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✓ Your Weight Matters[™] National Convention

AUGUST 25-28, 2016 • WASHINGTON, DC

"Walk" yourself into a MINDFUL EXERCISE! p. 42 EATING HABITS: Why they matter & how to change them p. 36

12 HEALTHY RECIPES for your week p. 48



A Berry Fun Way to Celebrate Spring! p. 14

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References: 1. Wadden TA et al. A multicenter evaluation of a proprietary weight loss program for the treatment of marked obesity: a five-year follow-up. Int J Eat Disord. 1997;22:203-212.

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News from the OAC The OAC gets a new design for the

Your Weight Matters Campaign Web site, educates organizations on people-first language and more!

Staying Silent about Bariatric Surgery

by Pamela Davis, RN, BSN, CBN, MBA

Undergoing bariatric surgery isn't "the easy way out," but that doesn't stop people from passing judgments about the procedure. As a nurse in the bariatric field and someone who underwent surgery herself in 2001, Ms. Davis shares her experience of talking about bariatric surgery, and what you can do to make sharing about it easier for you<u>rself.</u>

YWM2016 – United We Stand: **Inspiring Health**

All the details of the 5th Annual Your Weight Matters National Convention have been released, and we have everything you need to plan your trip and join us in Washington, DC on August 25-28!

Retrain Your Brain: How to Change Your Habitual Eating Patterns

by Eliza Kingsford, MA, LPC, NCC

Why are food triggers more problematic for some than others? Find out in this article about how you can retrain your brain to overcome your habitual eating habits, and maintain your health.

Walking Meditation: A Mindful **Approach to Exercise**

by Tracy Martinez, RN, BSN, CBN

With all of the daily disruptions in today's society, it's important to learn healthy ways to cope with the stress in your life. Walking meditation can be one of several strategies that helps bring you peace, balance and wellbeing to help transform your life!

OAC Members Matter – From Passion to Purpose bv Ava Zebrick

OAC Member Ava Zebrick shares about her journey toward better health, getting connected with the OAC and how she's turned her passion for advocating on behalf of individuals affected by obesity into a career.

KID'S Corner: A Berry Fun Way to **Celebrate Spring!** by Cassie I. Story, RDN

Berries are arguably the fruits that can be used in the widest variety of ways, and they're an easy treat for you and your children to prepare together! Check out this article to get tips and

inspiration for how to incorporate berries into

Interview with Dawn Jackson Blatner, RDN by Elizabeth Engasser

your next meal with your kids.

Staying positive and having fun — these are two of the things that help Dawn Jackson Blatner, RDN, ČSSD, LDN, as she's working with clients. It's proved successful too, as Ms. Blatner and her contestant Jasmin Queen were the winners of ABC's "My Diet is Better Than Yours!" Read about her experience and what she plans to share at YWM2016.

Dear Doctor – I'm taking insulin and can't lose weight. Why is it so difficult? Answer provided by Robert Kushner, MD

The unintended consequences of some medications used to treat diabetes, such as insulin, may cause additional weight gain. Dr. Kushner discusses newer medication options and explains what you should discuss with your healthcare provider.

Stay Happy and Healthy with these Recipes! by Sarah Muntel, RD

Many of us find ourselves in a cooking rut and choose the same meals each week. Check out these healthy recipes that you can incorporate into your meals right away!

YOUR **EIGHT***Matters* FOR YOUR HEALTH

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Issue 3

Your Weight MattersSM Magazine is the official publication of the Obesity Action Coalition (OAC). The OAC is an independent National non-profit organization dedicated to giving a voice to those affected by the disease of obesity.

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Dear friends,

I want to fuel the excitement I hope you are feeling after seeing (or about to read about) our Your Weight Matters National Convention 2016 issue, and share with you a few updates and reflections.

If you've never been to a Your Weight Matters National Convention, please be sure to join both our Facebook community and event pages for updates and ways to connect with other members and attendees. If you're already marking your calendars, I cannot wait to see you there (heads up: I'm bringing



Amber Huett-Garcia, MPA

lots of family, including my "currently cooking" new addition — a baby girl!). I promise that you'll come for the amazing, evidence-based education and leave with so much more — including new friends, energy to continue on your journey and inspiration to make an impact.

Speaking of impact, after our annual OAC National Board of Directors strategic planning retreat in January, I had many reflections. First and foremost was "I work with the most passionate, smart and dedicated colleagues." It was quickly followed by "do our members and supporters know what it is we actually do?" We are working on letting you all see the work that we do and how that manifests into change and moving our organization forward. I'm updating my personal Facebook account when I attend a committee call or do a legislative visit, etc., but it's not enough. If you have an idea of what "behind the scenes" action you would like to see from us, please send it our way by emailing info@obesitvaction.org.

Finally, I previewed in the Winter issue that we have been working to finalize the OAC's 5-year goals. Those have been approved by the board and you'll be hearing more about them in an upcoming blog post on the OAC Web site. Our summer issue of the magazine will also be dedicated to covering these in detail. I want these goals to become the North Star for our National board, staff and for you – our members and supporters.

When someone asks "what does it mean to be an OAC member?" I imagine that those responses will vary. If you can't yet answer that question, please look to our goals. Find the one that makes you say 'YES! This is why they need me. This is what drives me and I'm going to seek out everything I can do so that we accomplish that goal together."

I admit, I've always been a little silly, and my enthusiasm always brings out doubt in folks. I get it. No one wants to be so enthusiastic that we overpromise and under-deliver. My experience with both kids and adults is always the same, though: people rise to the expectation that is set for them. There will be numerous calls-to-action within our goals. You will have a choice: take action and gather others, or set it aside and let things stay the way they are. In that moment of decision, I urge you to consider this — what if we all committed to this together?

You matter, we matter, and we're going to see a dramatic change by 2021 for the Obesity Action Coalition and for all persons affected by obesity.

United We Stand,

all first Sarie

from the NEW Obesity Action Coalition

Your Weight Matters Campaign Site Gets a New Look and New Blog!

At the OAC, we know talking to a healthcare professional about your weight is never easy. That's why we created the Your Weight Matters Campaign, a National initiative to help you understand your weight, its impact on your health and to prepare you for the important conversation with your healthcare provider about your weight.

We've completely redesigned our Your Weight Matters Campaign Web site to create a more enjoyable experience for you! From the very beginning, you'll learn about why your weight is an important factor for your health, and be able to sign-up for



the Your Weight Matters Challenge. By taking the challenge, you'll receive FREE resources about your weight and health, and stay "in-the-know" about the latest information from the Campaign.

As part of the Web site's new look, we've also added

the YWM Blog — a frequently updated resource for anyone who wants to learn more about weight, health, nutrition, exercise, motivation and much more! There's plenty of great content on the Your Weight Matters blog that's similar to topics you'll find in Your Weight Matters Magazine, and we encourage you to check out everything we have to offer you by visiting the Campaign Web site at www.YourWeightMatters.org.

OAC Educates Organizations on People-First Language for Obesity

Bias and discrimination against people with obesity is welldocumented, and happens more often than it should. To help alleviate this issue, the OAC adopted a commitment to People-First Language when discussing individuals affected by obesity. People-First Language is language used that "puts people first, not their disease or disability," so that the information doesn't label people by their disease or disability.

In recognition of this, OAC President and CEO Joe Nadglowski presented to the Patient-Centered Outcomes Research Institute (PCORI) about the importance of using People-First language when speaking about individuals affected by obesity.

With any conversation concerning individuals affected by excess weight and obesity, it's important that the right language is used in order to appropriately discuss the patient's condition and how they're affected by it, and the OAC will continue to spread the word on the importance of people-first language in the future!

OAC Meets with Senate Staff on Capitol Hill

The OAC visited Washington, DC in January to educate senate staff on the importance of obesity care and treatment! Numerous OAC National Board of Directors members and OAC staff members visited 20 U.S. Senators' offices to speak with staff about the importance of legislation that would provide for access to weight management tools for individuals affected by the disease of obesity.

The primary topics of the visits were obesity treatment coverage under Medicare, the Treat and Reduce Obesity Act and a recent report on policy options for chronic diseases published by the Senate Finance Committee's Chronic Disease Working Group. OAC President and CEO Joe Nadglowski said most of the staff members the OAC spoke with were "cautiously optimistic" that the Senate would introduce legislation this year that addresses chronic diseases among Medicare recipients, and that this legislation would help at least partially with the OAC's efforts to have obesity addressed by the Senate.

"I feel overall that the meetings were successful," Mr. Nadglowski said. "The OAC's positive relationships with members of Congress and their staff were definitely on display during the meetings."

Join Us for YWM2016 on August 25 - 28!



The OAC is proud to announce that registration for the 5th Annual Your Weight Matters National Convention is now open! This year's event will take place August 25-28 at the Gaylord National Resort and Convention Center in Washington, DC, and it's an event n that you won't want

At YWM2016, you'll get the right information about weight and health, all presented by leading experts in the fields of obesity medicine, nutrition, exercise and more! The opportunity to learn evidence-based weight management strategies at YWM2016 is unmatched by any other event, and while you're learning all of this information, you can rest easy knowing that you're doing so in a safe and judgment-free environment.

Full Convention Registration starts at an affordable rate of \$95 and Single Day Registration starts at \$30/ day. To learn more about the Your Weight Matters National Convention, visit the official Web site at



www.YWMConvention.com or turn to page 22.

Education Matters Advocacy Matters Support Matters

OAC MEMBERS MATTER

Finding Purpose from Passion

by Ava Zebrick

OAC Member Ava Zebrick turned her personal journey with weight into a career of improving healthcare for individuals affected by excess weight and obesity — and the OAC served as a great source of motivation along the way.

My Before

By the spring of May 2013, I had finally reached my breaking point. As my orthopedist went over my x-ray results with me, he explained that kneeling for 20 minutes over the weekend had moved my kneecaps out of place.

Luxating patella, or dislocated kneecaps, was added to my growing list of obesity-related conditions — alongside hypertension, prediabetes, polycystic ovarian syndrome, clinical depression and chronic fatigue. I was told that if the physical therapy I was prescribed did not effectively treat my knees, I would need surgery.

The idea of needing weight-related knee surgery was terrifying. I was only 25-years-old at the time, a newlywed and planning to live happily ever after! To me, this crossroads reflected on my overall future. If my obesity wasn't effectively managed, I was facing an imminent health decline with diminishing quality of life and quite possibly, an early death. I became determined to find a solution, and was fortunate to find the best resources and support systems available to help me on my journey.

My During

6

I spent the next six months of my life researching treatment options for obesity. Ultimately, I decided on the vertical sleeve gastrectomy (VSG) and underwent surgery



Ava Zebrick found passion and inspiration at the 3rd Annual Your Weight Matters National Convention in 2014.

in December 2013. Remarkably, my related conditions rapidly resolved. Within two months, I felt well and energetic enough to be active and to get fit. I dedicated myself to using personal trainers, followed the "Couch to 5K" App routine, participated in running events and even started a group fitness community of my own. I prepared binders full of healthy recipes and even planted an herb and vegetable garden. To maintain this lifestyle, I also regularly attended support group meetings.

During one local support group meeting, an OAC member gave a presentation about an upcoming annual *Your Weight Matters* National Convention in Orlando, Fla. I was instantly inspired and thought attending the convention would be fun, informative and a great aid in keeping my momentum going. I could never have imagined, however, that this convention would mark another huge turning point in my life. First off, the Convention was fun. I met countless others with similar experiences to mine. They were happy to share their stories, and their journeys provided a source of inspiration for me. Strangers became fast friends, some even lifelong friends, and we had a blast together — whether we were laughing and dancing at the costume party or a hip-hop fitness class.

Of course, the Convention was also educational. During convention breakout sessions, we heard from leading experts in obesity research and care. We learned about mindful eating techniques, non-exercise activity thermogenesis (the burning of calories throughout your daily life), the physiological effects of sugar addiction and so many more fascinating topics. The talk that had the greatest impact on me was a lecture presented by Dr. Arya Sharma called "Why Diets May Not Work: The Complexity of Weight Management."

Though I had been overweight from a very young age, until the *Your Weight Matters* National Convention and Dr. Sharma's talk, I had not understood that obesity was in fact a chronic and incurable disease. I had never heard about a "set point" or the odds that were against weightloss even after bariatric surgery.

Weight management would forever be a great effort, and I learned that individuals most likely to maintain weightloss are the ones who make their post-surgery "success" a part of their career (e.g., dieticians, personal trainers, bloggers). I took this message to heart and left YWM2014 determined to find such a path for myself — a career in which I could serve others similarly affected by obesity and keep myself focused on health.

OAC Members Matter continued on following page



Before undergoing bariatric surgery in 2013, Ava faced multiple obesity-related health conditions, and decided it was time for a change.

OAC Membership Application

Why Join the OAC? The OAC is a more than 52,000 member-strong 501(c)[3] National non-profit organization dedicated to giving a voice to the individual affected by the disease of obesity and helping individuals along their journey toward better health through education, advocacy and support. Our core focuses are to raise awareness and improve access to the prevention and treatment of obesity, provide evidence-based education on obesity and its treatments, fight to eliminate weight bias and discrimination, elevate the conversation of weight and its impact on health and offer a community of support for the individual affected.

1. OAC Memb	ership Categories	5 (select one)
🔲 Individual Me	embership:	\$20/year- \$10!
Institutional N	lembership:	\$500/year
🗖 Chairman's C	Council Membership:	\$1000+/year
 Are you joining for the first time, or are you renewing your OAC Membership? I am joining for the first time (never been an OAC member). I am renewing my membership (have joined the OAC in the past). *\$10 memberships available for a limited time 		
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JOIN ONLINE! To join the OAC online, please visit **www.ObesityAction.org** and click on the "Get Involved" tab.

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MagMembership-Spring2016

OAC Members Matter continued from previous page

My After

My determination transformed into a purpose — the advancement of obesity research and access to care. I returned to my alma mater, the University of New Orleans, to pursue a master's degree in healthcare management. I will graduate in December of this year with my MBA.

In addition to focusing on school, I am also connecting with various local players in the field of obesity research. I am serving on the project management committee for a study on obesity at Pennington Biomedical Research Center. I am also a patient engagement consultant for the Louisiana Public Health Institute (LPHI).

At LPHI, I am creating orientation materials for fellow patients who will serve as partners on study boards. Once these patient partners are actively participating in the roles, I will act as their liaison. Board members can call me if issues arise—be they logistical or personal—to ensure that the patient voice informs research at every step of the process. This work has led to other projects, such as facilitating training for medical school students on patientcentered outcomes research, and participating in a series of meetings to define obesity-related research questions of interest for local healthcare systems.

The more actively involved I become, the more motivated I feel. I had left YWM2014 asking, "What do I do now?" but I returned one year later feeling completely empowered, and asking myself, "How can I do my best?"

The 2015 Convention provided the same abundance of fun and information, but this time I paid more attention to the OAC's mission and advocacy work by participating in the OAC's National Advocacy Training Session. I knew I wanted to tie in my passion with the OAC's efforts, and I left the advocacy training feeling more capable than ever. Today, when the OAC sends out Action Alert emails, I know I am ready.

Today, I am pursuing all opportunities for involvement. After YWM2015, I applied to serve on the OAC's Access to Care and Revenue Generation Committees. I am also connecting with The Obesity Society's Regional Advocacy Coordinator, the Louisiana Health Communities Coalition, and the Louisiana Obesity Prevention and Management Commission. I hope to bring the powerful patient voice in alliance with the work of researchers, clinicians, policy makers, health systems, business interests and the general public. I believe my work with these networks is the best way to do so.

