THE KITCHEN

BREAKFAST SMOOTHIES

Fuad Al-Qudsi, Registered Dietitian Nutritionist

SKIPPING BREAKFAST is not uncommon, especially with busy professionals — not to mention anyone who can't wait to get down to the beach for a brisk stroll with their dogs. Either due to a lack of hunger or a lack of time, breakfast just doesn't happen for many of us anymore. The question is, is this daily decision a mistake? Unfortunately, there's no solid evidence to tell us whether breakfast should be mandatory. There is, however, a good deal of evidence that skipping breakfast could disrupt appetite control and result in weight gain.

So, what's the verdict? Really, it's up to you. To help you decide, you can ask yourself a few questions. Do you have trouble with overeating or controlling your hunger until lunchtime? Do you have educational obligations or a high-demand job that requires a great deal of mental performance early in the day? Do you have concerns about heart health?

If the answer to any of those questions is yes, it would be a good idea to begin prioritizing a good breakfast. The meal doesn't have to be anything fancy — all you really have to do is make sure you have both a good portion of carbs for energy to start your day, and protein to keep you satisfied until lunch.

There are all sorts of foods that can get your day off to a great — and fast — start. Take any of the suggested combinations below, toss them in a blender for a smoothie, and you're ready to go!

Smoothie combos

3/4 cup strawberries 1/2 cup nonfat Greek yogurt 1 tablespoon chia seeds 1 cup milk

or

34 cup strawberries 1/2 cup nonfat Greek yogurt 1 tablespoon chia seeds 1 cup milk

or

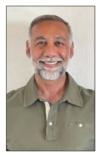
1 cup blueberries 1 scoop chocolate protein powder 1 tablespoon almond butter 1 cup milk

or

1 banana 1/2 cup low-fat cottage cheese 1/4 cup chopped walnuts 1 cup milk



Chef Bio



FUAD AL Qudsi is a registered dietitian and nutritionist and a certified fitness trainer, but above all, he is a food enthusiast at heart. Growing up in Saudi Arabia in a family that loved to cook influenced his connection with what people eat from a young age.

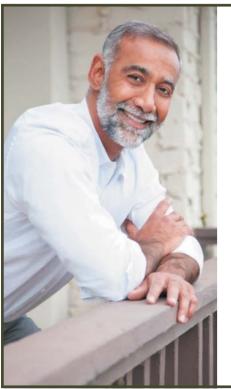
Even though he was interested in food and nutrition, his professional path took a different turn when he obtained a degree in geology and worked as an environmental engineer. Twenty years ago, when he moved to San Francisco, he decided to become a certified personal trainer. His interest in healthy, tasty food grew, prompting him to pursue and acquire a degree in nu-

trition and dietetics.

In the summer of 2020, Al Qudsi relocated from the San Francisco Bay Area to Carmel. He is the founder of FuadFit, a private practice for nutrition counseling with an emphasis on geriatric nutrition.

A TRUE CALIFORNIA OLIVE OIL EXPERIENCE







Transform your New Year's resolution into reality!

Contact me today for a customized nutrition plan tailored for you!

Whether you're looking to lose weight, build muscle, improve your eating habits or all the above... I am here to make it happen!

10% OFF

Nutrition Packages till 2/6/23

Fuad Al Qudsi, RDN, CPT
Registered Dietitian Nutritionist
831.250.5585 | 415.518.2250
fuad@fuadfit.com | fuadfit.com

CASSERLY cont. from page 36A

with me. Then I learned of neuro-otology, essentially ear, nose and throat medicine, and that drew me in."

Ear, nose and throat as a specialty gets into how we interact in the world, said Casserly, who was drawn to the idea of helping patients with hearing, taste and smell. This, it turns out, has enabled him to use more of his neuroscience training than any other specialty might have.

The world of hearing loss has two large, main sub-groups. The first group of people have age-related hearing loss, which affects high-frequency hearing. When people start losing conversations, Casserly said, they turn to hearing aids as a normal part of the aging process.

"Some 50 percent of people age 80 and older have moderate hearing loss, making it appropriate to wear a hearing aid," he said, but not everyone does so. "It carries a stigma of aging and people don't want to feel or look old. Yet they actually seem older when they can't hear or engage in conversations."

For the second type — sensory-neuro hearing loss — Casserly said cochlear implantation is the only restorative intervention available. Introduced in the 1960s, cochlear implants have undergone considerable improvements.

"I did the first cochlear implant surgery here in June 2021," he said. "Now I've done seven, but not alone. I couldn't do it without my audiologists, Dr. Robin Ramsey and Dr. Amanda Lee Scott. Contrary to what we see in the movies, the moment we turn the implant on doesn't mean the patient has perfect hearing. It depends on how long the loss has been present and to what degree. And it takes rehab to adjust to the device."

Long relationship

Now that Medicare and the FDA have begun to understand cochlear implant research, he said, this intervention has become more widely available for patients who are not completely deaf, but who still have a severe loss of hearing.

Casserly grew up in a musical family and, like his wife, played the piano for years, making music and hearing a passion for him.

"I sang in high school and college with the woman who is now my wife. Using that perspective and appreciation for how and what we hear is a big deal," he said.

"A Helen Keller quote I tend to repeat is, 'Blindness separates people from things; deafness separates people from people.' This is a nuance I find so interesting and revealing about hearing, which is subtle and tricky to navigate."