trainer, Luis, and began working with him. But before I go further, let me put in an important disclaimer. What I did with Luis was baby boomer boxing: Luis held up hand pads and directed me on when and how to punch them. He was not allowed to punch me back!

What I learned was a progressive choreography, where my skills and fitness improved at a fast pace. Within a few months, I was “floating like a butterfly” around the ring. I was also clearly burning more calories in less time than during my previous long jogs or walks at a steady pace.

I was thrilled with my progress and improved fitness. But then I made a big mistake that led to injury, pain, and an unfortunate break from exercising. In fact, it’s what inspired me to write this chapter of warning for my fellow boomers.

At the end of our sessions in the ring, Luis and I would do some classic boxing exercises using a medicine ball. This was fine until I did a repetitive move of lifting, throwing, and catching the heavy ball over my head. Almost instantly, I felt a sharp pain in my left shoulder. But instead of stopping at that point, I disobeyed the advice I always
give to my own patients: I ignored the pain and continued with the over-the-head exercise. Over the next few days, the pain in my shoulder got worse.

When I went to the doctor, I didn’t even have to see him before my problem was identified. His wife, who was assisting him, was recording my medical history. When she heard about my medicine ball escapade, she immediately told me that she often heard her husband advising patients my age (and even those quite a bit younger) not to lift weights overhead—and especially not repetitively. It was now clear to me, even before it was confirmed by the doctor and an MRI, that I had joined the crowd of my peers who had sustained a rotator cuff injury.

The orthopedist explained that, with age, there is simply less room within the shoulder joint because of normal calcification that occurs as the result of general wear and tear, and this room is compromised even more when we lift weights overhead. The result is trauma within the joint that tears the rather delicate rotator cuff muscles. This injury at least temporarily ended my nascent but promising boxing career. It also put a major crimp in my golf swing and the quality of my Pilates training. Fortunately, I didn’t require surgery, and after about 6 months of regular visits to an outstanding physical therapist, I returned to pain-free exercising.

As I described my experience to many of my patients, it seemed that half of the men and a third of the women I saw had also experienced rotator cuff problems. Many had required surgery, and almost all had learned the “nothing heavy overhead” lesson. I was really sorry that I hadn’t had that important piece of information earlier, when it could have saved me from my own injury.

During the time that my exercising was severely limited, I noticed another ailment. My wrist was hurting. Was this arthritis? No. It was carpal tunnel syndrome, a problem many of us boomers and preboomers develop by spending long hours typing on computers. In an informal survey of my patients and friends, carpal tunnel syndrome, like rotator cuff injuries, seemed to be occurring in epidemic numbers. And a quick review of the medical literature confirmed how common carpal tunnel syndrome has become in our postindustrial society.

I’m not telling you these stories to discourage you from exercising. The alternative is far worse. Being sedentary increases your risk of developing many of the illnesses known to man and woman, including arthritis, cancer, heart disease, and Alzheimer’s. I’m telling you this so you don’t make the same mistake I made. If I had known not to lift heavy objects repetitively over my head, I’d still be boxing today. The problem wasn’t the sport; it was the way I trained for it.

It doesn’t matter what activity you’re doing. You could be playing tennis, lifting weights, jogging, or ballroom dancing. If you do foolish things like ignore pain (as I did), do too much before your body is ready, ignore previous injuries, or don’t train properly for your sport or activity, you will get into trouble.

An Injury-Prone Generation

As more and more baby boomers heed the advice of their doctors and engage in various modes of exercise to stay fit, there’s no question they are becoming increasingly vulnerable to injury. Boomeritis is going to get a lot worse before it gets better. According to a 2006 article published in the New York Times, sports injuries were the number two reason for visits to a doctor’s office in the United States; only the common cold accounted for more visits! And orthopedists are reporting a surge of injuries among middle-aged athletes, weekend warriors, and wannabes.

Why are we injuring ourselves in record numbers?

One reason is that many people who have not exercised for years, or who have never exercised before and who are poorly conditioned, have suddenly decided to make up for lost time. They join a gym and start running full-out on a treadmill or lifting too-heavy weights with a vengeance, or they go for long jogs outside on hard pavement.

On one hand, it’s wonderful that so many people are inspired to start or increase a fitness program. On the other hand, this enthusiasm needs to be tempered with appropriate caution: Whatever form of fitness you pursue, it’s a good idea to begin slowly so you don’t get injured. There’s a reason our fitness program, which you’ll learn about in Part II of this book, is a three-phase program. During Phase 1, which you do for 2 weeks (or longer, if need be), you gently ease into an exercise routine, making sure your body is ready before you move on to the next phase. Once you’re in Phase 2, you will become stronger and more flexible, ready for an even more challenging workout. And once you’ve mastered Phase 3, you will know how to work your body in a safe, healthy way, and you’ll be able to integrate the concepts of the program into your own fitness regimen, if you like.

living THE SOUTH BEACH DIET

Diane and Mark C., both age 58: A Diet We Can’t Stop Talking About!
My husband, Mark, and I have been following the South Beach Diet for more than a year, and we are so
excited about our weight loss. We never stop talking about the diet. Over the past year, I have lost 38 pounds,
dropping from 170 to 132. My husband lost 50 pounds, from 240 to 190. I started the diet first and within 2
weeks shed 8 pounds. Mark said he’d never go on a diet, but when he saw how well I was doing, he decided to
join me. He lost an incredible 22 pounds over the first few weeks, and believe me, we didn’t starve ourselves.

I am a big eater, so the puny servings that most diets call for don’t satisfy me. But on the South Beach
Diet, I ate until I was satisfied, and it sure worked for me.

Before going on South Beach, my husband was quite the junk-food junkie and a big beer drinker. Diets
were never for him. He hated them. Today he’s a totally reformed eater and thrilled with his results. He’s good
about following the principles of the South Beach Diet. Sometimes he’ll ask me, “Am I allowed to eat this?”
He now realizes that he can have his cake and eat it, too, but not all the time and not so much.

I had tried many diets but always ended up gaining more weight than when I started. This time, it’s
different. I actually went on an 11-day cruise and didn’t gain an ounce but ate very well. I had eggs for
breakfast and ate nuts and veggies when I was snacking or hungry. For dinner, instead of having the ship’s
decadent desserts, I’d ask for some fresh berries. The most amazing thing about the South Beach Diet is that it
isn’t complicated, and you can always eat well no matter where you are.

Mark and I are both 58, and we had always heard that it’s harder to lose weight as you get older. The
South Beach Diet made it easy.

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**Too Much, Too Late**

I’m a cardiologist who sees people every day who have heart disease or who are at risk for it. But sometimes I feel
more like an orthopedist. I always take an exercise history from my patients because it is such an important part of
their cardiac status. What I invariably hear is a litany of complaints characteristic of boomeritis: Low-back pain;
rotator cuff pain; hip, knee, wrist, ankle, and neck pain; tennis elbow; Achilles tendinitis; and shin splints are the
most common ailments cited. The good news is that almost all of these are preventable.

The problem is that many people—even the very fit—are not doing the right exercise for their bodies,
especially their midlife bodies. For example, I see far too many knee and hip injuries in my practice, often among
runners. In fact, I have rarely seen a baby boomer who runs regularly on hard surfaces who has not experienced
knee, hip, and/or low-back problems. Many of these people continue to run even though their joints are tender and
painful. I tell them that they can keep their running shoes, but it’s time to do more joint-friendly exercise, at least
part of the time.

I also see a fair number of people who simply overdo it when it comes to exercise. Instead of giving their
bodies a needed break, they keep pushing themselves harder and harder, farther and farther, to the point of injury.
You can get away with running for miles every day on a hard surface when you’re in your teens or twenties, but by
the time you hit 40, I don’t recommend it. The human body was never meant to sustain that kind of beating. (If you
do want to continue running, I urge you to do an interval training program and run fast for only short periods of
time, with adequate recovery periods. And, if possible, avoid hard surfaces.)

And it’s not just runners and middle-aged athletes who are exposing themselves to overuse injuries. Let me
share another of my personal boomeritis experiences. About 10 years ago, I attended the annual American College
of Cardiology meeting in New Orleans. I stayed at a hotel about a mile away from the convention center where the
meeting was held. I walked to and from the center and then walked for miles within the convention center. Great
e exercise! Two days into the meeting, as I hiked back to my hotel, I began to notice pain and tenderness in my shins,
which seemed to get worse with every step. Just as I thought I couldn’t walk any farther, I spotted a shoe-shine stand
and decided that I needed a shine and a rest. As I sat down, I complained to the shoe-shine man that my shins were
really aching. He observed the thin-soled loafers I was wearing and quickly made the diagnosis of shin splints. (I
was clearly not the first conventioneer who had sought refuge at his stand because of shin pain.)

Dr. Shoe Shine quickly prescribed a well-known brand of rubber-soled shoes. Though I had long ago learned to
wear thick-soled running shoes when I jogged, it had never occurred to me that I should be wearing them for
walking or that shin splints wasn’t a malady suffered only by runners. I bought the recommended shoes and have
walked long distances at many heart meetings since without a recurrence of shin pain. Still, too many others
continue to pound the pavement one way or another without proper precautions, and they’re paying the
consequences.

It’s not surprising, then, to learn that experts are predicting that the number of knee- and hip-replacement
surgeries will soar as baby boomers reach their later decades. A study published in 2007 estimates that there will be 3.48 million total-knee replacements performed in 2030, a 673 percent increase from the number performed today. The study also predicts that there will be 572,000 hip replacements performed in 2030, a 174 percent increase from today’s number.

This does not mean that you should not exercise. While it’s true that many of these spare parts will be going to aging athletes who have overworked their joints through the years, even more will be replacing the severely arthritic joints of people who may not have done enough exercise. A sedentary lifestyle can lead to being overweight or obese, and that too puts undue stress on the hips, spine, and knee joints. Even a small amount of weight loss can save your knees a lot of wear and tear. With every step you take, you impose a force of from three to six times your body weight across each knee. A 2005 study published in *Arthritis & Rheumatism* found that for every pound of body weight lost, there’s a 4-pound reduction in stress to the knee joint. Considering that you work your knee joints every time you stand or walk, the lighter the load, the better. The point is that overdoing it, as well as doing nothing, will lead you to the same operating room. This is why everyone needs to incorporate joint-friendly exercise and recovery periods into their fitness routines, and the earlier the better.

**Smart Fitness**

As it happens, many if not most of the boomeritis complaints I see in my office, including rotator cuff injuries and low-back pain, aren’t the result of sports injuries. Rather, they occur in people who are just going about daily chores, like bending over to strap a child into a car seat or picking up a bag of groceries. While some of these injuries are simply the result of weak core muscles and poor flexibility, I also see these problems occurring in the fittest of my patients—or at least the ones that look to be the fittest.

This gets me to another important point. Many people who think they’re doing smart workouts may be doing themselves more harm than good. Conventional weight lifting, sometimes called classic gym, can be counterproductive because it tends to isolate muscle groups and train them in a manner that is not naturally functional. In other words, the workout does not mimic everyday human activities, and it usually neglects the core muscles. The result is muscles that may look good in the mirror or on the beach but aren’t much help when it comes to injury prevention or performing active sports or day-to-day tasks.

The best exercises you can do to prevent boomeritis injuries are called functional exercises. These exercises, which are similar to movements you execute in your daily life, require you to use several muscle groups in one fluid movement. That’s why, in addition to cardio conditioning, our fitness program emphasizes functional fitness to strengthen your core and peripheral muscles. For example, when you lean over to pick up a child or lift heavy bags of groceries from your car, you’re not using just your arms and legs. If you did, you’d be overusing these muscles, leaving them vulnerable to injury. When you bend over to pick something up, you’re engaging all your muscles, including your legs, midline, back, and arms. The core muscles support all your other muscles and help you maintain strength, good posture, and balance.

You may be surprised to learn that as a cardiologist, I place as much importance on core-strengthening exercises as I do on cardio conditioning. The fact is, because this type of exercise promotes stability, strength, and flexibility, it’s essential for preventing injury and maintaining a healthy weight. And if you suffer an injury and you’re in pain, you’re not going to do an effective cardio workout—or any workout at all. In my practice, I see all too many patients who are no longer able to exercise due to injury.

The importance of functional fitness has only recently become appreciated. During my travels, I visit many gyms or fitness rooms associated with the hotels where I stay. I have noticed that more and more of the people who are exercising, with or without a trainer, have incorporated functional fitness into their workouts. I am pleased to find both women and men lifting hand weights while sitting on exercise balls, or using pulley-type machines, or standing on balance boards, which all require them to engage their core muscles as they work other parts of their bodies.

**Watch the Core Busters**

Of course, our ancestors didn’t have to worry about setting aside time to perform muscle-flexing and strengthening exercises to maintain fitness. They accomplished this while going about their everyday routines. Anthropologists tell us that cave dwellers had remarkably strong muscles and bones, thanks to their normal daily activities. Hunting and gathering was hard work. Stalking and killing prey and finding and picking fruits and vegetables provided a full-
Stop Sitting, Start Moving

We all need to be more aware of the core busters in our everyday lives. Exercising for a few hours a week is great, but we also need to think about what we’re doing the rest of the time. Are we just sitting around, or are we active and moving? Do we walk up the stairs or take the elevator? Do we hail a cab when we could walk? It turns out that the movements we do throughout the day—both consciously and subconsciously—burn calories. And these calories really do add up.

James A. Levine, MD, from the Mayo Clinic, has popularized a concept called NEAT, an acronym for “nonexercise activity thermogenesis.” NEAT reflects all the calories we burn when we are not sleeping, eating, or doing formal exercise. In a study published in 2005 in the journal *Science*, Dr. Levine and his colleagues compared NEAT in two groups of people who did not formally exercise. Half were thin and half were obese. He found that the thin subjects who frequently got up from their desks to walk around or stretch, paced while talking on the phone, or just fidgeted were on their feet during their normal daily routines for 2 more hours than the obese subjects. This translated into burning 350 extra calories per day, enough to explain the difference in weight between the two groups.

In another interesting perspective on the importance of NEAT, William L. Haskell, PhD, of the Stanford Prevention Research Center, estimated that spending 2 minutes per hour sending e-mails rather than walking down the hall to speak with a colleague resulted in a 10-pound weight gain over 10 years. Wow! Maybe switching my office to paperless by using electronic medical software wasn’t such a good idea after all.

The unfortunate fact is that over the last 100 years, the proliferation of labor-saving devices, from the automobile to electronic software, has decreased NEAT by between 500 and 1,000 calories weekly. And this drop has clearly played an important role in our epidemic of obesity. But the impact of NEAT on our society, while disturbing, also presents an important opportunity. We need to plan our workplaces and our daily routines better to make up for all the energy expenditure we have lost because of the activities we no longer do.

NEAT is wonderful news for people who believe that the only way to stay trim and fit is to run marathons. Walking when you could be riding, standing when you could be sitting, and moving when you could be keeping still are easy ways to stay slim and strong for life.

More important, maintaining a healthy weight and doing the right exercise is your best insurance against boomeritis. Following the South Beach Diet and the South Beach Supercharged Fitness Program can help you achieve both of these goals painlessly. And when your spouse or a friend tells you to sit still and stop fidgeting, just say, “No.”
Bye-Bye Belly Fat

If you’ve had trouble zipping up your favorite pair of jeans lately or had to loosen your belt a notch or two, then beware. Your expanding waistline could be upping your odds of having a heart attack or stroke. In fact, it could even kill you.

One of the most important benefits of the South Beach Diet is that as you lose excess pounds, you also lose inches, especially around your midsection. Women tell me with great pride that for the first time in years, they can wear dresses with waistlines, and some even boast that for the first time in their lives, they can wear bikinis! Men are equally thrilled that when they take off their shirts at the beach, they can show off tight abs instead of a bulging belly. While this is great news for those interested in the cosmetic effects of a diet, it’s even better news for those concerned with avoiding a heart attack and improving their general health.

Walk down a busy city street almost anywhere in the United States today, and you will readily observe that not all overweight people have the same body shape. Some look more like pears, and others look more like apples. If you’d been keeping a count of overweight individuals over the past few decades, you couldn’t help but notice the shocking increase in overweight, apple-shaped Americans. In these individuals, excess fat is concentrated in the belly, whereas in pear-shaped people, most fat is concentrated in the hips and thighs. Ever since French physician Jean Vague first distinguished the android (apple shape) form of obesity from the gynaecoid (pear shape) form in 1947 and observed a connection between apple-shaped obesity and the development of diabetes, hypertension, gout, and atherosclerosis, research has continued to demonstrate that the health implications of body shape are more important than we thought, even just a few years ago.

It turns out that belly fat is different from fat that accumulates directly under your skin. Belly fat is the fat within the abdominal cavity—it’s the fat attached to organs such as the stomach, liver, and intestines. These internal organs are called viscera, and that’s why the fat that attaches to them is known as visceral fat. Visceral fat is like an endocrine organ, producing hormones and other chemicals that have a spectrum of biological effects on the body. And as we shall see, it is these hormones and chemicals that are slowly killing us.

The Proliferation of Apples

Why is our country populated by so many more apple-shaped people, and why should we care? It turns out that the proliferation of apples in America and increasingly around the world is a human survival mechanism gone awry. Understanding this mechanism will help you appreciate what has caused the fattening of America, how it is hurting our health, and what can be done about it.

For early humans, the accumulation of fat during times of feast acted as a fuel reserve that could be called upon for survival during famines. If this fuel reserve was concentrated in the belly, leaving the arms and legs leaner, then a person could still run and hunt without limitation. Consequently, it would be a survival advantage to eat more than normal hunger dictated when food was plentiful and build up this fatty fuel reserve. To use a contemporary analogy, early man protected himself by filling up an accessory gas tank in his belly. When food was abundant in summer and fall, he might fill up the tank by consuming more than was required for his immediate needs. Then he could gradually empty the tank as needed during the winter months, when food was scarce.

This survival mechanism worked fine for millennia, but today most of us live in the midst of a constant feast, without intervals of famine. The hunger that once helped us to store fat in order to survive continues unabated. The result: We’ve become fatter and fatter and fatter, and many of us also have become prediabetic and diabetic.

You may be wondering why in the midst of this constant feast, we aren’t all overweight apples. The reason is fascinating. It turns out that the genes that encourage fat storage—what are called thrifty genes—aren’t distributed equally among societies around the world. Those societies that have experienced subsistence living punctuated by famine in recent times have a generous dose of thrifty genes. If they move from their traditional diet and lifestyle to a Western diet, however, they almost always become obese.

One such society that has been extensively studied is the Pima Indians in the southwestern United States. For centuries, these people barely survived in desert conditions. Their ability to store fat easily when food was available and use it in times of scarcity was a crucial survival mechanism. But in the later 20th century, when the Pimas moved from their traditional lifestyle to a Western one, they experienced a horrible epidemic of obesity that
continues to this day. This, in turn, has led to devastating rates of diabetes, early heart attacks, and strokes. Today Eastern Indians who move to the United States and adopt a fast-food diet have the same problems. But they no longer have to move to the United States to experience obesity and diabetes. In New Delhi (and even Beijing), where Western fast-food restaurants are beginning to proliferate, these health problems are becoming more common.

But what about our friends who seem to be able to wolf down large amounts of fries and soda and remain thin? Well, these individuals were born with fewer thrifty genes and are blessed with a genetically rapid metabolism—a great boon in modern times. (If it makes you feel any better, in prehistoric times, these genetically thin people may not have survived.) So, depending on our genetic heritage, we each have a different propensity for accumulating belly fat and becoming an apple or a pear.

The Yin and Yang of Belly Fat

Why is belly fat a problem beyond the cosmetic? Overall, the hormones and other substances produced by visceral fat are proinflammatory. At first glance, this would seem to be good, since inflammation is an important means of fighting disease. For example, if you cut yourself or are invaded by harmful bacteria, your inflammatory response is called upon to first stop the bleeding with the formation of a blood clot, then fight any invader by mobilizing white blood cells to neutralize the bacteria or wall off a foreign body. In appropriate amounts, visceral fat and the inflammatory substances it produces are essential for survival. In fact, when it’s not present in adequate quantity, such as in starving Third World children or those malnourished from cancer or another chronic disease, the inflammatory and immune response underperforms, increasing the risk of infection and death.

When Our Fat Stays Turned On

What happens if we persistently have excess visceral fat? What if our inflammatory response is turned on when we don’t need it? What if it’s on all the time? Because we have become a country of apples and our excess belly fat is continually pouring out inflammatory substances, we are now seeing its unfortunate effects. We’re discovering that there are additional inflammatory chemicals produced by this excess fat, and we’re learning more and more about how they affect the body.

One such substance that’s frequently mentioned in medical news is C-reactive protein (CRP). This protein particle, which can easily be measured in clinical practice with a blood test known as the high-sensitivity CRP (hs-CRP) test, is appropriately elevated when there is infection in the body, but it has also been found in dangerously high levels in people with belly fat, prediabetes, and diabetes. Overall, studies show that we Americans have 20 percent higher levels of CRP than our British cousins. And it is this and other research that indicates that we are indeed a hyperinflamed society.

Paul Ridker, MD, and his colleagues at the Center for Cardiovascular Disease Prevention at Harvard, who did the initial research on CRP, have taught us that elevated levels of CRP are a risk factor for heart disease and that chronic inflammation is intimately involved with atherosclerosis, the buildup of fatty plaque in our arteries that leads to the blockages that cause heart attack and stroke. But we are only now realizing that the scourge of inflammation goes well beyond affecting the heart and blood vessels. In recent years, we have learned that inflammation appears to be a common denominator behind numerous other diseases, including diabetes, Alzheimer’s, macular degeneration, asthma, arthritis, and many forms of cancer. Belly fat and inflammation also appear to play a role in such common conditions as acne and psoriasis.

Belly Fat = Inflammation

Why should inflammatory substances be associated with belly fat? It turns out that an inflammatory response requires energy. If early man was starving, he could not afford the energy expenditure needed for an inflammatory response. All his energy was required just to bring blood and nourishment to his organs. This trade-off meant he was vulnerable to death from injury or infection, and it is probably why our inflammatory response became associated with belly fat. The presence of belly fat in our forebears ensured the fuel reserve that was required for the protective inflammatory response. The fact is, humans were never intended to be carrying around the excess fat so many of us are lugging around today.
WHY YOUR BMI CAN BE MISLEADING

Body mass index (BMI) is a formula for measuring optimal weight. It uses your height to adjust for your weight as it compares you to other individuals and populations. For instance, two men may weigh 200 pounds, but if one is 5-foot-5 and the other is 6-foot-2, then weight alone is obviously a very poor predictor of which one is in fact overweight. BMI is the most common method of classifying normal versus overweight versus obese individuals. If your BMI is between 18.5 and 24.9, you’re considered to be in a healthy weight range for your height. If your BMI is between 25 and 29.9, you’re considered overweight. And, if the figure is 30 or greater, you’re considered obese. To determine your BMI, just use one of the quick BMI calculators available on the Web.

While BMI has been a more helpful measure of obesity than weight alone, when it comes to comparing obesity rates in two different cities or states, it can be a misleading indicator of health in individuals. That’s because BMI does not take into account the distribution of body fat. Remember, fat concentrated in the belly is much more dangerous than fat concentrated directly under the skin. For instance, you might have a professional athlete with a great deal of muscle mass who has an elevated BMI but little belly fat, or a severely overweight person with a high BMI who has fat predominantly concentrated under the skin. Both of these people may well be at low risk for prediabetes, diabetes, and heart disease. Conversely, you can have someone with a normal BMI who carries a dangerous amount of visceral fat in a potbelly. That person’s BMI might be normal because of thin arms and legs and little weighty muscle—but that person is nevertheless at increased risk for heart disease and many other diseases as well.

So if BMI can’t accurately predict if your fat is dangerous, what is a more accurate measure? The answer is your waistline. Two measures of waistline are commonly used: One is simply your waist circumference measured where it’s smallest, usually just above your belly button. (The waistline circumference cutoff for the diagnosis of prediabetes in a woman is 35 inches; in a man, 40 inches.) The second measure is the ratio of your waist circumference to your hip circumference—known as your waist-to-hip ratio. To find it, measure your hips at the widest part of your buttocks, then divide your waist circumference by your hip circumference. For example, if your waist is 34 inches and your hips are 32 inches, divide 34 by 32; your waist-to-hip ratio would be 1.06. If your ratio is greater than 0.95 for men or 0.8 for women, you fall into the apple-shaped category, and it’s time to do something about that potentially lethal belly.

So how does this early survival mechanism translate to how we live today? The presence of excess belly fat in such a high proportion of our population is unprecedented. Because we never before had so many inflammation-producing apples, we didn’t understand the extent of the health implications until recently. Just look at heart disease deaths, which had been decreasing over past decades due to improved treatments and better prevention. This favorable trend appears to be reversing itself in America’s younger age groups. A study published in the November 2007 Journal of the American College of Cardiology showed that in Americans between the ages of 34 and 55—the very ones who’ve had the greatest exposure to processed and fast food—deaths from heart disease are on the rise (so are incidences of prediabetes and type 2 diabetes, two other diseases directly associated with belly fat). Thus, it appears that our sedentary, fast-food lifestyle is trumping even our impressive gains in the treatment of the number one killer of men and women. If things continue as they are, when the current XL generation gets older, matters will be even worse.

The Diabetes—Belly Fat Connection

I cited this statistic before, but I want to mention it again: Today, 40 percent of Americans between the ages of 40 and 70 are prediabetic. The prevalence of prediabetes has tripled over the past several decades, and today most patients in coronary care units are prediabetic or diabetic.

The cause of these burgeoning problems goes back to our fat-storage survival mechanism, which, rather than being lifesaving, has become harmful in modern times. As it turns out, it’s the accumulation of visceral fat that leads to insulin resistance, the condition in which the body produces enough insulin but the cells can’t use it properly (the cells are in fact resistant to the action of insulin). As I noted earlier, insulin resistance causes the exaggerated swings in blood sugar that in turn cause hunger. Without periods of food scarcity, this hunger leads to further fat accumulation. And the more fat you store around your midsection, the bigger your belly-fat cells become. The
problem is that insulin does not communicate effectively with swollen fat cells after a meal. As a result, the pancreas has to keep producing extra insulin to overcome the insulin resistance of these larger cells and move sugar and fat from the bloodstream into the tissues. Eventually the pancreas becomes exhausted and cannot produce adequate insulin. When this happens, blood sugar remains elevated after meals, and type 2 diabetes is diagnosed.

Clearly, what helped man survive in the past is killing us today. Luckily, we now understand why, as a nation, we have gotten so fat and hyperinflamed. And luckily, we now know what to do about it.

Don’t worry—I’m not suggesting that we all starve ourselves or try to imitate those times of food scarcity or famine. But in some ways, we all do need to eat more like our ancestors. This means consuming more fruits, vegetables, whole grains, healthy fats, and lean protein. These are the basic tenets of the South Beach Diet, and following them will reverse our accumulation of belly fat and its detrimental health consequences.

The other thing we must do is move more, the way our ancestors did. This means regularly doing aerobic (cardio) conditioning and functional core exercises. In fact, studies show that exercise is one of the most effective ways to get rid of visceral fat. In a 2005 study conducted at Duke University, 175 overweight men and women with mild to moderately bad blood fats (cholesterol and triglycerides) were randomly assigned to participate for 8 months in one of three exercise groups. The participants were instructed not to change their eating habits. One group exercised at a moderate intensity (40 to 55 percent of aerobic capacity) for approximately 3 hours per week. A second group exercised at a high intensity (65 to 80 percent of aerobic capacity) for 2 hours a week. The third group exercised at the same high intensity but for 3 hours per week. Both the 2-hour high-intensity group and the 3-hour moderate-intensity group showed no further accumulation of visceral fat. But the best news was that the high-intensity group that worked for 3 hours per week actually showed a significant decrease in visceral fat. And the bad news for couch potatoes: A control group that didn’t exercise showed a significant increase in visceral fat, which means that if you do nothing to stop it, visceral fat just keeps on growing.

Another study, published in 2006 in the *International Journal of Obesity*, found that a combination of diet and exercise—not diet alone—reduced the size of abdominal fat cells. This is an extremely important finding because swollen fat cells are the ones that become insulin resistant. Shrinking abdominal fat cells can help restore a normal insulin response, which will help prevent prediabetes.

What about Pears?

But what if you’re a pear—a person who carries fat mainly in the hips and thighs? Will you respond as well as an apple to a proper diet and exercise? The answer, unfortunately, is no. It will, in fact, be harder for you to lose weight than it is for your apple friends because, like most pears, you have a slower metabolism due to your genetic makeup, not your diet. That makes metabolism-revving exercise even more important for you.

But there’s good news, too. As a pear, you are much healthier than your apple friends who may weigh the same as you. It turns out that overweight pears don’t have the thrifty genes that lead to fat storage in the belly.

A Word about Metabolic Rate

While most of the epidemic of obesity has been due to activation of the fat-storage survival mechanisms discussed above, this is not the cause of all obesity or overweight. Even before we began this unintentional experiment of eating the wrong foods and avoiding exercise, there was still a percentage of Americans who were overweight. Many claimed that they didn’t overeat, and it turns out that many of them were telling the truth. In contrast were the food-guzzling types who never gained a pound. The fact is, we all have different metabolic rates, and these rates do affect whether we gain weight readily or not. This point was made quite clearly in a famous Canadian study of twins.

In the study, 12 sets of identical twins were overfed by 1,000 calories a day, 6 days a week, for 100 days. The amount of exercise was carefully monitored and exactly the same for all. In other words, all the participants had the same energy intake via food and the same energy output via exercise. By the end of the study, each set of twins had gained virtually the same amount of weight, but between different pairs, the weight gain varied from about 9 to 28 pounds. This study proved that a major contribution to weight gain is metabolic rate, which is largely genetically determined. It’s an important fact for dieters to understand, because your metabolic rate will affect how you respond not only to diet but also to exercise. But don’t be discouraged if your metabolism is slow. It doesn’t mean you should throw in the towel and stop trying to lose weight. You’ll just have to be a little more conscientious about maintaining our diet principles and work a little harder at your exercise routine.
The “You Can Never Be Too Thin” Syndrome

I can’t tell you how often the discussion of metabolic rate comes up in my cardiology practice. Let me share a typical patient story. A 52-year-old woman I’ll call Karen comes to see me with a family history of diabetes and heart disease and the additional complaint of postmenopausal weight gain. Her blood chemistries show evidence of prediabetes, and she experiences frequent cravings. I put her on the South Beach Diet and recommend regular exercise.

living THE SOUTH BEACH DIET

Alan J., age 52: Finding His Own Fountain of Youth

In May 2006, my cardiologist told me the results of my latest blood work, and they weren’t good. My lack of exercise and love of beer, fried foods, and lots of ice cream had finally caught up with me—and I had a beer belly to show for it. I weighed 250 pounds, and my blood sugar was 140—that was much too high. I’m 6-foot-3, so I always thought I could eat whatever I wanted and get away with it. Even a trip to the emergency room for chest pains 3 years earlier wasn’t enough to make me take care of my health. I thought that all I had to do was take drugs for my blood pressure and cholesterol, and I would be fine. I was wrong.

My cardiologist told me that I was a “sugar cookie away” from entering the prediabetes stage. I immediately thought back to when I was in the ER. I had seen a man whose leg was so black that I thought he was a burn victim. The nurse told me that he would be losing his leg the next morning, thanks to diabetes! When my doctor told me I was a candidate for prediabetes, I was finally scared enough to take action.

My doctor had been trying to get me to read The South Beach Diet for more than a year, but I resisted because I thought it was just for women. But that day, I followed my doctor’s advice and finally got a copy. The book made a lot of sense, explaining why some foods do what they do to your body. The testimonials gave me hope that the diet would work for me. So, like any other red-blooded American male, I immediately decided to start the diet—in a week! That gave me 6 more days to go on a farewell binge, in which I’d eat all my favorite foods. In that week I managed to pile on another 5 pounds, and my waist grew another inch or so to a size 42!

I was really afraid of Phase 1 and saying good-bye to all my comfort foods and beer. What really helped was keeping the book close at hand to refer to when I needed it, along with the support of my wife in making all those Phase 1 recipes work for me. My quiche cups, vegetable juice, turkey wraps, cheese sticks, and all the others became my new best friends. In no time at all, I was learning all kinds of new things, like the fact that chicken doesn’t always come in a bucket and that fish is not a square brown block served on a white bun with tartar sauce and fries.

Now that I no longer came home from work and downed a few brews to unwind, I had a lot more time on my hands. I decided to go to the gym after work. Bad knee and all, I figured out that a simple walk on the treadmill would be a good way to kill 30 minutes. I was surprised to find out that walking felt so good, I wanted to do it every night.

After just a few weeks, I’d lost 25 pounds! By October, when I had my follow-up at the cardiologist’s office, it was obvious that the diet was working. My blood sugar was down to 89, which is very good, and my weight was 213, which was a big improvement. In December 2006, I hit my personal goal of 195 pounds with a size-36 waist. Even though I treat myself to a couple of indulgences every month, I am maintaining my weight. You know why? Because I realized very early on that I didn’t go on a diet. All I did was change the way I live my life. And it works.

Last week, I had an annual stress test, and after pushing that treadmill to six levels to complete the test, my doctor looked at me in amazement and said, “You have added 10 years to your life.” So, after 18 months and nearly 1,000 miles on the gym treadmill, I want to say thank you, South Beach Diet, for being my personal fountain of youth.

Karen loses 15 pounds over the next 6 months. Her cravings have disappeared, and she feels great. When I see her at her next visit, I remark that she looks wonderful, and I proudly tell her that her blood chemistries have completely normalized.
I’m expecting a response of pleasure based on the fact that Karen has achieved my goals—and what I thought were her goals. I’m also anticipating some gratitude for her wonderful blood chemistries. Instead, she says, “That’s nice, Dr. Agatston, but I am still too fat. I need to lose at least another 5 pounds and another half inch here—and here [she points to her hips and thighs].” Karen’s response is, unfortunately, the rule, not the exception. Too many women tell me the same thing. And it’s due to the fact that our culture has set an unrealistic and disturbing ideal of what women should aspire to look like—what I like to call the “You Can Never Be Too Thin” syndrome. I have deleted the “too rich” part of this famous line (thank goodness my patients don’t come to me with financial issues).

Because I have heard responses like Karen’s so often, my answer is well prepared. I tell her again that she looks fine to me (and to my staff), but that if she wants to lose more weight or another half inch, she can. However, she should not do it by trying to further limit her calorie intake. Once patients have resolved their cravings and normalized their blood chemistries, further caloric restriction can lead to yo-yo dieting (see Chapter 4) and regaining more weight than they carried before.

Karen’s genetically determined metabolism has dictated where her weight has stabilized. So how can she lose more weight and sustain it as part of a lifestyle? She must increase her metabolic rate. This means an exercise program that helps build and maintain muscle and bone mass while it burns calories. Adopting our fitness program is an ideal way to accomplish this.

The Bottom Line on Belly Fat

So, let me try to put the health implications of belly fat into perspective. I firmly believe that the recent epidemic of obesity in this country is primarily due to the types of foods we are eating and to our sedentary lifestyle. Our disproportionate increase in belly fat is due to the survival mechanism of insulin resistance. This has particularly dire implications for our health as a nation because belly fat is simply more dangerous than fat found directly under the skin.

Luckily, if you follow the South Beach Diet principles, your belly fat simply melts away. Moreover, by following a regular exercise program, you speed that weight loss and help maintain it as well. This is true even for those of you who are overweight due predominantly to a slow metabolism rather than insulin resistance. It’s also true for those of you who look fine but just want to lose a few extra pounds.

It has been very satisfying for me to see how far we’ve come in just 5 years in understanding what has caused us to become fatter and sicker. But even more gratifying is seeing how far we’ve come in learning how to prevent these problems by helping people become thinner and healthier for life.

living THE SOUTH BEACH DIET

Linda S., age 56: My Husband’s Health Is Vastly Improved

My husband, Bill, and I began the South Beach Diet in January 2007 after his doctor told him that he was on the brink of developing type 2 diabetes. My husband is 5-foot-10 and weighed 289 pounds, which made him very uncomfortable. His blood sugar was too high, and he had lots of belly fat, which we knew wasn’t good. But it wasn’t just the fear of diabetes that worried us. My husband has multiple medical conditions that were being aggravated by his weight—specifically, degenerative bone disease in his back and fibromyalgia, which causes severe muscle pain. He was taking a lot of medication to manage the pain. Both of us knew he had to do something different to improve his health.

At the time, I was about 25 pounds overweight at 174 and a real couch potato. I was pretty disgusted with myself, so I decided to go on the South Beach Diet with Bill. When we started learning about the diet, we realized that we were doing everything wrong. We ate a lot of prepared, processed foods. In fact, white, starchy foods were my favorites! And we didn’t eat enough vegetables and whole grains. I’m not much of a cook, and frankly, I never liked cooking, but I began to experiment with some South Beach Diet recipes. We started eating more lean protein and vegetables...lots of vegetables...and we were really surprised at how good healthy food actually tastes.

Then we took the next step. We joined a local gym and started working out 3 days a week—a really big change for us. With all his medical problems, Bill had to be very careful, but he did what he could. The weight started to come off both of us. I’ve lost 26 pounds and Bill has lost 56 pounds and is feeling much better. In fact, he feels so much better that he’s been able to cut his pain medication in half. And his blood sugar is now...
There's no question that my husband's health has vastly improved.

The funny thing about the South Beach Diet is that we found that healthy eating is more enjoyable than the way we used to eat. We don't feel deprived (at least most of the time!), and we know that we'll never go back to the way we used to be.
Supercharged Foods for Better Health

There has been a real revolution in the quality and depth of nutrition information, and it’s going to make you, your family, and your fellow Americans healthier. Until recently, we didn’t know which foods had the most nutrients because many of the nutrients in fruits, vegetables, whole grains, good fats, and other foods hadn’t been discovered yet. Even the role of fiber, which is now known to be crucial to our health, was virtually unknown until a few decades ago. And the knowledge that vitamin supplements cannot compensate for a nutrient-poor diet is an even more recent development.

Thanks to this explosion of knowledge, we know that there are thousands of micronutrients working together in whole, unprocessed foods that help to maintain and optimize our health. Large studies have established that people who eat more fruits and vegetables have less chronic disease, including heart disease. We also know that to obtain the greatest benefits from fruits, vegetables, whole grains, and other good carbohydrates, it’s best to eat a wide variety of each. So let’s explore some of the exciting new nutritional science that’s driving this revolution.

Good Carbs, Great Benefits

When you reach your 100th birthday, you’re going to thank me for urging you to eat lots of fruits, vegetables, and other good carbohydrates. South Beach Diet favorites, such as berries, cruciferous vegetables (broccoli, kale, cauliflower), wheat and oat bran, and even chocolate (my favorite) and red wine have all been making consistent headlines for their positive effects on our health.

Not only are fruits and vegetables chock-full of fiber, they’re also great sources of vitamins, such as C and E; minerals, such as iron, magnesium, and calcium; and phytonutrients, the good health-boosting chemicals found only in plants. Phytonutrients are concentrated in the pigments (often in the skin) that give fruits and vegetables their color. To get the full palette, you need to eat a variety of brightly colored fruits and vegetables every day.

I’ve often said that Americans are overfed and undernourished—in fact, this phrase is the title of the next chapter, which warns about the ramifications of the poor diet being fed to our children today. Our meager consumption of fruits and vegetables is just one example of how we are starving ourselves of life-giving nutrients.

The USDA recommends that we eat two or more servings of fruits and three or more of vegetables each day, but according to a 2007 study published in the American Journal of Preventive Medicine, only 11 percent of Americans do so. Ironically, our hunter-gatherer ancestors, who had to forage widely for their food, ate a much greater variety of fruits and vegetables than we modern men and women do, even though we only have to go as far as the nearest supermarket. What’s even more shocking is that, despite all the miracles of modern medicine, there’s some convincing evidence that the hunter-gatherers were, in many respects, healthier than we are. That’s because, as the research shows, they did not suffer from the chronic and degenerative diseases that plague us today. Most likely this is because of the variety of whole foods they consumed. It’s been shown that later societies, which depended on just one major source of nutrition, such as wheat or rice, were shorter in stature than early man, had weaker bones, and often had evidence of nutritional deficiencies.

Plant Power

There are thousands of phytonutrients commonly found in foods, and we have barely scratched the surface in understanding what they do. Studies show that many phytonutrients act as antioxidants, which protect us against cell-damaging free radicals, chemicals that are produced when we use oxygen to make energy. In excess, free radicals are proinflammatory and attack healthy cells and tissues, which can ultimately lead to heart disease, cancer, premature aging, Alzheimer’s disease, arthritis, and numerous other ailments. Antioxidants help maintain the right level of free radicals in your body.

You can compare antioxidants, which are found mainly in the skin of fruits and vegetables, to the rustproofing that’s used on a car. If you lose the protection, your car rusts and ages prematurely. If we do not have adequate antioxidants in our diets, we in a sense start to rust and age like that car. Have you ever noticed that smokers seem to look older than people their age who don’t smoke? Their skin is frequently wrinkled, and they are often prematurely
gray. In addition, smokers’ muscles, bones, and organs tend to age faster than those of nonsmokers. Smoking is well known to stimulate the production of inflammatory free radicals. It could be said that smokers are rusting!

Phytonutrients do much more than protect you from premature aging, however. They also have the power to:

**Beat inflammation and improve sex.** Take polyphenols, for example. These phytonutrients seem to be particularly good for heart health because they are anti-inflammatory and relax the blood vessels, which improves bloodflow and lowers blood pressure. If you follow nutrition news, you know that there’s been a great deal of buzz about pomegranate juice, which studies show may reverse atherosclerosis (hardening of the arteries) and even improve erectile dysfunction (it’s all about the polyphenols and bloodflow). I usually recommend that people eat whole fruits for their fiber rather than drink fruit juice, but in the case of pomegranates, I make an exception. That’s because most people have trouble getting the pomegranate seeds out of the whole fruit, and drinking the juice for its potent polyphenols has proven health benefits. I like mixing pomegranate juice, which can be quite tart, with sparkling water for a refreshing spritzer.

In addition to improving bloodflow, the polyphenols found in black, white, green, and oolong tea and red wine have several other health benefits. Tea can lower bad LDL (low-density lipoprotein) cholesterol, and red wine can raise good HDL (high-density lipoprotein) cholesterol. One study even showed that regular ingestion of green tea, which is rich in a type of polyphenol called catechins, may decrease body fat and help weight loss. You can enjoy tea, caffeinated (in moderation) or decaffeinated, on all phases of the South Beach Diet and can sip a glass or two of wine with a meal on Phases 2 and 3.

And for those of you who, like me, are chocoholics, I’ve saved the best news for last. Several studies have shown that dark chocolate can lower blood pressure, again probably due to the beneficial effect of its polyphenols on bloodflow. I’m not giving you a license to gorge on chocolate. But when you do enjoy it, it’s best to choose brands of dark chocolate that contain the most cocoa and the least sugar. While you won’t be able to eat dark chocolate on Phase 1, you can take heart in knowing that enjoying the occasional piece is allowed on Phases 2 and 3.

**Protect the eyes and prostate.** Carotenoids, found mainly in yellow, orange, and red fruits and vegetables and in dark green vegetables, are another family of phytochemicals that have been studied extensively for their health benefits. Two carotenoids, lutein and zeaxanthin (both abundant in dark green vegetables), are associated with lower rates of macular degeneration and possibly cataracts. Another carotenoid, lycopene, found in tomatoes, pink and red grapefruit, and papaya, has been associated with lower levels of prostate cancer.

**Keep you sharp.** Anthocyanins are potent antioxidants found in blueberries, purple grapes, plums, eggplant, cherries, and red wine. If these antioxidants work as well in humans as they do in mice, eating these foods may preserve your brain well into old age. In a 2006 study conducted by the USDA, a blueberry extract was fed to mice that had a genetic mutation causing them to develop the same kind of amyloid plaques found in the brains of human Alzheimer’s patients. Eight months later, the mice performed as well on a maze function test as their normal peers, an indication that their brains were still plaque free. USDA studies have also shown that rats fed blueberries showed fewer signs of physical and mental aging than rats that did not eat blueberries.

**Fight cancer.** Cruciferous vegetables, including broccoli, Brussels sprouts, cauliflower, cabbage, and kale, are chock-full of cancer-fighting phytochemicals, including indoles and isothiocyanates. Consumption of these foods has long been associated with lower rates of breast cancer. More recently, a 2007 study published in the *International Journal of Cancer* found that people who ate the highest level of isothiocyanates daily had much lower rates of bladder cancer than those who did not.

These are just a few examples of the nutritional power of phytonutrients. Needless to say, there have been many attempts to isolate a particular phytonutrient from a food source and put it in supplement form. In fact, you’ll find store shelves full of supplements claiming to have harnessed the healing power of foods. The fact is, the studies on supplements have not yet yielded the same kind of positive health results as the studies of food. That’s probably because when you remove a particular nutrient from a food, you also lose its potentially beneficial interactions with the food’s other nutrients. My advice is that if you want to benefit from nature’s pharmacy, you need to eat whole foods as nature made them.

**Bread Can Be Your Friend**

Many people new to the South Beach Diet, especially those who have been on high-protein, low-carbohydrate diets, are often taken aback when, beginning on Phase 2, they learn that they are allowed to eat bread, cereal, and pasta—and not just on special occasions but every day. They wonder how they can continue to lose weight and also eat these carbohydrates, which they erroneously believe are responsible for this country’s obesity epidemic, not to mention our epidemics of diabetes and heart disease.
I can’t say it often enough: All carbohydrates are not the same. The overly processed refined starches and sugary processed foods that have been stripped of their fiber content are guilty as charged. These are the true culprits in the promotion of prediabetes, diabetes, and obesity. But whole grains are an entirely different story. There’s a world of difference between whole and refined grains. Whole grains are composed of the entire seed of the plant—the bran, germ, and endosperm. Refining typically removes the bran and germ, which contain B vitamins and other nutrients as well as fiber. It leaves the endosperm, which is mostly starch, and it’s the starch that converts rapidly into sugar during digestion.

