

EXCLUSIVE LIVE WEBINAR

Unlocking the Body's Clock: The Powerful Connection Between Food, Behavior, and Circadian Rhythms

EARN
1.5 CEUs

PRESENTED BY

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January 10, 2024
2-3:30pm ET



Disclosures

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This activity will also award credit for dietetics (CDR CPEU).

Learning Objectives

Describe

Describe the coordinated role played by the central and peripheral biological systems in regulating the body's circadian rhythms.

Define

Define chrono-nutrition and explain why synchronization of the endogenous circadian system with food, behavior (exercise/sleep), and endocrine factors is crucial to health.

Analyze

Analyze the bi-directional interactions between the gut microbiome and host circadian rhythms in influencing metabolism.

Describe

Describe the mechanism by which circadian rhythm misalignment leads to an array of metabolic disruptions.

State

State how and why RDs need to stay on the leading edge of the emerging research on chrono-nutrition to help their patients eat and live healthfully.

The Clock Rules. Time Matters.

What are circadian rhythms?

- Precisely timed endogenous rhythms that adapt our physiology to a rapidly changing external environment
- Critical functions such as behavior, hormone levels, sleep, body temperature, and metabolism
- Nobel prize for medicine in 2017
- Gene controlling circadian rhythms isolated
- Proteins that dictate what functions to carry out at what time of day identified
- A mismatch between the internal time-keeper and the external environment can lead to metabolic disease



Endogenous Clocks Are Autonomous

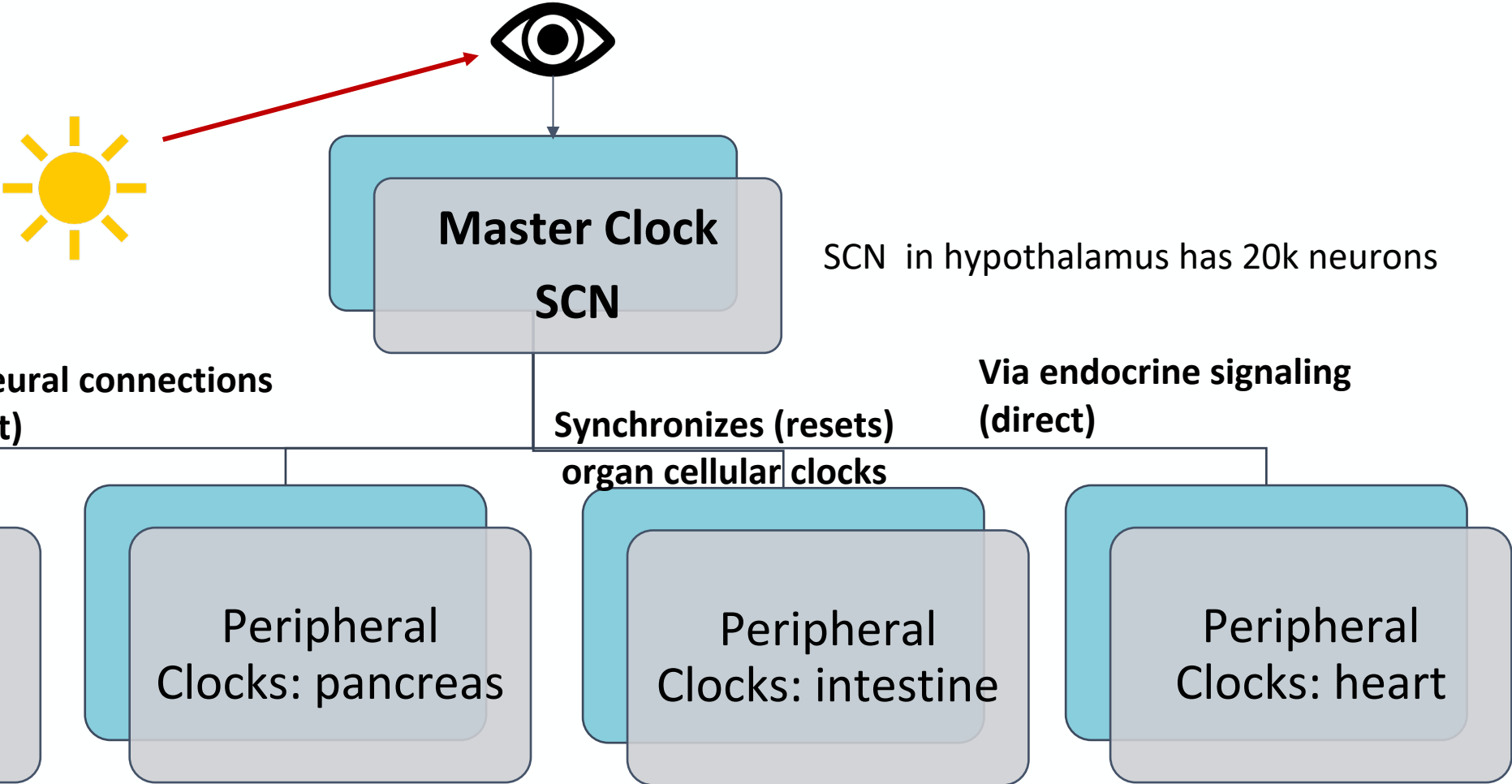


- Night follows day in a predictable rhythm
- Evolution of intrinsic, circadian clocks
 - Regulate our physiology and behavior, synchronizing them to the appropriate time of day
- *Anticipatory* mechanisms that adapt to daily fluctuations
- Autonomous/self-sustaining
- Entrainment to an external input, most notably the light-dark cycle to prevent “drifting”

The Synchronization of the Central and Peripheral Clocks

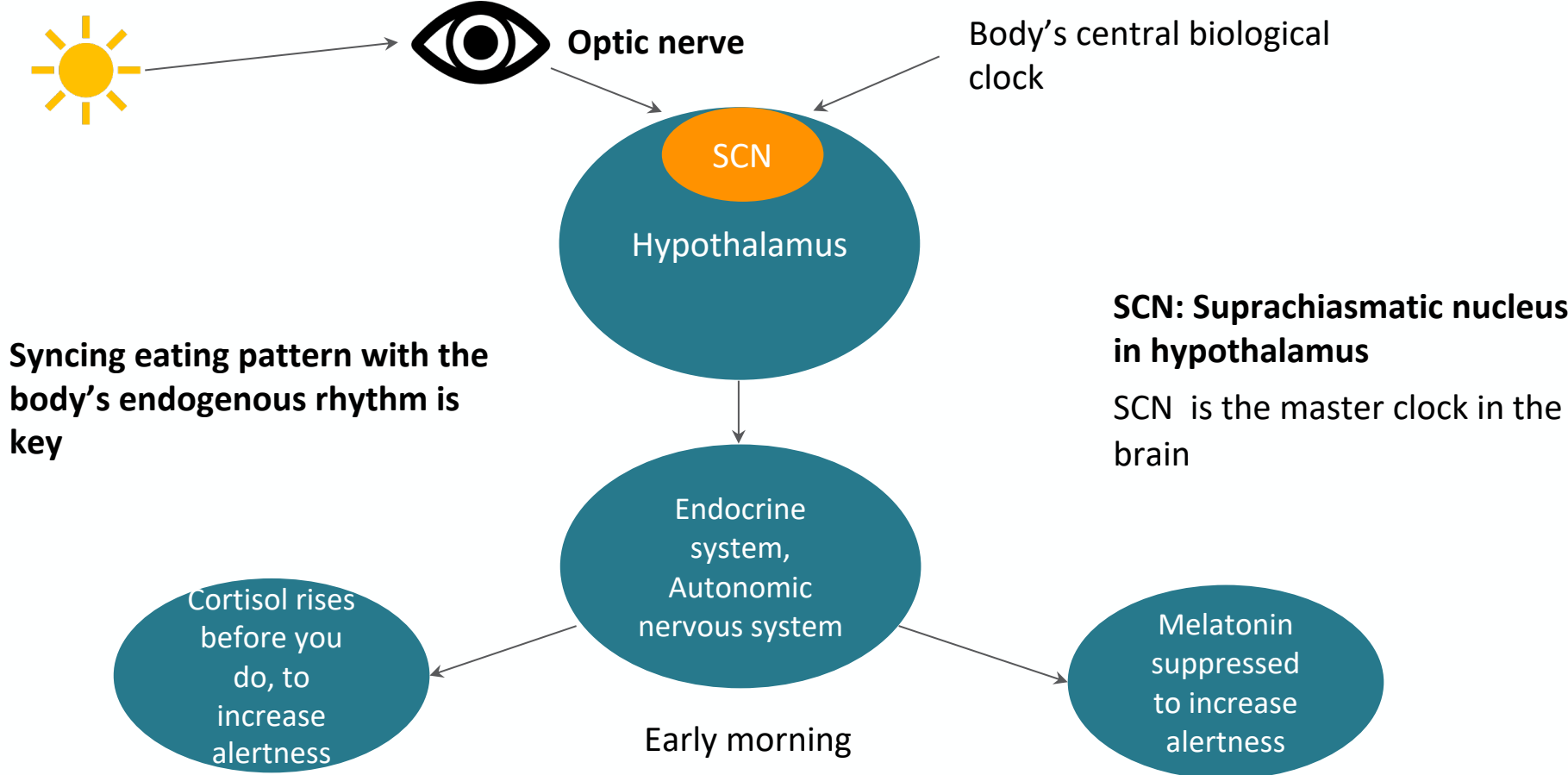
Creates robust circadian rhythms, enhances metabolic health

Once SCN* is Activated with Light, it Signals the Time for Key Functions to the Organ Clocks



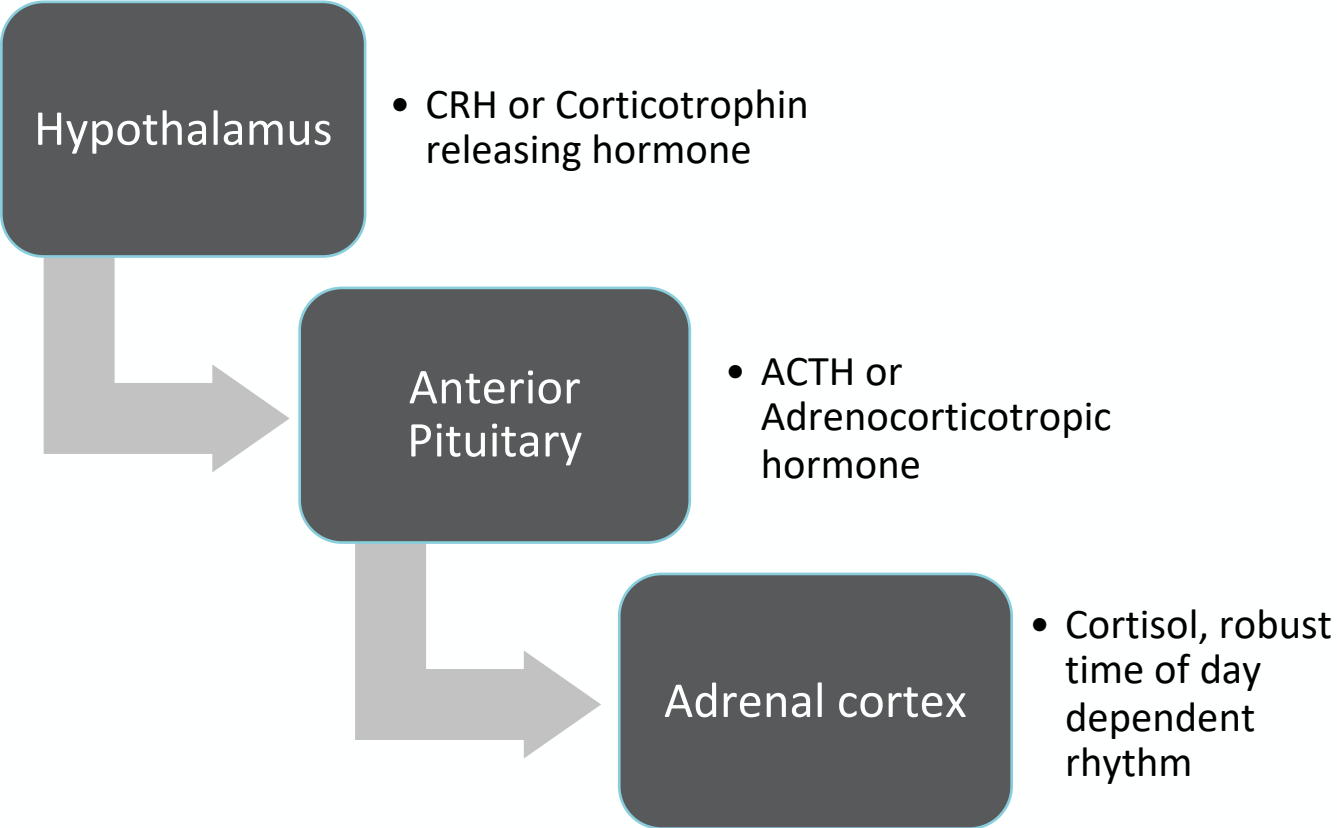
*SCN = suprachiasmatic nucleus
Flanagan A, Bechtold DA, Pot GK et al. *Neurochem.* 2021

SCN Dictates Sleep-Wake Cycle Through Hormonal Release



Adapted from: Zarrinpar A, Chaix A, Panda S et al. *Trends Endocrinol Metab.* 2016

The SCN Controls the Release of Cortisol, a Key Hormone



What are Zeitgebers?

What is Their Significance?

