Free guide

Less Sugar, Less Fat

A free, practical low-sugar guide with nothing to buy: exercise + protein + fibre + little sugar + a moderate deficit + 16-hour fasting

16 hours	1.2 to 1.6 g	300 to 500
fasting 5 to 6 days a week	protein per kg	kcal daily deficit

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About this guide

A practical guide to losing fat while keeping muscle, written for adults in general. It explains why the plan works, then its six pillars, then free habits that multiply their effect. All examples and numbers are hypothetical and for illustration only.

Disclaimer

This is a general guide for education only. The author does not give any personal medical, nutrition or training advice beyond the content of this guide. Anyone who wants a plan designed for their own situation should see a clinical dietitian and a qualified fitness trainer, and should see their doctor about any health condition.

See your doctor before you start if you:

- Take insulin or sulfonylurea medicines (medicines that can cause low blood sugar), or any other diabetes medicine.
- Take GLP-1 medicines or any other weight-loss medicine.
- Have had a sleeve gastrectomy or a gastric bypass.
- Are pregnant or breastfeeding, or are under 18.
- Have kidney or liver disease, gout or high uric acid.
- Have a history of eating disorders (such as bulimia or anorexia nervosa).
- Have heart disease, uncontrolled blood pressure, or any other chronic illness.

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1 The whole formula on one page

Losing fat while keeping muscle does not come from one thing; it comes from a complete formula. Apply the six pillars together, then add the free habits:

1. Exercise: resistance training 2 to 3 times a week + 150 minutes of cardio a week, and never more than two days in a row without exercise.

2. Protein: 1.2 to 1.6 g per kg of body weight a day, completed within the eating window.

3. Fibre: 25 to 35 g a day from vegetables, legumes, whole grains and fruit.

4. Little sugar: sweets and sweetened drinks kept to a minimum, and the small amount of complex carbohydrates eaten around exercise time.

5. A moderate deficit: 300 to 500 kcal below your daily needs, no more.

6. 16-hour intermittent fasting: 5 to 6 days a week, with exercise inside the eating window (if you combine intermittent fasting); an early window is better.

Free add-ons: 7 to 8 hours of sleep, a 10 to 15 minute walk after meals, food order (vegetables and protein first, starches last), standing for 2 minutes every 30 minutes of sitting, less stress, and morning sunlight.

All numbers in this guide are general and illustrative, and are not a personal prescription.

2 Why does this plan work?

The idea, simply: exercise opens the "storeroom", fasting and a moderate deficit make the body draw on fat, and protein builds and protects muscle.

1. Exercise empties the glycogen store

Glycogen is the sugar stored in muscles and the liver. Exercise, especially resistance training and moderate cardio, uses up part of it. After exercise, the muscles refill this store from the sugar you eat, so the sugar goes into muscle instead of staying in the blood or turning into fat.

2. During exercise: muscle pulls in sugar without insulin

Inside the muscle cell there are "doors" that let sugar in, called **GLUT4**. Normally, opening them needs a signal from insulin, but muscle contraction during exercise moves these doors to the cell surface by a route that does not depend on insulin. That is why muscle pulls sugar out of the blood during exercise, even in people with insulin resistance.

3. After exercise: insulin sensitivity rises for 24 to 48 hours

The effect of a session does not end when the session does; the muscles stay more responsive to insulin for about one to two days. For this reason:

- **Do not go more than two days without exercise:** so this effect keeps being renewed all week.

- **Eat your small amount of complex carbohydrates around exercise time:** that is when your muscles take them up best.

4. Amino acids are the bricks; carbohydrates and fats are the energy for building

Protein breaks down into amino acids, which are the **building materials** the body uses to repair muscle after exercise and to build new muscle. Carbohydrates and fats are the **energy** the "builder" needs to do the work. So we need enough protein every day, with enough energy but not too much: a moderate deficit, not starvation.

Bottom line: regular exercise + enough protein + a moderate deficit = the body takes the missing energy from fat, and keeps its muscle because the muscle is "in use" and has its building materials.

3 Know your goal: fat and muscle, not the scale

Your weight on the scale is a single number that adds up four different things: fat, muscle, water and bone. That is why two people can weigh exactly the same yet look completely different and have completely different health.