When most people think of grains, they think of wheat, but whole grains include oats, barley, rice, quinoa, spelt, and rye. If you’ve been denying yourself a slice of bread or a serving of rice or cereal, you can stop doing so if you choose the whole-grain versions, which are actually very good for you. In fact, when it comes to your health, whole grains can:

**Fight diabetes and heart disease.** Recent studies show that eating whole grains can actually lower the risk of diabetes and heart disease. In May 2007, a study published in the *Archives of Internal Medicine* reported that eating 29 grams of fiber daily in the form of grain products resulted in a 27 percent lower risk of developing diabetes than did eating roughly half that amount. Researchers noted that it wasn’t only the fiber that appeared to be protective but also magnesium, a mineral found in whole grains.

In June 2007, another study, published in the *American Journal of Clinical Nutrition*, showed that eating whole grains can help prevent artery-clogging atherosclerosis. In the study, researchers measured the thickness of the carotid arteries of 1,178 men and women. This measurement is called intimal medial thickness and is a good predictor of heart attack and stroke. The people who ate the most whole grains had the best results on this test.

In the period since the USDA updated its Food Pyramid to emphasize whole grains, many new whole-grain products have appeared on supermarket shelves. There are now some wonderful whole-wheat pastas, whole-grain cereals, and breads that really taste great and are loaded with nutrients, including plenty of fiber. But if consumers don’t buy them, you can’t blame food manufacturers for not continuing to offer them. In fact, food manufacturers prefer to refine grains for two reasons: First, refining grains extends their shelf life; second, according to the producers, consumers are thought to prefer the smooth texture of refined flours over the texture of whole grains. I urge you to prove them wrong.

Remember, when you buy whole-grain pastas, breads, and other products, be sure the label says “100% whole wheat” or “whole grain,” and look for breads that contain 3 grams or more of fiber per slice.

**Got Enough Milk?**

Is it the calcium and vitamin D that make low-fat dairy foods a good choice? Or is it both of these nutrients and something else? Although the scientific community doesn’t have the answer yet, there is mounting evidence that something in dairy foods protects the heart and fights cancer. So drink your milk and eat your yogurt to:

**Lower blood pressure and prevent prediabetes.** Several studies have shown a direct link between consumption of dairy products and a reduced risk of high blood pressure. And a 2007 study conducted at the University of Wales suggested that dairy products may do much more than that—they may also help prevent prediabetes, also known as metabolic syndrome. Researchers followed 2,375 men ages 45 to 59 for 20 years as part of a long-term health study known as the Caerphilly Prospective Study (CAPS). Those who consumed the most dairy products were less likely to suffer from metabolic syndrome. The researchers did not distinguish between low-fat and high-fat dairy foods, but as a cardiologist, I definitely do. We know that saturated fat, which is found in fatty meats, poultry skin, and full-fat dairy foods, is associated with an increased risk of heart disease. And even though this particular study showed positive results for any kind of dairy, I don’t advise people to use full-fat products. Furthermore, there is no need to. Thanks to a broad selection of reduced-fat cheeses and fat-free and low-fat milk and yogurt, it’s just as easy to buy these healthier products as it is to purchase full-fat versions. One of my new favorites, and one we include in a number of recipes in this book, is nonfat Greek yogurt, which is thicker than regular yogurt. Honestly, to me it tastes like full-fat sour cream.

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**5 YEARS of SUCCESS**

**Ellen P., age 48: I Never Feel Like I’m Denying Myself**

Five years ago I provided a testimonial for Dr. Agatston’s first book. Now I’m thrilled that I can offer an
update because I’ve kept off the 20 pounds I lost 5 years ago for my daughter’s bat mitzvah. I no longer think of South Beach as a diet; I think of it as a lifestyle. I feel like I’m eating normally all the time, and I am. Living this lifestyle for all this time has been great for me. You don’t have to count calories or weigh your food, and you can eat what you like, not what someone tells you to eat. I have friends who are on different diets, and they have to eat exactly what they’re given every week—I could never do that. I like being able to plan my own meals and cook fresh food. If you follow the South Beach Diet lifestyle, you don’t walk around hungry. I eat shrimp, lobster, and steak, but now I eat it with a big salad and lots of vegetables.

I’ve stayed on the diet because I like the way I look and I like the way I feel. The funny thing is, I used to be such a dessert person. I’d go out to lunch with friends and be the only one ordering the molten chocolate cake. Now I order fresh berries, and I’m perfectly happy. I never feel like I’m denying myself, and I still eat a decadent dessert on occasion.

Another thing that’s helped me keep the weight off is water. Drinking water has become a way of life for me—no more sodas or sugary drinks. You’d be surprised by how many calories you save by just drinking water. I also snack a lot. I always liked to munch on something crunchy, and I still do. But instead of chips, I eat raw vegetables with dip. It’s very satisfying.

Today, when I cook for my family, I follow the principles of the South Beach Diet. I have two teenage daughters. They really like eating this way, and they do it because they want to. They love salads and prefer to snack on mozzarella sticks and fruit, just like I do. If we go to a family party together, I notice they head straight for the crudités and dip, not the junk.

My kids are proud of me. They say that their friends tell them, “Your mom looks so young and slim, like you guys.” It makes me feel good because I’m going through a divorce and starting to date again. I’m amazed by how many guys are asking me out.

Fight breast cancer. As I sit writing this chapter, a newly released French study of more than 3,600 women has shown a significantly reduced risk of breast cancer among women with the highest dairy intake. This is consistent with US studies that found that premenopausal women who consume higher amounts of calcium and vitamin D appear to have a lower risk of breast cancer.

The “Good” Fats

I wish I could think of another word for fat. Despite all the recent studies confirming that certain types of fat found in fish, nuts, and vegetable oils are essential for health, some of my patients are still skeptical when I tell them that fat can be good. In fact, good fats have been shown to:

**Improve triglycerides, lower cholesterol, and protect against diabetes.** Let’s start with nuts, which have gotten a bad rap for years. I am a great proponent of eating nuts in moderation. While they are high in fat, it’s good monounsaturated or polyunsaturated fat. In fact, the amount of fat varies from nut to nut, with chestnuts having the least and macadamias the most (although 70 percent of the fat in macadamias is monounsaturated). Consider walnuts, which are rich in alpha-linolenic acid (ALA), a heart-healthy omega-3 fatty acid that has been shown to help keep triglycerides, the bad fat associated with prediabetes, under control. Not only do walnuts help lower triglycerides, but the mono- and polyunsaturated fats they contain also help lower blood cholesterol when these nuts are substituted for saturated fat in the diet. Whenever I recommend nuts to South Beach dieters, I do add a word of caution: Because they’re high in calories and it’s easy to eat more than a handful, you need to be careful about how many you consume during the weight-loss phases of the diet, and even when you’re on Phase 3. (See “Phase 1 Foods to Enjoy” Section for specific advice.)

**Decrease heart attack risk.** Good fats can be great for your heart, especially the omega-3 fatty acids found in cold-water fatty fish such as salmon, tuna, and sardines and also in walnuts, flaxseed, and some vegetable oils. One of the first and most impressive trials to show this was the Lyon Diet Heart Study, reported in 1994. It tested the effect of the Mediterranean diet on 605 patients who had already suffered a heart attack. Those on the diet were told to eat more omega-3-rich oils from both plant and animal sources, especially in the form of a canola oil spread. The results were pretty amazing: The dieters had a 73 percent decrease in recurrent heart attacks and other heart-related problems. What really struck me, though, was that this was a far better result than we were getting at the time with our medications. Interestingly, the diet did this without significantly altering the patients’ cholesterol values.

Today, as part of the South Beach Diet, I encourage people to eat fish several times a week, and with good reason. The overwhelming majority of studies have reported that fish consumption is associated with a lower risk of
heart attack and sudden death. In addition, a high-dose omega-3-rich fish-oil supplement is particularly useful in patients with very high triglyceride levels. (If you are pregnant or breastfeeding, however, be sure to consult your physician about which fish may be high in mercury or other contaminants and whether you can take an omega-3 supplement.)

**Beat inflammation.** Fish oil also appears to protect against inflammation. A 2005 study published in the *Journal of American College of Cardiology* reported that fish eaters have lower blood levels of inflammatory markers, such as C-reactive protein (CRP) and TNF-alpha, which are linked not only to heart disease but also to rheumatoid arthritis, psoriasis, asthma, and other diseases caused or aggravated by inflammation.

In fact, the FDA was so impressed with the heart-healthy effects of omega-3 fatty acids that in 2004, the agency issued a ruling that allowed food manufacturers to make the following claim on labels: “Supportive but not conclusive research shows that the consumption of EPA and DHA omega-3 fatty acids may reduce the risk of coronary heart disease.”

As I’ve noted earlier, EPA (ecosapentaenoic acid) and DHA (docosahexaenoic acid) are most widely found in abundance in fatty cold-water fish. Consumers may find information on the amount of EPA and DHA on food packaging or through other labeling, including shelf labels, signs, posters, or brochures displayed in close proximity to the fish.

**Improve smarts and mood.** Omega-3 fats are not just important for maintaining heart health. As it happens, DHA is found in the brain in high concentrations, which could explain why fish have earned a reputation for being brain food.

Omega-3s also appear to play a positive role in mood and other brain functions. It’s been shown that people who don’t get enough omega-3 fats in their diet are at greater risk of depression, dementia, and learning problems, including attention deficit hyperactivity disorder (ADHD), which can affect adults as well as children. So if you want to be happy, healthy, and wise, keep eating these good fats, and try to get your kids to eat fish on a regular basis as well.

As you’ll soon discover, fruits and vegetables, whole grains, low-fat dairy, and good fats—just some of the foods we recommend on the South Beach Diet—are a veritable food pharmacy! Because you’re eating a diet that is abundant in vitamins, minerals, fiber, and other key nutrients, you’ll keep your body running at optimal levels while you lose and then maintain your weight. Not only will you look and feel terrific, but you’ll be avoiding many of the chronic diseases so prevalent today.
There is a health crisis in America today, and it involves our children’s deteriorating nutrition and lack of exercise. The number of severely overweight children in this country has tripled since 1980. Today, roughly one in three American children or adolescents is overweight or obese, and the proportion approaches one in two in certain minority groups. How did we reach this crisis situation?

While we have always identified malnutrition with starving Third World children (and it still is a major health concern in many underdeveloped nations), we’ve never thought of our own children as having this problem. And yet, in America today, our children, while clearly overfed, are often undernourished.

In the past, undernutrition and malnutrition were considered the result of a lack of calories, and that usually meant not getting enough healthy nutrients, either. As recently as the start of World War II, many of our young army recruits were found to be too thin. They were undernourished, the government realized, and needed to be fattened up. To prevent the problem from recurring, the federal government created guidelines for minimum caloric intake in school lunch programs. Ironically, the problem today is the opposite of what it was back then—our children are consuming way too many calories at school and elsewhere.

So if our kids are getting all those calories, how can they be malnourished? Just as our hunter-gather ancestors had a sweet tooth that led them to gather sweet fruits and vegetables (which also happened to be full of antioxidants and fiber), our children have a major sweet tooth. The problem is, they’re satisfying it with highly processed starchy and sugary fast foods devoid of the vitamins, minerals, and fiber found in fresh fruits and vegetables and whole grains.

Over the past decade, we have learned that there are literally thousands of antioxidants and other micronutrients found in the healthy foods that kids are not eating, and we now know that these nutrients are essential to our health. Ten years ago, we thought we might be able to give children and adults vitamin pills to make up for poor food choices, but so far studies have shown that this doesn’t work. For now we must get our vitamins and other nutrients from whole foods.

A Generation at Risk

The future does not bode well for our overweight, undernourished youngsters. A child who is overweight during adolescence stands a 70 percent chance of being overweight as an adult and an 80 percent chance of being overweight if his or her mom or dad is. In my cardiology practice, I’m already seeing heart problems in young adults who grew up eating fast food and sitting in front of the TV, and large studies back this up. In the famous and ongoing Coronary Artery Risk Development in Young Adults Study (CARDIA Study), for example, investigators initially measured cardiac risk factors in young adults ages 18 to 30 (this was in 1985). They included waist circumference and waist-to-hip ratios as indirect measures of the amount of belly fat a person had. Fifteen years later, the researchers performed CAT scans of the subjects’ hearts to detect the presence of plaque in the coronary arteries, a sign of developing heart disease. They found that the presence of abdominal obesity, which had been determined 15 years earlier, was a predictor of future heart disease.

5 YEARS of SUCCESS

**Bianca R., age 24: A Family Affair**

My life has been transformed by the South Beach Diet. In 2003, I weighed more than 250 pounds. I am only 5-foot-3, and I wore a size 22/24! I’d tried lots of diets, and none of them worked for me. I was always a chubby kid, and I resigned myself to being a fat adult. Throughout high school and college, I kept putting on more weight, and I convinced myself that I could be fat and happy. One day, I saw a picture of myself standing next to my father, and I was shocked. I didn’t recognize the woman in the photo—surely, I couldn’t be that big. I was bigger than my 6-foot-tall father, and he wasn’t skinny! That’s when I woke up and realized that I wasn’t...
happy. I wasn’t comfortable with my body, and I wanted to change.

My mom, who is a nurse, decided to put the whole family on the South Beach Diet. My parents both needed to lose some weight, and my mom was convinced that this diet was the healthiest way to eat. I tried to go along with it. I went through the motions, but I cheated a lot. Then my dad told me to read the book, like he had, so I would be more motivated to stick to the diet. After I read The South Beach Diet, everything fell into place for me. It was no longer about not eating certain foods; it was about relearning how to eat. I learned how to choose the right foods and live a healthier lifestyle in general.

Now one of my favorite activities is preparing a meal with my family. The South Beach Diet has given us the tools to be healthy, happy, and well fed. Nearly all the recipes in the South Beach Diet books have been tested and approved by my family.

It’s now 5 years since I started living the South Beach lifestyle. I’ve lost well over 100 pounds and wear a size 6. My parents have done well, too—they’ve lost 50 pounds each. The South Beach Diet has given me my life back and my family a new outlook on life. And we continue to have many fun nights in the kitchen.

And There’s More Bad News

Poor nutrition is having other unfortunate health ramifications for our children as well. In June 2007, James Perrin, MD, of Harvard Medical School, and others from the Harvard School of Public Health published an editorial in the Journal of the American Medical Association (JAMA) showing that the incidence of chronic health conditions in American children had increased dramatically over recent decades. Overall, the percent of US children with chronic conditions that interfere with their daily lives is more than 7 percent, compared with less than 2 percent in the 1960s, when I was a teenager. Asthma, obesity, and attention deficit hyperactivity disorder (ADHD) top the list. In fact, asthma affects about 9 percent of children and teens today, double what it was in just the 1980s. And when I was growing up, you rarely heard the term ADHD. The study authors emphasize that beyond the individual tragedies represented by these problems, the cost to our health-care system, both in the near and not so distant future, will be increasing dramatically.

Not long ago, I heard a politician remark on the increased incidence of asthma in Harlem, which he then equated to the air quality there. I immediately thought to myself that Harlem’s air quality must have improved over recent decades due to stricter emission standards. What has gotten worse, however, is the greater dependence on convenience, processed, and fast foods, not only in our inner cities, but throughout America. And with this has come widespread obesity.

In fact, there is a direct association between obesity and the incidence of asthma. Obesity promotes inflammation, which is widely believed to aggravate, if not cause, this disease. Studies show that an improved diet can help. The results of the Childhood Asthma Prevention Study (CAPS) were reported in 2004. The study found that in young children at high risk for asthma, getting supplementation in the form of omega-3 fish oils significantly decreased the incidence of cough over the next 3 years. In general, I don’t recommend supplements over whole foods (you can get omega—3s from fatty cold-water fish such as salmon, herring, and sardines), but when it comes to omega-3 fish oil supplements, I make an exception.

As for ADHD, it is thought that poor nutrition, particularly in young mothers and young children, contributes to this problem. But I believe that ADHD is only the tip of the iceberg when we consider nutrition-related academic and behavioral problems in schoolchildren. It was my cousin, a recently retired math teacher, who first alerted me to a very common observation among teachers. She told me to ask any teacher about the sugar high kids experience after a fast-food-type lunch. “They appear to be hyperactive, jumping off the walls,” she said, “and then, an hour later, they fall asleep.”

I see many current and retired teachers in my practice, and they all confirm that the attention of schoolchildren today has deteriorated, whether due to ADHD or not. An example came from one of my patients who had worked as a park ranger in the Everglades for 25 years. As part of her job, she had lectured about the national park to groups of Florida students. She told me that over the years, she had to shorten her lectures from 45 to 15 minutes because of the decreasing attention span of her young listeners.

Another cause of academic and behavioral problems in kids—one that’s also associated with poor nutrition and weight gain—is sleep apnea, a problem characterized by pauses in breathing during sleep and that you probably thought occurred only in adults. This fatiguing ailment is actually quite common in children, and it can occur in those who are only mildly overweight. Not surprisingly, sleep apnea has been associated with hyperactivity, inattention, and aggression in children. And, as in adults, weight loss is the best treatment for this problem if the child is overweight.
In addition, sleep apnea has been associated with insulin resistance—the problem that leads to prediabetes and type 2 diabetes. Type 2 diabetes is another disturbing nutrition-related health phenomenon in children that was previously associated only with adults. You may remember that type 2 diabetes used to be called adult-onset diabetes because it occurred after many years of stress on the pancreas from eating the wrong foods. Ultimately, the pancreas couldn’t produce sufficient insulin, and blood sugars became elevated. Today, because of the sugary, starchy, bad-fat-laden diet of many of our children, coupled with the fact that they’re getting minimal exercise, we’re seeing type 2 diabetes in more and more teens and even preteens.

AVOIDING THE FRESHMAN 15

Some of my patients have told me that their struggle with controlling their weight began when they were in college. They’re very concerned that the same thing will happen to their college-bound children.

Their fears are not unfounded. Studies show that college students gain anywhere from 8 to 20 pounds their first few years away at school. This weight gain is so common, in fact, it’s been dubbed the freshman 15.

You don’t need a degree in nutrition to figure out why kids gain so much excess weight at college. For the first time in their lives, they are away from parents in an unstructured environment, completely free to make all their own meal decisions. Too few have even a basic understanding of the principles of healthy eating. Tired, hungry kids grab food on the run, load up on junk food, and indulge in lots of high-fat snacks and sugary drinks. Furthermore, many first-year students are so overwhelmed by the pressures of school and a new social life that they don’t make time for regular exercise. Add to this the fact that many college kids consume large quantities of alcoholic beverages, and the problem only gets worse. I’m not going to discuss the legal or moral implications of underage drinking, but I’ve seen many a beer belly on a middle-aged man or woman that got its start in college.

Weight gain is not a mandatory part of the college curriculum. Here are some simple steps that students can take to avoid packing on those extra pounds.

- **Don’t skip meals.** Eat when you’re hungry—don’t wait until you’re starving. Eating three meals daily and some healthy snacks in between will keep your blood sugar stable and help prevent the cravings that drive you to eat highly processed refined carbs.

- **Eat good foods when you can.** Maximize your choices of lean protein, good high-fiber carbs, good fats, and low-fat dairy. You don’t have to eat food you don’t like, but you can make compromises. If you usually start your day with a white bagel and cream cheese, try ordering an egg and whole-grain toast instead. Or have some whole-grain unsweetened cereal with fruit and fat-free milk. For lunch, choose a whole-wheat wrap with lean beef or turkey over a high-fat hamburger or sub. For dinner, fill up on lean protein (have some roast chicken breast) and plenty of vegetables instead of pasta, pasta, pasta. And when it comes to dessert, choose high-fiber whole fruits over pie or cake. When you’re thirsty, drink water, seltzer, or a glass of fat-free or low-fat milk instead of sugary soda or a beer. By eating more fruits, vegetables, beans, and other high-fiber foods, you’ll feel—and stay—more satisfied.

- **Keep healthy snacks on hand.** Fill that dorm-room or apartment fridge with plenty of fresh vegetables and fruits, low-fat dips, and reduced-fat cheeses, and reach for them when you have a yen for chips and pastries. Keep boxes of high-fiber cereal and whole-grain crackers around as well. Sure, you can still enjoy junk food on occasion, but the more often you make good choices, the better you will feel and the better you will study.

- **Get regular exercise.** The Interval Walking program in Part II of this book is perfect for you because it takes 20 minutes max. Instead of hopping the campus bus, hoof it, and you’ll automatically burn more fat and calories. Try to make time to get to the school gym. You might meet some nice people you wouldn’t have otherwise encountered.

- **If you drink, do so in moderation.** Excess drinking is often a sign of being stressed-out or trying too hard to be the life of the party. In the end, it won’t make you feel better. Try to find healthier social outlets, like clubs or intramural sports. If you must drink, learn the adult art of nursing one drink for the entire night or alternating alcoholic drinks with seltzer or water. It’s also a good idea to eat something healthy, like fruit or veggies, before you drink. Cutting back on beer and cocktails is not only a lot better for your health and waistline but also for your grades and general well-being.
In Chapter 6, I discussed the relation of belly fat to prediabetes and diabetes in adults. But what about in children and adolescents? As noted earlier, there’s no question that both abdominal fat and body mass index (BMI) have been on the rise in our kids. And studies show that while both are predictors of high blood pressure in childhood, abdominal fat may be a stronger predictor than general obesity. Both belly fat and high blood pressure are criteria for the diagnosis of prediabetes. And just as prediabetes is an important predictor of heart disease in adults, so it is becoming a predictor of heart disease in children. In fact, the Princeton Lipid Research Clinics Follow-Up Study, published in August 2007, has demonstrated this relationship. In the study, researchers showed that metabolic syndrome diagnosed in children ages 6 to 19 predicted heart disease 25 years later.

The Exercise Connection

While a poor diet has clearly caused big trouble for our children, the problems have only been compounded by their lack of exercise. When I was growing up, the after-school period was almost exclusively for sports and other physical exercise. We came home and played pickup baseball, basketball, or football. We rode our bikes around the neighborhood. Later we played intramural sports and then freshman, junior varsity, and varsity sports. And the pickup games never stopped. Nearly everyone participated.

Today, it seems that when kids go home after school to play a sport, it’s only their fingers that are getting exercised—the athletes are the players in a video game! Worse yet, kids are sitting on the couch eating potato chips and watching TV or slouched in front of a computer surfing the net. A 2006 study published in Pediatrics reported that from the age of 2, on average, a child spends up to 3 hours a day watching television. Combined with the additional time spent playing video games or working on home computers, the average child could spend up to 8 hours a day sitting in front of a screen!

The decrease in exercise is so obvious that I don’t think I need to cite many more statistics, but let me just mention one: The Centers for Disease Control and Prevention (CDC) reported in 2002 that 61 percent of children ages 9 to 13 did not participate in any organized physical activity during nonschool hours. Does this lack of exercise contribute to overweight school children? Clearly, yes. But luckily, studies also show that kids who do more physical activity gain less weight from childhood into adolescence.

It’s important to understand that exercise is an antidote not just to obesity but to nearly all the health problems we’ve discussed. Exercise improves insulin resistance, lowers blood pressure, and decreases belly fat. It helped cure Theodore Roosevelt’s asthma (he lifted weights; did gymnastics daily; and studied wrestling, boxing, and judo), and it helps kids with asthma today. It also seems to improve behavior and academic performance. In fact, new studies show that exercise actually increases the growth of brain cells and perhaps gives new meaning to the concept of the scholar athlete. And while I am not sure that it can accurately be measured, I am convinced that sports participation, both formal and informal, builds character by teaching invaluable lessons such as teamwork and how to win and lose.

Turning Things Around

Many of you might be thinking, of course we know that exercise is good for kids. I certainly thought so and was surprised to learn that in Florida and across the United States, less time than ever is devoted to physical education in schools. This trend may be partially due to schools devoting more time to preparation for standardized statewide tests. I have found all this very discouraging because I am convinced children will do better on tests if they exercise during the day. Fortunately, in Florida, Governor Charlie Crist recently led the charge to pass legislation requiring at least 30 minutes of school exercise daily.

Frankly, I could go on for hundreds of pages documenting the benefits of healthy nutrition and exercise for children, not to mention the present and future costs to America if we don’t begin effective programs soon. But I trust you’ve gotten the message and I’ll spare you all that extra reading.

If You Teach Them, They Will Eat…the Right Way

The challenge now is how to stem the tide of childhood obesity and do it in an affordable manner. One approach that I have long felt would impact the majority of American children is to change the food service and nutritional education offered in public schools. Many studies have suggested that if you feed children high-fiber, low-glycemic foods, they will be less hungry and consume less. One such study performed in Oxford, England, was reported in the journal Pediatrics in 2003. Children were given a test breakfast for 3 consecutive days, consisting essentially of a
high-fiber bran-type cereal with milk or a low-fiber flake-type cereal with milk. Juice was also served. The children were allowed to eat as much as they wanted from a buffet for lunch, and the amount they consumed was recorded by observers who didn’t know what the children had eaten for breakfast. The children who got the high-fiber breakfast ate less at lunchtime and felt more satisfied.

Based on these types of studies, the Agatston Research Foundation began implementing a holistic nutrition and lifestyle intervention program in Florida public elementary schools more than 3 years ago. It’s known as the Healthier Options for Public Schoolchildren (HOPS) study. As of this writing, this program has included more than 15,000 children. Led by research director Danielle Hollar, PhD, with nutritional assistance from our registered dietitian, Marie Almon, MS, RD, the study began by creating breakfast, lunch, and extended-day snack menus in the intervention schools. Each menu included more nutrient-dense, higher-fiber options, while reducing saturated fats and sugars.

Let me tell you, this was not easy. School food-service staffs had to learn new processes for ordering, acquiring, and preparing these foods, and without their willing participation, our program would never have gotten off the ground.

But as every parent knows, simply offering healthier foods isn’t enough to get a child to eat them. Also needed is an education and lifestyle curriculum that teaches why the foods are healthy, as well as hands-on programs like tastings and school gardens. Not only did we add these elements, we also arranged for assemblies and stimulating classroom materials to teach children about the impact of nutrition on their health. In addition, we encouraged physical activity, as much as the daily schedule allowed.

From our HOPS experience, we have learned that elementary-age children will absolutely embrace healthy foods. Two years into the program, we can declare HOPS a success story. During the 2005 school year, the children in HOPS intervention schools showed an improvement in BMI, compared with kids at schools with the standard cafeteria program. Remember, our goal was not weight loss—children who are growing should be gaining weight—but, rather, development at a healthy, normal level of growth.

We've also had some very positive feedback from teachers who’ve told us that they’ve noticed an improvement in students’ behavior and concentration. And we’re hearing from parents that the kids are now asking for raw vegetables, fruits, and whole-grain breads at home!

There is good reason to expect that when children consume higher-fiber, lower-glycemic-index foods, they will be less hungry and less obese.

Today many schools of public health, pediatricians, nutrition organizations, the USDA, and food celebrities are getting involved in the fight against childhood obesity. And we applaud this. It is through broad communication and by creating evidence-based solutions that we will begin to turn the tide against this dangerous epidemic.

**The Take-Home Message**

It is clearly time for parents to take a good look at what their kids have on their plates. Regardless of a person’s age, the optimal diet is one that contains whole grains, fresh fruits and vegetables, lean protein, good fats, and plenty of fiber. These are the basic eating principles of the South Beach Diet, and they are family friendly. The problem is, kids are not getting the foods they need to thrive. Like their parents, most children are eating a steady diet of nutrient-deficient, highly processed foods that are high in sugar and saturated and trans fats—and very low in fiber. And they’re washing it all down with a glass or two of sugary soda. If I were to set out to design a diet to promote heart disease and diabetes, I couldn’t do a better job.

I’m not advocating that an already overworked parent needs to prepare a special meal for every member of the household, but no extra work is required to make a sandwich with whole-wheat bread instead of refined white bread, or to make spaghetti using whole-wheat pasta instead of white, or to offer a piece of fresh fruit instead of chocolate cake for dessert. It’s just as easy to buy a prepared salad at a salad bar as it is to pick up a far less healthy meal at a fast-food restaurant.

Fortunately, many food manufacturers have caught on to the problem of childhood obesity and are now offering healthier versions of prepared foods that kids actually like. For example, several brands of breakfast cereal are lightly sweetened and high in fiber. These are much better choices than highly sweetened cereals that quickly raise blood sugar. In the frozen-food case, you can buy pizza with a high-fiber crust topped with nutrient-rich vegetables. This is a much better choice than a conventional frozen pizza topped with full-fat cheese and fatty pepperoni. For dessert, there are now plenty of low-sugar and trans fat-free options.

Recent studies show that kids—just like their parents—eat lots of meals outside of the home. When they go to friends’ houses or hang out at fast-food restaurants after school, they will be exposed to junk food. This is
unavoidable, but it’s not cause for alarm. If your child is eating nutritiously most days of the week, an occasional order of fries and a soda isn’t harmful. Just like adults, kids need to learn how to make good lifestyle choices most of the time. But it’s up to parents (and teachers) to give them the right guidance.
PART II
The South Beach Supercharged Fitness Program
Overview of the Program

The South Beach Supercharged Fitness Program consists of two parts: Interval Walking and the Total Body Workout, which you will do on alternate days. By incorporating exercise into your daily routine, you will not only supercharge your diet and lose weight faster, you’ll tone your body, take inches off your waistline, rev up your metabolism, and get off those frustrating weight loss plateaus. And the really good news is that with this 20-minute-a-day program, you will definitely get better results in far less time than you would in a typical hour of exercise.

The Interval Walking part of the program is designed to give your heart and lungs a really good workout, which is vital for cardiovascular health. The beauty of interval training—in our program, alternating periods of fast or very fast walking with periods of slower recovery walking—is that it boosts your metabolism so you burn more calories and fat, and that translates into faster weight loss. It also means that you will continue to burn more fat and calories after you’re done exercising—even while you’re going about your daily activities or resting.

The Total Body Workout focuses on exercises that strengthen your core—the vital muscles in your abdomen, back, pelvis, and hips. Not only do these exercises help promote balance, stability, good posture, and coordination, they also tone your arms and legs and increase your flexibility. By the end of the first 20-minute session, you’ll feel the difference. And it just keeps getting better and better as you continue.

The entire program is designed so that you can tailor it to your own level of fitness. If you have never exercised before, you can work at a very easy pace until you feel confident moving ahead. If you’re very fit, we offer exercise variations that make the program more challenging.

Like the South Beach Diet itself, the fitness program is divided into three phases, each with specific goals. Phase 1 lasts 2 weeks—or longer, depending on your fitness level. It gently eases you into the cardio walking program and core exercises, providing a firm foundation so you can progress to the more difficult Phase 2 routine without injury.

Phase 2 of the fitness program lasts 4 weeks—or longer, if you feel you’re not ready to move on. During this phase, you’ll get slimmer and become stronger and better coordinated.

Phase 3 of the program is a real workout. This phase provides a fitness blueprint that you can follow for the rest of your life.

The Best Time to Exercise

I’ve noticed that the people who are most likely to commit to an exercise routine are those who set aside a specific time every day for fitness—and stick to it. For many people, including me, the best time is first thing in the morning, before they’re confronted with the demands and distractions of the day. For others, it could be after work or during their lunch hour.

A WORD OF CAUTION

Talk with your doctor before you make a sudden change in your level of activity, especially if you are age 50 or older, have been inactive, have difficulty keeping your balance, have periods of dizziness, or have known heart problems.

Pick the time that works best for you, and try to make a commitment to a set schedule.

What If I Can’t Work Out?
There will be times when your job or family obligations get in the way of exercising for 20 minutes straight—or at all. On days when you’re superbusy, try to get in a 5- or 10-minute walk, or simply incorporate more movement throughout your day. (In Chapter 5, I discuss how even the smallest movements are important.) When you do miss a day on the program, simply pick up where you left off. Don’t fall into the “I-missed-my-workout-today-so-I-might-as-well-quit” trap. Just as we don’t want you to feel that you have “blown it” if you have a bad day on the South Beach Diet, you shouldn’t feel as if all is lost when you must skip a day or even a few days of exercise. And just as you are learning how to make better food choices most of the time on the diet, with our Supercharged Fitness Program, you are learning a more efficient way to incorporate exercise into your daily life.

If you must stop exercising for an extended period, I do recommend that you start again with the Phase 1 exercises until you are sufficiently conditioned. When you are ready, move on to Phase 2.
Interval Walking Basics

The walking, or cardio, portion of your workout is divided into “intervals,” which, as we noted earlier, means that you will alternate between short bursts of fast walking and periods of walking at a slower pace. It will take around 20 minutes daily, but you can walk longer if you like (see “PHASE 1: Supercharged Fitness Program” Section for cautions about not overdoing it).

You will begin each cardio session with a short walk at a slow or moderate pace to warm up your muscles. Then you’re ready to start doing the intervals. Each interval consists of a higher-intensity burst of activity followed by an easier recovery period. The recovery period gives your muscles time to recharge before the next period of fast walking. You will do several intervals during each session, ending with a short cooldown at an easy pace.

Why do I favor this kind of interval training? The reason is that you send your metabolism soaring when you work your body at higher intensities, but you have to work hard for only a short time to achieve that result. Before you know it, the hard part is over and you’re back to a relaxed pace. And then, when you’ve recharged, you’re ready to intensify your walk again. Studies show that breaking up your walk into fast/slow intervals is not only better for weight loss, but it’s a lot more fun and the time seems to go faster.

The Interval Walking portion of the program is also convenient. You can walk outdoors on nice days or, when the weather doesn’t cooperate, do your program on a treadmill, stationary bike, or elliptical trainer at home or at the gym. (See the tips on adapting intervals to exercise equipment on “Interval Walking Basics” Section.) If you don’t have a home machine or a gym membership, don’t worry. You can easily apply the interval concept to other exercises (see “Interval Walking Basics” Section for suggestions) and still get the benefits in the comfort of your own living room.

Wherever you do your walking, it’s extremely important that you wear walking shoes, cross-training shoes, or running shoes that give you the proper support. If you’re buying new exercise shoes, try them on with the socks you plan to walk in. Synthetic athletic socks are better than cotton because they wick away moisture and keep your feet dry and blister free. I also recommend that you have 8 ounces of water before you start and also carry a small water bottle and sip from it as needed.

Keep in mind that when you’re walking, posture counts! Hold your abdominal muscles in tight, and consciously try to keep your belly from touching the waistband of your pants. Keep your chest lifted and your chin parallel to the ground (believe it or not, leading with your chin while walking can result in neck and back pain). With each step, strike the ground from heel to toe and feel your buttocks (glutes) contract. This will help strengthen your butt and the backs of your legs as you walk. Remember to relax and enjoy yourself, and don’t stiffen up.

I love to walk outdoors, especially on the beach, which is easy enough to do in South Beach. But I realize that many people live in communities where walking can be a challenge due to poor weather, lack of sidewalks, or heavy traffic. Be careful! Walk during daylight hours, and avoid heavily congested areas. If you use an iPod, keep the volume low enough that you can still hear traffic sounds. If you walk very early in the morning or in the early evening, wear light-colored clothing with light reflectors so you can be seen by passing cars.

Keeping Track of Time

During all three phases of the Interval Walking program, you will alternate between walking fast for a brief period—between 15 and 60 seconds—followed by a slower recovery period. In general, the more intense the work (in other words, the faster you go), the shorter the duration of the work and the longer the recovery period. Conversely, when you’re not working as hard, your work period will be longer and your recovery period will be shorter.

You’ll need to keep track of time so that you can complete the designated numbers of intervals per session in about 20 minutes. There are several ways you can do this. The simplest is to keep track of the seconds by counting to yourself. You can use the tried-and-true “one Mississippi” approach, which measures 1 second. You could wear a watch with a second hand or even carry a stopwatch. You don’t have to worry about following the program down to the second, however; if you run a few seconds over or under for a particular interval, it doesn’t matter. Just stay in the ballpark and you’ll be fine.
How Hard Are You Working?

The Interval Walking program is divided into four levels of intensity: Easy, Moderate, Revved Up, and Supercharged! You’ll work at different levels on different days. How do you know if you’re working at the right intensity? We don’t prescribe a specified walking speed because what’s difficult for one person might be easy for another. Moreover, if you’re walking on hilly terrain or in deep sand at the beach, you’ll be working harder than you would on flat ground.

To determine whether you are working at the right level, follow the helpful intensity levels described below. When you start the walking program, you may need to refer to this page for guidance, but as you become more accustomed to how you feel as you walk, shifting back and forth from lower to higher levels of intensity will become second nature.

**Easy Pace.** When you’re working at a low level of intensity, you should feel as if you’re walking through a mall (no stopping at the windows!) or strolling through town. Although you’re constantly moving, you could easily carry on a conversation with a friend who’s walking with you. This is the pace at which you will usually be working when you do your warmup before beginning the actual intervals.

**Moderate Pace.** When you’re working at a moderate level of intensity, you’re walking at a brisk but not fast pace and breathing faster than when you walk at an easy pace. You can still carry on a conversation, but doing so is more difficult.

**Revved Up.** When you’re Revved Up, you’re really moving! You’re a bit short of breath, and it’s difficult—but not impossible—to maintain your pace. You should have difficulty carrying on a conversation at this level of intensity.

**Supercharged!** When you’re working at your absolute top level, you are truly Supercharged! You’re walking as fast as you can go, and you can’t sustain the pace for very long. Not surprisingly, as you get fitter, you will find that the pace that once tired you out is now relatively easy, and even your Supercharged! pace will get faster.

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**INTERVAL TRAINING INDOORS**

Stuck indoors? No problem. Do your interval training program on a treadmill, a stationary bike, or an elliptical machine, if you have access to one. Or you can do intervals without a machine (see opposite).

**Treadmill.** The first step is to determine what Easy Pace, Moderate Pace, Revved Up, and Supercharged! feel like on a treadmill. A treadmill is like a moving sidewalk: Walking on one feels very different than when you are walking outdoors. You can pick up your pace very quickly because the belt moves backward under you rather than you propelling yourself forward.

When you get on the treadmill, start off slowly, gradually increasing the speed as you move from Easy to Moderate Pace. When you reach Revved Up, adjust the grade so that you’re working at a higher resistance. Find a grade at which you can do the more intense intervals yet easily go into your slower recovery period. If you don’t adjust the grade and try to walk faster and faster until you get to Supercharged!, you run a greater risk of falling off the back of the machine. It’s also very difficult not to break out into a run when the treadmill speed exceeds 4 mph.

Start the program at an Easy Pace, just as you did the walking program. We suggest this even if you’re at a high fitness level, since you need to get a feeling for treadmill walking and become comfortable with the controls. You may have to try a few settings until you hit the right one. You’ll find that the nice thing about a treadmill is that both the speed and grade change gradually, so you can adjust your intensity on the fly. Also remember that this gradual change will affect how you shift from the work to recovery cycles, so you may not want to start timing your intervals until the machine has reached the level you’ve chosen. Once you’re used to walking at an Easy Pace and Moderate Pace, you’re ready for your Revved Up and Supercharged! intervals. Remember, as your fitness improves, you’ll have to adjust your speed and grade to match your new feelings for each of the paces.

**Stationary bike.** When using a stationary bike, first adjust the seat so that you’re comfortable. This usually means that each leg is only slightly bent at the bottom of the pedal stroke on that side. As you would with a treadmill, you must determine what Easy Pace, Moderate Pace, Revved Up, and Supercharged! feel like on the bike. Then you’ll begin your workout by cycling slowly to warm up.

You use your muscles on a bike differently than you do when walking, so it’s important to allow your body time to get used to the new interval patterns. You can change your intensity in two ways: Either cycle
faster or increase the resistance level. In order to work at the Revved Up or Supercharged! level, you will have to increase both. Experiment with different combinations of speed and resistance to figure out which settings work best for you. Try not to apply so much resistance that you can't turn the pedals at least 60 times per minute. Remember, speed is better than resistance. We only use resistance to add intensity when we have achieved all we can at maximal speed.

**Elliptical machine (cross trainer).** The workout for an elliptical machine is similar to that for a stationary bike or a treadmill, but the way you use your muscles on this machine is different from either of the others. You'll need to allow time for your muscles to adapt. First, determine what Easy Pace, Moderate Pace, Revved Up, and Supercharged! feel like. As with the bike, speed is better than resistance. However, once you've achieved your maximal speed, most brands of ellipticals allow you to adjust the grade and resistance to increase intensity. Experiment with each to see what combination is most effective for you.

**When you don't have an exercise machine.** It's easy to create an interval cardio program that you can do at home without a machine. Since you won't be able to walk fast enough around your living room or den to get to Moderate, Revved Up, or Supercharged!, you'll need to choose other exercises to get a good workout. First, put on some music you like that has a strong beat. Wear a watch so that you know you've completed your goal after about 20 minutes. Start by simply marching in place to warm up your lower body, then mix in some shoulder rolls or swing your arms to get your upper body warmed up. After you've warmed up for 5 minutes, you can begin doing intervals following the time guidelines we've provided for each phase and day. Don't worry about being exact about time; you shouldn't be checking your watch while you're doing jumping jacks! Simple exercises work best in a small space: You can jump rope (without the rope), do jumping jacks, do side steps, or jog in place. You can also add an exercise step if you like. After 15 to 30 seconds, depending on how hard you’re working, return to marching in place to get back to an Easy Pace to recover. When you've done the suggested number of reps, be sure to cool down by walking in place for a couple minutes before hitting the shower and moving on with your day. A great tool for helping you do cardio/interval training indoors is a fitness DVD. Look for titles that promise interval training and different levels of intensity. *The South Beach Diet Supercharged* has a workout DVD that includes a 20-minute indoor cardio program with music, as well as the three phases of Total Body Workouts.
Total Body Workout Basics

On the days when you’re not doing Interval Walking, you will be doing the Total Body Workout for 20 minutes, or longer if you have the time and inclination. These exercises are designed to work several muscle groups simultaneously, which is how we move our bodies in real life. For example, at the same time that you’re working your upper arms or raising your legs, you’ll also be holding in your abdominal muscles and keeping your butt tight. That’s why we call it a Total Body Workout.

In the Interval Walking program, you begin your walk at an Easy or Moderate Pace to warm up. But with the Total Body Workout, the warmup process is already built into the exercises themselves. In fact, the exercises for each phase are designed to be done in a specific order that gives your body time to warm up.

These exercises also have a built-in stretching component. You shouldn’t need to do any additional stretching before or after, which also saves you time.

When doing the workout, wear comfortable clothing that allows for a full range of motion. You can listen to music, but I advise people not to watch television; you need to concentrate on each movement to get the most out of these exercises. If you have a large mirror, work out in front of it to check your positions.

Learning the Jargon

For those of you who are unfamiliar with exercise jargon, let me define a few terms that we’ll be using. Rep (short for repetition) refers to one complete exercise movement. For example, in the first exercise in Phase 1, the Spinal Arch and Curl, one forward and backward movement is 1 rep. If you do 8 reps, we say that you have completed a set for this exercise. The goal for many of these exercises is to do 3 sets of 8 reps. In some cases, depending on the difficulty of the exercise, I will suggest doing fewer reps. At first, you may be able to do only 1 or 2 reps. That’s fine. Keep at it and each time you do the workout, you will get stronger. You can rest a minute or two between sets if you want, but it’s not necessary.

Buying Equipment Is Optional

Many of the exercises in all three phases do not use any equipment, and the equipment that is recommended is optional.

For the Phase 1 exercises, you will need a chair (ideally, one without arms) or exercise bench, plus a mat or a thick towel to protect your back and knees during the floor exercises.

For Phase 2, you’ll need a mat or towel along with optional 1- to 3-pound weights and an optional exercise step. You can purchase weights and a step, also called an aerobic step or a home exercise workout step, from any store or Internet site that sells fitness equipment. Most exercise steps are adjustable. Simply select the height that’s most comfortable for you. If you don’t want to purchase a step, you can use the first step of a staircase in your home.

Hand weights are useful if you want to increase the intensity of your workout. They’re not essential, however, because you’ll be creating your own resistance by tightening your muscles and moving slowly and deliberately through each movement. In fact, if you have neck or shoulder problems, I strongly recommend that you don’t use weights for the arm exercises. If you haven’t exercised before, it’s a good idea to learn the exercises first without the weights, and then add them to your workout when you become proficient.

Many of the Phase 3 exercises are done on the floor, so you’ll need a mat or towel. For the Wall Sit, you’ll need to find a clear wall to support you. In addition, a few of the exercises use optional hand weights.

I recommend you do all of the exercises barefoot. This allows you to flex and point your toes more easily and feel the floor and exercise step much better. Don’t work out in socks—much too slippery.
PHASE 1

INTERVAL WALKING

Interval Walking on Phase 1 eases your body into working at a higher intensity, but it does this so gradually that you won’t even realize it’s happening. Your fast intervals are very brief, and they’re followed by nice long recovery periods.

The program varies slightly from day to day over 2 weeks in terms of intensity and the number of fast-slow patterns. Depending on what day it is, you will do between 6 and 12 short intervals. For example, on Day 1 of this phase, you will start off with a 5-minute warmup walk. Once you are warmed up, you’ll begin your intervals. You’ll walk fast for 15 seconds and then recover by walking slowly for 60 seconds. You’ll repeat this fast-slow pattern six times and then end with your cooldown. The entire program for the day takes about 15 minutes. Of that time, you will be working hard for only 1½ minutes.