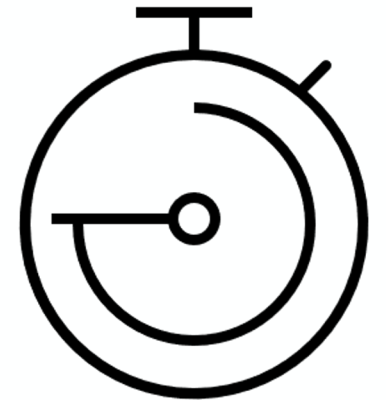
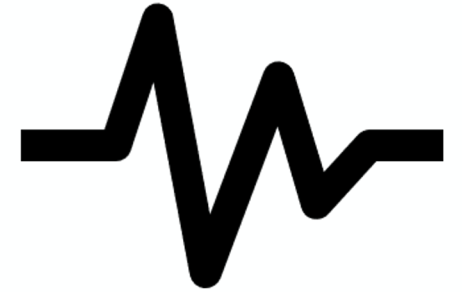
- Literally means “time giver”
- Refers to any **resetting** stimulus from the environment
- **Light** is a universal and potent zeitgeber to the SCN
- **Food timing and schedule** is a potent zeitgeber for non-SCN clocks
- Light indirectly affects peripheral clocks through signals from the SCN
- Feeding behavior resets peripheral clocks without shifting the SCN phase
- This leads to a misalignment between central and peripheral rhythms
- Entraining the master clock daily to the external light-dark cycle to prevent drifting out of phase



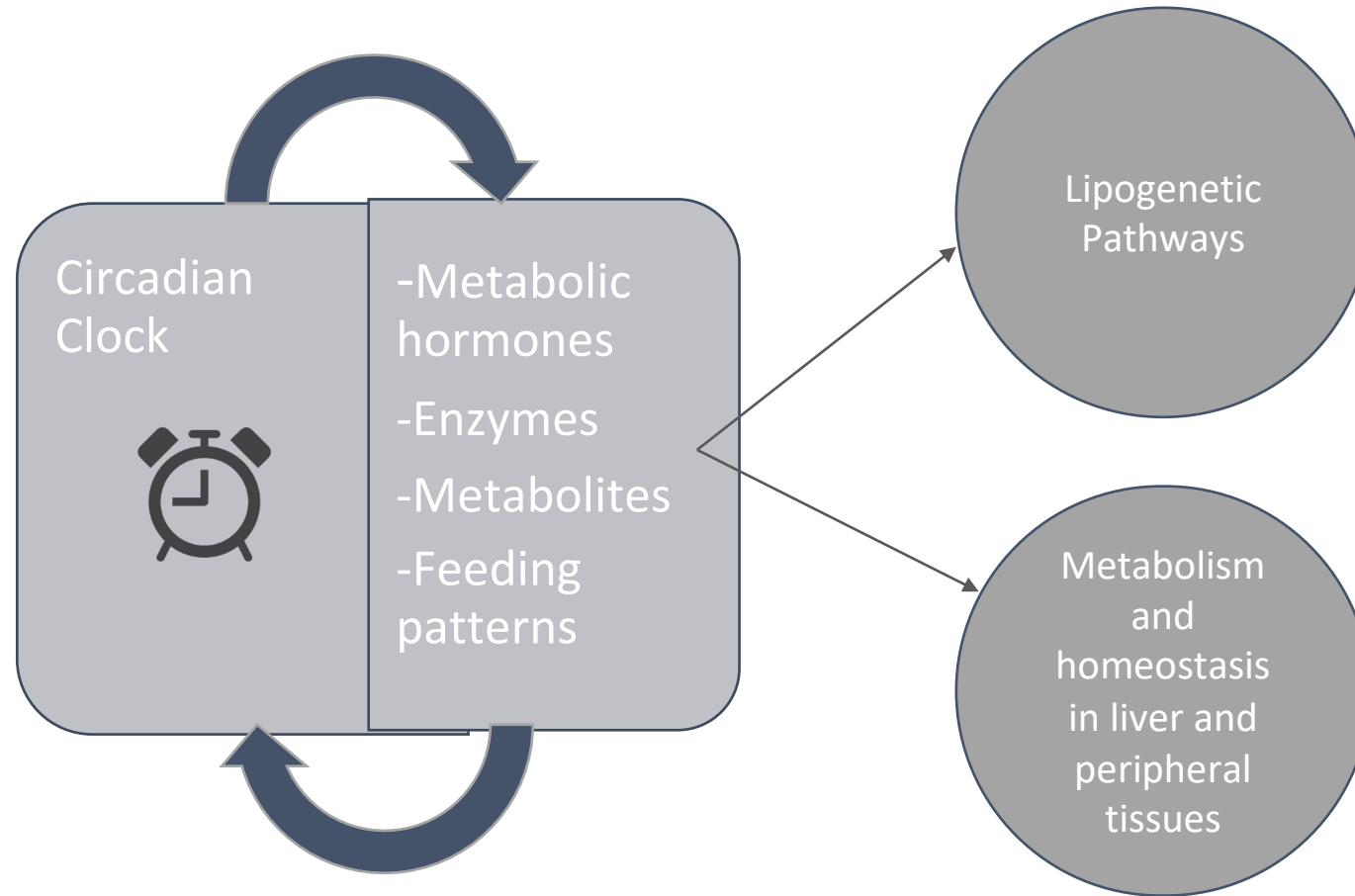
Why Do We Need Circadian Clocks?

Timing is Everything

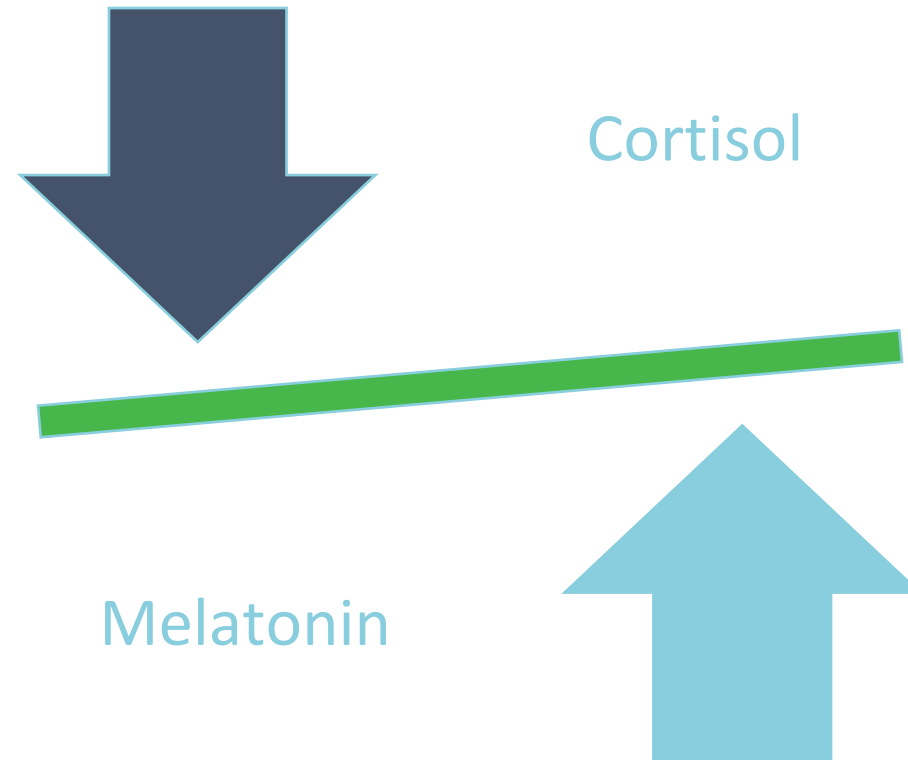
1. The right hormone at the right time!
2. Cortisol and melatonin cannot be secreted simultaneously, as they have opposing functions.
3. Prevents potentially incompatible processes from occurring simultaneously.
4. Endocrine factors oscillate over 24 hours.
5. The SCN is “mission control,” driving the circadian expression of genes, hormones, and enzymes involved in metabolism.
6. Creates an exquisitely-timed circadian rhythm ...unless this is disrupted.



Reciprocal Feedback Loop Between Circadian Clock and Hormones/Enzymes



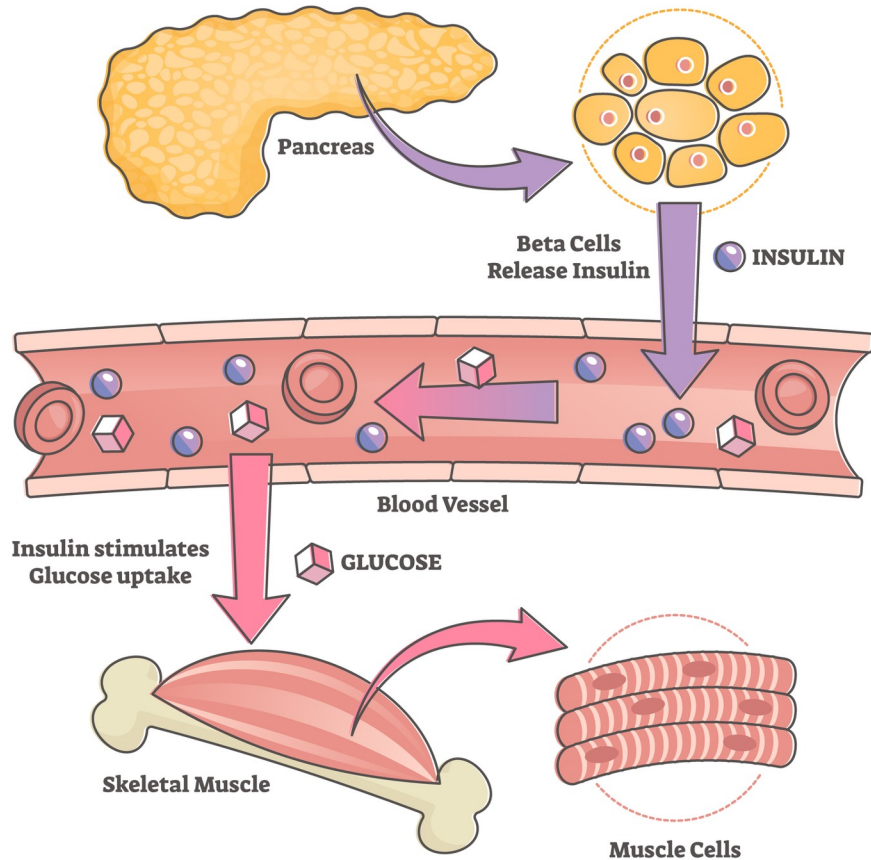
Both Display Diurnal Rhythm, Under SCN Control



Hormone	Time-of-day-dependent Rhythm	Time of Peak	Citation
Cortisol	Yes	0700–0800h	Kalsbeek <i>et al</i> ¹⁶ ; Carroll <i>et al</i> ^β
Growth Hormone	Yes	Pulsatile secretion, with Increased amplitude at night	Avram <i>et al</i> ¹ ; Jaffe <i>et al</i> ²⁰ ; Villadolid <i>et al</i> ²¹ ; Goji <i>et al</i> ²²
Follicle-stimulating hormone (females)	No	NA	Klingman <i>et al</i> ¹⁵³
Testosterone (males)	Yes	0700h	Walton <i>et al</i> ⁵
Prolactin	Yes	0200h (amplitude larger in females)	Freeman <i>et al</i> ⁴
Thyroid stimulating hormone	Yes	0100–0200h	Russell <i>et al</i> ²
Triiodothyronine	Yes	0230–0330h	Russell <i>et al</i> ²
Thyroxine	No	NA	Russell <i>et al</i> ²
Renin-angiotensin-aldosterone system	Yes	Early morning	White <i>et al</i> ¹⁵⁴
Fibroblast growth factor 21	Yes	0500–0800h	Lee <i>et al</i> ¹⁵⁵ ; Yu <i>et al</i> ¹⁵⁶
Ghrelin	Yes	0200–0430h (fed state) 1300h (fasted state)	Koutkia <i>et al</i> ¹⁵⁷ ; Natalucci <i>et al</i> ¹⁵⁸
Adiponectin	Yes	1200–1400h	Scheer <i>et al</i> ⁷ ; Gavrilu <i>et al</i> ²³
Leptin	Yes	0100h	Gavrilu <i>et al</i> ²³
Vasopressin	Yes	Middle of night	Forsling <i>et al</i> ¹⁵⁹
Insulin	Yes	1700h	Goel <i>et al</i> ⁶
Melatonin	Yes	Middle of night	Van Cauter <i>et al</i> ³⁶

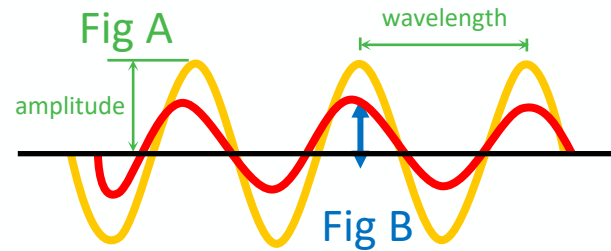
Insulin

INSULIN and GLUCOSE



- Nutrient sensing hormone
- Anabolic, inhibits beta oxidation of fatty acids, promotes fat storage
- Insulin secretion displays a diurnal rhythm in humans, peaking at roughly 1700h
- Insulin sensitivity highest in the am

Leptin Weakening of Rhythms (Amplitude) in Obesity



Leptin weakening of rhythms (amplitude) in obesity

- Leptin, acts to suppress appetite, increase metabolism
- Plasma leptin peaks early in the nonactive phase in diurnal beings
- Under SCN control
- In **obese** subjects, leptin rhythms have a lower amplitude
- The weaker rhythm contributes to leptin resistance and obesity
- Also, loss of feeding rhythms *precedes obesity* in leptin-deficient mice (mutants)
- Desynchronized feeding adversely affect the endogenous rhythm of leptin, leading to weight gain

A collage of various clocks, including analog and digital styles, with some showing internal gears. The clocks are arranged in a dense, overlapping pattern. The central text is overlaid on a semi-transparent white box.

