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FOR YOUR HEALTH

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CONVENTION & EXPO
AUGUST 1-3 IN TAMPA!

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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.

Weight Matters Magazine is a quarterly publication published in Winter, Spring, Summer and Fall. Subscription to Weight Matters Magazine is a benefit to OAC Community members with premium access membership.

Opinions expressed by the authors are their own and do not necessarily reflect those of the OAC Board of Directors and staff. Information contained herein should not be construed as delivery of medical advice or care. The OAC recommends consultation with your doctor and/or healthcare professional.

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Message from the OAC

Obesity Action Coalition

Chairwoman of the Board

Hello-Everyone,

If you are like me, you look forward to opening the mailbox and finding your copy of *Weight Matters Magazine* (and not just because it's not a bill), because it's always chock-ful of great articles with trustworthy information that benefits my health and stories that inspire and energize me. It's also a connection to something larger that we are all a part of—the Obesity Action Coalition (OAC) Community: a group of like-minded individuals who want to make the world a better place for those affected by obesity.

Across this country, our members add their energy, passion, diversity and skills to our efforts in the following ways:

- Sharing our materials both online and in their communities
- Sharing their stories putting a name and face to those affected by obesity
- Giving strength and hope to others
- Advocating for an end to weight bias
- Fighting for access to care and treatment of obesity

Never underestimate the valuable and important difference you can make! Simply clicking "share" or "like" on our social media pages and posts or dropping off this magazine at your local coffee shop or office breakroom can make a difference. That's more people who now know about the OAC! One person at a time, one #OACAction at a time, we can make a difference that will leave a lasting impact on the world.

"The achievements of an organization are the results of the combined effort of each individual." ~ Vince Lombardi

Thank you for being a part of this Community. I encourage you to get as active as you can and check our social media feed or visit our website's Action Center (**ObesityAction.org/Action**) for the latest initiatives we can work on together. There are always new ways to help!

I also encourage you to treat yourself to some in-person time with your fellow Community members. Consider attending the *Your Weight Matters* Convention and EXPO, August 1-3 in Tampa, Florida (**YWMConvention.com**). Tampa is the hometown for the OAC, so you know this event is going to be extra special! Join us for a weekend of science-based health, weight, weight-loss, nutrition, fitness and emotional health education along with awesome motivation and inspiration. Bring a friend or loved one and make it a weekend of fun and health. You can come solo and that's great! I will be solo too, and I can't wait to meet you!

Michelle Vicare

NEWS from the OAC Obesity Action Coalition

New Your Weight Matters Campaign PSA



The OAC is excited to announce the release of its brand new television PSA for the *Your Weight Matters* Campaign. The Campaign, one of the OAC's most successful public awareness initiatives, has helped thousands of individuals throughout the U.S. learn more about the impact of weight on health and prepare for the conversation of weight with a healthcare provider. Since mid-January, the new PSA has aired more than 3,000 times on stations across the United States in cities such as San Diego, Atlanta, Jacksonville and Salt Lake City.

For 2019, the Campaign debuted a brand new toolkit to help people prepare for the conversation of weight. The new toolkit includes a food journal, information on chronic weight management and much more! The Campaign website also features a brand new easy-to-use healthcare provider finder tool.

To learn more about this free public resource, you can visit **YourWeightMatters.org** to access a variety of helpful tools—also available in Español—from the Campaign Toolkit.

We Have a New *Understanding Obesity* and Severe Obesity Brochure!

The OAC is excited to announce our latest educational brochure, *Understanding Obesity and Severe Obesity*. The brochure takes a broader, introductory look into obesity, severe obesity and the complex issues surrounding this disease.

Each year, more Americans are diagnosed with excess weight or obesity as well as many of the more than 50 diseases related to obesity. There is a wealth of information about obesity out there – some helpful information, some fake information and everything in between.



The news is constantly filled with new studies, new terms and new treatments to keep up with to really understand obesity, its factors and its treatment. This can be overwhelming, intimidating and sometimes creates more questions than answers.

That is why we have put so much time and effort into creating and updating this brochure. This educational resource is to be an introduction to obesity, what it is and how it differs from excess weight. If you have any questions about obesity, this brochure might be the answer to those questions. Our *Understanding Obesity and Severe Obesity* Brochure is also meant to be an educational tool on the importance of weight management and treatment options. Additionally, you will also learn about the causes and health concerns of obesity.

To view the brochure or order copies, please visit: **ObesityAction.org/GetEducated**.

Gaining Support for the Treat and Reduce Obesity Act of 2019: OAC Members across the Nation Reach Out to their Representatives on Capitol Hill



On February 28th, OAC members from across the country joined together in person in Washington, DC, and online to gain support for the Treat and Reduce Obesity Act (TROA) of 2019.

Advocates on Capitol Hill visited 100 congressional offices while advocates at home and at work sent nearly 500 emails and tweets to their Senators and Representatives shortly before TROA was introduced into the 116th Congressional Session.

Messages and meetings focused on gaining legislative support and cosponsors for this key obesity care legislation which will provide Medicare beneficiaries and their healthcare providers meaningful tools to treat obesity by:

- Improving access to weight management counseling
- Allowing for coverage of FDA-approved medications for chronic weight management

"It is wonderful to see individuals, organizations and healthcare providers come together in various forms to advocate for the passage of the Treat and Reduce Obesity Act of 2019. All advocacy is important and drives change. Thank you to all who took **#OACAction** for **#TROA**," said Joe Nadglowski, OAC President and CEO.

For more information on this important bipartisan legislation and to let your Senator or Representative know you want them to support TROA, please visit: **ObesityAction.org/TROA**.

OAC Community Community Community Obesity, Art, and Remembering My Brother by Austin James

I work as a multidisciplinary artist in Chicago, IL. The main mediums I work with are full-scale art instillations and photography. I also own a boutique art gallery that specializes in a unique collection of contemporary art. My gallery and art studio are both based in the prestigious Zhou B Art Center in Chicago's South Side – a multi-story arts incubator with sister sites in Beijing and Kansas City.

Outside of art, I'm an avid traveler and I work in real estate in Chicago. I've lived in the Chicagoland area for most of my life, but I've also lived in Argentina, South Korea and China. I think these experiences give me a unique perspective on culture and the disease of obesity in the U.S.

Honoring My Brother in My Art

In September 2018, I created a full-scale art installation in memory of my late brother Justin, whose life and health were affected by serious obesity, and whose birthday was approaching. It goes without saying that this was a very emotional piece for my family, but I find that art helps me express myself in a way that truly liberates my thoughts.

After working through the necessary steps to put together this art installation, I found that I was able to make peace with his absence and recognize how obesity has affected me personally. I loved my brother—who struggled deeply with obesity—more than words can ever describe, and a loss like this is something I hope no one ever has to endure. Especially, in part, as it is a disease we can try to fight.



Obesity's Impact on My Family

We grew up in Porter, Indiana, a suburban town about an hour from Chicago. In 2009, at age 27, Justin passed away from pneumonia—although obesity had also compromised his health. I was 22 at the time. My brother was married with two beautiful young children and lived close to our family home.



I was inspired to make an art installation not only to express my emotions, but also to educate others about the impact obesity can have.

At the time Justin fell very ill, I was living in South Korea teaching English. I was unable to be there for him at the hospital, but I video-called my mother every day for updates. I remember my father calling me at 3:00 a.m. one morning with the news of his passing. This perspective—one gained from thousands of miles away from home during a tragedy—is profound. The sense of mourning I experienced was endless, and the loss completely re-shaped my life, habits and outlook on everything.

It was incredible that after almost a decade later, I was still carrying emotional strife. Every year, each new season felt like a cyclical reminder of my brother. Leaves changing reminded me of childhood memories. The way the wind blew reminded me of how he used to sing. I was inspired to make an art installation not only to express my emotions, but also to educate others about the impact obesity can have.

Sharing the OAC in My Art Installation

I recently stumbled across the Obesity Action Coalition (OAC) when researching non-profit organizations to leverage for my art installation, which I carefully titled, "I'd Burn a Thousand More Temples in Your Name." It was important to me that people not only had an emotional reaction to my artwork, but could also take away unbiased, science-based information about obesity if they were in any way affected by it.

My art installation was a collage of family photographs and artifacts from my brother's life, paired with science-based data on obesity as a pervasive disease not only in Chicago, but across the globe. More than 93 million Americans alone are affected by it.







© "I'd Burn a Thousand More Temples in Your Name" by Austin James

LEARN, CONNECT,

ENGAGE

We know that your health journey can be overwhelming at times and we want to be there for you. We recognize the power of support through on-going weight and health education, connecting with others who have similar concerns and ultimately, joining together to take action for ourselves and one another.

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And Much More



JOIN TODAY:

Go to ObesityAction.org/Join

My art installation was a collage of family photographs and artifacts from my brother's life, paired with science-based data on obesity as a pervasive disease not only in Chicago, but across the globe.

Visitors to my installation were able to see a timeline of moments in my brother's life, as well as childhood art projects and collected items. For example, one time he hid my iPod because I failed to clean up my hair after trying to cut it myself. He left me a note, and my sister-in-law framed it and gave it to me as a gift years later. Brotherhood is always comical.

I was beyond excited to share my brother's story at the prominent Zhou B Art Center. The piece was incredibly emotional and caused many people to stop and take notice. It was a dedication to the loss, sorrow and overwhelming feelings I endured in the wake of my brother's passing while in my studio apartment thousands of miles away in South Korea. It was incredible to have strangers view my brother's life, portrayed by tangible memories of love and the life he lived.



In addition to his personal keepsakes, I created an interactive portion to my installation which included educational resources provided by the OAC. I also displayed an iPad with the current State of Obesity report for people to scroll through. My goal was to give people a jarring understanding of the emotional loss that personifies grief and open their eyes to the impact that obesity can have on someone's precious life.

How I've Come to Understand Obesity

Obesity is a disease that exists almost subconsciously in our society and day-to-day life. You can see it in the way environment shapes our health. You can see it in a loved one who has difficulty flying in airline seats, breathing while walking up the stairs or finding energy in the afternoon.

But perhaps even more so, symptoms of obesity are so varied that many people don't understand it is the root cause of their related conditions. These can include sleep apnea, joint pain, breathlessness, fatigue, hypertension and often low self-esteem. Though sometimes subtle, these conditions can lead to heart disease or cancer, and work silently to weaken the immune system.

