

Dr Michael Mosley and the 5.2 Diet

The recent and tragic death of the popular TV doctor Michael Mosley has once more reminded us of his work to promote radical changes in our eating habits to improve our health. He was particularly interested in the effects of fasting, to reduce the onset and progress of Type 2 Diabetes.

Studies on intermittent fasting (IF) in general show impressive health benefits. IF is an eating pattern in which individuals go extended periods with little or no energy intake after consuming regular food in the intervening periods. IF has several health-promoting effects. It can effectively reduce weight, fasting insulin levels, and blood glucose levels.

It works by prolonging the period when your body has burned through the calories consumed during your last meal and begins burning fat. During the fasting period, our available glucose reserves become depleted and the liver converts stored fatty acids to ketones to be used for energy instead of glucose. There is a theory that by restricting food, our bodies will learn to more efficiently tap into our fat stores for energy. The idea that the breakdown of stored fat is a straightforward process to generate energy has experienced major revisions over the last two decades.

There is limited evidence on the 5:2 diet specifically. However, it has become quite popular. A randomised, controlled trial conducted with 300 people, published in 2021 concluded that the regimen of 5 days of normal eating followed by 2 days of fasting was moderately effective in helping people lose weight but the impact diminished over time. The main strengths of the trial were that it provided the first information on the effectiveness of the simple 5:2 diet advice, and that it evaluated the method in ‘real-life’ setting.



DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
Eat normally	Women: 500 calories Men: 600 calories	Eat normally	Eat normally	Women: 500 calories Men: 600 calories	Eat normally	Eat normally

Adherence to the 5:2 diet declined from some 80% at 6 weeks to around 20% at one year. It was the restriction on the fasting days that seemed to generate a degree of hunger and discomfort that proved eventually too severe for most clients. It was thought that by giving written instructions concerning diet and exercise, the 5:2 diet, accompanied by group support, generated better early outcomes.

In the UK, GPs currently have an option to refer patients to free intensive specialist weight management treatments. Unfortunately, most patients referred to such treatments however do not attend them.

We must view the enthusiasm for brief fasting against the continuing pressure on our eating habits from the global food system. This promotes the consumption of the most abundant ingredients that are available – sugars in the form of refined carbohydrates such as flour from grains and the fats from plants and animals. We have evolved biologically to crave them. Economic development almost inevitably leads to adoption of a “Westernised” diet and the consequences are now termed “globesity”.

The solutions to the current global crisis of diet-related disease and the environmental damage caused by the food system, are so complicated that governments can barely know where to

start. On a personal level, we may choose to attempt voluntary restrictions in our calorie intake and be comforted by the knowledge that our efforts are definitely worthwhile for our health.

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