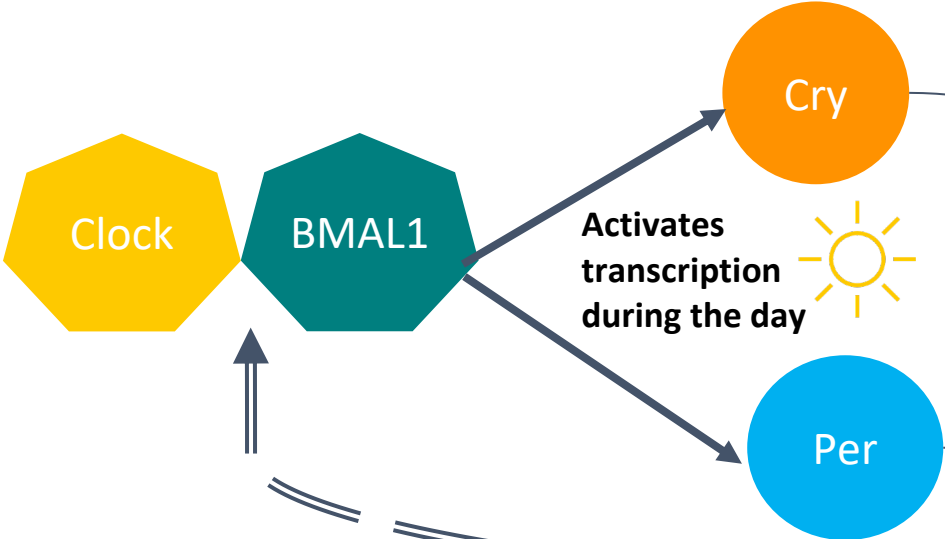
How Do Clocks Work?

Like Clockwork! (At the Molecular Level)

Transcription-Translation Feedback Loop is Key to the Core-Clock Mechanisms

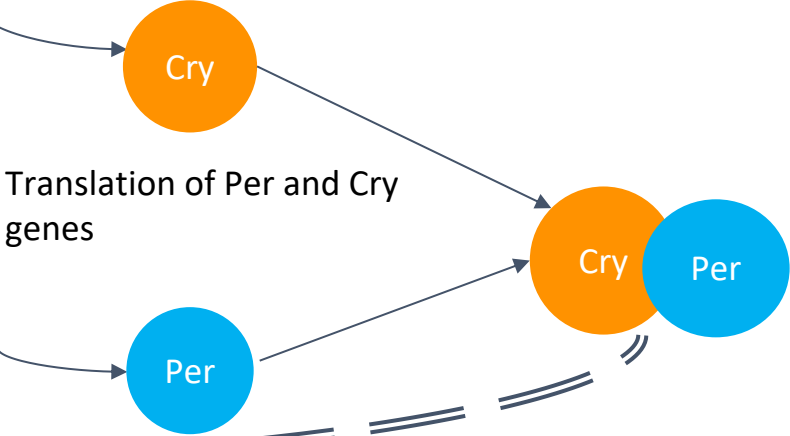
Nucleus


- Clock (transcription factor) dimerizes with BMAL1, another transcription factor



Cytoplasm

- After transcripts of Per and Cry are translated in the cytoplasm, they dimerize and return to the nucleus to inhibit clock and BMAL1



Per and Cry proteins **inhibit their own transcription**,
Per and Cry protein levels fall **at night** 
A new transcription cycle starts the next morning, generating a circadian rhythm



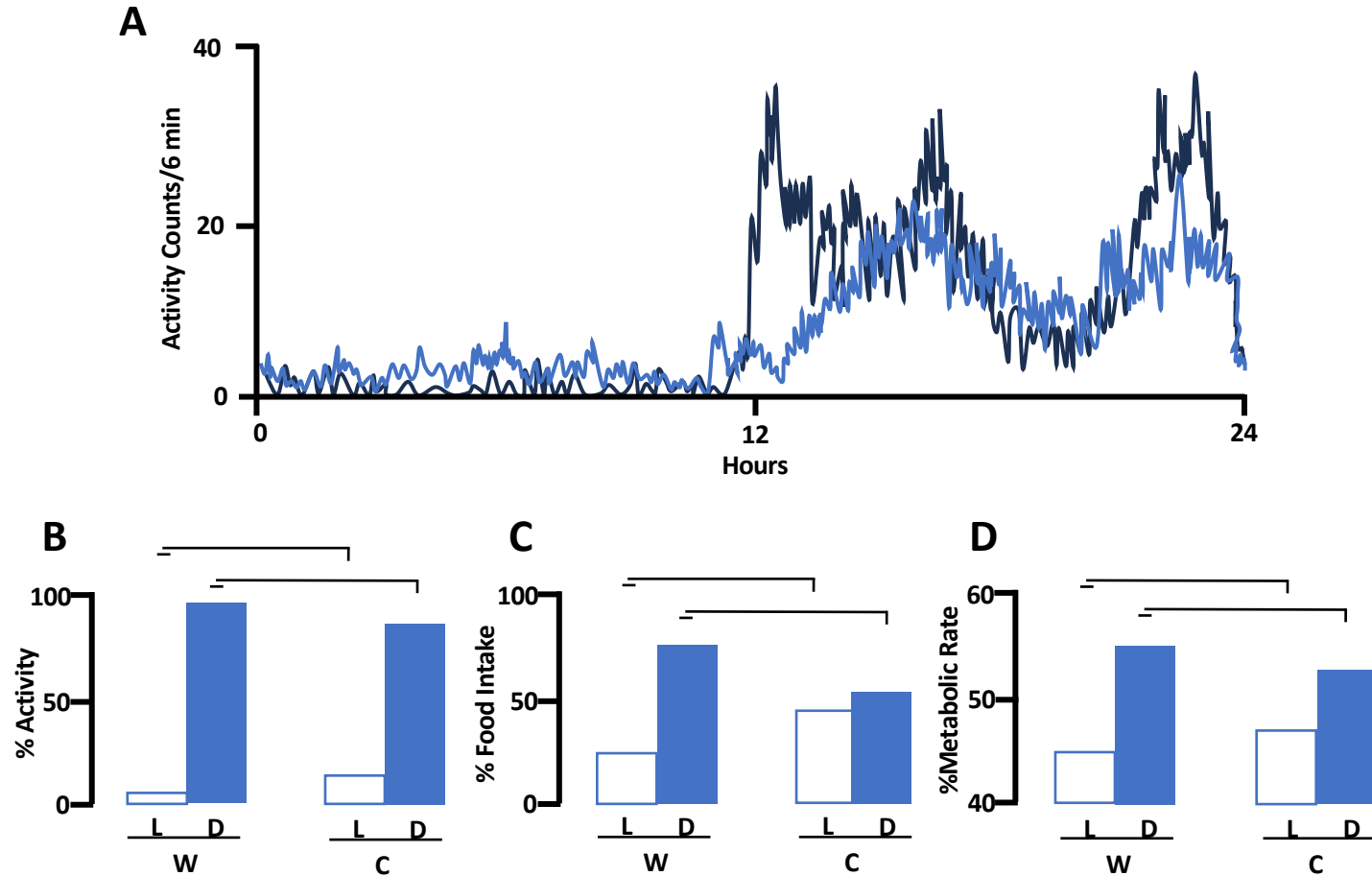
Molecular Basis of the Clock

Are you a morning lark or a night owl?

- The rate at which clock proteins are degraded during a transcription-translation feedback loop determines the length of the circadian cycle
- Quicker degradation at night: shorter cycle: morning lark (advanced phase)
- Slower degradation at night: longer cycle: night owl (delayed phase)



Altered Diurnal Rhythms in Locomotor Activity, Feeding and Metabolic Rate in *Clock* Mutant Mice



Effect of Clock Gene Mutation on Key Markers

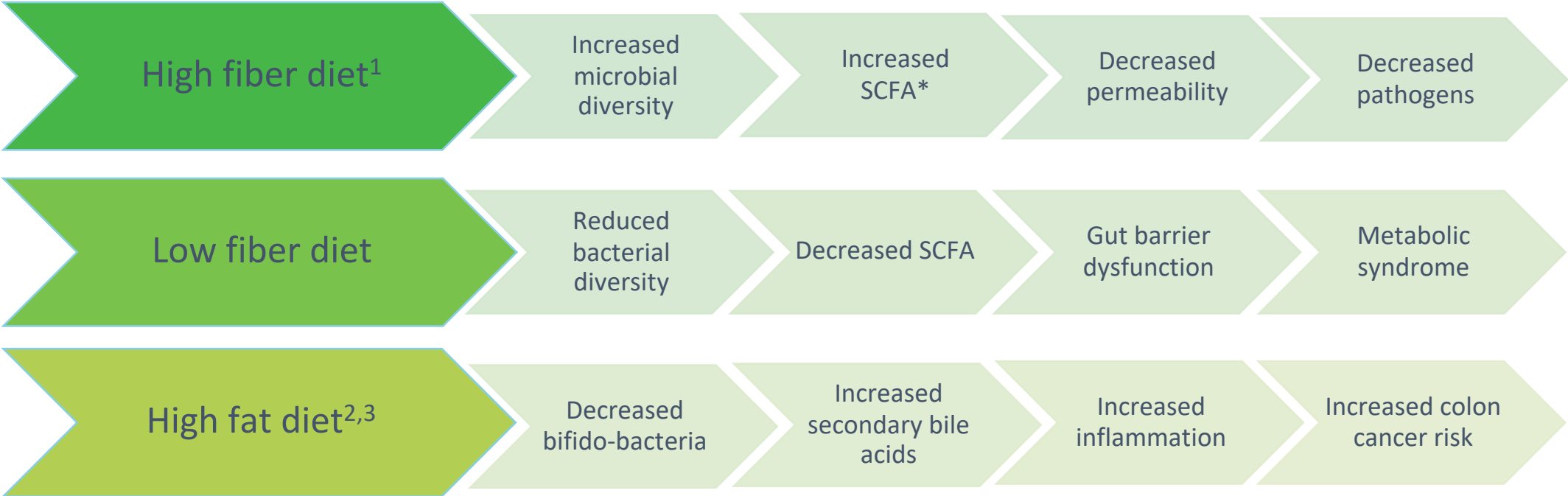
Metabolic parameters	Wild Type	Clock mutant	P value
Triglyceride (mg/dl)	136 ± 8	164 ± 8	P < 0.05
Cholesterol (mg/dl)	141 ± 9	163 ± 6	P < 0.05
Glucose (mg/dl)	130 ± 5	161 ± 7	P < 0.01
Insulin (ng/ml)	1.7 ± 0.3	1.1 ± 0.1	N.S.
Leptin (ng/ml)	3.4 ± 0.4	4.6 ± 0.3	P < 0.05



What Do Gut Bacteria Have to Do with Circadian Rhythms?

Bidirectional Interaction Between Microbiota and Circadian Rhythms

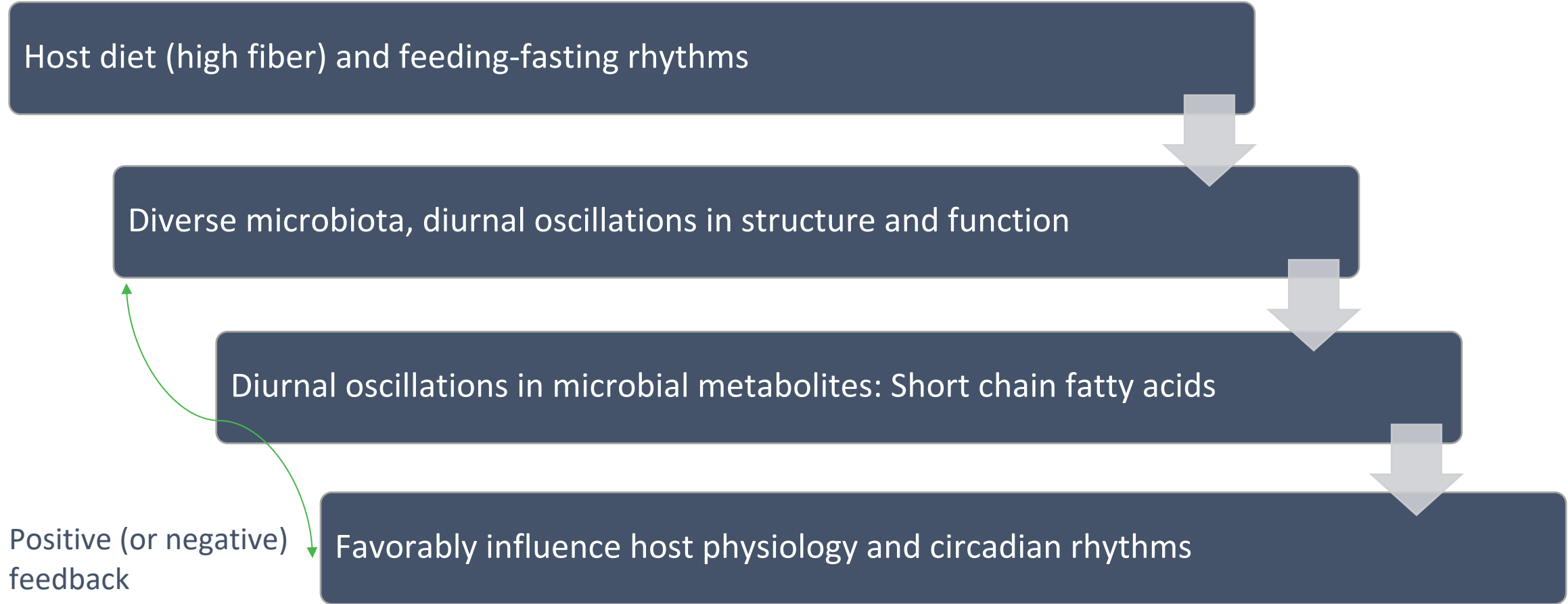
Contrasting Diet Effects



* strengthens intestinal barrier, maintains normal mucosal function

1. Fu J, Zheng Y, Gao Y, Xu W. *Microorganisms*. 2022
2. Murphy EA, Velazquez KT, Herbert KM. *Curr Opin Clin Nutr Metab Care*. 2015
3. Zeng H, Umar S, Rust B et al. *M. Int J Mol Sci*. 2019