We see obesity play out every day in our lives —when others, or ourselves, have difficulty getting on a bus or performing everyday physical activities. I included graphs in my installation not to scare people, but to illustrate how many parts of life obesity can impact.

In my own way, I am impacted by obesity. My brother's passing will remain the greatest heartbreak of my life. If I could go back in time, instead of glossing over his obvious symptoms, I would have candidly asked Justin about his health. Sometimes love for another person can mask your ability to see how sick they are, and if we're not careful, true problems might not be addressed.

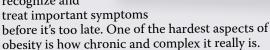
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Name" by Austin James

More Temples in Your

Thoughts I Wish to Share

My sincerest hope for my art installation and my story is that loved ones, and people who are themselves struggling with obesity, can recognize and



It was important for me to have people process emotional responses to my art installation, but it was even more important that they had credible information to take way. I thank the OAC for giving me the resources to be able to make that happen. Facing obesity and talking about it openly, honestly and without judgement is the best way to show support and find help.

For more photos from my entire art installation, you can visit: **MakoJames.com/Obesity**.

support and find help.

Looking for more OAC Community perspectives?

For more from the OAC Community, including personal stories, words of wisdom and more, visit: **ObesityAction.org/Community** and click "Find Support and Connect" on the left-hand menu of the Community home page. You can share your own OAC Community perspectives and experiences too!

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How Exercising with Your Neighbors Can be Better than Going to a Gym

by Roger E. Adams, Ph.D., CISSN

Starting a fitness program can be intimidating! The idea of working out in the presence of complete strangers at a gym, where you're not quite sure what to do or how to do it, can be a large hurdle to overcome. Even group gym classes like spin or yoga can intimidate someone. These are just some of the reasons neighborhood exercise and fitness groups can be more appealing to people looking to begin a healthier fitness routine.

Neighborhood fitness groups can include yoga, jogging, bootcamp-style training, outdoor weightlifting or aerobics, just to name a few. Some neighborhood fitness programs train together for charity events like a 5K fun run or half marathon. These types of training programs are often more appealing to beginners and those who like a more comfortable atmosphere close to home with friends and neighbors.



Neighborhood group fitness programs provide a great way to get in shape without the hassle or high cost of going to a gym. Some of the many advantages to neighborhood group fitness programs over traditional gyms are:

- Convenience: If it is in your neighborhood, it is nearby!
- More Enjoyment: Working out with friends and neighbors can be more fun than with a gym full of strangers.
- Greater Accountability: Having a supportive group of close friends can help you stick with your goals.
- Lower Cost: Neighborhood fitness classes are generally less expensive than a gym membership fee and meeting up to walk or run is free!
- Fewer Excuses: If it has all of the above, you won't have many reasons for missing workouts!





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Daily Dose Tracker App



INDICATION

Lomaira 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 or 27 or more 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, including Lomaira, should be measured against possible risk factors inherent in their use.

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.

Taking phentermine with other drugs for weight loss is not recommended. Primary pulmonary hypertension (PPH), a rare fatal lung disease, has been reported in patients who had taken a combination of phentermine and fenfluramine or dexfenfluramine for weight loss. The possible association between phentermine use alone and PPH cannot be ruled out. Patients should report immediately if they experience any decrease in the amount of exercise that they can normally tolerate, shortness of breath, chest or heart pain, fainting or swelling in the lower legs.

Serious heart valve problems or disease have been reported in patients taking a combination of phentermine and fenfluramine or dexfenfluramine for weight loss. The possible role of phentermine has not been established, therefore the possibility of an association between heart valve disease and the use of phentermine alone cannot be ruled out.

If your body becomes adjusted to the maximum dose of phentermine so that its effects are experienced less strongly, the maximum dose should not be exceeded in an attempt to increase the effect.

Caution is advised when engaging in potentially hazardous activity such as driving or operating machinery while taking phentermine. Phentermine has the potential to be abused. Keep Lomaira in a safe place to prevent theft, accidental overdose, misuse or abuse. Using alcohol with phentermine may result in an adverse drug reaction.

Phentermine can cause an increase in blood pressure. Tell your doctor if you have high blood pressure, even if it's mild. If you are taking medicines for type 2 diabetes, your doctor may have to adjust these medicines while taking phentermine.

Some side effects of phentermine that have been reported include pulmonary hypertension, valvular heart disease, palpitations, increased heart rate or blood pressure, insomnia, restlessness, dry mouth, diarrhea, constipation and changes in sexual drive. These are not all of the potential side effects of phentermine. For more information, ask your doctor or pharmacist.

To report negative side effects of prescription drugs, contact FDA at 1-800-FDA-1088 or visit www.fda.gov/medwatch.

For more information and Full Prescribing Information, visit www.lomaira.com.

Now that you know the advantages of working out in your own neighborhood, you might wonder, "How can I get started?" First, find out if there is already an exercise class in your area. Check your neighborhood's community website, Facebook page, and/or Next Door app group. You might also find local churches and support groups organizing neighborhood fitness programs. If you look and can't find one that suits your needs close by, you can organize a group of your own!

Tips for Starting Your Own Neighborhood Fitness Group



What type of fitness program do you want to start? It could be a walking program, bootcamp-style class or yoga. Will it be family-oriented or kid-friendly? Identifying these things is an important step as it will help you find like-minded neighbors to work-out with you.



How often and when do you want to work-out? Early mornings may be best for some commuters or a few hours later in the day for stay-at-home parents with school-age children. Evenings may be best for your commuting neighbors that aren't early risers and don't want to battle more traffic going to a gym.



Is there a common goal to your fitness group? If you have several friends in the neighborhood interested in running or walking a 5K or doing a charity mud run, create an exercise group centered around training for this common goal.



Where is the best location? Check with your local community board to see what facilities or fields may be available for your use. If there's nothing available, maybe one of your neighbors has a big yard they'd be willing to share with the fitness group.



Do you need any fitness equipment?Bootcamps and weight lifting may require group members to bring their own dumbbells, kettlebells, exercise mats or other equipment.



Who can support you? Contact local community-based organizations, churches and local businesses to see if they are interested in supporting your group. You may have neighbors with their own businesses who would help you with promoting your group in exchange for advertising and exposure.



Once you have most of the basic logistics figured out, you may even be able to get a sponsorship from a local business or organization to help with any upfront costs of organizing and running your neighborhood group fitness program. Try promoting your group to family, friends and neighbors. Post fliers at the local community library and ask if your neighborhood's homeowners' association will allow you to advertise in its newsletters, website or any other communications they put out. You can create a local Facebook group page dedicated to your program and invite your neighbors to like it and post comments as well as pictures of their workouts and achievements. This can be a great way to motivate others and improve the visibility of your fitness group.

As with any fitness program, the reason people usually quit is due to a lack of goal-setting and clear direction. It doesn't matter if workouts are done in a gym or in your own backyard; exercising without a goal will quickly lead to burnout and tempt you to end your healthy efforts. A neighborhood fitness program provides an easier way to stay accountable versus a large gym. When neighbors know you are working out to reach a specific goal, they can help motivate you when your own self-motivation is low.

Maintaining Accountability

There are a number of simple ways to increase accountability in your neighborhood fitness program. Taking attendance or having someone call or text neighbors to remind them of upcoming classes are easy ways to keep everyone accountable. If you have local businesses invest in the success of members by providing incentives, you can use them to increase attendance and help more neighbors get healthy!

If your neighborhood fitness group has a common goal, like running a 5K for example, have everyone sign-up on a certain date for a local 5K.

Most races benefit local charities, so you can all feel good about getting healthy while helping others in need. Having a date in mind will also keep your exercise group focused, and once you achieve the group's first goal, there are always future goals to look forward to! Consider having t-shirts designed for your group as this may help to increase the community feel of your efforts and advertise your group to everyone local.

Conclusion

Neighborhood fitness programs are a great way to contribute to a healthier, active and close-knit neighborhood. Having a group of people you work-out with in your own backyard not only gives the neighborhood a feeling of solidarity and cohesion, but also makes the community more vibrant. So take the leap and make your neighborhood a healthier place while you make yourself a heather YOU!

About the Author:

Roger E. Adams, PhD, CISSN, is the owner of eatrightfitness, an evidence-based private practice focusing on weight loss and sports performance nutrition, located in Spring, Texas. He has more than 20 years of experience working with clients to achieve better health and wellness. Additionally, Dr. Adams holds group nutrition education sessions and personal training classes. He speaks at business seminars, health fairs, and non-profit organizations about the everchanging field of nutrition and fitness. Dr. Adams holds a doctorate in nutrition from Texas Woman's University and is a certified personal fitness trainer by the American Council on Exercise (ACE). He is also a certified sports nutritionist by the International Society of Sports Nutrition (ISSN), as well as an active member in the Obesity Action Coalition; The Obesity Society; the Sports, Cardiovascular, and Wellness Nutrition; Nutrition Entrepreneurs and the Weight Management dietetic practice groups of the Academy of Nutrition and Dietetics. More information about Dr. Adams is available at EatRightFitness.com.



What's behind this Post-op Issue

by Walt Medlin, MD, FACS; Hinali Zaveri, MD; and Amit K. Surve, MD

Smelly farts, smelly farts!

I start that way to break the ice and to let you know that we are not going to hide from the important—but awkward—subject here. I, Dr. Medlin, would like to share my experience as a bariatric surgeon who has performed thousands of procedures of every type, and as a sleeve gastrectomy patient now more than 10 years post-op. My co-authors for this article, Dr. Zaveri and Dr. Surve, led a study in our practice and are tireless advocates for excellent care for people with obesity. We have read-up on the small amount of actual scientific information that is available. We have listened to the complaints and experiences from countless patients concerned about gas following their bariatric surgery. We have read guidelines and advice from many reputable sources about care for gas issues after bariatric surgery.

Let me give you the brief takeaway of this article right away. There are a lot of things that can cause large amounts of fart "volume" and a few things that can make farts more smelly, so there is no single thing that helps everyone! Thankfully there are several things for patients to try, and we will talk about them in the second half of this article. Do not expect an "easy" immediate answer, but know that you can probably find some ways to change your situation if smelly farts are a problem in your life!



