

Very low-calorie diets (VLCDs) can help support you in your weight-loss goals.



The VCLD diet of less than 800 daily calories comes primarily from meal-replacement products. Under practitioner supervision, this plan is designed to produce rapid weight loss while preserving muscle mass by providing adequate levels of protein each day. Healthy Transformation™ high-protein meal replacements are a convenient way to get high amounts of protein with low carbohydrates.

Talk to your healthcare practitioner to learn if this partial meal replacement plan is right for you.



News from the OAC

The OAC recaps a successful Obesity Care Week (OCW) 2021; Highlights our recent advocacy work; and promotes our Monthly Giving Program.

OAC Community Perspectives:
Overcoming Stigma to Find My Treatment Path
Interview with Peter Brady

OAC Member Peter Brady tells his story of how opening up his mind to bariatric surgery helped him regain his life and health back.

Making Home Fitness Affordable and Effective by Roger E. Adams, PhD, CISSN, ACE-CPT At-home exercise equipment can be great and useful, but it can also be costly. It's time to take advantage of affordable at-home programs and exercises that can be just as effective.

14 IMCIVREE™ (setmelanotide) – The First FDA-Approved Therapy for Specific Rare Genetic Diseases of Obesity by Jennifer Miller, MD

With science on our side, a new FDA-approved therapy, IMCIVREE™, can finally make life easier for those who battle obesity due to a genetic disease.

The Stop Weight Bias Campaign: A First of its Kind
The OAC's Stop Weight Bias Campaign (launched in January
2021) has been a momentous success! The OAC is proud to
celebrate this important campaign that is spearheading the fight
against weight bias and obesity stigma.

Dear Doctor: I Have Obesity.
Should I Get the COVID-19 Vaccine?

by Fatima Cody Stanford, MD, MPH, MPA; Sujatha Seetharaman, MD, MPH; and Ashwin Krishnan With all of the uncertainty surrounding COVID-19, it's understandable that there is caution around the COVID-19 vaccine which is now being administered. Learn about the new COVID-19 vaccine and how it can affect people with obesity. Kid's Corner: The Mental and Physical Benefits of Yoga for Children

by Ally Ford

Yoga is a great way to relax, relieve stress and exercise at the same time. Learn how yoga can be mentally and physically beneficial to your child.

Trading in Fad Diets for Sustainable Eating *by Holley Nash, RDN, LD*

Fad diets are often unrealistic and not supported by science. It's time to find something effective that actually works. Exploring different lifestyle options may be your answer to weight-loss or weight management.

34 Single Anastomosis Duodenal Switch (SADI) – What Can You Expect from the New Bariatric Surgery Device? by Walter Medlin, MD, FACS

Medical professionals are constantly trying to improve bariatric surgery. Recently, they have researched and tested SADI, a modified duodenal switch made easier.

Behavioral Options for Weight-Loss by Paul Davidson, PhD

When considering weight-loss, most people immediately look at which diet and exercise plan they can start. Behavioral options can often be just as effective as a diet or exercise plan and may work better for your weight-loss journey.

Ways to Keep Your Mind Engaged While Working from Home

by Natalie-Jean Schiavone, PhD
Working from home can be tiring and oftentimes,
your mind tends to wander. Taking advantage of these
mind-engaging tips and tricks will keep you focused
all day.



Spring 2021

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Issue 3

Weight Matters 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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Message—from the—

OAC

Obesity Action Coalition

Chairwoman of the Board

Hello-Everyone,

Wow! The winter of 2021 flew by for OAC! We officially launched our Stop Weight Bias Campaign; led Obesity Care Week, which had more participating "champions" than ever before; worked to reintroduce the Treat and Reduce Obesity Act (TROA) in Congress to expand obesity treatments available to Medicare recipients; celebrated World Obesity Day with our partners around the world; and continued our monthly OAC-TV broadcasts covering topics ranging from how weight bias affects access to obesity treatments to managing childhood obesity in the family. We aimed all of this work at OAC's goals of reducing weight bias, promoting payment for science-based obesity treatments, and educating the public about obesity. Most of all, we gave people affected by obesity a strong voice. If you haven't had a chance, please check out Facebook.com/ObesityActionCoalition to see the videos that were posted during OCW2021. Feel free to share the information on social media and with family and friends. Many thanks to all the OAC staff and volunteers who worked tirelessly to accomplish this work!

Against these very positive achievements, the COVID-19 pandemic continued to take a heavy toll. Mounting evidence confirmed that people with obesity have a high risk for severe infections and even death. Vaccines have brought new hope. But unfortunately, that hope has been accompanied by misleading click-bait headlines and stories. We've also seen a hearty dose of weight bias added when vaccines and obesity are discussed. Some of this information may have led you to think that vaccines aren't effective if you have obesity. Other uninformed statements may make you feel guilty if you qualify for a vaccine based on your weight.

Let's get to the facts about COVID-19 vaccines and obesity. At the time of publication, the FDA has approved three vaccines for emergency use: the Pfizer, Moderna, and Johnson & Johnson vaccines. The data underlying each approval showed that the vaccines are effective in people with obesity. The OAC has worked with medical experts to explain how the Pfizer and Moderna vaccines work in this issue of *Weight Matters Magazine*. Past OAC Chair of the Board and current Board member Ted Kyle (RPh, MBA) has also written several articles about this issue on his blog at **ConscienHealth.org**.

As you decide about being vaccinated, I encourage you to look beyond the headlines to learn more. If you are hesitating because you don't feel you deserve priority consideration because of your weight, gently remind yourself that obesity is no different than type 2 diabetes, cancer, or any other underlying medical condition the U.S. Centers for Disease Control identified as leading to higher risk for serious COVID-19 infections. You are entitled to protect your health, no matter what anyone else may say.

NEWS from the OAC Obesity Action Coalition

OAC Calls on President Biden to Make the Disease of Obesity a Priority in His Administration

With a new U.S. presidential administration in office, the Obesity Action Coalition (OAC) and other health advocates are seeking new opportunities to grow support for stronger obesity care policies. On World Obesity Day (March $4^{\rm th}$) during Obesity Care Week 2021, OAC Members sent President Biden a letter asking him to make the disease of obesity a priority in his administration. With a unified voice, we advocated for recognition of obesity as a chronic disease in order to reduce stigma and expand access to evidence-based treatments.

Now, the OAC has our eyes on the 2021 Treat and Reduce Obesity Act, which was reintroduced into the 117th Congress in early March. We are asking our members and supporters to visit the OAC Action Center (**ObesityAction.org/Action-Center**) to urge your state's Senators and House of Representatives member to cosponsor and support the final passage of this crucial legislation. Given the link between obesity and COVID-19 severity, it is more important than ever that we come together and call for expanded access to both prevention and treatment avenues.

Join OAC's Monthly Giving Program and Make a Big Impact with a Small Monthly Gift!

OAC Monthly Donors are a special group of our most valued partners dedicated to our mission to elevate and empower all those affected by obesity.



OAC Monthly Donors provide a regular recurring gift that is automatically transferred from a credit card or bank account and can be adjusted or suspended at any time. No matter the amount, monthly donations have a serious impact: knowing we can count on receiving your gift makes it easier for us to expand on and create new programs while minimizing fundraising costs. Monthly Donors will receive regular organization updates as well as acknowledgment online and in our Annual Report!

For more information about our Monthly Donor program, please visit **ObesityAction.org/Donate/Monthly-Donation.**

"I give monthly to the OAC because the Obesity Action Coalition is close to my heart and doing critical work in obesity education and advocacy. They've built a supportive community where I've met some of my dearest friends and trusted colleagues. A monthly gift helps me budget and is a way to say 'I'm with you!' each month!"

– Amber Huett-Garcia, OAC Monthly Donor

Thank You for Helping Us Change the Way We Care!

Obesity Care Week (OCW) 2021 took place earlier this year from February 28th to March 6th, and it experienced outstanding support from 100 Champion Organizations, breaking all previous records, in addition to thousands of individuals from more than 80 countries participating and taking action to change the way we care about obesity.



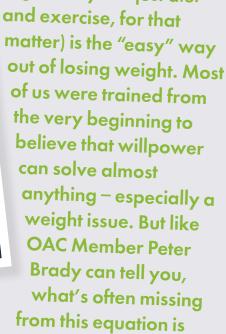
With the help of every person who signed-up for OCW Alerts, showed their support and took action during OCW2021, we were able to join together to raise awareness and advocate for a better world for people living with obesity. This awareness week had different focus days that highlighted topics like Weight Bias, Obesity Prevention and Treatment, World Obesity Day, Access to Care and Childhood Obesity. Some of the actions during OCW2021 included:

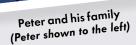
- Supporting the Treat and Reduce and Obesity Act (TROA)
- Supporting our World Obesity Day 2021 letter to President Biden

Additionally, more than 100 legislators were contacted to support TROA and more than 35 virtual legislator visits occurred during OCW2021. As a result of this successful week, people from different parts of the world united in supporting OCW's global vision, used their voice to share why awareness campaigns like OCW are so important to change the world, and shared with us why they care about obesity. Social media is a powerful tool and it was also at the center of this awareness week! For the entire week, Facebook, Twitter, LinkedIn and Instagram feeds were filled with OCW2021-related posts, comments, stories, pictures and videos that helped us raise awareness about Obesity Care Week 2021.

OAC Community Community Community Overcoming Stigma to Find My Treatment Path Interview with OAC Community Member Peter Brady | Hyde Park, MA

Nod your head if you've ever heard that bariatric surgery (or any obesity treatment that goes beyond just diet





education – knowledge of obesity as a chronic, complex disease.

Like many of us, Peter's lack of education about obesity, and the treatment options available, kept him for a long time from seeking the help he needed. So did weight bias and treatment stigma. Every day, these things prevent people who are living with obesity from being able to make informed and effective decisions about their health. They are also why so many diets fail, why weight regain is common, and why so many of us feel "stuck" in our attempts. So, the Obesity Action Coalition (OAC) asked Peter to tell us more about his journey and what it has taught him about stigma and treatment.

Q&A with Peter Brady



Q: Can you tell us more about your journey with obesity?

I was an athlete when I was younger and in high school, so I was always active. I felt like I could eat whatever I wanted. College was when I really started to gain weight. That's when I also started the cycle of constantly yo-yo dieting. I would participate in anything that had the word "diet" in it. Often, the diets worked and I would lose weight, but I would eventually fall back into the same habits because they were so strict. Each time, my weight just increased. I would exercise to try and offset bad eating, but I came to learn that you can't out-train a bad diet.