Bidirectional Link Between Microbiome and Host Circadian Rhythms

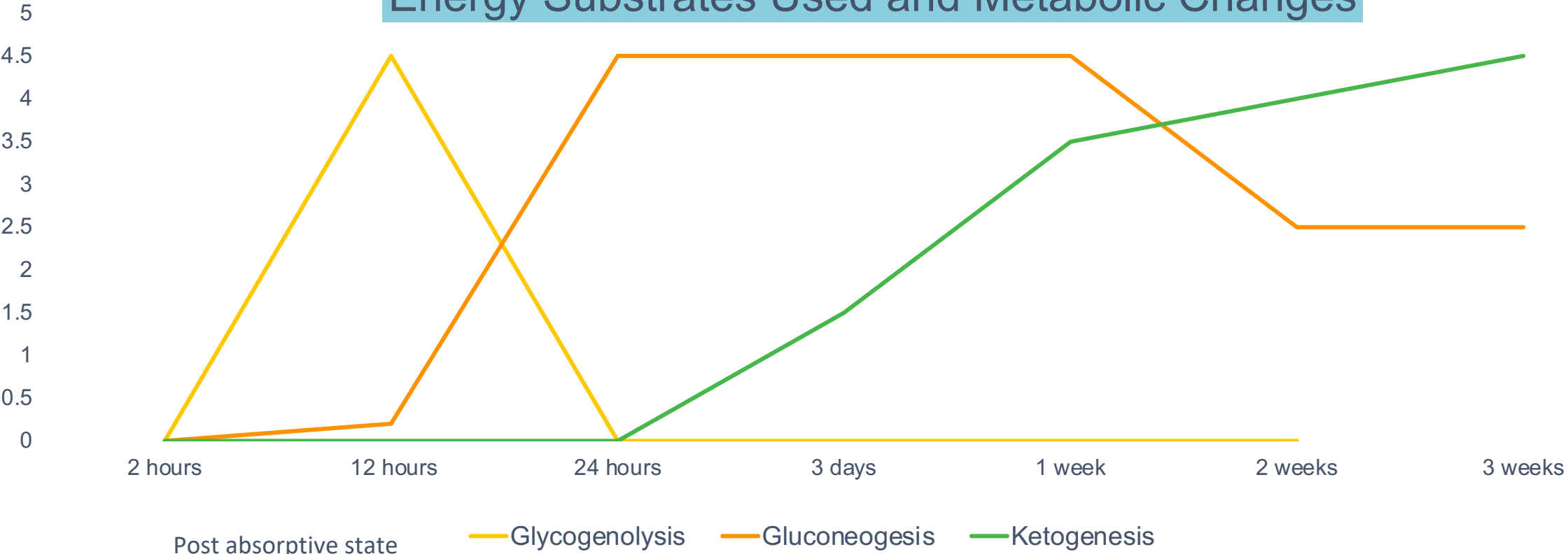


Intermittent Fasting and Circadian Rhythms

How Are They Linked?

Metabolism of Fasting

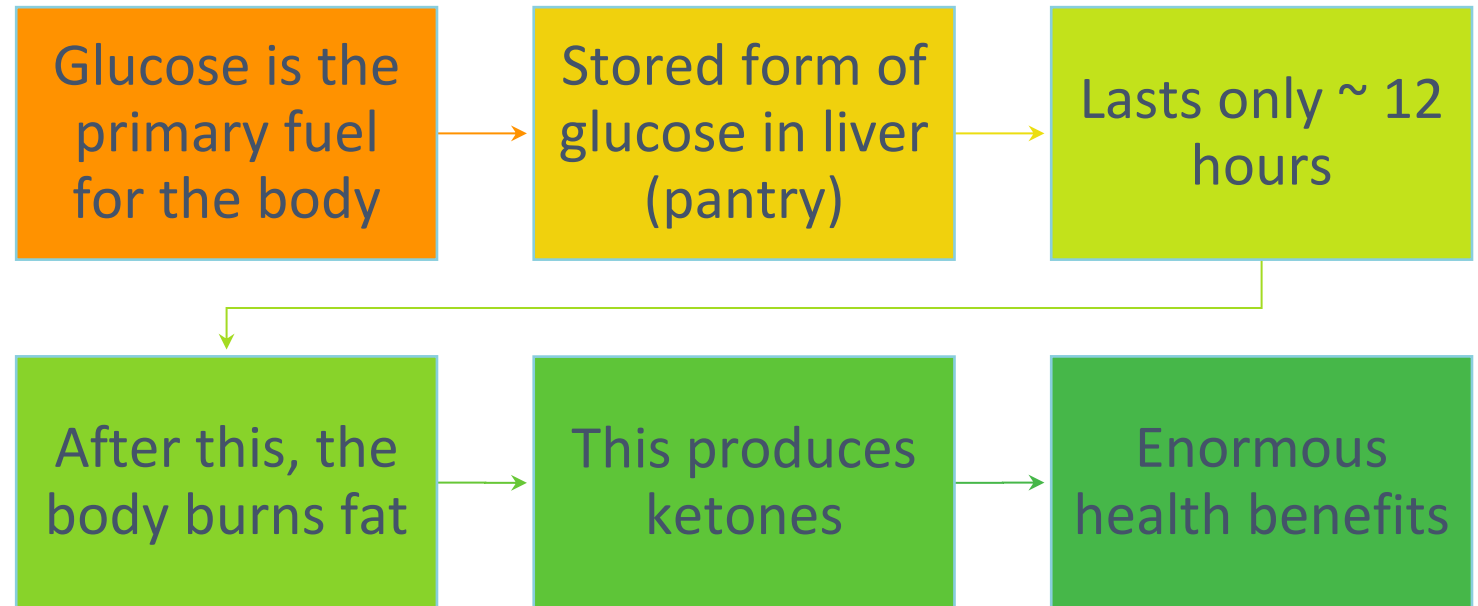
Energy Substrates Used and Metabolic Changes



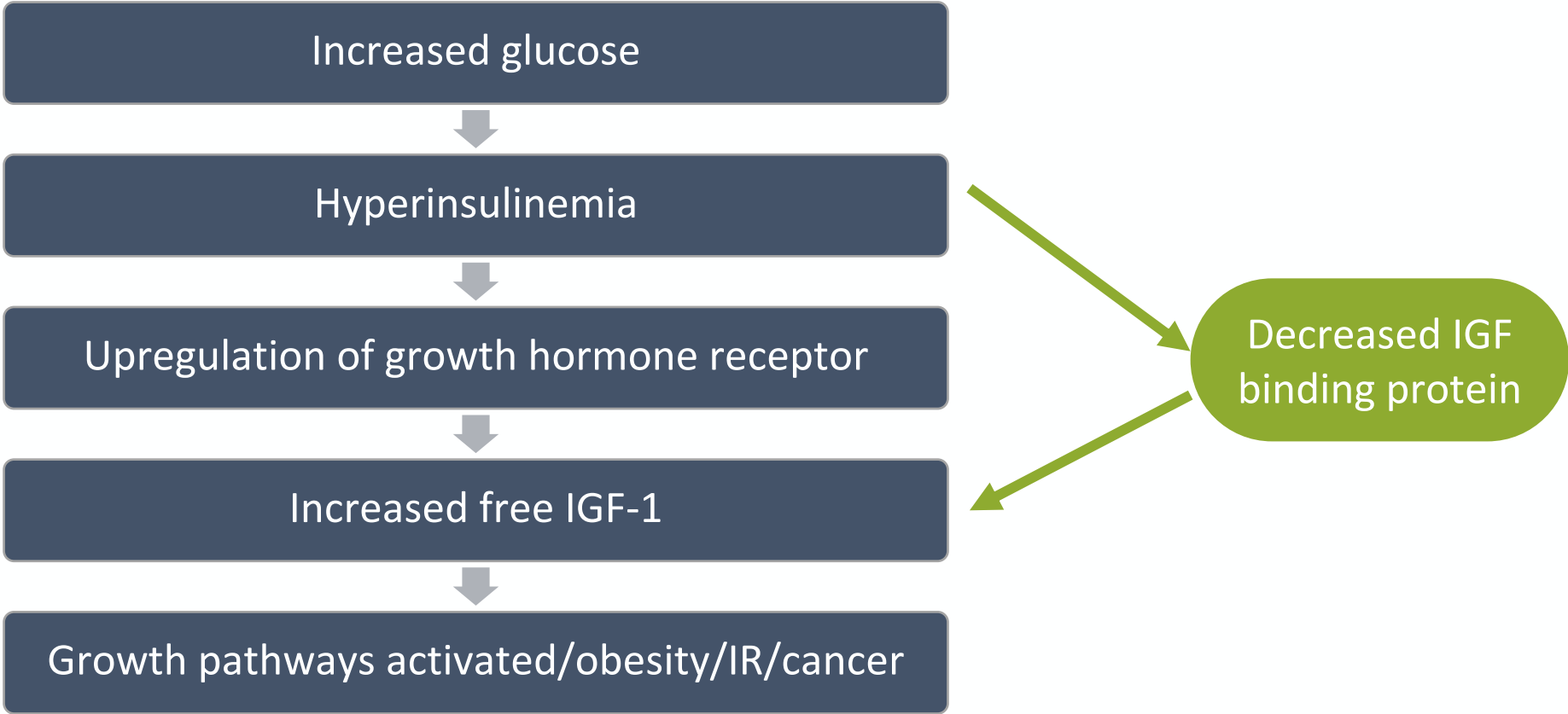
Wang Y, Wu R. *Dis Markers*. 2022
Longo VD, Mattson MP. *Cell Metab*. 2014

Mechanism of Fasting

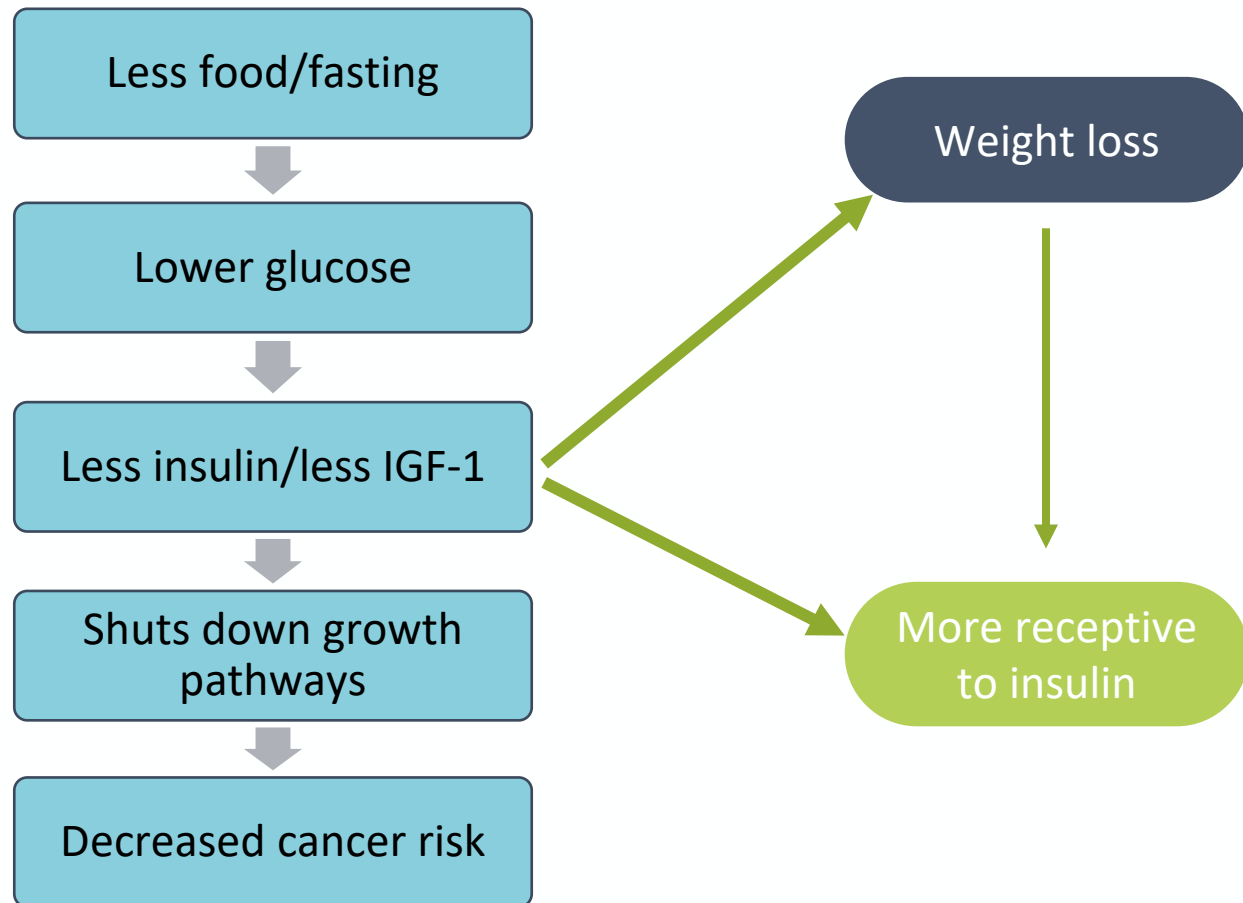
What Happens When We Fast?