The OAC has genuinely changed my life, and I know it can change the lives of so many others. I cannot wait to see what this year's convention in Washington, DC has in store for us!

Get the details to join us for YWM2016 read more about the convention on page 22!



Ava poses with fitness instructor Robanne Robin and Catrina Johnson after a hip-hop fitness class at the Your Weight Matters National Convention.

"I knew I wanted to tie in my passion with the OAC's efforts, and I left advocacy training feeling more capable than ever. Today, when the OAC sends out Action Alert emails, I know I am ready."

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Staying Silent about Bariatric Surgery

by Pamela Davis, RN, BSN, CBN, MBA

Is bariatric surgery (weight-loss surgery) the dirty little secret in your life? As a nurse and someone who has worked in the field of bariatrics for more than 10 years, I am amazed — and quite honestly, at times a little dumb-founded — by the number of people who choose not to reveal they had bariatric surgery. As a patient however, on a very personal level, I do understand.

had gastric bypass surgery 15 years ago. My husband knew my plans. My sons knew my plans. The people I worked with knew my plans. Heck, strangers on the street knew my plans! My mother, however, did not know. Why? Because I didn't tell her.

I threatened my husband and boys within an inch of their lives if they told her. Why? Because I knew I needed to surround myself with positive and supportive people. I knew after more than 30 years of hearing about my weight, I did not need or want to hear again how I just needed to be stronger and have more willpower. Since I really did not see my mother that often, I thought I would be fine not sharing my plans.

As luck would have it, two days after I came home from surgery, she dropped by and there I sat with my drain dangling. So, here it is, the moment of truth—time to come clean and say, "I had bariatric surgery," right? Wrong; I lied. I said I had my gallbladder out and because of a complication, I still had a drain.

Fast forward three months later, and I see my mother again. I am now down 75 pounds. I still had no plans to divulge I had surgery; however, when she asked, "Do you have cancer?" I said it. "I had that stomach surgery to lose weight," and there it was, the look. There was that "oh," response.

You know what happened then? Nothing — except I no longer felt like I was keeping a secret.

Early in my career in bariatrics, I had a patient who told her husband the day before her surgery, "I'm having surgery tomorrow and I'm going to need a ride to the hospital. Will you take me or do I need to call a cab?"

When I asked her why she waited so long to discuss it with him, she had a similar story as mine; she did not want to be talked out of surgery or told it would not work. "I knew after more than 30 years of hearing about my weight, I did not need or want to hear again how I just needed to be stronger and have more willpower."

10

I have worked with people who do not tell their extended family or their friends they have had surgery. When asked how they are losing so much weight, they simply say diet and exercise. While technically you are losing weight through diet and exercise, you are leaving out one major component: "I had bariatric surgery."

The Importance of Sharing Your Story

Why is it so important for you to share that little tidbit? Unlike someone who has migraines or high blood pressure, we wear the disease of obesity for the world to see. No matter how hard we may try, we can't hide our weight. This also means we can't hide our weight-loss. People know when we are losing weight. You can hide your shrinking body in baggy clothes, but you can't hide your face; and honestly, why would you want to?

So, you have had surgery. You are losing weight. You are feeling good. You, and more specifically your weight-loss, are now topics of conversation. People want to know how you did it. What do you say or not say and why?

Starting the Conversation

The ideal conversation would go something like this:

Friend/Frenemy/Co-worker/Family member: "OMG, you look fabulous! Have you lost weight? You have lost weight. What did you do?" You: "I had bariatric surgery." Friend/Frenemy/Co-worker/Family member: "Good for you. Was it a difficult decision? I know so many people considering surgery. Would you be willing to speak with them?"

Staying Silent continued on following page

I wanted to safely lose weight without Compromising my lifestyle. Turns out, I didn't have to.

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Staying Silent continued from previous page

At this point you, my dear friend, would pay it forward by sharing your experience with others who are considering having the surgery.

I believe we are often pre-programmed to expect ridicule, doubt and a lack of support when discussing our weight-loss challenges and the idea of bariatric surgery. We are afraid the conversation may go more like this one:

Friend/Frenemy/Co-worker/Family member: "OMG, you look fabulous! Have you lost weight? You have lost weight. What did you do?"

You: "I had bariatric surgery."

Friend/Frenemy/Co-worker/Family member's possible responses:

a) "I know someone who had that surgery and now she's bigger than she was before the surgery."

b) "Oh. Well have you seen so-and-so? He lost more than 100 pounds but he did it the hard way instead of taking the easy way out."

c) "Why? Why would you let someone cut you up when all you need to do is eat less and exercise more?"

d) Some combination of the above.

This still does not answer why so many stay silent about their decision to undergo bariatric surgery for the treatment of their obesity. I believe I know the answer - fear. Fear that we will not be supported. Fear that we will be the only person in the world to have bariatric surgery and not lose an ounce. Fear that we will regain the weight. Fear that we will let someone down.

So instead of sharing with the very people who care about us and support us, we keep our treatment a secret. You could definitely argue that it's nobody's business if you have surgery. True, it is no one's business but your own. It is your choice if you undergo any treatment or not and it is your choice if you share your treatment and your journey.

I ask you to think about your journey. Think about all of the factors you considered when choosing surgery. Think about the people who supported you on your journey, if you had supportive people. If you didn't, think about what it would have meant to you to have someone you could talk to about your excitement and your anxiety.

Own your treatment method. Find your voice. I implore you to pay it forward.

About the Author:

Pamela Davis, RN, BSN, CBN, MBA, is the Bariatric Program Director for Centennial Center for the Treatment of Obesity in Nashville, Tenn. Ms. Davis is a Registered Nurse, Certified Bariatric Nurse and Certified Case Manager. Ms. Davis also serves on the National Board of Directors for the Obesity Action Coalition. In 2001, Ms. Davis had laparoscopic Roux-en-Y gastric bypass surgery at Centennial and has since developed a passion for working with others living with obesity.

Ms. Davis will also be speaking at the 5th Annual Your Weight Matters National Convention in the breakout session "Balancing Perspective: A Look at Real Life Post-Bariatric Surgery."

"I ask you to think about your journey. Think about all of the factors you considered when choosing surgery. Think about the people who supported you on your journey, if you had supportive people. If you didn't have a support system, think about what it would have meant to you to have someone you could talk to about your excitement and your anxiety."

Resources for managing relationships after bariatric surgery:

- Relationships After Weight-Loss Surgery (Obesity Help, 2015)
- Relationship Challenges Before & After Weight-Loss Surgery (OAC; Dr. Medlin)
- Baby Steps Emotional Adjustment After Weight-Loss Surgery (OAC)

12

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KD'S corner

A Berry Fun Way to Celebrate

by Cassie I. Story, RDN

Growing up in the Midwest had its perks. Some of my fondest memories involve playing outside, picking various fruits and vegetables from our garden or neighboring woods. One of my favorite activities was running to the nearby bushes outside our family home to select berries for my mother to use in the morning breakfasts. Now that I'm living in the desert, I'm not awarded that same luxury. Sure we have gorgeous mountains to climb, and horizons that never end - but pluck-worthy produce is nonexistent.

Luckily, shipping has been perfected over the past several decades and for most of us, we are granted whatever produce we desire at any time of year. However, there is nothing quite like the taste of just-picked berries.

Berries are arguably the fruits that can be used in the widest variety of ways. Their use goes far beyond a simple side dish, and they can be incorporated seamlessly into any meal of the day. Most members of the family adore them, and regardless of what type of food preference or diet you are following, berries oftentimes get the green light.

They also come in a variety of forms. Dried, dehydrated or frozen, and they can be found on your shelf, in your refrigerator and even in your freezer all at once! Let's explore the world of berries, and I hope this inspires you to try them in new ways.

Happy picking!

14



Spring 2016

Strawberries

The jewel of the berry family, these berries are one of the most popular fruits, and are available year-round in most areas. However, you have not lived until you have tried the small ones from your local farmers' market when they are in season in your hometown.

Pick them:

Typically one good whiff of a fruit will let you know if it is ripe and ready to eat, but this is not the case with these favorite berries. Rely on the color — they should be bright red throughout and any green tips should be avoided as they will not continue to ripen after picked. Strawberries should be firm and have a slight shine to them, with freshlooking green caps. Also, avoid any that look slimy or moldy as they are past their prime.

Prep them:

Keep them in the refrigerator with their green caps on. Just before you are ready to eat, place them in a colander and give them a good rinse, using your hands to slightly scrub any surface dirt off each berry. If you are using them in a recipe, let them dry on a paper towel. If not, simply remove the stems and get to eatin'!

Plate them:

Summer salad

Add them to chopped baby greens, pecans, feta and balsamic vinaigrette, then top with mint or basil.

Sweetened-up side dish

Cut in half and brush with oil; slightly sauté or grill and add a splash of fresh lemon juice to enhance their sweetness and add as a side to chicken or fish.





Blueberries

Second runner-up in the berry popularity contest is blueberries. These little guys can be used in a variety of ways, and they require no peeling or chopping! They have been used for centuries for their believed medicinal qualities, and to this day they are one of the most widely-studied foods. Headlines run almost weekly on their acclaimed health benefits.

Pick them:

Blueberries should follow their namesake and be bright blue. Avoid any packages that appear stained or damp. The size of the berry will vary based on what type of bush it comes from. Highbush (cultivated) and lowbush (wild) blueberries differ in taste. The larger berries are from the cultivated bush and tend to have a milder flavor than their smaller and more tart lowbush cousins.

Prep them:

Oftentimes, you can leave them in the refrigerator for several weeks in the plastic covered container they come in as long as they are firm and dry. Wash just before using and make sure to gently pat them dry if you are using them in a recipe.

Plate them:

Sauce for fish or chicken

- In a small sauce pan over medium heat add 1 tsp. of olive oil and sauté half of a minced shallot until see-through.
- Add 1 cup of fresh blueberries and cook for 3-4 minutes until the berries begin to break down and become fragrant.
- Add 1 tablespoon of balsamic vinegar and reduce heat to medium-low, let simmer for an additional minute.
- Pour over cooked fish or chicken.

A Twist on Chocolate Dipped Berries

- Rinse 1/2 cup of fresh blueberries and pat dry (they should be slightly wet), then set aside.
- In a small plastic baggie add 1/2 tablespoon of dark cocoa powder; add blueberries, seal the bag and shake well until the berries are evenly coated.
- Place parchment paper on a large plate. Dump berries on the plate, but make sure they aren't touching.
- Place in the freezer for about 30 minutes, remove and enjoy!

Kid's Corner continued on following page

Blackberries

Often, blackberries are synonymous with pies, muffins or jams. These sometimes-overlooked berries are so much more than just pastry-filler. Sweet and tart blackberries are a delicious snack on their own, or you can pair them with cheese if you want your world to be rocked!

Pick them:

Blackberries are ready to eat when they are plump and almost black - they will also smell sweet and aromatic. Avoid packages with moldy or bruised fruit.

Prep them:

Their soft skin can lead these berries to bruise easily, so protect them by giving them plenty of space, and don't stack other foods on top of them. Refrigerate them in their containers since they are sensitive to moisture, and do not store in plastic bags. Wash the blackberries just before use.

Plate them:

Blackberry pizza (No, I'm not kidding!)

- Choose your "pizza" base, either a whole-wheat tortilla or "flatout" bread (or pre-baked pizza dough - if using this, bake first before following the directions below).
- Preheat oven to 375 degrees Fahrenheit.
- Brush the "pizza" base with 1 tablespoon of olive oil and evenly sprinkle 2 ounces of goat cheese, 1/3 cup chopped pistachios and 1/2 cup fresh blackberries on top.
- Place on baking sheet and bake for 8-10 minutes until cheese is slightly melted. Remove from oven and drizzle with 1 tablespoon of honey.

Tangy and Sweet Dessert

 Marinate 1/2 cup freshly rinsed blackberries with 1 tablespoon of balsamic vinegar and 1 teaspoon of honey for 30 minutes at room temperature.



Raspberries

These little beauties contain almost triple the amount of fiber per serving as strawberries! If you are up for trying new foods, look for golden or black varieties, which differ in taste than the common red raspberries.

Pick them:

These tart berries should be bright red and plump, and they should also be fragrant and free of their hulls.

Prep them:

Store uncovered in the refrigerator, if possible in a single layer on a plate or tray. As with the other berries, wash just before eating. To get the most flavor out of these mini berries allow them to come to room temperature before eating.

Plate them:

Berry-licious Oats

- Add fresh raspberries to cooked whole oats and let sit for 5 minutes.
- Mix well. The heat from the oats will gently break the berries apart allowing naturally sweet and tart flavors to blend into each bite.

Frozen yogurt

- Blend 1 cup of frozen raspberries with 1/2 cup of Greek yogurt (vanilla or coconut) and 1 tablespoon of fresh lemon juice until completely smooth.
- Transfer to a freezable container with lid, freeze for at least 4 hours and enjoy!

Kid's Corner continued on page 21



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What is **BELVIQ**[®]?

BELVIQ is an FDA-approved prescription weightloss medication that, when used with diet and exercise, can help some overweight (Body Mass Index [BMI] \geq 27 kg/m²) adults with a weight-related medical problem, or adults living with obesity (BMI \geq 30 kg/m²), lose weight and keep it off.

It is not known if BELVIQ when taken with other prescription, over-the-counter, or herbal weightloss products is safe and effective. It is not known if BELVIQ changes your risk of heart problems, stroke, or death due to heart problems or stroke.

Important Safety Information

- **Pregnancy:** Do not take BELVIQ if you are pregnant or planning to become pregnant, as weight loss offers no potential benefit during pregnancy and BELVIQ may harm your unborn baby.
- Serotonin Syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions: Before using BELVIQ, tell your doctor about all the medicines you take, especially medicines that treat depression, migraines, mental problems, or the common cold. These medicines may cause serious or lifethreatening side effects if taken with BELVIQ. Call your doctor right away if you experience agitation, hallucinations, confusion, or other changes in mental status; coordination problems; uncontrolled muscle spasms; muscle twitching; restlessness; racing or fast heartbeat; high or low blood pressure; sweating; fever; nausea; vomiting; diarrhea; or stiff muscles.
- Valvular heart disease: Some people taking medicines like BELVIQ have had heart valve problems. Call your doctor right away if you experience trouble breathing; swelling of the arms, legs, ankles, or feet; dizziness, fatigue, or weakness that will not go away; or fast or irregular heartbeat. Before taking BELVIQ, tell your doctor if you have or have had heart problems.
- Changes in attention or memory: BELVIQ may slow your thinking. You should not drive a car or operate heavy equipment until you know how BELVIQ affects you.
- **Mental problems:** Taking too much BELVIQ may cause hallucinations, a feeling of being high or in a very good mood, or feelings of standing outside your body.
- **Depression or thoughts of suicide:** Call your doctor right away if you notice any mental changes, especially sudden changes in your mood, behaviors, thoughts, or feelings, or if you have depression or thoughts of suicide.

