

View Point

Rhythmic Eating and Physical Activity to Minimize Metabolic Disorders: A Novel Multi-Species Solution

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Abstract

This public policy article delineates how a rhythmic approaches to daily eating and exercise can rightly immune the modern human against adult diabetes. No other lifestyle strategy may exist to put off or inevitably eradicate diabetes. Any circadian major food meal must be rhythmically coupled with an adequately grave exercise session. This strategy must be supplemented by small frequent food meals distributed evenly during day and lack of major meals overnight. A simpler and less-demanding approach would be to make meals smaller to thus decrease needs for more than one intense exercise session a day.

Keywords: Rhythm; Intake; Physical activity; Metabolic disorder

Methodology, Innovation and Discussion

The simple but working solution to minimize risks from diabetes and related cardiovascular and metabolic complexities described herein has a global nature. Obesity and diabetes continue to increasingly challenge human health in various populations. Even, many diabetics are still unaware of their diabetes and how sever it is becoming. It is becoming almost a reality that no family exists to not have at least one member suffering from obesity. Obesity especially in abdominal sections makes people more prone to diabetes in a foreseeable future, thus requiring effective preventive strategies [1-5].

Food consumption and exercise have long been emphasized as two key determinants of a quality lifestyle. However, unless very recently [6-10], no attempt had been made to develop a specialized pragmatic vision to analyze eating and exercise within a rhythmic circadian framework. The two E must be viewed in a circular circadian regimen to fit one another regularly [11,12]. This could, for instance, mean that any major food meal must have its corresponding and fitting physical work session to ensure cell nutrient metabolism and waste management are not sternly asynchronized. Regardless of the food quantity and energy load, any major meal causes several critical mechanisms in cell physiology and endocrinology to augment. These processes, if not properly and timely managed, could harmfully jeopardize normal cell life and gradually lead to a variety of complexities that may ultimately cause cancer [13,14]. Diabetes is thus just a superficial sign of discorded rhythms of eating and exercise. The subsequent problems including oncogenesis go more severe [15,16].

The global approach developed in this article has immense capacities to prevent and indeed to treat diabetes mainly because of helping the body to be physiologically set upon its natural life patterns. The modern lifestyle has in many ways disrupted the natural cycles of cell physiology and has thus led to increased rates of obesity and diabetes in different global communities. Not moving as much as eating is a serious problem in today's world. The more severe is the fact that numerous cases are still unaware of their prediabetes and diabetes. This signifies the importance of pragmatic public education.

Should diabetes not be prevented carefully, it will not be unrealistic to observe that almost any family has at least one diabetic member in the forthcoming future. What makes people more prone to diabetes is obesity that is often characterized by central adiposity. This increases likelihood of cardiovascular and immune diseases. Dual intake and exercise regimens are required to skirmish such a growing concern [17-23].

Nutrient intake and physical activity are usually discussed as major effectors of human health and life quality. Nonetheless, research on development of pragmatic simple programs to match intake and exercise in a rhythmic structure has been scarce. Intake and exercise should be started to be considered highly interconnected to match one another rhythmically. This vision implies that all major food meals require fitting intense exercise to improve intermediary metabolism and waste management simultaneously. This law works logically in the real world because the circadian major food meals induce and augment a variety of physiological mechanisms that would not be efficiently bioprocesses and would damage cell biology should daily exercise patterns not effectively fit nutrient intake patterns. Oncogenesis is thought to be at least partly a result of such an asynchrony [14-16].

In a nutshell, elevated blood sugar in modern communities is mostly certainly an anticipated consequence of unparalleled daily patterns of physical work and nutrient intake. This unfitting daily lifestyle increases risks of carcinogenesis and tumour development that may be first shown as obesity or diabetes [11,14]. A global feasible solution would be to take frequent but petite food meals that are evenly distributed over day-period. In addition, large evening and night meals must not be taken. Furthermore, at least one intense exercise for a minimum of 30 min daily to enrich cells with essential synchronies in cell metabolism should be required. No exercise program with less frequent than once in every other day is acceptable for the modern human lifestyle with minimal movement and maximal intake and stress. This program is inspired by nature where physiological rhythms of human body used to be fuelled from to improve health [6].

In a nutshell, more frequent small meals distributed evenly and equally during day and avoided large evening meals must be complemented with at least one major exercise session in a circadian phase to ensure enriching the body with sufficient synchronies in cell physiology. Otherwise, more than two major meals a day will require a minimum two intense exercise session. This rhythmic bioprocess leads different cells towards optimal function and health. Nature is a leading example for such regular circadian rhythms of life [6,16].

Implications

This article developed a pragmatic philosophy of rhythmic circadian eating and exercise to minimize risks from obesity and diabetes. Preventing diabetes keeps the body far from incidence of the many cardiovascular, metabolic, and endocrinological diseases and disorders.

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