The real goal is **stable or greater muscle mass and a lower fat percentage**. The scale may stay the same while fat goes down and muscle goes up; that is excellent progress. Water moves the scale up and down from day to day (because of salt, carbohydrates, sleep, exercise and the menstrual cycle).

The free measure: waist circumference

Measure your waist at the level of the navel once a week, in the morning before eating, with a flexible tape measure without pulling it tight. Then divide it by your height: the general target is **below 0.5**.

Example: height 175 cm and waist 96 cm → 96 ÷ 175 = 0.55. The target is a waist under 87.5 cm.

Body composition scan (optional, if available)

A device that estimates fat and muscle in about a minute, found in many gyms. If you have access to one, measure about every 4 weeks on the same device under the same conditions: in the morning, fasting, after using the toilet, and with no exercise beforehand. It is not usually used for people with an implanted electronic medical device, or during pregnancy.

The number	What it means, simply	Good progress
Fat percentage (PBF)	What percent of your weight is fat	Goes down
Muscle mass (SMM)	The muscles that move your body	Stable or goes up
Waist circumference	A free alternative at home	Gets smaller
Weight	Used only to calculate protein	Not a measure of success

Illustrative examples (anonymised)

Illustrative body composition examples. Names, ages, dates and anything that could identify a person have been removed, leaving only body composition numbers.

1. Exactly the same weight… two different bodies

	Person A	Person B
Weight	87.8 kg	87.8 kg
Muscle mass	27.4 kg	39.0 kg

Fat mass	38.1 kg	18.0 kg
Fat percentage	43.4%	20.5%

The lesson: the scale gave the same number, but Person B has about 11.6 kg more muscle and about 20 kg less fat.

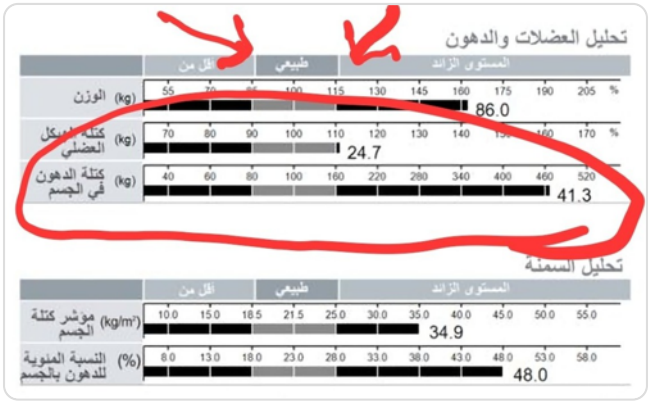
2. An "ideal" weight with high fat



Weight 57.5 kg and body mass index 21.6 (within normal), but muscle 19.4 kg (below normal) and fat percentage 37.4% (high).

The lesson: the scale and BMI said "excellent", but the muscle and fat lines revealed the truth.

3. The Arabic report sheet: where to look



Look for: skeletal muscle mass, body fat mass, and percent body fat. The grey band is the normal range. Here: weight 86.0 kg, muscle 24.7 kg, fat 41.3 kg, and fat percentage 48.0%.

4. The scale stayed the same… the body changed

	First scan	About 2.5 months later
Weight	61.5 kg	61.4 kg
Muscle mass	19.4 kg	21.6 kg
Fat percentage	40.3%	35.0%

The lesson: more than 2 kg more muscle and more than 3 kg less fat, and the scale did not move.

5. Before and after: this is what real progress looks like

Example	Fat % before	After	Time
"Normal" weight, little muscle	49%	28%	6 months

A man who stuck with it for a year and gained about 3 kg of muscle	39%	23%	1 year

In these examples the programme was the same: resistance training, cardio, a suitable diet and intermittent fasting. Success takes months of commitment, not weeks.

4 Pillar 1: Exercise (resistance + cardio)

Element	Weekly target
Cardio (brisk walking, cycling, swimming…)	**150 minutes** at moderate intensity, e.g. 5 × 30 minutes
Resistance (bodyweight, machines or weights)	**2 to 3 times**, full body or upper/lower
The golden rule	**No more than two days in a row without exercise**

- **Moderate intensity:** you can talk in short sentences but cannot hold a long, easy conversation.
- **Resistance:** 6 to 8 movements covering the whole body, 2 to 3 sets, finishing each set while you could still do 2 to 3 more repetitions.
- **Home is enough to start:** bodyweight exercises with no equipment, plus brisk walking.
- Details, drawings and weekly schedules are in the companion **Exercise Guide**.