Cascade Effect from Excess Glucose/Energy Intake



Fasting is Likely to Shut Down Growth Pathways, Improve Insulin Sensitivity





Fasting is Not a Novel Approach

Ancestors lived off ketones in a fasted state

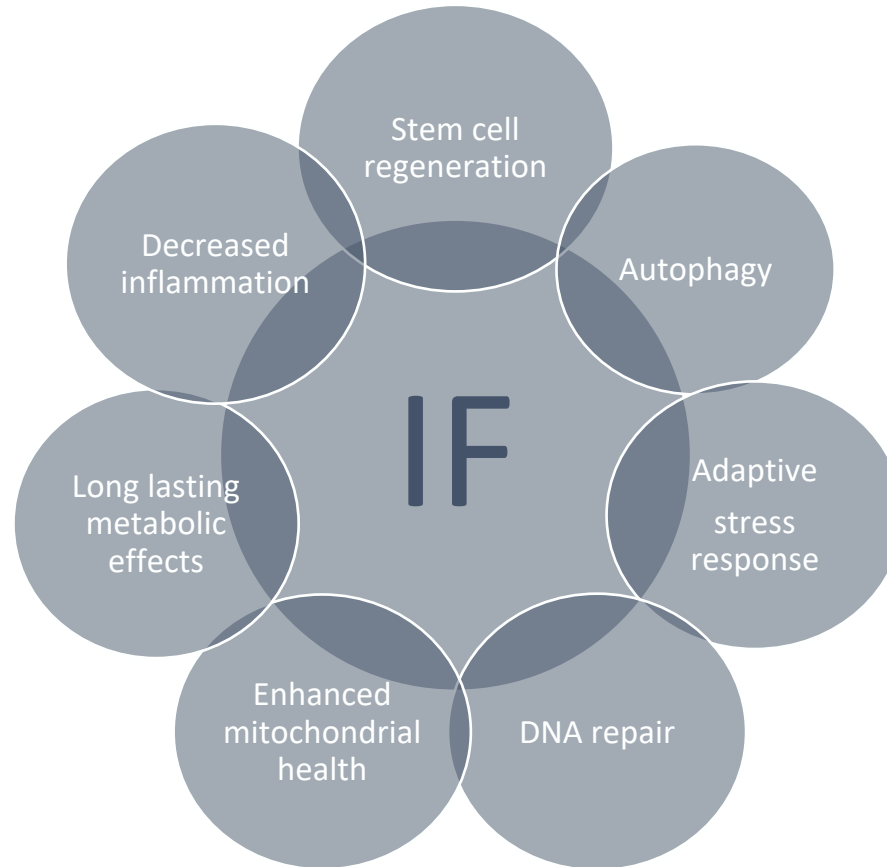
When Less is More: Fasting Physiology is Ingrained in Our Genome

- Nutrient deprivation increases longevity
- Primitive forms to complex, higher life forms
- Yeasts deprived of nutrients will arrest growth
- Repeated exposure to fasting: lasting adaptive, protective responses in mammals today



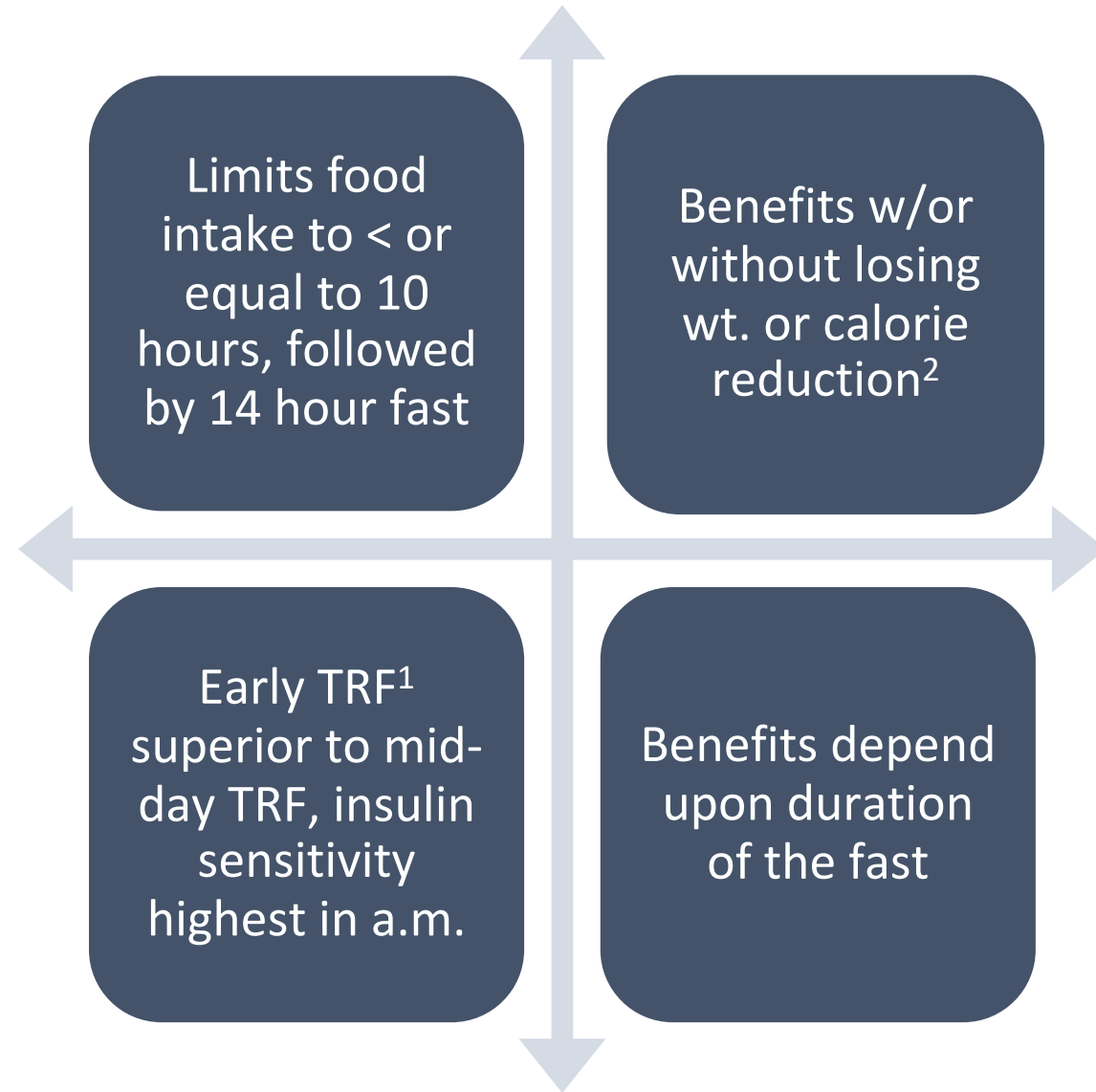
Intermittent Fasting (IF) and Calorie Restriction

Building the Cell's Arsenal



What is Time Restricted Feeding?

Human Studies



1. Xie, Z., Sun, Y., Ye, Y. et al. *Nat Commun.* 2022
2. Sutton EF, Beyl R, Early KS et al. *Cell Metab.* 2018

Time Restricted Feeding, or TRF

1. TRF is well-tolerated
2. May lead to an average of 20% unintentional reduction in caloric intake.
3. TRF may have additional benefits beyond calorie restriction:
 - Improves insulin sensitivity
 - Improves Metabolic markers
 - Systolic blood pressure, HbA1c, fat mass and triglycerides, even in calorie matched conditions
 - Better adherence, decreased appetite compared to simple calorie restriction



What Do the Longer-Term Studies Show? (A Mixed Bag)

- The long-term efficacy and safety of TRF for wt. loss are not clear
- Randomized trial w/ 139 patients with obesity
- One group underwent TRF (eat between 8:00 a.m. and 4:00 p.m.) or daily calorie restriction alone x 12 months
- The primary outcome: change in weight from baseline
- 12 months was -8.0 kg in the TRF and -6.3 kg in the calorie-restricted group = statistically not significant
- Secondary outcomes: waist circumference, BMI, body fat, and measures of metabolic risk factors were not statistically significant
- TRF was not more beneficial than daily calorie restriction, but other studies have refuted this



RCT comparing e-TRF with M-TRF in Healthy, Non-Obese Folks

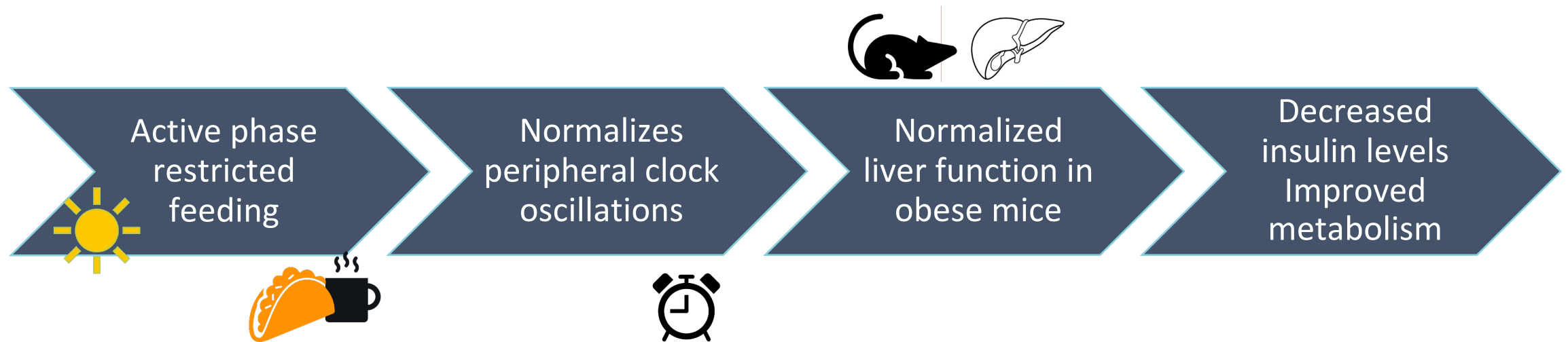
- 5-week RCT comparing eTRF (6 am-3 pm), with mTRF (11 am-8 pm), and a control (ad lib eating)
- Primary outcome: Greater insulin sensitivity in e-TRF vs m-TRF $p < 0.001$
- eTRF, but not mTRF:
 - Improved FBG, reduced total body and fat mass, decreased inflammation, increased gut microbial diversity
 - Improved metabolic outcomes could be related to circadian rhythms
 - First trial to show that eTRF is superior to mTRF by directly comparing the two
 - Several limitations: Sample size, non-blinded participants
 - The specific timing and duration of their meals varied within each group, which may skew results.
- In a 10 hr TRF x 12 weeks, (n=19), fat loss, improvement in lipids, A1C and BP seen in subjects with Metabolic syndrome



TRF and Circadian Rhythms

- Restores the primordial response in feed-fast cycle
- When limited to the **active** phase of the circadian cycle
- Diet-induced obesity dampens the daily feeding/fasting rhythm
- TRF restricted to the active phase partially restores these rhythms
- Corrects impaired clock gene expression from desynchronized feeding
- Resetting the circadian clock can lead to increased life span

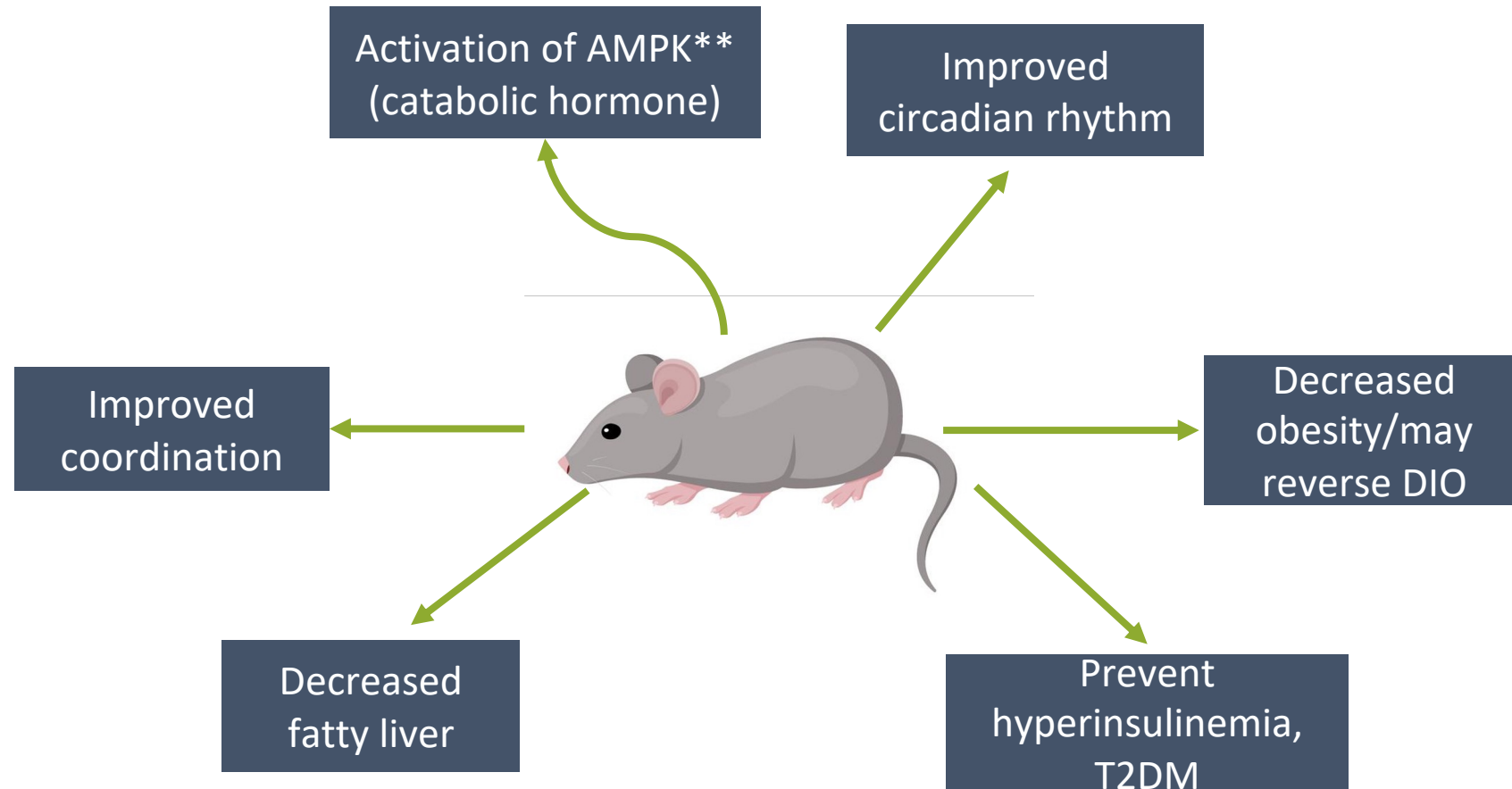
TRF Entrains the Circadian System to Improve Cardiometabolic Parameters



How Does Circadian Rhythm Disruption Cause Metabolic Disease?