There is a lot that goes along with the peaks and valleys of obesity. I could never put the nutrition and exercise pieces together at the same time. The mental strain of "always being on a diet" and not being able to "keep the weight off" can cause self-doubt. I felt hopelessness that made me just want to eat my feelings. Now that I've had bariatric surgery (Gastric Sleeve), all of this has changed. I'm happy to say that I'm in the best shape of my life and every day is getting better. Sure, I still have my struggles, as does everybody. I'm just taking it one day at a time. It took me a long time to gain all of my weight and I know it will not come off over night. It takes a plan. This is not a diet. This is my lifestyle and I am enjoying this part of my journey. I'm happy to share it today.

There is a lot that goes along with the peaks and valleys of obesity.

Q: How did you make the decision to have bariatric surgery and what did that process look like for you?

It definitely wasn't a rash decision. My doctor would bring it up at my yearly visit. At first, I was mad because I thought I should be able to lose weight on my own. I thought bariatric surgery was the "easy way out." After the fourth time hearing it from my doctor and countless weight-loss attempts of my own, I decided that I needed help. I was uncomfortable and not sleeping well. I was tired and fearful that as a father, I wouldn't be able to be there for my kids. I just wasn't a healthy version for myself, my fiancé, my kids or my family. I had long taken care of everyone else. It was time to take care of myself. If I didn't put myself first, how could I be there for anyone else?

If I didn't put myself first, how could I be there for anyone else?

I had to wrap my head around wanting to have bariatric surgery, but I was ready. I started by attending an informational session to learn how the process worked. I think that what people often perceive about bariatric surgery, and the reality of what it is, are two different things. The

process of seeking treatment opened my eyes to seeing bariatric surgery as a tool that could help me be successful.

Peter continues to pursue a healthy lifestyle after bariatric surgery.







The OAC knows that the journey with weight can be challenging but we also know that great things happen when we learn, connect and engage.

Sign-up to stay connected to our mission, latest news, events, ways to get involved, information and all things OAC!



Let's Connect!

ObesityAction.org/get-connected

Q: You've said before that stigma toward obesity treatment and bariatric surgery affected your decision to seek help. How so?

Yes. I think that when it came to discussing my decision to have surgery, people would look at me and say, "Can't you just do it on your own?" "You were an athlete." "You've done it before." "Are you scared?" "What if something happens during surgery?"

My response to them was that my biggest fear was what might happen if I didn't have the surgery. Obviously, I needed help. I think that's why it took me so long. In some ways, I felt like I was giving up and surgery was the last resort. What I really had was a lack of information, and that is what drives me to help people understand what seeking treatment for obesity is all about.

Q: To what degree do you think knowledge and education play a role in the decision-making process for managing obesity?

I think knowledge and education play a huge factor in what you do and don't do. You really can't make an informed decision if you don't understand the situation. I think the mental health aspect of this process is something that should not be understated. The mental health process is work, too. With bariatric surgery, you will lose weight and many things will change – but it's not uncommon to feel like part of you is still the same person struggling with severe obesity. In some ways, you may want that part of you to be there – to remind you not where you've been, but where you are going.

The weight bias that is often felt as a person struggling with obesity has a tendency to stick around and affect every decision that you make. But the OAC Community is amazing, and if more people in the world were aware of these resources, things might be different. Bariatric surgery can have so many benefits for the right person who is considering it. It's definitely not easy, but the fruits of your labor can be tremendous.

Q: Do you see any differences between men and women in typical approaches to weightloss, or the support they are offered?

That's an interesting question! When you think about it, there wouldn't appear to be any differences. I don't know if there really are any, but I do know from experience that any support groups I am part of tend to be female-dominated. I think there has been an increased effort to target men as well in different forms of media. The lack of men in the bariatric community directly affects who is available for peer-to-peer support. Don't get me wrong - I've learned a great deal from the women I have spoken with and am very thankful for any and all support. But being able to speak with men who have been in your shoes and are walking similar journeys is different. There are so many similarities, yet so many differences. That is what has been great about bariatric surgery for me, specifically. We are all facing similar struggles, but in the bariatric community, we have this fantastic tool that connects us.



The weight bias that is often felt as a person struggling with obesity has a tendency to stick around and affect every decision that you make.

Q: What would you tell someone who is looking for help to manage their weight but doesn't know where to start?

Ask questions - lots of questions. And when you're done, ask some more. Reach out to someone who has sought help for their obesity. Talk to your doctor. Talk to me! There are so many great tools out there - whatever those may look like for you. Everyone is different. It took me four years to seek help and decide on bariatric surgery. I didn't even take my own advice. I didn't learn as much as I could have. I didn't educate myself. I made decisions, and a lack of decisions, based on my perceptions of what obesity treatment was or could be. Go online and research – just be careful with tools like social media. I think that when/if you are ready to try something, you will know just the right time and place. Look at your personal timeline and make your decision based on good information.



Do You Want to Share Your Story?

Whether you have a story about navigating obesity, facing weight stigma, or inspiring others, your voice is important. Visit the OAC's story project at **WeightoftheWorld.com** to share one today. Not sure what to say? Consider one of our question prompts to guide you.

If you would like your story to be featured in a future issue of *Weight Matters Magazine*, please email **membership@obesityaction.org**.

THE BARIATRIC SUPPORT GROUP SOLUTION



Keep it fun and engaging with our completely done for you groups including:

- leader talking points
- patient handouts
- social media promo
- patient survey included!















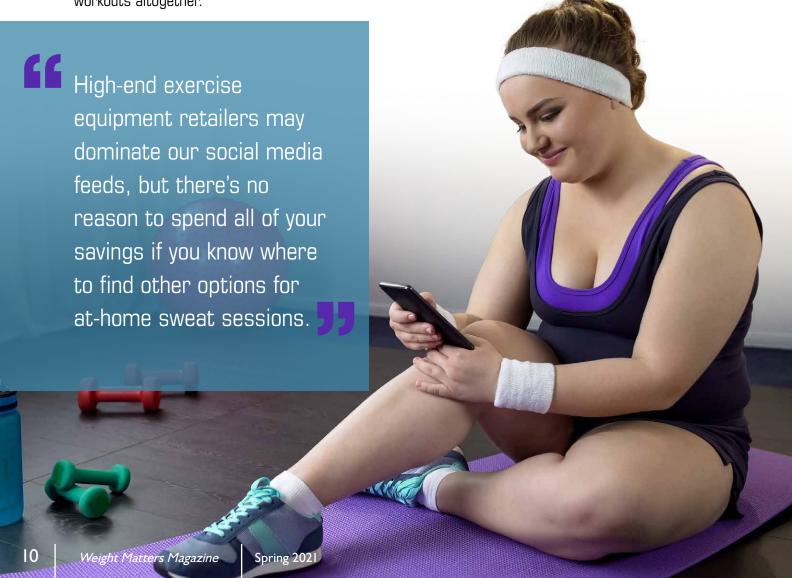
AVAILABLE AT BARIATRIC-UNIVERSITY.COM

Making Home Fitness Affordable and Effective

by Roger E. Adams, PhD, CISSN, ACE-CPT

Disclaimer: Consult with a healthcare provider before starting an exercise plan or program.

With COVID-19 disrupting our lives, our daily routines have changed to adapt to social distancing and health guidelines to reduce the spread of the virus. Going to the gym, taking a yoga class and group exercise classes have been put on indefinite hold for many of us. Without them, there is a gap in our routine that needs to be filled. These changes have been difficult, leading many people to give up on their workouts altogether.



Home Fitness

You may have noticed the surge in at-home fitness equipment advertisements for fancy equipment that can be very expensive. What they don't tell you is that you don't need to spend that much money to have access to great workouts and live a healthier life. High-end exercise equipment retailers may dominate our social media feeds, but there's no reason to spend all of your savings if you know where to find other options for at-home sweat sessions.

It's time to start taking advantage of the digital options that are now available to us. There are many great workout apps and online classes that you can stream or access on-demand to do at your leisure for a fraction of the cost of that gym membership. These workout tools have surged in popularity due to their low cost and their ease of use, portability and variety.

How to Pick the Best Workout for YOU

Before you download every app and/or purchase streaming services, you should consider:

- The type of workout that is best suited to your interests
- The space you have to work with at home
- The equipment that is needed
- The amount of time you can realistically spend working out at home

Look for workouts that are an outlet for your stress and anxiety. Sometimes, breaking from your daily work routine can help your mental health tremendously and make you more motivated.

When I begin working with clients, and we develop their wellness goals together, I ask them to identify what physical movement they really enjoy. I do this because regardless of the latest trendy workout, you won't commit unless you find some enjoyment in it.

As you are considering your fitness goals, here are different kinds of workouts that have apps and services you may want to consider:

- Walking, jogging and running progressions
- · Yoga, Pilates and stretching
- Strength and resistance training
- · Aerobics and dance fitness
- Indoor and outdoor cycling routines
- High-Intensity Interval Training workouts (HIIT)

Fitness Apps

Once you have identified the kind of workout you want to try, the next step is to find an app that is right for you. Here are types of fitness-related apps for you to consider:

Personal trainer apps - These include ready-to-go exercise routines via videos, illustrations, three-dimensional models or just text. Many of these allow you to choose a workout that matches your personal preferences, set a difficulty level and start training muscles from the comfort of your home.

Some highly-rated personal trainer apps include:

- Centre
- FIIT
- Aaptiv
- Adidas Running App by Runtastic

Loghook apps - Allows for planning and recording personal exercise routines. These can be a great solution for self-directed training, so they may be better for those that already have a fitness plan in place or don't need as much guidance.

Here are some great apps to keep you on track:

- BodySpace
- Cody
- Pact
- Nike+



Home Fitness continued on page 12

Home Fitness continued from page 11

Gamification apps - These apps can be very successful at increasing your physical activity by making exercise fun through gameplay. They use gamification features and social elements to motivate users. Some of them even link to other users using the same app so you can socialize and motivate each other while remaining safe and socially distant. These apps can include prizes based on your levels of success.

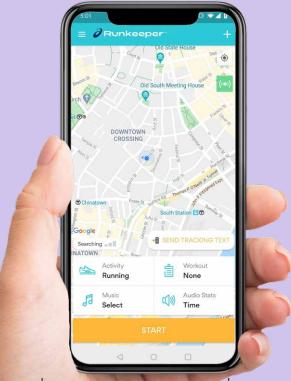
Some popular gamification apps include:

- Skimble
- Strava
- RunKeeper
- · Rithmio Edge

Fitness activity tracking apps - These apps track all sorts of activity, including steps, stairs, hours slept, distance traveled and calories burned. Some of the newer ones even monitor heart rate. While these don't create workouts for you, they do a great job of tracking how active you are during the day, your step goals and your heart rate.

Helpful fitness activity tracking apps include:

- Map My Run
- Fitness Buddy
- JEFIT Workout Planner
- MyFitnessPal





Streaming Services

If you are more inclined to work out inside or have a dedicated area of your home for workouts, a streaming service on a tablet or television may be a better option for you. The cost for streaming services is normally very similar to what you would pay for a workout program on a workout app. They also have their own set of advantages:

Subscriptions - You pay a small fee that is much less than the membership you would be paying at a crowded gym. These subscriptions are usually pay-as-you-go so you don't have to make a large commitment of time or money. They make it easy to cancel and overall are hassle-free.