Exercise inside the eating window (if you combine intermittent fasting): it is best to exercise 1 to 2 hours after a meal, then eat a meal with protein after exercise. Anyone taking insulin or medicines

that lower blood sugar should not exercise while fasting unless their doctor allows it.

5 Pillar 2: Protein 1.2 to 1.6 g/kg

Daily protein (g) = your body weight (kg) × 1.2 to 1.6. This is the only use of weight in this guide.

Body weight	× 1.2	× 1.4	× 1.6
60 kg	72 g	84 g	96 g
70 kg	84 g	98 g	112 g
80 kg	96 g	112 g	128 g
90 kg	108 g	126 g	144 g
110 kg	132 g	154 g	176 g

- **If your weight is very high** (BMI above about 35): start at the low end (1.2), because total weight overstates the need.
- **Spread it over 3 to 4 meals** with about 25 to 40 g of protein each, **completed within the eating window**.
- Have a meal with protein after exercise.
- Anyone with kidney disease should see their doctor before increasing protein.

Protein from ordinary food

The most useful measure is grams of protein per 100 kcal: the higher it is, the fewer calories it takes to reach your target. Values are approximate.

Food (portion)	kcal	Protein	g/100 kcal
Cooked white fish (100 g)	118	25 g	21

Grilled chicken breast (100 g)	165	31 g	19
Tinned tuna in water (100 g drained)	116	26 g	22
Plain Greek yoghurt (200 g)	146	20 g	14
Lean cooked beef (100 g)	193	30 g	15
Whole eggs (2, about 100 g)	143	13 g	9
Cooked lentils (100 g)	116	9 g	8
Cooked chickpeas (100 g)	164	9 g	5
Nuts (30 g), watch the calories	175	6 g	3

Raw and cooked: meat loses about 30% of its weight in cooking; 100 g cooked ≈ 140 g raw. Calculate the same way every time.

6 Pillar 3: Fibre 25 to 35 g a day

Fibre slows sugar absorption, keeps you full, feeds helpful gut bacteria, and prevents the constipation that comes with high-protein eating. The target is **25 to 35 g a day**.

Source (portion)	Approx. fibre
Cooked lentils, fava beans or chickpeas (half a cup, about 100 g)	7 to 8 g
Cooked vegetables (a cup, about 150 g)	4 to 5 g
Oats (50 g dry)	5 g
Cooked bulgur (a cup, about 180 g)	8 g
Whole-wheat bread (small loaf, about 60 g)	4 g
A medium apple or pear with the skin	4 to 5 g
Berries (100 g)	2 to 6 g
Large salad (200 g)	2 to 3 g

Chia or flax seeds (1 tablespoon)	3 to 4 g

- **Go gradually:** increasing fibre suddenly causes bloating and gas; add one source every few days.
- **With water:** fibre needs enough water to work.
- After stomach surgery: follow your surgical team's instructions on fibre.
- If constipation continues, or comes with severe pain, blood or vomiting, see a doctor.

7 Pillar 4: Little sugar, and carbohydrates around exercise

- **Added sugar to a minimum:** sweets, juices, fizzy and sweetened drinks, and sweetened coffee.
- **Complex carbohydrates in small amounts and at the right time:** oats, rice (brown is better), bulgur, whole-wheat bread, potatoes, and dates in moderation. Have them **1 to 2 hours before exercise or after it**, when the muscles are most ready to take them up.
- **Meals far from exercise:** protein + vegetables + a small amount of healthy fat.
- You do not need a keto diet to lose fat; what drives the result is a moderate deficit, enough protein and exercise.
- A weight rise for a day or two after a higher-starch day is usually water and glycogen, not fat.

8 Pillar 5: A moderate deficit of 300 to 500 kcal

1. Calculate your basal metabolic rate (Mifflin-St Jeor equation):
   Men: 10×weight + 6.25×height(cm) − 5×age + 5
   Women: 10×weight + 6.25×height(cm) − 5×age − 161

2. Multiply it by an activity factor: 1.2 (sedentary), 1.375 (lightly active), 1.55 (moderately active). The result = your approximate maintenance calories.
3. **Subtract 300 to 500 kcal**: this is your daily target.