- Low blood sugar: Weight loss can cause low blood sugar in people taking medicines for type 2 diabetes, such as insulin or sulfonylureas. Blood sugar levels should be checked before and while taking BELVIQ. Changes to diabetes medication may be needed if low blood sugar develops.
- **Painful erections:** If you have an erection lasting more than 4 hours while on BELVIQ, stop taking BELVIQ and call your doctor or go to the nearest emergency room right away.
- **Slow heartbeat:** BELVIQ may cause your heart to beat slower.
- **Decreases in blood cell count:** BELVIQ may cause your red and white blood cell counts to decrease.
- Increase in prolactin: BELVIQ may increase the amount of a hormone called prolactin. Tell your doctor if your breasts begin to make milk or a milky fluid, or if you are a male and your breasts increase in size.
- Most common side effects in patients without diabetes: Headache, dizziness, fatigue, nausea, dry mouth, and constipation.
- Most common side effects in patients with diabetes: Low blood sugar, headache, back pain, cough, and fatigue.
- **Nursing:** BELVIQ should not be taken while breastfeeding.
- Drug interactions: Before taking BELVIQ, tell your doctor if you take medicines for depression, migraines, or other medical conditions, such as: triptans; medicines used to treat mood, anxiety, psychotic or thought disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors, selective serotonin-norepinephrine reuptake inhibitors, monoamine oxidase inhibitors, or antipsychotics; cabergoline; linezolid (an antibiotic); tramadol; dextromethorphan (an over-the-counter (OTC) common cold/cough medicine); OTC supplements such as tryptophan or St. John's Wort; or erectile dysfunction medicines.
- BELVIQ is a federally controlled substance (CIV) because it may be abused or lead to drug dependence.

For more information about BELVIQ[®], talk to your healthcare professional and see the Patient Information on the reverse side.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/ medwatch or call 1-800-FDA-1088.

You've got your goals and **You've got** BELVIQ[®]

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Adding BELVIQ[®] to your healthy routine may help you take weight loss further and may help lower blood pressure.* In clinical studies, BELVIQ[®] helped some people **lose weight and keep it off** more effectively compared with diet and exercise alone.[†] **Ask your healthcare professional if BELVIQ[®] is right for you.**





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PROMO CODE: OC

*Though it is not a blood pressure treatment, BELVIQ may lower blood pressure.

⁺BELVIQ was evaluated in 3 clinical studies involving overweight adults (with at least 1 weight-related medical condition) and obese adults. All 3 studies compared people taking BELVIQ plus diet and exercise to people using diet and exercise alone (placebo). The results of the first 2 studies (involving 7,190 people without diabetes) showed that 47.1% of people taking BELVIQ lost 5% or more of their body weight compared with 22.6% of the placebo group. People taking BELVIQ also had significant improvements in their blood pressure and cholesterol levels. A third clinical study (involving 604 overweight people with type 2 diabetes) showed that 37.5% of people taking BELVIQ lost 5% or more of their body weight compared with 16.1% of the placebo group. People taking BELVIQ also had significant improvements in their blood sugar levels. Nearly one-half of all participants completed the first 2 studies; nearly two-thirds of the participants completed the third study.

*Restrictions apply.

IMPORTANT PATIENT INFORMATION

Read the Patient Information that comes with BELVIQ[®] (BEL-VEEK) (lorcaserin hydrochloride) tablets before you start taking it and each time you get a refill. There may be new information. This page does not take the place of talking with your doctor about your medical condition or treatment. If you have any questions about BELVIQ, talk to your doctor or pharmacist.

What is BELVIQ?

BELVIQ is a prescription medicine that may help some obese adults or overweight adults who also have weight related medical problems lose weight and keep the weight off.

BELVIQ should be used with a reduced calorie diet and increased physical activity.

It is not known if BELVIQ is safe and effective when taken with other prescription, over-the-counter, or herbal weight loss products.

It is not known if BELVIQ changes your risk of heart problems or stroke or of death due to heart problems or stroke.

It is not known if BELVIQ is safe when taken with some other medicines that treat depression, migraines, mental problems, or the common cold (serotonergic or antidopaminergic agents). It is not known if BELVIQ is safe and effective in children under 18 years old.

BELVIQ is a federally controlled substance (CIV) because it contains lorcaserin hydrochloride and may be abused or lead to drug dependence. Keep your BELVIQ in a safe place, to protect it from theft. Never give your BELVIQ to anyone else, because it may cause harm to them. Selling or giving away this medicine is against the law.

Who should not take BELVIQ? Do not take BELVIQ if you:

• are pregnant or planning to become pregnant. BELVIQ may harm your unborn baby.

What should I tell my healthcare provider before taking BELVIQ?

Before you take BELVIQ, tell your doctor if you:

- have or have had heart problems including:
 - congestive heart failure
 - heart valve problems

- slow heartbeat or heart block

- have diabetes
- have a condition such as sickle cell anemia, multiple myeloma, or leukemia
- have a deformed penis, Peyronie's disease, or ever had an erection that lasted more than 4 hours
- · have kidney problems
- have liver problems
- are pregnant or plan to become pregnant
- are breastfeeding or plan to breastfeed. It is not known if BELVIQ passes into your breastmilk. You and your doctor should decide if you will take BELVIQ or breastfeed. You should not do both.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements.

BELVIQ may affect the way other medicines work, and other medicines may affect how BELVIQ works.

Especially tell your doctor if you take medicines for depression, migraines or other medical conditions such as:

- triptans, used to treat migraine headache
- medicines used to treat mood, anxiety, psychotic or thought disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors (SSRIs), selective serotonin-norepinephrine reuptake inhibitors (SNRIs), monoamine oxidase inhibitors (MAOIs), or antipsychotics
- cabergoline
- linezolid, an antibiotic
- tramadol
- dextromethorphan, an over-the-counter medicine used to treat the common cold or cough

- over-the-counter supplements such as tryptophan or St. John's Wort
- medicines to treat erectile dysfunction

Ask your doctor or pharmacist for a list of these medicines, if you are not sure.

Know all the medicines you take. Keep a list of them to show your doctor and pharmacist when you get a new medicine.

How should I take BELVIQ?

- Take BELVIQ exactly as your doctor tells you to take it.
- Your doctor will tell you how much BELVIQ to take and when to take it.
 - Take 1 tablet 2 times each day.
 - Do not increase your dose of BELVIQ.
 - BELVIQ can be taken with or without food.
- Your doctor should start you on a diet and exercise program when you start taking BELVIQ. Stay on this program while you are taking BELVIQ.
- Your doctor should tell you to stop taking BELVIQ if you do not lose a certain amount of weight within the first 12 weeks of treatment.
- If you take too much BELVIQ or overdose, call your doctor or go to the nearest emergency room right away.

What should I avoid while taking BELVIQ?

• **Do not** drive a car or operate heavy machinery until you know how BELVIQ affects you. BELVIQ can slow your thinking.

What are the possible side effects of BELVIQ? BELVIQ may cause serious side effects, including:

 Serotonin Syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions. BELVIQ and certain medicines for depression, migraine, the common cold, or other medical problems may affect each other causing serious or life-

threatening side effects. Call your doctor right away if you start to have any of the following symptoms while taking BELVIQ: — mental changes such as agitation, hallucinations,

- confusion, or other changes in mental status
- coordination problems, uncontrolled muscle spasms, or muscle twitching (overactive reflexes)
- restlessness
- racing or fast heartbeat, high or low blood pressure
- sweating or fever
- nausea, vomiting, or diarrhea
- muscle rigidity (stiff muscles)
- Valvular heart disease. Some people taking medicines like BELVIQ have had problems with the valves in their heart. Call your doctor right away if you have any of the following symptoms while taking BELVIQ:
 - trouble breathing
 - swelling of the arms, legs, ankles, or feet
 - dizziness, fatigue, or weakness that will not go away
 - fast or irregular heartbeat
- Changes in your attention or memory.
- Mental problems. Taking BELVIQ in high doses may cause psychiatric problems such as:
 - hallucinations
 - feeling high or in a very good mood (euphoria)
 - feelings of standing next to yourself or out of your body (disassociation)
- Depression or thoughts of suicide. You should pay attention to any mental changes, especially sudden changes, in your mood, behaviors, thoughts, or feelings. Call your healthcare provider right away if you have any mental changes that are new. worse, or worry you.
- Low blood sugar (hypoglycemia) in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus. Weight loss can cause low blood sugar in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus (such as insulin or sulfonylureas). You should check your blood sugar before you start taking BELVIQ and while you take BELVIQ.
- Painful erections (priapism). The medicine in BELVIQ can cause painful erections that last more than 6 hours. If you have

an erection lasting more than 4 hours whether it is painful or not, stop using BELVIQ and call your doctor or go to the nearest emergency room right away.

- Slow heartbeat. BELVIQ may cause your heart to beat slower. Tell your doctor if you have a history of your heart beating slow or heart block.
- Decreases in your blood cell count. BELVIQ may cause your red and white blood cell count to decrease. Your doctor may do tests to check your blood cell count while you are taking BELVIQ.
- Increase in prolactin. The medicine in BELVIQ may increase the amount of a certain hormone your body makes called prolactin. Tell your doctor if your breasts begin to make milk or a milky discharge or if you are a male and your breasts begin to increase in size.

The most common side effects of BELVIQ include:

- headache
- dizziness
- fatigue
- nausea
- dry mouth
- constipation
- cough
- low blood sugar (hypoglycemia) in patients with diabetes
- back pain

Tell your doctor if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of BELVIQ. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How do I store BELVIQ?

Store BELVIQ at room temperature between 59°F to 86°F (15°C to 30°C).

Safely throw away medicine that is out of date or no longer needed.

Keep BELVIQ and all medicines out of the reach of children.

General information about the safe and effective use of BELVIQ.

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use BELVIQ for a condition for which it was not prescribed. Do not give BELVIQ to other people, even if they have the same symptoms you have. It may harm them.

This Patient Information summarizes the most important information about BELVIQ. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about BELVIQ that is written for health professionals. For more information, go to www.BELVIQ.com Website or call 1-888-274-2378.

What are the ingredients in BELVIQ?

Active Ingredient: lorcaserin hydrochloride Inactive Ingredients: silicified microcrystalline cellulose; hydroxypropyl cellulose NF; croscarmellose sodium NF; colloidal silicon dioxide NF; polyvinyl alcohol USP; polyethylene glycol NF; titanium dioxide USP; talc USP; FD&C Blue #2 aluminum lake; and magnesium stearate NF.

This Patient Information has been approved by the U.S. Food and Drug Administration.

Rx Only

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Kid's Corner continued from page 17

Family Recipe: Greek Yogurt Strawberry Pops

Source: WLSDailyPlate.com

This recipe is a twist on two family favorites — popsicles and frozen yogurt!

Instructions:

- 1. Wash strawberries and let them dry, removing the stems.
- Assemble your creation station:
 Fill a bowl with vanilla Greek yogurt.
- 3. Choose your toppings (get creative) fill individual bowls of any number of the following items: chopped almonds, chopped dark chocolate covered espresso beans, mini semi-sweet chocolate chips, cereal, cocoa powder and/or cinnamon.
- 4. Gently insert cake pop sticks (found at a local craft store) into the base of the strawberry.
- 5. Spread greek yogurt onto the strawberry with a small spatula or butter knife.
- 6. Roll or sprinkle toppings onto each strawberry.
- 7. Place on a wax-lined plate or baking sheet (depending on how many you make).
- 8. Freeze for 1-3 hours. You want the yogurt to be firm before removing from freezer.

About the Author:

Cassie I. Story, RDN, is a dietitian who has been working with bariatric patients for the past 11 years. She also has her own food blog, WLSDailyPlate. com, to help inspire healthy eating following bariatric surgery. She enjoys cooking, hiking and spending time with her two daughters in Arizona.

Ms. Story will also be presenting at the 5th Annual Your Weight Matters National Convention in the session "A Hands-on Approach to Nutrition."



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Jou're Invited

Join us for the OAC's 5th Annual Your Weight Matters National Convention!













August 25-28, 2016 Washington, DC

Gaylord National Resort & Convention Center

our journey with weight is not one you should have to endure alone. That's why the Obesity Action Coalition (OAC) was formed in 2005, and why we've hosted the *Your Weight Matters* National Convention every year since 2012. We want to provide the everyday individual — the learner, the supporter and the advocate — with a place to hear from the leading experts in the field of weight management, and a place to connect with others, try new things, and feel safe and empowered while doing so. This year's event marks the first five years of the Convention's existence, and we've only continued to grow this event and improve the education we've provided to our attendees. The *Your Weight Matters* National Convention has established itself as the premier meeting on weight and health, and this year's event — taking place in America's backyard, Washington, DC — will be even more jam-packed, exciting and inspirational than years prior. We hope you'll join us at the Convention, so you too can experience this event, which has been called "life-changing" by so many past attendees.

"United We Stand — Inspiring Health," is the theme for YWM2016, because we know it's important to have a support system and resources available to you on your journey with weight. Whether that's in the form of a support group, a brochure you received at your doctor's office or even the copy of *Your Weight Matters Magazine* that you're currently reading, having a team to help you along the way will make the journey that much easier, and will ultimately inspire you to strive for better health.

At YWM2016, You'll Experience...

The RIGHT Information about Weight and Health

With all the misinformation that's out in the world, you may not know where to turn when you want a guarantee that you're getting science-based tips and tools for how to manage your weight. YWM2016 will provide attendees with **more than 50 educational topics**, presented by leading experts in the fields of nutrition, exercise, weight management and more.

At YWM2016, our speakers will offer the latest information on topics such as:

- Health by Design: Creating a Mindful Eating Environment
- 360 Degrees of Movement: Integrating Activity and Exercise into Your Day
- The Struggle is Real Why is it so Hard to Manage My Weight?
- And 45+ more!



Sought-after Speakers

The *Your Weight Matters* National Convention is YOUR place to discover the tools you can use to manage your weight and health. These tools are all backed by research done yearround by our speakers and presenters, with highly sought out individuals such as:

- Acclaimed Motivational Speaker and Psychotherapist, Merrill Littleberry, LCSW, LCDC, CCM, CI-CPT
- Cornell Food & Brand Lab Researcher and Best-Selling Author **Brian Wansink**, PhD
- "My Diet is Better Than Yours" Winning Coach **Dawn Jackson Blatner**, RDN, CSSD, LDN and her contestant on the show, **Jasmin Queen**
- "Extreme Weight Loss" Medical Director and Associate Professor of Medicine at the University of Colorado Holly Wyatt, MD
- Renowned Obesity Medicine Physician
 Robert Kushner, MD

The presenters at YWM2016 are here to help you break down the science that surrounds managing your weight, and they'll do so in a non-judgmental and safe environment where you can get the answers to your questions. There is no "one size fits all" approach when it comes to your weight, and it's because of this that we at the OAC strive to provide a diverse agenda, so every attendee has something to gain from this year's educational event!

A Safe and Supportive Exercise Program

Exercise is a crucial component to your health, and at YWM2016, you'll have a place where you can participate in a variety of exercise classes that you may not have tried before! When you're away from home, it may seem tempting to let your workout routine slide, but at YWM2016, you'll feel motivated to stay on track in an exciting and energizing way.

Topics to be presented include:

- Morning walks and runs
- Tai Chi
- Aqua-Fit
- ZumbaGuided fitness coaching
- Guided fittless coa
 And more!



Exercise classes are offered in the morning and afternoon on Friday and Saturday of Convention, and they're included in every Convention attendee's registration. To view the latest exercise program agenda for YWM2016, please visit the Convention Web site at **www.YWMConvention.com/day-2-3/conventionexercise-program/.**

Vor Weight Matters HEALTHY LIVING EXPO

The 10,000 Square Foot EXPO Hall

At the *Your Weight Matters* National Convention, you'll not only get the chance to learn about evidence-based information related to weight and health, but you'll also have the opportunity to hear from companies and organizations who can provide you with products and services to help you on your journey!