And, How Do We Mitigate This?

DIO* Dampens Rhythms: TRF Helps Prevent or Reverse Metabolic Disease



*DIO = Diet-induced obesity (usually from a high fat diet)

**AMPK = Adenosine Monophosphate-Activated Protein Kinase

Rothschild J, Hoddy KK, Jambazian P et al. *Nutr Rev.* 2014

Chaix A, Zarrinpar A, Miu P, Panda S. *Cell Metab.* 2014

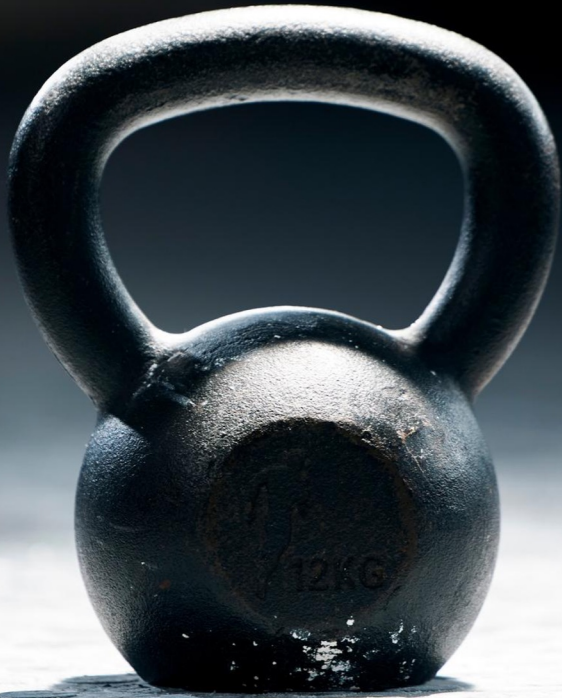
Jakubowicz D, Barnea M, Wainstein J et al. *Obesity (Silver Spring).* 2013

Gil-Lozano M, Mingomataj EL, Wu WK et al. *Diabetes.* 2014

Poll Question

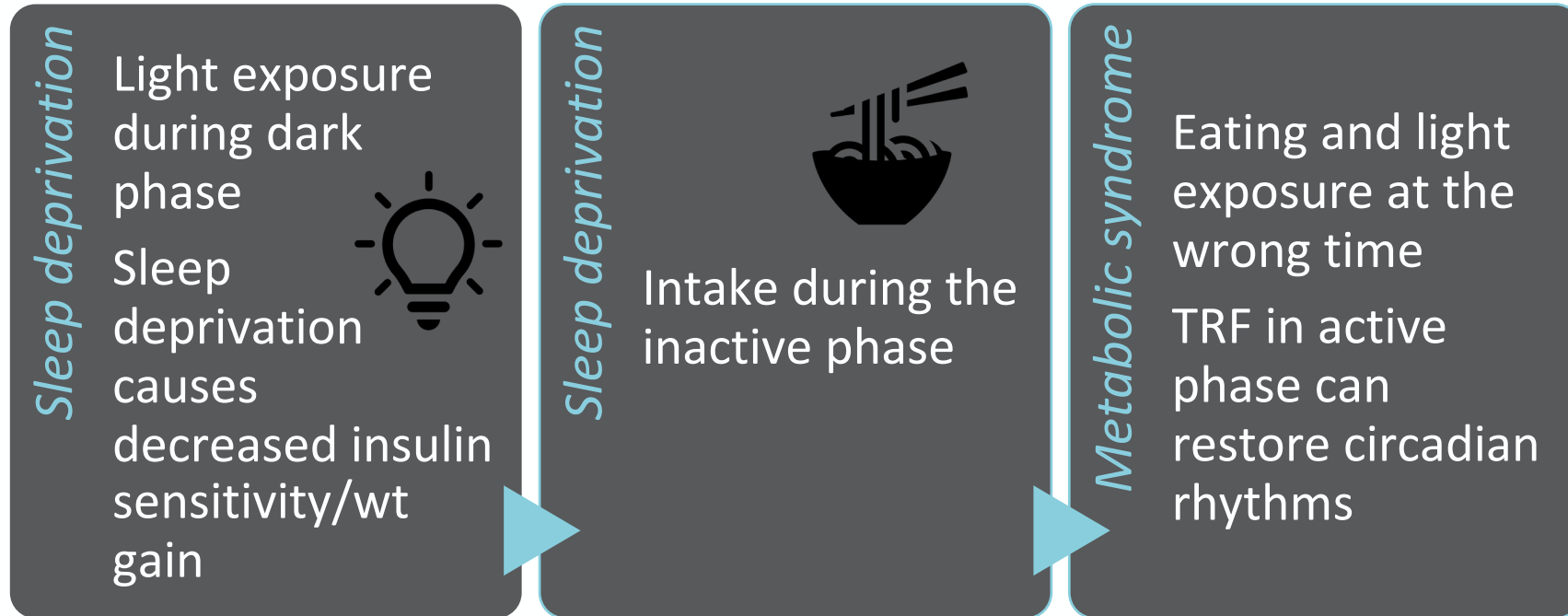
The best time to exercise from a circadian rhythm standpoint is:

- A. Around 7-9 a.m.
- B. 11 a.m.
- C. 2 p.m.
- D. 5 p.m.

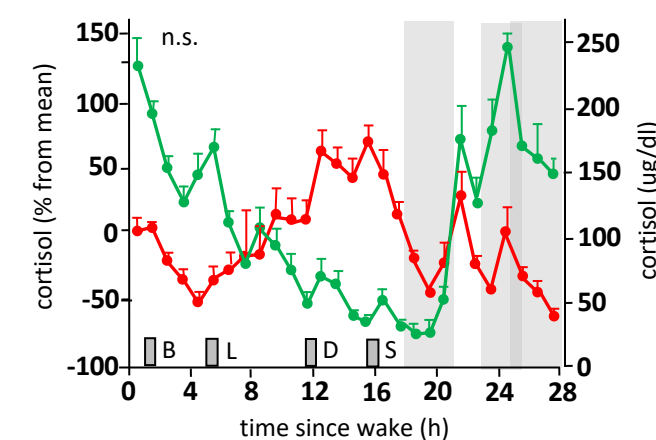
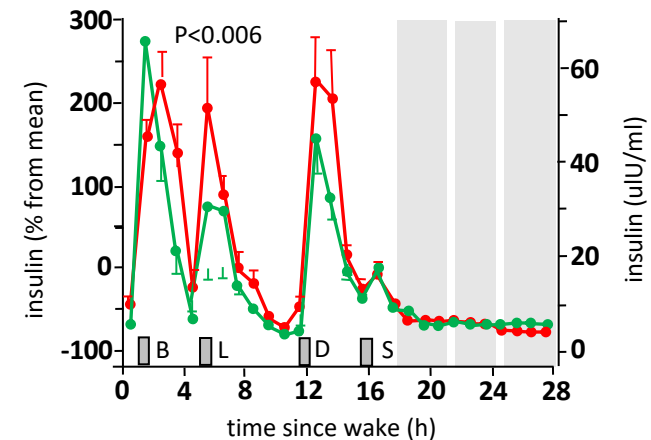
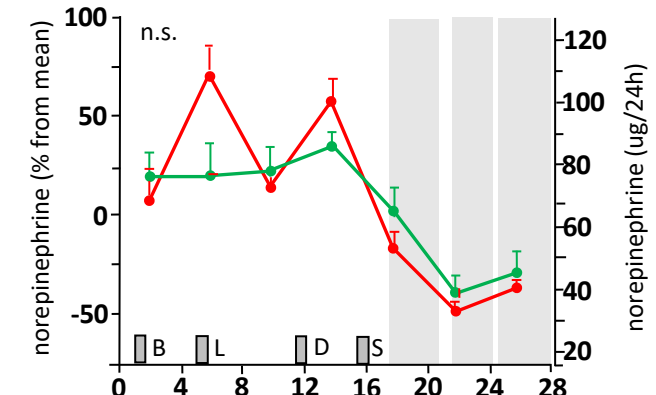
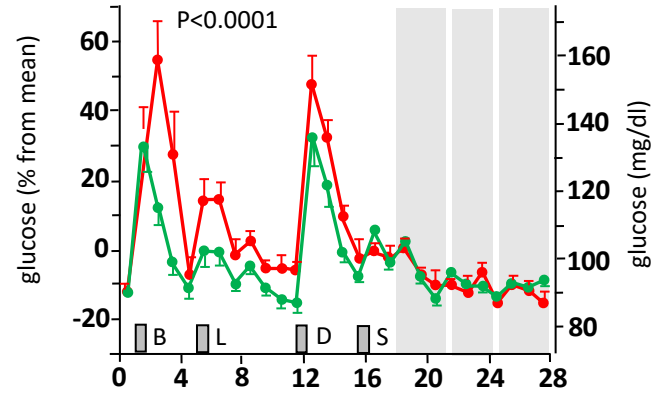
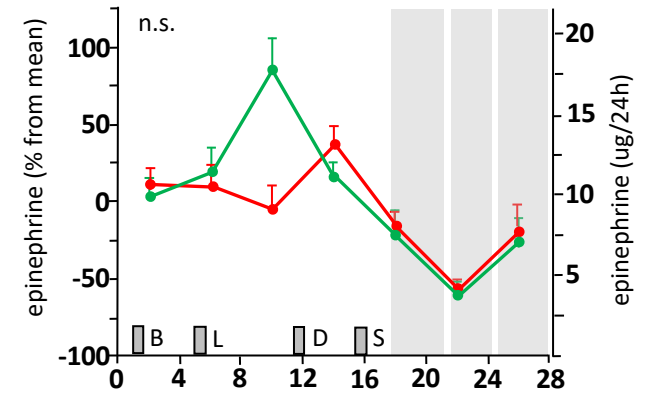
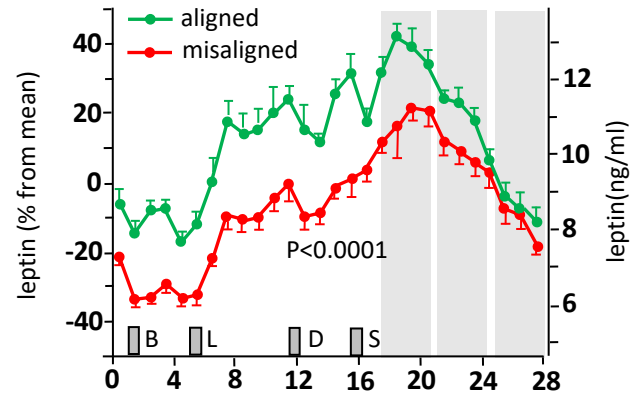


What's Common Between Shift Work and Jet Lag?

What we do when we're awake at the wrong time, matters

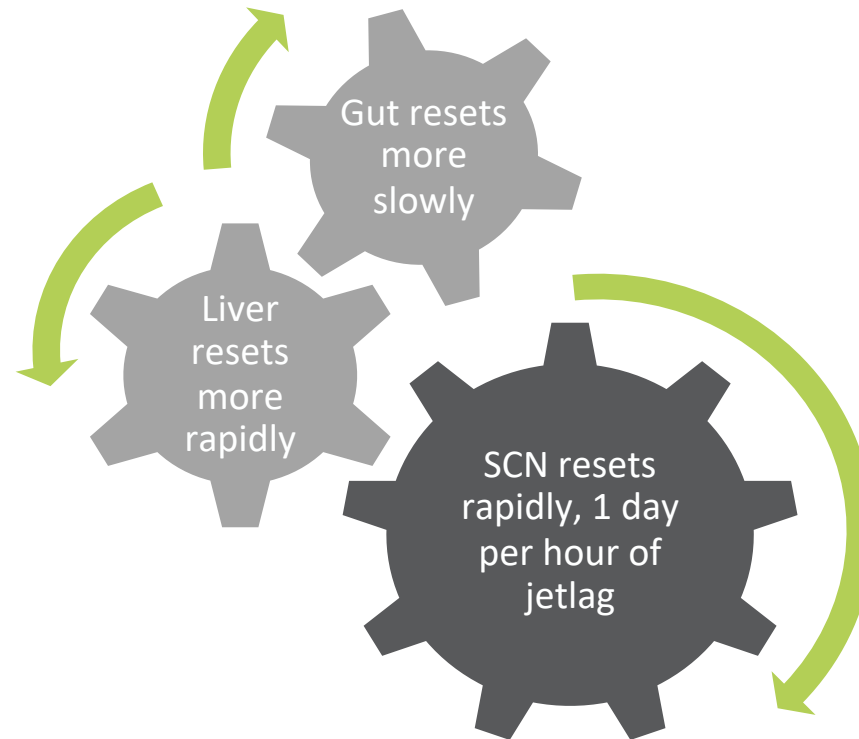


Consequences of Circadian Misalignment on Metabolic, Autonomic, and Endocrine Function



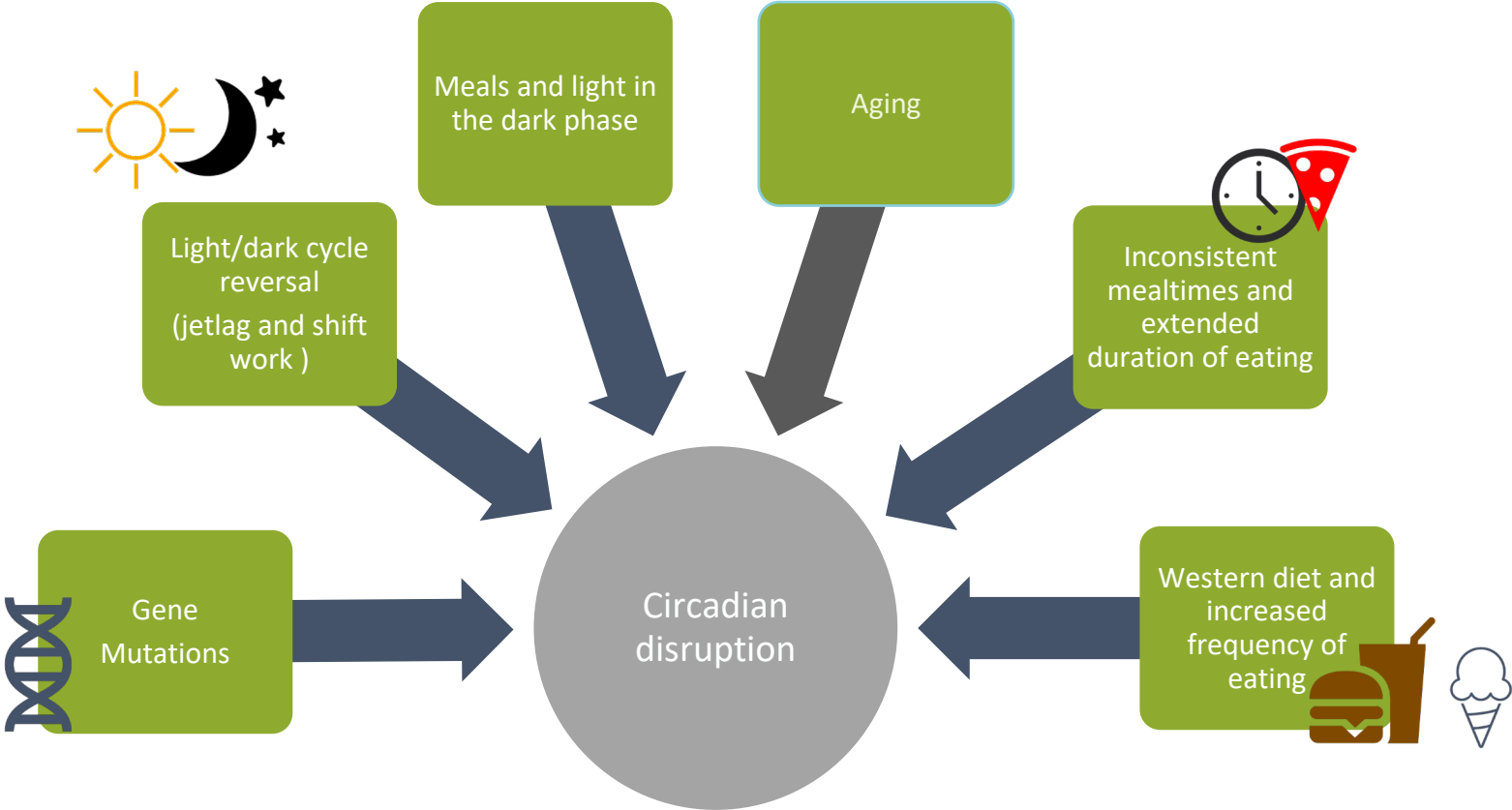
Jet Lag and Shift in Peripheral Clocks in Rest Phase Feeding

In response to a change in the light/dark (LD) cycle, intrinsic clocks reset at varying rates causing desynchrony



Common Circadian Disrupters

Some of these cause an altered microbiota

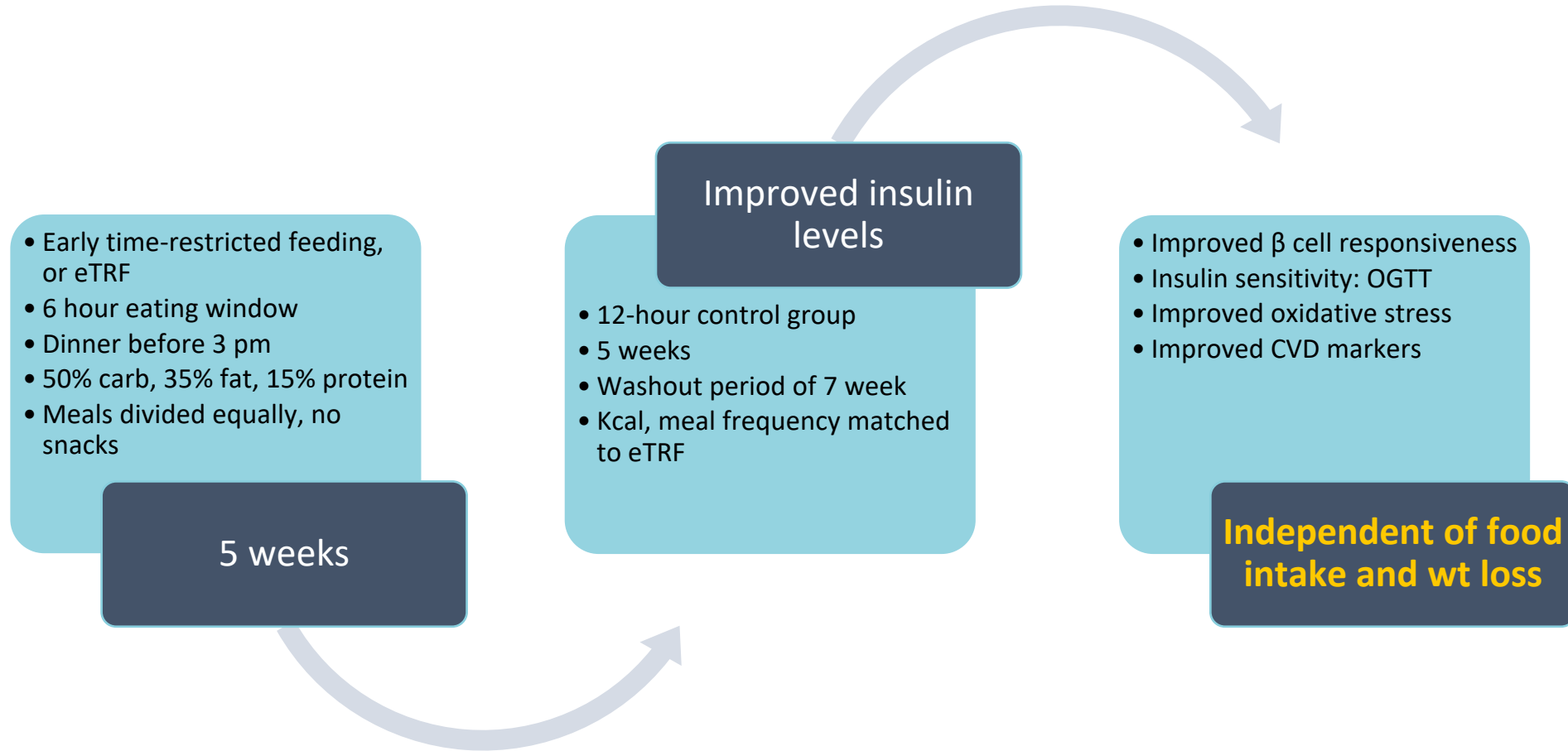




Studies in Humans

Circadian Clock and Energy Homeostasis

First Rigorous RCT in Men with Prediabetes *Combining IF with Circadian Rhythms - eTRF*



Impact of High-Energy Breakfast (B-diet) on Glucose Levels

- In a randomized, crossover design, 18 individuals with T2D treated with metformin and/or diet were given either Bdiet or Ddiet* for 7 days.
- High energy intake at breakfast (Bdiet) was associated with significant reduction in overall PPBG in diabetic patients over the entire day compared to the reverse diet (Ddiet)

*Ddiet = low energy breakfast and high energy dinner



Bdiet: A Useful Tool Against Obesity and Metabolic Syndrome?

- **Objective:** Compare a weight loss diet with high caloric intake during breakfast to an isocaloric diet with high caloric intake at dinner
- **Design and methods:** Overweight and obese women (with metabolic syndrome) were randomized into two isocaloric (~1400 kcal) weight loss groups, x 12 weeks
- **Results: Both groups lost weight, however, in the BF group:**
 - Greater weight loss and waist circumference reduction
 - Significant decrease in fasting glucose, insulin, and HOMA-IR
 - Mean TGs decreased by 33.6% in the BF group but increased by 14.6% in the D group
 - Insulin, ghrelin, and mean hunger scores were significantly lower, whereas mean satiety scores were significantly higher in the BF group



Circadian Variations in the Energy Expenditure and Metabolic Pattern of Healthy Individuals

- Twenty healthy subjects were enrolled in an RCT
- Randomly received the same standard meal in the morning and, 7 days after, in the evening, or vice versa
- RMR significantly increased after the morning meal ($P < 0.001$)
- Delayed and larger increases in glucose and insulin concentrations after the evening meals for the same meal



A Few Pooled Studies:

Authors	Year of publication	Participants	Main finding	Ref. no.
Sakai et al. ³⁷	2018	Men and women Type 2 diabetics	Late-night dinner independently associated with poor glycaemic control	<u>37</u>
Kajiyama et al. ⁴⁹	2018	Young women Healthy	Late-night dinners increased postprandial hyperglycaemia Consuming dinner dividedly ameliorate postprandial glucose levels	<u>49</u>
Imai et al. ⁵¹	2017	Men and women Type 2 diabetics	Late-night dinners increased postprandial hyperglycaemia	<u>51</u>
Van Cauter et al. ⁴⁶	1992	Men and women Healthy	For identical mixed meals, total and 2-h AUC were 25–50% greater in the evening than in the morning	<u>46</u>
Jakubowicz et al. ⁵⁷	2013	Women Overweight and obese metabolic syndrome (BMI: 32 kg/m ²)	High-energy breakfast and reduced-energy dinner significantly reduces postprandial glycaemia in obese non-diabetic individuals	<u>57</u>
Jakubowicz et al. ⁵³	2015	Men and women Type 2 diabetics	High-energy breakfast and reduced-energy dinner significantly lowered postprandial glycaemia	

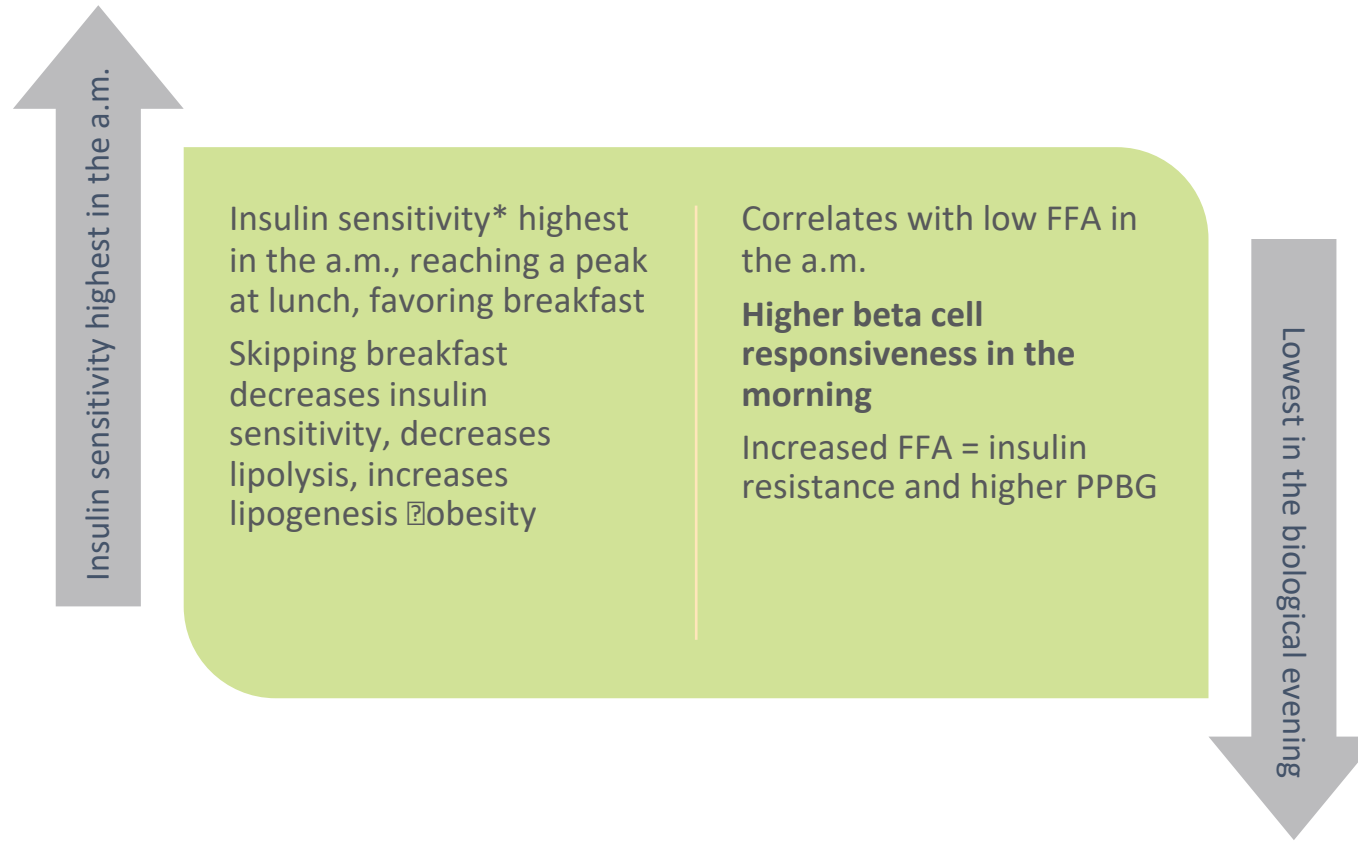
What Do the Pooled Studies Tell Us ?