Hypothetical example	Maintenance	Target
Man, 90 kg, 175 cm, 40 years, × 1.375	2,473	1,973 to 2,173
Woman, 70 kg, 162 cm, 35 years, × 1.375	1,893	1,393 to 1,593

- **Why moderate?** A large deficit eats into muscle, raises hunger, is tiring, and is hard to keep up.
- **Do not eat back your exercise calories:** do not add to your food what your watch says you burned.
- Do not go below about 1,500 kcal for men or 1,200 for women without medical supervision.
- Adjust the target by only about 100 to 150 kcal if your waist has not improved within 3 to 4 weeks.

9 Pillar 6: 16-hour intermittent fasting

- **16 hours fasting and 8 hours eating**, on **5 to 6 days a week**. One or two days without fasting are fine, with the same calorie and protein targets.
- **An early window is better:** such as 08:00 to 16:00 or 09:00 to 17:00; it suits the body clock and leaves time between the last meal and sleep.
- **Exercise inside the eating window** (if you combine intermittent fasting), ideally 1 to 2 hours after a meal.
- **Complete your protein inside the window:** do not close the window while still far from your protein target.
- **While fasting:** water, or tea or coffee with no sugar and no milk.

- **Break the fast immediately** if you feel severe dizziness, shaking, sweating or palpitations, and see your doctor.

Example for a 09:00 to 17:00 window	What to do
09:00	First meal: protein + vegetables
12:00	Pre-exercise meal: protein + a little complex carbohydrate
13:30	Exercise
14:45	Post-exercise meal: protein + vegetables + a little starch
16:30	Last meal, then the fast starts at 17:00

Intermittent fasting is not suitable for:

- **Pregnant women** (breastfeeding women should ask their doctor).
- **Anyone with a current or past eating disorder.**
- **Anyone using insulin or sulfonylurea medicines** unless supervised by their doctor, because the risk of low blood sugar is real.

These people apply the rest of the formula (exercise, protein, fibre and a moderate deficit) with three regular meals.

10 A sample full day for a hypothetical person

Hypothetical man, 90 kg: calorie target 1,973 to 2,173, protein 108 to 144 g (1.2 to 1.6 g/kg), fibre 25 to 35 g. Window 09:00 to 17:00, exercise at 13:30.

Time and food	kcal	Protein	Fibre
09:00 Three boiled eggs (about 150 g)	214	19 g	0 g

09:00 White cheese 30 g	79	4 g	0 g
09:00 Vegetable salad 200 g + 2 teaspoons olive oil	124	2 g	3 g
09:00 Almonds 30 g	174	6 g	4 g
12:00 Oats 50 g (dry) with water + berries 100 g	240	7 g	7 g
12:00 Plain Greek yoghurt 150 g	110	15 g	0 g
14:45 Grilled chicken breast 130 g + cooked vegetables 150 g + 1 teaspoon oil	311	44 g	5 g
14:45 Cooked rice 200 g + 2 small dates (about 24 g)	326	6 g	2 g
16:30 Grilled white fish 100 g + cooked lentils 100 g	234	34 g	8 g
16:30 Salad 200 g + tahini 15 g + 1 teaspoon oil	169	4 g	4 g
Total	**1,982**	**142 g**	**33 g**

The result: about 1,982 kcal, 142 g protein and 33 g fibre, with the complex carbohydrates (oats, rice and dates) around exercise time. Values are approximate, from general food composition tables; do not copy the numbers, calculate your own.

At every meal: start with vegetables and protein, and leave starches for last.

11 The free add-ons: habits that cost nothing

7 to 8 hours of sleep

Short sleep raises hunger and sugar cravings and lowers insulin sensitivity. A fixed wake-up time, a dark and cool room, and the phone put away half an hour before bed.

A 10 to 15 minute walk after meals

Working muscles pull sugar out of the blood, so it rises less after eating. A gentle walk is enough, indoors or somewhere air-conditioned.

Food order

Start with vegetables, then protein, and leave starches for last. The same food eaten in this order lowers the sugar rise after the meal.

Stand for 2 minutes every 30 minutes of sitting

Stand up and move or walk on the spot for two minutes. Long, unbroken sitting raises sugar after meals, even in people who exercise.