The YWM Health Living EXPO includes a diverse array of vendors offering proven devices, products and services in the health and wellness industry. All registered attendees will receive access to the YWM Healthy Living EXPO Hall as part of their event registration, which features:

- 30+ Vendor booths displaying products and services that can best help you along your journey towards improved health
- FREE samples and giveaways from vendors
- The opportunity to interact and connect with likeminded individuals in between sessions and social events
- Time to grab free resources from the OAC, such as brochures, magazines and more

YWM2016 continued on following page

WHAT'S NEW THIS YEAR!

In honor of the 5th year of the *Your Weight Matters* National Convention, we've added some new elements to the program agenda that will appeal to both seasoned and brand-new attendees!

THE GREAT DEBATE SERIES

An addition to the Convention agenda is "The Great Debate Series" – two general sessions that will cover complex topics surrounding weight and nutrition. Even our experts regularly have discussions about certain aspects of the weight management field, and to highlight these discussions, we are offering attendees the chance to check out debate-style presentations on topics including:



"**Can You be Healthy and Have Obesity**?," a session featuring exercise researcher Steve Blair, PED, and Medical Director for the Center for Obesity Medicine and Metabolic performance, Debbie Horn, DO, MPH, FOMA.





24

"**Food Addiction**," a session featuring "Why Diets Fail" author Nicole Avena, PhD, and food psychologist Nina Crowley, PhD, RDN, LD.





INSPIRATIONAL WORKSHOP WITH MERRILL LITTLEBERRY

New to this year's Convention Program is our exclusive Break THROUGH Inspirational Session – "Breaking THROUGH and Finding the Power within You!" featuring nationallyacclaimed and Convention-favorite psychotherapist, Merrill Littleberry, aka "Vitamin 'M." This unique event is one attendees will not want to miss, as it will be the perfect finish to a weekend full of education, focusing on providing a more intimate and personal discussion to help you connect with and understand how to overcome challenges during your journey with weight.

This session is a separately ticketed event, and all proceeds for this event will go toward the Convention Scholarship Program.

Past Attendees Rave about the Your Weight Matters National Convention:

On the EDUCATION:

"I was quite unprepared for what I experienced. I was blown away by the caliber of the speakers — real practitioners and researchers working at the forefront of obesity issues — and their ability to present information in a way I could understand."



On the COMMUNITY:

"I come here because the OAC is my second family. It's where I don't have to hide, and I don't have to worry about pretending and watching where I go and what I do. It's a place where I don't have to worry about anything at all."

Michelle Mata,

San Antonio, TX



"It's been life-changing because when you come here, you're not an outcast. Nobody is staring at you because you're the biggest person in the room. You're in a room with people who have been through this and understand what you're going through being a person with obesity."



Your Weight Matters Magazine

Spring 2016

SPECIAL EVENTS



National Advocacy Training Session

The OAC hosts a National Advocacy Training Session each year to train our next set of advocates who have a desire to influence the legislative process on Capitol Hill. During this training session, you will learn from the OAC's Policy Consultant Chris Gallagher and OAC President and CEO Joe Nadglowski about how to be an effective advocate for change.

Before the session's over, you will have the opportunity to put what you have learned to the test during mock legislative visits, where you'll combine your skills and experience to advocate for awareness about the disease of obesity, access to obesity care and treatment and much more!

This session is available to all registered Convention attendees, but pre-registration is required. Space is limited to the first 50 attendees who sign-up in advance. Attendees can sign-up for this event when they complete their registration on the Convention Web site.

You are the OAC: Discover the Power of Your Voice

This interactive, hands-on session will help guide you on getting involved with the work of the OAC. This session is designed for anyone who wants to learn more about the OAC, has a desire to raise their voice in support of the organization's work and wants to become more involved in the OAC's year-round efforts. If you have asked yourself "How can I get more involved?," then this session is for you!

During the session, you will explore each of the pillars of the OAC's mission, learn what the OAC does each and every day to help those affected by excess weight and obesity, and how you can join in our efforts to make a difference! One of the key things you will learn about in this session is how to share your story with others, and afterwards you will have the tools available to immediately begin making a difference!

This session is available to all registered Convention attendees, but pre-registration is required. Space is limited to the first 75 attendees who sign-up in advance. Attendees can sign-up for this event when they complete their registration on the Convention Web site.



Lunch with the Experts

One of the most popular extents of the meeting, Lunch with the Experts, is an opportunity to get up close and personal with the leading experts in the field of weight, health, nutrition, exercise and more! Lunch with the Experts offers attendees a nutritious lunch while discussing a certain topic in a small group setting. This event takes place on Friday and Saturday with different table topics available on each day.

Lunch with the Experts is a separately ticketed event, and because of the popularity of this event, seating is limited and is on a first-come, first-served basis — so we highly recommend you register early to get your preferred topic selection. To view all of the topics presented at the Lunch with the Experts session, please see the full agenda on page 30.



OAC's Advocacy March

We've worked hard the past five years to march to Washington, DC, and we've finally made it! Join us on Sunday morning of Convention to participate in the Advocacy March, a series of activities that support the OAC and that you can do to influence our organization's work in providing education, advocacy and support to all individuals affected by excess weight and obesity.

The power of advocacy comes in many forms, and we'll showcase this at the Advocacy March. Whether it's signing a petition, taking a stand against weight bias or sharing your story with others, this inspiring event is designed to be the ultimate send-off for a weekend of education, community and fun!

This event is included in every attendee's registration and is a way for participants to feel inspired to share the work of the OAC when they head back to their communities.

YWM2016 continued on following page



You will learn a lot of information at YWM2016, but there are also plenty of opportunities to socialize and have fun with your fellow attendees at the event!

Convention Attendee and Exhibitor Welcome Reception

The Convention Attendee and Exhibitor Welcome Reception kicks off the YWM2016 festivities and offers attendees a sneakpeak of all the goodies they'll get to experience in the YWM Healthy Living EXPO Hall! This special preview of the EXPO Hall gives attendees time to interact with the Convention Welcoming Committee and YWM Healthy Living EXPO Hall vendors before the rest of the weekend's events unfold. Attending the Welcome Reception gives attendees a chance to connect with other attendees as well — and it's a great opportunity to get excited for the rest of the weekend's events!

Friday Night Welcoming Ceremonies

Always a time to have some fun, the Friday Night Welcoming Ceremonies features music, dancing and even a costume contest! Come join your fellow attendees for a buffet dinner, dancing and a few surprises along the way! There will also be a prize for the winners of the costume contest, so we hope you'll come wearing your best creations!

Please note that while participation in the costume contest is encouraged, it is not required to attend this event.

LET'S TALK #YWM2016!

Are you excited for #YWM2016? Join the online conversation by visiting the official *Your Weight Matters* National Convention Facebook page at **www.Facebook.com/YWMConvention** and using the hashtag **#YWM2016**!



OAC Annual Awards Ceremony

As a National non-profit organization that works year-round to provide education, advocacy and support to individuals affected by excess weight and obesity, the OAC has many people to thank for their hard work and support of our efforts over the past year. On Saturday evening of the Convention, the OAC will host its 5th Annual Awards Ceremony to honor our dedicated members, advocates and supporters who exemplify the excellence of raising awareness about obesity and overcoming the challenges faced by individuals affected by the disease.





National sponsorships are still being secured and a variety of support opportunities are still available. For more information on YWM2016 Convention Sponsorship, please email Kristy Kuna, OAC Vice President of Programs and Operations, at **kkuna@obesityaction.org**.

National sponsors as of 3/31/16

26

TRAVEL DETAILS, CONVENTION PRICING AND MORE

Affordable Pricing Options

At the *Your Weight Matters* National Convention, we strive to make the price to attend as affordable for our attendees as possible.

SINGLE DAY REGISTRATION

When you purchase a Single Day Registration for the low price of just \$30/day, you receive access to all educational sessions, group fitness classes, and the YWM Healthy Living Expo; an official Convention T-shirt, souvenir tote bag and a Convention Program Book; and the opportunity to pre-register for the OAC's Training Sessions (Thurs.), and one ticket to the OAC's Advocacy March (Sun.).

Meals, Lunch with the Experts, social events and the Break THROUGH Inspirational Session are NOT included in single-day registrations.

FULL CONVENTION REGISTRATION

When you purchase a Full Convention Registration for \$95, you receive access to all educational sessions, group fitness classes, and the YWM Healthy Living Expo; an official Convention T-shirt, souvenir tote bag and Convention Program Book; the opportunity to pre-register for the OAC's Training Sessions (Thurs.); breakfast on Friday and Saturday morning; one ticket to the Event Welcoming Ceremonies Dinner (Fri.); one ticket to OAC's 5th Annual Awards Ceremony (Sat.) and one ticket to the OAC's Advocacy March (Sun.).

Lunch with the Experts and the Break THROUGH Inspirational Session are NOT included in the Full Convention Registration.

The Official Convention Room Block

We are really excited to be hosting our 5th Annual *Your Weight Matters* National Convention in Washington, DC at the spectacular Gaylord National Resort & Convention Center! The OAC has secured a competitive room rate of \$129/night (single/double occupancy) for this year's Convention.

The Gaylord National Resort & Convention Center is a first-class destination with fun for everyone including fine dining and casual restaurants, unique shopping experiences, an indoor pool and 20,000 square foot spa and fitness center. To learn more and secure your room, please visit the Convention Web site at **www.YWMConvention.com**

Check out the Full Convention Agenda on Pages 30 and 31!

YWM2016 Dru Hinghi Mannai Canasana	EARLY-BIRD Ends June 1 st	ADVANCE Ends August 12 th	ONSITE August 25-28
SINGLE DAY	\$30 /day	\$40/day	\$50/day
SINGLE DAY WITH CE CREDITS	\$55 /day	\$65/day	\$75/day
FULL CONVENTION	\$95	\$125	\$145
FULL CONVENTION WITH CE CREDITS	\$145	\$175	\$195

Continuing Education (CE) Credits at YWM2016!





NEED HELP TAKING OFF EXCESS WEIGHT AND KEEPING IT OFF?

Along with a reduced-calorie meal plan and increased physical activity, FDA-approved Saxenda® can help you lose weight and keep it off.

- Some people lost 2.5 times more weight with Saxenda® vs placebo (17.3 lb vs 7 lb) in a medical study. Study participants had an average starting weight of 234 lb and an average body mass index (BMI) of 38^a
- Weight loss was maintained with Saxenda[®] in another 1-year medical study,^{b,c} in which 8 out of 10 people were able to lose 5% or more of their weight within 4 to 12 weeks with a low-calorie meal plan alone. In addition, at the end of this study, on average, people who were on Saxenda® were able to achieve an additional 6.2% weight loss
- *These results were from a 56-week trial of adults with excess weight (BMI ≥27) with at least 1 weight-related condition, or obesity (BMI ≥30), not including patients with type 2 diabetes. On average, there were 27% of people on Saxenda® and 34% on placebo who did not complete the studies. In the study, 62% of patients on Saxenda® lost 25% body weight (34%, placebo) and 34% lost ≥10% body weight (15%, placebo). Significant weight loss was evaluated only at 56 weeks, as per study design
- ^bA 56-week trial of adults with excess weight (BMI ≥27) with at least 1 weight-related condition, or obesity (BML>30), not including patients with type 2 diabetes. This study was designed to measure weight loss (beginning to end of trial), ability to keep weight off (didn't gain >0.5%), and those who achieved \geq 5% weight loss.

Results may not reflect those expected in the general population

Ask your health care professional about Saxenda® and learn more at Saxenda.com

What is Saxenda®?

Saxenda® is an injectable prescription medicine that may help some adults with excess weight (BMI ≥27) who also have weight-related medical problems or obesity (BMI ≥30), lose weight and keep the weight off. Saxenda[®] should be used with a reduced-calorie meal plan and increased physical activity.

- Saxenda[®] is not for the treatment of type 2 diabetes
- Saxenda® and Victoza® have the same active ingredient, liraglutide, and should not be used together
- Saxenda® should not be used with other GLP-1 receptor agonist medicines
- Saxenda® and insulin should not be used together • It is not known if Saxenda® is safe and effective when taken with other
- prescription, over-the-counter, or herbal weight-loss products • It is not known if Saxenda[®] changes your risk of heart problems or stroke or
- of death due to heart problems or stroke • It is not known if Saxenda® can be used safely in people who have had
- pancreatitis
- It is not known if Saxenda[®] is safe and effective in children under 18 years of age. Saxenda® is not recommended for use in children

Important Safety Information

What is the most important information I should know about Saxenda®? Serious side effects may happen in people who take Saxenda®, including: 1. Possible thyroid tumors, including cancer. During the drug testing process, the medicine in Saxenda® caused rats and mice to develop tumors of the thyroid gland. Some of these tumors were cancers. It is not known if Saxenda® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid cancer in people. If medullary thyroid cancer occurs, it may lead to death if not detected and treated early. If you develop tumors or cancer of the thyroid, your thyroid may have to be surgically removed.

• Before you start taking Saxenda®, tell your health care professional if you or any of your family members have had thyroid cancer, especially medullary thyroid cancer, or Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). Do not take Saxenda® if you or any of your family members have medullary thyroid cancer, or if you have MEN 2. People with these conditions already have a higher chance of developing medullary thyroid cancer in general and should not take Saxenda®

• While taking Saxenda®, tell your health care professional if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer

2. Inflammation of the pancreas (pancreatitis), which may be severe and lead to death.

Before taking Saxenda®, tell your health care professional if you have had: pancreatitis, stones in your gallbladder (gallstones), a history of alcoholism, high blood triglyceride levels

While taking Saxenda®:

Stop taking Saxenda® and call your health care professional right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may happen with or without vomiting. The pain may be felt going from your abdomen through to your back. This type of pain may be a symptom of pancreatitis.

Who should not use Saxenda®?

Do not use Saxenda® if:

- you or any of your family members have a history of medullary thyroid cancer • you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). This is a disease
- where people have tumors in more than one gland in their body you are allergic to liraglutide or any of the ingredients in Saxenda[®]
- Symptoms of a serious allergic reaction may include:

• swelling of your face, lips, tongue, or throat, fainting or feeling dizzy, very rapid heartbeat, problems breathing or swallowing, severe rash or itching Talk with your health care professional if you are not sure if you have any of these

conditions. • are pregnant or planning to become pregnant. Saxenda® may harm your unborn baby Please see brief summary of Prescribing Information on adjacent page.

If you would like more information, please speak to your health care professional. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.



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Saxenda[®]

liraglutide (rDNA origin) injection

Brief Summary of Information about Saxenda® (liraglutide [rDNA origin] injection) By Only

Rx Only

This information is not comprehensive. How to get more information:

- Talk to your healthcare provider or pharmacist
- Visit www.novo-pi.com/saxenda.pdf to obtain the FDA-approved product labeling
- Call 1-877-484-2869

What is the most important information I should know about Saxenda®?

Serious side effects may happen in people who take Saxenda®, including:

- 1. Possible thyroid tumors, including cancer. During the drug testing process, the medicine in Saxenda® caused rats and mice to develop tumors of the thyroid gland. Some of these tumors were cancers. It is not known if Saxenda® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid cancer in people. If medullary thyroid cancer occurs, it may lead to death if not detected and treated early. If you develop tumors or cancer of the thyroid, your thyroid may have to be surgically removed.
 - Before you start taking Saxenda[®], tell your healthcare provider if you or any of your family members have had thyroid cancer, especially medullary thyroid cancer, or Multiple Endocrine Neoplasia syndrome type 2. Do not take Saxenda[®] if you or any of your family members have medullary thyroid cancer, or if you have Multiple Endocrine Neoplasia syndrome type 2. People with these conditions already have a higher chance of developing medullary thyroid cancer in general and should not take Saxenda[®].
 - While taking Saxenda[®], tell your healthcare provider if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer.