On your second day of Phase 1 Interval Walking (which is actually Day 3 because you will have done the Total Body Workout on Day 2), your assignment is a bit different. Instead of doing 15 seconds of fast walking and 60 seconds of slow walking, you will do 15 seconds of fast walking followed by 45 seconds of slow walking. This time you will repeat that interval eight times before ending with your cooldown. This walk is slightly harder than your first day out, but you still have a generous amount of recovery time between your high-intensity fast-walking intervals.

You may wonder why the walking program is more difficult on some days than on others, and you may be tempted to try to work at your highest intensity level all the time. Don’t! If you worked at your highest intensity level every time you did cardio, you would run the risk of an overuse injury, which I talked about in Chapter 5. Your body needs time to recover with less strenuous days between high-intensity workouts. Furthermore, if your muscles never get a chance to fully recharge and are always tired out, you won’t be able to work as hard as you’re supposed to on your high-intensity days. If you don’t recharge, you’ll feel as if you’re working harder than you actually are, and you’ll just be cheating yourself. (For a refresher on why interval training works, reread Chapter 4, “Supercharge Your Metabolism.”)

As noted above, you will do your cardio interval walking every other day, alternating with the Total Body Workout. Ideally, on days when you are not doing cardio, try to also fit in a 15- to 20-minute recreational walk when you have the time.

The beauty of the Phase 1 walking program is that you’re making progress every day: Your heart and lungs are getting stronger, your cells are burning more fat, and you feel more and more energized. By the end of 2 weeks, you will see an increase in your cardiovascular capacity, which means that everyday tasks, such as walking up a flight of stairs or running for a bus, should feel much easier.

THE TOTAL BODY WORKOUT

Phase 1 of the Total Body Workout will give you a trimmer, leaner, more defined body. After each session, you’ll notice that you’re standing a bit taller, your midsection feels tighter, and you feel lighter on your feet. The Total Body Workout is not just about strength and toning. It also teaches you how to use your body safely so that you remain free of injury and pain. The focus is on awareness, mobility, and movement, not just while you are doing the exercises, but in your everyday life. The simple movements in Phase 1 prepare you for the more complicated exercises in Phase 2. Each exercise builds on the others, helping you to maintain and restore function and mobility in your body. By the end of 2 weeks, you’ll feel stronger, more confident, and ready to begin Phase 2. If you’re pressed for time, you can shorten your workout by doing 2 sets of each exercise instead of 3. Or, if you are physically unable to complete the entire workout, you can do 1 set and gradually work up to 3.

Phase 1 is fairly easy and safe for most people. If, however, during any exercise you feel any pain or
discomfort, stop doing it. Make sure that you are using proper form and have followed the instructions correctly. For example, when the directions say “Tighten your abdominal muscles” for an exercise that involves strengthening your shoulders, it’s for a good reason. These core muscles provide stability, and if you’re not engaging them, you’re not getting the most out of your workout. Even worse, you may inadvertently be putting strain on your neck or back.

Remember to go slowly and breathe through each exercise. You don’t need to rush to finish a rep or a set. You’ve probably seen people at the gym racing through their exercises without the guidance of a trainer. These men and women are candidates for injury. While I urge you to increase your pace during Interval Walking, I much prefer that you take it slow and easy, concentrating on every movement, when you’re performing the Total Body Workout.

For your convenience, the chart on the following pages lays out what you’ll be doing every day for the entire 2 weeks of Phase 1 of the South Beach Supercharged Fitness Program. As you’ll see at a glance, you’ll alternate Interval Walking days with the Total Body Workout days. You may want to photocopy these pages and keep them handy for quick reference.

THE SOUTH BEACH SUPERCHARGED FITNESS PROGRAM

PHASE 1—WEEK 1

DAY 1—INTERVAL WALKING

Warmup: Start with a 5-minute walk at Easy Pace.

 mostra

Walk for 15 seconds at Moderate Pace.
Walk for 60 seconds at Easy Pace.
Repeat 6 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 2—TOTAL BODY WORKOUT

Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15-20 minutes (optional).

DAY 3—INTERVAL WALKING

Warmup: Start with a 5-minute walk at Easy Pace.

Walk for 15 seconds at Moderate Pace.
Walk for 45 seconds at Easy Pace.
Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 4—TOTAL BODY WORKOUT

Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15-20 minutes (optional).

DAY 5—INTERVAL WALKING

Warmup: Start with a 5-minute walk at Easy Pace.
Walk for 15 seconds at Moderate Pace.
DAY 6—TOTAL BODY WORKOUT
Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section. Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 7—INTERVAL WALKING
Warmup: Start with a 5-minute walk at Easy Pace.

- Walk for 15 seconds at Revved Up.
- Walk for 60 seconds at Easy Pace.
  
  **Repeat 8 times.**

  Cooldown: End with a 2-minute walk at Easy Pace.

THE SOUTH BEACH SUPERCHARGED FITNESS PROGRAM

PHASE 1—WEEK 2

DAY 1—TOTAL BODY WORKOUT
Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section. Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 2—INTERVAL WALKING
Warmup: Start with a 5-minute walk at Easy Pace.

- Walk for 15 seconds at Revved Up.
- Walk for 45 seconds at Easy Pace.
  
  **Repeat 10 times.**

  Cooldown: End with a 2-minute walk at Easy Pace.

DAY 3—TOTAL BODY WORKOUT
Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section. Take a recreational walk at Easy Pace for 15-20 minutes (optional).

DAY 4—INTERVAL WALKING
Warmup: Start with a 5-minute walk at Easy Pace.

- Walk for 15 seconds at Revved Up.
- Walk for 30 seconds at Easy Pace.
  
  **Repeat 12 times.**

  Cooldown: End with a 2-minute walk at Easy Pace.
DAY 5—TOTAL BODY WORKOUT

Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 6—INTERVAL WALKING

Warmup: Start with a 5-minute walk at Easy Pace.

- Walk for 15 seconds at Supercharged!
- Walk for 60 seconds at Easy Pace.
- Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 7—TOTAL BODY WORKOUT

Phase 1 exercises: See PHASE 1: “Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).
Phase 1 Total Body Workout Exercises

- Spinal Arch and Curl
- Spinal Dive
- Spinal Twist
- Leg Flutter
- Leg Circle
- Salsa Shoulders
- Bikini Swirl
- Roll-Down
- Cat ‘n’ Hammock Back Stretch
PHASE 1 TOTAL BODY WORKOUT
SPINAL ARCH AND CURL

Increases spinal mobility and function, helps posture, tones the butt, and relieves stress. It also feels great!

1. Sit up straight on the edge of a chair with your feet hip-width apart and your knees in line with your ankles. Place your palms on your thighs, press your heels into the floor, and contract your butt muscles.
2. Slide your hands up toward your hips as you continue to contract your butt muscles; you should feel a slight lifting sensation. Gently arch your back and look up, tightening your abdominal muscles. Feel your neck lengthen as you lift your head. Imagine that you are hovering over the chair.
3. Continuing to hold your abdominal muscles in, round your back as you slide your hands toward your knees. Look down to the ground. Return to the starting position (1). Arching and curling is 1 rep.

Do 3 sets of 8 reps. This exercise should be done in one fluid motion without stopping between repetitions.
SPINAL DIVE

Improves posture by strengthening upper-back muscles and stretching chest muscles.

- 1. Sit up straight on the edge of a chair with your feet hip-width apart and your knees in line with your ankles. Your feet should be firmly planted on the floor. Place your palms on your thighs.
- 2. Pull your abdominals in and round your back as you drop your head in between your knees.
- 3. Arch your spine and tighten your abdominal muscles as you slowly unfurl into the upright starting position. Be sure to keep your shoulders down. Move slowly so you can feel your back muscles working. This is 1 rep.

_Do 3 sets of 8 reps._

_Caution:_ Stop if you become dizzy.
SPINAL TWIST

Improves back flexibility.

- **1.** Sit up straight on the edge of a chair with your feet hip-width apart and your knees in line with your ankles. Your feet should be firmly planted on the floor. Place your palms on your thighs.
- **2.** Keeping your back straight, pull in your abdominal muscles. Twist from your waist as you turn to the left, sliding your right hand down your right thigh and your left hand up your left thigh. Your feet and legs should remain still.
- **3.** Twist from your waist as you turn to the right, sliding your left hand down your left thigh and your right hand up your right thigh. When you finish 1 twist to the left and 1 twist to the right—this is 1 rep—keep going. This movement should be done in a single fluid motion.

*Do 3 sets of 8 reps.*
LEG FLUTTER

Tightens the midsection and improves the muscles that track and support the knees.

1. Sit up straight on a chair, gripping the seat with both hands. Your feet should be hip-width apart and your knees in line with your ankles. Keep your arms straight and your chest lifted as you pull in your abdominal muscles. Lean back slightly and lift both feet about 4 to 6 inches off the floor, keeping your knees close together and your back relaxed. Make sure that you are using your abdominal muscles to lift your legs and are not sinking into your arms or stressing your back. If your back hurts, support it with a cushion.

2–3. Kick out your right leg in a controlled manner, return to the starting position, and kick out your left leg (this is 1 rep). This should be a fluid motion; don’t stop between reps. Work at a slow, controlled pace and feel the contraction in your upper thighs.

Do 3 sets of 8 reps. If this is too difficult, do as many reps as you can and gradually increase.
LEG CIRCLE

A beautiful leg-shaper. Excellent for lower abdominal strength, hip- and knee-joint flexibility, and mobility.

- 1. Sit up straight on a chair, gripping the seat with both hands, your feet together and your knees in line with your ankles. Keep your arms straight and your chest lifted as you squeeze in your abdominal muscles. Lean back slightly and lift both feet 4 to 6 inches off the floor, keeping your knees close together and your back relaxed. Make sure that you are using your abdominal muscles to lift your legs and are not leaning on your arms or stressing your back.
- 2. Circle both legs to the right 4 times, as though stirring a tall drink.
- 3. Without lowering your legs, reverse direction and do 4 circles to the left.

_Do 3 sets of 4 circles to the right and 4 circles to the left. Do not stop between sets unless you have to rest._
SALSA SHOULDERS

Increases awareness, flexibility, and mobility in the neck, shoulders, and rib cage. Great for people with neck pain.

- 1. Stand with your feet firmly planted on the floor. Press your heels into the floor and contract the muscles in your butt (keep them contracted throughout the exercise). Hold your arms up with your elbows bent at a 90-degree angle, palms facing forward.
- 2. Circle your shoulders forward 4 times.
- 3. Reverse direction and circle your shoulders backward 4 times.

_Do 3 sets of 4 circles forward and 4 circles backward. Do not stop between sets unless you have to rest._
BIKINI SWIRL

Increases flexibility and mobility in the neck and rib cage. Strengthens the back.

1–3. Stand straight and place your hands on top of your head. Pull your elbows back. Press your heels into the floor to contract the muscles in your butt (keep them contracted throughout the exercise). Pull in your abdominal muscles and, moving from your waist, circle your rib cage 4 times from left to right without moving your hips (try to draw a circle on the ceiling with the top of your head). It should feel as if you are using a hula hoop with the hoop just under your rib cage. Switch directions and do 4 circles from right to left.

_Do 3 sets of 4 circles from left to right and 4 circles from right to left._
ROLL-DOWN

Gives you flat abs and a sexy six-pack!

- **1.** Sit on the floor with your knees bent and your feet hip-width apart. Press your feet firmly into the floor and contract your thigh muscles. Work against your body weight. Imagine that you are trying to squeeze your legs together but they’re so heavy, they won’t budge.

- **2–3.** Contract your pelvic floor muscles and squeeze your belly button in toward your spine. Roll back one vertebra at a time, resisting gravity as you lower yourself all the way down to the floor. Keeping your abdominal muscles tight, lift your spine one vertebra at a time back to the starting position (1). This is 1 rep.

*Do 1 set of 8 reps. Work up to 3 sets.*

**Variation:** When you are strong enough to do Roll-Downs comfortably without losing form, try this variation. Roll down to the point where it’s most challenging to hold yourself up. Keeping your abdominal muscles tight, make a complete circle with your entire torso to the right 8 times. Keep your hips and sit bones stable—don’t rock your pelvis. Make a complete circle with your entire torso to the left 8 times.

*Do 1 set of 8 circles to the right and 8 circles to the left.*
CAT ’N’ HAMMOCK BACK STRETCH

Strengthens and lengthens the abdominals and the posture muscles in the back. Feels wonderful, too! A great movement.

1. Get on your hands and knees with your back in a flat tabletop position. Your hands should be in line with your shoulders and your knees in line with your hips.

2. Press your palms into the floor and pull your abdominal muscles in toward your spine. Squeeze your butt muscles and round your back and neck like a cat. Hold this position for 10 seconds.

3. From the Cat Stretch, flow into the Hammock Back Stretch. Pull your shoulders down and away from your ears and slowly raise your head and chest. Keeping your abdominal muscles tight, allow your back to sway as if you were a human hammock. Hold this position for 10 seconds, then return to the flat back position.

*Alternate in a flowing manner between the Cat Stretch and the Hammock Back Stretch 3 to 5 times. End with the Cat Stretch.*
INTERVAL WALKING

Over the next 4 weeks, you’re going to teach your body how to become a champion fat burner. In this phase, Interval Walking is stepped up. You will be doing longer periods of fast walking within the 20 minutes, with shorter recovery periods in between. You’ll notice that the increase in work levels is very gradual, and you will easily rise to the challenge.

By now, you will be seeing the fruits of your labor. As you increase your metabolism, you’ll burn more fat and calories, lose more weight, and look trimmer. You’ll also be surprised at how much more stamina you have, not only during your workout, but as you go about your day-to-day activities.

In fact, you may be so pleased by your progress that you’re tempted to push yourself to do even more. Don’t! More is not better, and if you overdo it, you risk injuring yourself. For the best results, please follow the program. As I explained earlier, your recovery periods are very important for achieving your long-term goals. If you try to work as hard as you can every day, the intensity of your workouts will suffer, and intensity is the name of the game in interval training. Your body needs to rest and recover, so don’t cut this part out.

If you feel that Phase 2 Interval Walking is too challenging, repeat the Phase 1 walking program for another week or two, and then give Phase 2 another try.

THE TOTAL BODY WORKOUT

The Total Body Workout in Phase 2 builds on what you’ve learned during Phase 1. These exercises incorporate more coordinated and choreographed movements, but you’re ready for it. With each workout session, you’ll get a bit more proficient at doing the exercises. As you become more aware of how your body moves, your work becomes deeper and more effective. You’re learning how to make each workout count. You will notice a steady improvement in how you feel, particularly if you’ve had stiffness and joint problems in the past. And you’ll notice that you look slimmer and sleeker.

If you’re having difficulty completing the number of sets, you can do fewer sets or fewer reps per set. Or, if you simply can’t keep up with Phase 2, go back to Phase 1 for 2 weeks, and then give Phase 2 another try.

You will do Phase 2 for 4 weeks—or longer, if you feel you’re not ready to move on. See the plans on the following pages for what to do each day.
DAY 2—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section. 
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 3—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Moderate Pace.

• Walk for 15 seconds at Supercharged!
• Walk for 45 seconds at Moderate Pace.
• Repeat 12 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 4—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section. 
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 5—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

• Walk for 30 seconds at Revved Up.
• Walk for 30 seconds at Easy Pace.
• Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 6—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section. 
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 7—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Moderate Pace.

• Walk for 15 seconds at Supercharged!
• Walk for 60 seconds at Moderate Pace.
• Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

PHASE 2—WEEK 2

DAY 1—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section. 
Take a recreational walk at Easy Pace for 15–20 minutes (optional).
DAY 2—INTERVAL WALKING

Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 30 seconds at Moderate Pace.
- Walk for 30 seconds at Easy Pace.
- Repeat 10 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 3—TOTAL BODY WORKOUT

Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 4—INTERVAL WALKING

Warmup: Start with a 2-minute walk at Moderate Pace.

- Walk for 15 seconds at Supercharged!
- Walk for 45 seconds at Moderate Pace.
- Repeat 15 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 5—TOTAL BODY WORKOUT

Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 6—INTERVAL WALKING

Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 30 seconds at Moderate Pace.
- Walk for 45 seconds at Easy Pace.
- Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 7—TOTAL BODY WORKOUT

Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

PHASE 2—WEEK 3

DAY 1—INTERVAL WALKING

Warmup: Start with a 2-minute walk at Moderate Pace.

- Walk for 30 seconds at Supercharged!
- Walk for 60 seconds at Moderate Pace.
Repeat 10 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 2—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 3—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 45 seconds at Moderate Pace.
- Walk for 30 seconds at Easy Pace.
- Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 4—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 5—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Easy Pace.

- Walk for 30 seconds at Supercharged!
- Walk for 45 seconds at Moderate Pace.
- Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 6—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 7—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Moderate Pace.

- Walk for 45 seconds at Revved Up.
- Walk for 15 seconds at Moderate Pace.
- Repeat 6 times.

Cooldown: End with a 2-minute walk at Easy Pace.

PHASE 2—WEEK 4

DAY 1—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 2—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

♦ Walk for 60 seconds at Moderate Pace.
♦ Walk for 30 seconds at Easy Pace.
♦ Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 3—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 4—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Moderate Pace.

♦ Walk for 30 seconds at Supercharged!
♦ Walk for 60 seconds at Moderate Pace.
♦ Repeat 10 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 5—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 6—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

♦ Walk for 30 seconds at Revved Up.
♦ Walk for 45 seconds at Easy Pace.
♦ Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 7—TOTAL BODY WORKOUT
Phase 2 exercises: See “PHASE 2: Supercharged Fitness Program” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).
Phase 2 Total Body Workout Exercises

- Stair Step-Up
- Side Reach
- Super Squat
- Single Arm Reach
- Beautiful Biceps
- Shoulder Stroke
- Fab Abs
- Ab Circle
- Beach Kneel
PHASE 2 TOTAL BODY WORKOUT
STAIR STEP-UP

Lifts the butt, shapes the legs, improves balance, and strengthens upper-thigh muscles.

1. Stand in front of your exercise step. Place your left foot on the step, pressing your heel into the step. Keep your right foot on the floor behind you. (If you have knee problems, do this exercise without using the exercise step. If you have poor balance, hold on to a wall or chair for greater stability.)

2. Straighten your right leg and lift it to the point where you can feel your butt contract. Hold that position. Keep your butt tight and lifted.

3. Tightening your abdominals and not allowing yourself to wobble, slowly pulse your right leg slightly higher while keeping your butt and abdominal muscles tight. Do 8 pulses with your right leg, and then return to the starting position.

Switch legs and repeat the exercise.

Do 3 sets of 8 pulses with each leg.

Variation: When you are proficient at doing Stair Step-Ups, add this more difficult variation. Instead of pulsing the extended leg up and down, draw 4 small circles to the right in the air with your toes. Reverse the direction and draw 4 more small circles to the left. Switch leg positions and repeat the exercise.

Do 3 sets of 4 circles to the right and 4 circles to the left with each leg.

Caution: Stop if you have knee or hip pain.
SIDE REACH

Lifts the butt, shapes and strengthens the legs and inner thighs, and improves balance.

- 1. Place your left foot on an exercise step, pressing your heel into the step. Lift your right leg up to the point where you can feel your butt muscles contract, then cross your right leg behind your left leg, reaching through your toes.
- 2. Holding your abdominal muscles in tight and, not allowing yourself to wobble (hold on to a chair if you need to), slowly bend and straighten your left leg (this is 1 rep).

Switch legs and repeat the exercise.

*Do 3 sets of 8 reps with each leg.*

*Caution:* Stop if you have knee or hip pain.
SUPER SQUAT

Lifts the butt and strengthens the thigh muscles. A great knee strengthener if done properly.

1. Place your left foot on the exercise step. Keep your right foot flat on the floor. Turn out both feet. (If you have knee problems, you can do this exercise without using the step.)
2. Bend both knees into a comfortable squat position. Your ankle bones should be directly in line with your knees to prevent knee problems.
3. Lower yourself into a deeper squat until you feel your butt muscles contract. Hold at the lowest point you can manage, then pulse your legs up and down 1 to 2 inches (a single up-and-down movement is 1 rep). Your hamstrings should feel as if they’re “on fire.” This is a small, controlled movement.

Switch legs and repeat the exercise.

Do 8 reps with your left foot on the step and 8 reps with your right foot on the step (this is 1 set). Work up to 3 sets.

Variation: Once you feel strong enough, try this more difficult variation. Lift the heel of the foot that is not on the step while you pulse up and down with both legs (this is 1 rep).

Do 8 reps with your left foot on the step and 8 reps with your right foot on the step (this is 1 set). Work up to 3 sets.

Caution: Stop if you have any knee or hip pain.
**SINGLE ARM REACH**

Great for flexibility and range of motion in the shoulders.

- **1.** Stand up straight with your legs shoulder-width apart. Hold both arms at chest height, with your upper arms parallel to the floor, elbows bent at 90 degrees, and palms facing toward you. Keep your chest open and lifted on all movements. Your chin stays parallel to the floor and should not jut forward.

- **2.** Straighten your right arm as you raise it toward the ceiling, feeling the muscles under your arm contract. When your arm is straight overhead, rotate your hand and arm away from your body.

- **3.** In a fluid motion, keep your right arm straight as you slowly move it behind you and down. This movement should feel as if you are reaching over and behind the passenger seat of your car.

- **4.** Without stopping, continue to move your arm down and around until your elbow is at your hip. Return to the starting position. This is 1 rep.

*Do 8 reps with your right arm, then 8 reps with your left arm (this is 1 set). Work up to 3 sets.*

**Cautions:** People with existing shoulder injuries or previous rotator cuff or impingement issues should be careful doing this exercise.
BEAUTIFUL BICEPS

Enhances upper-arm shape and strength.
You can use 1- to 3-pound hand weights or perform this exercise without weights. Don’t use weights if you have shoulder injuries or feel any shoulder pain as you do the exercise.

1. Holding a weight in each hand, stand up straight with your legs shoulder-width apart. With your palms up, bend your arms, keeping your elbows at chest height as though resting them on an imaginary table. If you’re not using weights, hold your palms open and facing toward you.

2–3. While keeping your elbows at chest height (try not to lower them), do 4 basketball-size outward circles with your forearms. Without stopping, reverse direction and do 4 inward circles.

Do 3 sets of 4 circles outward and 4 circles inward.
**SHOULDER STROKE**

Strengthens shoulders, chest, biceps, and triceps. Improves posture and increases shoulder mobility. You can use 1- to 3-pound hand weights or perform this exercise without weights. Don’t use weights if you have shoulder injuries or feel any pain during the exercise.

- **1.** Holding a weight in each hand, stand with your legs shoulder-width apart. Turn your palms down and hold both arms straight out at chest height, parallel to the floor. If you’re not using weights, make fists and turn your palms down.
- **2–3.** Keeping your left arm at shoulder height, lower your right arm to your right thigh, then, without stopping, raise your right arm to shoulder height and lower your left arm to your left thigh (this is 1 rep). Don’t stop between reps.

*Do 3 sets of 8 reps.*

**Tips:** Your fists should not be raised above your shoulders. The muscles under your arms should contract, and you should feel a pulling sensation from your shoulder blades. Make sure your shoulders don’t hunch up—it will put a strain on your neck. Watch your posture. Your chin should be parallel to the floor and your chest lifted as you do this exercise.
FAB ABS

Creates a supersexy six-pack and flat abs. Stretches chest muscles. Improves balance and coordination.

1. Sit on the floor with your knees bent and your arms straight behind you. Your hands should be flat on the floor with your fingertips pointing away from you. Contract your pelvic-floor muscles and pull your abdominal muscles in tight to keep you balanced as you lift your feet 3 to 4 inches off the floor.

2–3. Tightening your abdominals, straighten and bend your legs (this is 1 rep). Repeat 8 times in a fluid manner. If you’re not strong enough to extend both legs, extend one leg at a time, alternating legs.

Do 3 sets of 8 reps.

Variation: When you have mastered the basic exercise, make it more challenging by doing circles with both legs extended. One outward and 1 inward circle is 1 rep.

Do 3 sets of 8 reps.
AB CIRCLE

Shapes and flattens lower and upper abdominals.

- **1.** Lie down on your back with your body propped up on your elbows. Press your forearms and palms firmly into the floor, fingertips facing forward. Squeeze your shoulder blades together to keep your chest lifted. Bend your knees out to the side and press the bottoms of your feet firmly together. (The harder you press your feet into one another, the more intense the work.) Lift your feet off the floor about 4 inches, keeping your soles pressed together.
- **2.** Circle your feet out, up, around, and back toward your body as you circle toward the start position (1). Repeat 4 times.
- **3.** Still keeping the soles of your feet together, reverse the direction of the circle. Repeat 4 times.

*Do 3 sets of 4 circles in each direction.*
**BEACH KNEEL**

Tightens and lifts the butt, strengthens the back and improves posture, and stretches the chest, hips, and thighs.

- **1.** Kneel on the floor with your knees hip-width apart. Tighten your butt muscles and pull your abdominal muscles in tight.
- **2.** Slowly lean back without bending at the hips. Use your butt muscles and muscles in the back of your upper thighs (your hamstrings) to support your body weight. Hold this position for 5 seconds, then return to the starting position (this is 1 rep).

*Do 3 sets of 8 reps.*

*Caution: People with knee injuries or back pain should not do this exercise.*
Congratulations on graduating to the Phase 3 Interval Walking part of our fitness program! After at least 6 weeks of intervals on Phases 1 and 2, you’re sure to be seeing results not only on the scale but also in the way you feel. Your body and heart are stronger, you have more energy, you can breathe more deeply, and you’re probably a lot happier. You’re making the right food choices, and you’re doing a beneficial new form of exercise—it’s an unbeatable combination. And thanks to your revved-up metabolism, you’ve vastly increased your capacity to burn fat and calories—all the time.

Because Phase 3 Interval Walking offers the blueprint you’ll use for exercising long term, I want to give you some information on how this phase really works, so you can adapt the intervals to any form of cardio you enjoy. If you study the Phase 3 charts on “Phase 3 Weekly Exercise Plan” Section, you’ll see that each week varies a bit in terms of the amount and intensity of work and recovery. Here’s how.

Weeks 1 and 2: The Slow Build. During the first 2 weeks of Phase 3, the work becomes a bit more challenging each day as the level of intensity keeps increasing. It’s a slow and steady build with a break on Week 2, Day 2 to help you handle the increase in difficulty. In addition, the amounts of work and recovery change over these 2 weeks to further vary the intensity of your workout. This allows you to demand more and more from your body while still providing enough time to recharge between bursts of increased activity.

Week 3: The Supercharged! Week. During the third week of Phase 3, you’ll be able to work at your highest intensity as the work periods shorten and the recovery periods lengthen to allow you to replenish more of your energy. The repetitions peak on Day 5, then decrease on Day 7, so you can work even harder. Intensity is the name of the game, but you also need recovery. There’s a good reason for this: If you were to continue to increase both the intensity and duration of your workout each day, you could suffer from excessive fatigue, leading to reduced gains and possible overuse injuries (see Chapter 5).

Week 4: The Mellow Week. During the final week of Phase 3, there’s a marked decrease in work intensity and time. After Week 3, this should feel like a breeze. But don’t try to make it harder. Remember, you need this time to refresh yourself for the next 4-week cycle.

The key to interval training is knowing how to pace yourself. Therefore, I can’t stress enough the importance of recovery. It is not simply a rest period; recovery serves a critical purpose: It gives your body time to recharge so that it’s able to work to its maximum potential when called upon again. If you don’t take your recovery periods seriously, you are only cheating yourself because you will never truly achieve your Supercharged! potential.

You deserve equal kudos for being ready to move on to the Phase 3 Total Body Workout, particularly if you never exercised before starting this fitness program. During Phase 3, you’ll appreciate the incredible progress you’ve made over the past weeks. In fact, you may be surprised at how easily you’re able to adapt to these new exercises. The individual movements are more challenging, but you’re ready for them.

In addition to being stronger, you will have developed a new body awareness. And it shows, not just when you’re working out, but in the grace and easy you express as you perform your daily activities. More important, you’re steadier on your feet, which will help prevent injury. By now, you feel so good after your workout, you find that you’re actually looking forward to doing it.
DAY 1—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 45 seconds at Moderate Pace.
- Walk for 15 seconds at Easy Pace.
- *Repeat 15 times.*

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 2—TOTAL BODY WORKOUT
Phase 3 exercises: See *Phase 3 “Weekly Exercise Plan”* Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 3—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Moderate Pace.

- Walk for 30 seconds at Revved Up.
- Walk for 15 seconds at Easy Pace.
- *Repeat 20 times.*

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 4—TOTAL BODY WORKOUT
Phase 3 exercises: See *“Phase 3 Weekly Exercise Plan”* Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 5—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Moderate Pace.

- Walk for 30 seconds at Revved Up.
- Walk for 30 seconds at Moderate Pace.
- *Repeat 16 times.*

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 6—TOTAL BODY WORKOUT
Phase 3 exercises: See *“Phase 3 Weekly Exercise Plan”* Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 7—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Moderate Pace.

- Walk for 30 seconds at Supercharged!
- Walk for 45 seconds at Easy Pace.
- *Repeat 12 times.*

Cooldown: End with a 2-minute walk at Easy Pace.
THE SOUTH BEACH SUPERCHARGED FITNESS PROGRAM

PHASE 3—WEEK 2

DAY 1—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 2—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 45 seconds at Revved Up.
- Walk for 30 seconds at Easy Pace.
- Repeat 12 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 3—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 4—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Moderate Pace.

- Walk for 60 seconds at Supercharged!
- Walk for 30 seconds at Easy Pace.
- Repeat 10 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 5—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 6—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 45 seconds at Supercharged!
- Walk for 15 seconds at Moderate Pace.
- Repeat 10 times.

Cooldown: End with a 2-minute walk at Moderate Pace.

DAY 7—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).
DAY 1—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Moderate Pace.

- Walk for 60 seconds at Revved Up.
- Walk for 30 seconds at Moderate Pace.
- **Repeat 10 times.**

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 2—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 3—INTERVAL WALKING
Warmup: Start with a 3-minute walk at Easy Pace.

- Walk for 45 seconds at Revved Up.
- Walk for 30 seconds at Easy Pace.
- **Repeat 10 times.**

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 4—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 5—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Easy Pace.

- Walk for 30 seconds at Supercharged!
- Walk for 45 seconds at Moderate Pace.
- **Repeat 12 times.**

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 6—TOTAL BODY WORKOUT
Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 7—INTERVAL WALKING
Warmup: Start with a 2-minute walk at Moderate Pace.

- Walk for 30 seconds at Supercharged!
Walk for 60 seconds at Moderate Pace.

Repeat 9 times.

Cooldown: End with a 2-minute walk at Easy Pace.

THE SOUTH BEACH SUPERCHARGED FITNESS PROGRAM

PHASE 3—WEEK 4

DAY 1—TOTAL BODY WORKOUT

Phase 3 Exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 2—INTERVAL WALKING

Warmup: Start with a 2-minute walk at Easy Pace.

Walk for 30 seconds at Revved Up.
Walk for 45 seconds at Moderate Pace.
Repeat 12 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 3—TOTAL BODY WORKOUT

Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).

DAY 4—INTERVAL WALKING

Warmup: Start with a 3-minute walk at Easy Pace.

Walk for 30 seconds at Revved Up.
Walk for 60 seconds at Easy Pace.
Repeat 8 times.

Cooldown: End with a 2-minute walk at Easy Pace.

DAY 5—TOTAL BODY WORKOUT

Phase 3 Exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Moderate Pace for 15–20 minutes (optional).

DAY 6—INTERVAL WALKING

Warmup: Start with a 2-minute walk at Easy Pace.

Walk for 30 seconds at Moderate Pace.
Walk for 60 seconds at Easy Pace.
Repeat 6 times.

Cooldown: End with a 2-minute walk at Moderate Pace.
DAY 7—TOTAL BODY WORKOUT

Phase 3 exercises: See “Phase 3 Weekly Exercise Plan” Section.
Take a recreational walk at Easy Pace for 15–20 minutes (optional).
Phase 3 Total Body Workout Exercises

- Wall Sit
- Chest Hug
- Double Arm Reach
- Breaststroke
- Heel Beat
- Swimming Frog
- Alternating Leg Kick
- Straight Leg Triangle
- Straight Leg Circle
PHASE 3 TOTAL BODY WORKOUT
WALL SIT

Strengthen your butt, thighs, and calves.

Squat against a wall with your palms pressed against the wall, your feet planted firmly on the floor hip-width apart, and your knees in line with your ankles. Tighten your abdominals. Pretend you are sitting on an imaginary chair. Try to squeeze your legs together without moving them. Hold the squeeze for 15 seconds (this is 1 rep). Release the squeeze.

Do 5 (15-second) squeezes.

**Tip:** Make sure your palms stay pressed against the wall—they help to stabilize your back muscles.

**Caution:** Stop if this exercise causes any knee pain.

**Variation 1:** While sitting against the wall, lift your heels and hold for 5 seconds. Return to the starting position. Repeat. Work up to longer holds as you get stronger.

Do 5 (5-second) holds.

**Variation 2:** While sitting against the wall, extend your left leg. Do 4 outward circles and then 4 inward circles with that leg. Return to the starting position, and repeat with the right leg.

Do 3 sets of 4 circles outward and 4 circles inward with each leg.
CHEST HUG

Shapes and strengthens shoulders, biceps, and triceps. You can use 1- to 3-pound hand weights or perform this exercise without weights. Don’t use weights if you have shoulder injuries or feel any pain.

1. With a weight in each hand or with your hands in fists, stand straight with your feet shoulder-width apart. Hold your arms out in front of you at chest height as though hugging someone (your closed fists are facing you).

2–3. Working from your elbows, open your arms, then, still working from the elbows, bring your arms back to the starting position. Think of your elbows as the hinges of a door that’s opening and closing. Each out-and-in movement is 1 rep.

Do 3 sets of 8 reps.

Caution: People with existing shoulder injuries or previous rotator cuff or impingement issues should not use weights.
DOUBLE ARM REACH

Strengthens and sculpts the shoulders and arms.

1. Stand up straight with your legs shoulder-width apart. Hold both arms at chest height, with your upper arms parallel to the floor, elbows bent at 90 degrees, and palms facing toward you. Keep your chest open and lifted on all movements. Your chin stays parallel to the floor and should not jut forward.

2. Straighten both arms as you raise them toward the ceiling. Feel the muscles under both arms contract as you do so. When your arms are straight overhead, rotate your hands and arms away from your body.

3–4. In one fluid motion, keep your arms straight as you slowly move both arms behind you and down. Without stopping, continue to move your arms down and around until your elbows are at your hips and bent at 90 degrees, palms facing up. Return to the starting position. This is 1 rep.

Do 3 sets of 8 reps.

Caution: People with existing shoulder injuries or previous rotator cuff or impingement issues should be careful doing this exercise.
BREASTSTROKE

Strengthens and sculpts shoulders, biceps, and triceps. This is the dry dock version of the breaststroke. You can use 1- to 3-pound hand weights or perform this exercise without weights. Don’t use weights if you have shoulder injuries or feel any pain.

1. With a weight in each hand, stand with your legs shoulder-width apart. Hold your hands in front of you at chest height, with your elbows bent as though hugging someone but your palms facing away from your chest.

2. In one continuous motion, open your arms and pull your elbows behind your shoulders as though doing the breaststroke. Squeeze in your shoulder blades and contract the backs of your arms to intensify the movement.

3–4. Bring your bent arms down, around, and, in a circular motion, toward your waist, as you move toward the starting position. This is 1 rep.

Do 3 sets of 8 reps.

Tip: This exercise should be done in a fluid, rhythmic motion in which one movement flows into the other, just like swimming. Do not stop between reps.

Caution: People with existing shoulder injuries or previous rotator cuff or impingement issues should not use weights.
**HEEL BEAT**

Strengthens and flattens upper and lower abdominal muscles, sculpts and strengthens the legs, and improves flexibility and function in hip joints.

- **1.** Lie on your back on the floor. Prop yourself up on your elbows and press your forearms and palms firmly into the floor, fingertips facing forward. Squeeze your shoulder blades together to keep your chest lifted. Your legs are straight, your feet are flexed, and your legs are hip-width apart. Lift your legs off the floor about 4 inches.

- **2–3.** Opening and closing your legs, slowly beat your heels together without actually letting your heels touch. These movements should be fluid; don’t stop between beats (1 beat is 1 rep).

  *Do 3 sets of 8 reps.*

**Variation:** If you have mastered the basic move, try this more difficult variation. When your legs are lifted off the floor, flex your feet and do 1 small circle inward with both feet, followed by 1 small circle outward (this is 1 rep).

  *Do 3 sets of 8 reps.*
SWIMMING FROG

Sculpts and strengthens upper and lower abdominal muscles. Improves flexibility and function of the hip and knee joints.

1. Lie down on your back on the floor. Prop yourself up on your elbows and press your forearms and palms firmly into the floor, fingertips facing forward. Squeeze your shoulder blades together to keep your chest lifted. Bend your knees and open them to either side. Press the bottoms of your feet together. Tighten your abdominal muscles. Lift your feet off the floor about 4 inches.

2. Still pressing the bottoms of your feet together, extend your legs until they are straight, then flex your feet at the point where you can no longer keep the bottoms of your feet pressed together.

3. Separate and extend your straightened legs wider than hip-width apart. Make sure that your tight abdominal muscles are holding you in position so you don’t strain your back.

4. Bring your heels back together. Bend your legs and press the bottoms of your feet together as you return to the starting position (1) to complete 1 rep. Your legs will still be hovering about 4 inches off the floor. These movements should be fluid. Don’t stop between reps.

Do 3 sets of 8 reps.
ALTERNATING LEG KICK

Improves hamstring strength and endurance, strengthens the back and abdominals, and improves posture.

1. Lie facedown on the floor. Prop yourself up on your elbows and press your forearms into the floor. Contract your arm muscles and feel your arms pull toward one another, but don’t actually move them. Keep your chest lifted—don’t let it sink into the floor.

2. Tighten your abdominal muscles and contract your butt as you lift both legs about 4 inches off the floor.

3–4. Bend your right leg at the knee and try to kick your butt with your right heel, then, in a continuous motion, switch legs and try to kick your butt with your left heel. This is 1 rep.

Do 3 sets of 8 reps.

Caution: Don’t do this exercise if you have low-back pain or disk or knee injuries.
STRAIGHT LEG TRIANGLE

Great for hamstring strength and endurance.

1. Lie facedown on the floor. Prop yourself up on your elbows and press your forearms into the floor. Contract your arm muscles and pull your arms toward one another without actually moving them. Keep your chest lifted—don’t let it sink to the floor. Tighten your abdominal muscles and contract your butt. Flex both feet and bend your knees.

2. Straighten your legs, then separate them to form a triangle, keeping your feet about 6 inches off the floor.

3. Bring your legs together, lower them, and return to the starting position. Repeat 4 times.

Reverse the order: Begin with your legs in the Step 3 position, move to the Step 2 position, and end in the Step 1 position. Repeat 4 times.

Do 3 sets of 4 triangles each way.

Caution: Don’t do this exercise if you have low-back pain or disk or knee injuries.
STRAIGHT LEG CIRCLE

Improves hamstring strength and endurance. Strengthens back and abdominal muscles.

1. Lie facedown on the floor. Prop yourself up on your elbows and press your forearms into the floor. Contract your arm muscles and pull your arms toward one another without actually moving them. Keep your chest lifted—don’t let it sink to the floor. Tighten your abdominal muscles and contract your butt as you lift both legs about 4 inches off the floor.

2–3. While keeping your legs straight, simultaneously circle each leg in an outward direction 4 times. Without stopping, do 4 leg circles in an inward direction. This should be a slow, controlled movement. Rest between sets if you need to.

Do 3 sets of 4 outward and 4 inward circles.

Caution: Don’t do this exercise if you have low-back pain or disk injuries.
Make Exercise a Lifestyle

You’ve now finished all three phases of the South Beach Supercharged Fitness Program, and you deserve a huge round of applause. By now, when you look in the mirror, you should be delighted with your reflection. To maintain your good results, you’ll want to incorporate exercise into your daily routine. Here are some tips on how you can go forward with what you’ve learned and adapt it to your own lifestyle.

Continuing with Interval Training

Now that you fully understand the principles of interval training, you can apply them to nearly any type of exercise or sport to enhance your results. You can take the Interval Walking program in this book and use it as a blueprint for an interval cycling or swimming program, for example, or adapt it for the treadmill, stationary bike, or elliptical trainer, as described in “Interval Training Indoors” on “Interval Walking Basics” Section. Better yet, mix up different types of exercise on different days to keep your routine fresh.

If you’ve discovered that you really love walking, simply continue with the Phase 3 program and repeat it in the 4-week cycles described on “Phase 3 Weekly Exercise Plan” Section. Because we know that most people are pressed for time, we intentionally designed the walking program to be 20 minutes long. But if you enjoy doing cardio for a longer period, you can adapt the program to fit your schedule. For example, if you like taking an hour-long walk on weekends, you can certainly do intervals, but don’t try to spend the entire hour working at high intensity. Never forget this key concept: The longer you exercise, the lower the overall intensity of your intervals. And be sure to always add in your recovery periods.

Continuing with the Total Body Workout

Now that you’ve completed all three phases of the Total Body Workout, you’re going to notice how great you look. But these changes go even deeper. You’re now far more aware of how your body works, and your everyday movements are more graceful and purposeful. You stand taller and straighter, and you’re more flexible. Good posture is now second nature to you. Your shoulders don’t slump, your head doesn’t jut forward, and your belly doesn’t sag. You’re using your core muscles to hold you up and keep your body in proper alignment, and you look and feel better for it. You may be surprised that a nagging ache in your knee or pain in your lower back has vastly improved or even disappeared. And you are undoubtedly delighted that your abdominal muscles are flatter and stronger and your arms and legs are leaner and better defined.

Sticking with our core functional fitness program and adapting it to your lifestyle will help you maintain a toned body for the rest of your life. Here are some suggestions on how you can keep the Total Body Workout working for you.

Do two phases in succession. You can create your own workout by combining the exercises from any two phases. Do all the exercises in Phase 1 and then go right into Phase 2 or 3, or do all the exercises in Phase 2 followed by Phase 3. Keep the workout fresh by doing different exercise combinations on alternate days. Don’t work so fast that you’re sloppy, but try to do both workouts in under 30 minutes.

Do three phases in succession. For a fun, high-energy workout that’s also a real challenge, once a week set aside an hour to do all the exercises in all three phases.

Do Phase 1 anytime. Phase 1 contains basic movements that make you feel great. All of the chair exercises can be done at your desk in the office or while sitting in your living room. Do them whenever you want to give your joints and muscles a treat. Keeping up with these exercises will help you stay flexible and injury free.

Stops and Starts

Of course there will be times when you must take a day or two off from the Interval Walking program and/or the
Total Body Workout. Skipping a few sessions won’t make a big difference in your overall fitness level. Just pick up where you left off as soon as you are able. If, however, you miss several weeks of exercise, I recommend that you start again with Phase 1 for both the walking and the core exercises. This will gradually prepare your body for a more intense workout and keep you from injury.

**Change It Up**

Whatever activity or activities you choose, you do need to continue to do something. In fact, now that you’re in such good shape, it’s a great time to explore new types of exercise. Maybe you used to love riding your bike outdoors but haven’t been on it in years. On the next beautiful day, take your bike out of the garage and give it a try—just for the sheer joy of it. If you love the feeling, start doing bicycle intervals. Or maybe you’ve always wanted to participate in a walk for your favorite charity but thought that you couldn’t keep up with everyone else. Trust me, after you’ve completed the three phases of the Interval Walking program, the other participants will have trouble keeping up with you. Or maybe you’ve always wanted to try Pilates, go ballroom dancing, or take a Spinning class at the gym. Stop thinking about it—do it! Experiment with different forms of exercise and see what you really enjoy. Doctor’s orders!

Staying active will prevent the weight you’ve lost from creeping back and will keep you fit and healthy for your entire life.

And that’s what the South Beach Diet is all about.
Supercharged Eating on The South Beach Diet
Getting Started on the South Beach Diet

If you’re new to the South Beach Diet, you’re undoubtedly eager to begin losing unwanted pounds and improving your health. On the following pages, you will find all the tools you need to get started. The secret to looking and feeling great is literally right at your fingertips.

If you’re already a follower of the South Beach Diet, you’re probably eager to see what’s new. I’m delighted to say that we’re providing expanded lists of Foods to Enjoy, as well as helpful new Meal Plans and fresh, delicious, easy-to-prepare recipes for Phases 1 and 2.

I’ve also been listening to you for 5 years—in my practice, in my daily encounters, and on SouthBeachDiet.com. Some questions about the diet seem to come up time and again. Therefore, I’ve provided a question and answer section for each phase.

So let’s get started.

By now you know that the South Beach Diet is divided into three phases. On “Phase 1 Foods to Enjoy” Section, you’ll find the Phase 1 Foods to Enjoy list, followed by Phase 1 Foods to Avoid. The Phase 1 Foods to Enjoy include the lean proteins, good fats, good carbohydrates (vegetables and legumes), and low-fat dairy products that you’re allowed to eat during this 2-week phase. Bear in mind that even on this, the strictest phase of the diet, the Foods to Enjoy list is much longer than the Foods to Avoid list. Furthermore, it will be only 2 weeks before you start Phase 2 and can resume eating fruits and whole grains again. I guarantee that if you plan your meals and snacks around the Foods to Enjoy list for Phase 1, you will feel satisfied, and your cravings for sweets and starchy carbs will likely disappear.