Living with Gas after Surgery

On the serious side, being smelly can really make life miserable—especially at work or during times where we are trapped in small places with others. For example, elevators can be intimidating to people who can't predict when their worst moments are coming. Airplanes and group offices can also be unbearable.

Here is a quick personal story about my own post-op experience:

When I was in my first year or two after having my sleeve gastrectomy, and I had not started medication, I had a nurse who would walk right into my small office (as she should) to talk about anything or everything. I had to just put it out there—if I hold up my hand in a "stop" sign to mean please, for both our sakes, let's just step into the hall! I did not want to wallow in shame, or to watch her try to ignore what was not avoidable (her faces were hilarious, but I really couldn't enjoy them)! Sometimes we laughed, but it really helped me to have a plan.

I've heard that flight attendants use the term "crop dusting," or pretending to do an aisle sweep when they need to pass gas. This may be another way to try and cope. If I worked in a small office, even now, I might try to sit in a desk or cubical away from others or place a small fan underneath my desk and set it on a low setting at all times, just in case. It is an easy excuse: "I just feel a little hot."

Recently, through social media,
I have seen questions about gas
odor more often. And like everything
on the internet, too many 'answers'
are oversimplified, selling something
or just providing false information
altogether!

How Gas and Odor Affect Each of Us Differently

To understand what methods of gas control can help, we first need to understand a bit about what causes gas and odor. I also want to define some words so that I don't have to write "smelly farts" 15 more times!

When we say "gas," many people think we are also talking about burps, or feeling bloated. From here on out, we will only use the word gas or "flatus" to refer to what comes out of your butt (not much better, but we'll keep trying). We will use the word "odor" or "malodorous" to class it up a bit from the word "smelly." We will also go ahead and use the word poop instead of stool, because I feel like it and there's a limit on how classy I can try to get. The term "altered bowel habits" is also used in published papers if you are Googling this for more information and want your search history to look fancy.

Recently, through social media, I have seen questions about gas odor more often. And like everything on the internet, too many "answers" are oversimplified, selling something or just providing false information altogether! Truthfully, the internet is not so much wrong as it is incomplete.

What works for one person may be right for them, but not for everybody. Some people are so invested in their solution that they blame you if that solution doesn't work the same for you, and they become upset. My advice is to ignore advice from anyone if it doesn't work for you.

Myths are created when people want to make sense of something, but don't really have direct evidence to help. Avoid trying to have the perfect explanation! If something works for you, we can honor that, but "why" it works requires actual study.

What to Expect after Surgery When Everyone Has a Different Experience

In terms of post-bariatric surgery expectations:

- Some patients have no problems.
- Many have problems with odor a couple times each week.
- Many patients have loose poop once or twice a month (not everyone feels the same about this, and not every bowel movement has to be perfect).
- Every fart is going to have some odor (except those from unicorns).



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Many people notice a difference with gas and odor with just the passage of time. The bowels do adapt to new changes in physiology, but it is often after months or years, and cannot really be altered or hurried. In my experience with patients in my practice, what they notice the most is the noise of gas moving through their system. During the first year after my sleeve gastrectomy, it would wake me up! It was like there was a chihuahua growling somewhere under the sheets, and our Corgi dog in the corner was not amused!

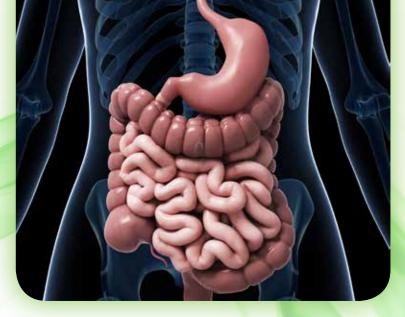
Bloating is usually a very different issue. If you have new problems with bloating several months or years after surgery, consider getting evaluated for reflux in your esophagus or for gallbladder disease. If you had Roux-en-Y gastric bypass surgery, you might need to be checked for a bowel obstruction or an internal hernia. You can address this issue with your primary healthcare provider first, but you will likely need to be examined by your surgeon if the problem is severe or does not go away easily. Don't be afraid to see your surgeon, especially after gastric bypass surgery.

The Science of Gas and Odor

STINK! What is it? Let's break it down:

- Sulfur-containing gasses are a side effect of the metabolism (life process) of bacteria in your colon (*large intestine*).
- Other gasses (nitrogen from swallowed air, carbon dioxide) are odorless.
- Not every bacterium in your gut creates these gasses, and the bacteria that seem to make the most gasses are "feeding" on non-digestible carbohydrates like starch or sometimes lactose.

It is important to know that the majority of the bacteria in our colon are helpful to us, so we do not just want to kill them off. Antibiotics are absolutely not the answer for the average person and should only be considered in cases of non-beneficial infections that usually involve irritation of the colon (*colitis or enteritis*) or are related to recovery after large antibiotic effects from other treatments (overgrowth of an "infectious" strain of bacteria).



You should always be under the care of a specialist in gut (gastroenterologist) or infectious disease for any prescription medication treatment. You should also expect to have specific studies of your poop performed and likely need a colonoscopy. Do you want me to talk about stool transplants here? No, I didn't think so. But it really is a thing and has saved many lives.

There are a large number of studies on the gut "microbiome," or the thousands of different types of bacteria and viruses that live in our colon, but research is still ongoing and primarily focused on describing and tracking cases. To date, there has been very little formal study of odor in people, particularly in practical dayto-day terms.

Probiotics have not been studied for gas odor, but they are thought to be occasionally useful in renewing a healthy bacteria population in people who have been on antibiotics and have had their "normal" population altered. I want to stress that hype to sell these products is rampant. Promises and fuzzy, warm ads about probiotics do not mean you need to empty your wallet! Your body is a pretty good self-regulating system, and there is no place for "detoxifying" or trying other holistic or natural methods, especially ones that are mainly discussed on the internet. As always, before you try any new treatment, discuss it with your healthcare provider or specialist.

Studies about gas and poop odor after bariatric surgery are all based on "after the fact" questionnaires completed by patients. No other measures of gas or smell have been used. This information is rather weak because it is not being asked in realtime. Unfortunately, research costs a lot of money, so studies like ours have to be thrifty and use fairly small groups and nonexpensive, non-invasive tools. We can hope that future research may gather better information by using text messages to allow for more real-time data, or even have a gas sensor for patients. But this is not an area that professors are fighting over.



STINK! What is it? Sulfur containing gasses are a side effect of the metabolism (life process) of bacteria in your colon (large intestine).



Can Medication Help?

Right now, the only medication being studied to reduce the odor of farts is Bismuth Subgallate (*available in the U.S. as Devrom*) and it can be bought without prescription over the counter or online. To give you full disclosure: I take this every single day, and many of my patients do as well.



Our research group performed one of the two studies in the scientific literature for Bismuth Subgallate in patients after bariatric surgery (*we specifically studied duodenal switch surgery patients*). Both studies confirmed that there is less reported odor and improved quality of life on a validated scientific scale.

Bismuth Subgallate was FDA-approved without a prescription decades ago to reduce odor in patients who had an "ostomy" (bowel emptying into a bag on the abdominal wall—either temporary or permanent). This medication is believed to directly change the bacteria that makes the sulfur-containing gasses. It has only been reported to cause a problem when taken in doses far beyond the recommended dose. Please, don't do that with ANY medication!

Everyday Changes that Can Offer Help

Changing the type of foods you eat has made a significant difference for some patients when it comes to gas and odor, but you will need to experiment to find what works best for you.

The best thing you can do to avoid odor is to avoid feeding the stinky bacteria too much. Simply put, you can eliminate certain carbohydrates from entering your colon by not consuming them.

The science of carbohydrates in your gut explained:

The science of "sugars" is a bit hard to explain. When we think of "sugar," most people think of the white sweet stuff in "naughty" foods that we try to avoid to keep weight off. This type of sugar is actually not the problem, because we absorb all of that sugar before it gets to the colon.

Indigestible Starch: The "sugars" or carbohydrates that bacteria in your gut feed from are the ones we can't absorb. This sugar (indigestible starch) passes into the colon and feeds the bacteria. Indigestible starches are those found in beans and many vegetables like cabbage, peppers, onions and broccoli. These starches are broken down into simple sugars that hang around in the colon, where we can't absorb them. So our gut bacteria are having a feast! Imagine this like Legos blocks that are glued together. The glue is only dissolved by special tools that only bacteria have.







Just Use Devrom®

Let's clear the air. You don't have to live with gas and stool odor. Now you can stop the odor you've been experiencing since your surgery, and it's as simple as taking a pill. FDA approved and doctor recommended Devrom® will neutralize malodor quickly and effectively. Devrom® is inexpensive, does not require a prescription, is available as a banana flavored chewable tablet or gel capsule, and has a 100% money back guarantee.





www.devrom.com or by calling 1-800-453-8898

Ask your Healthcare Provider about BELVIQ® or BELVIQ XR®

What is BELVIQ®/BELVIQ XR®?

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

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

Important Safety Information

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

mental changes, especially sudden changes in your mood, behaviors, thoughts, or feelings, or if you have depression or thoughts of suicide.

- Low blood sugar: Weight loss can cause low blood sugar in people taking medicines for type 2 diabetes, such as insulin or sulfonylureas. Blood sugar levels should be checked before and while taking BELVIQ/BELVIQ XR. Changes to diabetes medication may be needed if low blood sugar develops.
- Painful erections: If you have an erection lasting more than 4 hours while on, stop taking BELVIQ/BELVIQ XR and call your Healthcare Provider or go to the nearest emergency room right away.
- Slow heartbeat: BELVIQ/BELVIQ XR may cause your heart to beat slower.
- Decreases in blood cell count: BELVIQ/BELVIQ XR may cause your red and white blood cell counts to decrease.
- Increase in prolactin: BELVIQ/BELVIQ XR may increase the amount of a hormone called prolactin. Tell your Healthcare Provider if your breasts begin to make milk or a milky fluid, or if you are a male and your breasts increase in size.
- Most common side effects of BELVIQ®/BELVIQ XR® include: Headache, dizziness, fatigue, nausea, dry mouth, constipation, cough, low blood sugar (hypoglycemia) in patients with diabetes, and back pain.
- **Nursing:** BELVIQ/BELVIQ XR should not be taken while breastfeeding.
- Drug interactions: Before taking BELVIQ/BELVIQ XR, tell your Healthcare Provider if you take medicines for depression, migraines, or other medical conditions, such as: triptans; medicines used to treat mood, anxiety, psychotic or thought disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors, selective serotonin-norepinephrine reuptake inhibitors, monoamine oxidase inhibitors, or antipsychotics; cabergoline; linezolid (an antibiotic); tramadol; dextromethorphan (an over-the-counter (OTC) common cold/cough medicine); OTC supplements such as tryptophan or St. John's Wort; or erectile dysfunction medicines.
- BELVIQ/BELVIQ XR is a federally controlled substance (CIV) because it may be abused or lead to drug dependence.

For more information about BELVIQ/BELVIQ XR, talk to your Healthcare Provider and see the Patient Information on the reverse side.

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



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

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





Approval of BELVIQ XR® (lorcaserin HCl) CIV 20 mg tablet was based on the results of a clinical study that demonstrated bioequivalence (i.e., performs in the same manner) to BELVIQ (lorcaserin HCI)® CIV 10 mg tablet twice daily.

Sign up for monthly savings[†] and free support.

Now available to patients who have Medicare Part D.

Visit BeginBELVIQXR.com or call 1-855-BELVIQ1 (1-855-235-8471)

For questions about coverage or financial assistance for eligible patients call 1-866-EISAI (1-866-613-4724) or visit eisaireimbursement.com

BELVIQ 10 mg twice daily was evaluated in three clinical studies involving overweight adults (with at least 1 weight-related medical condition) and adults living with obesity. All three studies compared people taking BELVIQ plus diet and exercise with people using diet and exercise alone (placebo). The results of the first two studies (involving 7,190 people without diabetes) showed that 47.1% of people taking BELVIQ lost 5% or more of their body weight compared with 22.6% of the placebo group. People taking BELVIQ also had significant improvements in their blood pressure and cholesterol levels. A third clinical study (involving 604 overweight adults with type 2 diabetes) showed that 37.5% of people taking BELVIQ lost 5% or more of their body weight compared with 16.1% of the placebo group. People with type 2 diabetes taking BELVIQ also had significant improvements in their blood sugar levels. Nearly one-half of all participants completed the first two studies; nearly two-thirds of the participants completed the third study.

[†]Restrictions apply.

IMPORTANT PATIENT INFORMATION BELVIQ® (BEL-VEEK) (lorcaserin hydrochloride) tablets, CIV

BELVIQ XR® (BEL-VEEK Eks-Are) (lorcaserin hydrochloride) Extended Release Tablets, CIV

What is BELVIO?

BELVIQ is a prescription medicine that may help adults with obesity, or some adults who are overweight and have weight related medical problems, lose weight and keep the

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

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

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

It is not known if BELVIQ is safe when taken with some other medicines that treat depression, migraines, mental problems, or the common cold (serotonergic or antidopaminergic agents).

It is not known if BELVIQ is safe and effective in children under 18 years old.

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

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

- are pregnant or planning to become pregnant. BELVIQ may harm your unborn baby.
- are allergic to lorcaserin or any of the ingredients in BELVIQ or BELVIQ XR. See the end of this leaflet for a complete list of ingredients in BELVIQ and BELVIQ XR.

What should I tell my Healthcare Provider before taking BELVIQ?

Before you take BELVIQ, tell your Healthcare Provider

- if you:
 have or have had heart problems including:
 - congestive heart failure
 - -heart valve problems
 - slow heart beat or heart block
- have diabetes
- have a condition such as sickle cell anemia, multiple myeloma, or leukemia
- have a deformed penis, Peyronie's disease, or ever had an erection that lasted more than 4 hours
- have kidney problems
- have liver problems
- are pregnant or plan to become pregnant.
- are breast feeding or plan to breastfeed. It is not known if BELVIQ passes into your breastmilk. You and your Healthcare Provider should decide if you will take BELVIQ or breastfeed. You should not do both.

Tell your Healthcare Provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. BELVIQ may affect the way other medicines work, and other medicines may affect how BELVIQ works. Especially tell your Healthcare Provider if you take medicines for depression, migraines or other medical conditions such as:

- triptans, used to treat migraine headache
- medicines used to treat mood, anxiety, psychotic or thought disorders, including tricyclics, lithium, selective serotonin uptake inhibitors (SSRIs), selective serotoninnorepinephrine reuptake inhibitors (SNRIs), monoamine oxidase inhibitors (MAOIs), or antipsychotics
- cabergoline
- linezolid, an antibiotic
- tramadol
- dextromethorphan, an over-the-counter medicine used to treat the common cold or cough
- over-the-counter supplements such as tryptophan or St. John's Wort

- medicines to treat erectile dysfunction
- Ask your Healthcare Provider or pharmacist for a list of these medicines, if you are not sure.
- Know all the medicines you take. Keep a list of them to show your Healthcare Provider and pharmacist when you get a new medicine.

How should I take BELVIQ?

- Take BELVIQ exactly as your doctor tells you to take it.
- Your Healthcare Provider will tell you how much BELVIQ to take and when to take it.
- BELVIQ comes in 2 different dose forms. Your Healthcare Provider will prescribe the form of BELVIQ that is right for you.
 - · BELVIQ: Take one tablet 2 times each day. - BELVIQ XR: Take one tablet 1 time each day.
- Do Not increase your dose of BELVIQ. BELVIQ can be taken with or without food.
- Take the whole BELVIQ XR extended release tablet. Do not chew, crush, or divide the tablet.
- Your Healthcare Provider should start you on a diet and exercise program when you start taking BELVIQ. Stay on this program while you are taking BELVIQ.
- Your Healthcare Provider should tell you to stop taking BELVIQ if you do not lose a certain amount of weight within the first 12 weeks of treatment.
- If you take too much BELVIQ or overdose, call your Healthcare Provider or go to the nearest emergency room right away.

What should I avoid while taking BELVIQ?

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

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

- Serotonin Syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions. BELVIQ and certain medicines for depression, migraine, the common cold, or other medical problems may affect each other causing serious or life-threatening side effects. Call your Healthcare Provider right away if you start to have any of the following symptoms while taking BELVIQ:
 - mental changes such as agitation, hallucinations, confusion, or other changes in mental status
 - coordination problems, uncontrolled muscle spasms, or muscle twitching (overactive reflexes)
 - restlessness
 - racing or fast heart beat, high or low blood pressure
 - -sweating or fever
 - nausea, vomiting, or diarrhea
 - muscle rigidity (stiff muscles)
- Valvular heart disease. Some people taking medicines like BELVIQ have had problems with the valves in their heart. Call your Healthcare Provider right away if you have any of the following symptoms while taking BELVIQ:
 - trouble breathing
 - swelling of the arms, legs, ankles, or feet
 - dizziness, fatigue, or weakness that will not go away
 - fast or irregular heartbeat
- Changes in your attention or memory.
- Mental problems. Taking BELVIQ in high doses may cause psychiatric problems such as:
 - hallucinations
 - -feeling high or in a very good mood (euphoria)
 - -feelings of standing next to yourself or out of your body (disassociation)
- Depression or thoughts of suicide. You should pay attention to any mental changes, especially sudden changes, in your mood, behaviors, thoughts, or feelings. Call your Healthcare Provider right away if you have any mental changes that are new, worse, or worry you.
- Low blood sugar (hypoglycemia) in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus. Weight loss can cause low blood sugar in people with type 2 diabetes Revision: May 2017 mellitus who also take medicines used to treat type 2 diabetes mellitus (such as insulin or sulfonylureas). You should check your blood sugar before you start taking BELVIQ and while you take BELVIQ.

- Painful erections (priapism). The medicine in BELVIQ can cause painful erections that last more than 6 hours. If you have an erection lasting more than 4 hours whether it is painful or not, stop using BELVIQ and call your Healthcare Provider or go to the nearest emergency room right away.
- Slow heart beat. BELVIQ may cause your heart to beat slower. Tell your Healthcare Provider if you have a history of your heart beating slow or heart block.
- Decreases in your blood cell count. BELVIQ may cause your red and white blood cell count to decrease. Your Healthcare Provider may do tests to check your blood cell count while you are taking BELVIQ.
- Increase in prolactin. The medicine in BELVIQ may increase the amount of a certain hormone your body makes called prolactin. Tell your Healthcare Provider if your breasts begin to make milk or a milky discharge or if you are a male and your breasts begin to increase in size.
- The most common side effects of BELVIQ include:
 - headache
- constipation
- dizziness
- cough
- low blood sugar (hypoglycemia) -fatigue - nausea
- in patients with diabetes
- dry mouth -back pain

These are not all the possible side effects of BELVIQ. For more information, ask your doctor or pharmacist. Call your Healthcare Provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store BELVIQ?

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

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

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

General information about the safe and effective use of BELVIO.

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use BELVIQ for a condition for which it was not prescribed. Do not give BELVIQ to other people, even if they have the same symptoms you have. It may harm them. You can ask your doctor or pharmacist for information about BELVIQ that is written for health professionals. For more information, go to www.BELVIQ.com Website or call 1-888-274-2378.

What are the ingredients in BELVIQ and BELVIQ XR? **BELVIQ Tablets**

Active Ingredient: lorcaserin hydrochloride hemihydrate Inactive Ingredients: silicified microcrystalline cellulose NF; hydroxypropyl cellulose NF; croscarmellose sodium NF; polyvinyl alcohol USP; polyethylene glycol NF; titanium dioxide USP; talc USP; FD&C blue #2/indigo carmine aluminum lake; and magnesium stearate NF

BELVIQ XR extended-release tablets

Active Ingredient: lorcaserin hydrochloride hemihydrate **Inactive Ingredients:** microcrystalline cellulose NF; mannitol USP; hypromellose USP; ethylcellulose dispersion
Type B NF; colloidal silicon dioxide NF; polyvinyl alcohol USP; polyethylene glycol NF; titanium dioxide USP; talc USP; FD&C yellow #6/sunset yellow FCF aluminum lake; iron oxide yellow NF; iron oxide red NF; and magnesium stearate NF

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1-888-274-2378.

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Lactose: Lactose is the sugar found in milk products. People who have lactose intolerance do not have enough of the enzymes to break up the "Lego chain" type of sugar that cows make (*lactose*). When lactose enters their colon, it gets broken up and used in a bad way! Many people with lactose intolerance can digest a little at a time, or can handle some yogurts, as the lactose in some yogurt is partially "pre-digested."

Fructose: Fructose is the sugar naturally found in fruits, some vegetables and honey. Fructose may behave like lactose for some people, but we really don't have much information. I would not fault you for thinking about it, but people are pretty good at breaking down and digesting fructose. If fructose digestion issues are related to "dumping," or overwhelming the system, then fructose could easily play more of a role in gas buildup. Timing meals differently or eating more slowly can help some people have less gas. Liquids can be washed down more quickly and may cause problems if there is a lot of sugar—also known as "late dumping" which causes gas and diarrhea more than 30 minutes after eating. As a reminder, early dumping is the effect of fast absorption of sugar, leading to wild ups and downs in blood sugar and insulin which can cause wooziness, lightheadedness, sweats or low blood pressure.

Fizzy drinks with carbonation are mostly absorbed in the gut and we actually breathe out the CO2! Carbonated beverages certainly can make you burp, but they rarely contribute to the amount of farting you do.

On the other hand, when people suffer from heartburn and acid reflux, many people are "air swallowers" when they seek to soothe the pain by chewing gum or trying to force things back down by swallowing saliva (and air). In this situation, controlling heartburn (reflux control from acid blockers, Tums, carafate, and digestive aids like apple cider vinegar) may help reduce the amount of gas down below. This happens because nitrogen is the most abundant gas in the atmosphere and can't be absorbed, so it travels

all the way through. It is odorless, but definitely not silent! Even odorless gas is going to smell some. Still, these are not the patients who tell me that their gas "can peel the paint off the walls and make you cry."



- Some people may respond well to reduced stress (*doesn't everyone*)!
- Some people may respond better to a more forgiving work environment, away from the cube farm.
- Sorbitol sugar-free hard candies can be a problem if you eat more than five to six servings in a day (*Sorbitol is totally non-digestible by humans*).
- Some people learn over time what are their triggers are and how to avoid them when they know others will be around them.
- Some just feel better knowing they are not alone.

Finally, there are probably a few other tricks and tips we have never heard of before. Please feel free to share them with us!

For additional reading, you can see the article I wrote in 2010 for this same magazine: "Pull My Finger, a Mostly Polite look at Intestinal Gas for Weight Loss Surgery Patients." It can be found online in the Article Library at: *ObesityAction.org /Community/Article-Library*

About the Authors:

Dr. Medlin is the drafting author of this article and takes responsibility for the use of "1" (and maybe credit for making this subject more tolerable), but Dr. Zaveri and Dr. Surve are responsible for the research, editing and any take-away information you may have gotten from this article (and deserve many thanks).

Walter Medlin, MD, FACS, is a bariatric surgeon in Utah and sleeve gastrectomy patient now 10 years post-op. He is a member of the Obesity Action Coalition (OAC) National Board of Directors, tweets from @Bonuslife and runs a personal blog at BonusLife.com.

Hinali Zaveri, MD, has extensive experience in the field of obesity as an active researcher. She is a Bariatric Research Specialist at Bariatric Medicine Institute where she conducts research on various surgical treatments for severe obesity and their beneficial effects on obesity comorbidities. She is an active member of the American Society of Metabolic and Bariatric Surgery (ASMBS) and International federation for the surgery of Obesity and Metabolic Disorders (IFSO).

Amit K. Surve, MD, has been an active researcher in the field of obesity since 2012. Dr. Surve had a major research interest in problems related to obesity, and the various surgical techniques for the surgical treatment of severe obesity and their beneficial effects on obesity comorbidities. Dr. Surve is currently the Editor-in-Chief of the 'Journal of Obesity Management' and the 'Journal of Surgery'.

Weighing in on OBESITY and Your KIDNEYS

by Linda-Marie Lavenburg, DO; and Shivam Joshi, MD

A healthy weight is your first line of defense against obesity-related conditions like type 2 diabetes and heart disease. Another common yet serious condition is kidney disease, though many overlook it.

Unfortunately, a high body mass index (BMI) puts you at risk for chronic kidney disease. However, you can preserve the life of your kidneys by recognizing how weight affects your health and engaging in thoughtful lifestyle changes.

Your kidneys are crucial! They remove harmful toxins from your blood and maintain a normal PH level in your body. They also influence your blood pressure.

If you don't know what your kidneys look like, imagine kidney bean-like organs about the size of a chalkboard eraser. Inside are millions of blood vessels that clean your blood and create urine. Factors such as age, sex, race and size all affect how well your kidneys function. In fact, as we get older, kidney function usually starts to decline.

HOW DOES OBESITY AFFECT YOUR KIDNEYS?

Having excess weight puts you at risk for a larger waist circumference, insulin resistance and high blood pressure. Studies show that a larger waist circumference and excess fat in the belly area can contribute to kidney disease. Among other causes, kidney damage can also happen from inflammation and pressure from fat.

Insulin is a hormone your body produces after your blood sugar rises. If you have insulin resistance, you need more insulin than normal to control your blood sugar. Over time, weight gain can cause insulin resistance to turn into type 2 diabetes. This is a disease where blood sugar remains high even without eating. Unfortunately, type 2 diabetes can damage blood vessels in your kidneys and lead to kidney failure. Not surprisingly, type 2 diabetes is the number one cause of kidney failure and affects 100 million U.S. adults.

High blood pressure is the second most common cause of kidney failure. Two common yet preventable risk factors include:

- Obesity
- A diet rich in salt

A diet rich in salt can lead to high blood pressure. This can strain your kidneys by forcing them to work harder and faster to clean more blood. With time, this extra force can lead to kidney failure.

SYMPTOMS OF KIDNEY DISEASE

Kidney disease usually worsens slowly over many years if it is caused by the risk factors mentioned earlier. However, symptoms typically don't begin to show until the disease is advanced. Symptoms include:

- Leg swelling
- **Fatigue**
- Nausea
- Loss of appetite

You can identify your risk for kidney disease by talking with your healthcare provider. However, you will need lab testing to diagnose and monitor it. Labs can also detect protein in your blood or urine, which is an additional symptom to watch for. Fortunately, lifestyle changes can slow or prevent kidney disease while also helping you manage obesity and other health issues.

PREVENTING KIDNEY ISSUES WITH A HEALTHY WEIGHT

It's easier to prevent kidney disease than to treat it. While treatments are available, they are generally costly. Additional chronic diseases also make treatment more difficult, and in severe cases, kidney disease can lead to death.

However, studies show that weight-loss is very effective in preventing kidney disease. Adjusting your diet and adding more activity to your lifestyle can help! Still, remember that weight-loss is not as simple as "eat less and move more." You need options that work best for you in the long-term.

Obesity and your Kidneys continued on page 24



EXERCISE GUIDELINES FROM THE AMERICAN HEART ASSOCIATION:



2 HOURS AND 30 MINUTES

(150 minutes) of moderate-intensity activity, like brisk walking, every week.



OR



1 HOURS AND 15 MINUTES

(75 minutes) of vigorous-intensity activity, like jogging or running, every week.



OR



AN EQUIVALENT MIX

of moderate and vigorous-intensity activity every week.



You can identify your risk
For kidney disease by talking
with your healthcare provider
However, you need Lab
testing to diagnose
and monitor it.

TIPS FOR IMPROVING YOUR NUTRITION

If you want to build healthier eating habits, consider foods that are whole and plant-based such as fruits, veggies, whole grains and legumes. These foods can keep your kidneys healthy. They are also low in calories but high in key nutrients like fiber!

Additionally, whole and plant-based foods are high in potassium and low in sodium. You can manage your blood pressure by making them a regular part of your diet and consuming less than one teaspoon of salt per day. In the average American diet, most excess salt comes from processed or pre-packaged foods — not the table salt you add to a meal at home. Therefore, before you buy something packaged, look at the nutrition label on the back.

CREATING A HEALTHY AND SUSTAINABLE LIFESTYLE

Changing your lifestyle requires time and patience. However, it can help you sustain a healthy weight and prevent or manage kidney disease. The good news is that even modest weight-loss of just 5-10% improves your blood sugar and lowers your blood pressure, thus preserving your kidney function!

Make it happen by setting S.M.A.R.T. goals. These goals are specific, measurable, attainable, relevant and time-based. For example, rather than aiming to "eat healthier," be more specific. A S.M.A.R.T. goal could be, "I will eat one cup of non-starchy vegetables with each meal, seven days a week." S.M.A.R.T. goals help you track progress. Start making some today and ask your family, friends or healthcare providers to hold you accountable!

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THE GOOD NEWS IS THAT EVEN MODEST WEIGHT-LOSS OF JUST 5-10 PERCENT IMPROVES YOUR BLOOD SUGAR AND LOWERS YOUR BLOOD PRESSURE, THUS PRESERVING YOUR KIDNEY FUNCTION!

KIDNEY ISSUES, OBESITY AND BARIATRIC PROCEDURES

If you are struggling to lose weight, bariatric surgery might be an option if you have a BMI of 35-40 with related health conditions. It may also be an option if you have a BMI of 40 or greater.

However, surgery is only successful long-term when combined with lifestyle changes like a healthy diet and regular exercise. The benefits of surgery also go beyond weight-loss! Studies show that it can slow kidney disease, improve kidney function and reverse type 2 diabetes. It can also make kidney transplants possible for individuals struggling with severe obesity. A high BMI often prevents individuals from qualifying for transplants.

CONCLUSION

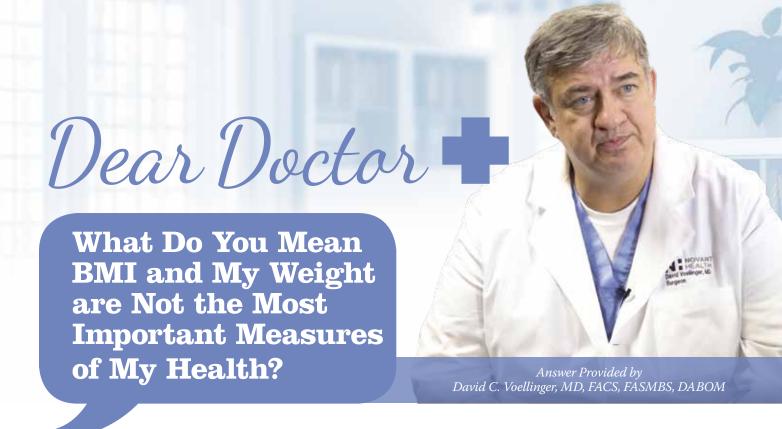
You can help prevent kidney disease through lifestyle changes that have other great health benefits beyond weight-loss. Prevention is a lot easier than many treatment options for kidney failure such as transplants and dialysis.

While obesity can affect kidney function and worsen it through high blood pressure and type 2 diabetes, even modest weight-loss can reduce stress placed on your kidneys. Weight-loss can also help you alleviate or reverse obesity-related conditions. Luckily, you have a lot of power to protect your kidneys by exercising regularly and eating a diet rich with whole and plant-based foods. It's all about a lifestyle you can keep!

About the Authors:

Linda-Marie Lavenburg, DO, is an internal medicine physician and pediatrician in Long Island, NY. She is completing a Clinical Obesity Medicine fellowship at NYU Langone Health and will start a Nephrology/Research fellowship at the University of Pennsylvania in late 2019. She received her Bachelor of Science degree in nutritional basic sciences from Pennsylvania State University. Her research interests include obesity and its long-term effects on the kidneys.

Shivam Joshi, MD, is an internal medicine physician and nephrologist practicing at Bellevue Hospital in New York City. He is a faculty member of NYU's School of Medicine with research interests in popular diets and nephrology. He received his BS from Duke University and his MD from the University of Miami. He completed his residency at Jackson Memorial Hospital/University of Miami and his residency at the Hospital of the University of Pennsylvania. You can follow him on Twitter/Facebook (@sjoshiMD) or on his website: AfternoonRounds.com.



"What do you mean, you don't want me to lose weight?"

This was my patient's reply when I told her it wasn't weightloss that was most important after her bariatric surgery. She looked at me like I had gone crazy. I could see her thinking, "Dr. V, you may need a doctor's appointment yourself." Like most patients, she was fixated by the number on the scale. Sometimes she would weigh herself multiple times each day, even though my team stressed only weighing-in once a week at most. Sadly, we even reinforced her belief. What was the first thing she did every time she came to our office? We weighed her. Not only did we document her weight each visit, but we also always talked about "BMI," an acronym all our patients know stands for Body Mass Index. BMI is a measure for the severity of her disease, as well as the measure of her risk for obesity-related conditions like high blood

pressure, sleep apnea, high cholesterol or heart disease. It was even the measure of her success following her bariatric surgery. Everything we did revolved around the number on the scale and her calculated BMI.

Insight on BMI, Weight-loss and Obesity

The reality is that—as the Centers for Disease Control (CDC) says—"BMI is only a screening tool and not diagnostic of body fat or the health of an individual." It does allow us to "categorize" weight issues into classes of underweight, healthy weight, overweight, obesity and severe obesity to allow for comparison studies. It can be confusing as we all know people with a normal BMI who are unhealthy. For example, someone with a BMI of 25 can suffer from high blood pressure or high cholesterol due to a genetic predisposition to the disease. We also know people with high BMIs who are healthy, like an NFL linebacker with a BMI of 37 due to their high amount of muscle mass.

What are we really trying to accomplish with weight-loss? Is it simply losing pounds? Is it just losing the load we are carrying to make it easier on our back, our joints and our heart? Maybe partially, but our main goal for weight-loss is to lose FAT.

As Webster's dictionary defines it, "obesity

Losing fat—not just losing weight—is the key to improved health after bariatric surgery. 29

is a condition characterized by the excessive accumulation and storage of fat in the body." Or, even better (and fancier) is the Obesity Medicine Association definition: "obesity is a chronic, relapsing, multifactorial, neurobehavioral disease, wherein an increase in body fat promotes adipose tissue dysfunction and abnormal fat mass physical forces, resulting in adverse metabolic, biomechanical, and psychosocial health consequences." Put simply, all of this means that too much fat in our fat cells creates abnormal, poorly functioning cells that cause inflammation and obesity-related conditions. Losing fat—not just losing weight—is the key to improved health after bariatric surgery.

Beyond Losing Fat: Gaining Muscle

Truthfully, improved health through weight-loss goes beyond that. Not only do we want to lose fat, but we also want to maintain or (*ideally*) build muscle.

Muscle, also known as lean body mass (total body mass minus fat mass) is essential for support, mobility, strength and endurance. Lean body mass is also important for body metabolism or Basal Metabolic Rate. Having more lean body mass results in a higher metabolism. Unfortunately, when you lose weight after bariatric surgery, an average of 20 percent of your total weight lost is lean body mass—not fat mass. Therefore, it is extremely important to consume enough protein and exercise regularly to maintain or rebuild muscle. You will not only burn more calories, but you will also



maintain or even improve your metabolism!

You should know that exercise needs to come in two forms:

- **Cardiorespiratory** (*cardio*): Exercise that burns calories and improves your aerobic health.
- Resistance: Exercise that maintains and builds muscle mass. The American College of Sports Medicine recommends five days of moderate intensity cardio and at least two days of resistance training each week.



Dear Doctor continued on page 31



Platinum

Novo Nordisk

Gold

American Society for Metabolic & Bariatric Surgery Bariatric Advantage Potomac Currents

Silver

Boehringer Ingelheim Eisai Inc. Ethicon Intercept Pharmaceuticals Medtronic New Life Center for Bariatric Surgery

Bronze

FitForMe, LLC Geisinger Healthcare System KVK-Tech, Inc. Medi-Weightloss® Nestle Health Science Rhythm Rocky Mountain Associated Physicians

Patron

Allurion Technologies Aspire Bariatrics/Aspire Assist Bariatric Medicine Institute Baronova Billings Clinic BonusLife.com/Walter Medlin, MD Bronson Bariatric & Metabolic Specialists ConscienHealth Creative Cognitions Jaime Fivecoat Gainesville Medical Obesity Specialty Clinic GI Dynamics HorizonView Health IU Health Bariatric & Medical Weight Loss Olga Joukovski, MD, PA ProCare Health Bariatric Vitamins & Supplements Mercy Bariatric Center Naturally Slim® Pack Health Pennington Biomedical Research Salem Hospital Lloyd Stegemann, MD Christopher D. Still, DO The Obesity Society Trinity Bariatric Surgery Weight & Life MD/Nadia B. Pietrzykowska, MD

Woman's Hospital

Platinum: \$100,000 and up Gold: \$50,000 - \$99,999

\$5,000 - \$9,999 \$1,000 - \$4,999

List as of 04/09/19



Indications and Usage

What is Saxenda®?

Saxenda® (liraglutide) injection 3 mg is an injectable prescription medicine that may help some adults with excess weight (BMI ≥27) who also have weight-related medical problems or obesity (BMI ≥30) lose weight and keep the weight off. Saxenda® should be used with a reduced-calorie meal plan and increased physical activity

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

Important Safety Information

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

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

Possible thyroid tumors, including cancer. Tell your health care professional if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer.

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

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

Who should not use Saxenda®?

Do not use Saxenda® if:

- you or any of your family have a history of MTC
- you have MEN 2. This is a disease where people have tumors in more than one gland in their body
- you are allergic to liraglutide or any of the ingredients in Saxenda®.
 Symptoms of a serious allergic reaction may include: swelling of your face, lips, tongue, or throat, fainting or feeling dizzy, very rapid heartbeat, problems breathing or swallowing, and severe rash or itching

Talk with your health care provider if you are not sure if you are pregnant or planning to become pregnant. Saxenda® may harm your unborn baby

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

- have any of the conditions listed in the section "What is the most important information I should know about Saxenda®?"
- are taking certain medications called GLP-1 receptor agonists
- are allergic to liraglutide or any of the other ingredients in Saxenda®
- have severe problems with your stomach, such as slowed emptying of your stomach (gastroparesis) or problems with digesting food
- have or have had problems with your pancreas, kidneys or liver
- have or have had depression or suicidal thoughts
- are pregnant or plan to become pregnant. Saxenda® may harm your unborn baby. Tell your health care provider if you become pregnant while taking Saxenda®. If you are pregnant you should stop using Saxenda®
- are breastfeeding or plan to breastfeed. It is not known if Saxenda® passes into your breast milk. You and your health care provider should decide if





WE'VE ALWAYS HAD THE NOW WE HAVE ANOTHER MOTHER MOT

Managing obesity like the long-term disease it is requires more than willpower alone. Adding Saxenda® to a reduced-calorie meal plan and increased physical activity may help you lose weight and keep it off.

When you lose weight, your body's response includes an increase in the hunger hormone and a decrease in fullness hormones, undermining your ability to lose weight and keep it off.

Saxenda® works like a fullness hormone naturally produced by your body that is thought to regulate appetite—helping you to eat less, so you can lose weight and keep it off.

56% of people achieved significant weight loss at year 1, and approximately half of them maintained weight loss at 3 years when taking Saxenda® added to a reduced-calorie meal plan and increased physical activity.a

Tell your health care provider about your efforts to lose weight and keep it off, and ask for FDA-approved Saxenda®

Check your prescription coverage and then activate a Savings Card at Saxenda.com/AnotherWay



°In a 3-year study, 2,254 adults with pre-diabetes and BMI ≥30 or ≥27 with one or more weight-related conditions were given Saxenda® (1,505 people) or placebo (749 people) added to a reduced-calorie meal plan and increased physical activity. The study looked at how many people lost ≥5% of their body weight. At year 1, 891 people on Saxenda® (56%) lost ≥5% of their weight vs 182 patients on placebo (25%). After 3 years, 747 people on Saxenda® and 322 people on placebo remained and had their weight measured. 391 of those people on Saxenda® (26%) lost ≥5% of their weight at both the 1- and 3-year marks vs 74 people on placebo (10%).

Important Safety Information (cont'd)

you will take Saxenda® or breastfeed. You should not do both without talking with your health care provider first. Tell your health care provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Saxenda® slows stomach emptying and can affect medicines that need to pass through the stomach quickly. Saxenda® may affect the way some medicines work and some other medicines may affect the way Saxenda® works. Tell your health care provider if you take diabetes medicines, especially sulfonylurea medicines or insulin

How should I use Saxenda®?

- Inject your dose of Saxenda® under the skin (subcutaneous injection) in your stomach area (abdomen), upper leg (thigh), or upper arm, as instructed by your health care provider. Do not inject into a vein or muscle
- Never share your Saxenda® pen or needles with another person. You
 may give an infection to them, or get an infection from them

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

- · possible thyroid tumors, including cancer
- inflammation of the pancreas (pancreatitis). Stop using Saxenda® and call your healthcare provider right away if you have severe pain in your stomach area (abdomen) that will not go away, with or without vomiting. You may feel the pain from your abdomen to your back
- gallbladder problems. Saxenda® may cause gallbladder problems, including gallstones. Some gallbladder problems need surgery. Call your health care provider if you have any of the following symptoms: pain in your upper stomach (abdomen), fever, yellowing of your skin or eyes (jaundice), and clay-colored stools
- low blood sugar (hypoglycemia) in people with type 2 diabetes who also take medicines to treat type 2 diabetes. Saxenda® can cause low blood sugar in people with type 2 diabetes who also take medicines used to treat type 2 diabetes (such as sulfonylureas). In some people, the blood sugar may get so low that they need another person to help them. If you take a sulfonylurea medicine, the dose may need to

be lowered while you use Saxenda®. Signs and symptoms of low blood sugar may include: shakiness, sweating, headache, drowsiness, weakness, dizziness, confusion, irritability, hunger, fast heartbeat, and feeling jittery. You should check your blood sugar before you start taking Saxenda® and while you take Saxenda®

- increased heart rate. Saxenda® can increase your heart rate while you are at rest. Your health care provider should check your heart rate while you take Saxenda®. Tell your health care professional if you feel your heart racing or pounding in your chest and it lasts for several minutes when taking Saxenda®
- kidney problems (kidney failure). Saxenda® may cause nausea, vomiting, or diarrhea leading to loss of fluids (dehydration). Dehydration may cause kidney failure, which can lead to the need for dialysis. This can happen in people who have never had kidney problems before. Drinking plenty of fluids may reduce your chance of dehydration. Call your health care provider right away if you have nausea, vomiting, or diarrhea that does not go away, or if you cannot drink liquids by mouth
- serious allergic reactions. Serious allergic reactions can happen with Saxenda®. Stop using Saxenda® and get medical help right away if you have any symptoms of a serious allergic reaction
- depression or thoughts of suicide. You should pay attention to any mental changes, especially sudden changes, in your mood, behaviors, thoughts, or feelings. Call your health care provider right away if you have any mental changes that are new, worse, or worry you

Common side effects of Saxenda® include nausea, diarrhea, constipation, headache, vomiting, low blood sugar (hypoglycemia), decreased appetite, upset stomach, tiredness, dizziness, stomach pain, and changes in enzyme (lipase) levels in your blood. Nausea is most common when first starting Saxenda®, but decreases over time in most people as their body gets used to the medicine. Tell your health care professional if you have any side effect that bothers you or that does not go away.

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

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

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

Rx Only

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

- Talk to your healthcare provider or pharmacist
- Visit www.novo-pi.com/saxenda.pdf to obtain the FDA-approved product labeling
- Call 1-844-363-4448

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

Possible thyroid tumors, including cancer. Tell your healthcare provider if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer. In studies with rats and mice, Saxenda® and medicines that work like Saxenda® caused thyroid tumors, including thyroid cancer. It is not known if Saxenda® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid carcinoma (MTC) in people.

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

What is Saxenda®?

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

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

Who should not use Saxenda®?

Do not use Saxenda® if:

- you or any of your family have a history of medullary thyroid carcinoma.
- you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). This is a disease where people have tumors in more than one gland in their body.
- you are allergic to liraglutide or any of the ingredients in Saxenda®.
- Symptoms of a serious allergic reaction may include:
 - swelling of your face, lips, tongue, or throat problems breathing or swallowing
 - · fainting or feeling dizzy
- · severe rash or itching
- · very rapid heartbeat

Talk with your healthcare provider if you are not sure if you have any of these conditions. • are pregnant or planning to become pregnant. Saxenda® may harm your unborn baby.

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

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

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

How should I use Saxenda®?

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

- If you take too much Saxenda®, call your healthcare provider right away. Too much Saxenda® may cause severe nausea and vomiting.
- Never share your Saxenda® pen or needles with another person. You may give an
 infection to them, or get an infection from them.

What are the possible side effects of Saxenda®?

- Saxenda® may cause serious side effects, including: possible thyroid tumors, including cancer. See "What is the most important information I should know about Saxenda®
- inflammation of the pancreas (pancreatitis). Stop using Saxenda® and call your healthcare provider right away if you have severe pain in your stomach area (abdomen) that will not go away, with or without vomiting. You may feel the pain from your abdomen to your back.
- gallbladder problems. Saxenda® may cause gallbladder problems including gallstones. Some gallbladder problems need surgery. Call your healthcare provider if you have any of the following symptoms:
 - pain in your upper stomach (abdomen) yellowing of your skin or eyes (jaundice)
 - · clay-colored stools
- low blood sugar (hypoglycemia) in people with type 2 diabetes mellitus who also take medicines to treat type 2 diabetes mellitus. Saxenda® can cause low blood sugar in people with type 2 diabetes mellitus who also take medicines used to treat type 2 diabetes mellitus (such as sulfonylureas). In some people, the blood sugar may get so low that they need another person to help them. If you take a sulfonylurea medicine, the dose may need to be lowered while you use Saxenda®. Signs and symptoms of low blood sugar may include:
- weakness
- hunger

- dizziness
- fast heartbeat
- headache
- confusion
- · feeling jittery drowsiness irritability

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

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

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

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

The most common side effects of Saxenda® include:

- nausea dizziness
- headache diarrhea
- decreased appetite

- vomiting upset stomach
- stomach pain tiredness
- constipation
- low blood sugar (hypoglycemia) change in enzyme (lipase) levels in your blood

Nausea is most common when first starting Saxenda®, but decreases over time in most people as their body gets used to the medicine.

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

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

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

For more information, go to saxenda.com or call 1-844-363-4448. Manufactured by: Novo Nordisk A/S, DK-2880 Bagsvaerd, Denmark

More detailed information is available upon request.

Available by prescription only.

For information about Saxenda® contact: Novo Nordisk Inc. 800 Scudders Mill Road, Plainsboro, NJ 08536 1-844-363-4448

Saxenda® and Victoza® are registered trademarks of Novo Nordisk A/S.

PATENT Information:

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

Revised: SEPTEMBER 2016, VERSION 2



Understanding Body Composition

How can you find out your fat mass and muscle mass? In our office, we believe the measurement of your body composition is as important—if not more important—than your weight on a scale. We use a validated four-compartment medical Body Composition Analyzer with an open design, large platform and handrails that make the procedure comfortable and quick—just like stepping on a scale. Every patient receives a baseline body composition analysis followed by a six-month and a 12-month test.

With this information we can determine:

- Is the patient losing an appropriate amount of fat mass?
- 2. Is the patient losing too much lean body mass?
- 3. Are there certain areas of the body that need to be particularly targeted?

We use this information to customize each patient's eating plan and exercise regimen with the help of our dietitians and athletic trainers. Doing this takes the focus off the scale and places it on the patient's overall body composition for a more accurate representation of each patient's progress. It's also a great motivating tool.

Conclusion

As I ultimately explained to my patient, what is most important is not weight-loss but fat loss and maintaining or increasing lean muscle mass. Body composition is way more important that any number on a scale. Weight will always be important in monitoring trends and as a screening tool. However, to provide the best indicator of your health, let's step up on our Body Composition Analyzer and see what's really going on. The light bulb went off and she looked at me like I wasn't really crazy after all.

About the Author:

David C. Voellinger, MD, FACS, FASMBS, DABOM, is the Lead Physician at Novant Health Bariatric Solutions located in Charlotte, Huntersville, Matthews and Ballantyne. He is also the Medical Director of the Novant Health Bariatric Center.



In our office, we believe the measurement of your body composition is as important—if not more important—than your weight on a scale.",



YOU'RE INVITED!

YOUR WEIGHT MATTERS CONVENTION & EXPO

August 1-3 • Tampa, FL

WHERE YOU WILL FIND

REAL EXPERTS.
REAL PEOPLE.
REAL SUPPORT.

Navigating health can be a challenge, but with the help of REAL EXPERTS in health and weight management pointing you in the right direction, you will find the right tools and resources to empower your journey through REAL SUPPORT for REAL PEOPLE!

At this year's 8th Annual *Your Weight Matters* Convention & EXPO, the Obesity Action Coalition (OAC) wants to help you find the tools you need for your health journey while finding real support! Since our inception in 2005, we've devoted our work to providing a unique community where the everyday individual can find a welcoming and supportive place to move forward on their weight management journey. We are honored to host such a special Convention each year and to offer an environment rich with science-based education, leading experts presenting world-class information, practical tips, tools, guidance and more!

This summer, we are happy to meet you in our hometown of Tampa for a weekend filled with unparalleled weight and health information, genuine support, an open community and brand new opportunities. With great excitement, we invite you to join us at YWM2019 and learn from REAL EXPERTS, meet REAL PEOPLE and find REAL SUPPORT.

What You'll Experience at YWM2019

TOP-NOTCH WEIGHT AND HEALTH EDUCATION PRESENTED BY REAL EXPERTS

YWM2019 is the only place to find this level and quality of education! Real experts break down the latest science into easy-to-understand and practical insight for our attendees. Take advantage of our world-class Program Agenda featuring the following highlights:



- More than 50 unique topics presented by the nation's leading experts
- Practical tips, tricks and tools to take home with you
- Chances to connect with experts one-on-one
- Advocacy training sessions designed to help you become a better advocate and prepare to take action

DIVERSE EXPO HALL

We invite you to discover our EXPO Hall, with a diverse collection of exhibitors featuring the latest products and tools in the industry! The EXPO Hall features a variety of opportunities, including:



- More than 30 unique vendors from the weight and health industry
- Time to mingle and connect with other attendees
- Products, services, samples and more

ENERGIZING EXERCISE PROGRAM

Our Convention offers a safe space for individuals of all skill levels to participate in the following group exercise classes:

- Morning walks and runs
- Aqua Fitness
- Group Fitness
- And more



ACCESS TO THE EXPERTS

Don't just listen to the experts talk about weight and health—take the time to dive-in and connect with them! The following YWM2019 special events provide you with the opportunities to choose specific topics and discuss them with our REAL EXPERTS:

- Breakfast with the Experts (ticketed event \$18/day)
- Lunch with the Experts (ticketed event \$18/day)
- Saturday afternoon Workshop (ticketed event \$15)

OPPORTUNITIES TO LEARN, CONNECT AND ENGAGE!

Convention is a place where all individuals are welcome — no matter their stage in their weight management journey. We want you to have a place where you can learn, connect and engage with individuals with shared experiences and build relationships to last a lifetime. You can look forward to the following special events that offer connection opportunities:

- Convention Attendee and Exhibitor Welcome Reception
- Friday Night Welcoming Ceremonies
- Convention Closing Ceremonies: A Time to Reflect, Share and Stay Energized

HEALTHCARE PROFESSIONALS: EARN UP TO 18 CE CREDITS!

At YWM2019, nurses and some healthcare professionals have the opportunity to learn what their patients learn and better connect with the needs of their patients when it comes to weight, health, nutrition, exercise, obesity and more - all while earning up to 18 CE Credits! Early-bird CE Credit Rates include:

- \$155 for Full Registration w/ CE Credits
- \$75 for Single-day Registration w/ CE Credits

YWM2019 continued on page 34

2019

Convention Schedule

Thursday, Aug. 1

10:30 am — 5:00 pm Regi 1:00 pm — 4:30 pm Train

Registration Open Training Sessions

7:00 pm — 8:30 pm Convention A

Convention Attendee and Exhibitor Welcome Reception (included with all registration options)

Friday, Aug. 2

7:00 am — 7:45 am

Group Exercise Classes and Morning Walks/Runs

7:00 am - 5:00 pm 7:30 am - 4:00 pm Registration Open EXPO Hall Open

7:30 am — 9:15 am

Breakfast in the EXPO Hall

BREAKFAST WITH THE EXPERTS

7:45 am — 8:45 am Breakfast with the Experts (Special Event-ticketed)

Friday Breakfast Topics

- 1. Convention 101: Chatting with Fellow First-time Attendees
- 2. Self-esteem: Building a Healthy View of You
- 3. Sweet Temptations: Tips and Tools for Conquering Cravings
- 4. The ups and downs of Your First Year Following Surgery
- 5. Managing Mental Health Conditions and Your Weight
- 6. Getting to the Root of Weight Regain: The Balance of Biology and Behaviors
- 7. The Path to Healthy Living through the Great Outdoors
- 8. Looking beyond the Numbers: Celebrating Non-scale Victories
- 9. Exercising with Limitations: A How-to

GENERAL SESSIONS

9:00 am — 9:45 am

Event Welcome: Navigating Health. Changing Tides. Taking Action!

9:50 am — 10:30 am

Understanding What Drives Hunger: The Connection between Your Brain

and Appetite

11:15 am — 12:00 pm

What the Science Tells Us about Weight-loss, Weight Gain and Weight Maintenance

LUNCH WITH THE EXPERTS

12:15 pm — 1:30 pm Lunch with the Experts (Special Event-ticketed)

Friday Lunch Topics

- 1. Adding Strength Training to Maximize Your Fitness Routine
- 2. The Changing Tides of Relationships after Weight-loss
- 3. Weighing My Options: Breaking down Obesity Medications
- 4. Building Your Healthcare Dream Team: Who Do I Need?
- 5. Pushing Past Weight Plateaus
- 6. Sleep Health... from A to Zzzzzz!
- 7. Moving Beyond the Chair of Despair: Make Your Work Environment Work for You!
- 8. Getting Involved in OAC Action: How I Can Help!
- 9. Realistic Expectations: Setting Your Health Goals

BREAKOUT SESSIONS

1:45 pm — 3:00 pm

Obesity Medications: Understanding the Impact

on Appetite, Hunger and Behaviors

OR

A Complete Look at Mental Health and Obesity:

Before, During and after Treatment

3:45 pm — 5:00 pm

Shifting the Approach: How Companies are Responding to the Ever-changing Needs of Patients

OR

Let's Get Real about Weight Regain

Subtopic 1: The WHY: Exploring the Medical Side

Subtopic 2: Exploring the Emotional Side

Subtopic 3: Creating Your Nutrition Strategy

5:30 pm - 6:15 pm 7:30 pm - 10:30 pm **Afternoon Group Exercise Classes**

Friday Night Welcoming Ceremonies Dinner

(ticketed event — included with Full Convention Registration)





Saturday, Aug. 3

7:00 am — 7:45 am Group Exercise Classes
7:00 am — 5:00 pm Registration Open
7:30 am — 4:00 pm EXPO Hall Open

BREAKFAST WITH THE EXPERTS

7:45 am — 8:45 am Breakfast with the Experts (Special Event-ticketed)

Saturday Breakfast Topics

1. Avoiding Deficiency: Your Post-op Nutritional Guide

2. Breaking down Popular Diet Trends (Keto, Whole30, Atkins, etc.)

3. Preparing for the Mental Health Transition: Before and after Surgery

4. Navigating the Waves of Stress: Practical Tips and Tools

5. Your Journey with Menopause and Weight-loss

6. Lean on Me: Finding the Right Support System to Stay on Track

7. Supporting Your Loved One on their Journey: A Discussion for Caregivers

8. Navigating Clinical Trials: How to Find them and What to Know

9. Denials and Exclusions: Assembling Your Insurance Appeal

10. Complications of Obesity (*Type 2 Diabetes, Fatty Liver Disease, CVD, etc.*): Let's Discuss

BREAKOUT SESSIONS

1:45 pm — 3:00 pm The Future of Customized Weight Management:
What Your DNA and Personal Traits Could Tell You

OR

Tech Tools: The Pros and Woes of Living in a Connected World

3:45 pm – 5:00 pm What about the 99%? Exploring Why those

Eligible for Surgery Don't Seek Treatment and Breaking down Other Options for Care

OR

Empowering Yourself to be YOUR Post-op

Nutritional Health Advocate

5:15 pm — 6:15 pm Special Workshop: Creating a Place Called

Happiness: Fixing Your Foundation in a

Broken World (*Ticketed event*)

6:30 pm — 7:00 pm Pre-Cl

Pre-Closing Ceremonies Reception

7:00 pm — 8:30 pm **Convention Closing Ceremonies:**

A Time to Reflect, Share and Stay Energized!

GENERAL SESSIONS

9:00 am — 9:45 am Using Your Values to Empower Healthy

Change with Acceptance-based Therapy

Exercise - How Much Does it Really Take?

11:15 am — 12:00 pm It's More than Just Weight-loss:

What Bariatric Surgery Can Teach Us

LUNCH WITH THE EXPERTS

12:15 pm — 1:30 pm Lunch with the Experts (Special Event-ticketed)

Saturday Lunch Topics

9:50 am — 10:30 am

- 1. Creating Your Personal Exercise Prescription
- 2. An Honest Conversation about Transfer Addiction
- 3. A Healthy Approach to Addressing Weight in Children
- 4. How to Recognize and Deal with Emotional Eating
- 5. Meal Planning: Keeping it Spicy!
- 6. Ask the Doc: Plastic Surgery Options after Weight-loss
- 7. Expressing Your Identity through Your Fashion ID
- 8. It's Time to Do Something about Weight Bias: A Call to Action
- 9. Weighing My Options: A Closer Look at Bariatric Surgery and Devices



YWM2019 continued on page 36

Make Your Plans to ATTEND!

AFFORDABLE PRICING OPTIONS FOR EVERYONE

Each year we strive to make the cost of attending Convention as affordable as possible. Whether you're seeking the right education, looking for tools and support for your weight management journey, supporting a loved one on their journey or are a healthcare provider, YWM2019 is an event you don't want to miss! Our Registration rate options include:

Single-day Registration Access to:

- **Educational** sessions
- **Group fitness sessions**
- **EXPO** Hall
- **Convention Closing** Ceremonies

Meals, Breakfast/Lunch with the Experts sessions, social events and workshops are NOT included with Single-day Registration.

Starting at **Full Convention Registration** S50 Access to: per day

Educational sessions

- **Group fitness sessions**
- **OAC Advocacy Training sessions**
- •
- Breakfast on Friday and Saturday morning

Starting at

\$105

One ticket per registration for the Convention Attendee and Exhibitor Welcome Reception, Friday Night Welcoming Ceremonies and **Convention Closing Ceremonies**

Breakfast/Lunch with the Experts sessions and Saturday's Workshop are NOT included with Full Convention Registration.

Register Today! Visit YWMConvention.com

Please note: Prices listed above are part of our Early-bird Registration promotion and will last through May 31.

RESERVE YOUR ROOM IN TAMPA!

We're excited to host YWM2019 at the beautiful and accommodating Tampa Marriott Waterside Hotel and Marina — located right in the center of downtown along the beautiful Tampa Riverwalk! Reserve your room for just \$145/night (Single/Double Occupancy) — a special discounted rate we've reserved just for our attendees!





Reserve Your Room Online

To reserve your room online for YWM2019, please visit YWMConvention.com/attend/hotel-information.



Call to Make a Reservation

To make your Reservation by phone, please call (813)-221-4900 and mention the reference code "YWM2019" to receive our preferred rate! The Convention Room Block is filling up quickly, so reserve your room as soon as possible!

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With Obesity Action Coalition's new member resource, www.ObesityCareProviders.com, finding the right obesity care provider is a click away. How easy is it to use?



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- Questions to ask in order to have an honest conversation about your weight and health



FILTER BY LOCATION

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- Use your zip code to do a quick search.
- Find healthcare providers near you.



Powered by the Obesity Action Coalition

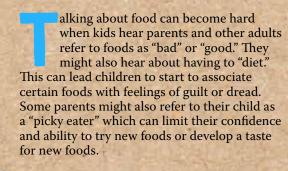




Talking and learning about food can be fun! Encouraging your child to develop a healthy relationship with food can also be easy, even though

it may seem to be the opposite.

Butterfly Gnacks



Rather than using labels to describe foods and eating habits, try introducing foods and healthy eating patterns through fun activities. Encouraging children to have fun with food can be a wonderful way for them to learn that they have an important part to play in choosing foods and in learning about them at the same time. Creative play with food allows for positive experiences and memories to be made for all.



DIY Food Stamps

Food-centric Arts and Crafts

To help your child see food in a new way, try incorporating food into your next arts and crafts project! Using food in a different way can help children to not just view a certain food as "good" or "healthy," but actually spark their interest in a new food by creating a positive memory. