The Impact of Family Weight Bias on Health

Non-food Date Night Ideas

Winter Family Fun!
What is a rare genetic disease of obesity?

Not all obesity is the same

The 2 most common symptoms of a rare genetic disease of obesity are **insatiable hunger** and **extreme weight gain in childhood**.

Knowing more about your genetics may help you find out if you have a rare genetic disease of obesity, and may help your doctor better manage it.

Talk to your doctor to learn more.

**Everett**, who is living with a rare genetic disease of obesity

"**Finding the diagnosis** was a matter of me going to the doctor and saying, ‘There’s something wrong with my child.’ The doctor said, ‘It’s genetics, not anything you’ve done.’"

—Caregiver of a child who is living with a rare genetic disease of obesity

Scan the QR code to learn more about the role of genetics in rare genetic diseases of obesity, or visit LEADforRareObesity.com

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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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Hello, OAC Community!

I hope you all had a wonderful holiday season! I don’t know about you, but I am excited to start a fresh new year! I know that many in our community faced challenges, hardships and heartbreaks this past year. Hopefully, we also experienced joy and memorable experiences with family and friends, too. A new year is a time to reflect on what was and look forward to what will be, all while not losing sight of the importance of being present for each individual day. Let’s work together on finding the joy in our lives this year!

Speaking of family and friends, let’s take a look at all of the amazing content in our winter issue of Weight Matters Magazine. The focus of this issue is families and relationships. We have two incredible articles written by active OAC members and advocates Robyn Pashby, PhD and Leslie Golden, MD. Dr. Pashby’s article is on the Impact of Family Weight Bias on Health. Many of us have faced this in our lifetime and perhaps even experienced this over this past holiday season, which can be a time of stressful interactions with family around food. Dr. Golden’s article examines how weight changes affect relationships while exploring the emotional aspects, and she gives advice for navigating these shifts together with the important people in your life. This is a subject that absolutely needs more air time in our community, and we are so pleased to have Dr. Golden’s insight and advice.

Continuing the theme of relationships, we have some fun articles, too, like “Fitness Activities for Couples” and “Non-Food Date Night Ideas.” Please let us know if you and your partner decide to try any of these suggestions. We would love to hear your thoughts and experiences!

Don’t miss the article that covers all the cool things that happened at YWM2023, our in-person event. This includes our first time incorporating special programming for youth and their families—what an amazing experience this was! Also, find out what lies ahead for our in-person events in 2024!

Finally, I know many of us in attendance were personally and profoundly impacted by the teens who were in attendance at YWM2023. They were so brave, sharing their stories and creating their own tight-knit community of kids going through similar experiences with their weight. We are honored to feature an article on John Simon III, one of the teens from OAC’s Empower Early Youth Initiative. I am confident that you will be as impressed with this young man as all of us who were fortunate enough to meet him in person. Thank you for sharing your story, John!

Please enjoy this issue of Weight Matters Magazine, and until next time, take care, OAC Community!

Best,
Kristal

Chair of the Board
Print Brochures and Guides Are Available to Request!

The OAC is proud to offer unbiased, science-based education to support individuals along their weight and health journey. To make these resources accessible to all, we’ve produced a variety of free print educational materials available to anyone who requests them. Our brochures include our Understanding Obesity series with details on obesity, childhood obesity and treatment options. We also offer comprehensive brochures on Understanding Obesity and Type 2 Diabetes and Understanding Prediabetes and Excess Weight. You can order these materials free of cost for yourself or a loved one, or for a small fee, in bulk for patients or your community. Just head to ObesityAction.org/education-support/resources/order-print-resources to request them!

Obesity Care Week (OCW) 2024 is just around the corner! OCW is an annual public awareness campaign aiming to change how we care for and about obesity. This year, OCW will host its 9th annual week-long event from Monday, March 4, through Friday, March 8.

The Obesity Action Coalition (OAC) is a proud Founding Champion of OCW and works hard each year to make the campaign a powerful opportunity for change! OAC wants to see a society that understands, respects and accepts the complexities of obesity and values science and clinically-based care. To learn about Obesity Care Week or sign up for alerts, please visit ObesityCareWeek.org.

Obesity Action Coalition’s GivingTuesday Week in Washington, D.C.

In November 2023, to celebrate GivingTuesday, the Obesity Action Coalition and 18 of our dedicated advocates headed to Washington, D.C., for a jam-packed week of activities!

First, OAC co-hosted an Obesity Policy Roundtable in partnership with the American Diabetes Association (ADA) and the Obesity Care Advocacy Network (OCAN) to discuss opportunities across the federal government to improve the lives of people living with obesity. One of the panels was moderated by OAC’s very own President and CEO, Joe Nadglowski, where the group discussed ways Congress could address the obesity treatment gap.

Then, OAC advocates headed to Capitol Hill to meet with 30 Senators and Representatives. There, the advocates shared their perspectives as patients who have been denied access to obesity care, making the case that since obesity is a disease, everyone affected should be treated with the same dignity and respect afforded to their peers with other diseases. The advocates asked each lawmaker to co-sponsor the Treat and Reduce Obesity Act (TROA).

One of the biggest takeaways from this week was that Congress is, in fact, shifting its perspective around obesity and that our advocates should continue raising their voices, bringing attention to the importance of comprehensive obesity care and sharing their lived experiences so legislation can be pushed over the finish line.

Read the recap at obesityaction.org/givingtuesday-week-in-washington-d-c/. 
A Couple’s Take on Obesity, Self-Care and Mutual Support
by Debera (Debe) Gau and Kevin Gau

Embarking on a journey that intertwines love, health and resilience, OAC member Debera (Debe) Gau and her husband, Kevin, openly share their experiences with obesity and how it has impacted their lives. Debe, who serves on the OAC Board of Directors, says her story begins with a diagnosis that marked a life-changing shift from the familiar diet/exercise cycle to a comprehensive approach to treating obesity. Having weathered the storms of life together since high school, Debe and Kevin understand the struggles many couples face in balancing self-care and supporting each other.

In this interview, they reflect on the power of community support, the difficulties and personal growth that come with significant life changes, and the essential ingredients for maintaining a strong relationship while dealing with obesity.

FOR DEBE:

How and when did your journey with obesity lead you to the OAC?

According to the BMI charts, I have always been overweight or had obesity. In 2001, my body began to fail me, and it was then that I was given a definitive diagnosis of obesity. This diagnosis led me away from the familiar diet/exercise cycle and towards actual treatment. I started with behavior therapy and changing my habits, then medication and eventually bariatric surgery. My surgery prompted me to look for educational resources and learn more about obesity as a disease. About five years post-op, I found a postcard from the OAC announcing their first National Convention in Dallas, TX, that our office receptionist had thrown away. I retrieved it out of curiosity and began learning more about the OAC from that accidental discovery. While I wasn’t able to attend the Dallas Convention, I was able to go to Phoenix the following year and have gone every year since then.

“I was once the underdog, and because of that, I will always choose to stand up for the underdog.”

Here we are at the Golden Gate Bridge

Happy Anniversary from Hawaii
How has your involvement with the OAC impacted your personal journey with obesity and your relationships, especially with your husband, Kevin?

Getting involved with the OAC reinforced my understanding that choosing bariatric surgery was a treatment for a chronic disease and not an excuse to take the “easy way out.” I listened as others shared their stories, so similar to my own. I felt a connection to the individuals in the OAC Community, and hearing their stories empowered me to share mine. This opened the door to stronger communication at home. I realized I truly was not alone and that my obesity affected not just us as a couple but also our family.

What motivated you to want to become more actively involved with the OAC and advocate for people with obesity?

During the years I worked in a bariatric clinic, I experienced a lot of bias and censorship. This was new for me, and it really affected my self-esteem. When I attended my first OAC Convention, I participated in an introduction to advocacy session that focused on the power of our stories and the impact of sharing them. The session truly resonated with me and emboldened me to stand up for myself. Because I had already been impacted by hearing the stories of others, I knew I could help others by sharing my own. I was once the underdog, and because of that, I will always choose to stand up for the underdog. I wanted to use my voice to help give others theirs.
As time went on, the person I held in my arms for so many years began to feel different, and it was definitely an adjustment for me.

FOR DEBE AND KEVIN:
Balancing personal health goals with the needs of a relationship can be challenging. How do you strike a balance between self-care and caring for each other?

Kevin: If you love someone, it’s easy.

Debe: We’ve been together since high school. I agree that a long history makes it easier. A big part of caring for one another is also caring for yourself. This may seem selfish on the outside, but if you are not taking care of both your physical and mental health, it will negatively affect your partner. Self-care may mean that we take solo vacations or pursue interests that the other doesn’t share, such as sports. Giving each other the freedom to be an individual is crucial for maintaining a healthy and supportive relationship.

Oftentimes, relationships are tested during significant life changes, such as weight-loss or medical interventions. How did you both manage these transitions?

Kevin: When Debe had her surgery, it was exciting because we knew it would improve her health and physical abilities. As time went on, the person I held in my arms for so many years began to feel different, and it was definitely an adjustment for me. I remember talking to her about it and how it made me feel. I think that helped a lot.

Debe: The post-operative period of rapid weight-loss that Kevin is referencing was a very interesting time for both of us. I was becoming someone I didn’t recognize, and when he shared with me what he was going through, it made us both realize we needed to add space for each other’s feelings. We also realized this wasn’t a singular experience. We shared many feelings of confusion, loss and insecurity. Learning this helped us understand that we needed to have honest conversations and allow space to truly listen to each other. This was a moment of growth for us, as it helped us recognize that we needed to accept what the other was saying as truth and acknowledge what they needed for support. Communication is and will always be crucial.

We shared many feelings of confusion, loss and insecurity.

Honolulu, Waikiki Beach, sunset. 45 years and counting
In your opinion, what are some of the key ingredients for a successful relationship when one or both partners are dealing with obesity?

**Kevin:** Support each other and communicate.

**Debe:** As partners, we may not always see what the other is going through because we are looking through a lens of love, which can be subjective. I think you need to step back and say, “Okay, if this is what you are feeling, then how can I help, or what do you need from me?”

**Communication is crucial in any relationship. Can you share some strategies you’ve found helpful for discussing and addressing obesity-related challenges and goals with each other?**

**Kevin:** Know when to listen and know when to share.

**Debe:** We already mentioned some of these earlier, such as listening, giving space, acknowledging feelings, and having honest and sometimes difficult conversations. I find myself saying to Kevin, “I want to talk to you, and I just need you to listen.” This tells him that I may not need a solution or an answer. I may just need to say these things out loud before I can let go of or process them.