On “Foods to Reintroduce on Phase 2” Section, you’ll find the list of Foods to Reintroduce on Phase 2. As you move from Phase 1 to Phase 2, you will gradually add these foods back into your diet (“PHASE 2: Achieving Your Health and Weight Loss Goals” Section explains how to do this while continuing to lose weight).

If you are starting the diet with Phase 2, you can eat all the foods allowed on Phase 1 (see “Phase 1 Foods to Enjoy” Section), as well as those allowed on Phase 2, but there are still a few foods to be careful about because they are high in refined starches or sugar. On “Phase 2 Foods to Avoid or Eat Rarely” Section, you will find the lists of Phase 2 Foods to Avoid or Eat Rarely. Eventually, you’ll learn how to make the best food choices most of the time—and the South Beach Diet will become a lifestyle—but while you’re still trying to lose weight on Phase 2, it’s best to steer clear of the Foods to Avoid. We’re not expecting perfection; a little cheat now and then is okay. Once you become familiar with the healthy eating principles of the South Beach Diet, it will be easy for you to put meals together at home or on the go. But at first, you’ll probably need to refer to the food lists from time to time. In fact, we’ve found that many people like to photocopy the lists and carry them around until knowing which foods to eat becomes second nature.

To make it even easier for you to incorporate these enjoyable foods into your daily diet, we have provided 2 weeks of Sample Meal Plans for Phases 1 and 2. These are meant to be guidelines, not absolutes. I’ve had people walk over to me in airports or shopping malls, clutching their copies of the original South Beach Diet book, and ask, “Since I don’t like hummus, can I eat a different snack on Day 13?” or “I don’t eat pork. Can I substitute smoked salmon for Canadian bacon and eat it with my eggs on Day 9?” The answer to both questions is yes. We understand that not everyone has the same tastes in food and some people have dietary restraints. The point is, we want you to eat foods you like. That’s why we’ve provided you with enough choices to give you plenty of options.

What about Portion Size?

The South Beach Diet doesn’t require you to weigh, measure, or count what you eat in ounces, calories, grams of fat or carbohydrate, or any other way. Weighing, measuring, and counting can be a nuisance, and it certainly isn’t in harmony with turning a diet into a lifestyle. It’s also difficult to sustain.

But while we don’t count calories, calories do count. It’s the quality of those calories that naturally leads to appropriate hunger satisfaction. Generally, if you are making the right food choices, the amount you’re eating takes care of itself. By enjoying meals consisting of lean protein and nutrient- and fiber-rich foods, you will naturally feel
satisfied and have no desire to overeat.

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**A DIET FOR THE REAL WORLD**

We may have our principles, but we’re not doctrinaire. The South Beach Diet is for people living in the real world. We don’t expect you to be perfect, and you shouldn’t expect perfection from yourself, either. Our goal is to teach you how to make good food choices most of the time. If, on occasion, you indulge in a few bites of chocolate cake or half a bag of chips, we don’t want you to feel like all is lost. The worst thing you can do is think, *Oh well, I’ve already blown my diet for today by eating that chocolate cake, so I might as well fill up on junk and start again tomorrow.* When you view the diet as a real lifestyle and not as an interruption to real life, an occasional bad choice won’t throw you. You’ll simply make better choices the next time.

Another way to avoid those once-automatic second helpings is to savor each bite and eat slowly, so that your brain has time to detect your normal rise in blood sugar. Don’t rush your meals. In fact, wait 20 minutes before you even consider going back for seconds. That way, you’ll know if you’re still truly hungry—or if you’re just eating more out of habit or because you didn’t give yourself time for satiety and blood sugar signals to reach your brain.

If you read the Foods to Enjoy lists carefully, you’ll see that while I don’t recommend weighing and measuring most foods, I do strongly suggest that you eat a minimum of 2 cups of vegetables with lunch and dinner and, ideally, ½ cup with breakfast, so that you get the maximum health benefits they provide, including plenty of heart-protective antioxidants and fiber. As you’ll also see, I do make suggestions about amounts of fats, dairy products, and certain condiments. Nuts in particular can be a problem because it’s so easy to eat more than a handful once you get started, so I do limit them to one serving daily (see “Phase 1 Foods to Enjoy” Section).

**Preparing Your Kitchen**

*If you’re starting on Phase 1,* you should clear your kitchen of foods that you will not be eating and stock up on foods you can enjoy. If you have whole-grain products or wine, beer, or other alcohol, simply move them to the back of the pantry; you will be reunited with them in just 2 weeks, when you begin Phase 2. I do recommend that you throw out the junk carbs, however. The chips and doughnuts have to go—especially if you’re prone to cravings. The following list identifies many of the foods that you’ll need to eliminate during Phase 1.

**Baked goods.** All baked goods—even healthy breads made from whole-wheat or other whole-grain flours—must disappear on Phase 1. This includes all breads, cakes, cookies, crackers, cupcakes, muffins (English and otherwise), pastries, and waffles, both homemade and packaged.

**Cereals.** All cereals are off-limits for the first 2 weeks, even oatmeal and bran cereals. Low-sugar, high-fiber cereals reappear on Phase 2.

**Flour.** All flour is eliminated on Phase 1, including flours made from soybeans and nuts. Cornmeal goes, too.

**Packaged snacks.** Get rid of cereal bars, cheese puffs, popcorn, potato chips, pretzels, and the like.

**Pasta.** All pasta—even whole-wheat—is banished during Phase 1. Replace it with spaghetti squash served with marinara sauce.

**Rice.** All varieties, including brown, are off-limits for 2 weeks. Instead, serve your main dish on a bed of lentils or finely chopped cauliflower (which looks like rice) or on a big bed of kale or spinach.

**Starchy vegetables.** No beets, carrots, corn, green peas, sweet or white potatoes, winter squash, or yams on Phase 1. Instead choose a wide variety of high-fiber, nutrient-dense vegetables from our expanded list of Foods to Enjoy. Remember to go through your freezer and get rid of any packaged foods that contain these vegetables as well.

**Beverages.** Eliminate all fruit juices, sodas, and any other drinks containing sugar, fructose, or corn syrup. All alcoholic beverages—beer, cocktails, and wine—are off-limits during Phase 1. Instead, enjoy vegetable juice cocktail, tomato juice, nonsweetened flavored waters, and sugar-free powdered mixes for drinks. Of course, you can always have plain water, club soda, seltzer, and mineral water, as well as herbal teas and the occasional diet soda. You can have caffeinated beverages such as coffee, tea, or diet soda, but don’t go overboard. Interestingly, recent research has shown that caffeine may actually improve insulin resistance in people with diabetes.

**Cheese and dairy.** Clear your refrigerator of all full-fat milk, cheese, yogurt, and cream cheese. Toss the ice
cream and frozen yogurt as well. Instead, stock up on fat-free or 1% milk, fat-free or reduced-fat cheeses, and low-
fat or nonfat plain yogurt.

**Fruit.** No fresh fruits, dried fruits, jellies, or jams are permitted during Phase 1. They are reintroduced in 2
weeks, when you get to Phase 2.

**Oils and fats.** Dispose of all solid vegetable shortening, lard, butter, and hydrogenated oils. Replace them with
extra-virgin olive oil, canola oil, and cooking spray, and with margarines and spreads that do not contain trans fatty
acids.

**Meat and poultry.** Eliminate anything processed that includes sugars, such as honey-baked or maple-cured
ham. Do away with fatty fowl such as duck and goose, paté, dark-meat chicken and turkey (legs and wings),
processed fowl such as packaged chicken nuggets or patties, beef brisket, liver, rib steaks, or other fatty cuts. Instead,
eat the white-meat poultry and lean cuts of meat recommended in the Foods to Enjoy list.

**Soup mixes.** Remove all powdered soup mixes and canned cream soups. Instead, enjoy clear broth or bouillon
soups, gazpacho, and lentil and bean soups. Check labels on all canned soups for hydrogenated oils and other hidden
ingredients.

**Sweeteners.** All sweeteners, except sugar substitutes, are off-limits on Phase 1. These include white sugar,
brown sugar, honey, molasses, and corn syrup. Instead, use the sugar substitute of your choice.

**Condiments.** Remove ketchup, cocktail sauce, and fat-free salad dressings that contain sugar. Instead, use
prepared dressings that contain less than 3 grams of sugar—better yet, make your own healthy salad dressings (see
“Recipes for Phase 1 Meal Plans” Section for recipes).

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**When You’re Dining Out**

The typical American eats about four meals a week outside of the home. When you’re not preparing your own
meals, your diet can quickly become derailed. This is true not only during Phases 1 and 2, when you’re trying to
shed weight, but also during Phase 3, when you’re trying to maintain. A few weeks of poorly chosen restaurant
meals can cause the resurgence of cravings and pack on pounds before you know it. Therefore, it’s essential to learn
how to follow the principles of the South Beach Diet whether you are eating at home, at a restaurant, or on the go.

More than a decade ago, when I first began prescribing the South Beach Diet to my heart patients, eating out
was a real challenge. Trans fats were hard to avoid. They were in nearly all fried and most processed foods. Few
restaurants offered whole-grain bread or pasta, and most served up the white, highly refined stuff. If you found
yourself in a fast-food restaurant, you had to choose between going hungry or filling up on servings of foods laden
with bad fats and refined carbs.

The world has certainly become a friendlier place for people looking for whole grains and other healthy
carbohydrates, and I feel wonderful when magazine and newspaper food editors tell me that the South Beach Diet
has had a lot to do with that change. It’s now not unusual for restaurants and even some fast-food chains to offer
many different types of bread, including whole-grain and whole-wheat sourdough. And when it comes to healthy
oils, the world has gotten smarter as well. These days your waiter won’t look surprised if you ask for a little olive oil
instead of a plate of butter pats. Most chefs will be happy to accommodate your request for fish grilled with olive oil
or lemon juice instead of butter. Even more exciting, many restaurants no longer use trans fats for cooking; in some
cities like New York, trans fats are banned altogether.

Since we first published the South Beach Diet 5 years ago, it’s become easier than ever to follow our healthy
eating principles in just about any restaurant, whether it offers fast food, ethnic dishes, or gourmet cuisine. Here are
some suggestions on how to eat out wisely and well.

**Scan the menu first.** Before selecting a restaurant, review the menu. If all the selections look like they jumped
off your Foods to Avoid list, this place may not be the best choice for you. You can get away with splurges every
once in a while when you are on Phase 3 and have achieved your weight loss goal, but to get to Phase 3, you need to
be more careful during Phases 1 and 2.

**Skip the bread.** If you’re on Phase 1, just say no to the bread basket. You don’t need it. If you’re on Phase 2 or
3, you can enjoy a piece of whole-grain bread or a whole-grain roll on occasion. Have it with olive oil; the fat slows
down the absorption of the carbs by your bloodstream. Even on Phase 3, if you find yourself tempted to empty the
bread basket before you get to the main course, ask the waiter to take it away. If you’re dining with friends, simply
move it far away from you on the table.

**Consider your beverages.** Skip the mixed drink or cocktail and order a nonalcoholic beverage, such as water,
club soda with a twist, diet soda, or unsweetened iced tea. You can have a glass of red or white wine with dinner if
you’re on Phase 2 or 3, but if you start drinking too early in the evening, you may be tempted to have several drinks,
and those liquid calories can really add up.

**Order soup as a first course.** I’m big on soup these days. You should be, too, because it’s a filling way to start a meal. If possible, order a cup as soon as you sit down so that when you order your entrée, you’re not feeling ravenous. If you’re on Phase 1, stick to clear broth or consommé, a plain bean soup, or vegetable soup made with chicken or vegetable stock and thickened with puréed vegetables.

**Have a salad next.** Another trick for filling up before the entrée comes is to order a big salad of mixed greens after your soup. Ask for olive oil and vinegar on the side.

**Pretend you’re at home.** Order your main course the way you would create a healthy meal at home. First, look for lean protein on the menu. Ask for grilled fish or shellfish, white meat chicken or turkey, or a lean cut of beef, such as sirloin or filet mignon. Instead of starchy side dishes, request extra servings of vegetables that have either been steamed or lightly cooked in olive oil or chicken stock.

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**Enjoy Your Favorite Cuisine**

Keep in mind that different cuisines may pose different challenges. Do you love French food but worry about the sauces? Are you crazy about Mexican cuisine but wonder about the cheese and chips? Here are some tips on how you can eat at your favorite ethnic restaurants without compromising the principles of the South Beach Diet.

**Mexican.** For South Beach dieters, Mexican food can be very good or very bad, depending on the choices you make. For starters, pass on the basket of fried tortilla chips. Skip the fat-laden refried beans and rice. Avoid tacos, tortillas, quesadillas, and other refined carbs (like white rice and corn). On the other hand, fajitas—made with strips of grilled chicken, steak, or (better yet) seafood and lots of grilled vegetables—are a great option. If you’re on Phase 1, skip the fajita wrapper and just enjoy the delicious contents. If you’re on Phase 2, try to find a restaurant that offers whole-wheat wrappers, or eat just a bite or two of a regular one.

**Chinese.** There are some 40,000 Chinese restaurants in the United States, so chances are, you’ll be eating in one soon. Authentic Chinese cuisine is very healthy. American-Chinese cuisine is quite different from the real thing. People who visit China for the first time are often surprised that the vegetables are served al dente with little or no sauce, and rice is usually served at the end of the meal, after diners have eaten their fill of other foods. So tell your waiter you want your Chinese food **Chinese** style: no heavy sauces; no deep-fried, breaded food; no fried noodles on the table to get you into trouble; no sweet-and-sour sauce or sugary hoisin sauce. Pass on the rice if you’re on Phase 1. If you’re on Phase 2 or 3, ask for brown rice instead of white. Avoid lo mein noodles and other noodles made from wheat and rice flour. Clear soups with vegetables, or any combination of steamed fresh vegetables with small amounts of meat, poultry, or seafood, are always good options. Lightly sautéed chicken, beef, or pork with vegetables is also a healthy choice. Ask that your food be cooked without MSG, a food additive that can give some people flushing or headaches.

**Greek and Middle Eastern.** Mediterranean restaurants, such as those offering Greek, Turkish, Israeli, or Lebanese cuisine, are great choices. Here you’re likely to find grilled seafood, lamb, and chicken, along with chickpeas, fresh vegetables, and salads with small amounts of feta cheese. Sounds like food right out of the pages of the South Beach Diet, and indeed, much of our plan is modeled on the healthy Mediterranean diet and lifestyle. Even in this South Beach Diet-friendly environment, however, there are some dishes to avoid. If you’re still trying to lose weight, pass on casseroles such as moussaka (lamb or beef, eggplant, and potatoes) and pastitsio (pasta with meat), which are typically made with a high-fat béchamel sauce. If you’re on Phase 3, eat these dishes rarely, as a special treat.

**French.** French cuisine has an undeserved reputation for being bad for dieters. Just look at the people in France. Sure, there’s the heavy haute cuisine smothered in cream sauce and butter, which is not diet friendly. But there is also the lighter, healthier Mediterranean style of French cooking that uses olive oil instead of butter and is abundant in fresh vegetables, fresh fish and shellfish, poultry, and salads. If you’re dining in a French restaurant, you can’t go wrong by ordering fish sautéed in olive oil with a side of vegetables. Enjoy your repast with a glass of red or white wine. Do as the French do—eat slowly and savor your food. End the meal with a small amount of dessert on occasion—a few strawberries, perhaps, or a small piece of dark chocolate. Sounds just like our Phase 3 lifestyle, right?

**Japanese.** It’s a safe bet that a South Beach dieter will find something great in a Japanese restaurant. This cuisine is known for its fresh fish, lightly cooked vegetables, and grilled meat and poultry entrées. Sushi, Japanese-style raw fish served with a small amount of rice, has become one of the most popular foods in the world. You can enjoy sushi on Phase 2 if you ask for it with brown rice, a staple in many Japanese restaurants these days, or request a rice-free roll. If you are on Phase 1, stick to the rice-free rolls or sashimi, thin slices of raw fish served without
When You’re Traveling

As someone who travels often for work, I understand that staying on any diet can be a challenge when you’re on the road. Work-related stress, time-zone changes, and shifts in your eating and sleeping schedule can be very disruptive, not to mention the frustration of getting stuck on a tarmac for hours. All is not lost! With a little advance planning, most people find that they can follow the South Beach Diet on the road almost as easily as if they were at home.

The first step is anticipating where you’re likely to run into trouble. And for many people, that could be in the first few hours after leaving home! In my experience, airport terminals and airplanes can be dangerous territory for dieters. With the combination of long security lines and more frequent delays, air travel has become very stressful. Add to that the fact that many airlines have cut back on food choices and, instead of offering meals or even a meal-size salad (skip the croutons), grilled or rotisserie chicken, and veggie burgers that are lower in fat than the usual hamburger and fries. Drink diet soda, seltzer, or water instead of sugary soda.

Fast-food tips. Many fast-food restaurants now offer healthful alternatives to their normal fare, including meal-size salads (skip the croutons), grilled or rotisserie chicken, and veggie burgers that are lower in fat than the usual hamburger and fries. Drink diet soda, seltzer, or water instead of sugary soda.

If your version of Italian is more pizzeria than trattoria, don’t despair. Today many restaurants offer crispy thin-crust pizza. When you have the option, ask for a whole-wheat crust and low-fat mozzarella cheese. Avoid high-fat toppings such as sausage, meatballs, or pepperoni. Instead, request mushrooms, spinach, or other vegetables—even better, order a salad slice, a thin crust topped with salad and a little low-fat cheese.

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The beauty of the South Beach Diet is that it doesn’t require special foods and is adaptable to virtually any cuisine. If you follow the guidelines suggested above, you’ll be able to find a healthy, satisfying, and delicious meal in most restaurants in the United States and around the world.

Indian. Indian cuisine offers some terrific options for South Beach dieters. Thanks to clever cooking techniques and the liberal use of spices, the same lean protein, good carbs, and good fats you’ve been eating every day take on an exciting new flavor in the hands of an Indian chef. Try the tandoori-style dishes, in which fish, poultry, meat, and/or vegetables are roasted at very high temperatures in a clay oven. Other good choices include dal (a dish made with lentils or various other kinds of beans), raitas (yogurt-based sauces), vegetable salads, curries, and masala-style dishes made with sautéed tomatoes and onions. Many Indian restaurants serve the meal with white basmati rice. Ask your waiter not to bring it, or ask if they have brown basmati. You should also avoid Indian breads such as puri, a puffy, deep-fried flat bread, or naan, which is baked but still typically high in refined carbs. Indian appetizers such as Samosas (triangular fried pastries filled with vegetables) are also off-limits. And be sure to steer clear of dishes cooked with butter and cream.

Italian. To many Americans, Italian food means a heaping plate of lasagna, manicotti, or some other pasta, or a large pepperoni pizza. To Italians, Italian food means starting the meal with a big salad and having a small (and I do mean small) appetizer portion of pasta followed by grilled chicken or seafood with lots of vegetables. By now you know which version of Italian food works better for the South Beach dieter. If you are on Phase 1, skip the bread and pasta and eat just the salad, veggies, and lean fish or chicken. If you’re on Phase 2, you can enjoy a piece of whole-grain bread and even order a small portion of whole-wheat pasta with tomato sauce for an appetizer. Don’t order anything fried or breaded. If you want to eat dessert like an Italian—and you’re on Phase 2—order some fresh fruit and a small slice of Parmesan cheese.

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The first step is anticipating where you’re likely to run into trouble. And for many people, that could be in the first few hours after leaving home! In my experience, airport terminals and airplanes can be dangerous territory for dieters. With the combination of long security lines and more frequent delays, air travel has become very stressful. Add to that the fact that many airlines have cut back on food choices and, instead of offering meals or even a sandwich, now hand out (and charge for) chips, candy bars, and cookies. If you’re not careful, you could be headed for big trouble before you’ve even reached your destination. Depending on the airport, you may be able to buy an acceptable meal, such as a salad, low-fat or nonfat yogurt, or a sandwich on whole-grain bread before boarding the plane. Also be on the lookout for healthy snacks, like a small package of dry-roasted nuts or some low-fat cheese.

If you’re not sure that you’ll be able to find healthy foods, bring your own. (Security will confiscate drinks before you get through the scanners, but they won’t take your food.) Having healthy food on hand is critical if you are on Phase 1 and need to be eating primarily lean protein, vegetables, legumes, and low-fat dairy. So, before you leave home, put some washed, cut-up veggies in a plastic bag and throw in a few pieces of string cheese or some spreadable low-fat cheese wedges, a handful of nuts, and some lean ham or turkey slices. Eat your snacks before you
get ravenous so you’re not tempted to grab the first thing that comes your way.

If you’re on Phase 2 or 3, you can pack a white-meat turkey, reduced-fat ham, or natural peanut butter sandwich on whole-grain bread and a piece of fruit or two, along with some reduced-fat cheese and cut-up vegetables. Or buy a low-fat plain or artificially sweetened yogurt before boarding.

Hotel rooms with mini bars stuffed with candy and chips can also spell big trouble. Don’t even open the mini bar—not even just to look. If you’re hungry, check out the room-service menu or go down to the hotel restaurant, where you will definitely find something better to eat. Pretend you’re at home, and order something that closely resembles what you would normally eat for dinner. My favorite on-the-road meals include Caesar salad with grilled chicken (ask the kitchen to hold those fried white-bread croutons) and dressing on the side, grilled salmon with vegetables, or a turkey burger with a big salad and olive oil and vinegar on the side. My point is, you don’t have to order the cheeseburger and fries. If you do, you won’t respect yourself in the morning.

It’s also important to try to keep up with your fitness routine when you’re traveling. Besides burning calories, it will help motivate you to stick with your diet, and it’s a great stress reliever. Fortunately, you can do our Total Body Workout right in your hotel room. Interval Walking may be a bit trickier to accomplish. Depending on where you’re staying, you may not be able to walk outdoors, but many hotels have gyms with cardio equipment such as treadmills, stationary bikes, or elliptical trainers. If you can, try to stay in a hotel that has a gym. I give a few suggestions for doing interval cardio with and without a machine in “Interval Training Indoors” on “Interval Walking Basics” Section.

Remember that even if you miss a few workout sessions, it’s not the end of the world. When you get back home, you’ll pick up where you left off.
PHASE 1

Losing the Cravings

Do you have 10 or more pounds to lose? Do you have food cravings for refined starches and sugar? If you replied yes to either question, Phase 1 is for you. If you answered no to both questions, you can begin the diet with Phase 2.

Phase 1 is the most restrictive phase of the diet, but it’s also the shortest, lasting only 2 weeks. During Phase 1, you will not eat any starches or sugary foods. No refined white bread, pasta, or rice. No cakes, cookies, or pastries. No beer or alcohol of any kind. Not even any whole grains or whole fruits, two “good” carbohydrates that I reintroduce on Phase 2. Fruits (and especially fruit juices) can be high in natural sugars, and even whole grains can be a problem when you’re trying to stabilize your blood sugar and eliminate the cravings that caused you trouble in the past. By eliminating problem foods, Phase 1 allows you to gain control over your food choices. Although this may seem hard at first, remember that this phase is only 2 weeks long, after which you’ll be adding many of these foods back into your diet.

In fact, Phase 1 may not be as difficult as you expect because you’re not going to be hungry. After the first couple of days, most dieters find it fairly easy. During Phase 1 you’ll eat plenty of healthy food, including lean protein (fish and shellfish, skinless white-meat poultry, and lean cuts of meat), high-fiber vegetables, nuts, reduced-fat cheeses, eggs, low-fat dairy, and good unsaturated fats, such as extra-virgin olive oil and canola oil. (No, you won’t have to eat your salads dry.) You’ll enjoy three satisfying meals a day, plus two snacks, and you’ll even have some high-protein, low-sugar desserts, such as the Ricotta Cheesecake with Lemon Drizzle and Pine Nuts on “Recipes for Phase 1 Meal Plans” Section.

Snacks are required on Phase 1 and should be eaten 1 to 2 hours after a meal or an hour before your cravings typically strike. The goal is to fight hunger before it hits because if you let yourself get too famished, you’ll have a greater tendency to overeat. The best snack is one that combines some protein and some high-fiber vegetables—for example, you might have some lean white-meat turkey, fat-free or reduced-fat cheese, plain nonfat or low-fat yogurt with a handful of nuts, or some hummus with some celery sticks or bell pepper slices.

By the end of 2 short weeks, there will be a real difference in how you look and feel. Most people lose weight fairly quickly on Phase 1, especially in their bellies. While quick weight loss is a strong motivator, it’s not the primary goal of Phase 1. This phase is designed to banish your food cravings so that you can start Phase 2 with a clean slate. You’ll be well on the way to making good food choices most of the time, which is what the South Beach Diet is all about. For the most part, by the end of Phase 1, your cravings will be gone, you’ll feel lighter, and your clothes will fit a lot better.

On the following pages, we provide a list of Foods to Enjoy and Foods to Avoid during this phase, as well as 14 days of Sample Meal Plans for Phase 1. To support the meal plans, we’ve developed plenty of delicious, new, quick-and-easy recipes, many of them time-saving one-dish meals, and we’ve included some of your all-time favorite recipes as well. In addition, there are a number of recipes developed for the Phase 2 Meal Plans that you can enjoy. We have provided a note at the end of the Phase 2 recipes where this pertains.

The wide variety on the Foods to Enjoy list allows you to mix and match foods to fit your taste preferences. For example, if you don’t like ham in your omelet, which I recommend on Day 1, substitute salmon or vegetables. Not a fan of cod on Day 6? Substitute another firm white-fleshed fish, like halibut. These Sample Meal Plans really are meant to be guidelines, and you should adjust them to suit your personal tastes.

In addition, on “Dr. Agatston Answers Your Questions about Phase 1” Section, you’ll find answers to some of the questions our nutritionists and I are most commonly asked about Phase 1. If you have additional questions, it’s likely you’ll find the answers on our Web site, SouthBeachDiet.com.

As I explained in Part II, adding daily exercise to Phase 1 of the diet will certainly help move your weight loss along faster. Successful South Beach dieters tell us that when they start to lose weight on Phase 1, they feel so much lighter and have so much more energy that they’re inspired to become even more active. They not only walk more
but are more motivated to pursue other forms of regular exercise as well.

Therefore, as you embark on Phase 1 of the diet, I urge you to also embark on Phase 1 of our new three-phase South Beach Supercharged Fitness Program (“PHASE 1: Supercharged Fitness Program” Section). You will certainly lose more weight faster if you’re active on a regular basis.

Phase 1 of the diet may be the hardest for you, but you’ll find that the Phase 1 fitness program is the easiest. What they have in common is that both help you become leaner and healthier.

PHASE 1 FOODS TO ENJOY

**BEEF**

Lean* cuts, such as:
- Bottom round
- Eye of round
- Flank steak
- Ground beef:
  - Extra lean
  - Lean sirloin
- London broil
- Pastrami, lean
- Sirloin steak
- T-bone
- Tenderloin (filet mignon)
- Top loin
- Top round

**POULTRY (SKINLESS)**

- Cornish hen
- Ground breast of chicken
- Ground breast of turkey
- Low-fat turkey sausage (3–6 g fat per 60 g serving)
- Turkey bacon
- Turkey or chicken breast

**SEAFOOD**

- All types of fish and shellfish (limit those high in mercury and other contaminants, such as swordfish, tilefish, albacore tuna—use light tuna instead—and shark)
- Salmon roe
- Sashimi

**PORK**

- Boiled ham
- Canadian bacon
- Loin, chop or roast
- Tenderloin
VEAL
- Chop
- Cutlet, leg
- Top round

LAMB (REMOVE ALL VISIBLE FAT)
- Leg, center cut
- Loin, chop or roast

GAME MEATS
- Buffalo
- Elk
- Ostrich
- Venison

COLD CUTS (FAT-FREE OR LOW-FAT ONLY)
- Boiled ham
- Deli-sliced turkey breast
- Lean deli roast beef
- Smoked ham
- Smoked turkey breast

SOY-BASED MEAT
SUBSTITUTES
Unless otherwise stated, look for products that have 6 g or less fat per 2–3 oz. serving.
- Seiten
- Soy bacon
- Soy burger
- Soy chicken, un breaded
- Soy crumbles—¼ cup (2 oz.) suggested serving size
- Soy hot dogs
- Soy sausage patties and links
- Tempeh—¼ cup suggested serving size
- Tofu (all varieties)—½ cup suggested serving size
- Yuba (bean curd on sheet)

CHEESE (FAT-FREE OR REDUCED-FAT)
For hard cheese, look for varieties that have 6 g or less fat per ounce.
- American
- Blue cheese (does not come as reduced fat, so use in moderation)
- Cheddar
- Cottage cheese, 1%, 2%, or fat-free
- Feta
- Mozzarella
- Parmesan
- Part-skim ricotta
- Part-skim string
- Provolone
Swiss

**EGGS**

*The use of whole eggs is not limited unless otherwise directed by your doctor. Egg whites and egg substitutes are okay.*

**DAIRY**

*Except for half-and-half, 2 cups allowed daily, including nonfat or low-fat plain yogurt.*

- Buttermilk, 1% or fat-free
- Greek yogurt, nonfat
- Half-and-half, fat-free (2 Tbsp.)
- Milk, 1% or fat-free
- Soymilk, low-fat plain, vanilla, or artificially sweetened (4 g or less fat per 8 oz. serving). Be sure that the product does not contain high-fructose corn syrup.
- Yogurt, low-fat or nonfat plain

**LEGUMES**

*Fresh, frozen, or canned (without added sugar). Start with a 1/3- to ½-cup serving size.*

- Adzuki beans
- Black beans
- Black-eyed peas
- Broad beans
- Butter beans
- Cannellini beans
- Chickpeas (garbanzos)
- Edamame
- Fava beans
- Great Northern beans
- Italian beans
- Kidney beans
- Lentils
- Lima beans
- Mung beans
- Navy beans
- Pigeon beans
- Pinto beans
- Refried beans, fat-free, canned
- Soy beans
- Split peas
- White beans

**VEGETABLES**

*May use fresh, frozen, or canned without added sugar. Eat a minimum of 2 cups with lunch and dinner.*

- Artichoke hearts
- Artichokes
- Arugula
- Asparagus
- Bok choy
- Broccoli
- Broccoli rabe
Broccoli sprouts
Brussels sprouts
Cabbage (green, red, Napa, Savoy)
Capers
Cauliflower
Celeriac (celery root)
Celery
Chayote
Collard greens
Cucumbers
Daikon radish
Eggplant
Endive
Escarole
Fennel
Fiddlehead ferns
Garlic
Grape leaves
Green beans
Hearts of palm
Jicama
Kale
Kohlrabi
Leeks
Lettuce (all varieties)
Mushrooms (all varieties)
Mustard greens
Okra
Onions
Parsley
Pepperoncini
Peppers (all varieties)
Pickles (dill or artificially sweetened)
Pimientos
Radicchio
Radishes
Rhubarb
Sauerkraut
Scallions
Sea vegetables (seaweed, nori)
Shallots
Snap peas
Snow peas
Spinach
Sprouts (alfalfa, bean, broccoli, lentil, radish, sunflower)
Squash (spaghetti, summer, yellow, zucchini)
Swiss chard
Tomatoes (all varieties)
Tomato juice
Turnip greens
Vegetable juice cocktail
Water chestnuts
Watercress
Wax beans
NUTS AND SEEDS

Limit to one serving per day as specified. Dry roasted recommended.

- Almonds—15
- Brazil nuts—4
- Cashews—15
- Chestnuts—6
- Edamame, dry roasted—¼ cup
- Filberts—25
- Flaxseed—3 Tbsp. (1 oz.)
- Hazelnuts—25
- Macadamias—8
- Peanut butter, natural, and other nut butters—2 Tbsp.
- Peanuts, dry roasted or boiled—20 small
- Pecans—15
- Pine nuts (pignoli)—1 oz.
- Pistachios—30
- Pumpkin seeds—3 Tbsp. (1 oz.)
- Sesame seeds—3 Tbsp. (1 oz.)
- Soy nuts—¼ cup
- Sunflower seeds—3 Tbsp. (1 oz.)
- Walnuts—15

FATS AND OILS

Up to 2 Tbsp. of the following fats or oils are allowed daily. Monounsaturated oils are particularly recommended.

Monounsaturated Oils

- Canola
- Olive (particularly extra-virgin)

Polyunsaturated Oils or a Blend of Monounsaturated and Polyunsaturated

- Corn
- Flaxseed
- Grapeseed
- Peanut
- Safflower
- Sesame
- Soybean
- Sunflower

Other Fat Choices

- Avocado—1/3 whole = 1 Tbsp. oil
- Guacamole—1/2 c. = 1 Tbsp. oil
- Margarine, trans fat-free—2 Tbsp.
- Mayonnaise, low-fat—2 Tbsp. (avoid varieties made with high-fructose corn syrup)
- Mayonnaise, regular—1 Tbsp.
- Olives (green or ripe)—15 = 1/2 Tbsp. oil
- Salad dressing—2 Tbsp. Use those that contain 3 g sugar or less per 2 Tbsp. Best choices contain canola or olive oil; dressings labeled “low-carb” may only be used if they meet these guidelines.
Trans fat-free spreads—2 Tbsp.

SEASONINGS AND CONDIMENTS
All spices that contain no added sugar
Broth
Coconut milk, lite
Espresso powder
Extracts (almond, vanilla, or others)
Horseradish and horseradish sauce
Lemon juice
Lime juice
Pepper (black, cayenne, red, white)
Salsa (check label for added sugar)
Trans fat-free cooking spray
Use the following toppings and sauces sparingly; check label for added sugar or monosodium glutamate (MSG).
Cream cheese, fat-free or light—2 Tbsp.
Hot pepper sauce

PHASE 1 FOODS TO ENJOY
“Low-carb” condiments may only be used if they are trans fat-free and contain no added sugar.
Miso—½ Tbsp.
Shoyu—½ Tbsp.
Sour cream, light or reduced-fat—2 Tbsp.
Soy sauce—½ Tbsp.
Steak sauce—½ Tbsp.
Taco sauce—1 Tbsp.
Tamari—1 Tbsp.
Whipped topping, light or fat-free—2 Tbsp.
Worcestershire sauce—1 Tbsp.

SWEET TREATS
Limit to 75–100 calories per day.
Candies, hard, sugar-free
Chocolate powder, no sugar added
Chocolate syrup, sugar-free
Cocoa powder, unsweetened baking type (also for cocoa)
Drink mix, sugar-free and nutrient-enhanced
Fudgsicles, no sugar added
Gelatin, sugar-free
Gum, sugar-free
Jams and jellies, sugar-free
Popsicles, sugar-free
Syrups, sugar-free
Some sugar-free products may be made with sugar alcohols (isomalt, lactitol, mannitol, sorbitol, or xylitol) and are permitted on the South Beach Diet. They may have associated side effects of gastrointestinal distress if consumed in excessive amounts.

SUGAR SUBSTITUTE
Acesulfame K
Aspartame (NutraSweet, Equal)
Fructose (count as Sweet Treats, 75–100 calorie limit)
Saccharin (Sweet’N Low)
Sucralose (Splenda)

Some sugar substitutes may be made with sugar alcohols (isomalt, lactitol, mannitol, sorbitol, or xylitol) and are permitted on the South Beach Diet. They may have associated side effects of gastrointestinal distress if consumed in large amounts.

BEVERAGES
Caffeinated and decaffeinated coffee and tea (drink caffeinated in moderation)
Diet, caffeinated and decaffeinated, sugar-free sodas and drinks (drink caffeinated in moderation)
Herbal teas (such as peppermint and chamomile)
Milk, 1% or fat-free
Soymilk, low-fat plain, vanilla, or sucralose-containing (4 g or less fat per 8 oz. serving). Be sure that the product does not contain high-fructose corn syrup.
Sugar-free powdered drink mixes
Tomato juice
Vegetable juice cocktail

PHASE 1 FOODS TO AVOID

BEEF
- Brisket
- Jerky, unless homemade without sugar
- Liver
- Prime rib
- Rib steak
- Skirt steak

POULTRY
- Chicken, wings and legs
- Duck
- Goose
- Turkey, dark meat (including wings and thighs)

PORK
- Bacon
- Honey-baked ham
- Pork rinds

VEAL
- Breast

DAIRY
- Ice cream
- Milk, 2% or whole
- Soymilk, whole
Yogurt, cup-style and frozen

**CHEESE**
Full-fat

**FRUITS**
*Avoid all fruits and fruit juices on Phase 1.*

**VEGETABLES**
Beets  
Carrots  
Corn  
Green peas  
Potatoes, sweet  
Potatoes, white  
Pumpkin  
Squash, winter  
Turnips (root)  
Yams

**STARCHES**
*Avoid all starchy food on Phase 1, including:*  
Bread, all types  
Cereal, all types  
Croutons, all types  
Matzo  
Oatmeal  
Pasta, all types  
Pastries and baked goods, all types  
Rice, all types

**CONDIMENTS**
Cocktail sauce  
Ketchup

**BEVERAGES**
Alcohol of any kind, including beer and wine  
Fruit juice, all types  
Milk, full-fat and 2%  
Powdered drink mixes containing sugar  
Soda and other drinks containing sugar  
Soymilk with more than 4 g fat per 8 oz. serving

**PHASE 1 SAMPLE MEAL PLAN**

**DAY 1**
BREAKFAST
   6 ounces vegetable juice cocktail
   Ham and cheese omelet with chives
   Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
   Vegetable dippers with avocado-cilantro guacamole (1/3 avocado mashed with 1/3 cup reduced-fat cottage cheese, chopped onion, minced garlic, minced cilantro, and red pepper flakes)

LUNCH
   Chock-Full-of-Veggies Chili ("Recipes for Phase 1 Meal Plans" Section)
   Large mixed green salad
   2 tablespoons Ranch Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

MIDAFTERNOON SNACK
   Chilled shrimp cocktail with spicy red pepper sauce (for the sauce, in a blender, combine 1 diced red bell pepper with 2 tablespoons reduced-fat sour cream, 1 clove garlic, and hot pepper sauce to taste)

DINNER
   Grilled sirloin steak (grill extra for Day 2 lunch)
   Hearts of Palm “Potato” Salad ("Recipes for Phase 1 Meal Plans" Section)
   Grilled bell peppers and onions with minced garlic and balsamic vinegar (grill ahead and let marinate in the dressing for best flavor)

DESSERT
   Maple-Almond Flan ("Recipes for Phase 1 Meal Plans" Section)

DAY 2

BREAKFAST
   6 ounces vegetable juice cocktail
   Vegetable Quiche Cups to Go ("Recipes for Phase 1 Meal Plans" Section)
   Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
   1 ounce reduced-fat cheddar cheese cubes with grape tomatoes

LUNCH
   Clear mushroom soup (chicken broth and reconstituted dried mushrooms)
   Sliced steak on a bed of mixed greens (use leftover steak from Day 1 dinner)
   2 tablespoons Lemon Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing
MIDAFTERNOON SNACK
Grilled Chicken and Roasted Red Pepper Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

DINNER
South Beach Diet Shepherd’s Pie ("Recipes for Phase 1 Meal Plans" Section)
Radicchio and endive salad
2 tablespoons Dijon Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

DESSERT
Peanut butter delight (in a blender, process ½ cup part-skim ricotta, 1 tablespoon natural peanut butter, ½ teaspoon vanilla extract, and 1 packet sugar substitute until smooth; chill and serve)

PHASE 1 SAMPLE MEAL PLAN

DAY 3

BREAKFAST
6 ounces tomato juice
Poached egg and salmon Florentine (1 poached egg with smoked salmon served on ½ cup spinach cooked in olive oil)

MIDMORNING SNACK
Tex-Mex Smoked Turkey Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

LUNCH
Phase 1 soup of your choice, optional ("Recipes for Phase 1 Meal Plans" Section)
Chopped salad with tuna and white beans (on a bed of chopped romaine, layer 6 ounces light tuna with chopped cucumber, tomato, celery, and radishes; ½ cup canned white beans; and ⅓ cup diced avocado)

MIDAFTERNOON SNACK
Plum tomato halves topped with 1 ounce reduced-fat turkey pepperoni slices (crisp the pepperoni in the microwave)

DINNER
Roasted rotisserie chicken on a bed of mixed greens with toasted pistachios (buy supermarket rotisserie chicken breast and get extra for Day 4 lunch)
2 tablespoons Green Goddess Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing
Roasted artichoke hearts (toss thawed frozen artichoke hearts with a little olive oil, sea salt, and freshly ground black pepper and bake at 350°F until crisped)

DESSERT
Lime Zest Ricotta Crème ("Recipes for Phase 1 Meal Plans" Section)
PHASE 1 SAMPLE MEAL PLAN

DAY 4

BREAKFAST
6 ounces vegetable juice cocktail
2 eggs scrambled with chopped onion and roasted red peppers (from a jar)
Turkey bacon
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Roast Beef and Horseradish Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

LUNCH
Green Gazpacho ("Recipes for Phase 1 Meal Plans" Section)
Southwestern chicken salad (toss leftover chicken from Day 3 dinner with up to ½ cup canned black beans, \(\frac{1}{3}\) diced small avocado, chopped scallions, and prepared salsa; serve on a bed of greens)

MIDAFTERNOON SNACK
Celery sticks stuffed with 1 wedge French onion and garlic reduced-fat spreadable cheese

DINNER
Grilled Salmon with Tomatoes, Spinach, and Capers ("Recipes for Phase 1 Meal Plans" Section; make extra for Day 5 lunch)
Jicama and red onion salad
2 tablespoons Blue Cheese Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

DESSERT
Chilled Espresso Custard ("Recipes for Phase 1 Meal Plans" Section)

PHASE 1 SAMPLE MEAL PLAN

DAY 5

BREAKFAST
6 ounces vegetable juice cocktail
Asparagus and mushroom omelet (cook asparagus and mushrooms in olive oil before filling)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Caprese bites (cut 1 part-skim mozzarella stick into 4 pieces; place each piece in a hollowed-out cherry tomato and microwave to melt cheese, if desired)
LUNCH
Phase 1 soup of your choice, optional (“Recipes for Phase 1 Meal Plans” Section)
Easy salmon salad (toss leftover salmon from Day 4 dinner with diced cucumber, watercress, 2 tablespoons reduced-fat sour cream, and chopped dill)

MIDAFTEROMNOON SNACK
Vegetable dippers with Indian-style yogurt dip (mix nonfat or low-fat yogurt with a little ground cumin, coriander, and turmeric)

DINNER
Homestyle Turkey Meatloaf with Mushrooms and White Beans (“Recipes for Phase 1 Meal Plans” Section)
Mixed baby lettuces with ¼ cup toasted pine nuts
2 tablespoons Dijon Vinaigrette (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing

DESSERT
Cocoa-Nut Mousse (“Recipes for Phase 1 Meal Plans” Section)

PHASE 1 SAMPLE MEAL PLAN

DAY 6

BREAKFAST
6 ounces vegetable juice cocktail
Portobello breakfast stack (top a portobello mushroom with a slice of tomato and broil 3 minutes; top mushroom with scrambled eggs and chopped chives)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
1 reduced-fat spreadable cheese wedge with cucumber sticks

LUNCH
Cobb salad (top chopped romaine with diced smoked deli chicken, \( \frac{1}{3} \) diced small avocado, 2 slices crumbled cooked turkey bacon, and chopped tomatoes and red onion)
2 tablespoons Lime Vinaigrette (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing

MIDAFTEROMNOON SNACK
4 Labne Balls (“Recipes for Phase 1 Meal Plans” Section) with crudités

DINNER
Mediterranean Skillet Cod (“Recipes for Phase 1 Meal Plans” Section)
Oven-roasted asparagus with lemon zest and black pepper
Julienneed vegetable salad with crumbled reduced-fat feta cheese
2 tablespoons Balsamic Vinaigrette (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing
DESSERT
No-sugar-added Fudgsicle with an 8-ounce glass of 1% or fat-free milk

PHASE 1 SAMPLE MEAL PLAN
DAY 7

BREAKFAST
6 ounces tomato juice
Spanish Artichoke “Tortilla” (Recipes for Phase 1 Meal Plans Section)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
1 ounce assorted reduced-fat cheese cubes with crudités

LUNCH
Lump crabmeat salad in a tomato bowl (mix 4 ounces lump crabmeat, ¼ cup finely diced bell pepper, and 1 minced scallion with 1 tablespoon mayonnaise and 1 tablespoon nonfat plain yogurt; serve in a hollowed-out tomato)
Sugar-free Popsicle

MIDAFTERNOON SNACK
Latte with fat-free milk (sweetened with sugar substitute, if desired)
30 pistachios

DINNER
Ginger-Dijon Glazed Pork Tenderloin (Recipes for Phase 1 Meal Plans Section; make extra for Day 8 lunch)
Surprise South Beach Diet Mashed “Potatoes” (Recipes for Phase 1 Meal Plans Section)
Assorted grilled vegetables, such as asparagus, zucchini, and bell peppers

DESSERT
Baked Ricotta Custard (Recipes for Phase 1 Meal Plans Section)

PHASE 1 SAMPLE MEAL PLAN
DAY 8

BREAKFAST
6 ounces vegetable juice cocktail
Chunky Vegetable Hash (Recipes for Phase 1 Meal Plans Section)
1 or 2 eggs, any style
Coffee or tea with 1% or fat-free milk and sugar substitute
MIDMORNING SNACK
4 ounces nonfat Greek yogurt with a dash of almond extract

LUNCH
Tomato Soup with Veggies and Lima Beans ("Recipes for Phase 1 Meal Plans" Section)
Sliced pork loin (use leftovers from Day 7 dinner) on a bed of baby greens
2 tablespoons Lemony Dill Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