Less stress

Chronic stress raises appetite and emotional eating and spoils sleep. Try 5 minutes of slow breathing, walking, calm prayer, and time with family.

Morning sunlight

Get 10 to 15 minutes of daylight in the morning; it helps set the body clock and sleep at night. Avoid the hot midday sun.

All these habits are free and need nothing to be bought.

12 Managing hunger and water

Hunger

- **Protein and fibre first:** they are the most filling for the fewest calories.
- **Volume foods:** vegetables, salads and light soups fill the stomach with few calories.
- **Eat slowly:** chew well and give yourself 15 to 20 minutes before taking a second portion.
- Hunger comes in waves that settle within minutes; drink water and get busy with something else.
- Short sleep raises hunger; sleep is part of the plan.

Water

- Protein, fibre, fasting and summer all increase your need for water.
- **The simplest measure:** pale yellow urine. Dark urine means you need more water.
- Start and end the window with a glass of water; water is allowed throughout the fast.
- In heat and sweating: more water, and the usual table salt in your meals replaces what you lose.
- Heart or kidney patients on a fluid restriction: follow your doctor's instructions.

13 Calorie traps

- **Sweets:** one small piece can use up a quarter of your daily budget.
- **Nuts:** healthy but calorie-dense; a "small" handful can exceed 200 kcal. Set the portion in advance (about 20 to 30 g).

- **Oil in cooking and restaurant dishes:** one tablespoon of oil is about 120 kcal. Order grilled, with sauces on the side.
- **Drinks:** juice, sweetened coffee and fizzy drinks are calories without fullness.
- **Eating in front of a screen:** you eat more without noticing; sit down to eat.

14 Logging and follow-up

The easiest log is the one in your pocket: phone notes or a small notebook, or a WhatsApp group with only yourself in it. Write each food on one line with the running total:

English	Arabic equivalent
09:00 Ate 3 eggs 214c 19p (214/2050c 19/126p)	«٩:٠٠ أكلت ٣ بيضات ٢١٤ سعرة ١٩ بروتين (٢١٤/٢٠٥٠ سعرة ١٩/١٢٦ بروتين)»
14:45 Ate 130 g chicken 214c 40p (1097/2050c 92/126p)	«١٤:٤٥ أكلت ١٣٠ جرام دجاج ٢١٤ سعرة ٤٠ بروتين (١٠٩٧/٢٠٥٠ سعرة ٩٢/١٢٦ بروتين)»
Ate 150 g chicken	«أكلت ١٥٠ جرام دجاج»

And log the fast in two lines: the time of your last bite, and the time of your first bite with the length of the fast.

English	Arabic equivalent
Start fasting 17:00	«بداية الصيام ١٧:٠٠»
Broke fast 09:00 after 16h	«انقطاع الصيام ٩:٠٠ بعد ١٦ ساعة»
Broke fast after 17h	«انقطاع الصيام بعد ١٧ ساعة»

Note: if you log with the WhatsApp bot, it understands commands in Arabic or English, so write in whichever language is easier for you.

The weekly report

Item	Suggested target
16-hour fasting days	5 to 6 out of 7
Average calories	At target (300 to 500 deficit)
Days protein target met	5 out of 7 or more
Days with 25 g fibre or more	5 out of 7 or more
Cardio minutes	150 minutes or more
Resistance sessions	2 to 3
Longest stretch without exercise	Two days at most
Average sleep	7 to 8 hours

The measure of success: a shrinking waist, a falling fat percentage, and stable or growing muscle. Do not make decisions based on weight alone.

15 After a sleeve or with weight-loss medicines

The same principles can be applied after a sleeve gastrectomy, **with the approval of your treating medical team**, while changing how food is spread out:

- **Protein first at every sitting:** start with meat, fish, eggs or yoghurt.
- **Small, frequent portions**; chew well and stop at the first feeling of fullness.
- **Fluids between meals, not with them:** leave about 30 minutes between drinking and eating.
- **Lengthen the window if you need to:** reaching your protein matters more than the length of the fast.
- Follow your medical team's instructions on eating stages, fibre and everything specific to your situation.

GLP-1 medicines and weight-loss medicines

These are prescribed and monitored by a doctor only, and this guide does not recommend any medicine. With a reduced appetite the principles matter even more: protein and resistance training to keep muscle, fluids and fibre to avoid constipation and dehydration, and telling your doctor before any long fast.