Inflammation of the pancreas (pancreatitis), which may be severe and lead to death.

Before taking Saxenda®, tell your healthcare provider if you have had:

- pancreatitis
- stones in your gallbladder (gallstones)
- a history of alcoholism
- high blood triglyceride levels

These medical conditions can make you more likely to get pancreatitis in general. It is not known if having these conditions will lead to a higher chance of getting pancreatitis while taking Saxenda[®].

While taking Saxenda®:

Stop taking Saxenda® and call your healthcare provider right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may happen with or without vomiting. The pain may be felt going from your abdomen through to your back. This type of pain may be a symptom of pancreatitis.

What is Saxenda®?

- Saxenda[®] is an injectable prescription medicine that may help some obese adults or overweight adults who also have weight related medical problems lose weight and keep the weight off.
- Saxenda[®] should be used with a reduced calorie diet and increased physical activity.
- Saxenda[®] is not for the treatment of type 2 diabetes mellitus.
- Saxenda[®] and Victoza[®] have the same active ingredient, liraglutide. Saxenda[®] and Victoza[®] should not be used together.
- glutide. Saxenda[®] and Victoza[®] should not be used togethe
 Saxenda[®] should not be used with other GLP-1 receptor agonist medicines.
- Saxenda[®] and insulin should not be used together.
- It is not known if Saxenda[®] is safe and effective when taken with other prescription, over-the-counter, or herbal weight loss products.
- It is not known if Saxenda[®] changes your risk of heart problems or stroke or of death due to heart problems or stroke.
- It is not known if Saxenda[®] can be used safely in people who have had pancreatitis.
- It is not known if Saxenda[®] is safe and effective in children under 18 years of age. Saxenda[®] is not recommended for use in children.

Who should not use Saxenda®?

- Do not use Saxenda® if:
- you or any of your family members have a history of medullary thyroid cancer.
- you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). This is a disease where people have tumors in more than one gland in their body.
- you are allergic to liraglutide or any of the ingredients in Saxenda[®]. See the end of this Medication Guide for a complete list of ingredients in Saxenda[®].
- Symptoms of a serious allergic reaction may include: • swelling of your face, lips, tongue, or throat
- swelling of your face, lips,
 fainting or feeling dizzy
- very rapid heartbeat
- problems breathing or swallowing
- severe rash or itching
- Talk with your healthcare provider if you are not sure if you
- have any of these conditions.
- are pregnant or planning to become pregnant. Saxenda[®] may harm your unborn baby.

What should I tell my healthcare provider before using Saxenda®?

- Before taking Saxenda[®], tell your healthcare provider if you: • have any of the conditions listed in the section "What is the
- most important information I should know about Saxenda[®]?"
 are taking certain medications called GLP-1 receptor agonists.
- are altergic to liraglutide or any of the other ingredients in Saxenda[®]. See the end of this Medication Guide for a list of ingredients in Saxenda[®].
- have severe problems with your stomach, such as slowed emptying of your stomach (gastroparesis) or problems with digesting food.
- have or have had kidney or liver problems.
- have or have had depression or suicidal thoughts.
- have any other medical conditions.
- are pregnant or plan to become pregnant. Saxenda[®] may harm your unborn baby. Tell your healthcare provider if you become pregnant while taking Saxenda[®]. If you are pregnant you should stop using Saxenda[®].
- are breastfeeding or plan to breastfeed. It is not known if Saxenda® passes into your breast milk. You and your healthcare provider should decide if you will take Saxenda® or breastfeed. You should not do both without talking with your healthcare provider first.

Tell your healthcare provider about all the medicines you take including prescription and non-prescription medicines, vitamins, and herbal supplements. Saxenda® slows stomach emptying and can affect medicines that need to pass through the stomach quickly. Saxenda® may affect the way some medicines work and some other medicines may affect the way Saxenda® works. Tell your healthcare provider if you take other diabetes medicines, especially sulfonylurea medicines or insulin.

Know the medicines you take. Keep a list of them with you to show your healthcare provider and pharmacist each time you get a new medicine.

How should I use Saxenda®?

- Inject your dose of Saxenda[®] under the skin (subcutaneous injection) in your stomach area (abdomen), upper leg (thigh), or upper arm, as instructed by your healthcare provider.
 Do not inject into a vein or muscle.
- If you take too much Saxenda[®], call your healthcare provider right away. Too much Saxenda[®] may cause severe nausea and vomiting.
- Never share your Saxenda[®] pen or needles with another person. You may give an infection to them, or get an infection from them.

What are the possible side effects of Saxenda®? Saxenda® may cause serious side effects, including:

- possible thyroid tumors, including cancer.
- See "What is the most important information I should know about Saxenda®?"
- inflammation of the pancreas (pancreatitis).
 See "What is the most important information I should know about Saxenda[®]?"
- gallbladder problems. Saxenda® may cause gallbladder problems including gallstones. Some gallbladder problems need surgery. Call your healthcare provider if you have any of the following symptoms:
 - pain in your upper stomach (abdomen)
 - fever
 - yellowing of your skin or eyes (jaundice)
 - clay-colored stools

 low blood sugar (hypoglycemia) in people with type 2 diabetes mellitus who also take medicines to treat type 2 diabetes mellitus. Saxenda® can cause low blood sugar in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus (such as sulfonylureas). In some people, the blood sugar may get so low that they need another person to help them. If you take a sulfonylurea medicine, the dose may need to be lowered while you use Saxenda®. Signs and symptoms of low blood sugar may include:

confusion

irritability

fast heartbeat

• feeling jittery

hunger

- shakiness
- sweating
- headache
- drowsiness
- weakness
- dizziness

Talk to your healthcare provider about how to recognize and treat low blood sugar. Make sure that your family and other people who are around you a lot know how to recognize and treat low blood sugar. You should check your blood sugar before you start taking Saxenda® and while you take Saxenda®.

- increased heart rate. Saxenda[®] can increase your heart rate while you are at rest. Your healthcare provider should check your heart rate while you take Saxenda[®]. Tell your healthcare provider if you feel your heart racing or pounding in your chest and it lasts for several minutes when taking Saxenda[®].
- kidney problems (kidney failure). Saxenda® may cause nausea, vomiting or diarrhea leading to loss of fluids (dehydration). Dehydration may cause kidney failure which can lead to the need for dialysis. This can happen in people who have never had kidney problems before. Drinking plenty of fluids may reduce your chance of dehydration.

Call your healthcare provider right away if you have nausea, vomiting, or diarrhea that does not go away, or if you cannot drink liquids by mouth.

- serious allergic reactions. Serious allergic reactions can happen with Saxenda[®]. Stop using Saxenda[®], and get medical help right away if you have any symptoms of a serious allergic reaction See "Who should not use Saxenda[®]?"
- depression or thoughts of suicide. You should pay attention to any mental changes, especially sudden changes, in your mood, behaviors, thoughts, or feelings. Call your healthcare provider right away if you have any mental changes that are new, worse, or worry you.

Common side effects of Saxenda® include: • nausea • diarrhea

- nausea
 constipation
 diarrhea
 low bloo
 - low blood sugar (hypoglycemia)
- vomiting
 headache
- decreased appetite
 upset stomach
 - dizziness
- tirednessstomach pain

 changes in enzyme (lipase) levels in your blood Nausea is most common when first starting Saxenda[®], but decreases over time in most people as their body gets used to the medicine.

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

Duries you of that does not go away. These are not all the side effects with Saxenda®. For more information, ask your healthcare provider or pharmacist. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Keep your Saxenda® pen, pen needles, and all medicines out of the reach of children.

Manufactured by: Novo Nordisk A/S DK-2880 Bagsvaerd, Denmark **More detailed information is available upon request.** Available by prescription only. For information about Saxenda® contact: Novo Nordisk Inc. 800 Scudders Mill Road Plainsboro, NJ 08536 1-844-363-4448 Issued: December 2014 Version: 1

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YWM2016 PROGRAM AGENDA

Thursday, August 25

10:30 am - 5:00 pm	Registration Open
1:00 pm - 4:00 pm	OAC Thursday Training Sessions
	You are the OAC: Discover the Power of Your Voice
	OR
	OAC National Advocacy Training

7:00 pm - 8:30 pm Convention Attendee and Exhibitor Welcome Reception

Friday, August 26

- 6:30 am 7:15 am Group Exercise Classes
- 6:30 am 5:00 pm Registration Open
- 7:30 am 8:45 am Breakfast



7:30 am - 5:15 pm EXPO Hall Open

Friday General Sessions

8:30 am - 9:15 am	Event Welcome: Uniting Your Community to Inspire Health Presented by: Amber Huett-Garcia, MPA and Michelle Vicari Featuring: Lawrence A. Soler, President and CEO of Partnership for a Healthier America
9:20 am - 10:00 am	The Power to Transform Your Life! Presented by: Holly Wyatt, MD
10:00 am - 10:45 am	Break – Visit EXPO Hall
10:35 am - 10:45 am	10-Minute Exercise Demo
10:45 am - 11:25 am	Health by Design: Creating a Mindful Eating Environment Presented by: Brian Wansink, PhD
11:30 am - 12:15 pm	The Great Debate Series: Food Addiction Presented by: Nicole Avena, PhD and Nina Crowley, PhD, RDN, LD
12:30 pm - 1:30 pm	Lunch with the Experts (ticketed event)
 Holidays and Celebratio The Art of Compromise: <i>– Tammy Beaumont, BSI</i> Chew on this: Practicing Using Your Mind to Mana Don't Sweat it: Taking th Mind over Matter: The P The Pain of Regain: Stay Binge Eating Disorder and 	cting with Fellow First-time Attendees – <i>Rob Portinga</i> ns: Tips for Staying on Track – <i>Michelle Vicari</i> and Self-negotiation: Techniques to Meet Your Goals <i>V, RN, CBN</i> Mindful Eating – <i>Nina Crowley, PhD, RDN, LD</i> age Stress – <i>Speaker TBA</i> ne First Step on Your Fitness Journey – <i>Mira Rasmussen, ACSM, EP-C</i> sychology of Weight Management – <i>Janine V. Kyrillos, MD, FACP</i> ring Motivated Long-term – <i>Colleen M. Cook</i> nd Your Weight: What You Should Know – <i>Allison Grupski, PhD</i>

- 11. More than Meets the Scale: Understanding the Biological Components of Weight Management – Scott Kahan, MD, MPH
- 12. Check Your Levels: Post-op Patients and Blood Work What You Should Know – Jacqueline Jacques, ND, FTOS
- 13. Life after Bariatric Surgery: Medication Do's and Don'ts Lloyd Stegemann, MD, FASMBS
- 14. The "New" You is the Same You: Learning to Love Yourself and Others Speaker TBA 15. Community Action: How You Can Change Lives and Pay it Forward – Lawrence A. Soler
- 16. Namaste: Yoga for All Fitness Levels *Speaker TBA*
- 17. Pregnancy and Women's Health: Ask the Doc Amy Articolo, DO

Friday Breakout Sessions

1:45 pm - 3:00 pm	Friday Breakout Session 1 (2 Offered)
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BREAKOUT ROOM 1

360 Degrees of Movement: Integrating Activity and Exercise into Your Day Moderated by: Scott Kahan, MD, MPH

- Activity Versus Exercise: What's the Difference?
 Scott Kahan, MD, MPH
 Developing Your Personal Exercise Prescription
 Sarah Kuchinos, MS, MA, CPT, CES
- Fitness Tracking: Technology for Exercise

 Nicole Brown, MS, RD, LD, ACSM EP

OR

BREAKOUT ROOM 2

Through the Good Times, and Bad – Managing Your Health Moderated by: Merrill Littleberry, LCSW, LCDC, CCM, CI-CPT

- Managing and Embracing Your Relationships
- *Speaker TBA*Managing Life's Stresses
- Speaker TBA
- Putting Your Health and Self, First

 Merrill Littleberry, LCSW, LCDC, CCM, CI-CPT

3:00 pm - 3:45 pm	Break - Visit EXPO Hall
3:35 pm - 3:45 pm	10-Minute Exercise Demo
3:45 pm - 5:00 pm	Friday Breakout Session 2 (2 Offered)
	BREAKOUT ROOM 1

The Struggle is Real – Why is it so Hard to Manage My Weight? Moderated by: Robert Kushner, MD

- Understanding the Role of Biology
- Holly Wyatt, MD Understanding the Role of Your Behaviors
- *Robert Kushner, MD* Your Mind: A Powerful Tool
- Speaker TBA

OR

BREAKOUT ROOM 2 Balancing Perspectives: A Look at Real Life Post-Bariatric Surgery

Moderated by: Pamela Davis, RN, BSN, CBN, MBA and Michelle Vicari

- Balancing the Mix of Emotions
- Merrill Littleberry, LCSW, LCDC, CCM, CI-CPT
- Balancing Your Nutrition and Supplement Needs — Jacqueline Jacques, ND, FTOS
- Finding the Balance of Activity in Your Everyday Life

 Mira Rasmussen, ACSM, EP-C
- Patient Panel Been there, done that: Advice from Fellow Post-ops

5:30 pm - 6:15 pm Afternoon Group Exercise Classes

7:30 pm - 11:00 pm Welcoming Ceremonies Dinner



We hope to see you at YWM2016 on August 25-28 for inspiration to better health!

Saturday, August 27

6:30 am - 7:15 am	Group Exercise Classes
6:30 am - 5:00 pm	Registration Open
7:30 am - 5:15 pm	EXPO Hall Open
7:30 am - 8:45 am	Breakfast

Saturday General Sessions

8:30 am - 9:15 am	Energy In, Energy Out – Rethinking the Balance <i>Presented by: Steve Blair, PED</i>
9:20 am - 10:00 am	Behind the Scenes: Lessons Learned through a "Reality" Weight-loss Competition Presented by: Dawn Jackson Blatner, RDN, CSSD, LDN and Jasmin Queen
10:00 am - 10:45 am	Break – Visit EXPO Hall
10:35 am - 10:45 am	10-Minute Exercise Demo
10:45 am - 11:30 am	Reimagining the World in Which We Live – Advocating for Health Presented by: Scott Kahan, MD, MPH
11:30 am - 12:15 pm	The Great Debate Series: Can You be Healthy and Have Obesity? Presented by: Steve Blair, PED and Debbie Horn, DO, MPH, FOMA
12:30 pm - 1:30 pm	Lunch with the Experts (ticketed event)

- 1. Linking With Others: Finding Your Support System and Tools Online Michelle Vicari
- 2. Denied Treatment? Don't Go down without a Fight! Lloyd Stegemann, MD, FASMBS
- 3. Grocery Aisles to Kitchen Table: Practical and Healthy Meal Planning Cassie I. Story, RDN
- 4. The Snack Attack! Deciphering Your Cravings Dawn Jackson Blatner, RDN, CSSD, LDN
- 5. Obesity and Mental Health Conditions: An Intertwined Challenge Speaker TBA
- 6. FDA-approved Obesity Medications: Evaluating My Options - Christopher D. Still, DO, FACN, FACP
- 7. Different Approaches to Eating: Intuitive Versus Scheduled Nina Crowley, PhD, RDN, LD
- 8. Redefining Success: Balancing Your Life and Weight Management Expectations - Deborah Bade Horn, DO, MPH, FOMA
- 9. Ask the Doc: Body Contouring after Weight-loss Joseph Michaels, MD
- 10. Commercial Weight Management Programs: Surfing through the Evidence – Sarah Muntel, RD
- 11. Obesity Care 2016: Current and Emerging Treatments Scott Kahan, MD, MPH
- 12. Identifying Weight Bias: Getting Educated and Taking Action – Melinda J. Watman, BSN, MSN, CNM, MBA
- 13. The Co-conspirators: Effects of Sleep and Stress on Your Weight Janine V. Kyrillos, MD, FACP
- 14. Finding Your Center: Meditation for Beginners Speaker TBA
- 15. Health Strategies for You and Your Family Amy Articolo, DO
- 16. Ocean of Emotions: Dealing with Changing Relationships after Weight-loss Speaker TBA

Saturday Breakout Sessions



Sneak Peek at Peek at YUM2016: An Interview with Dawn Jackson Blatner, RDN

by Elizabeth Engasser

ith all of the different weight-loss options out there, how do you know which one is best for you? Everyone has their own lifestyles and goals for their weight and health, but are the plans some people choose for themselves really more effective than others?