**On a practical level, what are some everyday activities, routines or habits you’ve incorporated into your lives to support each other with your health?**

**Kevin:** Encourage each other to get active and make healthy choices. Our tandem bicycle is fun because you’ve got a captive audience, which makes conversation easy.

**Debe:** We like to take walks both alone and together, and walking the dog also encourages us to exercise. We use our tandem bike often on road trips or trail rides. We also respect that we have different interests and allow for individual pursuits without judgment.

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**Do You Want to Share Your Story or Be Interviewed?**

Whether you have a story about navigating obesity, facing weight stigma or inspiring others, your voice is important. If you want to share your story to support, inspire or encourage others, please email **membership@obesityaction.org**. The power of your voice can light up a future issue of **Weight Matters Magazine**!
In a world that often fails to recognize the unique challenges faced by adolescents affected by obesity, John Simon III’s story stands as a testament to resilience, expert guidance and the transformative power of a supportive community. From the depths of physical and emotional suffering to the empowering halls of the Obesity Action Coalition’s Your Weight Matters Convention, John’s journey is a beacon of hope for those navigating the complexities of adolescent obesity.
HEALTH CHALLENGES AND BULLYING

Growing up, John faced numerous health challenges caused by excess weight, including non-alcoholic fatty liver disease (NAFLD), prediabetes and severe sleep apnea. The toll on his daily life was profound, with everyday activities causing pain and emotional distress. Unable to enjoy walks on the beach or navigate a mall without discomfort, John’s world had become a place of limitations where he could no longer enjoy the things he used to.

Not only did John experience physical pain, but he also faced cruel and relentless bullying from his peers. Going to school became so unbearable that he ended up falling three grades behind.

Determined to improve his health and well-being, John and his mother, Karen Tillman, embarked on a treatment path. First attempting various weight-loss strategies, like dieting and coaching, John began to lose some excess weight. But, despite initial successes, the challenges were exacerbated during the COVID-19 pandemic, leading to weight regain and heightened mental health struggles. It was during this time that Karen sought guidance from their family of retired pro athletes, forming a supportive community that focused on daily activities, outdoor walks and cooking lessons.

A BRAVE STEP TOWARD A NEW BEGINNING

Even with all of these efforts, John’s weight was still a concern. John's pediatrician introduced the possibility of bariatric surgery. Thorough research, collaborative discussions, and trust in medical expertise led to the decision that surgery was the best path forward in John’s case. Despite initial apprehensions, both John and Karen recognized the potential for a life-changing transformation through surgery. So, at age 14, John underwent bariatric surgery.

John remembers feeling a little bit scared but mostly excited to undergo bariatric surgery. With his mother as his biggest advocate and his doctor, who became more like a mentor, by his side, he was confident the surgery was going to change his life for the better.

Adolescent Obesity continued on page 12
LIFE AFTER BARIATRIC SURGERY

His life post-bariatric surgery was challenging at first. There are major life changes that come along with it, and a lot of rules to remember and follow. Karen remembers John’s phone alarm going off every 30 minutes to remind him to drink or eat. But with time, they got used to the routine. Plus, with continuous support from his family, church and community, including a neighbor providing private exercise training, John has been able to embrace a new, healthier lifestyle. “They gave him the strength to keep going,” Karen said of John’s support system.

Now, a few of John’s favorite pastimes post-surgery are exercising and healthy cooking! His favorite workouts are weightlifting and boxing. John’s uncle, a retired pro-boxer who won the Olympic gold medal in 1984 and once fought Mike Tyson, taught him how to box!

John’s newfound love for cooking not only contributed to his physical well-being but also became a creative outlet. Karen raves about John’s cooking skills, emphasizing how he transformed into the “best healthy cooker there is!” Initially overwhelmed by the rules of healthy cooking, John now navigates the kitchen with confidence, demonstrating that mastering a healthier lifestyle involves both education and personal exploration.

John experienced a significant 200-pound weight-loss in just over a year. He reports feeling better than ever and is able to participate in the activities he enjoys again. But beyond the physical transformation, John’s mental health journey is equally noteworthy. Post-surgery, John faced the challenging process of catching up on schoolwork and overcoming the mental health toll of past bullying. The switch to online learning during the COVID-19 pandemic provided the opportunity for John to focus on his education and emotional recovery. He has also been able to make new friends.

“I want to help other kids.”
A PARENT’S PERSPECTIVE

As Karen reflected on her journey as a parent, she expressed the need for shared experiences and stories. As a single parent, Karen was scared when they first began this journey with John. Looking back, Karen wishes she knew other parents of children who underwent bariatric surgery so they could tell her that everything was going to be okay. “I had no parent to share their experience with me, so I had to go through it alone.” Now, she shares her experience because she wants families who are considering seeking obesity treatment to know that they are not alone in their journey. Karen also stressed the importance of setting realistic expectations and the necessity of providing tools for the entire family to embark on a healthier lifestyle together.

John also wants families to understand that they are not alone. One day, John met a boy at his school who was affected by obesity and whose parents helped him use a wheelchair to get to and from classes. John noticed the boy was being bullied by his classmates, so he decided to introduce himself to the boy and his parents to share his journey. “The least I can do is tell my story to other people and spread the word,” John said.

THE KEY TO JOHN’S SUCCESS? EDUCATION, COMMUNITY AND SUPPORT

While the unwavering support of his family, especially his mother Karen, has been crucial, John’s success also stems from support networks beyond the household. His neighbors, his church, his doctor and his new friends have all helped him in navigating the multifaceted challenges of adolescent obesity. John also shared how the Obesity Action Coalition (OAC) has played a pivotal role in his journey, providing a safe and educational space through the Your Weight Matters Convention that John and Karen attended last Fall.

The OAC’s Your Weight Matters Convention became a turning point in John’s life. Attending as one of 13 families in the Empower Early Program, John and Karen were welcomed into a supportive community. Karen described it as the best experience she had ever witnessed – a blessing that transformed their lives.

John’s experience at this year’s Convention not only solidified the importance of community support in overcoming the challenges of obesity but also inspired his career aspirations. Initially, he wanted to be an automotive engineer, but John’s exposure to the world of obesity treatment at the Convention reshaped his goals. “I’ve had my journey with bariatric surgery, and now I want to help other kids,” John said.

AN EMPOWERING STORY STILL UNFOLDING

With a renewed passion for health, aspirations of becoming a doctor and a commitment to advocacy, John Simon’s story is a beacon of hope and inspiration for others facing similar challenges. From overcoming health issues to becoming a skilled chef and spreading awareness about the benefits of surgery, John’s transformation is awe-inspiring.

As John continues his journey, he remains supported by his family, community, and the lessons learned during the Your Weight Matters Convention. The OAC’s ongoing support, educational resources, advocacy efforts and community engagement play an essential role in ensuring that John’s success is not just a singular achievement but part of a broader movement toward healthier futures for adolescents dealing with obesity. As John’s story unfolds, it becomes a roadmap for empowering individuals to share their stories and create positive change.

Do you want to join the OAC in making an impact for adolescents like John? Consider making a donation at obesityaction.org/donate

About the Authors:
Kendall Griffey, OAC Communications Manager, graduated from the University of North Florida with a BS in Communications with a focus in public relations. Kendall is passionate about her work in the non-profit sector and is driven to make a meaningful impact.

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The journey to overcoming obesity is a significant one, and having a strong support system can make a world of difference. We often hope that our friends, family, and especially our life partners, will stand by us as allies. But what if they don’t? It can be challenging when those closest to us don’t fully support our weight-loss efforts. In this article, we will explore the challenge of getting support from our loved ones, why it might not always happen, and most importantly, how we can overcome these obstacles to succeed in both our health goals and relationships.

**Understanding Spousal Sabotage**

Spousal sabotage happens when our partners, knowingly or unknowingly, hinder our progress toward a healthier weight. The reasons for their actions may not always be clear, but they can create roadblocks to our success. Here are some examples you might recognize:

- **Isolating from shared activities:**
  
  "We can’t go to the tailgate because you’re watching your diet."

- **Encouraging off-plan eating:**
  
  "You’ve been good; you deserve dessert tonight."

- **Using affection to discourage change:**
  
  "I love you as you are. Why do you need to change?"

Nurturing Your Health Journey continued on page 16
**Telehealth is Now Available!**

**Why wait to LOSE WEIGHT?**

LOMAIRA™ (phentermine hydrochloride USP) 8 mg tablets, CIV is an appetite suppressant used for a short period of time (a few weeks) for weight loss and should be used together with regular exercise and a reduced-calorie diet.

- LOMAIRA is for adults with an initial BMI* of 30 or more (obesity) or 27 or more (overweight) with at least one weight-related medical condition such as controlled high blood pressure, diabetes, or high cholesterol.

- The limited usefulness of this drug class (anorectics), including LOMAIRA, should be measured against possible risk factors inherent in their use.

*Dosage should be individualized to obtain an adequate response with the lowest effective dose. The usual adult dose is one tablet three times a day 30 minutes before meals. The LOMAIRA tablet is scored to facilitate administering one half of the usual dosage for patients not requiring the full dose. Phentermine HCl is not recommended for use in pediatric patients 16 years of age or younger. Late evening medication should be avoided because of the possibility of resulting insomnia.

**IMPORTANT SAFETY INFORMATION**

Don’t take Lomaira if you have a history of cardiovascular disease (e.g., coronary artery disease, stroke, arrhythmias, congestive heart failure or uncontrolled high blood pressure); are taking or have taken a monoamine oxidase inhibitor drug (MAOI) within the past 14 days; have overactive thyroid, glaucoma (increased pressure in the eyes), agitation or a history of drug abuse; are pregnant, nursing, or allergic to the sympathomimetic amines such as phentermine or any of the ingredients in Lomaira. (Cont. on next page)

*Phentermine HCl is the active ingredient in Lomaira™

*Body Mass Index (BMI) measures the amount of fat in the body based on height and weight. BMI is measured in kg/m².
Stocking tempting treats at home:
“I bought Halloween candy just for you!”

Reminding of past failed attempts:
“Which diet are you trying this time?”

Acting offended when you decline their food:
“You’re too good for my lasagna now.”

If you’ve experienced situations like these, you know how they can throw you off track or make you feel distant from your partner. It’s crucial to consider that your partner’s actions might not be intentional; they might not realize their behaviors are unsupportive. These actions could be rooted in their own insecurities, such as a fear of change, a history of using food as a gesture of love, or a genuine belief that they are helping us.

**BUILDING NEW RITUALS TOGETHER**

Our relationships are built upon the bonds we share, often revolving around rituals or traditions that define our connections, like a pizza date, a daily dessert or a nightly glass of wine. As you choose to make changes to improve your health, some of the activities you once enjoyed with your partner may no longer align with your health journey.

While you may be ready for these changes, your partner might not be as prepared to embrace them. They might feel like they’re being pulled along, causing a significant shift in your relationship dynamic. To strengthen your connection, it’s helpful to involve your partner more in the change process. The key is to discover new experiences and rituals together, emphasizing that your connection is not solely built on past habits. Here are a few ideas to consider:

- Change takeout night to learning to cook a new recipe at home together.
- Replace dessert routines with sharing a cup of hot tea together.
- Instead of unpacking your day over a glass of wine, go for a walk together.
- Replace a TV night with reading and discussing the latest bestseller.

**NAVIGATING INSEcurities AND jeALOUSY**

You might find that your partner struggles with feelings of insecurity or jealousy as you embark on a weight-loss journey. If this happens, it’s important to give them time and space to adjust. Allow them the opportunity to share their fears and anxieties, and if needed, seek support from other sources. Setting boundaries and leading by example can also be effective strategies.

As your loved ones witness the positive changes in your health, there’s a possibility that they may become more open to making their own positive health changes. If this shift occurs, be there to support them on their own journey.
Providing a Clear Plan

When discussing your weight-loss journey, it’s crucial to communicate your goals and intentions clearly. Help your loved ones understand the vision you have for becoming the healthiest version of yourself. Many people naturally harbor apprehensions about change and the uncertainty it can bring. As you embark on your new goals, concerns might arise as your loved ones and friends grapple with the potential implications for the rituals and celebrations that mark your time together.

If this happens, you can assure them that your journey is unique to you and does not necessarily mean significant changes for everyone. By outlining your goals and intentions, you can help alleviate some of their worries and show them where your journey is headed. This transparency can help put everyone at ease as they come to realize that your personal goals don’t necessarily entail radical transformations for the entire family or friendship.

Impact on Your Success

Regardless of the reason for their behavior, it can have a significant negative impact on your success. Recognizing that obesity is a chronic, recurring condition, the support and understanding of a partner can significantly influence your ability to navigate the challenges that will inevitably arise. While our partners often want to help, they may require guidance on how to do so effectively. Your ability to recognize damaging behaviors allows you both the chance to address these issues with your partner before they negatively impact your health and your relationship.

Honest Reflection

When things get tough, you might want to blame someone else. You might think, “If they would just support me, everything would be easier.” However, it’s important to take a moment to decide if this belief is genuinely true and fair. Ultimately, your partner cannot force you to do anything; you always have a choice. When they bring your favorite treat home or encourage you to take the night off from your plan, you are not forced to accept their offer. While it may make things more challenging, viewing it as an opportunity to reinforce your boundaries and help them learn what support means for you can be beneficial.

Taking care of yourself means doing what is best for you, even when it’s hard. If your partner doesn’t fully support the changes you want to make, it’s not easy, but it’s not impossible. The first step is realizing that you are making these changes because you want to, not because someone else is making you. This realization alone can help you improve your relationship and your health journey. Remember, your partner should not have to change just because you do.

Communication is Key

Always remember open and honest communication is vital. Set aside a designated time to sit down with your partner and share your feelings and concerns. Emphasize why your health matters to you, using “I” statements to avoid triggering defensiveness. Be prepared to explain how they can support you effectively. This approach fosters empathy and understanding.

An important part of this process is spending time considering how you need to be supported so that you can communicate your needs effectively. We don’t come with manuals, after all.

Seeking Professional Help

If communication and efforts to adapt with your partner continue to be challenging, you can try seeking professional assistance, such as a marriage or relationship counselor. A skilled counselor can provide a neutral space for both partners to express concerns, offer insights and suggest strategies to enhance understanding and collaboration.

Overcoming Challenges Together

Spousal sabotage can be overcome with patience, communication and, if needed, professional help. Your health journey is important, and with the right support, overcoming challenges and achieving success is possible.

About the Author:
Leslie Golden MD, MPH, is board-certified in Family Medicine and Obesity Medicine. With a deep passion for increasing awareness and understanding of obesity as a disease, she leverages both her medical expertise and personal weight journey to help patients improve their health. Dr. Golden practices at her private practice, Weight In Gold Wellness, located in Wisconsin.
Dating, no matter your age, can be an emotional rollercoaster from nervousness to excitement. For those following a specific lifestyle, the feeling of “butterflies in your stomach” may be all you desire on a date! Fortunately, focusing on a romantic date without food is possible. Mirriam-Webster defines a date as “a social engagement between two persons that often has a romantic character.” This doesn’t necessarily involve food, restaurants, or tricky social situations that can be challenging to navigate for those aiming to maintain a healthy lifestyle.

Dating is about spending time with someone in a romantic context to assess compatibility and explore the potential for a deeper relationship. It involves engaging in various activities, conversations and shared experiences to better understand each other. The goal is to discover mutual romantic interest and build a meaningful connection with the potential for a committed relationship. Dating customs and expectations vary across cultures and are highly personal.

Seeing someone in a way that reveals their interests goes beyond sitting across from a restaurant table. There are numerous connection and value-based reasons to get to know someone differently. Novel, new or mysterious experiences are good for your brain's dopamine release, and let’s not forget the financial aspect – fancy dinners add up, especially if you’re footing the bill!
As someone who married my high-school sweetheart, I had ZERO clue what dating in my 40s would be like. It turned out to be a fun way to understand myself better and discover what I enjoy. Getting to know someone's romantic character has also been surprisingly enlightening.

Once you’re dating more seriously, use the Notes section on your phone to create a list of things to do, from day trips and vacations to watching movies together. Share your notes for a fun way to flirt while apart. There’s nothing worse than an “I don’t know, what do you want to do?” game of ping-pong, so keep your thoughts collected in one place and suggest anything on your list.

I’ve categorized my suggested date ideas into Active Adventures, Outdoor Escapades, Shared Interests/Entertainment and Offbeat/Playful Experiences.

**Active Adventures**

- Try new physical activities like horseback riding, archery, dancing, obstacle or ropes courses, or ziplining for an adrenaline rush.
- Test your skills with games like pool, darts, bocce ball, bowling or arcade games.
- Check out specialty places with activities like laser tag, ax throwing, pickleball, mini golf, TopGolf™, roller skating or ice skating for friendly competition.
- Explore the outdoors by biking, hiking, kayaking or paddleboarding together.
- Make morning or evening walks or bike rides a routine, changing up the locations for variety. You can go to the beach to collect glass, walk your dog or visit different parks.
- If you have a favorite exercise class, bring your date and give them a glimpse of your social circle.

My date Shawn and I tried indoor pickleball for the first time, and we discovered that I have a secret talent! It was fun to impress him with my skills and get sweaty and active together.

*Creative Dates continued on page 20*
OUTDOOR ESCAPADES

- Connect with nature by watching sunsets, enjoying early morning sunrises or taking leisurely nature walks.
- Embrace the beauty of the night sky or go stargazing. You might even witness a shuttle launch!
- Create cozy moments with backyard bonfires or engage in gardening and yard work.
- Pick your own fruits at orchards for a fun and rewarding outdoor experience.
- Go on a ferry or boat tour together for a romantic water experience.
- Rent electric bikes or scooters for an adventurous day of exploring.

Shawn and I had a great day visiting Cypress Gardens outside Charleston, SC (from the movie The Notebook), where we paddled a rowboat around cypress trees, even including my daughter in the fun. It checked the boxes for new outdoor places and added excitement for narrowly avoiding alligators in the water!

SHARED INTERESTS AND ENTERTAINMENT

- Enjoy cultural and artistic venues like concerts, movies, comedy shows or art walks, which allow you to learn about each other’s personalities and interests.
- Unleash your creativity by painting together, visiting bookstores to share your favorite books or singing karaoke.
- Dive into local experiences like exploring farmers’ markets, attending sports games, or teaming up for trivia or bingo.
- Redecorate a space together or embark on unique shopping adventures, like checking out an IKEA store.
- Go thrifting or visit the dollar store with the goal of finding the silliest or most creative gift.
- Get a palm reading together or go on a ghost tour or historical tour in your city.
- Take a bus or train an hour away to explore a new town or be a ‘tourist in your own town.’
- Volunteer together to discover each other’s passions and purpose.
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Offbeat and Playful Experiences

- Get a real camera and explore abandoned places, taking artsy photos.
- Challenge each other to a game of “Would You Rather?” or try a relationship card game.
- Get into character by role-playing with accents in public, or if you’ve been together awhile, pretend it’s your first date!
- Collaborate on creative projects like making videos or composing songs together. Or work on a shared playlist and add meaningful songs to each of you.
- Venture into the unknown with a spontaneous visit to an open house or timeshare sale opportunity as ‘prospective buyers.’
- Choose a random band neither has heard before and explore a new type of music.

Shawn and I challenged each other to see who could stay in character the longest while we were on a weekend trip in Savannah, GA. I don’t think I’ve ever laughed as hard as I did when we convinced people we had just met that day.

As cliché as it sounds, dating is what you make of it. You can either passively go on dates and feel awkward about eating or plan ahead and get creative in getting to know your date. The dates may not all be winners, but I can guarantee you’ll learn more about yourself during these experiences than in a dinnertime Q&A session.

About the Author:
Nina Crowley, PhD, RD, advocates for effective communication about weight and health, a patient-centered approach, and improved access to care for people with obesity. With 16 years at the Medical University of South Carolina’s Metabolic and Bariatric Surgery Program, she now serves as the Professional Affiliations and Education Manager for seca’s medical body composition division. Nina is a thought leader, public speaker and content producer in the obesity care community and holds several leadership positions in obesity care organizations, including the OAC’s Board of Directors.
Support is a crucial factor in achieving our goals, especially when it comes to health goals. Without proper support from medical professionals, friends and family members, reaching a healthy lifestyle can be challenging and isolating. Research has shown that social support is linked with better eating habits, regular physical activity and healthy weight management. That’s why having support and feeling supported throughout this journey is important.

When it comes to making lifestyle changes, it can be difficult when only one member decides to make a change. However, communication is key. You need to have an open and honest conversation with your family, communicate your plans and ask for their support. Don’t assume they know your goals or how you plan to achieve them. Also, don’t assume that they know you want their support. Be clear about your needs and what will support you best.