Popular fitness subscriptions include:

- Grokker \$15 a month
- Daily Burn \$20 a month
- Glo \$18 a month
- ClassPass \$29 a month

Real-time group workout options - If you prefer the motivating setting of group fitness, some streaming services have real-time group options that let you be part of a virtual group from the safety of your own home — no mask or gym required. No more rushing through traffic and panicking to make that gym class on time — now just log in and get your workout in!

Some of the fun, real-time group workouts you can attend include:

- 305 Fitness
- Blink Fitness
- · Dance Church
- Forward_Space
- Sky Ting
- Yogaworks

Working Out at Home is Fun, Easy and Affordable!

As you can see, anyone can find great at-home workouts for little to no cost. There are dozens, if not hundreds, of digital choices out there to keep you motivated and focused on your fitness goals. But before you dive in, as with any goal, planning is always key. First, identify what your fitness and wellness goals are. Second, select the types of activities and exercises you enjoy. Only then should you consider workout apps and streaming services. Fitness should be enjoyable and something that you want to commit to.

Sometimes the hardest part of doing something new is getting over the overwhelming amount of choices and diving in. I'm not suggesting that you won't miss the social aspects of working out around people, but making your workout fun and comfortable is possible.

What's important to remember is that your new life and circumstances don't need to look like your pre-COVID-19 routine to be healthy. There are a lot of options out there, so don't get discouraged!

About the Author:

Roger E. Adams, PhD, CISSN, ACE-CPT, is the owner of eatrightfitness, an evidence-based private practice focusing on weight management, sports performance nutrition and wellness coaching, located in Oklahoma City. He has more than 23 years of experience working with clients in person and remotely to achieve better health and fitness. Additionally, Dr. Adams speaks at business seminars, health fairs, and non-profit organizations about the ever-changing field of nutrition and fitness. Dr. Adams holds a doctorate in nutrition from Texas Woman's University and is a certified personal fitness trainer by the American Council on Exercise (ACE). He is also a certified sports nutritionist by the International Society of Sports Nutrition (ISSN), as well as an active member in the Obesity Action Coalition; The Obesity Society; the Sports, Cardiovascular, and Wellness Nutrition; Nutrition Entrepreneurs; and the weight management dietetic practice groups of the Academy of Nutrition and Dietetics. Recently, Dr. Adams became a Master Instructor with the ISSN and teaches internationally to educate health professionals on the importance of diet and exercise. More information about Dr. Adams is available at EatRightFitness.com.

Sometimes the hardest part of doing something new is getting over the overwhelming amount of choices and diving in.

IF YOU'RE CONSIDERING WEIGHT-LOSS SURGERY, YOU DON'T HAVE TO DO IT ALONE.

Your weight-loss journey might seem overwhelming. With the right team on your side, it doesn't have to be. That's why we've created online tools to provide you with:

- Tips for talking with your doctor about weightloss surgery
- Guidance for affording and preparing for weight-loss surgery
- Materials to help your family support you before, during, and after surgery

To learn more, visit https://www.medtronic.com/us-en/patients/treatments-therapies/bariatric-surgery.html



IMCIVREE™ (setmelanotide) -

The First FDA-Approved Therapy for Specific Rare Genetic Diseases of Obesity

by Jennifer Miller, MD



What is IMCIVREE™ (setmelanotide)?

The U.S. Food & Drug Administration (FDA) recently approved IMCIVREE™ (setmelanotide), which is a daily injection given under the skin. It was approved for chronic weight management in adult and pediatric patients six years of age and older with obesity due to these genetic conditions:

- Proopiomelanocortin (POMC) The neuron system that causes weight-loss. If you are deficient in POMC, it can affect your inability to lose weight.
- Proprotein convertase subtilisin/kexin type
 1 (PCSK1) Disrupts the regulation of glucose
 homeostasis and food intake. Maintaining glucose
 homeostasis would mean that your body is using
 glyocen and insulin to balance each other out so that
 your body remains steady and healthy. If they are
 unable to do this, your body is not in homeostasis.
- Leptin receptor (LEPR) deficiency Causes constant hunger and quick weight gain leading to obesity.

These conditions occur when both copies of the relevant gene (*one inherited from the mother and one from the father*) have a specific change, or variant.

We all have pathways that are responsible for carrying messages between the brain and the body. One of these pathways signals to the body when to eat and when to stop

eating, and helps regulate metabolism. Changes in the POMC, PCSK1, and LEPR genes can "block" this pathway, stopping these messages from getting through. Symptoms of POMC, PCSK1, or LEPR deficiency, include severe obesity early in life and intense hunger. IMCIVREE™ is the first-ever FDA-approved therapy for obesity due to these conditions.



The Usage of IMCIVREE™

IMCIVREE™ should not be used in people with obesity due to suspected POMC, PCSK1, or LEPR deficiency not confirmed by genetic testing (benign or likely benign result), or other types of obesity not related to POMC, PCSK1, or LEPR deficiency, including obesity associated with other genetic conditions and general obesity. It is not known if IMCIVREE™ is safe and effective in children under six years of age.

Why Would I Need IMCIVREE™ (setmelanotide)?

People living with obesity due to POMC, PCSK1 or LEPR deficiency struggle with:

- Extreme, insatiable hunger all the time
- Focusing on anything else except for hunger

Insatiable hunger, or hyperphagia, is not the same as regular hunger. It is a deep hunger that feels like the body is always in need of food. Children, from early infancy up to the age of 10, may gain far more weight than would be expected for their age. This is called early-onset obesity. IMCIVREE™ helps activate the areas in the brain that control appetite, feeling full, and metabolism to help lose weight and keep it off.

Research into these diseases is ongoing and is helping us gain a better understanding of disease-causing genetic variants. The use of genetic testing to identify and properly diagnose patients with certain genetic variants can help physicians, patients and families to better understand the underlying cause of certain severe cases of obesity.



The use of genetic testing to identify and properly diagnose patients with certain genetic variants can help physicians, patients and families to better understand the underlying cause of certain severe cases of obesity.

IMCIVREE™ continued on page 16

Genetic Testing

Before IMCIVREE™ can be used, a genetic test must show that the changes, or variants, are considered pathogenic, likely pathogenic or uncertain. Genetic testing results don't always provide a "yes" or "no" answer. In some cases, testing may provide clues rather than a clear diagnosis. A positive result means the genetic test revealed a change in your genes that is likely to explain your/your child's obesity. These are known as pathogenic (disease-causing) or likely pathogenic variants.

Sometimes, tests return a result of "Variant of Unknown Significance" or "VUS." This means that there is a variant in your genes, but scientists do not have enough information to know with certainty that the variant is disease-causing. Always speak with your doctor or a genetic counselor to understand your specific results.

IMCIVREE™ Clinical Study Results

IMCIVREE™ was evaluated in two clinical studies of people six years and older: one study for people with obesity due to POMC or PCSK1 deficiency, and one for people with obesity due to LEPR deficiency.

In the study of people with obesity due to POMC or PCSK1 deficiency, IMCIVREE™ reduced weight and hunger. Eight out of ten people lost at least 10% of their body weight at one year. After one year, eight participants also experienced a decrease in hunger.

In the study of people with obesity due to LEPR deficiency, IMCIVREE™ reduced their weight and hunger, too. Five out of eleven people lost at least 10% of their body weight at one year.

In both studies, treatment was stopped for a period of time to see how IMCIVREE™ was impacting weight and hunger. Over this withdrawal period, weight increased. When the withdrawal period ended and treatment was re-started, weight-loss continued. Hunger generally increased but decreased once again when treatment was re-started.

Side Effects of IMCIVREE™

As with many medicines, side effects are possible. IMCIVREE™ may cause serious side effects, including:

- Problems with male and female sexual function
- Depression and suicidal thoughts or actions
- Increased skin pigmentation
- Darkening of skin lesions (moles or nevi) that a patient already has
- Benzyl alcohol toxicity

Benzyl alcohol is a preservative in IMCIVREE™ that can cause serious side effects, including death, in premature and low-birth weight infants who have received medicines that contain benzyl alcohol.

Common side effects of IMCIVREE™:

- Injection site reactions
- Darkening of the skin
- Nausea
- Headache
- Diarrhea
- Abdominal pain
- Back pain

- Fatigue
- Vomiting
- Depression
- Upper respiratory tract infections
- Erections that happen without any sexual activity in males

Conclusion

I know that many patients and families who live with rare genetic diseases of obesity face an often-burdensome stigma associated with severe obesity at any age. There have been too many individuals who end up in tears during an initial visit with me because they had been struggling to find anyone who will listen or understand how difficult it can be to continue without a diagnosis or an effective treatment plan for themselves or their loved ones. Some have told me stories about locking cabinets and refrigerators and significantly limiting social activities to try to control disruptive food-seeking behavior. Even then, some patients pulled cabinet doors off their hinges, foraged for food in trash and left home to find food.

The science of obesity continues to evolve, and we must recognize that it is a complex disease that can sometimes be driven by genetics. Understanding the underlying causes of obesity can help healthcare providers identify, diagnose, and ultimately manage individuals with rare genetic diseases of obesity – a patient community with high unmet needs.

About the Author:

Jennifer Miller, MD, is a professor in the division of pediatric endocrinology at the University of Florida. She specializes in the care and treatment of individuals with genetic causes of early-onset excessive weight gain. Dr. Miller served as a principal investigator for clinical trials evaluating setmelanotide and is a consultant to Rhythm Pharmaceuticals, the manufacturer of IMCIVREE™.

Do these two symptoms sound like you?



Extreme weight gain early in life?



Hyperphagia, or insatiable hunger?



If you answered "**yes**," a rare genetic disorder of obesity may be the cause.

To learn more and receive updates, visit **LEADforRareObesity.com**.









Are You Ready to Be Part of the Solution? January of this year marked an important stepping stone for the Obesity Action Coalition (OAC). On January 12th, we launched the Stop Weight Bias Campaign with the commitment to raise awareness, put a stop to weight bias and push equality forward.



• Did you know that **90**% of U.S. adults say weight bias exists?

 How about the fact that 42% of U.S. adults have experienced weight bias?

This campaign is the product of years of work, research, and more importantly, people and their stories. Our actions and words matter. Weight bias is harmful - and with this campaign, we hope to show all the reasons why we need to stop it while inviting everyone to become part of this movement.

The Stop Weight Bias Campaign spotlights different voices and stories while presenting facts about the harmful effects of weight bias and why we need to stop it. This awareness campaign has different components that enhance and highlight its importance, like an interactive website, radio and video Public Service Announcements (PSAs), social media and much more.