MIDAFTEERNOON SNACK
Curried Turkey Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

DINNER
Pecan-Crusted Trout ("Recipes for Phase 1 Meal Plans" Section)
Collard greens cooked with garlic and olive oil
Red Bean Mash ("Recipes for Phase 1 Meal Plans" Section)

DESSERT
Vanilla Ricotta Crème ("Recipes for Phase 1 Meal Plans" Section)

PHASE 1 SAMPLE MEAL PLAN

DAY 9

BREAKFAST
6 ounces vegetable juice cocktail
2 scrambled eggs in a Canadian bacon cup
Sliced garden tomatoes
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Smoked salmon with 1 ounce fat-free or light cream cheese and capers on endive leaves

LUNCH
Sirloin burger with 2 ounces melted reduced-fat Swiss cheese, Dijon mustard, and tomato on a bed of lettuce
Three-bean salad (combine equal amounts of black beans, kidney beans, and chickpeas with chopped red onion; toss with a dressing of your choice, "Recipes for Phase 1 Meal Plans" Section); serve yourself ½ cup

MIDAFTEERNOON SNACK
4 ounces reduced-fat cottage cheese with bell pepper strips

DINNER
Vegetable Moussaka ("Recipes for Phase 1 Meal Plans" Section)
Radish, cucumber, and scallion salad
2 tablespoons Ranch Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

DESSERT
Nonfat Greek yogurt with 1 tablespoon South Beach Diet Nutty Granola Topping ("Recipes for Phase 1 Meal Plans" Section)

DAY 10

BREAKFAST
Wake-up energy shake (blend ½ cup low-fat, low-sugar artificially sweetened vanilla soymilk, ½ cup nonfat plain yogurt, 3 ounces firm silken tofu, and ¼ cup dry-roasted almonds until frothy)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
California Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

LUNCH
South Beach Diet Phase 1 soup of your choice ("Recipes for Phase 1 Meal Plans" Section)
Grilled tuna steak (marinate 1 hour in ginger- and garlic-flavored olive oil; use for basting)
Steamed green and yellow beans with grated lemon zest

MID AFTERNOON SNACK
15 almonds and an 8-ounce glass of 1% or fat-free milk

DINNER
Moroccan Lemon Chicken with Summer Squash and Green Olives ("Recipes for Phase 1 Meal Plans" Section)
Fennel and red onion salad with chopped kalamata olives
2 tablespoons Spicy Lemon-Cumin Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
Vanilla chill (blend 1 cup nonfat or low-fat plain yogurt, \(\frac{2}{3}\) cup low-fat plain or artificially sweetened soymilk, 1 teaspoon vanilla extract, ice cubes, and a sprinkling of cinnamon until frothy)

PHASE 1 SAMPLE MEAL PLAN

DAY 11

BREAKFAST
6 ounces vegetable juice cocktail
Red Bean Cakes ("Recipes for Phase 1 Meal Plans" Section) topped with scrambled eggs and prepared salsa
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**  
Celery sticks with 2 tablespoons natural peanut butter

**LUNCH**  
Grilled turkey burger with tomato and onion on a bed of watercress  
2 tablespoons Thousand Island Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

**MIDAFTERNOON SNACK**  
½ cup shelled edamame with sea salt

**DINNER**  
Spicy Shrimp and Bok Choy Stir-Fry ("Recipes for Phase 1 Meal Plans" Section)  
Spaghetti squash tossed with black pepper and 2 tablespoons Lemon Vinaigrette ("Recipes for Phase 1 Meal Plans" Section)

**DESSERT**  
Ricotta crème of your choice ("Recipes for Phase 1 Meal Plans" Section)

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**PHASE 1 SAMPLE MEAL PLAN**

**DAY 12**

**BREAKFAST**  
6 ounces vegetable juice cocktail  
Cheddar cheese omelet  
Sliced garden tomatoes  
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**  
Smoked salmon on cucumber rounds

**LUNCH**  
Provençal White Bean Soup ("Recipes for Phase 1 Meal Plans" Section)  
Endive salad with toasted walnuts and reduced-fat goat cheese  
2 tablespoons Dijon Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

**MIDAFTERNOON SNACK**  
Baba ghannouj with veggie dippers
DINNER
Skillet Pork Chops with Sautéed Swiss Chard ("Recipes for Phase 1 Meal Plans" Section)
Red leaf lettuce salad
2 tablespoons Blue Cheese Dressing ("Recipes for Phase 1 Meal Plans" Section) or prepared dressing of your choice

DESSERT
Creamy Lemon-Vanilla Ricotta Soufflé ("Recipes for Phase 1 Meal Plans" Section)

PHASE 1 SAMPLE MEAL PLAN

DAY 13

BREAKFAST
6 ounces vegetable juice cocktail
Veggie scrambled eggs (cook chopped mushrooms, zucchini, and onions in extra-virgin olive oil before scrambling with 2 eggs)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Hummus with red peppers, celery, and cucumber sticks

LUNCH
Light water-packed tuna with tomato and onion slices on a bed of greens
2 tablespoons Creamy Cilantro Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

MID AFTERNOON SNACK
¼ cup dry-roasted soy nuts
8-ounce glass of fat-free or 1% milk

DINNER
Sautéed Lamb with Spinach and Chickpeas ("Recipes for Phase 1 Meal Plans" Section)
Baked eggplant rounds with Parmesan cheese

DESSERT
Lemon-Thyme Ice ("Recipes for Phase 1 Meal Plans" Section)

PHASE 1 SAMPLE MEAL PLAN

DAY 14

BREAKFAST
Morning mocha smoothie (blend ½ cup fat-free milk, 1 cup nonfat plain yogurt, instant coffee powder to taste, 2 tablespoons sugar-free chocolate syrup, and 6 ice cubes until frothy)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Herbed reduced-fat cottage cheese with chopped green bell pepper in a red bell pepper cup

LUNCH
Phase 1 soup of your choice ("Recipes for Phase 1 Meal Plans" Section)
Chef salad (at least 1 ounce each ham, turkey, and low-fat cheese on mixed greens)
2 tablespoons Creamy Dijon-Thyme Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

MIDAFTERNOON SNACK
2 sliced hard-boiled eggs with chilled asparagus spears and sea salt

DINNER
Grilled chicken, bell pepper, and red onion kebabs
Greek salad (diced cucumbers and tomatoes, kalamata olives, and 1 ounce reduced-fat feta cheese on a bed of romaine)
2 tablespoons Balsamic Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
Ricotta Cheesecake with Lemon Drizzle and Pine Nuts ("Recipes for Phase 1 Meal Plans" Section)
Recipes for Phase 1 Meal Plans

- Chunky Vegetable Hash
- Spanish Artichoke “Tortilla”
- Vegetable Quiche Cups to Go
- Green Gazpacho
- Tomato Soup with Veggies and Lima Beans
- Easy South Beach Diet Soups for Phase 1—Or Any Phase
  - Provençal White Bean Soup
  - Labne Balls
  - South Beach Diet Roll-Ups
- Moroccan Lemon Chicken with Summer Squash and Green Olives
- Homestyle Turkey Meatloaf with Mushrooms and White Beans
- Mediterranean Skillet Cod
- Grilled Salmon with Tomatoes, Spinach, and Capers
- Pecan-Crusted Trout
- Spicy Shrimp and Bok Choy Stir-Fry
- Ginger-Dijon Glazed Pork Tenderloin
- Skillet Pork Chops with Sautééd Swiss Chard
- South Beach Diet Shepherd’s Pie
- Sautééd Lamb with Spinach and Chickpeas
- Vegetable Moussaka
- Chock-Full-of-Veggies Chili
- Hearts of Palm “Potato” Salad
- Quick and Easy South Beach Diet Salad Dressings
  - Red Bean Mash
- Surprise South Beach Diet Mashed “Potatoes”
  - Vanilla Ricotta Crème and Variations
Creamy Lemon-Vanilla Ricotta Soufflés
Baked Ricotta Custard
Chilled Espresso Custard
Cocoa-Nut Mousse
Maple-Almond Flan
Ricotta Cheesecake with Lemon Drizzle and Pine Nuts
South Beach Diet Nutty Granola Topping
Lemon-Thyme Ices
Chunky Vegetable Hash

Prep time: 10 minutes • Cook time: 15 minutes

This bright, tasty hash is delicious over a poached egg or an egg any style, and it can also be turned into an omelet filling. Use any dried herb you prefer, or toss in a combo of chopped fresh herbs.

1 tablespoon extra-virgin olive oil
1 small onion, chopped
Pinch dried thyme
Pinch paprika
1/8 teaspoon salt
1 small red bell pepper, diced
4 large button mushrooms, roughly chopped
2 small zucchini, diced
1 small garlic clove, minced

In a large skillet, heat oil over medium-high heat. Add onion, thyme, and paprika, reduce heat to medium-low, and cook, stirring occasionally, 7 minutes, or until onion is softened. Stir in salt, bell pepper, mushrooms, zucchini, and garlic. Cover and cook, stirring occasionally, 4 minutes longer. Remove from the heat and serve hash by itself or with a poached egg.

Makes 4 (generous ½-cup) servings

Nutrition at a Glance

Per serving (without egg): 59 calories, 4 g fat, 0.5 g saturated fat, 2 g protein, 6 g carbohydrate, 2 g fiber, 81 mg sodium

Per serving (with 1 poached egg): 77 calories, 5 g fat, 1 g saturated fat, 3 g protein, 6 g carbohydrate, 2 g fiber, 99 mg sodium
Spanish Artichoke “Tortilla”

Prep time: 10 minutes • Cook time: 50 minutes

In Spain and parts of South America, tortillas are frittata-like dishes typically made with potatoes. They’re a café staple and often served as tapas. In this Phase 1 variation, we’ve replaced the potatoes with tasty artichoke hearts. Make the tortilla for breakfast, or serve it with your favorite salad for a light lunch or dinner.

1 tablespoon extra-virgin olive oil
2 medium onions, thinly sliced
2 garlic cloves, minced
¼ teaspoon salt
1 (9-ounce) package frozen baby artichoke hearts, thawed and quartered
½ teaspoon paprika
1/8 teaspoon cayenne
3 large eggs plus ¾ cup fat-free egg substitute, lightly beaten

In a medium nonstick skillet, heat oil over medium heat. Add onions, garlic, and salt. Cook, stirring occasionally, 5 minutes, or until onions begin to soften. Cover, reduce heat to medium-low, and cook until onions are very tender, 15 minutes longer.

Add artichoke hearts, paprika, and cayenne; cook, uncovered, until artichokes are heated through, about 5 minutes. Pour eggs over vegetables, cover, and cook over low heat until set, about 20 minutes.

Uncover the pan and place a large plate over the skillet. Carefully invert the pan and release tortilla onto the plate. Slide inverted tortilla back into the skillet and continue cooking until bottom is golden brown, 5 to 7 minutes. Transfer to a serving plate and cut into quarters. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 163 calories, 8 g fat, 2 g saturated fat, 11 g protein, 12 g carbohydrate, 5 g fiber, 336 mg sodium
Vegetable Quiche Cups to Go

Prep time: 15 minutes • Cook time: 25 minutes

This crustless quiche recipe can be used as a base for any combination of vegetables and reduced-fat cheese. If you don’t have a muffin pan, follow the variation below. Once prepared, the quiches can be frozen individually and reheated in the microwave.

1 package (10 ounces) frozen chopped spinach  
¾ cup shredded reduced-fat cheddar or Jack cheese  
¼ cup egg substitute  
¼ cup finely diced green bell pepper  
¼ cup finely diced onion  
3 drops hot pepper sauce (optional)

Heat the oven to 350°F. Spray a 12-cup muffin pan with cooking spray.
Place spinach in a microwaveable container and cook in the microwave on high power for 2½ minutes. Drain excess liquid.
In a large bowl, combine spinach, cheese, egg substitute, bell pepper, onion, and pepper sauce, if using. Mix well. Divide mixture evenly among the muffin cups.
Bake at 350°F for 20 minutes, or until a tester inserted in the center comes out clean.

Makes 12 (2 per serving)

Nutrition at a Glance

Per serving: 77 calories, 3 g fat, 2 g saturated fat, 9 g protein, 3 g carbohydrate, 2 g fiber, 160 mg sodium

Breakfast Quiche to Go: If you don’t have a muffin pan, pour the mixture into an 8-by 8-inch glass baking dish or a 9-inch glass pie plate. Bake at 350°F for 20 to 25 minutes, or until a tester comes out clean. Cut into 6 pieces.
Green Gazpacho

Prep time: 30 minutes • Chill time: 2 hours or overnight

Bursting with fresh vegetable flavor, this refreshing cold soup gets its good monounsaturated fat from the avocado garnish, which also lends fantastic texture and taste. Any type of lettuce (for example, green leaf, Bibb, romaine, mesclun) or even spinach can be used, so choose whatever looks best at the market.

- 2½ pounds cucumbers (3 to 4 medium), peeled, seeded, and roughly chopped
- 2 cups roughly chopped red leaf lettuce (about 6 leaves)
- 1 small green bell pepper, seeded and roughly chopped
- 2 scallions, white and green parts, roughly chopped
- 1 garlic clove, peeled
- 2 tablespoons fresh lime juice
- 2 tablespoons water
- 1 tablespoon extra-virgin olive oil
- ¼ teaspoon salt
- 1/8 teaspoon ground cumin
- Cayenne
- 1 small avocado, diced

In a blender, purée cucumbers, lettuce, pepper, scallions, garlic, lime juice, water, oil, salt, and cumin in batches until smooth. Season with additional salt and add cayenne to taste.

Transfer to a large bowl. Chill gazpacho at least 2 hours or overnight. When ready to serve, peel and dice avocado. Divide soup among 4 bowls, sprinkle avocado over soup, and serve.

Makes 4 (1 ¼-cup) servings

Nutrition at a Glance

Per serving: 138 calories, 11 g fat, 1 g saturated fat, 2 g protein, 11 g carbohydrate, 5 g fiber, 156 mg sodium

Variations: Try jalapeño or serrano chiles in place of cayenne, or top with a swirl of your favorite hot sauce (try a green one!). Add peeled tomatillos or chopped cilantro.
Tomato Soup with Veggies and Lima Beans

Prep time: 15 minutes • Cook time: 15 minutes

Prepared with basic staples and pantry items, this hearty vegetable soup is rich in protein and cooks up quickly, making it a good choice for weeknight meals or other busy times.

1 tablespoon extra-virgin olive oil
1 small onion, minced
2 celery stalks, minced
4 garlic cloves, minced
¼ teaspoon dried basil
¼ teaspoon dried oregano
¼ teaspoon red pepper flakes
5 ounces white mushrooms (about 6 medium), trimmed and quartered
1 medium summer squash, diced
1 (15-ounce) can lima beans, rinsed and drained
1 (14-ounce) can no-salt-added diced tomatoes, with juices
1 (8-ounce) can tomato sauce
¾ cup water

In a medium saucepan, heat oil over medium heat. Add onion, celery, garlic, basil, oregano, and pepper flakes; cook, stirring occasionally, 5 minutes. Add mushrooms and squash; cook, stirring occasionally, 5 minutes longer. Stir in beans, diced tomatoes and their juices, tomato sauce, and water; bring to a simmer and cook briefly just to heat through. Serve warm.

Makes 4 (1½-cup) servings

Nutrition at a Glance

Per serving: 146 calories, 4 g fat, 0.5 g saturated fat, 6 g protein, 22 g carbohydrate, 6 g fiber, 594 mg sodium

EASY SOUTH BEACH DIET SOUPS FOR PHASE 1—OR ANY PHASE

Enjoying a bowl of soup is a great way to fill up at the start of a Phase 1 meal. Or, if you prefer, you can prepare a higher-protein soup like the Fish Chowder, opposite, as the main course. If you’re on Phase 2 or 3, you can have these soups or those on “Recipes for Phase 2 Meal Plans” Section.

Black Bean Soup: In a medium saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 4 thinly sliced scallions, 1 thinly sliced celery stalk, 4 minced garlic cloves, 2 teaspoons ground cumin, ⅛ teaspoon cayenne, and a pinch of salt and freshly ground black pepper. Cook, stirring occasionally, until vegetables soften. Add 2 (15-ounce) cans black beans and their liquid, 1 (15-ounce) can diced tomatoes with juices, and 1½ cups lower-sodium chicken broth. Bring to a simmer and cook for 10 minutes. Transfer 2 cups
soup to a blender and process until smooth. Return soup to the pan and stir to combine. Return to a simmer and cook for 10 minutes longer. Season with 1 tablespoon fresh lime juice and adjust seasonings. Serve hot with hot pepper sauce and extra sliced scallions on the side.

**Creamy Cauliflower Soup:** In a medium saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 thinly sliced small onion and cook, stirring occasionally, until softened, about 5 minutes. Add 1 (2-pound) head cauliflower, cut into florets, along with the finely chopped stems. Cover and cook for 5 minutes. Add 4 cups reduced-sodium chicken broth and bring to a simmer. Cook until the cauliflower is tender, about 15 minutes. Transfer soup in batches to a blender and purée until smooth. Return to the saucepan and whisk in ¼ cup reduced-fat sour cream and ¼ teaspoon nutmeg. Season with salt and pepper to taste and serve hot. Or chill in the refrigerator and whisk in ½ cup reduced-fat sour cream and ¼ teaspoon nutmeg. Season with salt and pepper to taste and serve hot.

**Chicken Soup with Kale:** In a medium saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 thinly sliced small sweet onion, 2 thinly sliced celery stalks, 2 minced garlic cloves, and a pinch of salt and freshly ground black pepper. Cook, stirring occasionally, until onion softens, about 7 minutes. Add 1 large bunch chopped kale leaves; stir and cook for 1 minute. Add ½ pound cubed boneless, skinless chicken breast; stir and cook for 1 minute longer. Add 4 cups lower-sodium chicken broth, bring to a simmer, and cook until chicken is cooked through, about 7 minutes. Stir in 3 tablespoons finely chopped parsley. Serve hot.

**Chilled Tomato Bisque:** In a medium saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 thinly sliced small red onion, 2 minced garlic cloves, ¼ teaspoon red pepper flakes, and a pinch of salt and freshly ground black pepper. Cook, stirring occasionally, until onion softens, about 7 minutes. Add 1 large bunch chopped kale leaves; stir and cook for 1 minute. Add ½ pound cubed boneless, skinless chicken breast; stir and cook for 1 minute longer. Add 4 cups low-sodium chicken broth, bring to a simmer, and cook until chicken is cooked through, about 7 minutes. Stir in 3 tablespoons finely chopped parsley. Serve hot.

**Creamy Broccoli Soup:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 finely chopped large onion and 1 minced garlic clove; cook, stirring occasionally, until onion softens, about 7 minutes. Add 1 pound roughly chopped broccoli stems and florets, 1/8 teaspoon salt, and a pinch of freshly ground black pepper; stir well. Add 2 cups vegetable broth and ½ cup 1% milk. Bring to a simmer, partially cover, and reduce heat to low; cook until broccoli is very tender, about 25 minutes. Transfer soup in batches to a blender and purée until smooth. Return soup to the pan and stir in 2 tablespoons fresh lemon juice. Heat through and serve hot.

**Cucumber and Mint Soup:** In a blender, combine 2 large peeled and chopped cucumbers, 1 cup low-fat or nonfat plain yogurt, ¾ cup cold water, 1 tablespoon fresh lime juice, ¼ teaspoon salt, and ¼ teaspoon freshly ground black pepper; purée until smooth. Stir in ¼ cup chopped fresh mint and serve.

**Fish Chowder:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 chopped medium onion, 3 chopped celery stalks, 3 ounces chopped Canadian bacon, and ¼ teaspoon crushed dried thyme. Cook, stirring occasionally, until vegetables soften and bacon is lightly browned, about 7 minutes. Stir in 2 (8-ounce) bottles clam juice, ¼ cup water, and 1 cup 1% milk. Add 1½ pounds cod or hake, cut into ½-inch-wide strips, and 1 diced medium summer squash; bring to a simmer and cook until fish is opaque, about 10 minutes. Break up any large fish chunks with a wooden spoon. Season with freshly ground black pepper and serve hot.
Provençal White Bean Soup

Prep time: 10 minutes • Cook time: 20 minutes

The addition of basil, rosemary, and thyme turns a simple blended soup into heady French-style fare. Add a little extra broth if you prefer a thinner version. Lower-sodium chicken broth can be used in place of the vegetable broth, if desired.

1 tablespoon extra-virgin olive oil
1 small onion, chopped
1 celery stalk, finely chopped
2 garlic cloves, smashed and peeled
½ teaspoon dried basil
½ teaspoon dried rosemary
¼ teaspoon dried thyme
¼ teaspoon salt
1 (15-ounce) can cannellini or great Northern beans, drained and rinsed
1½ cups lower-sodium vegetable broth
Freshly ground black pepper

In a large saucepan, heat oil over medium-high heat. Add onion, celery, garlic, basil, rosemary, thyme, and salt; reduce heat to medium-low and cook, stirring occasionally, 15 minutes, or until vegetables are softened.

Add beans and stir to combine. Using a large metal spoon, transfer about ¾ of the bean mixture to a blender. Add broth and purée until smooth. Return mixture to the saucepan, stir to combine, and bring to a simmer just to heat through. Season with additional salt and pepper to taste. Serve warm.

Makes 4 (1-cup) servings

Nutrition at a Glance

Per serving: 103 calories, 4 g fat, 1 g saturated fat, 4 g protein, 16 g carbohydrate, 6 g fiber, 500 mg sodium
Labne Balls

Draining time: 48 hours • Prep time: 10 minutes

Also known as kefir cheese or yogurt cheese, labne is a thick, drained yogurt popular in the Middle East. When rolled into balls, as here, labne has a texture similar to fresh mozzarella and serves as a fine option to part-skim mozzarella sticks for Phase 1 snacks. Look for imported Greek yogurt, which is thicker than regular yogurt; it’s sold in grams, not ounces, in the dairy section of most supermarkets.

3 (200-gram) containers nonfat Greek yogurt, drained
1 teaspoon salt
2 tablespoons Italian seasoning
Extra-virgin olive oil

Line a strainer with cheesecloth and place over a large bowl. In a small bowl, combine yogurt and salt. Spoon yogurt into the strainer. Cover lightly with plastic wrap and refrigerate until thick, about 48 hours. You should have about 1½ cups of drained yogurt. Discard liquid.

Place Italian seasoning in a shallow dish. On a large piece of waxed paper, roll yogurt by tablespoonfuls into ¾-inch balls. Roll balls in Italian seasoning to coat.

Serve balls immediately or store in a covered container in the refrigerator for up to a week. For longer storage, cover with extra-virgin olive oil, and enjoy as desired.

Makes 24 (4 per serving)

Nutrition at a Glance

Per ball: 13 calories, 0 g fat, 0 g saturated fat, 2 g protein, 1 g carbohydrate, 0 g fiber, 106 mg sodium

Herb Variations: Roll the balls in chopped mint, chives, or parsley (or a combo of all three). Or sprinkle with red pepper flakes just before serving.

Yogurt Cheese Dip: Don’t roll the labne into balls. Instead, flavor it with cumin or a seasoning mix of your choice and serve as a dip with crudités.

SOUTH BEACH DIET ROLL-UPS

A lettuce roll-up makes a great snack on Phase 1 (or 2 and 3). The combination of high-fiber veggies and protein helps stave off hunger midmorning or midafternoon. Each recipe makes 4 or 8 roll-ups, but you can roll up just one at a time if you prefer. Roll-ups are a great take-along snack for trips or when running errands. Make the filling for the Yucatan Shrimp Roll-Up or Curried Turkey Roll-Up ahead, if you like, and refrigerator until ready to use.

California Roll-Up: Top each of 4 large red-or green-leaf lettuce leaves with 1 slice each turkey breast and...
boiled ham, 1 thin slice tomato, 1 thin slice avocado, 1 teaspoon fresh lime juice, a few leaves watercress or arugula, and 1 tablespoon Ranch Dressing (“Recipes for Phase 1 Meal Plans” Section). Roll up leaves, secure with toothpicks, and serve.

Curried Turkey Roll-Up: Combine 1 cup nonfat or low-fat plain yogurt, ½ cup low-fat mayonnaise, 3 teaspoons curry powder, and ½ teaspoon ground ginger. Fold in 4 cups cubed thickly sliced deli turkey breast, 2 diced celery stalks, 1 diced small cucumber, 3 tablespoons minced red onion, and ¼ cup chopped fresh parsley. Season with salt and freshly ground black pepper to taste. Divide mixture among 8 large green-leaf lettuce leaves. Roll up leaves, secure with toothpicks, and serve.

Grilled Chicken and Roasted Red Pepper Roll-Up: Thinly slice 3 (6-ounce) grilled boneless, skinless chicken breasts and 3 large roasted red peppers (from a jar). Top 4 large red-or green-leaf lettuce leaves with chicken and peppers. Sprinkle with ¼ cup reduced-fat feta cheese and 2 thinly sliced scallions. Roll up leaves, secure with toothpicks, and serve.

Roast Beef and Horseradish Roll-Up: Combine 2 tablespoons prepared horseradish and 2 tablespoons low-fat mayonnaise; spread mixture on 4 large red- or green-leaf lettuce leaves. Top each with 2 slices roast beef and a few sprigs watercress. Roll up leaves, secure with toothpicks, and serve.

Spicy Hummus ‘n’ Veggie Roll-Up: Combine 4 cups arugula, 1 thinly sliced and chopped fennel bulb, 1 thinly sliced large cucumber, 1 chopped large tomato, 3 tablespoons fresh lemon juice, 1 tablespoon extra-virgin olive oil, and salt and freshly ground black pepper to taste. Divide among 8 large red-leaf lettuce leaves. Dollop 2 tablespoons store-bought hummus on top of veggies on each leaf and spread to cover. Drizzle with hot pepper sauce to taste. Roll up leaves, secure with toothpicks, and serve.

Tex-Mex Smoked Turkey Roll-Up: Combine 8 slices chopped smoked turkey breast, 1 diced avocado, ¼ cup diced reduced-fat pepper Jack cheese, 3 tablespoons store-bought salsa, and 1 tablespoon fresh lime juice. Divide filling among 4 large red-or green-leaf lettuce leaves. Roll up leaves, secure with toothpicks, and serve.

Yucatan Shrimp Roll-Up: Toss 16 shrimp with ¼ teaspoon cayenne and a generous pinch of salt. Grill until pink. Roughly chop shrimp, then toss with 1 chopped large tomato, 1 diced small avocado, 2 tablespoons low-fat mayonnaise, and 1 tablespoon fresh lime juice. Divide mixture among 8 large red-or green-leaf lettuce leaves. Season lightly with salt. Roll up leaves, secure with toothpicks, and serve.
Moroccan Lemon Chicken with Summer Squash and Green Olives

Prep time: 20 minutes • Cook time: 25 minutes

While the ingredient list for this recipe may seem long, it largely features common pantry spices. When combined, these spices make up a version of ras al-hanut, an intriguing blend that is widely used on Moroccan-style meats and fish. If you prefer, look for prepared ras al-hanut or another Moroccan blend in the spice section of your supermarket. Mixed with a little extra-virgin olive oil, these spices make a wet rub that blackens while cooking, giving the chicken a rich, exotic taste.

4 (6-ounce) boneless, skinless chicken breasts
1 teaspoon ground cumin
1 teaspoon ground ginger
½ teaspoon cinnamon
½ teaspoon freshly ground black pepper
¼ teaspoon allspice
¼ teaspoon salt
1/8 teaspoon cayenne
1 lemon
4 teaspoons extra-virgin olive oil
1 small onion, thinly sliced
¾ pound summer squash, thinly sliced crosswise
1/3 cup pitted green olives
2 tablespoons water
2 tablespoons chopped parsley

Pound chicken breasts between two sheets of waxed paper to ¼ inch thick.

In a small bowl, mix together cumin, ginger, cinnamon, pepper, allspice, salt, and cayenne. Finely grate zest from lemon into spice mixture. Squeeze 1 tablespoon juice from lemon and add to spice mixture. Add 3 teaspoons of the oil to spice mixture and stir to combine. Spread mixture on both sides of chicken breasts.

Heat a large nonstick skillet over medium-high heat. Add chicken, in batches if necessary, and cook, turning, until blackened on the outside and cooked through, 3 to 4 minutes per side. Transfer to a plate and loosely cover with foil to keep warm.

Add remaining 1 teaspoon oil to the skillet and return to medium-high heat. Add reserved onion slices and cook, stirring constantly with a wooden spoon and scraping up any browned bits, 3 minutes. Add squash, olives, and 2 tablespoons water. Season lightly with additional salt and pepper; stir well. Cover and cook until squash is tender, 4 to 5 minutes. Remove the pan from the heat. Squeeze a little more lemon juice over chicken and vegetables, sprinkle with parsley, and serve warm.

Makes 4 servings

Nutrition at a Glance
Per serving: 264 calories, 8 g fat, 1 g saturated fat, 41 g protein, 6 g carbohydrate, 2 g fiber, 314 mg sodium
**Cooking Tip:** Use cutlets in place of chicken breasts if you want to avoid the pounding step. Turkey cutlets can also be used.
Homestyle Turkey Meatloaf with Mushrooms and White Beans

Prep time: 15 minutes • Cook time: 1 hour 15 minutes

This healthy alternative to typical meatloaf adds white beans for a delicious high-fiber twist. Serve extra Dijon mustard on the side; it lends a satisfying, piquant flavor element.

- 2 teaspoons extra-virgin olive oil
- 1½ cups chopped onion
- ½ teaspoon dried thyme
- ½ teaspoon cayenne
- ½ teaspoon paprika
- ½ teaspoon salt
- ½ teaspoon freshly ground black pepper
- ¾ pound mushrooms, trimmed and chopped
- 4 large garlic cloves, minced
- 1 (15-ounce) can great Northern beans, rinsed and drained
- 1¼ pounds extra-lean ground turkey
- 2 large eggs
- ½ cup chopped parsley
- 4 teaspoons Worcestershire sauce
- 2 teaspoons Dijon mustard plus extra for serving

Heat the oven to 375°F. Lightly coat an 8- by 4- by 2½-inch metal or glass loaf pan with cooking spray.

In a large skillet, heat oil over medium-high heat. Add onion, thyme, cayenne, paprika, salt, and pepper. Reduce heat to medium-low and cook, stirring occasionally, 5 minutes. Add mushrooms and garlic; cook, stirring occasionally, until onion is softened and mushrooms are incorporated, about 5 minutes longer. Add beans and stir to combine. Transfer mixture to a bowl and let cool, about 5 minutes.

In a large bowl, combine cooled bean mixture, turkey, eggs, parsley, and 2 teaspoons of the Worcestershire sauce. Mix well with wet hands to combine. Form into a loaf and place into the prepared pan.

Stir together mustard and remaining 2 teaspoons Worcestershire sauce and set aside.

Bake meatloaf on the middle rack of the oven for 50 minutes. Remove from the oven and brush with the reserved Worcestershire mixture. Return to the oven and continue baking 10 to 15 minutes longer, or until a thermometer inserted into meatloaf registers 170°F. Let meatloaf stand 5 minutes before serving. Serve with additional Dijon mustard.

Makes 6 servings

Nutrition at a Glance

Per serving: 205 calories, 5 g fat, 1 g saturated fat, 30 g protein, 15 g carbohydrate, 4 g fiber, 549 mg sodium

Make-Ahead Tip: Cooked meatloaf freezes well for up to 3 months. Cut it into individual portions before freezing and thaw in the microwave when ready to eat.
**Mediterranean Skillet Cod**

**Prep time: 15 minutes • Cook time: 30 minutes**

Serve the cod in shallow bowls with soup spoons so you don’t leave any of the rich sauce. The recipe is best made with red, full-flavored Spanish pequillo peppers, which you can usually find among the other jarred peppers in your supermarket. You could use ½ cup of thinly sliced roasted red peppers instead.

- 1 tablespoon extra-virgin olive oil
- 1 medium zucchini, cut into ¼-inch-thick slices
- 1 small onion, thinly sliced
- 3 garlic cloves, minced
- Salt
- Freshly ground black pepper
- 1 (14.5-ounce) can diced tomatoes, drained
- 2 pequillo peppers (from a jar), thinly sliced
- 4 (6-ounce) cod fillets
- 2 tablespoons chopped parsley

In a large skillet, heat oil over medium heat. Add zucchini, onion, garlic, and a pinch of salt and black pepper; cook, stirring occasionally, 10 minutes. Stir in tomatoes and peppers; simmer over medium heat for 10 minutes longer.

Nestle fish fillets into the sauce, spooning some of the mixture over the top of the fillets. Cover the pan and continue to simmer until fish is opaque and cooked through, about 10 minutes. Sprinkle with parsley and serve warm.

**Makes 4 servings**

**Nutrition at a Glance**

**Per serving:** 216 calories, 5 g fat, 1 g saturated fat, 32 g protein, 8 g carbohydrate, 2 g fiber, 489 mg sodium
Grilled Salmon with Tomatoes, Spinach, and Capers

**Prep time: 15 minutes • Cook time: 10 minutes**

This simple, elegant, and delicious dish gives you a healthy dose of heart-protective omega-3s from the salmon. The tomatoes provide the carotenoid lycopene, and the spinach delivers plenty of beta-carotene and folate. Grill extra and use for a salmon salad the next day.

- 4 (6-ounce) salmon fillets, skin-on
- Salt
- Freshly ground black pepper
- 1 tablespoon extra-virgin olive oil
- 1 medium onion, chopped
- 2 garlic cloves, minced
- 1 pound plum tomatoes, chopped
- 3 ounces baby spinach (3 cups)
- 1 tablespoon rinsed and drained capers
- 4 lemon wedges

Heat the oven to broil. Lightly coat a large heat-resistant baking dish with cooking spray.

Place salmon, flesh side up, in the baking dish, lightly season with salt and pepper, and broil without turning until salmon is cooked through, 8 to 10 minutes.

Meanwhile, in a large saucepan, heat oil over medium heat. Add onion and garlic; cook, stirring occasionally, until softened, about 7 minutes. Stir in tomatoes, spinach, and capers; cook for 2 minutes longer. Remove the pan from the heat.

Remove salmon from broiler and transfer to 4 serving plates. Spoon tomato mixture over salmon, squeeze lemon wedges over the top, and serve warm.

_Makes 4 servings_

_Nutrition at a Glance_

**Per serving:** 386 calories, 22 g fat, 4 g saturated fat, 36 g protein, 10 g carbohydrate, 3 g fiber, 273 mg sodium
Pecan-Crusted Trout

**Prep time: 10 minutes • Cook time: 20 minutes**

Pecans add even more protein, good monounsaturated fat, and tremendous taste to this easy baked trout dish. Serve the fish with grilled asparagus tossed with a little garlic and extra-virgin olive oil and roasted until golden and tender.

- ½ cup pecans
- 1 teaspoon dried rosemary
- 1 garlic clove
- 1/8 teaspoon cayenne
- 4 whole trout (about 12 ounces each), cleaned and boned
- ¼ teaspoon salt
- 1 large egg white, lightly beaten
- 2 teaspoons extra-virgin olive oil

Heat the oven to 400°F. Line a baking sheet with parchment paper.

In a food processor, pulse pecans, rosemary, garlic, and cayenne until finely chopped. Transfer mixture to a shallow dish.

Place each trout, opened and flesh side up, on the baking sheet.

Season flesh side of trout with salt and brush with egg white. Sprinkle nut mixture over egg white and press to adhere. Drizzle evenly with oil and bake until trout is opaque and tender inside, about 20 minutes.

**Makes 4 servings**

**Nutrition at a Glance**

**Per serving:** 382 calories, 24 g fat, 3 g saturated fat, 38 g protein, 3 g carbohydrate, 2 g fiber, 248 mg sodium
Spicy Shrimp and Bok Choy Stir Fry

Prep time: 20 minutes • Cook time: 10 minutes

Chili-garlic sauce is a common Asian ingredient that brings a tangy-hot flavor to any dish. It can be used both for cooking and as a condiment when you want a little extra heat. Look for brands with no added sugar in the Asian section of most large supermarkets.

1½ pounds large shrimp, peeled and deveined
4 scallions, white and green parts thinly sliced and kept separate
2 garlic cloves, minced
2 teaspoons vegetable oil
2 pounds bok choy, sliced crosswise
2 tablespoons lower-sodium soy sauce
2 teaspoons chili-garlic sauce

In a large bowl, combine shrimp, scallion whites, and garlic.

In a wok or a large nonstick skillet, heat oil over medium-high heat. Add shrimp mixture and cook, stirring occasionally, until shrimp turn pink and are cooked through, 3 to 4 minutes. Transfer to a large clean bowl.

Return the pan to medium-high heat. Add bok choy, cover, and cook, stirring occasionally, until crisp-tender, 3 to 4 minutes. Drain any liquid from the skillet and add bok choy to bowl with shrimp.

Return the pan to medium-high heat. Add soy sauce and chili-garlic sauce; stir to combine and bring to a boil. Add shrimp mixture and toss until coated. Cook briefly, just to reheat. Stir in scallion greens and serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 225 calories, 6 g fat, 1 g saturated fat, 35 g protein, 9 g carbohydrate, 3 g fiber, 525 mg sodium
Ginger-Dijon Glazed Pork Tenderloin

Prep time: 10 minutes • Cook time: 35 minutes

Dijon mustard, reduced-fat sour cream, and fresh ginger create a flavorful coating for this tender pork roast. Buy an extra pork loin and slice for lunch the next day.

1½ tablespoons Dijon mustard
1 tablespoon reduced-fat sour cream
1 teaspoon grated fresh ginger
¼ teaspoon dried thyme
Salt
1½ pounds pork loin
1 large garlic clove, thinly sliced
1½ teaspoons extra-virgin olive oil
Freshly ground black pepper

Heat the oven to 450°F.

In a small bowl, stir together mustard, sour cream, ginger, thyme, and a pinch of salt; set aside.
Make several ¼-inch slits in pork loin. Slip garlic into slits. Brush loin with oil and season with salt and pepper.
Heat a large cast-iron or other ovenproof skillet over high heat. Add pork loin and brown on all sides, about 5 minutes. Remove the pan from the heat.
Spread mustard mixture over pork, then transfer the skillet to the oven and cook until a meat thermometer inserted into center of pork registers 150°F, about 30 minutes. Remove the pan from the oven and transfer pork to a cutting board; loosely cover with foil and let rest for 5 minutes before slicing. Serve warm or at room temperature.

Makes 4 servings

Nutrition at a Glance

Per serving: 267 calories, 11 g fat, 3 g saturated fat, 38 g protein, 2 g carbohydrate, 0 g fiber, 327 mg sodium

Cooking Tip: Studding the meat with garlic before cooking is an easy flavor technique that can be used for any cut of pork or beef.
Skillet Pork Chops with Sautéed Swiss Chard

Prep time: 10 minutes • Cook time: 15 minutes

A member of the beet family, Swiss chard is a cruciferous leafy winter green that delivers a good dose of beta-carotene, potassium, and fiber. When preparing chard, cut off the thicker bottom inch or so of each stem, then thinly slice the rest of the stem (it’s tender) and add to the leaves when cooking. Spinach and kale make good substitutes for Swiss chard when you want a change of pace.

2 pounds Swiss chard
4 teaspoons extra-virgin olive oil
2 large garlic cloves, minced
Finely grated zest of 1 lemon
½ teaspoon dried rosemary, crumbled
4 (6- to 8-ounce) center-cut loin pork chops
Salt
Freshly ground black pepper
1 tablespoon water

Trim tough ends off Swiss chard stems, tear leaves from stems, roughly chop leaves, and thinly slice stems. In a medium bowl, combine 2 teaspoons of the oil, half of the garlic, the lemon zest, and rosemary. Add the pork chops and turn to coat. Season lightly with salt and pepper.

Spray a large nonstick skillet with cooking spray and heat over medium-high heat. Add pork chops and cook for 3 to 4 minutes per side, or until just cooked through (do not overcook). Transfer pork chops to a plate, and cover loosely with foil to keep warm.

Wipe out the skillet, add remaining 2 teaspoons oil, and heat over medium heat. Add remaining garlic and cook, stirring, 30 seconds. Add Swiss chard stems and cook, stirring, 1 to 2 minutes. Add leaves and water; stir to coat. Cover and cook until leaves are wilted, 3 to 4 minutes longer. Season with salt and pepper and a squeeze of lemon juice. Serve pork chops with their juices and chard on the side.

Makes 4 servings

Nutrition at a Glance

Per serving: 295 calories, 14 g fat, 4 g saturated fat, 35 g protein, 8 g carbohydrate, 3 g fiber, 560 mg sodium
South Beach Diet Shepherd’s Pie

Prep time: 10 minutes • Cook time: 50 minutes

Love shepherd’s pie? Then you’ll love this Phase 1 twist on the classic. Edamame (fresh soybeans) replaces the usual peas and adds texture and protein, and mashed cauliflower topped with reduced-fat cheddar creates the rich, potato-like crust.

- 1 (16-ounce) package frozen cauliflower florets
- 1 tablespoon extra-virgin olive oil
- 1 large onion, chopped
- 2 garlic cloves, minced
- 1 pound extra-lean ground beef
- 2 cups fresh or defrosted frozen shelled edamame (10 ounces)
- ½ cup reduced-sodium beef broth
- 2 teaspoons Worcestershire sauce
- ½ teaspoon freshly ground black pepper
- Salt
- 2 tablespoons low-fat sour cream
- 1 large egg yolk
- ½ cup shredded reduced-fat cheddar cheese

Heat the oven to 350°F. Spray a 2-quart casserole with cooking spray.

Bring a medium saucepan of water to a boil. Add cauliflower and cook until tender, about 10 minutes. Drain and transfer to a large bowl.

Meanwhile, in a large skillet, heat oil over medium heat. Add onion and garlic; cook, stirring occasionally, until translucent, about 5 minutes. Add beef and brown for 10 minutes, stirring to break up lumps. Add edamame and cook, stirring occasionally, 3 minutes longer. Stir in broth and Worcestershire sauce. Season with pepper and a pinch of salt. Transfer meat mixture to the casserole.

With an electric mixer at medium speed, whip the cooked cauliflower with sour cream, egg yolk, and another pinch of salt. Spoon cauliflower evenly over meat. Top with cheese and bake for 20 to 25 minutes, or until golden on top. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 367 calories, 16 g fat, 5 g saturated fat, 37 g protein, 18 g carbohydrate, 4 g fiber, 324 mg sodium
Sautéed Lamb with Spinach and Chickpeas

Prep time: 10 minutes • Cook time: 12 minutes

This rustic, filling dish is perfect for cold winter nights. To save time, have your butcher trim and cut the lamb for you.

1½ pounds leg of lamb, trimmed and cut into 1-inch pieces
1 small onion, minced
2 garlic cloves, minced
½ teaspoon cayenne
½ teaspoon ground cinnamon
½ teaspoon ground cumin
¼ teaspoon freshly ground black pepper
1 lemon, zest finely grated and fruit cut in half
2 teaspoons extra-virgin olive oil
1 (15-ounce) can chickpeas, rinsed and drained
12 ounces baby spinach (12 cups)
¼ teaspoon salt

In a large bowl, combine lamb, onion, garlic, cayenne, cinnamon, cumin, pepper, lemon zest, and oil.

Spray a large nonstick skillet with cooking spray and heat over medium-high heat. Add lamb mixture and cook, stirring, 5 to 6 minutes, or until lamb is browned on the outside and still slightly pink on the inside. Transfer lamb to a plate, cover loosely with foil, and keep warm.

Return the pan to medium-high heat. Add chickpeas and spinach, in batches if necessary, and cook until spinach is wilted and mixture is warm, 3 to 5 minutes. Return lamb to the pan and stir to combine and just reheat. Remove pan from the heat and stir in salt and a generous squeeze of lemon. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 389 calories, 12 g fat, 4 g saturated fat, 41 g protein, 30 g carbohydrate, 8 g fiber, 642 mg sodium
Vegetable Moussaka

Prep time: 15 minutes • Cook time: 60 minutes • Stand time: 15 minutes

This moussaka is so filling and flavorful, you won’t even miss the lamb. Lentils provide protein, fiber, and a rich meaty taste.

1 large eggplant (about 1¼ pounds), ends trimmed, cut widthwise into ¼-inch-thick rounds
2 teaspoons extra-virgin olive oil
1 large onion, chopped
4 garlic cloves, minced
1 (15-ounce) can lentils, drained
1 (15-ounce) can diced tomatoes, with juices
¼ cup chopped parsley
1 teaspoon dried oregano
¼ teaspoon ground cinnamon
¼ teaspoon salt
Freshly ground black pepper
½ cup fat-free half-and-half
2 large eggs
¼ cup freshly grated Parmesan cheese
⅛ teaspoon freshly grated nutmeg

Heat the oven to 425°F.
Lightly coat eggplant slices with cooking spray and arrange on a baking sheet. Bake until softened and golden, 20 to 25 minutes. Reduce oven to 350°F.
Meanwhile, in a large saucepan, heat oil over medium heat. Add onion and garlic; cook, stirring occasionally, until onion is translucent, about 5 minutes. Add lentils, tomatoes and their juices, parsley, oregano, cinnamon, salt, and a pinch of pepper. Bring to a simmer and cook until thickened, about 20 minutes.
While eggplant and lentils are cooking, in a medium bowl, whisk together half-and-half, eggs, 2 tablespoons of the cheese, and nutmeg.
Lightly coat an 8- by 8-inch baking dish with cooking spray. Arrange one-third of the eggplant slices in a single layer in the dish. Spread half of the lentil mixture over the top. Repeat with remaining eggplant and lentil mixture, ending with a layer of eggplant. Pour half-and-half mixture over vegetables and sprinkle with remaining 2 tablespoons cheese. Cover with aluminum foil.
Bake moussaka, covered, 20 minutes, then remove foil and bake for 10 to 15 minutes longer, or until heated through and golden on top. Let stand for 15 minutes before cutting. Serve warm.