Remember, there are different types of support, and various people in our lives can offer us different forms of support at various times. Examples include emotional support (someone who will listen when you feel discouraged), practical support (someone who will run to the store for you or watch the kids while you go to the gym), and inspiring support (someone who will encourage you to take a mid-day walk together). It’s important to identify what you want and need from your family and then ask for their help. Be specific and communicate what would be helpful and what wouldn’t be helpful during this journey. For instance, you may not want them to make comments about food around you or eat dessert in front of you. Communicate this to them and come up with a plan that works for everyone.

You can also get your family involved in this journey. Making healthy lifestyle changes can benefit everyone, so why not ask your family to join you for an evening walk or have them help you in the kitchen when you’re preparing dinner? It will feel less lonely if you enlist your family and have them by your side when you are making these changes.

Take a moment to think of one specific thing you can ask your family to do to support you right now. Then, decide when and how you want to ask for this support. Remember, no one is a mind reader, and we need to ask for what we want and need from others. You got this!
Obesity should be recognized and treated as a chronic disease, necessitating lifelong management. When embarking on the journey of weight management, it only makes sense to get support from those closest to you—your family. Given that families spend a great deal of time together and considering the genetic component of obesity, family support is crucial. Approaching weight management as a family can benefit everyone!

So, what does it take to get the support you need?

1. **Communicate**

   Effective communication is key. Family members must understand the significance of weight management. Are they aware that neglecting weight control increases the risk of developing conditions such as diabetes, hypertension and sleep apnea? Often, a shared understanding of the “why” makes it easier to work together as a team. Adding small lessons into daily life can help in understanding the complexities of obesity as a disease.

   - Teach your kids that adding a vegetable to dinner enhances health by providing essential nutrients and fiber, making it a low-calorie choice for weight management.
   - Emphasize that incorporating movement into the day not only improves health but also helps with weight management. A quick 10-minute walk can improve your mood, and an evening bike ride can burn calories.

2. **Plan**

   Weight management isn’t easy. Coming up with a plan for your family ensures everyone is on the same page. Each family member, regardless of the size of their role, can contribute. Working together as a team can engage all team members.

   - Have your school-age kids plan an after-dinner activity to stay active instead of remaining sedentary on the couch. Physical activity plays a significant role in weight management, and a family-oriented activity can be fun!
   - Visit the grocery store as a family and allow members to select snacks such as fresh fruits, vegetables, cheese sticks, yogurt and nuts. Choosing the right healthy foods and having them available can be a triumph! Take it to the next step by using these items to prepare a wholesome meal.

*Ask The Experts continued on page 27*
What is Wegovy®?

Wegovy® (semaglutide) injection 2.4 mg is an injectable prescription medicine that may help adults with obesity (BMI ≥30) or some adults with excess weight (BMI ≥27) (overweight) who also have weight-related medical problems to help them lose weight and keep it off. Wegovy® should be used with a reduced calorie meal plan and increased physical activity.

- Wegovy® contains semaglutide and should not be used with other semaglutide-containing products or other GLP-1 receptor agonist medicines.
- It is not known if Wegovy® is safe and effective when taken with other prescription, over-the-counter, or herbal weight loss products.
- It is not known if Wegovy® can be used safely in people with a history of pancreatitis.
- It is not known if Wegovy® is safe and effective for use in children under 12 years of age.

Important Safety Information

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

Wegovy® may cause serious side effects, 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 rodents, Wegovy® and medicines that work like Wegovy® caused thyroid tumors, including thyroid cancer. It is not known if Wegovy® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid carcinoma (MTC) in people.
- **Do not use Wegovy® 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).**

Do not use Wegovy® 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 have had a serious allergic reaction to semaglutide or any of the ingredients in Wegovy®.

Before using Wegovy®, tell your healthcare provider if you have any other medical conditions, including if you:

- have or have had problems with your pancreas or kidneys.
- have type 2 diabetes and a history of diabetic retinopathy.
- have or have had depression, suicidal thoughts, or mental health issues.
- are pregnant or plan to become pregnant. Wegovy® may harm your unborn baby. You should stop using Wegovy® 2 months before you plan to become pregnant.
- are breastfeeding or plan to breastfeed. It is not known if Wegovy® passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Wegovy® may affect the way some medicines work and some medicines may affect the way Wegovy® works. Tell your healthcare provider if you are taking other medicines to treat diabetes, including sulfonylureas or insulin. Wegovy® slows stomach emptying and can affect medicines that need to pass through the stomach quickly.
Important Safety Information (cont’d)

What are the possible side effects of Wegovy®?

Wegovy® may cause serious side effects, including:

• inflammation of your pancreas (pancreatitis). Stop using Wegovy® 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 abdomen to your back

• gallbladder problems. Wegovy® may cause gallbladder problems, including gallstones. Some gallstones may need surgery. Call your healthcare provider if you have symptoms, such as pain in your upper stomach (abdomen), fever, yellowing of the skin or eyes (jaundice), or clay-colored stools

• increased risk of low blood sugar (hypoglycemia) in patients with type 2 diabetes, especially those who also take medicines for type 2 diabetes such as sulfonylureas or insulin. This can be both a serious and common side effect. Talk to your healthcare provider about how to recognize and treat low blood sugar and check your blood sugar before you start and while you take Wegovy®. Signs and symptoms of low blood sugar may include dizziness or light-headedness, blurred vision, anxiety, irritability or mood changes, sweating, slurred speech, hunger, confusion or drowsiness, Shakiness, weakness, headache, fast heartbeat, or feeling jittery

• kidney problems (kidney failure). In people who have kidney problems, diarrhea, nausea, and vomiting may cause a loss of fluids (dehydration), which may cause kidney problems to get worse. It is important for you to drink fluids to help reduce your chance of dehydration

• serious allergic reactions. Stop using Wegovy® 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; problems breathing or swallowing; severe rash or itching; fainting or feeling dizzy; or very rapid heartbeat

• change in vision in people with type 2 diabetes. Tell your healthcare provider if you have changes in vision during treatment with Wegovy®

• increased heart rate. Wegovy® can increase your heart rate while you are at rest. Tell your healthcare provider if you feel your heart racing or pounding in your chest and it lasts for several minutes.

• 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 Wegovy® may include: nausea, diarrhea, vomiting, constipation, stomach (abdomen) pain, headache, tiredness (fatigue), upset stomach, dizziness, feeling bloated, belching, gas, stomach flu, heartburn, and runny nose or sore throat.

Wegovy® is a prescription medication. 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.

FDA, US Food and Drug Administration.

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

*Results are from a 68-week medical study of adults with obesity (BMI ≥30) and adults with excess weight (BMI ≥27) who also had weight-related medical problems including high blood pressure or high cholesterol. People with type 2 diabetes were excluded. Both groups received instruction for a reduced-calorie meal plan and increased physical activity. 7% of people taking Wegovy® (92 people) left the medical study due to side effects, compared to 3.1% of people taking placebo (20 people).
Brief Summary of Information about WEGOVY® (semaglutide) injection

Rx Only
This information is not comprehensive. How to get more information:
• Talk to your healthcare provider or pharmacist
• Visit www.novo-pi.com/wegovy.pdf to obtain the FDA-approved product labeling
• Call 1-833-Wegovy-1

What is the most important information I should know about WEGOVY®?
WEGOVY® may cause serious side effects, 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 rodents, WEGOVY® and medicines that work like WEGOVY® caused thyroid tumors, including thyroid cancer. It is not known if WEGOVY® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid carcinoma (MTC) in people.
• Do not use WEGOVY® 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).

What is WEGOVY®?
WEGOVY® is an injectable prescription medicine that may help adults and children aged 12 years and older with obesity, or some adults with excess weight (overweight) who also have weight-related medical problems to help them lose weight and keep the weight off.
• WEGOVY® should be used with a reduced calorie meal plan and increased physical activity.
• WEGOVY® contains semaglutide and should not be used with other semaglutide-containing products or other GLP-1 receptor agonist medicines.
• It is not known if WEGOVY® is safe and effective when taken with other prescription, over-the-counter, or herbal weight loss products.
• It is not known if WEGOVY® can be used safely in people with a history of pancreatitis.
• It is not known if WEGOVY® is safe and effective for use in children under 12 years of age.

Do not use WEGOVY® 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 have had a serious allergic reaction to semaglutide or any of the ingredients in WEGOVY®. Symptoms of a serious allergic reaction include:
  • swelling of your face, lips, tongue or throat
  • fainting or feeling dizzy
  • problems breathing or swallowing
  • severe rash or itching
  • very rapid heartbeat

Before using WEGOVY®, tell your healthcare provider if you have any other medical conditions, including if you:
• have or have had problems with your pancreas or kidneys.
• have type 2 diabetes and a history of diabetic retinopathy.
• have or have had depression or suicidal thoughts, or mental health issues.
• are pregnant or plan to become pregnant. WEGOVY® may harm your unborn baby. You should stop using WEGOVY® 2 months before you plan to become pregnant.
• Pregnancy Exposure Registry: There is a pregnancy exposure registry for women who use WEGOVY® during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. Talk to your healthcare provider about how you can take part in this registry or you may contact Novo Nordisk at 1-877-390-2760.
• are breastfeeding or plan to breastfeed. It is not known if WEGOVY® passes into your breast milk. You should talk with your healthcare provider about the best way to feed your baby while using WEGOVY®.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. WEGOVY® may affect the way some medicines work and some medicines may affect the way WEGOVY® works. Tell your healthcare provider if you are taking other medicines to treat diabetes, including sulfonylureas or insulin. WEGOVY® slows stomach emptying and can affect medicines that need to pass through the stomach quickly.
Know the medicines you take. Keep a list of them to show your healthcare provider and pharmacist when you get a new medicine.

How should I use WEGOVY®?
• WEGOVY® is injected under the skin (subcutaneously) into your stomach (abdomen), thigh, or upper arm. Do not inject WEGOVY® into a muscle (intramuscularly) or vein (intravenously).
• Change (rotate) your injection site with each injection. Do not use the same site for each injection.
• Use WEGOVY® 1 time each week, on the same day each week, at any time of the day.
• If you take too much WEGOVY®, you may have severe nausea, severe vomiting and severe low blood sugar. Call your healthcare provider or go to the nearest hospital emergency room right away if you experience any of these symptoms.