Since its launch, the Stop Weight Bias Campaign has created a new movement where people can learn, share and sign-up to become part of the solution to stop weight bias. We are excited to see this vision come to life and grateful for the support that it has received from thousands of people around the world wanting to learn more about weight bias and share their stories and our resources to educate others on this important issue.



of U.S adults say weight bias exists



of U.S adults say they have experienced weight bias



of people say weight bias has impacted their ability to control their weight

Stop Weight Bias continued on page 20

#StopWeightBias Highlights

- The Stop Weight Bias Campaign launched on January 12th, 2021 through a special broadcast with more than one thousand views from more than 20 countries. It started a conversation on why this campaign was necessary, what it hoped to accomplish and how people could join this new movement.
- To this date, this campaign is supported by 35
 Champion organizations with different health focuses and from different countries, who also believe that it's time to stop weight bias.
- Since its inception, Stop Weight Bias has received more than one hundred mentions on social media, has generated more than five thousand social media interactions, and the official hashtags of this campaign - #StopWeightBias and #BePartoftheSolution - have been used more than one thousand times across social media platforms.

While the Stop Weight Bias Campaign had a strong start, there's still more to be done and you can help us by becoming part of the solution. Here's how:

- Sign-up to learn more about this campaign by visiting
 StopWeightBias.com/sign-up
- Make a donation to help us fund a better future without weight bias. You can donate here:
 StopWeightBias.com/donate
- Follow us on social media @StopWeightBias (Facebook, Instagram and Twitter)
- Share your story with us and help us bring light to this important issue:
 StopWeightBias.com/stories/submit-your-story/
- Share our resources, become an advocate of this cause and use our toolkit to help us spread the word: StopWeightBias.com/promo-toolkit



Save Date

RECHARGE YOUR HEALTH THROUGH YWM2021 - VIRTUAL!

Experience the latest science-based education on weight & health presented by leading experts delivered in an easy-to-understand format!



EVENT #1:

Saturday, July 17 1 - 3:30 PM EST

EVENT #2:

Sunday, July 18 1 - 3:30 PM EST

EVENT #3:

Saturday, July 24 1 - 3:30 PM EST

EVENT #4:

Sunday, July 25 1 - 3:30 PM EST

Embracing Change. Moving Forward. Recharging Your Health.



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- ✓ FREE Registration & Affordable Paid Registration Options
- ✓ Dynamic Event Schedule & Diverse Virtual EXPO Hall
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Take a sneak peak at some of this year's virtual sessions:

- Diet is a Noun, Not a Verb Eating for Your Health
- Fact Check: Covid-19, Obesity and What You Can Do
- Beyond Weight-loss: Exercise for Your Health and Wellbeing
- Let's Get Digital: New Ways to Manage Weight with Changing Technology

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Dear Doctor

I Have Obesity. Should I Get the COVID-19 Vaccine?



by Fatima Cody Stanford, MD, MPH, MPA (pictured); Sujatha Se<mark>etharam</mark>an, MD, MPH; and Ashwin Kri<mark>shnan</mark>



This article was written before the Johnson & Johnson COVID-19 vaccine became available.

None of us could have predicted that a global pandemic would surface in 2020. This COVID-19 pandemic, caused by the SARS-CoV-2 virus, has been the greatest health crisis that we have faced since World War II. Emerging research has shown that being overweight or having obesity can increase the risk of experiencing major health complications from COVID-19. Those affected by obesity are now asking themselves: Is the COVID-19 vaccine safe for me?

What You Need to Know About the COVID-19 Vaccine

The current development of vaccines to the novel coronavirus (*SARS-CoV-2 virus*) within a year has been a remarkable accomplishment by modern medicine. The two major vaccines available today are both mRNA (*messenger RNA*) vaccines developed by Pfizer-BioNTech and Moderna. The mRNA vaccines are a new type of vaccine that protects the body against infectious diseases. mRNA vaccines teach the body how to create harmless proteins characteristic of the virus. These proteins can trigger an immune response inside our bodies to induce the production of antibodies against the virus. These antibodies can protect us, so that if we were to contract COVID-19 in the future, our immune system will be ready to respond and will prevent us from getting sick.

While there is still uncertainty surrounding COVID-19, people have a lot of questions regarding the vaccine. Luckily, we have those answers:



What are the benefits of getting vaccinated?

Data from clinical trials have shown that COVID-19 vaccines can be highly effective in preventing COVID-19 infection and can particularly keep us from getting seriously ill, even if we do contract the virus.



Is the COVID-19 vaccine effective for people with obesity?

According to the Food and Drug Administration (FDA), both the Pfizer-BioNTech and Moderna COVID-19 vaccines have been proven to be equally effective in individuals with obesity versus those without obesity.



Are the vaccines safe?

Large clinical trials conducted by the manufacturers on several thousands of participants have shown that the COVID-19 vaccines are safe and effective. The studies done by the FDA have shown that the benefits of receiving the vaccine far outweigh the risks associated with a severe case of the COVID-19 infection.



How is the vaccine administered?

The Pfizer-BioNTech vaccine is administered in two 0.3 mL doses, each delivered intramuscularly (*through the muscle*) through an injection to those 16 years of age and older. Each dose of the Pfizer-BioNTech vaccine is given 21 days apart.

The Moderna vaccine is administered in two 0.5 mL doses, each delivered intramuscularly through an injection to those 18 years and older. Each dose of the Moderna vaccine is given 28 days apart.



Are there any side effects to the COVID-19 vaccine?

For both vaccines, the most common side effects reported were:

- Pain at the injection site
- Arm soreness
- Nausea
- Vomiting
- Fatigue
- Fever
- Headache
- Chills
- Body aches
- Swollen lymph nodes (in the same arm as the injection)

Side effects of the COVID-19 vaccine were reported more often after the second dose of the vaccine compared to the first dose.



Platinum

Novo Nordisk

Gold

American Society for Metabolic & Bariatric Surgery
Bariatric Advantage
Potomac Currents

Silver

Amgen
Boehringer Ingelheim
Eli Lilly
Ethicon
Intercept Pharmaceuticals
Medtronic
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Bronze

Geisinger Healthcare System
Naturally Slim®
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Rhythm
Rocky Mountain Associated Physicians

PatronBariatric Medicine Institute

Bariatric University.com
Billings Clinic
BonusLife.com/Walter Medlin, MD
ConscienHealth
Jaime Fivecoat
Gainesville Medical Obesity Specialty Clinic
Gelesis

HorizonView Health Livliga®/Mindful Eating Medi-Weightloss®

New Life Center for Bariatric Surgery Niagra Metabolic & Bariatric Services

 ${\it ProCare Health Bariatric Vitamins \& Supplements}$

Lloyd Stegemann, MD Christopher D. Still, DO

The Obesity Society

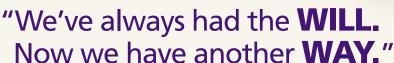
Weight & Life MD/Nadia B. Pietrzykowska, MD Woman's Hospital

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List as of 3/23/2021

When it comes to

LOSING WEIGHT AND KEEPING IT OFF





What is Saxenda®?

Saxenda® (liraglutide) injection 3 mg is an injectable prescription medicine used for adults with excess weight (BMI \geq 27) who also have weight-related medical problems or obesity (BMI \geq 30), and children aged 12-17 years with a body weight above 132 pounds (60 kg) and obesity to help them lose weight and keep the weight off. Saxenda® should be used with a reduced calorie diet and increased physical activity.

- Saxenda® and Victoza® have the same active ingredient, liraglutide, and should not be used together or with other GLP-1 receptor agonist medicines.
- It is not known if Saxenda® is safe and effective when taken with other prescription, over-the-counter medicines, or herbal weight-loss products.
- It is not known if Saxenda® is safe and effective in children under 12 years of age.
- It is not known if Saxenda® is safe and effective in children aged 12 to 17 years with type 2 diabetes.

Important Safety Information

Do not share your Saxenda® pen with others even if the needle has been changed. You may give other people a serious infection or get a serious infection from them.

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

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

Possible thyroid tumors, including cancer. 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.

In studies with rats and mice, Saxenda® and medicines that work like Saxenda® caused thyroid tumors, including thyroid cancer. It is not known if Saxenda® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid carcinoma (MTC) in people.

Do not use Saxenda® if you or any of your family have ever had MTC, or if you have an endocrine system condition called Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).

Who should not use Saxenda®?

Do not use Saxenda® if:

- you or any of your family have ever had MTC or if you have MEN 2.
- you are allergic to liraglutide or any of the ingredients in Saxenda®.
- you are pregnant or plan to become pregnant. Saxenda® may harm your unborn baby.

Before taking Saxenda®, tell your health care provider about all of your medical conditions, including if you:

- are taking certain medicines called GLP-1 receptor agonists.
- have severe problems with your stomach, such as slowed emptying of your stomach (gastroparesis) or problems with digesting food.
- have or have had problems with your pancreas, kidneys or liver.
- have or have had depression or suicidal thoughts, or mental health issues.
- are breastfeeding or plan to breastfeed. It is not known if Saxenda® passes into your breast milk. You and your health care provider should decide if you will use Saxenda® or breastfeed.

Tell your health care provider about all the medicines you take, including prescription, over-the-counter 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 health care provider if you take diabetes medicines, especially insulin and sulfonylurea medicines.





Managing your weight long term requires more than willpower alone

Saxenda® can help you lose weight and keep it off

- ▶ When you lose weight, your **body fights back** by changing your appetite hormone levels, which can lead you to **regain the weight** you've lost.
- ➤ Saxenda® helps regulate your appetite by working like one of your body's fullness hormones—helping you to eat less, so you can lose weight and keep it off.

Ask your health care provider about FDA-approved Saxenda®

Check your prescription coverage at **SaxendaCoverage.com**



Important Safety Information (cont'd)

How should I use Saxenda®?

• Inject your dose of Saxenda® under the skin (subcutaneously) in your stomach area (abdomen), upper leg (thigh), or upper arm, as instructed by your health care provider. **Do not inject into a vein or muscle**.

What are the possible side effects of Saxenda®?

Saxenda® may cause serious side effects, including:

- inflammation of the pancreas (pancreatitis). Stop using Saxenda® and call your healthcare provider right away if you have severe pain in your stomach area (abdomen) that will not go away, with or without vomiting. You may feel the pain from your stomach area (abdomen) to your back.
- gallbladder problems. Saxenda® may cause gallbladder problems, including gallstones. Some gallbladder problems need surgery. Call your health care provider if you have any of the following symptoms: pain in your upper stomach (abdomen), fever, yellowing of your skin or eyes (jaundice), or claycolored stools.
- increased risk of low blood sugar (hypoglycemia) in adults with type 2 diabetes who also take medicines to treat type 2 diabetes such as sulfonylureas or insulin.
- risk of low blood sugar (hypoglycemia) in children who are 12 years of age and older without type 2 diabetes.
- Signs and symptoms of low blood sugar may include: shakiness, sweating, headache, drowsiness, weakness, dizziness, confusion, irritability, hunger, fast heartbeat, and feeling jittery. 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 health care provider should check your heart rate while you take
 Saxenda®. Tell your health care professional if you feel your heart racing or
 pounding in your chest and it lasts for several minutes.