Makes 4 servings

Nutrition at a Glance
Per serving: 230 calories, 7 g fat, 2 g saturated fat, 14 g protein, 30 g carbohydrate, 12 g fiber, 296 mg sodium

Make-Ahead: Moussaka is a great dish to make ahead and freeze—just double or triple the recipe. Cut the
moussaka into portions before freezing for up to 3 months. When ready to eat, thaw at room temperature, then reheat in the microwave or a toaster oven.
Chock-Full-of-Veggies Chili

Prep time: 15 minutes • Cook time: 40 minutes

This basic vegetarian chili is thick and hearty. Garnish with a dollop of low-fat or nonfat plain yogurt if you like. In later phases, brush whole-wheat pita triangles with olive oil, sprinkle with a mix of Italian seasoning and cayenne, lightly toast, and serve alongside the chili or crumble and serve on top.

1 tablespoon extra-virgin olive oil
2 bell peppers (any color), chopped
1½ cups chopped mushrooms
1 large onion, chopped
2 celery stalks, chopped
3 garlic cloves, minced
1 tablespoon chili powder
1 tablespoon dried oregano
1 teaspoon ground cumin
¼ teaspoon salt
2 (15-ounce) cans pinto beans
1 (14.5-ounce) can no-salt-added diced tomatoes, with juices

In a large saucepan, heat oil over medium heat. Add peppers, mushrooms, onion, celery, and garlic; cook, stirring, until vegetables begin to soften, about 7 minutes. Add chili powder, oregano, cumin, and salt; cook, stirring occasionally, 5 minutes more.

Add beans and tomatoes with their juices. Bring to a gentle simmer and cook, stirring occasionally, until chili is fragrant and slightly thickened, 25 to 30 minutes. Serve warm.

Makes 4 (2-cup) servings

Nutrition at a Glance

Per serving: 229 calories, 5 g fat, 0.5 g saturated fat, 11 g protein, 35 g carbohydrate, 12 g fiber, 501 mg sodium
Hearts of Palm “Potato” Salad

Prep time: 10 minutes

Hearts of palm stand in for potatoes in this summery salad. The vinegary dressing makes it a perfect flavor match for grilled burgers, chicken, or fish. Try fresh cilantro, tarragon, basil, or parsley in place of or along with the chives.

2 teaspoons fresh lemon juice
1 teaspoon Dijon mustard
1 small garlic clove, minced
1 tablespoon extra-virgin olive oil
2 (14-ounce) cans hearts of palm, drained and cut into ½-inch slices
2 tablespoons chopped chives
Freshly ground black pepper

In a large bowl, whisk together lemon juice, mustard, and garlic. Continuing to whisk, add oil in a slow and steady stream. Add hearts of palm and chives; toss to combine. Season with pepper to taste and serve.

Makes 4 (¾-cup) servings

Nutrition at a Glance
Per serving: 77 calories, 4 g fat, 0.5 g saturated fat, 4 g protein, 8 g carbohydrate, 4 g fiber, 665 mg sodium

QUICK AND EASY SOUTH BEACH DIET SALAD DRESSINGS

Homemade salad dressings, made with monounsaturated extra-virgin olive or canola oil and other healthful ingredients, can turn a so-so salad into a vibrant part of any meal. With the exception of Orange-Cumin vinaigrette and Carrot-Ginger Dressing (just like what’s served in a Japanese restaurant), which are Phase 2 and 3 dressings, all of these work for Phase 1 (as well as 2 and 3). Each recipe makes between ½ and ¾ cup dressing (approximately 8 to 12 tablespoons), so you can make a batch one day and have enough left over to use throughout the week. We recommend using no more than 2 tablespoons per serving. For convenience, make and store the dressing in a small plastic container or glass jar with a lid and shake well before using. We’ve made specific suggestions for using many of these dressings in the Meal Plans for Phases 1 and 2, but feel free to use any dressing you prefer.

Aioli Dressing: Mince and mash 3 garlic cloves to a paste with a pinch of salt. Stir garlic mash into ½ cup low-fat mayonnaise. Whisk in ¼ cup fat-free half-and-half, 2 teaspoons fresh lemon juice, and ½ teaspoon Dijon mustard. Season with salt and freshly ground black pepper to taste.

Balsamic Vinaigrette: Combine 3 tablespoons balsamic vinegar, 1 tablespoon Dijon mustard, 1 small minced garlic clove, 1 teaspoon minced shallot or red onion, and a pinch of dried thyme. Whisk in ½ cup extra-virgin
olive oil. Season with salt and freshly ground black pepper to taste.

**Blue Cheese Dressing:** Whisk together ½ cup low-fat mayonnaise, 2 tablespoons crumbled blue cheese, 1 tablespoon fresh lemon juice, and ½ teaspoon hot pepper sauce. Whisk in ¼ cup fat-free buttermilk and season with salt and freshly ground black pepper to taste.

**Caesar Dressing:** Whisk together 2 tablespoons fresh lemon juice, 3 minced anchovy fillets, 1 minced garlic clove, and 1 teaspoon Dijon mustard. Slowly whisk in ½ cup extra-virgin olive oil. Stir in 2 tablespoons freshly grated Parmesan cheese and season with salt and freshly ground black pepper to taste.

**Carrot-Ginger Dressing (Phases 2 and 3):** In a blender, combine ¼ cup finely shredded carrot, 3 tablespoons thinly sliced scallion, 2 tablespoons fresh lemon juice, 2 tablespoons mirin, 2 tablespoons rice vinegar, 1 tablespoon low-sodium soy sauce, 2 teaspoons freshly grated ginger, and 1 teaspoon sesame oil. Purée until smooth.

**Champagne Vinaigrette:** Whisk together 3 tablespoons champagne vinegar and 3 teaspoons Dijon mustard. Slowly whisk in ¼ cup plus 2 tablespoons extra-virgin olive oil, then whisk in 1 tablespoon warm water and 1 small minced shallot. Season with salt and freshly ground black pepper to taste.

**Creamy Cilantro Dressing:** Whisk together ½ cup nonfat or low-fat plain yogurt, ¼ cup chopped fresh cilantro, 3 tablespoons fresh lime juice, and 2 tablespoons extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Creamy Dijon-Thyme Dressing:** Whisk together ¼ cup nonfat or low-fat plain yogurt, 3 tablespoons low-fat mayonnaise, 1½ tablespoons Dijon mustard, 1 tablespoon 1% milk, and a pinch of dried thyme. Season with salt and freshly ground black pepper to taste.

**Creamy Lemon-Dill Dressing:** Whisk together ¼ cup nonfat or low-fat plain yogurt, 3 tablespoons low-fat mayonnaise, 1 tablespoon 1% milk, 1 tablespoon chopped fresh dill, 1 teaspoon freshly grated lemon zest, and 1 teaspoon minced red onion. Season with salt and freshly ground black pepper to taste.

**Dijon Vinaigrette:** Whisk together 3 tablespoons red wine vinegar, 2 tablespoons minced red onion, 1 tablespoon Dijon mustard, and 1 minced garlic clove. Slowly whisk in ⅓ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Fresh Herb Vinaigrette:** Whisk together 3 tablespoons red wine vinegar, 2 tablespoons minced red onion, 1 tablespoon Dijon mustard, 1 minced garlic clove, 1 tablespoon finely chopped parsley, and 1 tablespoon finely chopped fresh basil, marjoram, oregano, or thyme. Slowly whisk in ⅓ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Green Goddess Dressing:** In a blender, combine ½ medium avocado, 3 tablespoons low-fat mayonnaise, 3 tablespoons nonfat or low-fat plain yogurt, 1 tablespoon water, 2 roughly chopped scallions, and 1 small clove garlic; purée until smooth. Add 2 tablespoons chopped fresh basil, 1 tablespoon chopped fresh parsley, 1 tablespoon chopped fresh tarragon, and 2 teaspoons fresh lemon juice; blend just until combined. Season with salt and freshly ground black pepper to taste.

**Lemon Vinaigrette:** Whisk together 3 tablespoons fresh lemon juice, 1½ teaspoons Dijon mustard, 1 minced
garlic clove, and 1 teaspoon dried oregano. Slowly whisk in ½ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste. Add a pinch of sugar substitute, if desired.

**Lemony Dill Dressing:** Whisk together 3 tablespoons fresh lemon juice, 1 tablespoon finely chopped dill, 1½ teaspoons Dijon mustard, and 1 minced garlic clove. Slowly whisk in ½ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Lime Vinaigrette:** Whisk together 3 tablespoons fresh lime juice, 1 minced garlic clove, a pinch of ground cumin, and a pinch of sugar substitute. Slowly whisk in ⅓ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Mint Vinaigrette:** Whisk together ⅓ cup finely chopped fresh mint leaves, ⅓ cup white wine vinegar, and 2 tablespoons minced red onion. Slowly whisk in ¼ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Orange-Cumin Vinaigrette (Phases 2 and 3):** Whisk together ⅓ cup fresh orange juice, 3 tablespoons fresh lime juice, 1 tablespoon miniced red onion, 1 minced garlic clove, 2 teaspoons Dijon mustard, 1 teaspoon freshly grated orange zest, and a generous pinch of ground cumin. Slowly whisk in ½ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste.

**Ranch Dressing:** Whisk together ¼ cup nonfat buttermilk, 2 tablespoons low-fat mayonnaise, 2 tablespoons nonfat sour cream, 1 tablespoon red wine vinegar, 1 tablespoon finely chopped fresh chives, 1 teaspoon crumbled dried basil, 1 teaspoon dry mustard, ¼ teaspoon dried thyme, and a pinch of sugar substitute. Season with salt and freshly ground black pepper to taste.

**Soy-Ginger Dressing:** Whisk together 2 tablespoons reduced-sodium soy sauce, 2 tablespoons rice wine vinegar, 1½ teaspoons grated fresh ginger, and 1 minced garlic clove. Slowly whisk in ¼ cup canola oil.

**Spicy Lemon-Cumin Vinaigrette:** Whisk together 3 tablespoons fresh lemon juice, 1½ teaspoons Dijon mustard, 1 teaspoon hot pepper sauce, 1 minced garlic clove, and ¼ teaspoon ground cumin. Slowly whisk in ½ cup extra-virgin olive oil. Season with salt and freshly ground black pepper to taste. Add a pinch of sugar substitute, if desired.

**Spicy Tomato Vinaigrette:** In a blender, combine ¾ cup peeled and chopped tomatoes, 3 tablespoons white wine vinegar, 1½ teaspoons Dijon mustard, and 1 teaspoon hot pepper sauce; blend until smooth. Season with salt and freshly ground black pepper to taste; adjust hot sauce to your taste.

**Thousand Island Dressing:** Whisk together ½ cup low-fat mayonnaise, 2 tablespoons chili-garlic sauce, 2 tablespoons minced roasted red peppers (from a jar), 1½ tablespoons finely chopped dill pickle, 1 tablespoon Dijon mustard, 1 tablespoon drained and roughly chopped capers, and 1 tablespoon chopped scallion. Season with hot pepper sauce to taste.

**Tomato-Basil Vinaigrette:** In a blender, combine ¾ cup peeled and chopped tomatoes, 3 tablespoons white wine vinegar, 1½ teaspoons chopped fresh basil, 1½ teaspoons chopped fresh thyme, and 1½ teaspoons Dijon mustard; blend until smooth. Season with salt and freshly ground black pepper to taste.
Red Bean Mash

Prep time: 10 minutes • Cook time: 12 minutes

Double this recipe and turn the extra into Red Bean Cakes (see below) for a satisfying and healthy high-fiber breakfast or lunch. Red Bean Mash will keep in a covered container in the refrigerator for up to 3 days. If you prefer, use cannellini or white kidney beans.

1 tablespoon extra-virgin olive oil
1 large onion, finely chopped
3 garlic cloves, minced
1 (19-ounce) can red kidney beans, rinsed and drained
½ cup vegetable broth
¼ teaspoon salt
3 tablespoons chopped fresh cilantro or parsley (optional)
Freshly ground black pepper

In a medium saucepan, heat oil over medium heat. Add onion and garlic; cook, stirring frequently, until softened and fragrant, about 7 minutes. Add beans, broth, and salt; bring to a simmer and cook for 5 minutes. Remove the pan from the heat; stir in cilantro, if using; and mash with a potato masher to a coarse purée. Add pepper to taste. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 132 calories, 4 g fat, 0.5 g saturated fat, 6 g protein, 19 g carbohydrate, 7 g fiber, 368 mg sodium

Red Bean Cakes: Form the bean mixture into 4 patties. In a large skillet, heat 2 tablespoons extra-virgin olive oil over medium heat. Add patties and cook until heated through, about 3 minutes per side.
Surprise South Beach Diet Mashed “Potatoes”

Prep Time: 15 minutes • Cook Time: 20 minutes

Over the years we’ve made many delicious versions of this South Beach Diet classic. This one is our favorite. Try the variations below, or invent your own!

1½ pounds cauliflower, cut into large florets (about 8 cups)
3 garlic cloves, peeled
2 (14-ounce) cans lower-sodium chicken broth
Salt
Freshly ground black pepper
2 tablespoons chopped fresh chives

In a large saucepan, combine cauliflower, garlic, and broth. If cauliflower is not completely covered by broth, add water to just cover. Bring to a boil, reduce heat to medium-low, and simmer until cauliflower is tender, about 12 minutes.

Reserve 2 tablespoons of the cooking liquid, then drain cauliflower and garlic. Transfer cauliflower and garlic to the bowl of a food processor and process until smooth, pulsing in some or all of the reserved cooking liquid, if necessary, to moisten mixture. Season with salt and pepper to taste. Just before serving, stir in chives. Serve warm.

Makes 4 (1-cup) servings

Nutrition at a Glance

Per serving: 80 calories, 1 g fat, 0 g saturated fat, 8 g protein, 12 g carbohydrate, 4 g fiber, 183 mg sodium

Variations: Fold in shredded reduced-fat cheddar cheese or a small amount of freshly grated Parmesan cheese after puréeing; mix in cooked, chopped turkey bacon; or use chopped fresh parsley or basil in addition to or in place of the chives.
Vanilla Ricotta Crème

Prep time: 5 minutes • Chill time (optional): 2 hours or overnight

This recipe makes 1 serving but can easily be doubled, tripled, or quadrupled. For larger batches, use an electric mixer for a creamier texture.

½ cup part-skim ricotta cheese
¼ teaspoon vanilla extract
1 package granular sugar substitute

In a dessert bowl, whisk together the ricotta, vanilla extract, and sugar substitute. Serve immediately or chill for 2 hours or overnight.

Serves 1

Nutrition at a Glance

Per serving: 178 calories, 10 g fat, 6 g saturated fat, 14 g protein, 7 g carbohydrates, 0 g fiber, 155 mg sodium

Your Favorite Flavor Ricotta Crème: Use ¼ teaspoon of your favorite extract, such as almond, black walnut, rose water, spearmint, or rum, instead of the vanilla in the recipe above. If desired, sprinkle with 1 teaspoon slivered toasted almonds just before serving.

Mocha Ricotta Crème: Add ½ teaspoon unsweetened cocoa powder to the Vanilla Ricotta Crème recipe, above. Dust with a sprinkling of espresso powder.

Lime Zest Ricotta Crème: Add ¼ teaspoon grated lime zest to the Vanilla Ricotta Crème recipe, above.

Lemon Zest Ricotta Crème: Add ¼ teaspoon lemon zest to the Vanilla Ricotta Crème recipe, above.
Creamy Lemon-Vanilla Ricotta Soufflés

Prep time: 15 minutes • Cook time: 15 minutes

These beautifully puffed sweets are an elegant twist on our classic Phase 1 ricotta crème and are just as easy to make. Prepare and bake them just before serving.

- 1 cup part-skim ricotta cheese
- 2 large eggs, separated
- 3 tablespoons granular sugar substitute
- 2 teaspoons grated lemon zest
- ½ teaspoon lemon extract
- ½ teaspoon vanilla extract
- Pinch of salt

Preheat the oven to 375°F. Lightly coat 4 (4-ounce) ramekins with cooking spray.

In a large bowl, whisk together ricotta, egg yolks, 1 tablespoon of the sugar substitute, lemon zest, and lemon and vanilla extracts until well combined.

In another large bowl, with an electric mixer at high speed, beat egg whites and salt until soft peaks form, 2 to 3 minutes. Add remaining 2 tablespoons sugar substitute and continue beating until stiff peaks form. Gently fold a third of the egg whites into ricotta mixture just until combined. Repeat with remaining egg whites.

Spoon ricotta mixture into ramekins. Bake until soufflés have risen and are set and lightly browned, about 15 minutes. Serve immediately.

Makes 4 (½-cup) servings

Nutrition at a Glance

Per serving: 130 calories, 7 g fat, 4 g saturated fat, 10 g protein, 5 g carbohydrate, 0 g fiber, 180 mg sodium
Baked Ricotta Custard

Prep time: 10 minutes • Cook time: 45 minutes • Chill time (optional): 2 hours or overnight

A simple sprinkle of cinnamon makes these creamy custards taste just like rice pudding—without the rice!

¾ cup part-skim ricotta cheese
4 ounces nonfat tub-style cream cheese, at room temperature
¼ cup granular sugar substitute
1 large egg
1 large egg white
¼ cup fat-free half-and-half
¼ teaspoon vanilla extract
Ground cinnamon, for garnish

Heat the oven to 250°F.
In a large bowl, with an electric mixer at medium speed, beat ricotta and cream cheese until creamy. Add sugar substitute and beat until well combined. Add egg, egg white, half-and-half, and vanilla; beat until well blended.
Transfer mixture to 4 (8-ounce) ramekins. Place ramekins in a baking dish. Add hot water to baking dish to a depth of 1 inch. Bake until custards are set, about 45 minutes. Remove from water bath and cool on rack. Serve chilled or at room temperature, sprinkled with cinnamon.

Makes 4 servings

Nutrition at a Glance

Per serving: 128 calories, 5 g fat, 3 g saturated fat, 12 g protein, 7 g carbohydrate, 0 g fiber, 283 mg sodium
Chilled Espresso Custard

Prep Time: 10 minutes • Cook Time: 12 minutes • Chill time: 3 hours or overnight

Coffee lovers won’t be able to resist this lovely custard flavored with espresso powder. If you prefer, use decaf espresso powder or instant coffee.

1½ cups 1% milk
2 large eggs, beaten
3 tablespoons granular sugar substitute
2 teaspoons espresso powder
1 teaspoon vanilla extract
Ground cinnamon, for garnish
Lemon twists, for garnish

In a medium bowl, whisk together milk, eggs, sugar substitute, espresso powder, and vanilla until well blended. Pour into 4 (6-ounce) custard cups and place cups in a deep skillet.

Fill the skillet with water to halfway up the custard cups. Bring water to a simmer over high heat. Reduce heat to low, cover pan with foil, and continue to simmer for 10 minutes. Carefully remove the cups from the pan, cover custards with plastic wrap (it can touch), and refrigerate for at least 3 hours or overnight. When ready to serve, garnish with cinnamon and lemon twists.

Makes 4 servings

Nutrition at a Glance

Per serving: 110 calories, 3.5 g fat, 1.5 g saturated fat, 6 g protein, 13 g carbohydrate, 0 g fiber, 80 mg sodium
Cocoa-Nut Mousse

Prep Time: 20 minutes • Cook Time: 10 minutes • Chill Time: 2 hours or overnight

Toasted coconut, cocoa, and almonds—a familiar (and favorite!) candy-bar combination—come together in this creamy, decadent mousse. And as if that isn’t good enough, the nuts and ricotta cheese offer a dose of healthy protein, making a dessert that is both filling and satisfying to your sweet tooth.

½ cup slivered almonds
¼ cup shredded unsweetened coconut
4 cups part-skim ricotta cheese
3 tablespoons unsweetened cocoa powder
1 tablespoon plus 1 teaspoon granular sugar substitute
2 teaspoons almond extract
2 teaspoons vanilla extract
1 cup light or fat-free whipped topping
A few slivered almonds and a pinch of coconut for garnish (optional)

Heat the oven to 275°F. Spread almonds on a baking sheet and toast until golden and fragrant, stirring occasionally, 8 to 10 minutes. Transfer to a plate to cool. Spread coconut on the baking sheet and toast until golden, 2 to 3 minutes. Transfer to a plate to cool.

In a large bowl, beat ricotta with an electric mixer at high speed until light and airy, about 4 minutes. Add cocoa powder, sugar substitute, and almond and vanilla extracts; beat just until blended. Fold in whipped topping and reserved almonds and coconut.

Spoon mousse into 8 dessert bowls or cups; cover and chill for at least 2 hours or overnight. To serve, garnish with a few almonds and a little coconut, if desired.

Makes 8 (2/3-cup) servings

Nutrition at a Glance

Per serving: 260 calories, 16 g fat, 8 g saturated fat, 16 g protein, 12 g carbohydrate, 2 g fiber, 160 mg sodium
Maple-Almond Flan

Prep time: 10 minutes • Cook time: 45 minutes • Chill time: 4 hours or overnight

A traditional Spanish dessert, flan is a creamy custard baked with a sugar-based caramel, which creates a toasty-tasting sweet sauce. In this version, sugar-free maple syrup is drizzled on top to create a similar effect. The maple taste is the perfect complement to toasted slivered almonds.

- 3 tablespoons slivered almonds
- 8 ounces canned fat-free evaporated milk
- ¼ cup plus 2 tablespoons fat-free milk
- ½ cup egg substitute
- 1½ tablespoons granular sugar substitute
- ¾ teaspoon almond extract
- ¾ teaspoon vanilla extract
- 4 tablespoons sugar-free maple-flavored syrup

Heat the oven to 275°F. Spread almonds on a baking sheet and toast, stirring once, until lightly golden, 8 to 10 minutes. Transfer almonds to a cutting board to cool; roughly chop and set aside.

Meanwhile, in a small saucepan, combine evaporated milk and fat-free milk and heat over medium-low heat until scalded but not boiling. Remove the pan from the heat and set aside.

In a large bowl, whisk together egg substitute, sugar substitute, and almond and vanilla extracts. Whisk in ½ cup of heated milk mixture, then whisk in remaining milk mixture.

Divide flan among 4 (6-ounce) custard cups. Place cups in a baking pan and add hot water to come halfway up cups. Bake until flans are set, about 25 minutes. Remove from the oven, cool in the pan, then chill in the refrigerator for at least 4 hours or overnight.

Half an hour before serving, remove flans from refrigerator. Just before serving, run a knife around edges and invert flans onto individual plates. Drizzle each with 1 tablespoon syrup and sprinkle evenly with reserved almonds.

Makes 4 servings

Nutrition at a Glance

Per serving: 108 calories, 3 g fat, 0 g saturated fat, 9 g protein, 13 g carbohydrate, 1 g fiber, 161 mg sodium
Ricotta Cheesecake
with Lemon Drizzle and Pine Nuts

Prep time: 10 minutes • Cook time: 1 hour 20 minutes • Chill time: 4 hours or overnight

This traditional Italian dessert is refreshingly light and delicately citrusy. You’ll find it’s quite unlike our dense, creamy American cheesecake but no less delicious.

3 tablespoons pine nuts
6 large eggs, separated
¾ teaspoon cream of tartar
1/3 cup plus 1 teaspoon granular sugar substitute
2 teaspoons vanilla extract
1 (32-ounce) container part-skim ricotta cheese
1 teaspoon finely grated lemon zest
2 tablespoons fresh lemon juice

Position a rack in the middle of the oven and heat the oven to 275°F. Lightly coat a 9-inch springform pan with cooking spray. Spread nuts on a baking sheet and toast until lightly golden, about 10 minutes. Transfer nuts to a plate to cool. Increase the oven to 325°F.

In a large metal bowl, with an electric mixer at high speed, beat egg whites until frothy, about 1 minute. Add cream of tartar and continue to beat until stiff peaks form, about 3 minutes longer. Set aside.

In a separate large bowl, with an electric mixer at medium speed, beat egg yolks, 1/3 cup of the sugar substitute, and vanilla for 1 minute. Add ricotta and zest, and beat until smooth.

Gently fold one-third of the whites into the yolk mixture, then add the rest of the whites and gently fold in until well combined. Pour batter into the prepared pan, place the pan on a baking sheet, and bake until cake is golden and mostly set, about 1 hour 10 minutes. Remove cake from oven and cool on a rack for 20 minutes.

In a small saucepan, combine lemon juice and remaining 1 teaspoon sugar substitute; bring to a simmer over low heat. Remove from the heat and gently brush the surface of the cooled cake with two-thirds of the warm lemon mixture; drizzle remaining mixture into the cracks. Sprinkle the top with pine nuts.

Cool cake completely, then run a knife around the edge before releasing from pan. Chill, loosely covered, for 4 hours or overnight. Serve chilled.

Makes 12 servings

Nutrition at a Glance

Per serving: 140 calories, 9 g fat, 4.5 g saturated fat, 11 g protein, 5 g carbohydrate, 0 g fiber, 140 mg sodium
South Beach Diet Nutty Granola Topping

**Prep time: 10 minutes • Cook time: 25 minutes**

This tasty topping is meant to be enjoyed in tablespoon-size servings on top of low-fat or nonfat plain yogurt, fat-free or reduced-fat cottage cheese, or part-skim ricotta. Made in a large batch, it can be stored in an airtight container in the refrigerator for up to 1 month. Or, place half in a zip-top freezer bag, press out the air, seal tightly, and freeze for up to 3 months—no defrosting necessary, just scoop out and use!

- ½ cup slivered almonds
- ½ cup unsweetened coconut
- ½ cup flaxseed
- ½ cup pecans, chopped
- ½ cup pumpkin seeds
- ½ cup sunflower seeds
- ½ cup walnuts, chopped
- 2 tablespoons trans fat-free margarine
- 2 teaspoons ground cinnamon
- 2 teaspoons vanilla extract
- 2 teaspoons sugar substitute

Heat the oven to 325°F.
In a large bowl, combine almonds, coconut, flaxseed, pecans, pumpkin seeds, sunflower seeds, and walnuts.
In a small saucepan, melt margarine over low heat. Remove the pan from the heat and whisk in cinnamon and vanilla. Pour over nut mixture and toss to combine. Sprinkle with sugar substitute and toss again.
Spread mixture on a baking sheet and bake, tossing every 5 minutes, for 20 to 25 minutes, or until lightly golden. Cool on a rack. Store in an airtight container in the refrigerator for up to 1 month, or freeze for up to 3 months.

**Makes 2½ cups (40 tablespoons)**

**Nutrition at a Glance**

**Per tablespoon:** 65 calories, 6 g fat, 1 g saturated fat, 2 g protein, 2 g carbohydrate, 1 g fiber, 6 mg sodium
Lemon-Thyme Ices

Prep time: 15 minutes • Freezing time: 2 hours

This pretty dessert makes a lovely ending to any meal. Reminiscent of an Italian lemon ice, it is updated here with a hint of fresh thyme. If you prefer a less tart version, add a little more sugar substitute.

- 3 leafy fresh thyme sprigs plus 4 extra sprigs for garnish
- ½ cup granular sugar substitute
- 2 cups boiling water
- 1 cup fresh lemon juice (from 5 to 6 lemons)
- 1 tablespoon grated lemon zest
- Salt

In a medium metal bowl, combine thyme and sugar substitute. Pour boiling water over them and stir to dissolve sugar substitute. Steep for 3 minutes, then remove and discard thyme.

Place bowl in freezer until mixture is cool, about 10 minutes. Remove from freezer and whisk in lemon juice, zest, and a pinch of salt. Pour into 2 standard ice cube trays, filling each ice cube compartment to just below the top (you will fill 1 tray and half of a second one).

Freeze until mostly frozen through, 1½ to 2 hours. Place cubes in a food processor or blender and pulse very briefly, just until ice becomes granular. (Don’t overprocess, or the dessert will be a liquid.) Transfer ice to dessert bowls, garnish with tops of extra thyme sprigs, and serve immediately.

Makes 4 (generous ½-cup) servings

Nutrition at a Glance

Per serving: 30 calories, 0 g fat, 0 g saturated fat, 0 g protein, 9 g carbohydrate, 0 g fiber, 0 mg sodium

EASY PHASE 1 SUBSTITUTIONS
<table>
<thead>
<tr>
<th>Item</th>
<th>Alternative</th>
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<tbody>
<tr>
<td>Rice</td>
<td>Bed of lentils or finely chopped cauliflower</td>
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<tr>
<td>Popcorn</td>
<td>Roasted cauliflower florets or roasted kale with popcorn salt</td>
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<tr>
<td>Potato chips</td>
<td>Baked zucchini chips, celery root (celeriac chips)</td>
</tr>
<tr>
<td>Diced potatoes</td>
<td>Diced artichoke hearts, eggplant, or hearts of palm</td>
</tr>
<tr>
<td>French fries</td>
<td>Oven-baked zucchini fries or roasted whole fresh green beans</td>
</tr>
<tr>
<td>Hash brown potatoes</td>
<td>Shredded zucchini</td>
</tr>
<tr>
<td>Mashed potatoes</td>
<td>Mashed cauliflower or pureed navy beans</td>
</tr>
</tbody>
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Dr. Agatston Answers Your Questions about Phase 1

Here are the answers to some of the questions that our nutritionists and I are most often asked by dieters who are on Phase 1.

I’m finding the first few days of Phase 1 to be very difficult. What can I do to make things easier?

When you say you’re having difficulty with Phase 1, I presume you’re missing the briefly energizing surge in blood sugar caused by eating refined and sugary carbs. You may be feeling a bit sluggish and out of sorts as you stabilize your blood sugar. It can take your body a few days to adjust to this new and healthier way of eating. But, if you follow the Phase 1 guidelines correctly, you can make it easier on yourself.

Make sure that you are adequately satisfying your hunger with the right foods—including lean protein and plenty of vegetables—at every meal, including breakfast (and be sure you’re hydrated). I’m not talking about overstuffing yourself, but do eat until you are comfortably full. If you’re still craving that doughnut you used to eat midmorning, be sure to have a midmorning snack that includes some fiber and protein before the cravings for the doughnut set in. Ditto for the timing on your midafternoon snack. Strategic snacking is especially important when starting the diet. Studies show that it takes relatively few calories to prevent cravings but many more to satisfy them once they occur. The quality of calories in your satisfying meals and snacks, along with a dessert that contains protein, should help keep your hunger at bay. But if you find you need something else to satisfy your cravings, try one of the 75- to 100-calorie sweet treats listed on “Phase 1 Foods to Enjoy” Section. Many of our dieters have said that having an occasional sweet treat satisfied their need for more of an indulgence.

Also remember that exercise is a dieter’s best friend. It can help stabilize your blood sugar, plus it releases brain chemicals called endorphins that regulate your stress hormones so you feel happier. If your cravings are starting to get the best of you, go out and do your fast-walking cardio intervals for the day (see “Phase 1 Weekly Exercise Plan” Section). You’ll burn fat and calories faster and see quicker weight loss. These positive results will get you all the more motivated to keep going. Your cravings will subside within a few days, and in just 2 weeks, you’re on Phase 2.

I’m doing so well on Phase 1; why can’t I stay on it indefinitely?

There are two types of people on the South Beach Diet: those who cannot wait to start Phase 2 (see above) and those who never want to see Phase 1 end.

Why are some people so enamored with Phase 1? The reason is that it’s simple and to the point. You don’t have to do a lot of thinking about food choices. You’re basically eating lean protein, high-fiber legumes, low-fat dairy, good fats (including some nuts), and plenty of vegetables. Those highly processed refined carbs that were your downfall are out of sight and, within a few days, out of mind (at least for most people). You’re encouraged to eat until you’re full and snack before you get hungry. And every time you step on the scale, you get a big grin on your face because those unwanted pounds and fat are just melting away. So it’s not surprising to me that Phase 1 fans often ask, “If I’m doing so well on Phase 1, why do I have to move on to Phase 2?”

Phase 1 is not meant to be a long-term eating plan. Its dual goals are to jump-start weight loss for people who have 10 or more pounds to lose (thus providing immediate positive reinforcement) and to control swings in blood sugar and eliminate cravings for sugar and refined starches. Phase 1 can also have a positive effect on sugar in people with prediabetes. In just 2 weeks, you should have achieved these two goals and be ready to move on.

Once your sugar and cravings are under control, there’s a key reason to go on to Phase 2: We don’t want you to miss out on the myriad vitamins, minerals, and other nutrients that come from reintroducing whole fruits and whole grains to your diet, not to mention the added fiber. As I discussed in Chapter 7, these foods contain thousands of phytochemicals that protect your body against a host of diseases, including heart disease and cancer. If you were to continue indefinitely on Phase 1 and deny yourself these foods, you would not be learning how to make good food choices in the real world. More important, you’d be missing out on some of the best medicine nature has to offer.
In addition, if you were to continue with the smaller palette of foods recommended on Phase 1, your diet would get dull over the long haul. And once you’re bored, you’re much more likely to revert to your old eating habits. For the diet to truly become a lifestyle—one that allows you to sustain weight loss and garner all the related health benefits—there has to be variety and satisfaction in your eating plan. That’s another reason why we move you on to Phase 2 so quickly.

Remember, it may take you longer to lose weight by following the three phases of our diet. But the chances of keeping that weight off are far better.

Should I be taking a fiber supplement?

You may be asking this question because on many diets—especially the very high-protein diets—dieters become constipated and often require fiber supplements. This is so common that fiber supplements are actually recommended on many of these diets. This is not the case with the South Beach Diet. Even on Phase 1, when you aren’t eating whole grains, you’re still eating lots of high-fiber vegetables and legumes, so you should be fine. Some people do, however, find that without grains, they suffer from constipation. In that case, a fiber supplement could help restore normal bowel function. Fiber supplements such as plant-derived psyllium or synthetic methylcellulose or polycarbophil are safe and effective. Just be sure to take them with plenty of water.

I’m on Phase 1 and having really bad headaches. Is this common, and do you have any recommendations?

Although it’s not common, some people do experience headaches on Phase 1. There are a few possible causes. First, are you eating all your meals and snacks when you’re supposed to? Skipping meals or snacks could cause your blood sugar to dip too low, triggering headaches—which leads to my second question: Are you eating enough? Many new dieters mistakenly believe that the only way to succeed on Phase 1 is to starve themselves. Nothing could be further from the truth! If you’re famished and headachy, you’re not likely to stick with the program. We want you to eat normal portions and not leave the table hungry. Also, if you’ve severely limited your caffeine intake (you can have caffeine, just don’t go overboard), you may be experiencing caffeine withdrawal headaches. Try adding a cup or two of caffeinated coffee back into your diet in the morning and see if your headaches subside.

With two kids in college, my husband and I are on a tight budget for a few years. I am thinking of going on the diet but wonder if it’s going to be expensive.

Like many people, you may assume that a diet rich in fruits and vegetables is way more expensive than eating processed food, fast food, or junk food. There’s no question that, ounce for ounce, some fruits and vegetables will cost more than the 99-cent fast-food special, but you need to consider the cost to your health in not eating these healthy foods.

Surprisingly, there hasn’t been a lot of research done in this country about the dollar-for-dollar cost of fast food versus fresh. But a recent study cited in the Journal of the American Dietetic Association did catch my eye. It showed that among older patients, there was at least a $2,000-a-year savings in Medicare costs among participants with a higher intake of fruits and vegetables. While this study was done on an older population, I can assure you that eating a healthy diet saves on doctor bills for people of all ages, including your college-age kids.

You can adapt the South Beach Diet to most budgets with very little effort. Our Phase 1 Foods to Enjoy list offers a wide range of choices, from pricier cuts of meat and specialty produce to more economical options. For example, you can pass on filet mignon and satisfy your protein needs with less-expensive bottom round, flank steak, extra-lean chopped beef, or white-meat chicken or turkey. Instead of fresh tuna, choose canned chunk light tuna in water. As far as fresh vegetables go, they are actually less expensive than many packaged and processed foods. To keep things interesting, we do recommend that you occasionally try different types of vegetables, such as hearts of palm or broccoli rabe, or interesting salad greens such as endive, radicchio, or frisée. But if you find that these items are too costly, you can substitute any type of comparable vegetable.

Adding whole grains once you’re on Phase 2 won’t be appreciably more expensive, either. Most major supermarkets, big-box stores, price clubs, and health-food stores now offer an array of whole-grain products at very reasonable prices. And, of course, high-fiber dried beans, chickpeas, lentils, and other legumes, which we recommend on all phases of the diet, are among the most reasonably priced products in the supermarket today. Cook
up a big pot of bean or lentil soup; it will cost you less than a dollar a serving.
SUPERCHARGED EATING ON THE SOUTH BEACH DIET

PHASE 2

Achieving
Your Health and
Weight Loss Goals

If you have fewer than 10 pounds to lose and don’t have food cravings, you can begin the diet on Phase 2. If you’ve been on Phase 1 for 2 weeks and your cravings have resolved, you should now begin Phase 2. Your weight loss will be slower than it was on Phase 1, but most people continue losing 1 to 2 pounds a week if they follow the plan correctly. This gradual weight loss is not only expected, it’s healthy, and it’s the transition of turning the diet into a lifestyle. If you were to continue to lose weight rapidly on Phase 2, you could be losing lean muscle mass, which can ultimately slow your metabolism. Plus, if you lose weight gradually, it’s more likely to stay off over the long term.

On Phase 2, you can eat everything on the Phase 1 Foods to Enjoy list (see “Phase 1 Foods to Enjoy” Section) as well as some new foods (“Foods to Reintroduce on Phase 2” Section to Phase 2 Foods to Avoid or Eat Rarely” Section). If you’re starting on Phase 2 rather than Phase 1, you’ll be eliminating bad fats and highly processed refined carbohydrates from your diet and eating good fats and the nutrient-dense, high-fiber carbs from wholesome fruits and vegetables and whole grains instead. You’ll also be eating lean protein and low-fat dairy. You’ll soon find that this is a healthy, satisfying way to eat, and you will steadily lose weight.

Yes, on Phase 2, you’ll be able to have bread…and fruit…within reason. You’ll gradually reintroduce many of the foods that you were advised to avoid on Phase 1, including whole-grain breads, whole-wheat pasta, and brown rice, as well as most whole fruits and selected root vegetables (such as sweet potatoes), all of which are loaded with beneficial nutrients. You’ll notice that a few fruits and vegetables are still off-limits until Phase 3; even then, we recommend that you have them only occasionally. These include fruits that are high in natural sugar, such as watermelon, pineapple, dates, and figs, as well as certain vegetables, such as white potatoes, beets, and corn. In our experience, these foods are likely to trigger cravings in susceptible people.

While you may be excited to be on Phase 2, don’t go wild over the additional choices. One of the biggest mistakes people make is adding too many whole grains, starchy vegetables, and fruits too soon. Even though these are “good carbs,” they are still higher in sugar than the lean protein and vegetables that form the mainstay of the Phase 1 menus. And if, after spending 2 weeks eating a very low-sugar diet, you suddenly flood your system with carbohydrates, even good ones, it can sometimes trigger the same cravings that got you into trouble in the first place.

That’s why I recommend gradually reintroducing good carbs into your diet. Some people can do it over a 2-week period; others—especially those who find that they’re still getting cravings—need to add carbs even more slowly, ultimately sticking with two good starches and two fruits indefinitely, or three fruits and fewer starches if starchy carbs really stimulate cravings. In addition, if you ever find that you’re regaining weight on Phase 2, cut back a bit on the total servings of good carbs, or just eat a few bites of these foods, and see how it goes.

Let me walk you through how to introduce the good carbs gradually. This mirrors the way more carbs are introduced during the 2 weeks of our Phase 2 Sample Meal Plans on “Phase 2 Sample Meal Plans” Section. For purposes of example, we’ve compressed the carb introduction into 2 weeks. Of course, you can introduce carbs more slowly if you find your weight loss isn’t proceeding slowly and steadily.

Phase 2—Week 1

Days 1 to 7: 1 good starch, 1 piece of fruit each day. Have one starchy carb and a piece of fruit daily the first week. Although the fruits can vary and be added at any meal, we’ve found that to keep cravings at bay, it’s best not
to have fruit at breakfast for the first week. Instead, we generally recommend eating a slice of whole-wheat bread or a serving of high-fiber cereal with your egg in the morning. This will help keep your blood sugar levels stable for the rest of the day.

Start with one piece of whole fruit, such as an apple or a serving of berries with lunch, or eat some fruit with a piece of reduced-fat cheese for your snack. Once again, eating fruit along with protein helps prevent the sugar-induced insulin spike that can trigger food cravings.

The gradual introduction of these carbohydrates gives your body the opportunity to adjust to the increase in sugar, and you can monitor your reaction to particular foods. If you find that you’re hungry an hour after eating a particular good carb, the next day try eating a different good carb—preferably, one with more fiber. And if you’re still hungry during the day, add a little more protein to the mix.

**Phase 2—Week 2**

**Day 8: 2 good starches, 1 piece of fruit.** If you’ve done well on Phase 2, Week 1—you are losing weight and have no cravings—start the second week by adding one more good starch to your diet. Stick with one piece of whole fruit.

If your cravings are there but minimal, keep trying different good starches and fruits. When you are finally rid of cravings, you can begin to add more good carbs, as directed below.

**Day 9: 2 good starches, 2 pieces of fruit.** If you are fine on Day 8 and have no cravings, add a second piece of fruit today, so you are now up to two pieces of fruit and two servings of good starches daily.

**Days 10 and 11: 3 good starches, 2 pieces of fruit each day.** If you’re continuing to do fine with the added carbs, you can now add an additional good starch, so you are now eating two pieces of whole fruit and three servings of good starches daily.

**Days 12 to 14: 3 good starches, 3 pieces of fruit each day.** By now, your body should have adjusted to the additional good carbs. We don’t limit the amount of good carbs you can eat on Phase 2, but most people will continue to lose weight by sticking with three fruits and three starches daily.

Now that you understand the reintroduction of additional carbohydrates, here’s something to put cheer in your heart: You’ll also be able to enjoy a glass of wine or two with or after a meal or a light beer on occasion, and you’ll have more options for dessert, including the occasional piece of dark chocolate!

Keep in mind that Phase 2 is a period of slower but steady weight loss. You’re not dropping pounds as quickly as you did on Phase 1, but the trade-off is that you’re eating a much more varied diet, one that’s full of nutrient-dense, fiber-rich foods; plenty of vitamins, minerals, and phytonutrients; and plenty of delicious flavor combinations. Short-term success is not what the South Beach Diet is about. It’s about learning to eat well for life. If you stick with Phase 2, there’s no question that you will eventually reach your desired weight. Millions of South Beach dieters have already proven that.

The really exciting news is that if you adopt the South Beach Supercharged Fitness Program, starting with either the Phase 1 or Phase 2 exercises (depending on your level of fitness), your weight loss will continue to move along steadily, as you’re eating a wider variety of healthy foods.

It’s well known that people who don’t increase their activity levels while dieting often have more difficulty keeping the weight off long term. Even if you’re already exercising, you may need to kick it up a notch to get your metabolism back in high gear. The Interval Walking program presented in this book, which gradually gets harder as you get fitter, is the perfect way to boost your metabolism so that you burn more fat and calories, not only while you’re exercising, but also when you’re going about your daily activities and even when you’re sitting at your desk or watching TV. And by doing the Total Body Workout exercises on alternate days, you’ll keep your core muscles toned and your body fit and trim.

Keep in mind that you will be following the healthy eating principles of Phase 2 until you reach your optimal weight.

On “Foods to Reintroduce on Phase 2” Section to Phase 2 Foods to Avoid or Eat Rarely” Section, you’ll find a list of Foods to Reintroduce on Phase 2 as well as Foods to Avoid or Eat Rarely. With this expanded list of healthy choices, plus all of the Phase 1 foods, you should have no trouble finding foods that fit your taste preferences. And on “Phase 2 Sample Meal Plans” Section, we’ve provided 2 weeks of Phase 2 Meal Plans, which are then followed by delicious recipes for these meal plans. As with the Phase 1 Meal Plans, these are meant to be suggestions for the types of meals and snacks you might enjoy throughout a day. You are of course free to create your own menus as you desire from the allowable foods.
You’ll notice that some of the new main-course recipes we’ve developed for Phase 2 don’t include carbohydrates. That’s because you’ll be getting your good carbs in the form of the fruits or whole grains you eat for breakfast or snacks, in side dishes, or even for dessert. This means you’ll be able to prepare and enjoy these recipes on Phase 1 (look for a note at the end of the recipes where this pertains).

Finally, on “Phase 2 Sample Meal Plans” Section, you’ll find answers to some of the most common questions asked by people who are on Phase 2.

**FOODS TO REINTRODUCE ON PHASE 2**

You can enjoy all the foods on Phase 1, as well as those listed here.

**BEEF**

All hot dogs (beef, pork, poultry, soy) can be enjoyed occasionally (once a week) if they are at least 97% fat-free (3–6 g fat per serving).

**FRUIT**

Start with one serving daily, gradually increasing to up to three servings daily. For more on introducing fruits on Phase 2, see “PHASE 2: Achieving Your Health and Weight Loss Goals” Section.

Apple—1 small or 5 dried rings
Apricots—4 fresh or 7 dried
Banana—1 medium (4 oz.)
Blackberries—¾ cup
Blueberries—¾ cup
Boysenberries—¾ cup
Cactus pear fruit (prickly pear)—1
Cantaloupe—¼ melon or 1 cup diced
Cherries—12
Clementine—1
Cranberries—¾ cup
Elderberries—¾ cup
Gooseberries—¾ cup
Grapefruit—½
Grapes—15
Honeydew—1/8 melon or 1 cup diced
Kiwifruit—1
Loganberries—¾ cup
Mandarin oranges—2
Mango—½ medium (4 oz.)
Mulberries—¾ cup
Nectarine—1 small
Orange—1 medium
Papaya—1 small (4 oz.)
Peach—1 medium
Pear—1 medium
Plums—2
Pomegranate seeds—from 1 medium pomegranate
Pomelo—½
Prunes—4
Raspberries—¾ cup
Strawberries—¾ cup
Tangelo—1 small
Tangerines—2

VEGETABLES
Carrots—½ cup
Peas, green—½ cup

DAIRY
2–3 cups allowed daily, including yogurt
Yogurt—4 oz. per day (artificially sweetened low-fat or nonfat flavored yogurt; avoid varieties that contain high-fructose corn syrup)

WHOLE GRAINS AND STARCHY VEGETABLES
Start with one serving daily, gradually increasing to up to three or four servings daily. For more on introducing starches on Phase 2, see “PHASE 2: Achieving Your Health and Weight Loss Goals” Section. Unless otherwise stated, choose whole-grain products that have 3 g or more fiber per serving.

Bagel, whole-grain—½ small (1 oz.)
Barley—½ cup cooked
Bread—1 slice (1 oz.)
Homemade breads made with whole grains (buckwheat, whole-wheat, spelt, whole oats, bran, rye)
Multigrain
Oat and bran
Rye
Sprouted-grain
Whole-wheat

Buckwheat—½ cup cooked

Calabaza—¾ cup (considered a starchy vegetable; count as a starch/grain serving)

Cassava—¼ cup (considered a starchy vegetable; count as a starch/grain serving)

Cereal, cold (choose low-sugar with 5 g or more fiber per serving; serving sizes vary, so be sure to check the label to determine recommended amount)

Cereal, hot (choose whole-grain and slow-cooking varieties—not instant—with at least 3 g fiber and no more than 2 g sugar; serving sizes vary, so be sure to check the label to determine recommended amount)

Couscous, whole-wheat or Israeli—½ cup cooked

Crackers, whole-grain (3 g or more fiber per oz., no trans fats)

English muffin, whole-grain—½ muffin (1 oz.) (most contain 2.5 g fiber per half a muffin; varieties with 3 g fiber are the best choice)

Farro—½ cup cooked

Flour

Soy

Spelt

Whole-wheat

Whole-wheat pastry flour

Muffin, bran—1 small, homemade sugar-free, no raisins

Pasta

Soy—½ cup cooked (3 g or more fiber per ½ cup)

Whole-wheat—½ cup cooked (3 g or more fiber per ½ cup)

Peas, green—½ cup (considered a starchy vegetable; count as a starch/grain serving)

Phyllo dough and shells, whole-wheat—2 sheets or 4 mini shells

Pita—½ pita (1 oz.) (most contain 2.5 g fiber per half pita; varieties with 3 g fiber are the best choice, such as stone-ground whole-wheat)

Popcorn—3 cups popped

Air-popped

Microwave, plain, no trans fats

Stove-top, cooked with canola oil

Potato, sweet, 1 small (considered a starchy vegetable; count as a starch/grain serving)

Pumpkin—¾ cup (considered a starchy vegetable; count as a starch/grain serving)

Quinoa—½ cup cooked
Rice—½ cup cooked
Basmati
Brown, regular, converted, or parboiled
Wild
Rice noodles—½ cup cooked
Soba noodles—¾ cup cooked
Squash, winter—¾ cup (considered a starchy vegetable; count as a starch/grain serving)
Taro—1/3 cup (considered a starchy vegetable; count as a starch/grain serving)
Tortilla, 100% whole-grain—1 small (3 g or more fiber per ounce, no trans fats)
Yam—1 small (considered a starchy vegetable; count as a starch/grain serving)

OCCASIONAL TREATS

Chocolate (1 oz.)
Bittersweet dark
Semisweet dark
Pudding, fat-free, sugar-free (one serving per day permitted)

BEVERAGES

Light beer (1), on occasion (12 oz.)
Wine, red or white (1–2 glasses, 4 oz. each, permitted daily with or after meals)

PHASE 2 FOODS TO AVOID OR EAT RARELY

STARCHES

Bagel, refined wheat flour
Bread
Refined wheat flour
White
Cookies
Cornflakes
Cream of wheat
Matzo (except whole-wheat varieties, which are allowed)
Oatmeal, instant
Pasta, white flour
Potatoes
Instant
White
Rice
Jasmine
Sticky
White
Rice cakes
Rolls, white dinner

FRUIT
Canned fruit, in heavy syrup
Dates
Figs
Fruit juice
Lychee
Pineapple
Raisins
Watermelon

VEGETABLES
Beets
Corn
Potatoes, white

MISCELLANEOUS
Honey
Ice cream
Jam and jelly

PHASE 2 SAMPLE MEAL PLAN

DAY 1

BREAKFAST
6 ounces tomato juice
4 ounces artificially sweetened nonfat or low-fat vanilla yogurt
Irish oatmeal with cinnamon and chopped walnuts
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**

¾ cup strawberries and a latte with fat-free milk (sweeten with sugar substitute, if desired)

**LUNCH**

That Shrimp Soup ([“Recipes for Phase 2 Meal Plans” Section](#))
Tossed salad (mixed greens, chopped cucumber, and cherry tomatoes)

2 tablespoons Lemony Dill Dressing ([“Recipes for Phase 1 Meal Plans” Section](#)) or low-sugar prepared dressing of your choice

**MIDAFTERNOON SNACK**

1 hard-boiled egg with bell pepper strips

**DINNER**

London broil with fresh mushroom “gravy” (cook mushrooms in beef stock with herbs of your choice)
Roasted asparagus with minced shallots
Cannellini Bean Mash ([“Recipes for Phase 1 Meal Plans” Section](#))

**DESSERT**

Chocolate mousse (4 ounces sugar-free chocolate pudding mixed with 2 tablespoons light or fat-free whipped topping)

**DAY 2**

**BREAKFAST**

6 ounces vegetable juice cocktail
Open-face turkey breakfast stack (top ½ whole-wheat English muffin with 1 slice tomato, 1 slice turkey bacon, and 1 poached egg)
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**

1 small Granny Smith apple with 1 ounce reduced-fat cheddar cheese cubes
LUNCH
Chilled consommé

Spinach salad with diced tofu, chickpeas, sliced button mushrooms, and onions

2 tablespoons Spicy Tomato Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

MIDAFTERNOON SNACK
Spicy Hummus ‘n’ Veggie Roll-Up ("Recipes for Phase 1 Meal Plans" Section)

DINNER
Chicken and Lentil Stew ("Recipes for Phase 2 Meal Plans" Section)

Frisée salad with chopped black olives and a sprinkling of blue cheese

2 tablespoons Champagne Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
Coffee Panna Cotta ("Recipes for Phase 2 Meal Plans" Section)

DAY 3

BREAKFAST
6 ounces tomato juice
2 hard-boiled eggs

Wholesome Oat Muffin ("Recipes for Phase 2 Meal Plans" Section) with 1 teaspoon sugar-free jam

Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
1 sliced kiwifruit topped with ½ cup nonfat Greek yogurt

LUNCH
Tomato stuffed with tuna salad (3 ounces canned light tuna, chopped celery and onion, and 1 tablespoon mayonnaise)

MIDAFTERNOON SNACK
1 slice reduced-fat ham wrapped around 1 part-skim mozzarella stick

5 olives of your choice
DINNER
   Roasted turkey breast topped with sautéed mushrooms; roast extra turkey for Day 4 lunch
   Steamed green beans with lemon and sea salt
   Bibb lettuce salad with chopped toasted walnuts
   2 tablespoons Thousand Island Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar dressing of your choice

DESSERT
   Sugar-free vanilla pudding cup

DAY 4

BREAKFAST
   6 ounces vegetable juice cocktail
   Mini whole-wheat bagel topped with 1 ounce reduced-fat cream cheese, smoked salmon, cucumber and tomato slices, chopped red onion, and capers
   Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
   15 grapes with 1 ounce reduced-fat cheddar cheese

LUNCH
   Roasted Tomato Soup ("Recipes for Phase 2 Meal Plans" Section)
   Sliced roast turkey on a bed of greens with diced avocado (use leftover turkey from Day 3 dinner)
   2 tablespoons Green Goddess Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar dressing of your choice

MIDAFTERNOON SNACK
   Cocoa-raspberry shake (blend ½ cup fat-free milk, ½ cup artificially sweetened nonfat or low-fat raspberry yogurt, 1 packet sugar substitute, and 1 teaspoon unsweetened cocoa powder until frothy)

DINNER
   Herbed pork tenderloin (spray pork with olive oil cooking spray and coat with ¼ cup mixed herbs, such as rosemary, thyme, sage, and/or parsley; roast an extra pork loin for Day 5 lunch)
   Kale and Turkey Bacon Gratin ("Recipes for Phase 2 Meal Plans" Section)
   Spaghetti squash (microwave spaghetti squash and toss strands with lemon zest)

DESSERT
DAY 5

BREAKFAST
6 ounces tomato juice
Cheddar cheese toast (melt reduced-fat Cheddar cheese on 1 slice 100% whole-grain bread)
1 low-fat turkey sausage patty
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
¾ cup blueberries with 4 ounces nonfat Greek yogurt

LUNCH
Phase 2 soup of your choice ("Recipes for Phase 2 Meal Plans" Section)
Thinly sliced pork loin over assorted salad greens (use leftovers from Day 4 dinner)
2 tablespoons Spicy Lemon-Cumin Vinaigrette ("Recipes for Phase 1 Meal Plans" Section)

MIDAFTERNOON SNACK
1 part-skim mozzarella cheese stick
Jicama and cucumber slices

DINNER
Sun-Dried Tomato and Feta-Stuffed Chicken Breasts ("Recipes for Phase 2 Meal Plans" Section)
Vegetable napoleon (stack slices of steamed eggplant with slices of tomato and thin slices of part-skim mozzarella cheese; bake at 350°F until cheese is melted)
Mesclun salad
2 tablespoons Balsamic Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
Sugar-free chocolate pudding cup

DAY 6

BREAKFAST
6 ounces vegetable juice cocktail
Eggs Frijoles ("Recipes for Phase 2 Meal Plans" Section)
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**
4 ounces artificially sweetened nonfat or low-fat yogurt in a flavor of your choice

**LUNCH**
Creamy Chicken Florentine Soup ("Recipes for Phase 2 Meal Plans" Section)
Tossed salad (mixed greens with cucumber, bell peppers, and cherry tomatoes)
2 tablespoons Tomato-Basil Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

**MIDAFTERNOON SNACK**
Reuben Wrap ("Recipes for Phase 2 Meal Plans" Section)

**DINNER**
Quick Lamb Stew ("Recipes for Phase 2 Meal Plans" Section)
Eggless Caesar salad (no croutons)
2 tablespoons Caesar Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

**DESSERT**
Nectarine or clementine sections sprinkled with 1 ounce crumbled blue cheese and toasted almonds

**DAY 7**

**BREAKFAST**
6 ounces tomato juice
2 eggs, any style
Turkey bacon
Coffee or tea with 1% or fat-free milk and sugar substitute

**MIDMORNING SNACK**
1 small red apple with a wedge of reduced-fat spreadable cheese

**LUNCH**
Grilled turkey burger in a whole-wheat pita half with Dijon mustard, sliced tomato, and red onion
Mixed greens sprinkled with reduced-fat feta cheese
2 tablespoons Creamy Cilantro Dressing (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing of your choice

MIDAFERNOON SNACK
Hummus with endive dippers

DINNER
Two-Bean Chili Con Carne (“Recipes for Phase 2 Meal Plans” Section)
Cucumber and radish salad
2 tablespoons Ranch Dressing (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing of your choice

DESSERT
Sugar-free meringue “kiss” cookie and an 8-ounce glass of fat-free or 1% milk

DAY 8

BREAKFAST
6 ounces vegetable juice cocktail
Scrambled New York Breakfast Wrap (“Recipes for Phase 2 Meal Plans” Section)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
½ cup reduced-fat cottage cheese with chopped tomatoes and cucumbers

LUNCH
Southwestern Cobb salad (chopped romaine with ½ cup black beans, 1 chopped hard-boiled egg, 1 ounce shredded reduced-fat Monterey Jack cheese, 2 strips crumbled turkey bacon, and diced radishes and yellow bell pepper)
2 tablespoons Spicy Tomato Vinaigrette (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing of your choice

MIDAFERNOON SNACK
Chilled shrimp with horseradish sauce

DINNER
Sliced Beef with Bell Pepper, Onion, and Snow Peas ("Recipes for Phase 2 Meal Plans" Section); make extra for Day 9 lunch

Baked Sweet Potato Chips ("Recipes for Phase 2 Meal Plans" Section)

DESSERT
  2 grilled peach halves with toasted walnuts

DAY 9

BREAKFAST
  6 ounces vegetable juice cocktail
  Breakfast “pizza” (top a 6-inch whole-wheat tortilla with 2 scrambled eggs, 1 ounce reduced-fat cheddar cheese, 1 ounce crumbled cooked low-fat turkey bacon, and chopped tomatoes)
  Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
  Yogurt Cheese Dip ("Recipes for Phase 1 Meal Plans" Section) with crudités

LUNCH
  Clear broth
  Asian beef salad cups (fill lettuce “cups” with leftover beef and vegetables from Day 8 dinner, add extra shredded veggies, and drizzle with lime juice)
  1 small cubed papaya

MIDAFTERNOON SNACK
  Cream cheese and salmon bagel bite (2 tablespoons fat-free or light cream cheese and smoked salmon on a whole-wheat mini bagel)

DINNER
  Halibut with Butter Bean and Vegetable Ragout ("Recipes for Phase 2 Meal Plans" Section)
  Watercress and red onion salad
  2 tablespoons Lime Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
  Baked apple with pistachios (stuff the cored apple with crushed pistachios)

DAY 10
BREAKFAST
6 ounces tomato juice
Irish oatmeal with cinnamon and ¾ cup fresh blueberries
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Pizza Wrap ("Recipes for Phase 2 Meal Plans" Section)

LUNCH
Phase 2 soup of your choice ("Recipes for Phase 2 Meal Plans" Section)
Grilled shrimp on a bed of baby spinach cooked briefly in olive oil
2 tablespoons Balsamic Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing

MIDAFTERNOON SNACK
Celery sticks with baba ghannouj

DINNER
Herb-Breaded Turkey Cutlets with Mushrooms ("Recipes for Phase 2 Meal Plans" Section)
Steamed Swiss chard
Oven-roasted bell peppers, carrots, and onions

DESSERT
Broiled “caramel rum” banana (cut a banana in half and top with 1 tablespoon sugar-free caramel topping and a dash of rum extract; broil until heated through)

DAY 11

BREAKFAST
6 ounces vegetable juice cocktail
1 small oat bran muffin
4 ounces reduced-fat cottage cheese
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
1 small Granny Smith apple with 2 tablespoons natural peanut butter
LUNCH
Romaine hearts with 6 ounces light tuna and edamame

2 tablespoons Green Goddess Dressing (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing of your choice

MID AFTERNOON SNACK
Hummus on ½ whole-wheat pita

DINNER
Broiled flank steak with grilled onions (make extra for Day 12 lunch)

Zucchini and yellow squash cooked in 1 tablespoon olive oil and sprinkled with fresh dill

½ cup brown rice

DESSERT
Poached plum with black walnut whipped topping (combine 2 tablespoons light or fat-free whipped topping with 1 teaspoon black walnut extract)

DAY 12

BREAKFAST
6 ounces tomato juice

Breakfast “banana split” (cut 1 medium banana in half, top with 4 ounces artificially sweetened nonfat or low-fat vanilla yogurt, and sprinkle with crushed low-sugar whole-grain cereal)

Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNINg SNACK
10 whole-wheat crackers with 2 tablespoons natural peanut butter

LUNCH
Phase 2 soup of your choice (“Recipes for Phase 2 Meal Plans” Section)

Sliced steak (use leftover steak from Day 11 dinner) with cucumber rounds and bell pepper slices on a bed of romaine lettuce

2 tablespoons Aioli Dressing (“Recipes for Phase 1 Meal Plans” Section) or low-sugar prepared dressing of your choice

1 medium pear topped with 1 ounce crumbled reduced-fat feta cheese

MID AFTERNOON SNACK
2 deviled egg halves
DINNER
Stir-Fried Chicken with Soba Noodles ("Recipes for Phase 2 Meal Plans" Section)
Asian cabbage slaw (shredded bok choy and Napa cabbage with mung bean sprouts)
2 tablespoons Soy-Ginger Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
Creamy Dreamy Strawberry-Vanilla Shake ("Recipes for Phase 2 Meal Plans" Section)

DAY 13

BREAKFAST
½ pink or red grapefruit
2 poached eggs on a bed of sautéed vegetables
1 slice 100% whole-wheat toast with 1 teaspoon sugar-free fruit jam
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
1 small sweet potato cooked in a microwave oven and topped with
1 small chopped apple and a sprinkling of cinnamon

LUNCH
Escarole and Turkey Sausage Soup ("Recipes for Phase 2 Meal Plans" Section)
Mediterranean salad (mixed greens with feta cheese cubes and kalamata olives)
2 tablespoons Mint Vinaigrette ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

MIDAFTERNOON SNACK
Banana bagel bite (top a toasted whole-wheat mini bagel with 2 tablespoons reduced-fat cottage cheese, ½ small sliced banana, and a sprinkling of sunflower or pumpkin seeds)

DINNER
Shrimp and Scallop Sauté ("Recipes for Phase 2 Meal Plans" Section)
Sautééed broccoli rabe with garlic and red pepper flakes
Roasted red bell peppers tossed with Balsamic Vinaigrette ("Recipes for Phase 1 Meal Plans" Section)

DESSERT
DAY 14

BREAKFAST
6 ounces tomato juice
¾ cup fresh blueberries
South Beach Eggsadilla ("Recipes for Phase 2 Meal Plans" Section)
Coffee or tea with 1% or fat-free milk and sugar substitute

MIDMORNING SNACK
Mango smoothie (blend ¾ cup peeled and chopped mango, ½ cup low-fat plain yogurt, 1 tablespoon granular sugar substitute, and 6 ice cubes until frothy)

LUNCH
Open-face roast beef sandwich with lettuce, tomato, and horseradish on 1 slice 100% whole-wheat bread
Cucumber salad with radish sprouts
2 tablespoons Creamy Dijon-Thyme Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

MID_AFTERNOON SNACK
5 dried apple rings chopped into 4 ounces reduced-fat cottage cheese with a sprinkling of cinnamon

DINNER
Pan-Seared Beef Tenderloin with Creamy Peppercorn Sauce ("Recipes for Phase 2 Meal Plans" Section)
Barley Risotto ("Recipes for Phase 2 Meal Plans" Section)
Endive and radicchio salad
2 tablespoons Blue Cheese Dressing ("Recipes for Phase 1 Meal Plans" Section) or low-sugar prepared dressing of your choice

DESSERT
South Beach Diet Tiramisu ("Recipes for Phase 2 Meal Plans" Section)
Recipes for Phase 2 Meal Plans

- Eggs Frijoles
- Wholesome Oat Muffins
- South Beach Eggsadilla
- Thai Shrimp Soup
- Roasted Tomato Soup

**Easy South Beach Diet Soups for Phases 2 and 3**

- Escarole and Turkey Sausage Soup
- Creamy Chicken Florentine Soup
- Sun-Dried Tomato and Feta-Stuffed Chicken Breasts
- Stir-Fried Chicken with Soba Noodles
- Chicken and Lentil Stew
- Herb-Breaded Turkey Cutlets with Mushrooms
- Halibut with Butter Bean and Vegetable Ragout
- Shrimp and Scallop Sauté
- Sliced Beef with Bell Pepper, Onion, and Snow Peas

**Pan-Seared Beef Tenderloin with Creamy Peppercorn Sauce**

- South Beach Diet Wraps
- Quick Lamb Stew
- Two-Bean Chili Con Carne
- Barley Risotto
- Baked Sweet Potato Chips
- Kale and Turkey Bacon Gratin
- Peanut Butter and Jelly Cookies
- South Beach Diet Tiramisu
- Coffee Panna Cotta

- Creamy Dreamy Strawberry-Vanilla Shake
RECIPES FOR PHASE 2 MEAL PLANS
Eggs Frijoles

Prep time: 15 minutes • Cook time: 20 minutes

Chock-full of protein, this South-of-the-Border egg and bean dish makes for a healthy, satisfying, and delicious wake-up meal.

1 tablespoon plus 1½ teaspoons extra-virgin olive oil
1 large onion, chopped
3 garlic cloves, minced
1 tablespoon dried oregano
2 (14.5-ounce) cans no-salt-added pinto beans, rinsed and drained
⅛ teaspoon cayenne
4 (8-inch) whole-wheat tortillas
4 large eggs, lightly beaten
1 cup fresh salsa

In a large nonstick skillet, heat 1 tablespoon of the oil over medium heat. Add onion, garlic, and oregano; cook, stirring occasionally, until onion is softened, about 7 minutes. Add beans and cayenne. Simmer, stirring occasionally, until beans are warmed through and flavorful, 10 to 12 minutes. Cover to keep warm.

While beans are cooking, warm tortillas according to package directions.

Five minutes before beans are done, in a medium nonstick skillet, heat remaining 1½ teaspoons oil over medium heat. Add eggs and scramble just until cooked, 3 to 5 minutes; remove from the heat.

Divide beans among tortillas and top with eggs and salsa. Roll up to serve.

Makes 4 servings

Nutrition at a Glance

Per serving: 345 calories, 11 g fat, 2 g saturated fat, 17 g protein, 49 g carbohydrate, 10 g fiber, 460 mg sodium
Wholesome Oat Muffins

Prep time: 10 minutes • Soaking time: 30 minutes • Cook time: 15 minutes

These tasty muffins are so much better than store-bought, you’ll want to bake a supply regularly. Make a double batch and freeze half for later.

1 cup buttermilk
¾ cup plus 2 tablespoons rolled oats
1¼ cups whole-grain pastry flour
1½ teaspoons baking powder
½ teaspoon baking soda
¼ teaspoon ground cinnamon
¼ teaspoon salt
2/3 cup chopped walnuts
1/3 cup granular brown sugar substitute
1/3 cup canola oil
1 large egg, beaten
1 teaspoon vanilla extract

Preheat the oven to 425°F. Coat a 12-cup nonstick muffin pan with cooking spray or line with paper baking cups. In a small bowl, combine buttermilk and ¾ cup of the oats. Let soak for 30 minutes.

Meanwhile, in a medium bowl, combine flour, baking powder, baking soda, cinnamon, and salt. Stir in walnuts. In a large bowl, stir together brown sugar substitute, oil, egg, and vanilla until well blended. Stir in oat mixture. Stir in flour mixture until just combined. Do not overmix.

Divide batter evenly among the muffin cups, filling them about two-thirds full. Sprinkle remaining 2 tablespoons oats over muffins. Bake for 11 to 15 minutes, or until a tester inserted in the center of a muffin comes out clean. Transfer the pan to a rack and let cool for 5 minutes. Remove muffins to the rack to cool completely.

Makes 12 muffins

Nutrition at a Glance
Per muffin: 179 calories, 11 g fat, 1 g saturated fat, 4 g protein, 18 g carbohydrate, 2 g fiber, 157 mg sodium
**South Beach Eggsadilla**

**Prep time: 5 minutes • Cook time: 5 minutes**

Quick enough for a weekday morning yet fun enough for a lazy Saturday, this breakfast quesadilla provides an energizing start to the day. Add a spoonful of salsa if you like.

- 1 teaspoon extra-virgin olive oil
- 3 large eggs, lightly beaten
- Salt
- Freshly ground black pepper
- 1 (8-inch) whole-wheat tortilla
- 2 ounces reduced-fat pepper Jack cheese, thinly sliced

In a large nonstick skillet, heat oil over medium-high heat. Add eggs, reduce heat to medium, and scramble until cooked but still moist, about 2 minutes. Transfer to a plate and season with salt and pepper.

Carefully wipe the pan with a paper towel and return to medium heat. Add tortilla and cook on both sides until warmed through, about 1 minute.

Leaving tortilla in the pan, top half of it with cheese and then with eggs; fold the other half over to form a quesadilla. Cook on both sides until heated through, 1 minute longer. Transfer to a cutting board, cut in half, and serve.

*Makes 2 servings*

**Nutrition at a Glance**

**Per serving:** 280 calories, 17 g fat, 7 g saturated fat, 18 g protein, 13 g carbohydrate, 1 g fiber, 580 mg sodium
Thai Shrimp Soup

 Prep time: 10 minutes • Cook time: 30 minutes

This tangy, spicy soup is made with classic Thai ingredients that are easy to find. Look for both chili-garlic sauce and Asian fish sauce in the specialty-foods section of most large supermarkets. If you have leftovers, simply whisk while reheating.

- 4 cups lower-sodium chicken broth
- 4 tablespoons fresh lemon juice
- 2 scallions, white and green parts thinly sliced and kept separate
- 1 (1-inch) piece fresh ginger, thinly sliced
- 1 serrano or jalapeño pepper, quartered lengthwise
- 1 (14-ounce) can lite coconut milk
- 1 pound large shrimp, peeled and deveined
- 2 plum tomatoes, quartered and chopped, with juices
- 2 teaspoons chili-garlic sauce
- 2 teaspoons Asian fish sauce

In a large saucepan, combine broth, lemon juice, scallion whites, ginger, and pepper. Bring to a gentle simmer over medium-high heat; cover, reduce heat to medium-low, and simmer gently for 20 minutes. Stir in coconut milk (it will appear curdled at first), then add shrimp, tomatoes and their juices, chili-garlic sauce, and fish sauce. Return to a simmer and cook until shrimp are opaque and cooked through, about 3 minutes. Remove the pan from the heat, divide soup among 4 bowls, and sprinkle with scallion greens.

Makes 4 (2-cup) servings

Nutrition at a Glance

**Per serving:** 262 calories, 11 g fat, 6 g saturated fat, 30 g protein, 12 g carbohydrate, 1 g fiber, 616 mg sodium

**Variation:** Try a combination of shrimp, scallops, and salmon in place of shrimp alone.

*This recipe can also be prepared for Phase 1 meals.*
Roasted Tomato Soup

Prep time: 10 minutes • Cook time: 55 minutes

The rich, rustic flavor of this soup comes from slow-roasting the tomatoes (you can do other things while they're in the oven). If you like a little sweetness, add a touch of sugar substitute when adjusting your seasonings. If you're on Phase 2 or 3, add whole-wheat tortellini for a satisfying entree.

2½ pounds plum tomatoes, cut in half lengthwise
1 medium onion, diced
4 garlic cloves, smashed and peeled
1 tablespoon dried basil
1 teaspoon dried oregano
¼ teaspoon salt
Freshly ground black pepper
1 tablespoon extra-virgin olive oil
1 cup vegetable broth

Heat the oven to 425°F.

Line a baking pan with parchment paper. Arrange tomatoes, cut side up, on the pan. Scatter onion and garlic in a single layer around tomatoes. Sprinkle tomatoes, onion, and garlic with basil, oregano, salt, and pepper to taste; drizzle with oil. Bake on the middle rack of the oven until tomatoes are golden on the bottoms and start to collapse, about 40 minutes.

Remove from the oven and carefully transfer the contents of the pan to a blender. Add ½ cup of the broth and purée until smooth. Transfer puréed mixture to a medium saucepan. Stir in remaining ½ cup broth and bring to a simmer over medium heat. Remove the pan from the heat and season soup with additional salt and pepper, if desired. Serve warm.

Makes 4 (1¼-cup) servings

Nutrition at a Glance

Per serving: 100 calories, 4 g fat, 0.5 g saturated fat, 3 g protein, 15 g carbohydrate, 4 g fiber, 164 mg sodium
This recipe can also be prepared for Phase 1 meals.

EASY SOUTH BEACH DIET SOUPS FOR PHASES 2 AND 3

These easy soups for Phases 2 and 3 include a number of foods like melon, soba and whole-wheat noodles, sweet potatoes, carrots, and even a touch of dry sherry in the bisque, which you can now enjoy. Great for lunch or dinner, some of these soups are hearty enough to make a meal in themselves (with a big green salad, of course), while others make delicious starters to a light meal.

Asian Chicken Noodle Soup: In a large saucepan, heat 2 teaspoons extra-virgin olive oil over medium heat.
Add 3 thinly sliced scallions, 2 diced celery stalks, and 2 minced garlic cloves; cook, stirring occasionally, until softened, about 7 minutes. Stir in 1 pound diced boneless, skinless chicken breasts; 2 cups shredded Napa cabbage; and a pinch of salt. Add 5 cups lower-sodium chicken broth, bring to a simmer, and cook for 5 minutes. Increase heat and bring broth to a low boil, then add 4 ounces soba noodles; cook until noodles are tender, about 5 minutes. Stir in 1 tablespoon low-sodium soy sauce, 2 teaspoons sesame oil, and 2 teaspoons chile-garlic sauce. Serve hot.

**Chilled Melon Soup with Mint:** In a blender, purée 5 cups chopped honeydew melon until smooth. Add 1 large peeled and chopped cucumber, ½ cup low-fat or nonfat plain yogurt, 2 roughly chopped scallions, 1 tablespoon fresh lemon juice, and 2 teaspoons freshly grated lemon zest; purée until smooth. Transfer to a covered container and refrigerate until chilled. Serve cold with a sprinkling of chopped fresh mint.

**Creamy Mushroom and Leek Soup:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 2 sliced medium leeks, 2 thinly sliced garlic cloves, 1 teaspoon dried thyme, ¼ teaspoon salt, and a generous pinch of cayenne. Cook, stirring occasionally, until softened, about 7 minutes. Stir 1 tablespoon whole-wheat flour, reduce heat to low, and cook, stirring, until lightly browned, about 3 minutes. Add 1 pound sliced mushrooms and 3 cups lower-sodium chicken broth. Bring to a simmer and cook for 10 minutes. Transfer half of the soup to a blender and purée until smooth. Return soup to pan, add ¼ cup reduced-fat sour cream, and stir to combine. Return to a simmer, adjust seasonings, and serve hot.

**Hearty Minestrone:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 chopped small onion, 1 diced carrot, 2 diced celery stalks, 3 minced garlic cloves, 1 teaspoon crumbled dried Italian seasoning blend, and a generous pinch of freshly ground black pepper. Cook, stirring occasionally, until softened, about 7 minutes. Add 3½ cups lower-sodium chicken broth, 4 cups chopped spinach leaves, and 1 cup thawed frozen mixed vegetables, such as cauliflower, green beans, zucchini, and/or broccoli. Bring to a simmer, add ½ cup whole-wheat ditalini or small shell pasta, and cook until vegetables are tender and pasta is al dente. Season with salt and additional pepper to taste. Sprinkle each serving with 1 tablespoon freshly grated Parmesan cheese and serve hot.

**Lobster Bisque:** In a large saucepan, heat 2 tablespoons vegetable oil over medium heat. Add 1 small finely chopped onion, 2 diced carrot, 2 diced celery stalks, 1 teaspoon crumbled dried thyme, and a generous pinch of salt and freshly ground black pepper; cook, stirring occasionally, until softened, about 7 minutes. Stir in 2 tablespoons whole-wheat flour; cook, stirring constantly, until lightly browned, about 3 minutes. Stir in 3½ cups lower-sodium chicken broth, ½ cup tomato purée, and ¼ cup dry sherry; bring to a simmer, reduce heat to low, cover, and cook for 10 minutes. Add 1 pound shelled lobster tails, cut into 1-inch pieces; simmer, covered, until lobster is opaque, about 6 minutes. Stir in 1¼ cups 1% milk, 1 chopped plum tomato, 2 tablespoons finely chopped fresh parsley, 1 teaspoon paprika, and ¼ teaspoon hot pepper sauce; bring to a simmer and serve hot.

**Root Vegetable Soup:** Cut ¾ pound turnips, and ½ pound carrots into ½-inch pieces. Place vegetables in a large saucepan and cover with 5 to 6 cups lower-sodium chicken broth. Add ¼ teaspoon crumbled dried thyme and a pinch of salt; bring to a low boil and cook until vegetables are very tender, about 25 minutes. Transfer soup, in batches, to a blender, and purée until smooth. Return to the pan, stir in ¼ cup reduced-fat sour cream, and bring to a simmer just to heat through. Adjust seasonings and serve hot.

**Sweet-Carrot-Cumin Soup:** In a large saucepan, heat 1½ tablespoons extra-virgin olive oil over medium heat. Add 1 chopped small onion and 2 thinly sliced garlic cloves; cook, stirring occasionally, until softened, about 7 minutes. Add 1¼ pounds thinly sliced carrots, 2 teaspoons ground cumin, ½ teaspoon red pepper flakes, and ¼ teaspoon salt; stir to coat. Cook, stirring occasionally, for 10 minutes longer. Add 2 cups lower-sodium chicken broth and 1 cup water; bring to a simmer and cook until carrots are tender, 10 to 12 minutes. Transfer soup, in batches, to a blender, and purée until smooth. Return to the pan and bring to a simmer to heat through. Adjust
seasonings and serve hot with a teaspoon of reduced-fat sour cream per serving, if desired.

**Sweet Potato Soup:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 chopped small onion, 2 thinkly sliced garlic cloves, 2 teaspoons grated fresh ginger, 1 teaspoon dried thyme, ¼ teaspoon salt, and a generous pinch of freshly ground black pepper. Cook, stirring occasionally, until softened, about 7 minutes. Meanwhile, piece 2 medium unpeeled sweet potatoes all over with a fork. Cook in a microwave until tender, about 10 minutes. Cool briefly, peel, and add flesh to the pan. Add 1½ cups lower-sodium chicken broth and 1 cup 1% milk. Bring to a simmer, stirring occasionally, then simmer for 5 minutes. Transfer soup, in batches, to a blender, and purée until smooth. Return to the pan and heat through. Adjust seasonings and serve hot.

**Sweet Potato Vichyssoise:** Pierce 2 medium unpeeled sweet potatoes all over with a fork. Cook in a microwave until tender, about 10 minutes. Meanwhile, in a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 2 chopped medium leeks, ¼ teaspoon salt, and a generous pinch of freshly ground black pepper; cover and cook until leeks are softened, about 5 minutes. Remove potatoes from microwave, cool briefly, then scrape out the flesh and add to the pan. Add 1 cup lower-sodium chicken broth, bring to a simmer, and cook for 3 minutes. Remove from the heat and let cool briefly. Transfer to a blender and purée for 1 minute. Add 1 cup 1% milk and purée until smooth. Transfer soup to a covered container and refrigerate until chilled. Sprinkle each serving with chopped chives and serve cold.

**Turkey Noodle Soup:** In a large saucepan, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 chopped small onion, 1 diced carrot, 1 diced celery stalk, 1 teaspoon crumbled dried Italian seasoning blend, and a pinch of cayenne. Cook, stirring occasionally, until softened, about 7 minutes. Add 1 minced garlic clove, stir, and cook 1 minute longer. Add 1 pound diced turkey cutlets and a pinch of salt and freshly ground black pepper; stir to combine. Add 5 cups lower-sodium chicken broth, bring to a simmer, and cook for 5 minutes. Increase heat to bring broth to a low boil, then add 4 ounces spelt or whole-wheat noodles. Cook until noodles are tender, about 5 minutes. Adjust seasonings and serve hot.
Escarole and Turkey Sausage Soup

Prep time: 15 minutes • Cook time: 30 minutes

Escarole is a hearty green that is just as delicious served raw in salads as it is cooked into soups or sautéed with olive oil and fresh lemon juice. Meatball lovers can replace the sausage with mini chicken or turkey meatballs made with lean white meat.

8 ounces low-fat sweet Italian turkey or chicken sausages
1 tablespoon extra-virgin olive oil
1 medium onion, finely chopped
½ teaspoon dried rosemary, crumbled
Salt
1 garlic clove, minced
1 (10- to 12-ounce) head escarole, cut crosswise into ½-inch strips, washed, and spun dry
3¼ cups lower-sodium chicken broth

Lightly coat a large heavy-bottomed nonstick saucepan with cooking spray and heat over medium-high heat. Add sausages and reduce heat to medium; cook, turning occasionally, until browned on all sides, 8 to 10 minutes. Transfer sausages to a cutting board.

Add oil to the pan and heat over medium heat. Add onion, rosemary, and a generous pinch of salt and cook, stirring occasionally, until onion is softened, about 6 minutes. Stir in garlic and cook 2 minutes longer.

Meanwhile, cut sausages in half lengthwise, then cut widthwise into ½-inch pieces.

Add escarole to the pan, in batches if necessary, and stir just until wilted. Add sausage and broth, bring to a simmer, and cook until heated through, about 2 minutes. Serve warm.

Makes 4 (1½-cup) servings

Nutrition at a Glance

Per serving: 182 calories, 11 g fat, 1 g saturated fat, 15 g protein, 8 g carbohydrate, 3 g fiber, 513 mg sodium

This recipe can also be prepared for Phase 1 meals.
Creamy Chicken Florentine Soup

Prep time: 15 minutes • Cook time: 25 minutes

Reduced-fat cream cheese adds richness to this quick chicken soup. To save time, purchase chopped frozen spinach rather than whole leaves.

- 1 tablespoon extra-virgin olive oil
- 1 small onion, finely chopped
- 2 garlic cloves, thinly sliced
- 1/8 teaspoon salt
- 1/8 teaspoon freshly ground black pepper
- 2 (6-ounce) boneless, skinless chicken breasts, cut into 1-inch cubes
- 1 (10-ounce) package frozen chopped spinach, thawed, well drained
- 2 ounces reduced-fat cream cheese, cubed
- 3 cups lower-sodium chicken broth

In a medium heavy-bottomed saucepan, heat oil over medium heat. Add onion, garlic, salt, and pepper; cook, stirring occasionally, until onion is softened, about 7 minutes. Add chicken and spinach; stir for 1 minute. Add cream cheese and stir until melted. Add broth, bring to a simmer, and simmer until chicken is cooked through, about 5 minutes. Serve warm.

Makes 4 (1¼-cup) servings

Nutrition at a Glance

Per serving: 197 calories, 7 g fat, 2 g saturated fat, 24 g protein, 6 g carbohydrate, 1 g fiber, 615 mg sodium

This recipe can also be prepared for Phase 1 meals.
Sun-Dried Tomato and Feta-Stuffed
Chicken Breasts

Prep time: 20 minutes • Cook time: 25 minutes

Deceptively simple, this tasty chicken dish works just as well for company as it does on a busy weeknight. Make extra for lunch or dinner the next day: Thinly slice the chicken and serve it cold over simply dressed salad greens, or roughly chop the chicken and toss it with fresh spinach, a little olive oil, and warm whole-wheat pasta.

\[ \frac{1}{3} \text{ cup reduced-fat feta cheese} \]
\[ 2 \text{ sun-dried tomatoes (from a jar), finely chopped} \]
\[ 1 \text{ garlic clove, minced} \]
\[ \frac{1}{2} \text{ teaspoon dried basil} \]
\[ \text{Freshly ground black pepper} \]
\[ 4 \text{ (6-ounce) boneless, skinless chicken breasts} \]
\[ \text{Salt} \]
\[ 2 \text{ teaspoons extra-virgin olive oil} \]

Heat the oven to 425°F.

In a small bowl, combine cheese, tomatoes, garlic, and basil. Season with pepper and mash together well with a fork.

Butterfly chicken by carefully slicing horizontally along the long edge of each breast, three-quarters of the way through. Open up each breast and spread inside with one-fourth of the feta mixture. Close breast over filling and press edges together to seal. Season lightly with salt and pepper.

In a large ovenproof skillet, heat oil over medium-high heat. Add chicken and cook until browned on both sides, about 2 minutes per side. Transfer skillet to oven and cook until chicken is cooked through, about 20 minutes. Remove from oven and serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 232 calories, 6 g fat, 2 g saturated fat, 42 g protein, 1 g carbohydrate, 0 g fiber, 326 mg sodium

This recipe can also be prepared for Phase 1 meals.
Stir Fried Chicken with Soba Noodles

Prep time: 20 minutes • Cook time: 15 minutes

Try celery or bell peppers in place of mushrooms here for variety.

4 ounces soba noodles
1½ pounds boneless, skinless chicken breasts, cut crosswise into ½-inch slices
4 scallions, white and green parts thinly sliced and kept separate
3 garlic cloves, thinly sliced
1 teaspoon grated fresh ginger
½ teaspoon red pepper flakes
Salt
1 tablespoon lower-sodium soy sauce
2 teaspoons sesame oil
1 teaspoon vegetable oil
1 (1-pound) head Napa cabbage, thinly sliced
6 ounces button mushrooms, trimmed and quartered
2 tablespoons water
2 teaspoons fresh lemon juice

Bring a large saucepan of water to a boil. Cook noodles according to package directions. While noodles are cooking, in a medium bowl, combine chicken with scallion whites, garlic, ginger, and pepper flakes; season lightly with salt.

Drain noodles and transfer to another medium bowl. Add scallion greens, soy sauce, and sesame oil; toss to combine. Season lightly with salt.

In a large nonstick skillet or wok, heat vegetable oil over medium-high heat. Add chicken and cook, stirring constantly, until just cooked through, 4 to 5 minutes. Transfer chicken to a plate.

Return the pan to the heat. Add cabbage, mushrooms, and water. Cook, stirring, until vegetables are wilted, about 4 minutes. Return chicken and noodles to pan, stir, and cook to heat through, about 1 minute. Toss with lemon juice and serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 359 calories, 6 g fat, 1 g saturated fat, 46 g protein, 29 g carbohydrate, 4 g fiber, 349 mg sodium
Chicken and Lentil Stew

**Prep time: 15 minutes • Cook time: 25 minutes**

This hearty, quick-cooking stew tastes as if it had been simmered for hours. Double the recipe; it freezes beautifully.

1 tablespoon extra-virgin olive oil
1 small onion, finely chopped
2 garlic cloves, minced
¼ teaspoon dried basil
¼ teaspoon dried oregano
1/8 teaspoon freshly ground black pepper
Salt
1 tablespoon tomato paste
1 pound boneless, skinless chicken breasts, cut crosswise into ½-inch slices
1 (15-ounce) can lentils, drained and rinsed
1 (14.5-ounce) can diced tomatoes, with juices
¾ cup lower-sodium chicken broth
4 ounces baby spinach (4 cups)

In a medium saucepan, heat oil over medium heat. Add onion, garlic, basil, oregano, pepper, and a pinch of salt; reduce heat to medium-low and cook, stirring occasionally, 4 minutes. Stir in tomato paste and cook 3 minutes longer. Stir in chicken and cook for 1 minute. Add lentils, tomatoes and their juices, and broth. Bring to a gentle simmer, reduce heat to low, cover, and cook until chicken is cooked through, 7 to 10 minutes. Stir in spinach, cover, and cook 1 minute longer, or until spinach wilts. Season with salt and pepper to taste and serve warm.

**Makes 6 (1-cup) servings**

**Nutrition at a Glance**

**Per serving:** 311 calories, 4 g fat, 1 g saturated fat, 32 g protein, 36 g carbohydrate, 17 g fiber, 326 mg sodium

*This recipe can also be prepared for Phase 1 meals.*
Herb-Breaded Turkey Cutlets with Mushrooms

Prep time: 15 minutes • Cook time: 16 minutes

Look for whole-wheat Italian bread crumbs, which are flavored with herbs, in the natural-foods section of your supermarket or at a health-food store. Or use plain whole-wheat bread crumbs and add any combination of dried basil, marjoram, thyme, and rosemary.

- 1½ pounds turkey cutlets
- 3 garlic cloves, minced
- Salt
- Freshly ground black pepper
- 1 large egg, lightly beaten
- 2 tablespoons 1% milk
- 1 cup whole-wheat herb-flavored Italian bread crumbs
- 4 tablespoons chopped parsley
- 1 tablespoon extra-virgin olive oil
- 1 pound button mushrooms, trimmed and quartered

Coat turkey cutlets with two-thirds of the garlic and lightly season with salt and pepper.

In a large shallow bowl, whisk together egg and milk. Spread bread crumbs on a large plate. Dredge cutlets in egg mixture, then dredge both sides lightly in bread crumbs, pressing to make sure the crumbs stick.

Coat a large nonstick skillet with cooking spray and heat over medium heat. Cook cutlets, in batches if necessary, until lightly browned and crisp, about 2 minutes per side. Transfer to a plate, sprinkle with 2 tablespoons of the parsley, and loosely cover with foil to keep warm.

Add oil to the skillet and heat over medium-high heat. Add mushrooms, remaining garlic, and remaining 2 tablespoons parsley. Season lightly with salt and pepper. Cook, stirring, until mushrooms are tender, about 4 minutes. Remove the pan from the heat. Transfer cutlets to 4 plates and top with warm mushrooms.

Makes 4 servings

Nutrition at a Glance

**Per serving:** 230 calories, 4 g fat, 0.5 g saturated fat, 40 g protein, 8 g carbohydrate, 3 g fiber, 170 mg sodium
Halibut with Butter Bean and Vegetable Ragout

Prep time: 10 minutes • Cook time: 10 minutes

Butter beans, a smaller cousin of lima beans, add a decidedly creamy texture to this dish. If you can’t find them, use limas instead. We prefer vine-ripened tomatoes, sold in most supermarkets, as they tend to be juicier than the average beefsteak variety. To save time, ask the fish seller to skin your halibut fillets for you.