This is what ABC's "My Diet is Better Than Yours" wanted to find out — and the winning team of the show, Jasmin Queen and Dawn Jackson Blatner, RDN, CSSD, LDN, learned first-hand what it takes to stay on-track with your goals.

The duo will be sharing for the first time together about their journey on the show at the 5th Annual *Your Weight Matters* National Convention in Washington, DC, and they'll also share some motivational tips that you can use on your own journey with weight!

The OAC sat down with Ms. Blatner to chat about her time on the show, what she and Jasmin will be speaking about at YWM2016 and why she is so passionate about the work she does for her clients:

OAC: There were a variety of different weight-loss plans introduced to the contestants over the course of the show. Why do you feel your plan was so successful for Jasmin?

Dawn: I was praying the whole time that if the world needed a plan that was no gimmicks, no fads and was literally just the realistic way that you need to lose weight in a way that was fun and sustainable, then let me do well on the show. I prayed that if this was what the world needed to hear, then I would do well on the show. The main reason why I think my plan helps people lose weight is because there's an element of fun that is missing in a lot of other plans out there... A lot of other plans are very punishing and sort of negative and nasty — and I took it from the opposite angle. I said: "We're going to love ourselves, and we're going to be the team who giggles the most." That's how you stick with stuff. People miss a lot of fun.

As we get to be adults we have less and less fun in our days, and putting that back — especially when it comes to weight-loss — I think that was special and what was in my secret sauce in the end.

OAC: One of the elements to Jasmin's plan was that family was incredibly important to her. How did family being such an integral part of her plan keep her motivated?

Dawn: You cannot do this — you cannot become someone different — in isolation. To lose weight, you literally have to become someone different. Someone who believes you're worth it. Someone who believes that you need to prioritize yourself. Someone who believes that at the end of the day, self-care is numero uno!

You have to become someone different, and if you don't have your spouse or your children and everybody else on board, there's no way it will be sustainable. That doesn't mean you have to have them all sign an official contract to get them on board... a lot of it is attitude and leading with example and being enthusiastic, and them wanting to jump on your train instead of forcing them on your train.

OAC: It was inspiring to see Jasmin keep herself so motivated on the show. What challenges did your team face throughout the journey?

Dawn: A lot of the time, we were always looking at each other thinking, "We have no drama." All of the other teams would have all of this drama, but we led with respect, and we never compared. The very first time I met her, I had her sign a contract that I signed as well that said we would only speak nice things about our bodies — body love — and that we would never compare ourselves because comparisons are the killer of joy, and that we would use the

scale numbers as scientific measurement but we wouldn't let it reflect negatively on ourselves. We really tried to set the tone early on about how we wanted to make this a respectable and fun project.

The only challenge we really ended up facing was about her old clothes. We got in a huge fight (that was not on air) at a

I said: "We're going to love ourselves, and we're going to be the team who giggles the most." That's how you stick with stuff. People miss a lot of fun.

boutique. She thought I was setting her up to be embarrassed at this boutique because she wouldn't fit into the clothes. What viewers did get to see on television however was us getting into a real argument about her wanting to keep all of her extra size clothes. She no longer fit into them, they were too big, and she

didn't want to give them away — she said she wanted to keep them.

I told her: "If you keep those clothes, it is only saying one thing, and it's saying it loud and clear — 'I do not believe that I will be a success.' If you need to keep clothes that are oversized, that is a huge red flag that you do not believe in yourself, you do not believe in me and you do not believe in this plan." So I was not going to leave (her home) without that box of clothes being donated. It wasn't so much about the clothes; it was about the message it sends about believing in yourself.

OAC: You're so passionate about everything that you do with your plan and working with your clients. What is it that makes you motivated in your work?

Dawn: It isn't always easy. At my core, I am a loving, excitable and energetic person, but I wake up just like a lot of people wake-up with self-doubt, a lot of fear, a lot of unworthiness and not feeling great 100 percent of the time. But I have learned to

Portion control that defies gravity.

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Ivliga

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Life is so much more fun when you're coming from that place. Just choose to go up on that ladder, and be a little more light and free! My passion comes from a natural core, but it also comes from a moment of decision where if at any moment we are not happy with how things are going, we can change our attitude about it. Gratitude changes everything.

OAC: You will be returning to the Your Weight Matters National Convention this year, and we're very excited to have you back! What is it about last year's event that made you want to come back this year?

Dawn: It is the high that you get from being in a room of like-minded people. I speak across the country in front of all sorts of groups and sizes, and there is no group of people that I have ever been in that has more love, enthusiasm, kindness, welcoming-ness or warm-ness. It is just a group of people that wants to be there to learn and wants to do better in this world — for themselves, and others.

So do I want to be around that energy? Yes I do! I want spoonful after spoonful of that energy. It's a group of people that motivates me, and I hope to motivate them right back.



Dawn and Jasmin before a fitness challenge on ABC's "My Diet is Better Than Yours."

OAC: You had a pretty motivating message that you presented to attendees last year; what is it that you hope to bring to YWM2016 with your talk?

Dawn: I have never had such a life-changing event as being on a reality show, and putting what I believe to the test with a magnifying glass looking at it and being judged by all of America... My partner, Jasmin Queen, and I, we won the show not because my plan is great and because she's a hard worker — we won the show because of both of those things. Without my plan and without her hard work and enthusiasm and ability to change and wanting to change, we would not have had the magical outcome that we did. I decided I can't be at YWM2016 without this woman — because we did it together!

I hope to be the voice for the plan and how it works, and then have attendees hear from Jasmin's point of view about what is hard when you have a dietitian telling you these things, what goes through your mind? What is the self-talk that got her through some of these tough times? What is she doing to stay motivated — not just while the show was going on — but now? I think that by having it from both angles — the professional and the person listening to this advice— it really gives that whole picture of what it takes these days to lose weight, keep it off and do it in a very loving, kind, compassionate, exciting, motivating and energetic sort of way.

OAC: Let's say we have an individual who's on the fence about whether or not they want to come to YWM2016. What would you say to them to get them to join us in Washington, DC?

Dawn: Everyone's time is precious. When I think about why I would spend my time (at the Convention), out of all the millions of places I could be, it really is that connection that is incredible. I haven't seen it anywhere else. It's this warm connection where you can go by yourself, and leave with way more friends than you came with. I am still connected with participants, and that connection is important.

The lessons that you learn aren't from random gurus; it's actually from scientific-based people who have information you can trust. It's information that you can't find anywhere else, from respected individuals that you can trust. At the same time, you get connections and friends out of this that care about the same thing. Sign me up, and sign me up twice!

"I decided I can't be at YWM2016 without this woman — because we did it together!"

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Retrain Your Brain: How to Change Your Habitual Eating Patterns

by Eliza Kingsford, MA, LPC, NCC

Abitual eating is a tricky thing – partially because all of us do it. Just think of turkey at Thanksgiving, cake on your birthday or popcorn at a movie. We have been taught, through our unique experiences in life, to associate food with certain emotions or habits, but for some people, these triggers can lead to unfavorable behaviors.

Why are food triggers more problematic for some people than others? And why can some people ignore them altogether, while for others, it can cause an all-out binge eating episode? The answer could lie in a person's risk of developing food addiction.

The Science Behind Food Triggers

To put it simply, some researchers say that when we are exposed to "hyper-palatable foods" – foods that are highly processed or are high in added sugar or fat – parts of our brains light up similar to the parts in the brain that light up in response to drugs. If our brain reacts to sugar the same way it reacts to an addictive substance, there will be people who are at risk for using that sugar in a damaging way – just like alcohol or cocaine. Because of this response, the brain will trigger the "sugar-user" to eat more sugar.

Just as some people can have a couple of drinks after work and not have it lead to alcohol abuse, some people can eat hyper-palatable foods and not have it lead to an overconsumption of food. On the other hand, for those brains or those with genetics who are at risk for an addiction, eating certain trigger foods can lead to a damaging and consistent overconsumption of food, without the person realizing why they are overeating.

Food addiction is not yet recognized as a diagnosable disease, and some even question its existence. Researchers do say that if food addiction is real, it likely only affects a small percentage of the population (about 2 percent), meaning those who will actually be diagnosed as "addicted" to food would be a small percentage, although a much larger percentage may be "affected" by the food but not considered addicted.
For the rest of the population that struggles to maintain a healthy relationship with food, food triggers become less of a science and more of an individualized issue. We all have an emotional relationship with food, and we have all created patterns around food that form as we move through our lives. For some, however, food becomes a coping strategy that is used to reduce negative feelings. Some turn to food in the face of triggers such as habit, boredom or stress.

The Myth of Comfort Food

We've all heard the term "comfort food," but what does it really mean? Is the food itself actually comforting, or is it our emotional attachment to the food that creates the illusion of comfort?

In a NASA funded study, researchers at the University of Minnesota found no measurable differences in mood when given comfort food, a neutral food or no food at all. What this might mean is that it is not the ingredients in macaroni and cheese that makes you feel comforted by food, but instead it is the emotional connection you believe you have to macaroni and cheese.

If this is true, the same argument can be made that food doesn't make you feel better — it is all in your mind. If it is all in your mind, then you have the power to change your emotional connection to food. You have the power to channel those emotions into a healthier coping mechanism — one that will not leave you feeling shame and guilt after you've engaged it.

The same is true for those who could be diagnosed as "addicted" to food. Even if you believe you are addicted to food, you still have to make decisions every day about the type of food you are going to consume. If you continue to make food decisions based on emotions or triggers, no matter what the explanation is, you will likely find yourself over-consuming calories you do not want or need.



Managing Your Food Triggers

There are a number of ways to change a food trigger's path. These few steps may help in changing your long-standing patterns with food, whether you are addicted or not.



Become mindful of your food patterns. Do not judge whether your pattern is good or bad, just become aware of what it is.



Keep a food journal. This is one of the easiest ways to be mindful of your food patterns and to hold yourself accountable to them.



Decide if the habit is serving you. Let's face it — if you were not getting something out of a habit, you would not be doing it. That does not mean you *decided* it was serving you. Perhaps it became a habit over time, or perhaps your brain is reacting to the hyper-palatable food you are consuming. In either case, decide if what you really want to be doing is consuming the food that causes you to feel shame, blame and guilt afterwards. Be intentional in your decisions.



Make a game plan. You know your pattern, so how are you going to intervene and change your direction? How will you replace the food trigger behavior? Come up with a few ideas and write them down. Sometimes the act of being intentional about food decisions is enough to make you stop reaching for a trigger food.



Continue to re-evaluate. What alternative coping strategy did you commit to using? How did it work for you? If it did not work, why not? What are you going to do differently next time?

In short: have a plan and put the plan to work!

Conclusion

Regardless of the reason you may be struggling with food triggers, the keys to lasting change are mindfulness, accountability and consistent change. You can retrain your brain to follow different actions once you are aware of patterns that aren't serving you.

About the Author:

Eliza Kingsford, MA, LPC, NCC, is a licensed psychotherapist specializing in weight management, eating disorders and body image. She is Director of Clinical Services for Wellspring, a division of CRC Health Group. As Clinical Director for Wellspring, Eliza works with participants ages five and up, providing weight management solutions throughout the lifespan. As a member of the OAC, Eliza is passionate about changing health reform to include better treatment options for obesity. Eliza is a member of the California Association of Licensed Professional Clinical Counselors and the American Psychological Associaton.

Dear Doctor

"I'm taking insulin and can't seem to lose any weight. Why is it so difficult?"

Answer provided by Robert Kushner, MD

I f the title of this article speaks to you, then you are one of 29 million people in the United States who has diabetes. Chances are that you have type 2 diabetes, which accounts for an estimated 90-95 percent of all diabetes cases. I'll also bet that you are having difficulty managing your weight, since obesity is one of the strongest risk factors for developing the disease. In fact, the link between diabetes and obesity is so strong that many have called the combination of the two diseases "diabesity."

The unintended consequences of some medications used to treat diabetes, like insulin, may cause additional weight gain. Fortunately, newer medications for the treatment of diabetes have been developed that do help with weight-loss. This article will provide a brief review of diabetes and the treatment options available. By reading this article, you will be better informed to have a conversation with your healthcare provider about selecting the best treatment for you.



What is type 2 diabetes?

Type 2 diabetes occurs when your pancreas is not able to produce enough insulin to overcome the resistance caused by excess body fat. The higher the resistance, the more the pancreas has to work. Throughout time, the pancreas becomes exhausted and cannot keep up. Insulin is needed to allow your blood sugar, or glucose, to enter the cells throughout the body.

If insulin cannot do its work, glucose starts to build up in the bloodstream. When the blood sugar level reaches 126 mg/dl, or the hemoglobin A1c (a long-term measurement of glucose control) exceeds 6.5 percent, then a diagnosis of diabetes is made. Since diabetes is a life-long disease and can damage your heart, eyes and kidneys, it is important to seek treatment with a healthcare provider.

Spring 2016

How do I begin to take charge of my diabetes?

Achieving a healthy body weight and engaging in daily physical activity is the cornerstone of diabetes management. As little as a three to five percent of weight-loss can have remarkable effects on improving your blood sugar and reducing health complications linked to type 2 diabetes. In addition to reducing your dietary calories to achieve weightloss, it is also important to limit your carbohydrate intake, particularly carbohydrates found in sugars in bakery goods, snacks and sugar-sweetened beverages.

You should also set a goal of achieving 150 minutes of physical activity each week, which can be achieved by taking a 30 minute brisk walk, five days a week. This will help push the blood sugar into your muscles. Patients who are diagnosed with diabetes are also recommended to see a registered dietitian for personalized lifestyle guidance.

When do I need to take medication to treat my diabetes?

Although it is important to follow a healthy diet, increase physical activity and engage in weight management, medication is commonly needed to help control your blood sugar. Determining when it's time to add medication will depend on how high your blood sugar is, how effective lifestyle management strategies have been and the status of your overall health.

There are nine different classes of drugs to choose from, and they are often used in combination to increase effectiveness since they work in different ways.

Dear Doctor continued on following page



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 List as of 3/30/16

Commonly used medications to treat type 2 diabetes

Medication type	Example of drugs	How it works	Effects on body weight
Biguanide	metformin	Improves your sensitivity to your own insulin	_
Sulfonylureas	Glimepiride, glipizide, glyburide	Increases the release of your body's own insulin	++
Thiozolidinediones	Pioglitazone, rosiglitazone	Improves your sensitivity to your own insulin	+
Alpha-glucosidase inhibitors	Acarbose, miglitol	Slows carbohydrates from being absorbed from your gut	_
Meglitinides	Repaglinide, nateglinide	Rapidly increases release of your body's own insulin	+
Dipeptidyl peptidase IV inhibitors	Sitagliptin, saxagliptin, linagliptin, alogliptin	Increases release of your body's own insulin	0
Sodium glucose-linked transporter-2 inhibitors	Canagliflozin, empagliflozin, dapagliflozin	Increases elimination of glucose in your urine	_
Glucogon-like-peptide-1 agonist (injectable)	Exenatide, liraglutide, dulaglutide, albiglutide	Increases the release of your body's own insulin	
Insulin (injectable)	Lispro, aspart, glulisine, NPH, glargine, detimir	Provides additional insulin to your body	++

– = weight loss; o = weight neutral; + = weight gain

Note: The drugs mentioned in this chart are all examples of generic medications, and you should consult your healthcare provider to find out if your medication is referred to under a different name.

How does my healthcare provider choose which medication to prescribe?

The first medication used is usually metformin due to its history of effectiveness, use, safety, tolerability and cost. This medication is also commonly associated with modest weight-loss, and that weight-loss is often continued throughout the course of treatment.

If a second medication is needed to better control the blood sugar, your healthcare provider has multiple options based upon each medication's effectiveness, cost, side effects, your lifestyle and your personal preferences. Since diabetes is a long-term disease, many patients will need two or three medications to control their body's blood sugar throughout their life.

With the understanding that obesity is a disease and a significant contributing factor to diabetes, many providers are now preferentially choosing medications that are weight neutral or cause weight-loss instead of selecting those that cause weight gain. The effect on body weight for each drug is listed in the table.

Your healthcare provider will take multiple factors into consideration before considering prescribing insulin, one of the most effective treatments for diabetes. The primary reason for choosing insulin is uncontrolled diabetes despite using one, two or multiple oral medications. Although quite effective, insulin needs to be injected once or sometimes several times a day, and it poses a risk of causing patients to develop low blood sugar (hypoglycemia) and gain weight. The use and side effects of insulin are always discussed prior to beginning treatment so that you can be prepared.

If my healthcare provider prescribes insulin, how can I control my weight?

Weight gain is a common side effect of insulin. This is due in part to the improved control of diabetes and the increased uptake of sugar into cells in your body. Weight gain may also occur as a result of hypoglycemia. When your body's blood sugar goes too low, you may experience weakness, lightheadedness, dizziness or a rapid heartbeat.

The treatment is to bring your blood glucose levels up quickly by taking in "quick-fix food" that is equal to 15 to 20 grams of sugar or carbohydrates, such as 1/2 cup of fruit juice, four or five saltine crackers, or two tablespoons of raisins. If this occurs frequently, patients may deliberately increase their calorie intake to avoid the symptoms. Although everyone is different, weight gain from insulin frequently ranges anywhere from four pounds to more than 13 pounds.

Taking a weight-losing diabetes drug along with insulin can limit the weight gain, but it is also important to follow a calorie-controlled diet and engage in daily physical activity. The long-term goal is to keep the insulin dose as low as possible depending upon the control your body has of the diabetes.

Take Home Messages

- Diabetes is a major cause of illness and earlier death rates. Gaining weight and being affected by excess weight or obesity increases the chances of being affected by type 2 diabetes.
- As little as a three to five percent weightloss can have a significant effect on controlling the disease.
- There are nine classes of drugs that are approved by the FDA for type 2 diabetes treatment, many of which have the effect of weightloss in addition to improving the blood sugar.
- Weight gain is commonly seen with insulin use, which can be partially controlled by taking a weight-loss medication at the same time, and by following a healthy lifestyle plan.

About the Author:

Robert Kushner, MD, is a passionate clinician, educator, researcher and advocate in helping to improve the lives of those affected by excess weight and obesity. Dr. Kushner is the Medical Director of the Center for Lifestyle Medicine at Northwestern Memorial Hospital in Chicago and Professor of Medicine, Northwestern University Feinberg School of Medicine, and is also on the OAC's National Board of Directors. Dr. Kushner believes in the power of lifestyle to improve health and body weight. With a background in nutrition and behavior change, he has dedicated his career to personalizing weight-loss diet and treatment plans to meet the needs of each person.

Dr. Kushner will also be speaking at the 5th Annual Your Weight Matters National Convention during the following sessions: "360 Degrees of Movement: Integrating Activity and Exercise into Your Day," and "The Struggle is Real – Why is it so Hard to Manage My Weight?" To contact Dr. Kushner or for more information about his work, visit www.drrobertkushner.com.

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Walking Meditation: A Mindful Approach to Exercise

It's estimated that humans have between 50,000-70,000 thoughts per day, and between 35 and 48 of those thoughts per minute. We don't need statistics to tell us that in our world of advanced technology, we are never alone, disconnected and still.

Solitude is harder to find in a constantly-connected world. Solitude provides the stillness and peaceful time that your body requires to heal. It also helps you evaluate your life, and reflect on what you need to be happy, fulfilled, healthy and at peace with yourself.

"Walk so that your footprints bear only the marks of peaceful joy and complete freedom. To do this, you have to learn to let go – let go of your sorrows, let go of your worries. That is the secret of walking meditation." -Thich Nhat Hanh

Due to technology, today's world is full of constant noises and images like never before. We often are not aware of the toll and stress it's causing in our daily lives, or the negative effect that distractions have on our health and wellbeing. According to the Mayo Clinic, long-term activation of the stress-response system and the continued exposure to cortisol and other stress hormones can disrupt almost all your body's normal processes. This puts you at increased risk of many health problems, including:

- Anxiety
- Depression
- Digestive problems
- Heart disease
- Sleep problems
- Weight gain
- Memory and concentration impairment

This is why it's so important to learn healthy ways to cope with the stress in your life. Walking meditation can be one of several strategies that helps bring you peace, balance and wellbeing to transform your life! Before we discuss walking meditation, however, it's important we discuss two key elements involved in this activity — mindfullness and meditation, and how they play a crucial role in how much you benefit from walking meditation.

Mindfulness

Mindfulness is a mental state achieved by focusing your awareness on the present moment, while calmly acknowledging and accepting your feelings, thoughts and bodily sensations without judgement. It is the conscious effort to focus on the here-and-now, and silence all the chatter that we have going on in our heads 24 hours a day, seven days a week. This inner dialogue can affect our quest for peace and happiness because all too often, our inner chatter is full of judgement, worries and negativity, which leads to daily stress. Negativity attracts negativity, and this is commonly known as "The Law of Attraction."

Many leaders on the subject of mindfulness, including Jon Kabat-Zinn, a leading authority on mindfulness, teach the numerous benefits for practicing mindfulness in our everyday life including:



It's good for our bodies. A seminal study found that, after just eight weeks of training, practicing mindfulness meditation boosts our immune system's ability to fight off illness.



It's good for our minds. Several studies have found that mindfulness increases positive emotions while reducing negative emotions and stress. At least one study even suggests it may be as good as antidepressants in fighting depression and preventing relapse.

It changes our brains. Research has found that mindfulness increases density of gray matter in the brain regions, linked to learning, memory, emotion regulation and empathy.

It helps us focus. Studies suggest that mindfulness helps us tune-out distractions and improve our memory and attention skills.

It fosters compassion and altruism. Research suggests mindfulness training makes us more likely to help someone in need, and increases the activity in our brain involved in understanding the suffering of others and regulating emotions. Evidence suggests it might even boost self-compassion as well.

It helps healthcare professionals cope with stress, connect with their patients and improve their general quality of life. Mindfulness also helps mental health professionals by reducing negative emotions and anxiety, and increasing their positive emotions and feelings of selfcompassion.

It helps us eat better. Practicing mindful eating encourages healthier eating habits, helps people lose weight and helps them savor the food they do eat.

It helps individuals in prison. Evidence suggests mindfulness reduces anger, hostility and mood problems among prisoners by increasing their awareness of their thoughts and emotions, helping with their rehabilitation and reintegration.

It helps veterans. Studies suggest it can reduce the symptoms of Post-Traumatic Stress Disorder (PTSD) in the aftermath of war.

Walking Meditation continued on following page

Meditation

Meditation is the practice of concentrated focus in order to increase awareness of the present moment. It helps reduce stress, promote relaxation and enhance personal and spiritual growth. People who meditate regularly have been shown to feel less anxiety and depression. They also report that they experience more enjoyment and appreciation of life and that their relationships with others are improved.

Meditation produces a state of deep relaxation and a sense of balance and calmness. The great meditation teacher of our time, Deepak Chopra, defines meditation as a process of calming the mind and an affirmation of the individual relationship to the universe.

Meditation has both mental and physical benefits including:

- Reduced stress and anxiety
- Lowered blood pressure and cholesterol levels
- A boosted immune system
- Increased production of the anti-aging hormone DHEA
- Improved duration and quality of sleep
- Helps you become more in tune with your body

The variety of meditation techniques and traditions is nearly countless, but the core of meditation is singular — the cultivation of mindful awareness and expanded consciousness.

New research is also showing that meditation helps restore the brain. A landmark study conducted at Massachusetts General Hospital found that as little as eight weeks of meditation not only helped people feel more calm, but also produced changes in various areas of the brain including growth in areas associated with memory, empathy, sense of self and stress reduction.

Walking Meditation

Walking meditation is "meditation and mindfulness in action." This combination can have both emotional and physical benefits. When you do walking meditation, you are using the mental, physical and emotional experiences of walking as you develop greater awareness in your life.

Walking meditation is a great initiation for beginners to start a meditation practice. Some people enjoy practicing outdoors like at a park or on a sidewalk along the beach. The indoors is fine though, especially if the weather is extreme or if you prefer privacy! Either way, select a place that you don't have to worry about cars, bikes or other physical distractions.

To do walking meditation, find a pathway about 30 to 40 feet long, and simply walk back and forth. When you come to the end of your path, come to a full stop, turn around, pause again for a moment and then start walking again. Keep your eyes cast down without looking at anything in particular.

In walking meditation, you use the experience of walking as your focus. You will become mindful of your experience while walking. Try to keep your awareness involved with the experience of just the act of walking.

One of the biggest differences between sitting and walking meditation is that it is often easier to be more focused and more easily aware of your body while doing walking meditation, compared to sitting forms of meditation practice. When your body is in motion, it is generally easier for most people to be aware of it compared to when you are sitting still.

Walking Meditation continued on page 46

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*Reference our store locator on premierprotein.com to find a store near you.



Walking Meditation continued from page 44

Tips to Begin Walking Meditation

Here are some steps to help you begin your meditation walking practice:

- 1. Stand up straight with your back upright but not stiff. Relax your shoulders. Feel how your feet feel as they are touching the ground and let your weight distribute evenly (it can take a few minutes to be aware of this). Be mindful of your breathing, without trying to control it. Allow the breath to come from the diaphragm (belly) and always make sure your breathing feels natural. Allow the breath to become rhythmic and fluid.
- 2. Fold your hands and let them fall in front of you. This creates some balance for you and keeps your swinging arms from being a distraction.
- **3. Drop your gaze slightly.** This helps you maintain focus. Some people find closing your eyelids half way helps them focus. Slightly smile and let all worry, internal chatter and any sadness fall away from you as you walk.
- **4. Step out with your left foot.** Feel it swing, feel the heel hit the ground, and the ball of your foot, and then the toes.
- 5. Feel the same as the right foot comes forward. You might want to use the traditional labeling of each step by internally saying "lifting, moving, placing" with each part of every step. This can help your mind focus and turn down the internal chatter.
- 6. Be mindful of your walking, make each step a gesture, so that you move in a state of grace. With your attention to your legs and feet, feel the sensations of each step. Feel the legs and feet tense as you lift the leg. Feel the movement of the leg as it swings through the air. Feel the contact of the foot with the ground.
- 7. There is no "right" or "wrong" experience. Just experience how it feels to you. Whenever you notice that the mind has wandered, bring it back to the sensations of your feet walking. Getting a sense of the rhythm of the steps may help maintain a continuity of awareness. Walk with slow, small, deliberate, balanced and graceful footsteps. Be aware of how your body feels as you are walking.
- 8. Walk at a steady pace, slightly slower than in daily life. When your attention wanders, bring it back to the sensations of your feet touching the ground. Let your body "take you for a walk."

Start out in 10-minute sessions and build up to 60 minutes. An added physical benefit is that, when done for extended periods of time, walking meditation can build strength and stamina.





After a while, when both the breath and the walking have slipped into a regular pattern of their own harmony, become aware of the number of footsteps per breath. Make no effort to change the breath, but lengthen or shorten the rhythm of your step just enough so that you have two, three or four steps per inhalation and two, three or four steps per exhalation. Once you have learned your natural rhythm, lock into it. After several months of practice, you will see improvements in your lung capacity.

Conclusion

Practicing walking meditation regularly can make significant changes in your life. The key however is to make walking meditation a regular practice. The positive benefits can be subtle yet measurable, however the true benefits are experienced once you make meditation a part of your life on a regular basis!

Suggested Reading

For more information about Walking Meditation read <u>Peace Is Every Step: The Path of Mindfulness in Everyday</u> <u>Life</u>, by Thich Nhat Hanh, Foreword by H.H. the Dalai Lama, published by Bantam Books.

For more information on Mindfulness, read <u>Wherever you</u> <u>go, there you are</u>, by Jon Kabat-Zinn.



About the Author:

Tracy Martinez, RN, BSN, CBN, is a certified bariatric nurse and program director at Wittgrove Bariatric Center in La Jolla, Calif. She is the past-president of the integrated health section of the American Society for Metabolic and Bariatric Surgery. Ms. Martinez is also a member of the OAC National Board of Directors, an avid animal lover and advocate.

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Healthy Recipes for Every Meal of the Day!

by Sarah Muntel, RD

What's for dinner?

This is the question that haunts many people every day. The daily dread is finding a great meal option that fits into your schedule and is also something your family will eat. Many of us find ourselves in a cooking rut and choose the same meals each week. Without variety, you can get bored and find yourself straying to some not-so-healthy alternatives.

The struggle is real. Americans these days lack time and options. Some find it quicker to run through a fast food restaurant or throw a pan of pizza rolls in the oven and call it a night. It's time to change your tune and begin planning for a healthy mealtime option.

Don't change everything over night. Begin slowly. Here are some easy meal options for breakfast, lunch and dinner. Some may look great, and others may not be an option for you. Pick one or two to start and see what you think!

BREAKFAST

The most important meal of the day. The meal that most often gets skipped and your body's first shot at great nutrition for the day. Many people feel they don't have time, but take a look at the meals below for some simple and delicious options.

Lowfat Protein Cottage Cheese Yogurt Berry Smoothie

For the "I'm running late for my meeting" day:

Ingredients:

- 2 tbsp. lowfat plain yogurt (2 heaping tablespoons)
- 2 tbsp. lowfat 2 percent or lower cottage cheese (2 heaping tablespoons)
- 1/2 cups frozen dark berries (raspberries, blackberries, blueberries, strawberries)
- 1/2 cups water
- 28 grams of vanilla or plain whey protein powder

Directions:

- 1. Pour in yogurt, water and cottage cheese in bottom of blender.
- 2. Add frozen berries and protein powder.
- 3. Blend until smooth.

Source: www.sparkrecipes.com

Quick Tip: Swap out any fruit you would like to change the taste!