- 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 health care 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. Stop using Saxenda® and get medical help
 right away if you have any symptoms of a serious allergic reaction including
 swelling of your face, lips, tongue, or throat, fainting or feeling dizzy, very
 rapid heartbeat, problems breathing or swallowing, or severe rash or itching.
- 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 health care provider right away if you have any mental changes that are new, worse, or worry you.

The most common side effects of Saxenda® in adults include nausea, diarrhea, constipation, vomiting, injection site reaction, low blood sugar (hypoglycemia), headache, tiredness (fatigue), dizziness, stomach pain, and change in enzyme (lipase) levels in your blood. Additional common side effects in children are fever and gastroenteritis.

Please see Brief Summary of Information about Saxenda® on the following page.

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.



Brief Summary of Information about Saxenda® (liraglutide) injection 3 mg

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 1-844-363-4448

Do not share your SAXENDA® pen with others even if the needle has been changed. You may give other people a serious infection or get a serious infection from them.

What is the most important information I should know about SAXENDA®? Serious side effects may happen in people who take SAXENDA®, including:

Possible thyroid tumors, including cancer. 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. In studies with rats and mice, SAXENDA® and medicines that work like SAXENDA® caused thyroid tumors, including thyroid cancer. It is not known if SAXENDA® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid carcinoma (MTC) in people.

Do not use SAXENDA® if you or any of your family have ever had a type of thyroid cancer called medullary thyroid carcinoma (MTC), or if you have an endocrine system condition called Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).

SAXENDA® is an injectable prescription medicine used for adults with obesity or overweight (excess weight) who also have weight related medical problems, and children aged 12 to 17 years with a body weight above 132 pounds (60 kg) and obesity to help them lose weight and keep the weight off.

- SAXENDA® should be used with a reduced calorie diet and increased physical activity.
- SAXENDA® and VICTOZA® have the same active ingredient, liraglutide, and should not be used together or with other GLP-1 receptor agonist medicines.
- It is not known if SAXENDA® is safe and effective when taken with other prescription, over-the-counter medicines, or herbal weight loss products.
- It is not known if SAXENDA® is safe and effective in children under 12 years of age.
- It is not known if SAXENDA® is safe and effective in children aged 12 to 17 years with type 2 diabetes.

Who should not use SAXENDA®?

Do not use SAXENDA® if:

- you or any of your family have ever had a type of thyroid cancer called medullary thyroid carcinoma (MTC) or if you have an endocrine system condition called Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).
- you are allergic to liraglutide or any of the ingredients in SAXENDA®.
- are pregnant or plan to become pregnant. SAXENDA® may harm your unborn baby.

Before taking SAXENDA®, tell your healthcare provider about all of your medical conditions, including if you:

- are taking certain medicines called GLP-1 receptor agonists.
- have severe problems with your stomach, such as slowed emptying of your stomach (gastroparesis) or problems with digesting food.
- have or have had problems with your pancreas, kidneys or liver.
- have or have had depression or suicidal thoughts, or mental health issues.
- 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 use SAXENDA® or breastfeed

Tell your healthcare provider about all the medicines you take including prescription, over-the-counter 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 diabetes medicines, especially insulin and sulfonylurea medicines. Talk with your healthcare provider if you are not sure if you take any of these medicines.

How should I use SAXENDA®?

- Inject your dose of SAXENDA® under the skin (subcutaneously) 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. Taking too much SAXENDA® may cause severe nausea, severe vomiting, and low blood sugar (hypoglycemia).

What are the possible side effects of SAXENDA®?

SAXENDA® may cause serious side effects, including:

- See "What is the most important information I should know about SAXENDA®?
- inflammation of the pancreas (pancreatitis). Stop using SAXENDA® and call your healthcare provider right away if you have severe pain in your stomach area (abdomen) that will not go away, with or without vomiting. You may feel the pain from vour stomach area (abdomen) to your back.
- 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:
- opain in your upper stomach (abdomen) ovellowing of your skin or eyes (jaundice) o fever clay-colored stools
- increased risk of low blood sugar (hypoglycemia) in adults with type 2 diabetes mellitus who also take medicines to treat type 2 diabetes mellitus such as sulfonylureas or insulin.
- risk of low blood sugar (hypoglycemia) in children who are 12 years of age and older without type 2 diabetes mellitus
- Signs and symptoms of low blood sugar may include:
 - o shakiness o weakness sweating \circ confusion o fast heartbeat o headache o dizziness
- o feeling jittery drowsiness o irritability

Talk to your healthcare provider about how to recognize and treat low blood sugar. You should check your blood sugar before you start taking SAXENDA® and while you

- 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.
- 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. Stop using SAXENDA®, and get medical help right away if you have any symptoms of a serious allergic reaction including:
- o swelling of your face, lips, tongue, or throat
- oproblems breathing or swallowing o fainting or feeling dizzy
- o severe rash or itching very rapid heartbeat
- 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.

The most common side effects of SAXENDA® in adults* include:

- · injection site reaction
- change in enzyme (lipase) levels in your blood
- low blood sugar (hypoglycemia) • diarrhea
- constipation headache stomach pain
- vomiting · upset stomach (dyspepsia)

*additional common side effects in children are fever and gastroenteritis

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

These are not all the possible side effects of SAXENDA®. 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® go to www.SAXENDA.com or contact: Novo Nordisk Inc. 800 Scudders Mill Road, Plainsboro, NJ 08536 1-844-363-4448.

SAXENDA®, VICTOZA®, NovoFine®, and NovoTwist® are registered trademarks of Novo Nordisk A/S.

PATENT Information: http://novonordisk-us.com/products/product-patents.html

This Medication Guide has been approved by the U.S. Food and Drug Administration

Revised: 12/2020



• tiredness (fatigue)

dizziness

Dear Doctor continued from page 23



Is there any reason someone should not receive the COVID-19 vaccine?

According to the Centers for Disease Control (CDC), anyone who experienced a severe allergic reaction to their first dose of any COVID-19 mRNA vaccine should not receive their second COVID-19 vaccine.

There are two substances in both vaccines that someone may be allergic to as well:

- **Polyethylene Glycol** A liquid or waxy solid used in medicine to make them stay in the body longer.
- Polysorbate Used as an emulsifier/stabilizer in vaccines.

People with a history of allergies involving the above substances should consider a consultation with an allergist/immunologist to determine whether they should receive the vaccine.



Will the vaccine prevent me from getting the coronavirus?

The COVID-19 vaccine will not prevent you from getting the virus, but it can help decrease the severity of the illness if you do end up contracting the virus.



How much does the vaccine cost?

The federal government is providing the COVID-19 vaccine free of cost.



Should I still take precautionary measures after receiving the vaccine?

Yes, it will take a long time until enough of the population is vaccinated and protected from the virus before we can stop taking precautionary measures.



Should I receive the COVID-19 vaccine in the event of a prior history of COVID-19 infection?

The CDC recommends that the COVID-19 vaccine be given to individuals even if they have already had a COVID-19 infection due to the severe health consequences associated with the virus and due to the possibility of a re-infection.

The COVID-19 vaccine will not prevent you from getting the virus, but it can help decrease the severity of the illness if you do end up contracting the virus.



Conclusion

Although we can all certainly celebrate these speedy innovations, we must remember that no vaccine provides 100% protection. Based on evidence from clinical trials done by the CDC, the Pfizer-BioNTech vaccine was 95% effective and the Moderna vaccine was 94.1% effective against preventing COVID-19 infection. Therefore, it is important for us to continue to practice effective precautionary measures put forth by public health and medical experts such as social distancing, wearing our masks and frequent hand washing.

About the Authors:

Fatima Cody Stanford, MD, MPH, MPA, is a fellowship-trained obesity medicine physician and scientist at Massachusetts General Hospital and Harvard Medical School who received her BS and MPH from Emory University as a MLK Scholar, her MD from the Medical College of Georgia School of Medicine as a Stoney Scholar, and her MPA from the Harvard Kennedy School of Government as a Zuckerman Fellow in the Harvard Center for Public Leadership.

Sujatha Seetharaman, MD, MPH, is a fellowship-trained obesity medicine physician, a board-certified pediatrician and an adolescent medicine physician. She has been in clinical practice for the past 23 years and recently completed her obesity medicine fellowship at the Massachusetts General Hospital, MA.

Ashwin Krishnan is a sophomore at Emory University, Atlanta, GA. He is majoring in neuroscience and behavioral biology with the intent of pursuing a career in medicine. He is very passionate about the field of obesity medicine as well as research into solving disparities in health outcomes.



The MENTAL & PHYSICAL

Benefits

of Childre

by Ally Ford

As a busy mom with two teenagers, I continue to notice and grow concerned about the heightened stress they face in this ever-changing world. A study by the American Psychological Association reported that stress levels in teens rival that of adults, where teens reported their stress level was 5.8 on a 10-point scale, compared to adults who said their stress level was at a 5.1. Naturally, I am seeking tips and tools to share with my children to help them stay balanced, centered and healthy. One of the go-to tools I encourage my children to practice is yoga.

YOGA AND MINDFULNESS

Oftentimes, when people hear the word yoga, the first thing they think of is flexibility. However, yoga is more than just "stretching." Yoga encompasses a multitude of practices that address health, body and mind. The benefits of mindfulness practices like yoga for humans in general – and especially for children – are numerous:

- Stress relief
- Increased focus
- Reduced feelings of stress and anxiety
- Increased feelings of emotional well-being
- Better sleep
- Better physical health
- Increased strength

For these reasons, more parents and schools have started incorporating yoga into their daily routines.

THE PHYSICAL BENEFITS OF YOGA

Yoga includes physical poses or postures combined with a deep, controlled breath. These two components together are what make yoga exercise unique. From a physical standpoint, the poses can range from extremely relaxing to extremely challenging and can increase physical strength and flexibility.

Physical Strength

Yoga can focus on poses that realign the spine by re-educating our awareness of correct posture. These exercises are usually defined as more relaxing, but can help immensely in straightening your back. The more physically difficult yoga poses are those which build immense strength as we support the weight of our body on one leg, or solely on our arms. Many yoga poses also help strengthen the core.

Flexibility

At the opposite end of the spectrum, yoga helps increase flexibility over time, with poses that keep the body bending and stretching in new ways. By increasing your flexibility, yoga can also increase your range of motion and improve circulation into and through joints and muscles. Yoga is also one of the only exercises with a focus on exercises for the back, designed to improve the strength of the spine. A relatively healthy level of flexibility in the body helps decrease the likelihood of injury as children participate in

THE MENTAL BENEFITS OF YOGA

One of my favorite things about yoga, especially when doing it with children, is that it benefits them both mentally and physically.