2 teaspoons extra-virgin olive oil
1 medium onion, chopped
2 garlic cloves, crushed
¼ teaspoon salt
⅛ teaspoon dried basil
⅛ teaspoon freshly ground black pepper
2 medium tomatoes, chopped
1 cup frozen peas, thawed
1 (15-ounce) can butter beans, rinsed and drained
4 (6-ounce) pieces skinned halibut fillet

Heat the oven to broil.
In a medium saucepan, heat 1 teaspoon of the oil over medium heat. Add onion, garlic, salt, basil, and pepper. Reduce heat to medium-low and cook, stirring occasionally, 4 minutes. Stir in tomatoes and peas; cover and cook 4 minutes longer. Stir in beans, cover, and cook 2 minutes longer. Remove pan from heat and leave covered to keep warm.
While ragout is cooking, place halibut fillets on a broiler pan, season with salt and pepper, and brush with remaining 1 teaspoon oil. Broil until opaque and cooked through, 6 to 8 minutes.
Divide ragout among 4 serving plates. Serve fish warm on top of ragout.

Makes 4 servings

Nutrition at a Glance

Per serving: 304 calories, 7 g fat, 1 g saturated fat, 42 g protein, 22 g carbohydrate, 6 g fiber, 547 mg sodium

This recipe can also be prepared for Phase 1 meals.
Shrimp and Scallop Sauté

Prep time: 10 minutes • Cook time: 5 minutes

This superquick dinner entrée is great anytime of the year. For a change of pace, try cilantro, oregano, basil, or thyme instead of parsley. Serve the seafood over wilted greens or toss with brown or wild rice.

¾ pound sea scallops
¾ pound large shrimp, peeled and deveined
3 garlic cloves, minced
Salt
Freshly ground black pepper
1 tablespoon extra-virgin olive oil
2 teaspoons fresh lemon juice
2 teaspoons finely grated lemon zest
1 tablespoon freshly chopped parsley

In a large bowl, combine scallops, shrimp, garlic, and a pinch of salt and pepper; toss until seafood is well coated.

In a large skillet, heat oil over medium-high heat. Add seafood mixture and cook, stirring frequently, until shrimp turn pink and scallops are just cooked through, 3 to 4 minutes. Transfer to a large serving bowl, add lemon juice and zest, and stir well. Sprinkle with parsley and serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 195 calories, 6 g fat, 1 g saturated fat, 30 g protein, 4 g carbohydrate, 0 g fiber, 326 mg sodium

This recipe can also be prepared for Phase 1 meals.
Sliced Beef with Bell Pepper, Onion, and Snow Peas

Prep time: 20 minutes • Cook time: 20 minutes

The combination of bell pepper, onion, and peas brings a delicious sweetness to this Chinese-style dish. A red or yellow bell pepper can be used in place of the green.

1½ pounds top round steak (about ¾ inch thick), well trimmed
Salt
Freshly ground black pepper
1 teaspoon extra-virgin olive oil
1 large green bell pepper, thinly sliced
1 medium onion, thinly sliced
1 garlic clove, minced
6 ounces snow peas, strings removed, thinly sliced
2 tablespoons water
1 tablespoon low-sodium soy sauce

Season steak with salt and black pepper. Lightly coat a large nonstick skillet with cooking spray and heat over medium-high heat. Add steak and cook for 4 minutes per side for medium-rare; remove from heat. Transfer steak to a cutting board and let sit for 5 minutes before slicing.

Meanwhile, in the same pan, heat oil over medium-high heat. Add bell pepper, onion, and garlic; cook, stirring constantly, 5 minutes. Add peas and water. Cover the pan and cook, stirring occasionally, until vegetables are softened, about 5 minutes. Uncover, add soy sauce, and cook 30 seconds longer. Add sliced steak to pan and toss briefly, just to heat through. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 333 calories, 15 g fat, 6 g saturated fat, 40 g protein, 8 g carbohydrate, 2 g fiber, 312 mg sodium

This recipe can also be prepared for Phase 1 meals.
Pan-Seared Beef Tenderloin with Creamy Peppercorn Sauce

Prep time: 10 minutes • Cook time: 10 minutes

Freshly cracked black peppercorns serve double duty in this satisfying entrée: First, they’re rubbed into the meat for flavor. Then the peppercorns left in the pan after cooking the steaks give body and kick to the sauce. If you don’t have a spice grinder or an extra coffee grinder for grinding spices, purchase cracked peppercorns or set your pepper grinder to the coarsest setting. Chicken or vegetable broth can be used in place of beef broth.

- 2 teaspoons whole black peppercorns
- 4 (6-ounce) beef tenderloin beef broth steaks (about 1 inch thick), well trimmed
- 1 garlic clove, cut in half lengthwise
- Salt
- 2 tablespoons lower-sodium beef broth
- ¼ cup reduced-fat sour cream

In a spice grinder, coarsely grind peppercorns. Rub steaks on both sides with cut side of garlic, then coat with pepper on both sides, pressing to adhere, and season lightly with salt. Discard the garlic.

Lightly coat a large heavy or cast-iron skillet with cooking spray and heat over medium-high heat. Add steaks and sear on both sides, about 1 minute per side. Continue to cook to desired doneness, about 3 minutes per side for medium-rare. Transfer to a cutting board and let rest for 5 minutes.

While steak is resting, return the pan to medium heat, add broth, and stir with a wooden spoon to scrape up any browned bits clinging to the pan. Stir in sour cream and remove the pan from the heat. Serve steaks warm with sauce drizzled on top.

Makes 4 servings

Nutrition at a Glance

Per serving: 284 calories, 13 g fat, 5 g saturated fat, 38 g protein, 2 g carbohydrate, 0 g fiber, 188 mg sodium

This recipe can also be prepared for Phase 1 meals.

SOUTH BEACH DIET WRAPS

Once you’re on Phase 2 or 3, you can enjoy a protein-and veggie-filled wrap made with a whole-wheat tortilla. Have one for lunch or for a midafternoon snack, and account for the good carbs as you think about what other carbs you’ll be eating that day. The Scrambled New York Breakfast Wrap is a great option instead of cereal or an omelet for breakfast.

Greek Veggie Wrap: Combine 6 cups chopped romaine lettuce, 1 cup halved cherry tomatoes, ½ cup
crambled reduced-fat feta cheese, 1 thinly sliced small red onion, ¼ cup pitted and roughly chopped kalamata olives, 1 tablespoon extra-virgin olive oil, 1 tablespoon red wine vinegar, and salt and freshly ground black pepper to taste. Divide mixture among 4 (6-inch) whole-wheat tortillas. Roll up burrito-style and serve.

**Pizza Wrap:** Lay 4 (6-inch) whole-wheat tortillas on a work surface. Spread each with 2 tablespoons pizza sauce or tomato sauce. Place 1 part-skim mozzarella stick in the center. Roll up burrito-style and heat in a microwave until cheese melts, 30 seconds to 1 minute. Serve warm.

**Pressed Cuban Wrap:** Lay 4 (6-inch) whole-wheat tortillas on a work surface. Spread each with 1 tablespoon low-fat mayonnaise and 1 tablespoon stone-ground mustard. Top each with one-quarter of a thinly sliced large dill pickle, 2 slices ham, and 2 slices reduced-fat Swiss cheese. Roll up burrito-style and press with the palm of your hand to flatten. Lightly coat a grill pan with cooking spray and heat over medium-high heat. Place 1 wrap on the pan and press with the back of a large spatula until bottom is golden, 1 to 2 minutes. Turn and cook on the other side until golden. Cook remaining wraps and serve warm.

**Reuben Wrap:** Lay 4 (6-inch) whole-wheat tortillas on a work surface. Spread each with 1½ tablespoons Thousand Island Dressing ("Recipes for Phase 1 Meal Plans" Section) and 1 tablespoon stone-ground mustard. Top each with 2 slices lean pastrami, 1/3 cup sauerkraut, and 1 slice reduced-fat Swiss cheese. Sprinkle with rye seeds, if desired. Roll up burrito-style and serve.

**Scrambled New York Breakfast Wrap:** In a large nonstick skillet, heat 1 tablespoon extra-virgin olive oil over medium heat. Add 1 thinly sliced medium onion and a pinch of salt and freshly ground black pepper; cook, stirring occasionally, until just softened, about 5 minutes. Add 6 lightly beaten large eggs and allow to set for about 10 seconds. Sprinkle with 2 ounces diced smoked salmon and 2 ounces reduced-fat cream cheese (cut into small pieces). Scramble with eggs just until cheese melts, about 1 minute. Divide scramble among 4 (6-inch) whole-wheat tortillas. Roll up burrito-style and serve.

**Smoked Turkey and Asparagus Wrap:** Lay 4 (6-inch) whole-wheat tortillas on a work surface. Spread each with 2 slices smoked turkey breast, 2 cooked asparagus spears, and 2 thin slices tomato. Season lightly with salt and freshly ground black pepper. Roll up burrito-style and serve.

**Southwestern Steak Wrap:** Rub 1 (8-ounce) flank steak with Southwest spice mix and grill or broil to medium-rare. Transfer to a cutting board, let rest for 5 minutes, then thinly slice. Lay 4 (6-inch) whole-wheat tortillas on a work surface. Spread each with 1 tablespoon low-fat mayonnaise and sprinkle with 2 tablespoons chopped roasted red peppers (from a jar). Top each with one-quarter of the steak slices and 1 cup chopped romaine lettuce. Roll up burrito-style and serve.

**Spicy Niçoise Wrap:** Combine 3 cups chopped red-leaf lettuce, 2 (6-ounce) cans drained and flaked water-packed chunk light tuna, 2 peeled and chopped hard-boiled eggs, 1 chopped large tomato, ¼ cup pitted and chopped Niçoise olives, 1 tablespoon extra-virgin olive oil, 1 tablespoon red wine vinegar, and 2 teaspoons hot pepper sauce. Divide among 4 (6-inch) whole-wheat tortillas. Roll up burrito-style and serve.
Quick Lamb Stew

Prep time: 20 minutes • Cook time: 35 minutes

Since boneless leg of lamb is a tender cut, it can be cooked much more quickly than typical lamb stew meat. Celeriac, also called celery root, makes a hearty addition here.

3 teaspoons extra-virgin olive oil
1½ pounds boneless leg of lamb, trimmed and cut into ½-inch pieces
¼ teaspoon salt
1/8 teaspoon freshly ground black pepper
2 medium carrots, cut into ½-inch dice
1 medium celeriac, peeled and cut into ½-inch dice (about 3 cups)
1 medium onion, chopped
4 garlic cloves, smashed and peeled
2 teaspoons dried rosemary, crumbled
1 tablespoon tomato paste
1/3 cup dry red wine
1 (28-ounce) can whole peeled tomatoes, with juices

In a large saucepan, heat 1 teaspoon of the oil over medium-high heat. Add lamb and sprinkle with salt and pepper. Cook, stirring occasionally, 6 minutes, or until lamb is lightly browned on the outside and slightly pink on the inside. Using a slotted spoon, transfer lamb to a plate.

Add remaining 2 teaspoons oil to the pan and heat over medium-high heat. Add carrots, celeriac, onion, garlic, rosemary, and a pinch of salt and pepper. Cook, stirring frequently, until vegetables start to brown, about 5 minutes. Add tomato paste and cook, stirring, 1 minute longer. Add wine and cook 1 minute longer. Add tomatoes and their juices, breaking up tomatoes with a wooden spoon. Bring to a simmer, reduce heat to medium-low, and cook until vegetables are tender and flavors blended, about 20 minutes. Return lamb and any juices to the pan and cook just to heat through. Serve warm.

Makes 4 servings

Nutrition at a Glance

Per serving: 398 calories, 13 g fat, 4 g saturated fat, 39 g protein, 28 g carbohydrate, 6 g fiber, 568 mg sodium
Two-Bean Chili Con Carne

Prep time: 10 minutes • Cook time: 25 minutes

Two kinds of beans means double the fiber in this wholesome beef chili. We chose black beans and pintos, but you can use cannellini or favas, or whatever types you like best.

1 tablespoon extra-virgin olive oil
1 pound extra-lean ground beef
2 tablespoons chili powder
¼ teaspoon cayenne
1 large green bell pepper, diced
1 medium onion, chopped
4 garlic cloves, minced
2 teaspoons dried oregano
1 tablespoon tomato paste
2 (14.5-ounce) cans no-salt-added diced tomatoes, with juices
1 (15-ounce) can black beans, rinsed and drained
1 (15-ounce) can pinto beans, rinsed and drained
1 (8-ounce) can no-salt-added tomato sauce

In a large saucepan, heat oil over medium-high heat. Add beef, 1 tablespoon of the chili powder, and cayenne. Cook, stirring to break up meat, about 5 minutes, or until browned. Using a slotted spoon, transfer meat to a plate.

Add pepper, onion, garlic, oregano, and remaining 1 tablespoon chili powder to the same saucepan; cook over medium heat, stirring occasionally, until onion begins to soften, about 3 minutes. Stir in tomato paste, then add diced tomatoes and their juices, black beans, pinto beans, and tomato sauce. Cover and simmer for 10 minutes, stirring occasionally. Uncover, add cooked beef, and cook over medium heat until chili thickens, about 5 minutes. Serve warm.

Makes 4 (generous 1½-cup) servings

Nutrition at a Glance

Per serving: 406 calories, 11 g fat, 3 g saturated fat, 35 g protein, 38 g carbohydrate, 12 g fiber, 639 mg sodium

This recipe can also be prepared for Phase 1 meals.
Barley Risotto

Prep time: 5 minutes • Cook time: 55 minutes

Just like classic risotto, this barley version is toothsome and creamy. Techniquewise, it’s even easier than conventional risotto because it doesn’t require as much stirring. This recipe is very adaptable: Add mushrooms if you like, or stir in a mix of fresh herbs at the end.

- 3 cups lower-sodium chicken broth
- 2 teaspoons extra-virgin olive oil
- 1 small onion, thinly sliced
- ½ cup pearled barley
- ¼ cup freshly grated Parmesan cheese
- ¼ teaspoon salt
- Freshly ground black pepper

In a medium saucepan, bring broth to a simmer; remove from the heat and cover to keep warm.

Meanwhile, in a second medium, heavy-bottomed saucepan, heat oil over medium heat. Add onion and barley; stir to combine. Reduce heat to low and cook, stirring occasionally, until onion is softened and barley is lightly toasted, about 5 minutes.

Add about a third of the broth, bring to barely a simmer, and cook over very low heat, stirring occasionally, until broth is almost absorbed, about 12 minutes. Repeat with another cup of the broth, and then with the remaining cup of broth. Cooking time will be about 50 minutes total. Remove the pan from the heat and stir in Parmesan, salt, and pepper to taste. Serve warm.

Makes 4 (½-cup) servings

Nutrition at a Glance

Per serving: 166 calories, 5 g fat, 2 g saturated fat, 8 g protein, 23 g carbohydrate, 4 g fiber, 279 mg sodium

Make-Ahead: Barley risotto freezes well for up to 1 month and reheats easily in the microwave.
Baked Sweet Potato Chips

Prep time: 10 minutes • Cook time: 17 minutes

These healthy low-fat chips get pizzazz with the addition of Italian seasoning. For “hot” chips, try Cajun seasoning or add minced garlic.

2 large sweet potatoes (2 pounds), sliced into ¼-inch-thick half moons
2 teaspoons extra-virgin olive oil
1 tablespoon Italian seasoning
Salt
Freshly ground black pepper

Heat the oven to 400°F.
In a large bowl, toss potatoes with oil, Italian seasoning, and a pinch of salt and pepper. Spread in a single layer on two large baking sheets and bake for 10 minutes. With a spatula, turn slices over and continue baking until chips are golden, about 7 minutes longer. Serve warm.

Makes 4 servings

Nutrition at a Glance
Per serving: 216 calories, 2 g fat, 0.5 g saturated fat, 4 g protein, 46 g carbohydrate, 7 g fiber, 197 mg sodium
Kale and Turkey Bacon Gratin

Prep time: 15 minutes • Cook time: 30 minutes

Kale offers an abundance of nutrients, including fiber, vitamin C, vitamin B₆, and beta-carotene. Its hearty texture makes it well suited for a gratin. If you prefer, try other cooking greens, alone or in combination, such as Swiss chard, mustard, turnip, or dandelion. For a vegetarian version, simply skip the bacon.

1¼ pounds kale, thick stems stripped and tough ends removed, chopped (about 8 cups)
4 slices turkey bacon, cut into 1-inch pieces
1 small onion, chopped
2 garlic cloves, minced
½ cup fat-free half-and-half
Freshly ground black pepper
¾ cup freshly grated Parmesan cheese

Heat the oven to broil.

In a deep oven-proof skillet, bring a few inches of water to a boil. Add kale and cook over medium-high heat until tender, about 6 minutes. Drain and pat dry.

Wipe the skillet dry and return to medium-high heat. Add bacon and cook until crispy, 4 to 5 minutes. Transfer bacon to a plate. Add onion and garlic to the pan, reduce heat to medium, and cook, stirring, until onion is softened, about 7 minutes.

Return bacon to the pan and add half-and-half. Bring to a simmer and cook until slightly reduced, about 5 minutes. Season with pepper to taste. Add kale and stir to combine. Sprinkle evenly with cheese. Broil for 2 to 3 minutes, or until cheese is lightly browned.

Makes 4 servings

Nutrition at a Glance

Per serving: 151 calories, 6 g fat, 2 g saturated fat, 10 g protein, 19 g carbohydrate, 3 g fiber, 348 mg sodium

This recipe can also be prepared for Phase 1 meals.
Peanut Butter and Jelly Cookies

Prep time: 15 minutes • Cook time: 14 minutes

Who would believe you can get such a delectable cookie out of such a simple process and with so few ingredients? (That’s right, there’s no flour!) The not-too-sweet, deep, nutty flavor is perfect for kids young and old. These cookies are so good that we need to remind you to limit yourself to one serving!

¾ cup granular sugar substitute
1 large egg
1 teaspoon vanilla extract
1 cup creamy trans fat-free peanut butter
1 teaspoon baking soda
¼ cup sugar-free jam, any flavor

Heat the oven to 350°F. Line a baking sheet with parchment paper.

Mix sugar substitute, egg, and vanilla together with an electric mixer on low for 3 minutes. Add peanut butter and baking soda. Mix on medium until dough comes together, about 30 seconds.

Form dough into 24 (2-teaspoon) balls and place on the baking sheet 1 inch apart. Gently press your thumb into the center of each to make an indentation. Fill each indentation with ½ teaspoon jam.

Bake until lightly browned on the bottom, 12 to 14 minutes. Let cookies cool briefly on the pan, then transfer to a wire rack to cool completely.

Makes 24 (2 per serving)

Nutrition at a Glance

Per serving: 140 calories, 11 g fat, 2.5 g saturated fat, 6 g protein, 7 g carbohydrate, 1 g fiber, 210 mg sodium
South Beach Diet Tiramisu

Prep time: 20 minutes • Cook time: 20 minutes • Cool time: 30 minutes

A favorite Italian dessert, tiramisu (meaning “pick-me-up,” in reference to the espresso and cocoa it includes) makes a light yet rich finish to any meal.

- 6 large egg whites
- ½ teaspoon cream of tartar
- ¼ teaspoon salt
- ¾ teaspoon vanilla extract
- 1/3 cup plus 2 teaspoons granular sugar substitute
- 6 tablespoons whole-grain pastry flour
- ½ cup part-skim ricotta cheese
- ½ cup fat-free or light whipped topping
- ¼ cup strongly brewed decaffeinated espresso
- ½ teaspoon unsweetened cocoa powder
- Mint sprigs for garnish (optional)

Heat the oven to 350°F. Lightly coat an 8- by 8-inch baking pan with cooking spray.

In a large bowl, with an electric mixer at high speed, beat egg whites, cream of tartar, and salt until soft peaks form, about 5 minutes. Add ½ teaspoon of the vanilla and beat to combine. Add 1/3 cup of the sugar substitute and beat until stiff peaks form. Sift 2 tablespoons of the flour over beaten egg whites and gently fold to incorporate. Repeat twice with remaining flour until all of the flour is incorporated.

Pour batter into the pan and gently smooth the top. Bake, turning once halfway through, until cake is golden and a tester inserted into the center comes out clean, about 20 minutes. Cool completely.

In a small bowl, combine ricotta, whipped topping, remaining 2 teaspoons sugar substitute, and remaining ¼ teaspoon vanilla. Cut cake in half vertically down the middle to make two 4- by 8-inch pieces. Place the halves on a flat work surface. Drizzle 2 tablespoons of the espresso onto each half. Spread half of the ricotta mixture onto one of the halves and dust with half of the cocoa powder. Top with remaining cake half; spread the top with remaining ricotta mixture and dust with remaining cocoa powder. Using a serrated knife, gently cut cake crosswise into 4 slices and garnish with mint sprigs, if using.

Makes 4 servings

Nutrition at a Glance

Per serving: 130 calories, 2.5 g fat, 1.5 g saturated fat, 10 g protein, 13 g carbohydrate, 0 g fiber, 200 mg sodium
Coffee Panna Cotta

Prep time: 20 minutes • Cook time: 10 minutes • Chill time: 4 hours or overnight

A traditional chilled Italian dessert, *panna cotta* literally means “cooked cream.” Our version uses low-fat yogurt and fat-free half-and-half for a lighter take on the classic. If you like a stronger coffee flavor, use instant espresso powder in place of coffee powder.

- 1 cup low-fat plain yogurt
- ¾ teaspoon unflavored gelatin
- ½ cup fat-free half-and-half
- 3 tablespoons granular sugar substitute
- 1 teaspoon instant coffee powder
- ¹⁄₈ teaspoon vanilla extract

Lightly coat 4 (6-ounce) custard cups with cooking spray.

Line a strainer with paper towels and set over a large bowl. Put yogurt into the strainer and let sit for 15 to 20 minutes, or until slightly thickened.

Meanwhile, in a small saucepan, sprinkle gelatin over half-and-half; let stand for 10 minutes. Bring to a gentle simmer over medium-low heat and cook, whisking constantly, until gelatin dissolves. Add sugar substitute, coffee powder, and vanilla; continue whisking until sugar substitute dissolves. Remove from heat.

Using a rubber spatula, scrape yogurt into a large bowl. Immediately add half-and-half mixture and stir well to combine.

Divide mixture evenly among prepared custard cups. Cover and chill at least 4 hours or overnight. Serve chilled.

Makes 4 servings

Nutrition at a Glance

**Per serving:** 62 calories, 1 g fat, 1 g saturated fat, 4 g protein, 8 g carbohydrate, 0 g fiber, 87 mg sodium

*This recipe can also be prepared for Phase 1 meals.*
Creamy Dreamy Strawberry-Vanilla Shake

Prep time: 5 minutes

Frozen strawberries work like ice cubes to thicken and chill this irresistibly creamy shake. Since strawberries are available year-round, you can enjoy it anytime.

- 1 cup plain nonfat or low-fat yogurt
- 1 cup 1% milk
- 2 cups frozen strawberries
- 1 teaspoon vanilla extract

In a blender, purée yogurt, milk, strawberries, and vanilla until smooth. Serve cold.

Makes 4 (1-cup) servings

Nutrition at a Glance

Per serving: 90 calories, 1.5 g fat, 1 g saturated fat, 6 g protein, 14 g carbohydrate, 1 g fiber, 75 mg sodium

Variation: Use any type of berry and flavor of extract you prefer.
Dr. Agatston Answers Your Questions about Phase 2

Here are the answers to some of the questions our nutritionists and I are most often asked by dieters on Phase 2.

Can I still eat as much protein now that I’m eating more carbohydrates on Phase 2?

I don’t know how much lean protein you were eating on Phase 1, but I’m sure it was enough to keep you healthy and satisfied. As you know, on the South Beach Diet, we don’t expect you to count grams of protein or weigh your food on any phase.

Now that you’re gradually adding satisfying high-fiber whole grains and fruits to your diet on Phase 2, you’ll naturally be less hungry, and the amount of lean protein you require to feel full will no doubt be less than you were eating on Phase 1. That said, I encourage you to eat some protein—fish or shellfish, lean beef or pork, white meat chicken or turkey, or soy protein, for example—along with these good carbs at most meals. Protein helps slow down the digestion of carbohydrates, which means that your body will make less insulin, your sugar swings will be reduced, and you won’t crave more food in between meals.

I also urge you to eat slowly, savor your food, and really enjoy the variety of foods you’ll introduce on Phase 2. If you do this, your focus will no longer be on how much protein you can have because you’ll never be hungry. Another tip: Once you’re satisfied, push your chair away from the table. It’s fine to leave some food on your plate at the end of a meal.

As soon as I started Phase 2, I regained some weight. Could I be doing something wrong?

Most people move easily from Phase 1 to Phase 2 and continue losing weight (though not as quickly as they did on Phase 1) even when they add good carbs back into their diets. But other people, like you, have trouble. There are several possible reasons why you are putting on weight.

You’re eating too many additional carbohydrates too soon. You may be overdoing the new carbohydrates and inadvertently triggering cravings that cause you to overeat. Please review “PHASE 2: Achieving Your Health and Weight Loss Goals” Section for advice on how to gradually add more good carbs back into your diet.

You’re in a food rut. Sometimes dieters get into the habit of eating the same thing day after day, which can lead to overeating out of boredom. Vary your diet daily and you’ll likely start losing weight again. The Phase 2 Meal Plans on “Phase 2 Sample Meal Plans” Section give you plenty of ideas for varied breakfasts, lunches, dinners, and even delicious desserts.

You’re not savoring every bite. It takes about 20 minutes for your belly to send a message to your brain that you’re full and have had enough to eat. If you’re eating too fast, you aren’t allowing time for this natural feedback mechanism to kick in. You keep eating, thinking you’re hungry, when you’re actually about to be full. My advice: Start with a big bowl of broth or vegetable soup, then slow down. Enjoy every bite of your meal. Sip a glass of wine, if you like. Relax after dinner as well with a cup of tea or coffee. Make dining a pleasant, calming experience. You’ll notice that you’re eating less and enjoying it more.

You’re not active enough. I can’t emphasize enough the importance of doing regular exercise to keep your metabolism in high gear. The people who run into problems on Phase 2 and ultimately have trouble maintaining their weight loss are often the ones who are the most sedentary. I urge you to take a look at our Supercharged Fitness Program beginning on “Overview of the Program” Section. Even if you haven’t exercised in a while, this program will ease you into it. And just because you’re on Phase 2 of the diet, you don’t have to jump into the Phase 2 exercises. Feel free to start with the Phase 1 Interval Walking program and Total Body Workout to get yourself in shape, then move on to the Phase 2 exercises when you’re ready.

I lost weight steadily for the first few months on Phase 2, but now I’ve hit a plateau.
I still have about 10 pounds to go and am very frustrated. What can I do to start losing weight again?

Some people do extremely well on the diet for the first few months, but at some point during Phase 2, they plateau before reaching their goal. There may be several reasons for this, and you need to figure out the cause of the problem before you can solve it.

You’ve strayed. You need to do some soul-searching. Are you still adhering closely enough to the principles of the diet? After some people have been on the diet awhile, they start taking their success for granted. They get careless and begin eating too many sugary or starchy foods and bad fats. We don’t expect you to be perfect, but if you want to continue to lose weight and keep it off permanently, you do have to follow the principles of the diet most of the time.

So give yourself a refresher course. Read over the lists of Foods to Enjoy and Foods to Avoid for Phase 1, and study those you can and can’t reintroduce on Phase 2. Review our suggested Meal Plans, which will show you how to put combinations of foods together in appealing ways. Sometimes it’s hard to admit it, but if you’re starting to indulge in too many of the Foods to Avoid too often, you know you will not continue to get the same good results you had in the past. Try to keep track of what you eat. Some people find that keeping a journal of everything they put into their mouths each day helps them avoid that mindless second handful of nuts or extra nibble of cheese the next time they’re tempted.

You’re exercising less. Remember, the best way to recharge your weight loss is to get more exercise. When people first embark on a fitness program, they are wildly enthusiastic and rarely miss a workout. They’re scrupulous about fitting exercise into their lives, and they schedule their days accordingly. As time passes, the thrill may wear off. Even people who enjoy working out can get lax and start missing sessions. If you’ve cut back on exercise or stopped working out altogether, yet you’re carefully following the diet principles, then your plateau is likely due to the change in your exercise routine. If you want to jump-start your weight loss, you should resume your regular exercise routine and increase the intensity of your workout. Take another look at the Interval Walking program presented in Part II—it can be your best friend. That’s because it’s the best way to keep your metabolism in fat- and calorie-burning mode all the time.

You’ve reached a healthy weight. It’s entirely possible that your weight loss has stalled because you’ve already reached a healthy weight. If your cholesterol and blood sugar levels have normalized and you aren’t experiencing cravings, your desire to lose that extra 10 pounds may be more a matter of cosmetics than health (see Chapter 4 for more on this). Now is the time for employing more effective exercise rather than restricting calories, which can lead to yo-yo dieting and further weight gain (see “How Yo-Yo Dieting Affects Your Metabolism,” Chapter 4). Instead of zeroing in on the number on your scale, rev up your exercise routine and try to focus on how much better you really look and feel.

I find that when I step on the scale too often, the fluctuations drive me crazy. What’s the best way to keep track of my weight?

In the course of a day, your weight may go up and down a few pounds depending on how much you’ve had to eat or to drink or how much fluid you’re retaining (water weight). These hour-to-hour fluctuations can cause anxiety, and they are meaningless. Ignore them. The best way to keep track of your progress is to weigh yourself once a week at the same time on the same scale. For most people, first thing in the morning works best.

Is the South Beach Diet safe for children?

I don’t recommend that children go on a weight loss diet, except in special situations, as I discuss in Chapter 8. In general, if children make healthy food choices most of the time and get a reasonable amount of physical activity, their weight will take care of itself. There’s no question that kids require ample calories and nutrients to develop properly, but they shouldn’t be eating empty calories. What I do recommend is that children, along with their parents, follow the principles of the South Beach Diet. As early as possible, children should be introduced to an eating style that emphasizes good carbohydrates (fruits and vegetables), good fats, lean protein, low-fat dairy, and high-fiber foods. And, of course, kids—like adults—should enjoy an occasional treat. This is a healthy way to eat for life, and it is not only safe for children but will keep them from developing prediabetes, diabetes, and so many other ailments we’re seeing in epidemic proportions in younger and younger people.
I have problems with gluten. Phase 1 is fine for me because grains are not allowed, but what about Phase 2?

Gluten is a protein found in wheat, barley, and rye. An estimated 1 percent of the US population has gluten sensitivity, also known as celiac disease. When these people eat foods containing gluten, they may experience symptoms ranging from abdominal pain and bloating to unexplained weight loss and neurological problems in severe cases. Gluten sensitivity is caused by elevated levels of antibodies that work against a component of gluten called gliadin. When the antigliadin antibody comes into contact with gluten, it causes an inflammatory response in the body.

Celiac disease can be diagnosed with a blood test or a biopsy of the small intestine. Anecdotal evidence also suggests that it’s possible to get a negative test result for celiac disease and still have some, if not all, of the symptoms of gluten sensitivity. Interestingly, I’ve heard numerous stories from people who never realized that they were sensitive to gluten until they began Phase 1 and then found out how much better they felt when they weren’t eating grains containing gluten. Many doctors—myself included—believe there may be subtle forms of gluten sensitivity that are often undetected by these diagnostic tests. The real test is how you feel after you eliminate gluten from your diet.

Even if you can’t eat foods containing gluten, you can easily follow all the phases of the South Beach Diet. You do have to be careful about choosing the right carbohydrates, but you’d have to do that no matter what diet you were on. Fortunately, many gluten-free products sold today at supermarkets and health-food stores are compatible with the South Beach Diet. For example, you can buy bread, cereal, and even pasta made from brown rice flour that taste pretty good and contain a decent amount of fiber. You can also eat brown rice and sweet potatoes, or make your own pasta out of spaghetti squash. The crustless Vegetable Quiche Cups to Go (“Recipes for Phase 1 Meal Plans” Section) that we recommend on Phase 1 are perfect for you on any phase. Eating lean protein and good fats is also vital, no matter what else you’re eating.

But beware—there are also gluten-free versions of processed carbs, so be vigilant about reading labels. Steer clear of products that are high in sugar and low in fiber. Gluten is sometimes used as an additive in foods where you’d least expect it, such as in some brands of veggie burgers. So if you have a gluten problem, you need to be extra careful about checking all food products before buying.
Congratulations! You have achieved a healthy weight and are now ready to graduate to the maintenance phase of the diet. You can stay on Phase 3 for the rest of your life because at this point it’s not a diet, it’s a lifestyle. Even if you’ve never had any extra weight to lose, you’ll find that adopting our healthy eating principles is a great way to improve your overall health and well-being.

For those of you who have been on the diet and achieved your weight loss goals, making good food choices is now second nature. The basic principles you learned on Phases 1 and 2 are now ingrained. You will automatically head for the vegetable aisle, readily select whole-grain bread for your sandwich, choose fish and shellfish and lean cuts of meat and poultry, and read food labels to check for saturated fats and trans fats as a matter of course.

That’s why we haven’t included Sample Meal Plans or recipes for Phase 3 in this book. We know from 5 years of talking with our dieters that by now, you are more than capable of putting healthy meals together on your own. That said, we encourage you to use the Sample Meal Plans and all the recipes from Phases 1 and 2 whenever you want, and, of course, feel free to refer to the food lists whenever you need a refresher.

Our ultimate goal with the South Beach Diet has always been to show you how to make good food choices for yourself (and your family) most of the time, so you can enjoy a few bites of even the most decadent dessert on occasion and still maintain your weight.

Now that you have reached Phase 3, you will be introducing some new foods, specifically those that you were advised to avoid on Phase 2. This shouldn’t present problems. By now you are able to monitor your body’s response to particular foods, you know what triggers your cravings, and you automatically make the right choices for you. If, given this new freedom, you find that you can’t just eat one piece of French bread without practically inhaling the whole loaf or that you can’t eat a scoop of ice cream without devouring the entire carton, it’s a sign that you should probably avoid these foods altogether, at least for a while.

But the best news of all is that now that you’ve reached Phase 3, no food is off-limits unless you say it is. The challenge with Phase 3 is learning how to incorporate those occasional sinful treats into your diet without regaining weight. It’s also essential that you continue to follow a fitness program—ideally, one incorporating interval training and core-strengthening exercises. This is the best way to maintain both your weight and your health.
Dr. Agatston Answers Your Questions about Phase 3

Here are the answers to some of the questions our nutritionists and I are often asked by dieters who are on Phase 3.

I’ve been on Phase 3 for 2 months and have started to gain some weight back. What should I do?

The question is, why are you gaining weight? There are two possible reasons: You’re no longer adhering to the principles of the diet, or you’re not getting enough exercise—or both.

First, let’s examine what you’re eating. Are you indulging in too many foods that should be eaten only on special occasions? If so, you need to understand that if you revert to your old eating habits, you most certainly will gain weight. If you have put on 10 or more pounds or have started to have food cravings (which I suspect may be causing your problem), you may need to return to Phase 1 for several days until your cravings subside. If your weight gain is minimal and you don’t have cravings, simply return to the Phase 2 eating plan that worked for you before. The beauty of the South Beach Diet is that it’s flexible enough to accommodate the normal changes of daily life.

Second, I can’t overstate the importance of getting enough exercise. Some people believe that once they have achieved their goal weight, they can stop exercising. Nothing could be further from the truth. Exercise is essential to maintaining your weight loss over the long term, especially when you’ve progressed to a lifestyle that includes those occasional treats. The exciting thing about our fitness program is that it will keep your metabolism revved up so you can burn more fat and calories. And burning more calories means that you can have that occasional treat without regaining the weight. It’s important to integrate your exercise program seamlessly into your lifestyle, as you have done with the diet. Try to make it a habit, exercising at the same time in the same place every day or at least on most days of the week.

My food cravings have returned on Phase 3. It’s torture for me to eat just one cookie. I haven’t put on any weight, but I’m very worried that I will. What should I do?

The best part about Phase 3 is that no food is forbidden, which means you are allowed to eat virtually anything, and that includes the occasional cookie or a few french fries. (Occasional is the operative word.) Phase 3 is a time of experimentation when you’ll want to try different foods (ideally, healthy ones) and see which work for you and which don’t. If you’re unable to include certain sugars or starchy foods without triggering cravings, there’s only one solution: Don’t eat them. Why put yourself through torture? There are plenty of foods you can eat that won’t give you trouble. You can also replace those sugary cookies and fatty fries with healthier options: Try a couple of our famous Peanut Butter and Jelly Cookies (“Recipes for Phase 2 Meal Plans” Section) or Baked Sweet Potato Chips (“Recipes for Phase 2 Meal Plans” Section).

living THE SOUTH BEACH DIET

Jocelyn J., age 57: We’ve Changed Our Lives for the Better

I was diagnosed with breast cancer in 2000 and underwent a double mastectomy and a course of chemotherapy. It was very, very rough. After my treatments were over, I was put on tamoxifen to prevent a recurrence of the cancer, and like a lot of women, I started to gain weight on the drug. Much to my dismay, the pounds really started piling on. I had always been slim, and suddenly, overnight, I was fat. I zoomed through clothing sizes at record speed. Soon I weighed 175 pounds, a lot for my 5-foot-6 frame. Needless to say, I was not happy with
my situation. Not only had I gone through an ordeal with my treatments, I now had to deal with this new, larger body. I tried cutting back on my food intake, but it didn’t help.

I thought that I could never get my old body back and resigned myself to being unhappy about my weight. At the time, my husband, who weighed 228, was told by his cardiologist that his cholesterol was bad and he had to lose weight. The doctor recommended that he follow the South Beach Diet. Since I wanted to lose weight, too, we decided to try it together. I wasn’t very hopeful, but I felt I had nothing to lose.

I bought the South Beach Diet cookbooks and was intrigued by what I read. Since I had always been thin, I had no idea of what triggered obesity. I learned a great deal about how to eat and put meals together. I’m a gourmet cook, and I love good food. I got very excited when I started to read the recipes. They were great! My husband, who normally dislikes fish, even enjoyed one of the fish recipes I made.

Over the next few months, my husband lost 28 pounds and is now steady at around 199. He’s always telling me how much better he feels now that he is lighter. His cardiologist is also thrilled. And I’m thrilled that I lost 35 pounds and have kept the weight off.

The South Beach Diet definitely changed our lives for the better. We are now conscious of what we’re putting into our mouths. Occasionally we eat things that we shouldn’t, but we haven’t regained the weight. I gave away all my fat clothes and swore that I would never get to that point again. Whenever I feel my weight is creeping up, I go back to Phase 2.

We are firm believers in the South Beach Diet and sing its praises whenever we meet someone who is struggling with weight and wondering what diet to go on.

Of course there will be those times when you do give in to a craving. When this happens, do have a couple of cookies or fries, but at the same time think about how much better you will feel if you don’t have too many. Or, if a little ice cream will satisfy your desire for a special sweet, have a few bites. You may find you have more control after a small indulgence. And on those occasions when you just don’t stop, let it go and return to making healthier eating choices as soon as possible. You should never feel that you’re on or off the South Beach Diet. Eating everything today because tomorrow you know you can’t creates an all-or-nothing mentality that’s detrimental to making the diet a successful lifestyle.

Do I still need to eat snacks during Phase 3?

It depends on what else you’re eating throughout the day. If you’re eating three good meals daily and don’t get hungry in between, you may not even need healthy snacks. Keep in mind that the purpose of snacking is to prevent drops in blood sugar that cause cravings and leave you feeling famished. On Phases 1 and 2, snacks were particularly important to help wean you off highly processed refined starches and sugar-laden foods and help you adjust to this new style of eating. But now that you’re on Phase 3, you’re no longer eating the foods that caused your cravings, and this makes snacks less critical.

Interestingly, I’ve had a number of Phase 3 dieters tell me that they prefer to graze, or eat smaller meals throughout the day, rather than three fuller ones. There’s actually an advantage to eating less at a time but more often, and it’s due to what’s called thermogenesis, which is the measure of the amount of calories burned as part of digesting a meal. Not surprisingly, you burn more calories when you digest bigger meals—but, as it turns out, not by that much. Therefore, if you eat the same amount of healthy foods daily but divide it among five smaller meals instead of three larger ones, for example, you’ll burn more total calories each day, thanks to engaging your digestive system more often.

Whether you snack, don’t snack, or graze, do keep in mind that there are times when a strategic snack can be really useful. For example, if you know dinner is going to be late or you’re heading to a cocktail party where there will be lots of temptations, have a snack to stave off hunger. If you let yourself become famished, you’ll invariably overeat.

The bottom line: By Phase 3, the South Beach Diet becomes a lifestyle that readily adjusts to your lifestyle. Only you will know what’s best for you in terms of maintaining your new and healthy weight. And now you’re free to make those choices.

Should I be taking nutritional supplements?

I recommend taking very few supplements. The reason? We have not yet learned to extract vitamins from foods
so that they work as well in supplement form as they do when you eat the foods themselves.

I strongly believe that you should get the nutrients you need from eating a whole-foods diet. This means enjoying a wide variety of fruits and vegetables because they contain thousands of phytonutrients that are critical to good health (see Chapter 7, “Supercharged Foods for Better Health”). So far, the research that has been performed on specific supplements—notably, antioxidants—has been disappointing. To date, there is no pill, including a multivitamin, that works like a good diet based on healthy foods.

That said, I do recommend that you take an omega-3 fatty acid (fish oil) supplement because it’s difficult to get enough omega-3s from foods. I take a fish oil supplement myself, and I strongly recommend it to all my patients. The active ingredients in omega-3s are docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA), and both are listed on the label. A total of between 1,000 and 2,000 milligrams of DHA and EPA a day is recommended. Taking a supplement of the mineral calcium, which many people fail to get enough of from foods, can be helpful for women at risk for osteoporosis.

Can I really eat anything I want on Phase 3?

If you’re talking about dessert as an occasional treat, of course. On Phase 3, we don’t regulate what you can eat. Yes, you can finally have that small bowl of ice cream or a small piece of chocolate cake or the white bagel that you couldn’t have before. But you shouldn’t do it too often, and you should continue to watch amounts on desserts. Phase 3 isn’t about abandoning the good principles of the diet and suddenly resuming your old eating habits. It’s about continuing to make smart, healthy food choices—for life. If you follow the principles of the diet most of the time, we expect you to enjoy anything you want now and then.

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**living THE SOUTH BEACH DIET**

**Wendy N., age 30: It’s Simply My New Way of Living**

Two years ago, I weighed 370 pounds. I’m 5-foot-10, so I’m tall, but even so, I was extremely overweight. I was already on blood pressure medications, and my doctor had been telling me for years that I might develop diabetes if I didn’t take off some weight. My mother is diabetic, but I was young and thought I was invincible. In October 2006, my doctor told me I was officially prediabetic. I saw how my mother had struggled with her diabetes, and my immediate thought was, *I’m going to run as fast as I can in the other direction!*

I didn’t know where to begin, though, so my doctor recommended that I try the South Beach Diet. I bought the book, and the first thing I did was thumb through the recipes. I got scared because I’m not a great cook. But then my doctor told me not to worry so much about the recipes but just read about the principles of the South Beach Diet. That’s when it all clicked. I realized that it was easy. I could do this. I saw that I could still eat the same foods I’d been eating, but I’d have to prepare them differently. Once I understood what the diet was about, the recipes didn’t seem too complicated. In fact, they were pretty easy.

My first 2 weeks on the diet, I lost 15 pounds, and I didn’t even exercise—I just ate the right foods. I realized that if I started to exercise, I could lose a lot more. I began slowly, exercising just a few days a week. Now I’m working out 6 days a week. Healthy eating and exercise have become a permanent part of my lifestyle. Over the past 12 months on the diet, I have lost 125 pounds. My co-workers ask me what my secret is, and I steer them to the South Beach Diet. In fact, two of them have adopted this lifestyle, too, and we exchange tips and keep each other motivated. Of course, I have days when I slip up, but I keep remembering what Dr. Agatston says about acknowledging that you’ve messed up and getting quickly back on track.

During a recent visit to the doctor, I learned that I am no longer prediabetic, and I no longer need medications for my high blood pressure. The South Beach Diet has completely changed my life. Everything is a challenge in the beginning, but when you stick with something long enough, you discover that it becomes easier. The South Beach Diet has been so easy to incorporate into my lifestyle that most of the time I don’t even think that I’m on a diet. It’s simply my new way of living.
REFERENCES

CHAPTER 1

Changing the Way America Lives


CHAPTER 2

The Basics of the South Beach Diet


A Diet You Can Live With...For Life


Supercharge Your Metabolism


Børsheim E, Bahr R. Effect of exercise intensity, duration and mode on post-exercise oxygen consumption. *Sports*


CHAPTER 5

Boomeritis: The New Epidemic!


CHAPTER 6

Bye-Bye Belly Fat


Fontana L, Eagon JC, et al. Visceral fat adipokine secretion is associated with systemic inflammation in obese


**CHAPTER 7**

**Supercharged Foods for Better Health**


Liu RH. Health benefits of fruit and vegetables are from additive and synergistic combinations of phytochemicals. Am J Clin Nutr 2003;78(3 Suppl):517S–520S.


Whelton SP, Hyre AD, et al. Effect of dietary fiber intake on blood pressure: A meta-analysis of randomized,


### CHAPTER 8

#### A Generation Overfed and Undernourished


PART II

See references for Chapter 4.

PART III


Conversion Chart
These equivalents have been slightly rounded to make measuring easier.

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Lean meat has 10 g or less total fat and 4.5 g or less saturated fat per 100 g portion.
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