Loaded Baked Egg Omelet Muffins

For the "I have some extra time, so I will make breakfast and save the rest for a crazy morning" day:

Makes 12 muffins

Ingredients:

- Nonstick cooking spray
- 6 large whole eggs
- 6 large egg whites
- 1/4 tsp. kosher salt
- Black pepper
- 3 strips cooked chopped bacon
- 3 tbsp. thawed frozen spinach, drained
- 3 tbsp. diced tomatoes
- 3 tbsp. diced onion
- 3 tbsp. cup diced bell pepper
- 2 oz. shredded cheddar

Directions:

- 1. Preheat the oven to 350 degrees Fareneheit. Spray the muffin tins with cooking spray.
- 2. In a large bowl, whisk the eggs and egg whites, then season with salt and pepper.
- 3. Mix in the remaining ingredients.
- 4. Place tins on a cookie sheet and bake 20 to 25 minutes, until set.

Source: www.skinnytaste.com

Quick Tip: Balance out the meal with a cup of fresh berries.

Blueberry Oatmeal Breakfast Bars

For the "I can make these ahead so I can grab one anytime I need it" day:

Ingredients:

- 1 cup whole oats
- 1 cup oat flour
- 1/2 cup brown sugar
- 1/2 tsp. salt
- 1/2 tsp. baking soda
- 1/2 cup almond milk
- 2 eggs
- 1/4 cup melted butter
- 1 tsp. vanilla extract

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- 1 cup fresh blueberries
- 1/2 cup chopped walnuts
- 1/3 cup shredded coconut

Directions:

- 1. Preheat oven to 350 degrees Fahrenheit. Grease an 8-inch square pan.
- 2. Combine whole oats, oat flour, brown sugar, salt and baking soda together in a bowl. Stir in almond milk, eggs, butter, and vanilla extract until well combined. Fold in blueberries and walnuts. Spread mixture into prepared square pan. Top with coconut.
- 3. Bake in the preheated oven until edges are golden and coconut is brown, about 35 minutes. Cool in the pan for 10 minutes before cutting into squares.

Source: www.allrecipes.com

Quick Tip: Wash down your breakfast with a glass of milk for extra calcium and protein!

Whole Grain Waffles with Strawberries and Almonds

For the "my kids want something healthy, but I want to make it nutritious" day:

Ingredients:

- 1/2 cup rolled oats
- 1/2 cup whole-wheat flour
- 1 tbsp. ground flaxseed
- 2 tsp. baking powder
- 1/4 tsp. pumpkin pie spice
- 1/4 tsp. salt
- 1 egg, separated
- 3/4 cup skim milk
- 1/4 cup mashed banana
- 1 tbsp. canola oil
- Vegetable oil cooking spray
- 3/4 cup nonfat plain Greek yogurt, divided
- 1 1/2 cups sliced strawberries, divided
- 3 tbsp. sliced almonds, divided
- 6 tsp. maple syrup, divided

Directions:

- 1. Heat waffle iron. In a blender, process oats until flourlike in texture.
- 2. In a bowl, combine oats with flour, flaxseed, baking powder, pumpkin pie spice and salt. In a second bowl, beat egg white until stiff peaks form. In a third bowl, mix milk, banana, oil and egg yolk. Gently stir milk-banana mixture into dry ingredients; gently fold in egg white until just combined.
- 3. Coat waffle iron with cooking spray; pour 1/3 cup batter onto iron, and cook until waffle is crispy and pale gold, about 4 minutes. Repeat twice. Top each waffle with 1/4 cup yogurt, 1/2 cup strawberries, 1 tablespoon almonds and 2 teaspoon syrup.

Source: www.epicurious.com

Quick Tip: For extra protein serve with low fat turkey sausage.

Healthy Recipes continued on following page

Spring 2016

Healthy Recipes continued from previous page

LUNCH

It's time to refuel for the second part of the day. No matter where you are, at work, running errands or with your kids, take a break, mindfully eat and choose a nutritious packed meal for the rest of your day.

Cheddar and Apple Sandwich

For the "I am tired of peanut butter and jelly" day:

Ingredients:

- 2 slices of bread (preferably multigrain, Italian, or French)
- 1 tsp. whole-grain mustard
- 1 oz. thinly sliced Cheddar
- Several pieces of thinly sliced apple

Directions:

- 1. Spread each slice of bread with mustard.
- 2. Top 1 slice with the Cheddar and the apple slices.
- 3. Sandwich with the remaining bread.

Source: www.myrecipes.com

Quick Tip: Add a serving of low fat Greek yogurt as a side dish!



Avocado Egg White Salad Sandwich

For the "I need something to do with this healthy avocado" day:

Makes 1 serving

Ingredients:

- One 100-calorie flat sandwich bun or 2 slices light bread
- 1 1/2 oz. (about 3 tbsp.) mashed avocado
- 2 tbsp. plain fat-free Greek yogurt
- 1/4 tsp. garlic powder
- 1/8 tsp. black pepper
- 5 hard-boiled egg whites, chopped
- 1 tbsp. real crumbled bacon
- 1 tbsp. finely chopped red onion

4

Directions:

- 1. Lightly toast bun halves or bread slices. Once cool, place in a sealable bag or wrap in foil.
- 2. In a medium bowl, combine avocado, yogurt, and seasonings. Mix until smooth and uniform. Gently stir in chopped egg whites, bacon and onion. Place in a sealable container, and pack with an ice pack.
- 3. Just before eating, divide egg white salad between the toasted sandwich bun halves/ bread slices, and enjoy open-faced.

Source: www.hungrygirl.com

Quick Tip: When choosing chips, choose the baked ones to decrease your fat intake — or better yet — try veggies and low fat dip.

Grilled Raspberry Chicken Salad

For the "I have some extra chicken I need to use" day:

Ingredients:

- 2-3 chicken breasts
- 1/2 cup raspberry vinaigrette dressing
- 1/2 tsp. garlic powder
- 1/2 tsp. rosemary
- 4 cups lettuce (torn)
- 1 cup cucumber (sliced)
- 1/2 cup mandarin orange (drained)
- 1/2 cup raspberries
- 1/4 cup red onion (chopped)
- 1/2 cup pecans (chopped)

Directions:

- 1. Mix 1/2 cup dressing with garlic powder and rosemary. Place chicken breasts in a plastic zip-top bag and add dressing, then marinate in the fridge for 30 minutes to 8 hours.
- 2. Grill chicken 4 to 5 minutes over medium high heat. Remove from heat and cover. Allow to rest for 10 minutes to come to temperature.
- 3. Meanwhile, place lettuce on 4 plates. Divide other ingredients equally among the 4 plates. Slice each chicken breast and put equal amount of chicken on each plate. Add additional dressing and enjoy.

Source: www.food.com

Quick Tip: Add a serving of whole grain crackers or a whole grain roll to boost your whole grain intake for the day!

50

Spring 2016

Easy Tortilla Pizzas

For the "I am looking for a healthy option for frozen pizza" day:

Ingredients:

- Tortilla(s)
- Cooking spray
- Tomato sauce or pizza sauce
- Shredded cheese (mozzarella and Parmesan, for example)
- Desired toppings

Directions:

- 1. Preheat the oven to 375 degrees Fahrenheit.
- 2. Spray your tortilla(s) with cooking spray.
- 3. Spread a thin layer of tomato or pizza sauce over the tortilla.
- 4. Sprinkle shredded cheese over the pizza sauce.
- 5. Add the desired toppings.
- 6. Place the tortilla pizza onto a baking sheet, and bake for 8 to 10 minutes.

Source: www.momables.com

Quick Tip: Don't forget your veggies! Add a side salad to this lunch.



DINNERS

For many, this is where the struggle begins. After a full day, it can be difficult to find a meal that works into your schedule. You may need a variety of meals, which may vary from crockpot meals, make ahead casseroles, or a traditional meal.

Healthy Recipes continued on following page

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Turkey Santa Fe Zucchini Boats

For the "I am looking for a healthy Mexican option that my family will still eat" day:

Ingredients:

For the filling:

- 12 oz 93 percent lean ground turkey
- 3/4 cups canned black beans, rinsed and drained
- 3/4 cups corn kernels, fresh or frozen
- 1 hot pickled serrano pepper, chopped (or jalepeño) more to taste
- 1 large diced tomato
- 1 cloves garlic, minced
- 1/4 cup chopped onion
- 2 tbsp. chopped cilantro
- 1 tsp. cumin
- Kosher salt to taste

For the zucchini:

- <u>5 medium</u> zucchini (7 oz each), cut in half lengthwise
- 1/2 cup jarred mild salsa
- 15 tbsp. shredded reduced-fat Mexican blend cheese

Directions:

- 1. Bring a large pot of salted water to boil. Preheat oven to 400 degrees Fahrenheit.
- 2. Using a small spoon or melon baller, hollow out the center of the zucchini halves, leaving 1/4-inch thick shell on each half.
- 3. Chop the scooped out flesh of the zucchini in small pieces and set aside 3/4 of a cup to add to the turkey filling, (squeeze excess water with a paper towel) discarding the rest or save to use in another recipe.
- 4. Drop zucchini halves in boiling water and cook 1 minute. Remove from water.
- 5. In a large skillet brown the turkey and season with salt. When the turkey is browned, add onion, garlic, black beans, cilantro, serrano pepper, diced tomatoes, reserved zucchini and cumin.
- 6. Mix well and simmer on low, covered for 20 minutes. Remove lid, add corn and simmer an additional 5 minutes or until all the liquid reduces.
- 7. Place the salsa in the bottom of a large baking dish (or two medium size dishes) and place the hollowed-out zucchini cut-side-up in the dish.
- 8. Using a spoon, fill the hollowed zucchini boats dividing the filling equally, about 1/3 cup in each, pressing firmly.
- 9. Top each with 1 ½ tablespoons of shredded cheese. Cover with foil and bake 35 minutes until cheese is melted and zucchini is cooked through.



Source: www.skinnytaste.com

Quick Tip: Serve with baked tortilla chips and salsa for added crunch.

Stuffed Pepper Soup with Quinoa

For the "I need a meal for tonight and maybe tomorrow" day:

Ingredients:

- 2 large green bell peppers, cut into ½ inch dice
 - 1 large onion, diced
- 3 garlic cloves, chopped
- 2 tsp. olive oil
- 1 and 1/4 lb. ground sirloin or round use lean so there is very little fat to drain
- One 28 oz. can petite diced tomatoes
- One 16 oz. can tomato sauce
- One 32 oz. carton beef stock
- 1/2 tsp. dried marjoram
- 2 tsp. Worcestershire sauce
- 2 tsp. soy sauce
- 2 tsp. Truvia Brown Sugar replacer or 4 teaspoons Splenda
- Sea salt and fresh pepper to taste
- 2 cup cooked quinoa, optional

Directions:

- 1. In a large, heavy pot, sauté the peppers, onions and garlic in the olive oil until very soft and lightly golden at edges.
- 2. Add the beef and cook until browned, breaking up with a wooden spoon. Add tomatoes, tomato sauce, beef stock, marjoram, Worcestershire, soy sauce, and sugar replacer.
- 3. Add 1-teaspoon salt and 1/2 teaspoon black pepper and add more to taste. Bring to a boil, lower heat and simmer for 25 to 30 minutes, until peppers are very soft and soup has thickened.
- 4. This soup is better the next day as with most soups or stews. Serve in shallow bowls with a scoop of cooked quinoa.

Source: www.bariatriceating.com

Quick Tip: Pack this up for lunch tomorrow or serve it again!

Weeknight Lemon Chicken Skillet Dinner

For the "I had a long day at work, let's eat something heathy and quick" day:

Ingredients:

- 12 oz. baby red potatoes, halved
- 1 tbsp. olive oil, divided
- 4 (6-ounce) skinless, boneless chicken breast halves, pounded to 3/4-inch thickness
- 3/4 tsp. kosher salt, divided
- 1/2 tsp. freshly ground black pepper, divided
- 2 thyme sprigs
- 4 oz. cremini mushrooms, quartered
- 1 tbsp. chopped fresh thyme
- 1/4 cup whole milk
- 5 tsp. all-purpose flour
- 1 and 3/4 cups unsalted chicken stock (such as Swanson)
- 8 very thin lemon slices
- 1 (8-ounce) package trimmed haricots verts (French green beans)
- 2 tbsp. chopped fresh flat-leaf parsley

Directions:

- 1. Preheat oven to 450 degrees Fahrenheit.
- 2. Place potatoes in a medium saucepan; cover with water. Bring to a boil, and simmer 12 minutes or until tender. Drain.

- 3. Heat a large ovenproof skillet over mediumhigh heat. Add 1 teaspoon oil to pan.
- 4. Sprinkle chicken with 1/4 teaspoon salt and 1/4 teaspoon pepper.
- 5. Add chicken and thyme sprigs to pan; cook 5 minutes or until chicken is browned.
- 6. Turn chicken over. Place pan in oven; bake at 450 degrees Fahrenheit for 10 minutes or until chicken is done. Remove chicken from pan.
- 7. Return pan to medium-high heat. Add remaining 2 teaspoons oil. Add potatoes, cut sides down; mushrooms; and 1 tablespoon thyme; cook 3 minutes or until browned, stirring once.

8. Combine milk and flour in a small bowl, stirring with a whisk. Add remaining salt, remaining pepper, flour mixture, stock, lemon, and beans to pan; simmer 1 minute or until slightly thickened. Add chicken; cover, reduce heat, and simmer 3 minutes or until beans are crisp-tender.

9. Sprinkle with parsley.

Source: www.cookinglight.com

Quick Tip: Serve with a side of fresh veggies and a whole grain roll for a balanced dinner!

Healthy Recipes continued on following page



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Roasted Cheddar Broccoli

For the "I have some leftover meat and I just need a good side" day:

Ingredients:

- 1 head of broccoli
- 3 tbsp. olive oil
- Salt
- 1/2 cup panko breadcrumbs
- 1 cup grated sharp cheddar cheese
- 1 bunch of scallions
- Pinch of nutmeg

Directions:

- 1. Cut 1 large head broccoli into long spears. Toss with 2 tablespoons of olive oil on a baking sheet; season with salt. Roast at 450 degrees Farenheit until almost tender, about 15 minutes.
- 2. Toss 1/2 cup breadcrumbs (preferably panko) with 1 cup grated sharp cheddar, 1 bunch sliced scallions, 1 tablespoon of olive oil and a pinch of nutmeg.
- 3. Sprinkle on the broccoli and roast for 15 more minutes.

Source: www.foodnetwork.com

Quick Tip: To lower the fat content, use reduced fat cheddar cheese. Add a cup of fresh fruit to balance out the meal.

Conclusion

Your mouth is probably watering after reading so many great recipes. Pick a few to try this week, or if you need other ideas, choose any of the great Web sites listed to find thousands or recipes and meal ideas. Remember, the old saying is true — "You are what you eat." Spend a little time in the kitchen for a lifetime of good health!

About the Author:

Sarah Muntel, RD, is the Bariatric Coordinator at Community Bariatric Surgeons in Indianapolis, IN. She has 15 years of experience working with bariatric patients and loves to work with people as they change their lives and improve their health. Her favorite part of her job is her weekly support group. In her free time, Sarah enjoys spending time with her husband and three children.

Ms. Muntel will also be presenting at the 5th Annual Your Weight Matters National Convention in the session "Sifting through Nutrition Advice: The Best of the Best."



Want to discover even more great recipes? There are many great websites to choose from for healthy meal options!

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