As children are growing and going through different stages of life, it's important they take time to focus on their mental health and learn concentration, acceptance and awareness.

Concentration

Methodical yoga movements combined with controlled breathing require a lot of concentration, and this is where incredible transformation becomes possible. Kids may not realize that while moving and breathing in this specialized way, they are actually also training their mind to focus in the moment on the activity at hand, and this by definition is mindfulness.

Mindfulness involves training the mind to single-task instead of multi-task, helping children develop the ability to hold their concentration on activities for longer periods of time. A growing body of evidence shows that mindfulness has a number of positive effects on reducing feelings of stress.

Acceptance

However, there is another important component of mindfulness built into yoga, and that is a certain attitude – one of acceptance and non-judgment. Yoga teaches kids to try their best and release thoughts of perfection that they may push on themselves. Yoga encourages kids to instead practice acceptance and get in touch with their emotions.

As this acceptance develops, children learn to redirect negative thoughts into positive thoughts, an incredible skill to thread into every aspect of life which can be immensely helpful for school, personal life, and even the choices kids make around food.

Awareness

Yoga helps kids develop an immense awareness of themselves. Kids can become aware of how they feel emotionally and physically as well as how food makes them feel. Yoga can help kids realize how different foods affect their energy levels and become more in tune with feelings of fullness and hunger. This heightened awareness can help increase self-regulation, which can help reduce obesity in children and increase health.

CONCLUSION

I know from personal experience that yoga and other mindfulness practices like meditation and slow, deep breathing can be immensely helpful in keeping a calm demeanor and clear mind, especially during stressful times.

If you are interested in resources for your children, there are a number of free online resources that are available today. You can also reach out to your local yoga teachers and studios for support. The ancient Greek philosopher Heraclitus said, "The only thing that is constant is change," and as a parent, I feel one of the best gifts I can give my children is a technique that helps them feel rooted in today's rapidly changing world.

About the Author:

Ally Ford is a veteran yoga teacher of over 20 years and the author of a yoga book for kids called "Garuda, The Eagle Who Soared With Ahimsa," available on Amazon. She lives in Florida with her two children, husband, golden retriever and an adopted shelter cat. For more information, follow her on Instagram **@AllyFordYoga**.

TRADING IN FAD DIETS FOR SUSTAINABLE EATING

by Holley Nash, RDN, LD

As a registered dietitian nutritionist, I often get asked about diets - especially about quick weight-loss and fad diets. It seems that, although it may take years to pack on the pounds, when it comes to weight-loss, everyone is looking for a quick fix. The unfortunate truth is that there is not a quick fix – well, not a quick fix that is both sustainable and good for your health. Any diet that restricts calories enough to cause rapid weightloss is both damaging to the body (i.e., your metabolism) and unsustainable longterm. The idea should never be to drop a significant amount of weight rapidly, but to nourish your body back to health and a healthy weight.

THE IDEA SHOULD NEVER BE TO DROP
A SIGNIFICANT AMOUNT OF WEIGHT
RAPIDLY, BUT TO NOURISH YOUR BODY
BACK TO HEALTH AND A HEALTHY WEIGHT.

THE GOAL IS TO MOVE FROM A
DIETARY PATTERN WHERE ANIMAL
PRODUCTS AND PROCESSED FOODS
ARE THE MAIN COMPONENTS
TOWARD A MORE HEALTHFUL AND

BALANCED DIETARY PATTERN

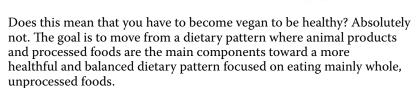
FOCUSED ON EATING MAINLY WHOLE, UNPROCESSED FOODS.

WHAT SHOULD I EAT?

While there are many aspects that can contribute to obesity or weight gain (*medications*, *genetics*, *etc.*), changing the way you eat can help heal your metabolism and make for healthy weight-loss or weight maintenance.

Humans evolved mainly eating plant foods. Consequently, the further the human diet strays from eating whole foods, the worse our health becomes. Transitioning to an all or mostly plant-based diet can improve your health and reverse some of the chronic diseases associated with obesity such as:

- Diabetes
- Hypertension
- Stroke
- High blood pressure
- Low blood glucose levels
- Low triglycerides
- LDL (bad) cholesterol



Eating more whole plant foods and non-processed animal products allows you to nourish your body. This eating style is often referred to as a "whole foods, plant-based diet" (WFPB), and there are a few variants to help you find just the right one for your lifestyle and health goals. Let's explore some of the most popular and well-known whole food and plant-based diets that can reverse chronic diseases and improve health.







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DIETARY APPROACHES TO STOP HYPERTENSION (THE DASH DIET):

The DASH diet encourages people to eat minimally-processed fresh foods while avoiding red meat, full-fat dairy, processed foods and sweets. This dietary pattern includes eating at least five servings per day of fruit and vegetables, as well as eating legumes and beans, some lean meat and low-fat dairy, whole grains, nuts and seeds. It also requires that participants cap their daily sodium intake at 2300 mg per day, with the goal being to decrease sodium intake to 1500 mg per day.

THE MEDITERRANEAN DIET:

The Mediterranean diet can more accurately be described as an eating pattern than a diet. It also encourages people to focus on eating mostly fruit, vegetables, whole grains, nuts, seeds, beans, pulse vegetables and olive oil. Red meat and sweets should be avoided, and poultry, eggs and dairy consumed in moderation. For those who choose to enjoy adult beverages, there is even room for the occasional glass of red wine.

THE VOLUMETRICS DIET:

The Volumetrics Diet divides food into four different categories based on its energy density. The goal is to lower your intake of energy-dense foods (*think French fries and chocolate cake*) and to increase your intake of low-density foods (*think fruits, vegetables and whole grains*). By doing so, you will automatically increase the amount of nutrients you consume and lower the calories you take in. Further, by focusing your diet on consuming mostly low-density foods, you will be able to eat more and be less hungry.

VEGETARIAN:

A vegetarian is someone who does not eat meat from animals but may eat animal products such as eggs or honey. The term "vegetarian" is very broad and can often mean different things depending on what type of vegetarian someone is:

- Lacto-vegetarian diets exclude meat, fish, poultry and eggs, as well as foods that contain them. Dairy products, such as milk, cheese, yogurt and butter, are included.
- Ovo-vegetarian diets exclude meat, poultry, seafood and dairy products, but allow eggs.
- Lacto-ovo vegetarian diets exclude meat, fish and poultry, but allow dairy products and eggs.
- Pescatarian diets exclude meat and poultry, dairy, and eggs, but allow fish.

VEGANISM:

The vegan lifestyle is the most restrictive in regards to the consumption of animal products. A vegan diet is free from all animal products, including honey.

If you are going to practice a vegan lifestyle, please be sure to consume a wide variety of whole plant foods, including fruit, vegetables, legumes, whole grains, nuts and seeds. Do not "cut carbs" and avoid grains. In addition, it is essential to supplement vitamin B12, as animal products are the most common source of B12 in our diets.



CONCLUSION

There are limitless variations on whole food plant-based dietary patterns, so choose one that will allow you the structure and guidance you need to move toward healthier habits over time. Lifestyle changes should never be a radical overnight switch. Consider the steps you will be taking to change your eating patterns as a journey toward better health. The goal is to move away from processed products and focus on whole grains, fruits, vegetables and lean animal meats.

However you choose to proceed, no more fad diets! Instead, develop a sustainable, healthy dietary pattern so you will not only lose weight while eating more, but regain and maintain optimal health over time.

About the Author:

Holley Nash, RDN, LD, is a Registered Dietitian Nutritionist and Nutrition Coordinator. She currently works at the Emory Bariatric Center.

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Single Anastomosis Duodenal Switch (SADI) –

What Can You Expect from the New Bariatric Surgery Device?

by Walter Medlin, MD, FACS

The disease of obesity is never cured and each weight-loss operation has different effects and outcomes for everyone. Genetics, medications and other health issues can lead to differences in weight-loss or weight regain with the exact same operation. Everyone's body is different and because of that, results from weight-loss operations will vary.

With weight-loss operations sometimes being unpredictable or having negative side effects, there is a constant need to improve bariatric surgery and make it more effective. In an attempt to do this, the single anastomosis duodeno-iliostomy (SADI) was created.

WHAT IS SADI?

SADI is a simplified duodenal switch that only bypasses 60 to 75% of the small bowel. Anastomosis means one connection instead of two, which is what separates this surgery from the regular duodenal switch. Normally, the regular duodenal switch has two major steps:

- 1. The first step is a sleeve gastrectomy in which about 80% of the stomach is removed, leaving a smaller tube-shaped stomach that is similar to a banana.
- 2. The second step bypasses the majority of the intestine by connecting the end portion of the intestine to the duodenum near the stomach. A BPD/DS limits how much you can eat and reduces the absorption of nutrients, including proteins and fats.

With SADI, while there are two parts, there is only one connection. The duodenal switch contains two connections. SADI makes the surgery less demanding on the surgeon and can reduce potential bowel twisting later. It has about the same safety as surgery, but is much more effective for weight control and for diabetes control.

HOW IS SADI PERFORMED?

SADI has two parts:

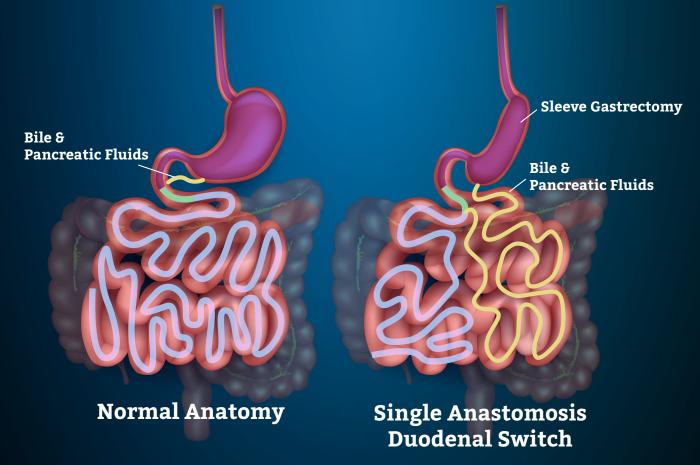
- 1. The upper part of the stomach is just a sleeve, which leaves a tubular stomach instead of a broad, floppy stomach.
- 2. The lower half can be done at the same time but can also be done later and involves the surgeon dividing the duodenum (*upper most part of the small bowel*). The upper portion of the divided duodenum is now plugged in to the small bowel further downstream, usually 2/3 to 3/4 of the way down. This allows food to go directly into the lower bowel and bypass the rest of your bowel.

This bypassed bowel is not completely inactive and is also not removed. The bypassed bowel now allows for bile to come through, which sweeps out any bacteria. The bile can now join the food at the point where the upper duodenum is now plugged in and digestion can occur. Because the duodenum and upper small bowel no longer see any of the food you eat, this radically changes some of the signals that they normally make.

Below the connection point where food and bile is now joined, a lot of work has to happen that used to happen far upstream! This makes a big difference in how the gut signals the brain because it usually does not have that much work to do.

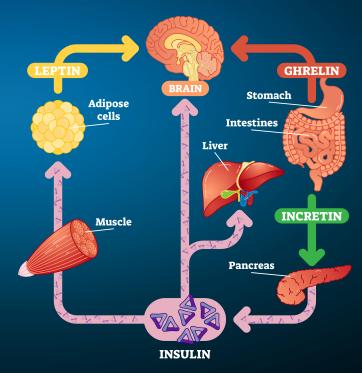
Essentially, this process changes your gut-brain signals and leads to less hunger and more time feeling full. Most people even notice a change in food cravings or pickiness.

Essentially, this process changes your gut-brain signals and leads to less hunger and more time feeling full. Most people even notice a change in food cravings or pickiness.



APPETITE AND HUNGER HORMONES

Normally, when our brain feels low on energy, we become hungry. The goal is to change the hunger and fullness signals.



WHY DOES SADI WORK?

All of our current operations mostly work by changing the signals from the gut and fat tissue that the brain interprets as "low energy." Normally, when our brain feels low on energy, we become hungry. The goal is to change the hunger and fullness signals.

There are many different "signal" hormones from the bowel, including:

- Leptin from fat alters food intake and controls energy
- **Ghrelin from the stomach** increases food intake
- PYY communicates to your brain that you are full and decreases your appetite
- GIP stimulates insulin secretion
- GLP1 –helps regulate appetite after eating
- **CCK** stimulates digestion of fat and protein

Even though sleeve gastrectomy only changes the stomach, it does have some impact on these signals.

Bypass operations like the gastric bypass and duodenal switch modify these other signals more. The duodenal switch gives the largest impact on the most number of signals. Now, SADI has the same impact on those signals but in a modified surgery.

Since we are all different in terms of our genes, you can see how some people might be more responsive to an operation that hits more signals, while other people may do great with just a change in Ghrelin. How our brain adapts over time to these different signals is not any indication of how hard we are working at weight management. There's plenty of room to take personal responsibility without spiraling into shame, blame or comparing.

SO, WHY HASN'T SADI TAKEN OVER THE WORLD?

First, the gastric sleeve bariatric surgery is such an awesome procedure for most people that there is no reason to jump to SADI right away.

Second, and more important, is that surgeons are very slow to change to any new operation, and most of us are not really trained to divide the duodenum. It is not super hard to learn, but there are a few very important structures in the area that we have to take extreme care around. Most of us in training only got into this area when it was in the middle of a terrible disease, like cancer or injury or bleeding, and we have never really been there when it is well-behaved! When things go bad in the area, they tend to go really bad, and surgeons are not wrong to have great respect for the duodenum.

Third, the older, original version of the duodenal switch was much more problematic and got a bad reputation for loose bowel movements and severe malnutrition. SADI has addressed and improved most of these shortcomings for most people.

Fourth, we are still in an era of insurance craziness, and the duodenal switch and SADI are no exception. Both of our national and international surgical organizations recognize SADI as a standard of care. They are scientifically and medically well-established. Insurance companies usually drag their feet even in the face of science, though. The good news is that if you have sleeve coverage under your insurance, an upgrade later to SADI is usually less than \$10,000 or \$12,000, even if you have to pay for it out of pocket. Coverage can usually be obtained for the upgrade, so don't lose hope.

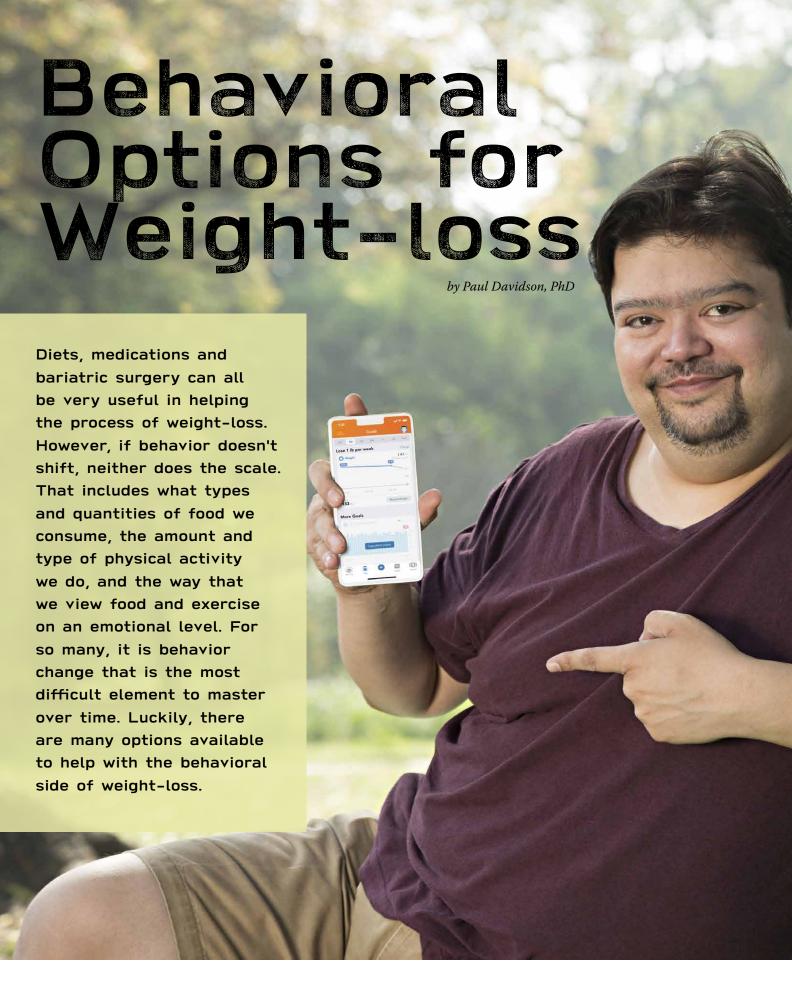
TAKE AWAY POINTS

In 2021, gastric bypass should only be done when absolutely medically needed. Otherwise, the risks are normally too high. The sleeve definitely has some known issues but can be easily modified and is almost never a bad choice, even if it may not be the end of the story. SADI is the version of the duodenal switch that is almost always appropriate, and it is worth it for you to find a surgeon who offers it if you want to find out more about your individual care.

About the Author:

Walter Medlin, MD, FACS, is a bariatric surgeon in Salt Lake City, Utah and Lehi, Utah. He performs mostly sleeve gastrectomy and SADI/loop duodenal switch operations, and revision surgeries at Bariatric Medicine Institute. He is a grateful member of the Obesity Action Coalition (OAC) and supports his patients with the OAC Chairman's Council program sponsored memberships. He had sleeve gastrectomy in 2008 and upgraded to SADI in 2019. He had a revision of this in late 2020 and is doing well! Dr. Medlin LOVES to play outside, especially paragliding and kitesurfing. You can find his YouTube channel at "BMIUtah" and "Walter Medlin."





Self-Monitoring Your Food Intake

The most successful long-term behavioral strategy for weight-loss is self-monitoring — tracking information relevant to the goal and using that data to help make decisions. In its simplest form, one can jot down information in a notebook, but we now have sophisticated tools to make it easier to accurately record whatever needs to be monitored.

Simplifying the task of food-logging has been made possible using mobile phone apps such as:

- MyFitness Pal
- Baritrastic
- Lose It! Calorie Counter
- MyPlate

Features such as nutritional information, being able to save your favorite meals, calorie trackers and the ability to follow your results over time increase the rewarding nature of tracking your intake. Many of these apps also offer meal plan suggestions, recipes, and the flexibility to help develop weekly shopping lists.



While diet and exercise will always be important factors for weight-loss, changing your behavior or developing new behaviors can help with sustainability in your weight-loss journey.

Tracking Your Physical Activity

Tracking physical activity is another key form of self-monitoring. The world of tools to help with this has exploded over the past decade. Most everyone now knows about the Fitbit and Apple Smart Watch, both of which do a great job of measuring steps taken, distance traveled, steps climbed, heart rate and sleep patterns. They also remind you to move on a regular basis. Waterproof models can help keep track of physical activity in a pool or other body of water. Other companies such as Garmin, Samsung, Jawbone, Nike, and Withings are comparable and offer similar features.

Like advanced pedometers, smartphones have built-in accelerometers to measure movement with either included or downloaded apps such as:

- Health
- Pacer
- Activity Tracker
- Google Fit
- Map My Walk

The ability to monitor this information is a huge behavioral help in setting and achieving goals.



Behavioral Options continued on page 40

Weight-loss Programs

Today's weight-loss programs are based on both nutritional concepts and behavioral precepts. Social support (*delivered primarily online*), positive reinforcement, practical goal-setting, and the use of self-monitoring form the basis of many offerings. While there used to be a scarce amount of weight-loss programs that focused on behavioral options, there are now quite a few that are proven to be effective:

Weight Watchers (WW)

The oldest and most thoroughly researched and tested program is Weight Watchers, now rebranded as WW, which creates individualized plans based on personal assessments. This updated classic provides its members with:

- Healthier nutrition choices
- Meal suggestions
- Foods that can be purchased
- Activity tracking
- Fitness classes
- Mindfulness education
- Sleep strategies
- Coaching and community options
- Rewards for reaching goals

NOOM

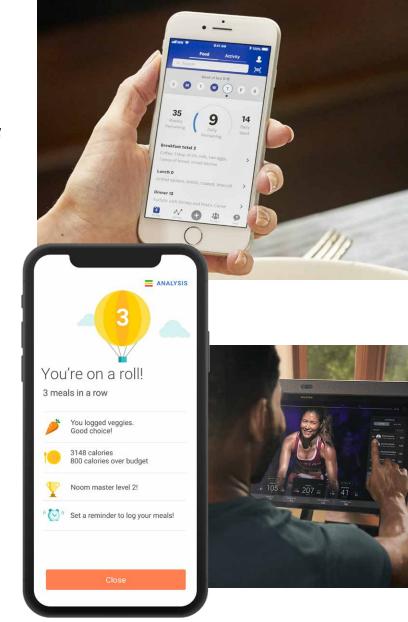
A newer competitor in the space is NOOM, an app-based program which utilizes food logging and recipes with the input of nutritionists, as well as physical activity offerings developed by personal trainers after an initial evaluation.

Support group options are embedded into each of these offerings so that behavioral reinforcement is gained from users as well as professionals. NOOM is wildly successful and is a fast-growing company.