What are the possible side effects of WEGOVY®?
WEGOVY® may cause serious side effects, including:
• See “What is the most important information I should know about WEGOVY®?”
• inflammation of your pancreas (pancreatitis). Stop using WEGOVY® 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 abdomen to your back.
• gallbladder problems. WEGOVY® may cause gallbladder problems including gallstones. Some gallbladder problems need surgery. Call your healthcare provider if you have any of the following symptoms:
  • pain in your upper stomach (abdomen)
  • yellowing of skin or eyes (jaundice)
  • fever
  • clay-colored stools
• increased risk of low blood sugar (hypoglycemia) in patients with type 2 diabetes, especially those who also take medicines to treat type 2 diabetes mellitus such as sulfonylureas or insulin. Low blood sugar in patients with type 2 diabetes who receive WEGOVY® can be both a serious and common side effect. Talk to your healthcare provider about how to recognize and treat low blood sugar. You should check your blood sugar before you start taking WEGOVY® and while you take WEGOVY®. Signs and symptoms of low blood sugar may include:
  • dizziness or light-headedness
  • blurred vision
  • anxiety
  • irritability or mood changes
  • fast heartbeat
• kidney problems (kidney failure). In people who have kidney problems, diarrhea, nausea, and vomiting may cause a loss of fluids (dehydration) which may cause kidney problems to get worse. It is important for you to drink fluids to help reduce your chance of dehydration.
• serious allergic reactions. Stop using WEGOVY® 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
  • very rapid heartbeat
  • problems breathing or swallowing
  • feeling or feeling dizzy
• change in vision in people with type 2 diabetes. Tell your healthcare provider if you have changes in vision during treatment with WEGOVY®.
• increased heart rate. WEGOVY® can increase your heart rate while you are at rest. Your healthcare provider should check your heart rate while you take WEGOVY®. Tell your healthcare provider if you feel your heart racing or pounding in your chest and it lasts for several minutes.
• 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 WEGOVY® in adults or children aged 12 years and older may include:
• nausea
• constipation
• diarrhea
• feeling bloated
• gas
• vomiting
• weakness
• fever
• clay-colored stools
• very rapid heartbeat
• problems breathing or swallowing
• feeling or feeling dizzy
• change in vision
• confusion or drowsiness
• feeling jittery

Talk to your healthcare provider about any side effect that bothers you or does not go away. These are not all the possible side effects of WEGOVY®. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.


This Medication Guide has been approved by the U.S. Food and Drug Administration. Issued: 07/2023
Manufactured by: Novo Nordisk A/S, DK-2880 Bagsvaerd, Denmark
More detailed information is available upon request.
Available by prescription only.
For more information, go to startWegovy.com or call 1-833-Wegovy-1.
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US23SEM00541 August 2023
**Ask The Experts continued from page 23**

3. **Teamwork**

Staying on track is best achieved when family members support each other. Identify the support you need from your family and ask them to pitch in.

- Enlist your children or partner as walking partners. Remind each other when it’s time to be active.
- Ask your family to keep treats out of reach. Often, “out of sight, out of mind” holds true. Store treats and sweets in a cabinet that is hard to access and see.

Remember, managing your weight is a daily commitment. Acknowledge that there will be both ups and downs, but with your family supporting each other, the journey becomes a bit easier.

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**Answer provided by Stefanie Trilling**

Despite my significant weight-loss success thanks to treatment with anti-obesity medication, and a BMI that no longer qualifies as having obesity, I will deal with obesity for the rest of my life. I have obesity whether I weigh 140 pounds, 240 pounds, or anywhere in between — until there’s a cure. For better or worse, I’ve seen the good, the bad, and the ugly as it relates to my chronic weight management in a family in which I’m the only person with obesity. In short, families can support each other in chronic weight management by following three steps:

1. **Suspending judgment (or at least biting one’s tongue, especially when someone else is biting into food).** This means withholding well-meaning (and not-so-well-meaning) comments about a family member’s weight, size, shape, appetite, food or drink choices, obesity medication prescriptions, or decisions not to medically treat their obesity. At certain times in my life, just existing in public—the simple act of being—made me feel as if I were exposing my shame to the whole world. It was even worse when I was buying food or eating. Support your family members on their journey by averting your gaze and turning your scrutiny to something more interesting than whether they lost or gained a few pounds over the holidays.

2. **Remembering that excess weight is just one side of the obesity coin—your family member is the same person on the inside. Weight is just one part of the whole obesity journey. Marvels of modern medicine, like the anti-obesity medications semaglutide and tirzepatide, have helped people manage their weight and feel better physically. However, scientists have not yet found a way to treat the toll that years of shame and guilt can have on the psyche of a person with obesity. Just because your family member may look different, don’t expect them to feel however you may think a “thin person” or a “happy person” feels overnight … or maybe ever. Weight-loss is only the beginning of true change in chronic weight management.

3. **Understanding that chronic weight management journeys don’t result in a picture-perfect “before” and “after” snapshot. Most importantly, there’s no “before” and “after.” Chronic weight management is not linear, nor does it have an endpoint (unless, of course, some amazing scientist uncovers a cure for obesity). Factors beyond a person’s control—such as medication shortages, illness or injury, changes to health insurance or finances, and stressful life events—may cause your family member to gain weight during their chronic weight management journey. My advice? See Step 1.

The path of chronic weight management is extremely personal, and support will look different in every family. Keep an open mind and let your family member drive the bus on their own journey.

**About the Authors:**

Rachel Goldman, PhD, FTOS, is a licensed psychologist, speaker and consultant known for her holistic approach to health. Specializing in the mind-body connection, she focuses on areas such as stress reduction, disordered eating behaviors and health behavior change. Dr. Goldman holds the position of Clinical Assistant Professor in the Department of Psychiatry at NYU Grossman School of Medicine and operates a private practice in NYC, where she uses cognitive behavioral therapy to assist in behavioral changes. Prior to starting her private practice, she was the Senior Psychologist at the Center for Obesity and Weight Management at Bellevue Hospital. Her work as a bariatric psychologist was highlighted in the June 2016 APA Monitor on Psychology. Dr. Goldman is frequently featured in the media, with notable appearances such as a recent conversation with Oprah and as a consultant for the film, “The Whale.” She is passionate about helping others make behavior changes that will allow them to live happier and healthier lives.

Sarah Muntel, RD, is a Registered Dietitian with more than 20 years of experience working with surgical and medical weight-loss patients. She is passionate about helping people reach their health and wellness goals. In her free time, Sarah enjoys spending time with her husband and children, watching her children’s activities, and going on walks with friends.

Stefanie Trilling is a legal marketing professional, recovering lawyer/journalist, and full-time anti-obesity medication evangelist. She collects hobbies and lives with her husband, two kids, and a dog in Manhattan.
The Obesity Action Coalition’s 12th annual *Your Weight Matters* Convention was a three-day, in-person event designed to equip attendees with the tools needed to take charge of their weight and health and shape a better world for people with obesity. More than 170 individuals across the world came together for an inspirational weekend packed with science-based education, hands-on tools and, most notably, a community of support.

The theme of the *YWM2023-Engage* Convention was “The Power of Our Light,” presenting the question to attendees, “How will you use your light?” The goal of the weekend was for attendees to walk away knowing how they can use each of their unique strengths to make meaningful change for people living with obesity.

**Understanding How Weight Impacts Health**

The *YWM2023-Engage* Convention crowd was made up of individuals eager to learn from the experts and explore all the ways to take charge of their health journey.

The lineup featured speakers with diverse backgrounds ranging from obesity medicine and nutrition to mental health. The expert-led sessions taught attendees how to look past the outdated BMI measurement to more accurately and respectfully describe obesity, the complex relationship between the brain and the stomach to better navigate hunger and metabolism, the influence of mindset on reaching weight and health goals, and much more.

By the end of *YWM2023-Engage* Convention’s educational sessions, attendees were equipped with practical tools to tackle their weight and health goals.
Advocating for a Better World for People with Obesity

The OAC aims to change the world for people living with obesity, and we cannot do it without the voice of our OAC Community. YWM2023-Engage helped more than 75 attendees strengthen and elevate their voices like never before with something for everyone, from advocacy-focused sessions to on-site action activities.

Beginner advocates had the opportunity to learn the basics of OAC’s advocacy work and how to get involved, while more experienced advocates participated in a deep dive into how to take their advocacy skills to the next level. YWM2023-Engage also featured the OAC Advocacy Hub, where attendees learned all about our organization’s advocacy work, our victories this year and our plans for next year.

One crowd-favorite activity from the event was a 10-foot interactive map of the United States in which attendees could place stickers to showcase where they have taken action!

By the end of the weekend, attendees were ready to step up and take action by challenging instances of weight bias and hurdles to accessing care. Many attendees realized the potential impact of getting more involved with OAC and the different actions we can take daily to educate others on obesity.

Empower Early: A Focus on Childhood Obesity Care

Taking place during National Childhood Obesity Awareness Month, YWM2023-Engage Convention proudly introduced a brand-new youth-focused program called the Empower Early Initiative. This initiative brought 11 families from across the nation together for a one-of-a-kind experience tailored to teens living with obesity.

These families not only learned about the science behind effective obesity care but also formed lasting connections with each other. Some of the most heartwarming moments of the weekend were witnessing the teens smile, laugh and have fun with their new friends.

By the end of the weekend, many felt safe enough to share their stories with the rest of the crowd. For the first time, these teens learned that they are not alone in their journey anymore because they have joined a powerful community of compassionate, supportive individuals who understand the challenges they face.

How Will You Use the Power of Your Light?

OAC leaders wrapped up the weekend by sharing their experiences and encouraged attendees to stand up to the microphone and share theirs. We saw brand-new and returning Convention attendees share their stories of health challenges and weight bias, what brought them to the event and how they will advocate for the cause in the future.

YWM2023-Engage Convention became a safe space for a community like none other - a place where all can be treated with dignity and respect, without fear of judgment, and knowing every person in the room understood their pain and challenges.

Attendees left feeling empowered in their health journeys and energized to create a better world for people living with obesity, understanding that each one of us has a unique spark that has the power to light up the path ahead. The light within each of us has the potential to not only change our own lives but touch the lives of countless others.

YWM2023-Engage Convention proved that the OAC Community is an unstoppable force for change. Together, we will use the power of our light discovered during the Convention to ignite change for people with obesity across the world.

Convention continued on page 30
What’s Ahead in 2024

In 2024, we are excited to present two unique *Your Weight Matters* Event experiences to meet the diverse needs of our OAC Community!

**Your Weight Matters Virtual (YWM-Virtual) Convention**

YWM-Virtual Convention is back for another weekend of immersive and interactive education! Tune in live on May 18-19, 2024, on our online Convention Portal for quality, science-based tools and valuable resources.