- Skipping breakfast strongly correlates with IR (insulin resistance) and T2DM¹
- In patients w/T2DM, who were later chronotypes and skipped breakfast, higher A1c values seen
- Results were independent of age, sex, race, BMI, number of diabetes complications, insulin use, depressive symptoms, perceived sleep debt, and percentage of daily caloric intake at dinner



Summary of Glucose Metabolism

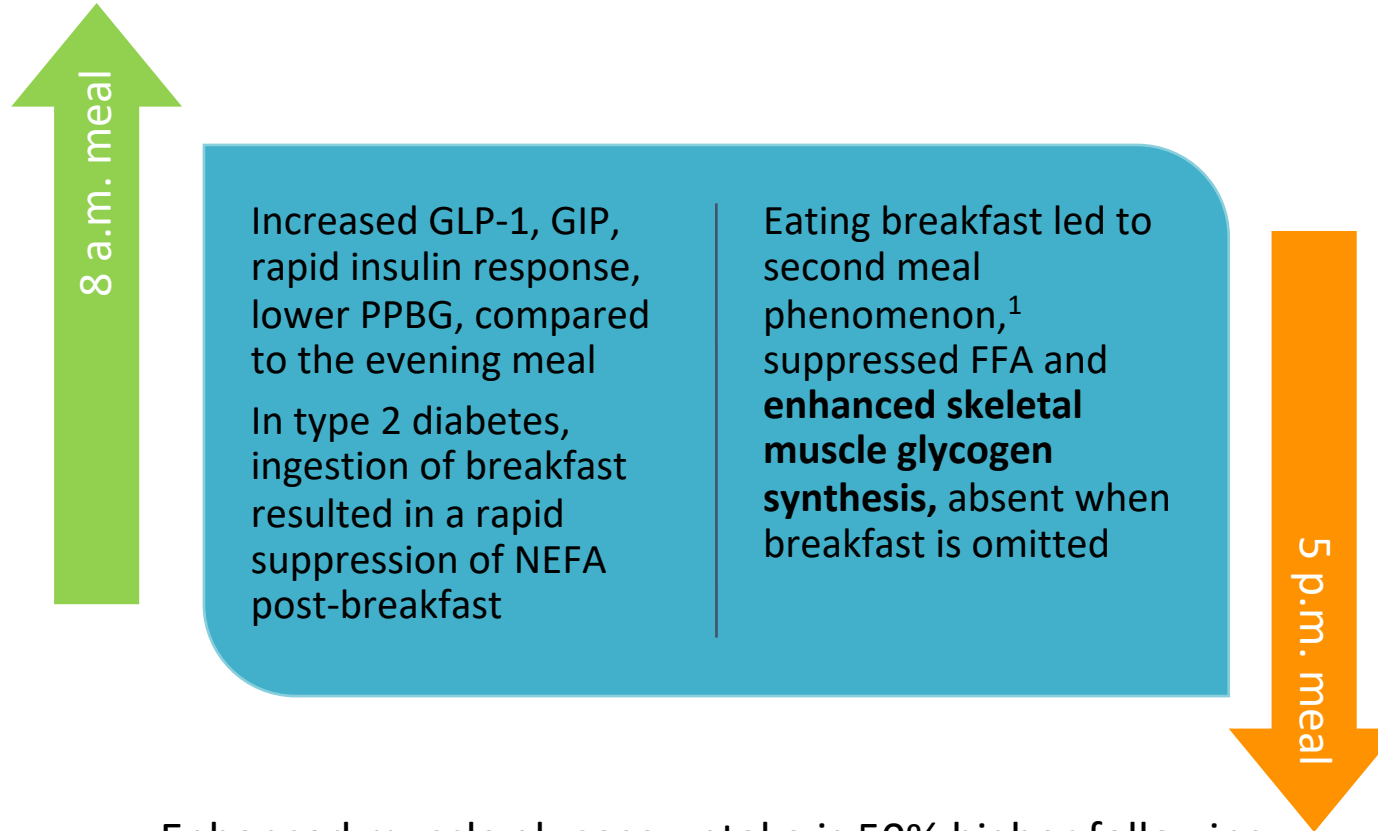
Comparing Isocaloric Meals of Identical Macronutrient Composition Consumed at 8 a.m. and 5 p.m.



*in subcutaneous tissue



What is the Second Meal Phenomenon?



Enhanced muscle glucose uptake is 50% higher following breakfast compared to when breakfast is skipped

NEFA = non esterified fatty acids
FFA = free fatty acids
GLP 1= glucagon like peptide1
GIP = gastro-intestinal peptide

What is Chrono-Nutrition?

Could obesity be characterized as a chrono-biological disease?

Chrono-Nutrition: Align Food Intake with Circadian Rhythms

- Chrono-nutrition aligns food intake with times when circadian rhythms are optimized for nutrition
- It encompasses meal timing, frequency, and distribution, not just nutrient value
- Shift meal patterns to earlier in the day
- Including **breakfast** has a legacy effect, lowers blood sugars later in the day, increases lipolysis¹
- Eating a carbohydrate-rich meal at night results in increased postprandial glycemia compared with an **identical** meal in the morning
- A crossover study in healthy participants showed a high protein meal tempered the glucose response at night²
- Meal *timing* has crucial implications on weight gain, appetite, and glucose and lipid metabolism

1. Jovanovic A, Gerrard J, Taylor R. *Diabetes Care*. 2009
2. Davis R, Bonham MP, Nguo K et al. *Clin Nutr*. 2020



Chrono-Nutrition Continued...

In an RCT w/ 13 healthy adults, thermal effect of food (thermogenesis), in the morning was 44% higher than in the evening ^{1,2}

Rate of gastric emptying is higher at 8 a.m. vs 8 p.m. ³

Could be translated to public health advocacy efforts in communities with T2DM, dependent on a high carbohydrate diet

1. Henry, C.J., Kaur, B. & Quek, R.Y.C. *Diabetes* **10**, 6 (2020).
2. Morris CJ, Yang JN, Garcia JJ, et al. *Obesity (Silver Spring)*. 2015
3. Hoogerwerf WA. *Am J Physiol Gastrointest Liver Physiol*. 2010

What's Your Chronotype: Night Owl or Early Bird?

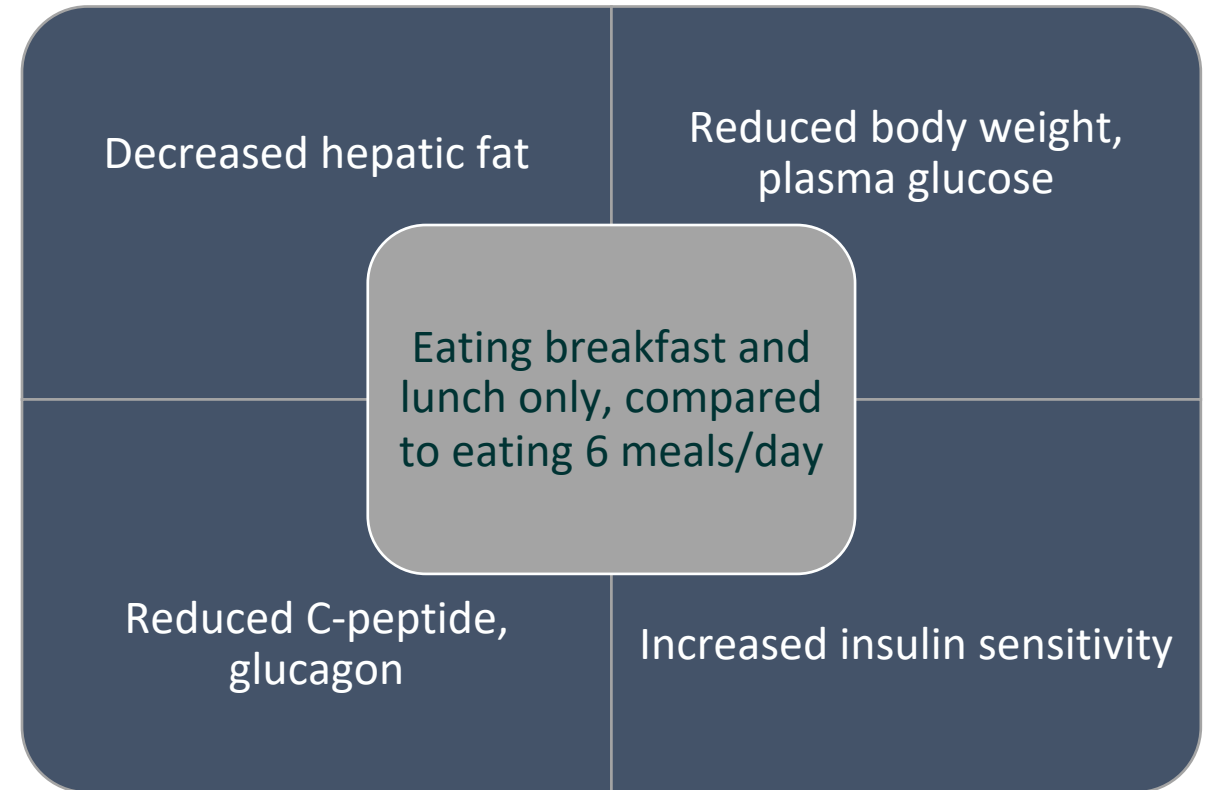
- Chrono-nutrition is influenced by an individual's "chronotype"
- Chronotype is related to an individual's internal clock
 - Helps classify if they prefer the morning or evening
- Individuals with "later chronotype" are biologically driven to consume foods later in the day, often skip breakfast, wake up and sleep late
- Later chronotype linked with metabolic syndrome, increased diabetes risk and poorer glycemic control in T2D patients

Case Study 1

- Mrs. A is a 61-year-old Caucasian woman, recently diagnosed with metabolic syndrome
- Her diet recall:
 - She tells you she goes to bed late and routinely skips breakfast
 - Lunch is mostly a store-bought salad with 4 oz grilled chicken or sometimes she has a sandwich with 3 oz deli meat , with a bag of chips
 - She tries to eat some fruit or yogurt around 4 p.m. but tells you her “hunger is out of control” by dinner time
 - She eats an enormous meal at 5:30 p.m. but starts nibbling at 8:30 p.m. for at least ½ an hour or more
- Her FBG has ticked up to 140 mg/dl and she has gained 15 lbs over the last 2 years
- Her pre-lunch blood sugars are also elevated
- What’s Mrs. A’s chronotype? What would be your advice to her, and why?

Two Large vs Several Small Meals in Patients w/ T2D

- 24-week randomized, cross-over trial¹
- 54 patients w/ T2D
- 2 regimens, 12 weeks each
 - Breakfast and lunch only vs
 - 6 meals a day
- Both regimens had the same macronutrient and energy content
- Larger scale, long-term studies needed before offering recommendations re: meal frequency
- Benefits attributed to increased fasting period vs meal frequency²



Glucose and Insulin Response Show a Diurnal Variation in Healthy Individuals and in T2D

- The PPBG after the high-energy breakfast was significantly lower than after the low-energy breakfast
- Carb tolerance decreases toward the evening in identical meals, in healthy folks and those with type 2 diabetes¹⁻³
- Attributed to rapid, early prandial GLP-1 level with increased beta cell function in the am
- GLP-1 secreted by the L-cells of the gut show a circadian rhythm with increased insulin release after the first meal ^{1,4}

1. Jakubowicz D, Barnea M, Wainstein J et al. *Obesity (Silver Spring)*. 2013;

2. Morgan LM, Shi JW, Hampton SM et al. *British Journal of Nutrition*. 2012

3. Gibbs M, Harrington D, Starkey S et al. *Clin Nutr* 2014

4. Gil-Lozano M, Mingomataj et al. EL, Wu WK *Diabetes*. 2014;63(11):3674-3685. doi:10.2337/db13-1501

Later Eating Leads to Greater Eating??

- Hunger peaks in the evening
- The same caloric intake in a different time window during the day led to a different body weight
- Consuming $> 1/3$ of total kcals after 5 p.m. doubles obesity risk
 - Worsens lipid and glucose profiles
- The **majority** of energy distribution across the **first** two meals of the day lead to favorable health outcomes

Lessons from the Clock:

- The clock genes drives key metabolic pathways in the body
- Clock disruption leads to cardiometabolic disease and potentially cancer
- Circadian rhythms persist in the absence of external cues
- Meal timings reset peripheral clocks, **overriding signals by the SCN**
- TRF in the active phase, restores metabolic homeostasis
- Chrono-nutrition realigns normal circadian rhythms, has therapeutic potential for treating endocrine-related disorders
- Translating this knowledge to clinical practice is still limited
- **Long term studies in human beings are needed**

Listen to Your Clock: Take Home Messages for Patients

- Light is a universal time giver
- Get plenty of sunlight especially in the early a.m. to fully activate the central clock
- This will release adequate cortisol for physical and mental alertness
- Exercise in the late afternoon primes muscle for activity and can offset disruptive sleep patterns
- Dim the lights an hour or so before bedtime and switch off blue light emitting devices to allow a robust melatonin onset
- Eat within the “light-phase” of the clock and preferably within a 10-12 hour eating window
- This mobilizes all the right circadian genes, hormones, and enzymes to support homeostasis and a strong circadian rhythm



Practice Guidelines

- Timed feeding patterns may reduce cardiometabolic risk via *both* fasting and circadian mechanisms
- Discuss why a bigger breakfast (vs a skimpy one) is key (legacy effect)
 - GLP-1, beta cell responsiveness and increased muscle glucose uptake in the am
- Encourage patients to consume most of their calories at breakfast and lunch, with a lighter dinner
 - Increased am thermogenesis (body “wastes” kcals) vs lower thermogenesis in the pm
- Decline in carbohydrate tolerance toward the evening means a higher carb meal at breakfast and a slightly higher protein meal at dinner is beneficial
- Align feeding/sleep cycles to the clock in the new time zone for jet lag as soon as possible
- Feeding should coincide with the active phase of the clock for shift work

You Are When You Eat!

- The circadian system is an intricate, precisely timed mechanism
- It works like clockwork when we are aligned to the biological day
- A robust circadian system is like a beautiful symphony
- However, it is very plastic, and our modern lifestyles can easily break these age-old clocks and turn the symphony to a discordant cacophony
- Many patients experience a mismatch between their endogenous clocks and socially-dictated behaviors
- Let's help our patients synchronize their behaviors to their circadian clocks
- The circadian clock could be tomorrow's therapeutic target for metabolic syndrome/weight/sleep disorders
- Timing is everything!
- A symphony, not a cacophony!

Questions?

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