YMCA's Diabetes Prevention Program

Though less well-known due to lack of commercialization, another powerful behaviorally-based weight-loss program is offered through the National Diabetes Prevention Program.

Based on medical, behavioral and nutritional research, these programs have been offered primarily at YMCAs to help people lose weight and reduce the risks of diabetes. An emphasis on lifestyle change with increased activity levels and reduced caloric intake has demonstrated both weight-loss and the reduction in diabetes for over a decade.



Health Coaching

Health coaching is a great behavioral strategy for improving weight-loss. Many companies, including InHealth, Vida Health, and Livongo offer personalized coaches who meet with clients on a regular basis and set ongoing goals that fit that person's needs and wants.

Coaching commonly includes a focus on appreciating a "stages of change model" which includes:

- Recognizing how committed someone is to act on their goals
- Setting achievable targets for behavioral shifts
- Following the client's lead
- Providing training on how to complete certain skills
- Consistent reinforcement of progress

Peloton

The COVID-19 pandemic has skyrocketed the usage of at-home exercising with one of the most popular options being the Peloton bike.

The purchase of one of their spin bikes or a competing model, with the purchase of their app, opens a world of classes for all levels of fitness. For those with the name brand bike or treadmill, the instructors can control the speed, resistance or elevation of the machine to go along with the class.

People are called out and encouraged by name, which enhances connection and motivation. The ability to take classes with friends means individuals can share their training and rankings, allowing for competition which is motivating for many.

The Mirror

The Mirror offers personalized fitness training with a model of how to complete exercises, allowing individuals to copy the movements of the coaches and to benefit from encouragement. The activities offered by the Mirror range from weight lifting to yoga, cardio and dance, providing something for almost anyone. A significant issue with all of these machines, however, is the high price tag to get the equipment and then the recurring monthly payments for the classes.



Use tools and resources that make you feel motivated and keep you on track with your goals.

Behavior is the Key!

While diet and exercise will always be important factors for weight loss, changing your behavior or developing new behaviors can help with sustainability in your weight-loss journey. Use tools and resources that make you feel motivated and keep you on track with your goals. In doing this, you can have successful weight-loss and tap into a more determined and motivated side of yourself.

About the Author:

Paul Davidson, PhD, is the Director of Behavioral Services for the Center for Metabolic and Bariatric Surgery at Brigham and Women's Hospital in Boston and is an instructor at Harvard Medical School. He is an elected member of the Integrated Health Executive Council for the American Society of Metabolic and Bariatric Surgery who speaks and writes regularly about bariatric topics. He helps lead monthly #obsm chats on Twitter and is a proud member of the Obesity Action Coalition (OAC,) as well as a returning speaker at the OAC's Annual Your Weight Matters Convention.





Working from home or living at work? This is the challenge that many people are facing today. Due to the pandemic, so many of us have been forced to work remotely. While there are several benefits to working from home, such as sleeping in a little longer, no rush hour traffic jams, or getting to spend more quality time with loved ones, there are several factors that make it difficult as well. However, working from home doesn't have to be boring. There are activities you can do to help stay engaged and motivated during these crazy times.

Keep a Schedule

One of the best ways to stay motivated and engaged while working from home is to keep a schedule. That means getting up early, dressing the part, and sticking to your "normal" routine as much as you possibly can. This simple act will make you feel a little more motivated, engaged and productive.





Look the Part

Training yourself to wake up early, put on business-appropriate clothing – that can be jeans and a t-shirt or a pair of chinos and a button-down shirt – may help you feel more engaged and help you get in the mood to work. Not giving in to the temptation of lying in bed, sleeping in late or wearing your most comfortable pair of sweat pants to work has been shown to increase productivity.

Take Breaks

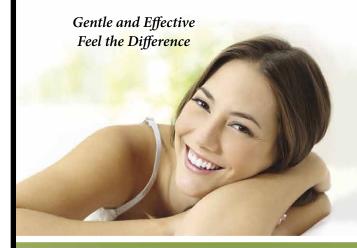
While working from home, don't forget to give yourself "coffee breaks." Get up from your computer, walk around, and chat with a friend, co-worker or loved one. Engaging in conversation with people may help you feel less isolated. Perhaps schedule a virtual coffee break to stay connected to co-workers.



Not giving in to the temptation of lying in bed, sleeping in late or wearing your most comfortable pair of sweat pants to work has been shown to increase productivity.

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Working From Home continued from page 43

Maintaining this sense of community may help you feel engaged and a little more motivated. Also, getting up and stretching your legs may help you feel less chained to your desk. Taking this 15-minute break from the computer screen may:

- · Renew your energy
- Refocus your mind
- Help you feel more productive

Additionally, short breaks can help you stick to a schedule that is similar to the schedule you had while working in your office. Taking small, but necessary, mental health breaks can make all the difference in how you operate. So, don't feel guilty for not giving yourself one. Your body and mind will thank you.

Stay Physically Active

Staying physically active while working remotely is a great way to stay engaged and a healthy bi-product of being home. Being too sedentary isn't just harmful for your health, but it's also not good for your motivation and discipline. Exercising gives you a boost of energy that's incredibly helpful for productivity. The same way you would have scheduled your gym time while working outside of the home, it's important to continue that regimen while working inside the home.

If your gym or fitness center is still closed, try looking up at-home workouts on YouTube, Instagram or online. Even if it's just for 10-15 minutes, physical activity keeps your mind sharp and keeps you disciplined.

Get Outdoors

With the warmer weather on the way, now is a good time to get back to nature and enjoy the great outdoors. One of the most challenging issues with the pandemic has been the lack of being able to go outside. Many of us have been longing for the days to get outside (safely) again and enjoy some of the normalcy we have had in the past. Taking a nature break is a great way to reconnect with yourself, others, and engage your senses. You can go for a jog, hike, bike ride, or simply take a walk to enjoy what Mother Nature has given us. Visit the local park, pack a lunch, grab your favorite book, or take your best four-legged friend for a day out in nature. Getting outside and feeling the sun on your face is not only good for your body, but good for your mental health as well. Taking advantage of what the nicer weather offers us is a great way to stay active, alert and engaged. Go ahead, get outside and soak up the sunshine. You can thank yourself later.



Now is the time to get creative and put your best foot forward in taking the steps to stay healthy.

Get Creative

Have you ever wanted to learn a new language or play a musical instrument but have never had the time to do so? Well, now is your chance. It is the perfect time to pick up a new hobby or become an expert on one you already have. Here are some ways to keep your mind sharp and entertained:

Learn a New Language

Using the computer to search for language applications has never been easier. You can take the classes in the privacy of your own home, at the speed you are comfortable with learning, and for little to no cost to you. Babbel and Duolingo are just two examples of these sites. You can download the mobile apps right to your smartphone or tablet for on-the-go learning. Additionally, you can take the online courses from the comfort of your home computer to learn the proper grammar, vocabulary and pronunciation skills to help you get ahead.



Creating keeps you active, present and engaged. Just like using online applications to learn a new language, you can apply the same techniques to learning how to play an instrument. Just simply Google online guitar, piano, violin or any other musical instrument you may be curious about taking lessons for and see what pops up. You may quickly find several sites to choose from. Some of these sites are free, while others may be at a cost. Either way, you will have the flexibility and freedom to choose what works best for you. And if you don't have an instrument, no problem! There are online sites that can help you with that as well. Just follow the guidelines for searching this type of opportunity and you will be playing new music in no time.

Read or Write

Reading and writing can be very helpful during these challenging times. Books are a great way to lose yourself for an hour or two. A little way to escape the outside factors that may be causing you stress or concern. They create a space for you to stay engaged and interested in things that you like.

Additionally, writing can be a wonderful outlet for your creative senses. Keeping a journal is a fun way to look back on times and reflect on how you were/are doing and where you were/are going. Writing gets your creative juices flowing while forcing you to stay engaged not only with yourself, but with your surroundings. This may be a good method to keep your mind sharp, focused and on point.



Another fun and creative way to stay engaged while working from home is to make a puzzle, play a game or partake in a challenging word search. You can invite people in your home to play with you. If you happen to live alone, connect with people online and invite them to join you in a virtual game of Checkers, Scrabble or cards. Having a little "friendly" competition may be a good way to boost your mood and lift your spirit. Also, some of these pastimes will get you away from the computer and/or provide you with the mental stimulation you may need to get and stay motivated.

Staying Engaged is Easy!

Working from home doesn't have to be boring. While challenging, you can still find lots of ways to stay connected, engaged and motivated. Now is the time to get creative and put your best foot forward in taking the steps to stay healthy. You have the freedom to make your own schedule, work at your own pace, and create the space you need to stay engaged. So, take the time to make yourself a priority. You'll be glad that you did.

About the Author:

Natalie-Jean Schiavone, PhD, has more than 20 years of experience in the healthcare industry. After receiving her Master's degree in General Psychology, Dr. Schiavone went on to complete her doctoral degree in Health Psychology with a specialization in obesity. Dr. Schiavone conducted her research and completed her dissertation on female adolescents with obesity and their social experiences. Using her education, experience and expertise, Dr. Schiavone works with patients to create a healthier lifestyle where knowledge is a key factor.

NUTRITIONAL SUPPORT DIRECT TO YOU AFTER WEIGHT LOSS SURGERY





ELIGIBLE PATIENTS MAY PAY AS LITTLE AS



PER MONTH* TO RECEIVE VITAMINS AND MINERALS THAT MEET ASMBS NUTRITIONAL GUIDELINES[†]



ASMBS: American Society for Metabolic and Bariatric Surgery.

^{*}Patients may redeem this offer ONLY when accompanied by a valid prescription. Offer is valid up to a maximum benefit of \$150. Offer is not valid for patients whose prescriptions are reimbursed in whole or in part under Medicaid, Medicare, Medigap, VA, DoD, TRICARE, or any other federal or state programs (such as medical assistance programs) or where otherwise prohibited by law. Offer is not valid in VT or where prohibited in whole or in part. This offer may be amended or ended at any time without notice.

[†]ASMBS Integrated Health Nutritional Guidelines for the Surgical Weight Loss Patient — 2016 Update: Micronutrients.

YOUR BARIATRIC SUPPLEMENTS, YOUR WAY

- Once-daily Multivitamin formulation, with or without Iron
- Calcium with D₃ and Magnesium dietary supplement
- **Two great options:** Fruit-flavored chewables or easy-to-swallow capsules



USE YOUR PHONE'S CAMERA TO SCAN THIS QR CODE TO SEE EVERYTHING NUTRITION DIRECT™ HAS TO OFFER AT NUTRITIONDIRECT.COM/WEIGHTMATTERS

Talk to your doctor to learn more.

- **Expert video:** Find out what you need to know about nutrition after weight loss surgery
- FAQs: Learn about some of the most common questions and their answers
- Downloadable recipes: Include breakfast, lunch and dinner, side dishes, and desserts for a healthier lifestyle











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