With a free registration option, you can take part in a packed weekend of education and opportunities to connect with fellow attendees!

**Your Weight Matters Regional (YWM-Regional) Convention**

The OAC is proud to announce a brand-new program, *Your Weight Matters* Regional Convention. With this program, we are bringing the Convention experience to you!

In cities across the nation, we’re bringing you a cost-free day of science-based education on weight management, nutrition, mental health and much more.

Do you live near these cities or have friends or family in the area? Come see us!

- San Diego, CA (February 2024)
- Indianapolis, IN (April 2024)
- Tampa, FL (July 2024)
- Austin, TX (September 2024)
- Boston, MA (October 2024)

Visit YourWeightMatters.com for details and updates.

**About the Author:**

Kendall Griffey, OAC Communications Manager, graduated from the University of North Florida with a BS in Communications with a focus in public relations. Kendall is passionate about her work in the non-profit sector and is driven to make a meaningful impact.
Looking for the RIGHT information about your weight and health?

BEGIN YOUR JOURNEY TO IMPROVED HEALTH!

- Get quality science-based education delivered by trusted experts
- Learn weight management strategies
- Hear more about the latest treatments, best practices in nutrition and the role mental health plays
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Winter has arrived! Don’t allow the chilly and damp weather to confine you indoors, making you feel bored or stuck in front of the TV, binge-watching Netflix™. Instead, explore these fun ideas that will keep your family’s winter days lively and filled with laughter.
Indoor Snowball Battle

Who says you need real snow for a snowball battle? Grab some soft Nerf™ balls or make your own “snowballs” from rolled-up mismatched socks. Divide into teams, build couch cushion forts to hide behind and let the epic battle begin!

Winter-themed Cooking

Put on your chef hats and aprons! Grab a cookbook or search online to find a new recipe to try. Make a big pot of chili or soup and share it with an older neighbor. Each week, experiment with different types of winter squashes, such as acorn, butternut, delicata, kabocha, banana and spaghetti squash. You’ll have plenty to explore before the arrival of spring.

Winter Fashion Show

Unleash your inner fashionista! Gather colorful scarves, hats, mittens, boots and jackets – let your creativity run wild. The wackier and more mismatched, the better! Once everyone’s decked out in their fashionable creations, kick off the family fashion show. Strut your stuff and showcase your unique winter style.

Balloon Tennis

Start by crafting tennis rackets using paper plates and attaching popsicle sticks for handles. Once you’ve created your rackets, make a line on the floor with an outstretched scarf or a piece of tape. Blow up the balloon, and it’s time to start playing! Hit the balloon back and forth between players, trying to keep a rally going. Blow up several balloons and see who can keep a rally going the longest.

Indoor Mini Bowling

Transform your hallway into a mini bowling alley with homemade pins (plastic water bottles work great) and a soft ball. Roll your way to strikes and spares as you keep score. It’s a fantastic way to blend fun with a little friendly competition. Create a coveted bowling trophy out of a decorated plastic cup, or find an old trophy at a thrift store.

Family Yoga Challenge

Enter the zen zone with a family yoga session. Try simple poses that promote flexibility and relaxation. It’s a great way to stay active and find some inner peace together. Discover free yoga classes on the Insight Timer™ app or YouTube™.

Dance Off

Turn up the music and have a family dance-off! Create a playlist with your favorite tunes and take turns showcasing your best dance moves. Choose a specific decade or era for a round, and have participants dance to songs from that time. For a twist, blindfold participants and have them dance to a chosen song, adding an element of surprise. Record the dance on your phone and let the laughter begin.

Kid’s Corner continued on page 37
What is CONTRAVE?
Along with diet and exercise, CONTRAVE is a prescription weight-loss medicine that may help some adults with a BMI ≥ 30 kg/m² (obese) or with a BMI of ≥ 27 kg/m² (overweight) with at least one weight-related medical problem such as high blood pressure, high cholesterol, or type 2 diabetes, lose weight and keep the weight off.

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

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

CONTRAVE is not approved to treat depression or other mental illnesses, or to help people quit smoking (smoking cessation).

IMPORTANT SAFETY INFORMATION
CONTRAVE can cause serious side effects including:
Suicidal thoughts or actions: One of the ingredients in CONTRAVE is bupropion. Bupropion has caused some people to have suicidal thoughts or actions or unusual changes in behavior, whether or not they are taking medicines used to treat depression. Bupropion may increase the risk of suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.

If you already have depression or other mental illnesses, taking bupropion may cause it to get worse, especially within the first few months of treatment.

While taking CONTRAVE, you or your family members should pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when you start taking CONTRAVE or when your dose changes.

Stop taking CONTRAVE and call a healthcare provider right away if you or your family members notice any of the following symptoms, especially if they are new, worse, or worry you: thoughts about suicide or dying; attempts to commit suicide; depression; anxiety; feeling agitated or restless; panic attacks; irritability; aggression, anger, or violence; acting on dangerous impulses; an extreme increase in activity and talking; other unusual changes in behavior or mood; trouble sleeping.

CONTRAVE is not approved for use in children under the age of 18.

Do not take CONTRAVE if you have uncontrolled high blood pressure; have or have had seizures; use other medicines that contain bupropion such as WELBUTRIN, WELBUTRIN SR, WELBUTRIN XL, APLENZIN and ZYBAN; have or have had an eating disorder called anorexia or bulimia; are dependent on opioid pain medicines or use medicines to help stop taking opioids, or are in opiate withdrawal; drink a lot of alcohol and abruptly stop drinking, or use medicines called sedatives (these make you sleepy), benzodiazepines, or anti-seizure medicines and stop using them all of a sudden; are taking or have taken medicines called monoamine oxidase inhibitors (MAOIs) in the past 14 days; or are allergic to any of the ingredients in CONTRAVE.

Tell your healthcare provider about all of your medical conditions including if you have: depression or other mental illnesses; attempted suicide; seizures; head injury; tumor or infection of brain or spine; low blood sugar or low sodium; liver or kidney problems; high blood pressure; heart attack, heart problems, or stroke; eating disorder; drinking a lot of alcohol; prescription medicine or street drug abuse; are 65 or older; diabetes; pregnant or planning to become pregnant; or breastfeeding.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

CONTRAVE may cause serious side effects, including:
• Seizures. There is a risk of having a seizure when you take CONTRAVE. The risk of seizure is higher in people who take higher doses of CONTRAVE, have certain medical conditions, or take CONTRAVE with certain other medicines. Do not take any other medicines while you are taking CONTRAVE unless your healthcare provider has said it is okay to take them. If you have a seizure while taking CONTRAVE, stop taking CONTRAVE and call your healthcare provider right away.
IMPORTANT SAFETY INFORMATION (cont’d)

• Risk of opioid overdose. Do not take large amounts of opioids, including opioid-containing medicines, such as heroin or prescription pain pills, to try to overcome the opioid-blocking effects of naltrexone. This can lead to serious injury, coma, or death.

Get emergency medical help right away if you take opioids and you:

• have trouble breathing
• become very drowsy with slowed breathing
• have slow, shallow breathing
• feel faint, very dizzy, confused, or have unusual symptoms

• Sudden opioid withdrawal. People who take CONTRAVE must not use any type of opioid including street drugs, prescription pain medicines, cough, cold, or diarrhea medicines that contain opioids, or opioid dependence treatments, for at least 7 to 10 days before starting CONTRAVE. Using opioids in the 7 to 10 days before you start taking CONTRAVE may cause you to suddenly have symptoms of opioid withdrawal when you take it. Sudden opioid withdrawal can be severe, and you may need to go to the hospital. Tell your healthcare provider you are taking CONTRAVE before a medical procedure or surgery.

• Severe allergic reactions. Stop taking CONTRAVE and call your healthcare provider or go to the nearest hospital emergency room right away if you have any of the following signs and symptoms of an allergic reaction: rash, itching, hives, fever, swollen lymph glands, painful sores in your mouth or around your eyes, swelling of your lips or tongue, chest pain, or trouble breathing.

• Increases in blood pressure or heart rate. Some people may get high blood pressure or have a higher heart rate when taking CONTRAVE. Your healthcare provider should check your blood pressure and heart rate before you start taking, and while you take CONTRAVE.

• Liver damage or hepatitis. Stop taking CONTRAVE and tell your healthcare provider if you have any of the following symptoms of liver problems: stomach area pain lasting more than a few days, dark urine, yellowing of the whites of your eyes, or tiredness. Your healthcare provider may need to stop treating you with CONTRAVE if you get signs or symptoms of a serious liver problem.

• Manic episodes. Bupropion can cause some people who were manic or depressed in the past to become manic or depressed again.

• Visual problems (angle-closure glaucoma). Signs and symptoms may include: eye pain, changes in vision, swelling or redness in or around the eye. Talk with your healthcare provider to find out if you are at risk for angle-closure glaucoma and to get treatment to prevent it if you are at risk.

• Increased risk of low blood sugar in people with type 2 diabetes mellitus who also take medicines to treat their diabetes (such as insulin or sulfonylureas). You should check your blood sugar before you start taking CONTRAVE and while you take CONTRAVE.

The most common side effects of CONTRAVE include nausea, constipation, headache, vomiting, dizziness, trouble sleeping, dry mouth, and diarrhea. These are not all of the possible side effects of CONTRAVE.

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.

Please see the Brief Summary of Prescribing Information on the adjacent page.

Everyone has different challenges when it comes to weight loss. Don’t let cravings from boredom sabotage your success.

Ask your doctor how CONTRAVE can help you lose weight and keep it off.

*The exact neurochemical effects of CONTRAVE leading to weight loss are not fully understood.
†The price of CONTRAVE is $99 per month with free shipping through the CurAccess Program. If your insurance covers CONTRAVE, it may cost less. CurAccess Program is offered by our partner pharmacies. Subject to patient eligibility.
‡Free shipping through the CurAccess Program is offered by a third-party partner.

Scan the QR Code to Pay $99 or Less† + Free Shipping‡ for CONTRAVE.

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CONTRAVE can cause serious side effects, including:

- Suicidal thoughts or actions. One of the ingredients in CONTRAVE is bupropion. Bupropion has caused some people to have suicidal thoughts or actions or unusual changes in behavior, whether or not they are taking medicines used to treat depression. Bupropion may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment. If you already have depression, or other mental illnesses, taking bupropion may cause it to get worse, especially within the first few months of treatment. Stop taking CONTRAVE and call a healthcare provider right away if you, or your family member, have any of the following symptoms.

While taking CONTRAVE, you or your family members should:

- Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when you start taking CONTRAVE or when your dose changes.
- Keep all follow-up visits with your healthcare provider as scheduled. Call your healthcare provider between visits as needed, especially if you have concerns about symptoms.

CONTRAVE has not been studied in and is not approved for use in children under the age of 18.

What is CONTRAVE?
CONTRAVE is a prescription medicine used with a reduced calorie diet and increased physical activity that may help some obese or overweight adults, who also have weight related medical problems, lose weight and keep the weight off. It is not known if CONTRAVE changes your risk of heart problems or stroke or of death due to heart problems or stroke. It is not known if CONTRAVE is safe and effective when taken with other prescription, over-the-counter, or herbal weight loss products.

CONTRAVE is not approved to treat depression or other mental illnesses, or to help people quit smoking.

Do not take CONTRAVE if you:

- have uncontrolled hypertension.
- have or have had seizures.
- use other medicines that contain bupropion.
- have or have had an eating disorder called anorexia or bulimia.
- are dependent on opioid pain medicines or use medicines to help stop taking opioids, or are in opiate withdrawal.

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

- have or have had depression or other mental illnesses. (such as bipolar disorder)
- have attempted suicide in the past
- have or have had seizures
- have had a head injury
- have had a tumor or infection of your brain or spine
- have had a problem with low blood sugar or low levels of sodium in your blood
- have or have had liver problems
- have high blood pressure
- have or have had a heart attack, heart problems, or have had a stroke
- have kidney problems
- are diabetic taking insulin or other medicines to control your blood sugar
- have or have had an eating disorder

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. CONTRAVE may affect the way other medicines work and other medicines may affect the way CONTRAVE works, causing side effects.

How should I take CONTRAVE?

- Take CONTRAVE exactly as your healthcare provider tells you. Your healthcare provider will change your dose if needed.

- Swallow CONTRAVE tablets whole. Do not cut, chew, or crush CONTRAVE tablets.

What should I avoid while taking CONTRAVE?

- Do not drink a lot of alcohol while taking CONTRAVE. If you drink a lot of alcohol, talk with your healthcare provider before suddenly stopping. If you suddenly stop drinking alcohol, you may increase your chance of having a seizure.

What are the possible side effects of CONTRAVE?

CONTRAVE may cause serious side effects, including:

- See “WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT CONTRAVE?”
- Seizures. There is a risk of having a seizure when you take CONTRAVE. The risk of seizure is higher in people who:
  - have or have had a head injury
  - have or have had seizures
  - have attempted suicide in the past

If you have a seizure while taking CONTRAVE, stop taking CONTRAVE and call your healthcare provider right away. You should not take CONTRAVE again if you have a seizure.

- Risk of opioid overdose. One of the ingredients in CONTRAVE (naltrexone) can increase your chance of having an opioid overdose if you take opioid medicines while taking CONTRAVE. Do not take large amounts of opioids to try to overcome the opioid blocking effects of naltrexone. This can lead to serious injury, coma, or death. If you have used opioid street drugs or opioid-containing medicines in the past, using opioids in amounts that you used before treatment with naltrexone can lead to overdose and death. You or someone close to you should get emergency medical help right away if you:
  - have trouble breathing
  - become very drowsy with slowed breathing
  - feel faint, very dizzy, confused, or have unusual symptoms

Sudden opioid withdrawal. People who take CONTRAVE must not use any type of opioid for at least 7 to 10 days before starting CONTRAVE. Sudden opioid withdrawal can be severe, and you may need to go to the hospital. Tell your healthcare provider you are taking CONTRAVE before a medical procedure or surgery.

Severe allergic reactions. Some people have had a severe allergic reaction to bupropion, one of the ingredients in CONTRAVE. Stop taking CONTRAVE and call your healthcare provider or go to the nearest hospital emergency room right away if you have any of the following signs and symptoms of an allergic reaction:
  - rash
  - itching
  - hives
  - fever
  - swollen lymph glands
  - acting on dangerous impulses
  - acting aggressive, being angry, or violent
  - acting on dangerous impulses
  - an extreme increase in activity and talking
  - other unusual changes in behavior or mood
  - trouble sleeping

Increases in blood pressure or heart rate. Some people may get high blood pressure or a higher heart rate when taking CONTRAVE. Your healthcare provider should check your blood pressure and heart rate before you start taking, and while you take, CONTRAVE.

Liver damage or hepatitis. One of the ingredients in CONTRAVE, naltrexone, can cause liver damage or hepatitis. Stop taking CONTRAVE and tell your healthcare provider if you have any of the following symptoms of liver problems:
  - stomach pain lasting more than a few days
  - dark urine

Manic episodes. One of the ingredients in CONTRAVE, bupropion, can cause some people who were manic or depressed in the past to become manic or depressed again.

Visual problems (angle-closure glaucoma). One of the ingredients in CONTRAVE, bupropion, can cause some people to have visual problems. Signs and symptoms of angle-closure glaucoma may include:
  - pain in the eye
  - blurred vision

Increased risk of low blood sugar in people with type 2 diabetes mellitus who also take medicines to treat their diabetes. Weight loss can cause low blood sugar in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus. You should check your blood sugar before you start taking CONTRAVE and while you take CONTRAVE.

The most common side effects of CONTRAVE include:
  - headache
  - constipation
  - dizziness
  - trouble sleeping
  - dry mouth
  - diarrhea

These are not all of the possible side effects of CONTRAVE. Call your doctor for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

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Indoor Obstacle Course

Design an indoor obstacle course using household items like cushions, chairs and pillows. Add a hula hoop and a jump rope. Time each family member as they navigate through the course, attempting to beat their own time.

Winter Charades

Play a winter-themed game of charades, where family members take turns acting out winter activities, animals and objects without speaking while others guess what they’re representing. Need some ideas? Check out our list on this page!

These winter activities are not only a ton of fun but also bring your family closer together. So, when the rain and snow are falling, and the wind is howling outside, you’ll be having fun inside, making memories that will last a lifetime.

Winter Charades Ideas

- Ice skating
- Building a snowman
- Squirrel gathering nuts
- Sledding down a hill
- Shoveling snow
- Making snow angels
- Caroling
- Curling
- Ice fishing
- Drinking hot cocoa
- Decorating a Christmas tree
- Bobsledding
- Wrapping presents
- Hibernating bear
- Slippery sidewalk
- Skiing
- Shivering
- Walking in snowshoes

Have fun acting out these winter-themed activities and guessing what each other is portraying!

About the Author:
Michelle “Shelly” Vicari, OAC Senior Program Manager and Past OAC Chair, majored in Child Development and Family Studies as well as Political Science at San Diego State University. She was formerly the Curriculum Director at the largest Child Care Centers accredited by the National Association for the Education of Young Children (NAEYC) in Southern California. She has authored numerous curriculum guides for teachers working with young children and was lucky enough to once meet Mr. Fred Rogers!
Working out with a loved one is a great way to stay motivated, boost happiness and strengthen your relationship. You can start your fitness journey together with outdoor exercises, gym classes or home workouts. In each category, I share examples and discuss the benefits so that I can help you choose activities you both enjoy. Remember, finding enjoyable exercises leads to consistency and success in reaching your fitness goals.
OUTDOOR EXERCISE OPTIONS

Some couples prefer outdoor exercise activities. They enjoy the fresh air, nature and the change in scenery that comes with exercising outside. Outdoor activities are great for spending quality time together, learning patience, improving communication and enhancing problem-solving skills as a team!

- **Hiking**: Hiking is fantastic for both your body and for weight-loss. It combines cardio and resistance training, helping you burn calories and boost your metabolism. Hiking has various difficulty levels, from easy flat paths to more challenging uphill trails. You can also adjust the difficulty of your hike by walking faster or choosing longer distances. It is recommended to progress by increasing the duration of hiking time before increasing the intensity level.

- **Mini Golf**: Mini golf is not only fun but also has some hidden exercise benefits that many people are not aware of. To put it into perspective, mini golf is an effective way to increase your step count and potentially burn hundreds of calories by simply walking through the course. In addition to increased steps, mini golf helps with building rotational strength and flexibility in the abdominal complex, back, hips and shoulders.

- **Cycling**: For those looking for low-impact outside exercises, cycling is a wonderful option. It is highly effective in increasing cardiovascular capacity and building lower body strength. Cycling will allow you to build muscle mass in your quads, hamstrings, glutes and calves without putting stress on your joints. The beauty of cycling lies in its suitability as a beginner-level outdoor cardiovascular activity, allowing cyclists to easily control the intensity level.

Sweat Together continued on page 40
You can create an effective workout at home using affordable equipment such as resistance bands and dumbbells. Home exercise saves time and money, eliminates the need to drive in bad weather, and makes exercising more convenient since you can do it from the comfort of your own home.

- **Resistance Bands and Dumbbells:** Versatile and highly effective, resistance bands and dumbbells are easy to store and fun to use. It is highly recommended to get a resistance band set that is adjustable for weight progression and has a door stopper to enable a diverse set of exercise options. It’s also beneficial to have multiple dumbbell weights for varying resistance levels in different exercises. Resistance bands and dumbbells can be used separately for workouts or combined in the same workout.

- **Resistance Band and Dumbbell Progression Continuum:** Whether you’re using resistance bands, dumbbells, or both, the same levels of progression apply. There are four levels, ranging from beginner to advanced: the single-set method, the multi-set method, supersets and circuit training. In the single-set method, you do one set per exercise. The multi-set method involves doing two or more sets per exercise, with breaks between sets. A superset means switching immediately from exercise A to exercise B without taking a break. Finally, a circuit is a superset involving three or more exercises. Supersets and circuits allow for both resistance training and cardio since breaks are taken at the end of the cycle rather than between exercises or sets. No matter which level you start or end with, each is effective for burning calories and building muscle.

Beginning an exercise routine with your partner is a great way to get started, stay motivated and encourage one another to stay on track! Regardless of whether you prefer to work out together outdoors, in a gym class or at home, picking something that you enjoy doing as a couple will enhance your chances of success in accomplishing fitness goals.

**About the Author:**
Zack Lucks, NASM-CPT, EMT, is a weight-loss and medical fitness specialist who has experience running bariatric, diabetes and orthopedic exercise groups in clinical settings. He is also the founder of the virtual personal training company GLYDE and is the fitness expert for bariatric surgery and diabetes education practices at multiple hospitals across the United States. Zack is a Medfit Network Provider of the Year Award winner and is an active member of the Obesity Action Coalition (OAC). You can reach him at zacklucks@gmail.com or visit his website at www.glydetraining.com.
The OAC is proud to offer a top-notch educational resource tool to help you on your journey with weight and health: the OAC Resource Library!

The library features a wealth of information on topics such as nutrition strategies, the science of obesity, bariatric surgery, weight bias, exercise, and more. From resource articles to videos to guides, the OAC Resource Library is a true testament to the unparalleled science-based education that the OAC is known and respected for.

Ready to explore OAC’s Resource Library?
Visit: obesityaction.org/library
The Impact of Family Weight Bias on Health

by Robyn Pashby, PhD

“No one is ever going to date you if you don’t lose weight.”

“Would you be willing to lose weight if we paid you $1,000?”

Writing these quotes is challenging, but it’s even more difficult to imagine that they were said by a parent to a child.

The unfortunate truth is that these are real comments (de-identified and slightly altered to protect privacy) that my patients have endured from their family members. It’s easy to understand why comments like these hurt a child or teen’s feelings, but they do much more than that. These types of comments are examples of outright weight bias and shaming and can trigger a variety of serious mental and physical health problems.

Even when weight bias is not quite as overt as in the examples referenced above, it is still detrimental. Subtle comments, looks or judgments can stay with people for years. For instance, an adult woman recalled a memory of her middle school years when she went back-to-school shopping with her mother one early September afternoon. In dressing room after dressing room, her mother refused to buy her clothes that had a fitted style, despite them being in fashion and the girl feeling her best in them. Instead, her mom encouraged her to purchase flowy, non-form-fitting clothes that would help ‘hide her problem areas.’ This woman had never communicated to her mother how this experience affected her, yet she found herself reflecting on it more than 30 years later every time she went clothes shopping.
Others have shared their childhood experiences of being closely monitored by their parents regarding their dietary choices. Some have described how such ‘food policing’ taught them to engage in sneaking food at very young ages (eight or nine years old). Learning to hide Halloween candy under the bed and consuming as much junk food at a friend’s house as possible during a playdate can happen as early as pre-adolescence. For some, this behavior of sneaking food became a precursor to more disordered eating behaviors, such as binge eating, and/or contributed to increased shame associated with eating throughout the teenage and adult years that followed.

Still, others describe how their parents’ own relationship with food and their bodies was problematic. A parent who repeatedly dieted or expressed dissatisfaction with their own body rarely goes unnoticed. One adult client shared how observing her mom avoid being in family photos, never don a bathing suit at the pool, and verbally express disgust when looking in the mirror at herself had made her question her own body shape and size for decades. Despite never having had obesity, she struggled with very poor body image, low self-esteem and disordered eating patterns for much of her adult life. As she worked on healing from her difficult relationship with her body and food, she slowly realized how much she had been affected by watching her mom’s internalized weight bias. She had learned, without ever being directly taught, that the pursuit of an idealized body shape or weight was of utmost importance. She had learned that living with obesity was something to hide, not to be seen. She had also developed her own unrealistic body image expectations, a sense of inadequacy and low self-esteem, which she believed traced back to watching her family struggle.

This example is not unique. In many cases, parents have had their own struggles and have experienced helplessness and concern about their health and weight. Sometimes, without meaning to, they pass on their biases about weight to their kids. It’s not because they’re bad parents, but because they might not realize it. Parents might worry about their kids’ health and want to help, but they might not understand that obesity is a complicated medical condition. Instead, they might think that everyone just needs to be more motivated, have more self-control, and eat less and exercise more. These mistaken beliefs can lead to parents trying to push their kids with tough love, orders or making them feel ashamed.

Unfortunately, weight bias and stigma have real and long-lasting effects. Physically, experiences of weight bias can contribute to increased cortisol reactivity, insulin resistance and weight gain.

Psychologically, common outcomes include depression, anxiety, low self-esteem, poor body image and increased stress. Behaviorally, individuals exposed to bias often report avoidance of healthcare, avoidance of exercise, and increases in binge or emotional eating. This damage is particularly critical when the bias is perpetrated, whether intentionally or unintentionally, by the people who are supposed to provide the unconditional love and safety that we expect but don’t always receive from family. To be blunt, weight bias can be a source of traumatic stress.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA defines trauma as “an event or series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual’s functioning and physical, social, emotional, or spiritual well-being.” Many experiences of weight bias certainly fit within the scope of that definition. Therefore, it is important to consider the impact of words and actions and their role in perpetuating a cycle of traumatic stress through weight bias. Instead of continuing to pass down a cycle of weight bias and stigma, you can LEARN TO BREAK THE CYCLE."

"Mental Health Corner continued on page 44"
**Steps to Reducing WEIGHT BIAS**

- **Start with self-reflection**
  Examine your own attitudes and biases about weight, size and appearance. Recognize any biases you may hold and be willing to challenge and change them, both for yourself and for your family.

- **Make space for open communication**
  Encourage open and honest communication within the family, ideally starting at an early age, but it is never too late to change. Create safe spaces where family members can discuss their feelings and concerns without judgment.

- **Educate yourself**
  Learn about the harmful effects of weight bias, both on individuals and on family dynamics. Learn about the complexity of weight and weight-loss to move away from an “eat less, move more” philosophy.

- **Emphasize and embrace individuality**
  Highlight the uniqueness and individuality of each family member, emphasizing that people come in different shapes and sizes, and all are equally valuable and deserving of respect.

- **Focus on health**
  Work to understand that weight-loss is not the same as obesity treatment. In other words, societal focus on weight-loss has primarily been oriented towards appearance. However, if you or your family is struggling with health conditions related to obesity, or if living with obesity is negatively impacting your physical and/or mental health, then consider seeking appropriate treatment from trained professionals.

- **Encourage and practice self-compassion**
  Teach family members and remind yourself about the importance of self-compassion. Continue to pursue an understanding that self-worth is not determined by weight or appearance.

- **Address bullying and teasing**
  If you become aware of weight-related teasing or bullying within the family, no matter how small, address it promptly and emphasize the harmful impact it can have on a person’s self-esteem and well-being.

- **Seek professional support**
  If a family member is struggling with body image issues, disordered eating, or physical and/or emotional distress related to weight, consider seeking professional help from a therapist, counselor or physician who specializes in obesity care.

**Conclusion**

Unfortunately, a cycle of weight bias within families is often unintentionally perpetuated. However, fostering awareness, providing education, and making a concerted effort to challenge negative beliefs can help transform behaviors related to weight and body size. Parents, caregivers, and family members can collaboratively work toward replacing weight bias with a culture of acceptance, support, and comprehensive multidisciplinary care.

**About the Author:**
Robyn Pashby, PhD, is a clinical health psychologist who is deeply committed to the mission of the OAC. She has personal experience with obesity and comes from a family with a history of obesity. Over the past 15 years, Dr. Pashby has dedicated her work to integrating mental healthcare into obesity treatment. She has done this in various multidisciplinary settings and, most recently, through her own behavioral health group practice.
The Obesity Action Coalition (OAC) Welcomes New Members to Its National Board of Directors for 2024

The OAC is honored to welcome three new members to the OAC National Board of Directors. Jason Krynicki, Michele Tedder and Linda Shapiro Manning, MD, PhD, bring their personal experience and dedication to improving the lives of people living with obesity and join the Board in directing the OAC and its activities, setting long-term goals for the association and ensuring that all programs and initiatives are in the interest of individuals affected by obesity.

Jason Krynicki, from New Jersey, plays a crucial role in the Bariatric multi-disciplinary team at New Jersey’s Community Medical Center and extends support to its sister program at Monmouth Medical Center. He is a passionate advocate for obesity-related health and equality issues, having successfully initiated Obesity Care Week in the State Legislature of New Jersey. As a patient, Jason works towards obtaining Medicaid coverage for weight management drugs in collaboration with the state. Additionally, as a member of the Obesity Action Coalition, he contributes his time and energy to promoting public education, ensuring equality and integrity, and supporting marginalized members of society.

Michele Tedder, a proud OAC member since 2019, discovered the organization while seeking post-bariatric surgery support in 2017. Drawing from her lifelong struggle with weight, Michele advocates for comprehensive and equitable obesity care. A sought-after speaker and expert, she addresses issues impacting access to obesity care. Michele serves as a Senior Program Manager at the Black Women’s Health Imperative and is the Founder of Village Empowerment Solutions, a consulting business dedicated to improving health outcomes for those with obesity and chronic diseases that will enhance health outcomes for people living with obesity and other chronic diseases.

Linda Shapiro Manning, MD, PhD, has dedicated her career to advancing the understanding and treatment of obesity. With over a decade of clinical practice, she brings the voices of over 5,000 patients into her work in the pharma/biotech industry and committees of The Obesity Society and the American Board of Obesity Medicine. Linda’s commitment and advocacy have raised awareness, reduced stigma, developed new treatments, and fostered inclusivity in bringing obesity discussions into the mainstream.

“The OAC’s legacy lies in its ability to adapt, evolve, and stay at the forefront of driving positive change for people affected by obesity. With Jason, Michele and Dr. Shapiro Manning’s unique insights and expertise, we are strengthening our organization and making the world a better place for people with obesity. Together, we look forward to another year of groundbreaking achievements, leading the charge for education, advocacy, and support in the realm of obesity care,” said Kristal Hartman, OAC Chair.

The OAC would also like to recognize returning Board Member Debe Gau, who is renewing her term in 2024. Debe has been an active OAC Member for more than ten years. She has served as an advocate and patient educator in a bariatric practice, using OAC resources for patients and providers interested in obesity treatment. Personally affected by obesity, Debe underwent bariatric surgery in 2001 and is passionate about sharing her 22 years of post-weight-loss surgery experience to support others in achieving healthier goals.

As a nonprofit organization, the OAC is governed under the authority of a National Board of Directors. All members of the OAC’s National Board are volunteers. The 2024 OAC National Board of Directors are as follows: Kristal Hartman, OAC Chair; Patty Nece, JD, Immediate-past OAC Chair; Nikki Massie, MA, Secretary; Anh-Vu Pham, Treasurer; Sarah Bramblette, MSHL; Nina Crowley, PhD, RDN, LD; Sunil Daniel, MD, FTOS; Scott Kahan, MD; Robyn Pashby, PhD; Elizabeth Paul; Melinda J. Watman, BSN, MSN, CNM, MBA.

The 2024 Board of Directors’ slate was presented to OAC membership in November 2023. We invited our members to review the slate and submit their own candidates if desired. The OAC received full support of the slate, and we now welcome these individuals to the Board.

For more information on the OAC National Board of Directors, please visit obesityaction.org/about/governance/board-of-directors.
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