16 Frequently asked questions

Do coffee and tea break the fast?

Without sugar and without milk they add almost no calories and are allowed while fasting. It is best to have your last cup about 8 hours before bed.

The scale has not moved; have I failed?

No. Look at your waist after 3 to 4 weeks. If it has not improved, cut only 100 to 150 kcal.

Should I go above 1.6 g/kg of protein for faster results?

This range is enough for most adults doing resistance training, and going above it comes at the expense of fibre, calories and other foods.

What about Ramadan?

The eating window becomes iftar to suhoor, with the same targets: protein, fibre and a moderate deficit. Light exercise shortly before iftar or two hours after it. Anyone taking medicines should see their doctor before Ramadan.

Is it suitable for women?

Yes, with the medical cautions. Pregnant women should not do intermittent fasting, and breastfeeding women should ask their doctor.

Measurements are affected by the menstrual cycle, so compare at the same phase.

I slipped and went over my target; what should I do?

Close the window and go back to the plan tomorrow. Do not compensate by starving or with a very long fast.

Do I need a gym or to buy anything?

No. Bodyweight exercises at home plus brisk walking are enough to start, and ordinary food is enough to reach your protein and fibre targets.

17 Checklist

Every day

- ☐ I fasted 16 hours (5 to 6 days a week), with my window as early as possible.
- ☐ Protein of 1.2 to 1.6 g/kg completed inside the window, spread over 3 to 4 meals.
- ☐ Fibre 25 to 35 g, and water until my urine is pale.
- ☐ Little added sugar, and complex starches around exercise.
- ☐ A deficit of 300 to 500 kcal, and I did not eat back my exercise calories.
- ☐ I started my meals with vegetables and protein, with starches last.
- ☐ I walked 10 to 15 minutes after meals, and stood for 2 minutes every 30 minutes of sitting.
- ☐ Morning sunlight, and 7 to 8 hours of sleep.

Every week

- ☐ Resistance training 2 to 3 times, and 150 minutes of cardio.
- ☐ No more than two days in a row without exercise.

- ☐ I measured my waist at the navel, on the same day, in the morning before eating.

References

1. Richter EA, Hargreaves M. Exercise, GLUT4, and skeletal muscle glucose uptake. Physiol Rev. 2013;93:993–1017.
2. Cartee GD. Mechanisms for greater insulin-stimulated glucose uptake in normal and insulin-resistant skeletal muscle after acute exercise. Am J Physiol Endocrinol Metab. 2015;309:E949–E959.
3. Jäger R, et al. International Society of Sports Nutrition Position Stand: protein and exercise. J Int Soc Sports Nutr. 2017;14:20.
4. Morton RW, et al. A systematic review, meta-analysis and meta-regression of the effect of protein supplementation on resistance training-induced gains in muscle mass and strength in healthy adults. Br J Sports Med. 2018;52:376–384.
5. Reynolds A, et al. Carbohydrate quality and human health: a series of systematic reviews and meta-analyses. Lancet. 2019;393:434–445.
6. Sutton EF, et al. Early time-restricted feeding improves insulin sensitivity, blood pressure, and oxidative stress even without weight loss in men with prediabetes. Cell Metab. 2018;27:1212–1221.
7. Shukla AP, et al. Food order has a significant impact on postprandial glucose and insulin levels. Diabetes Care. 2015;38:e98–e99.
8. Dunstan DW, et al. Breaking up prolonged sitting reduces postprandial glucose and insulin responses. Diabetes Care. 2012;35:976–983.
9. Buffey AJ, et al. The acute effects of interrupting prolonged sitting time in adults with standing and light-intensity walking on biomarkers of cardiometabolic health. Sports Med. 2022;52:1765–1787.
10. Watson NF, et al. Recommended amount of sleep for a healthy adult: a joint consensus statement of the AASM and SRS. Sleep. 2015;38:843–844.

11. World Health Organization. WHO guidelines on physical activity and sedentary behaviour. Geneva: WHO; 2020.

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Reminder: this is a general guide only, and the author does not give personal medical, nutrition or training advice outside its content. For a personalised plan, see a clinical dietitian and a qualified fitness trainer, and your doctor about any health condition.

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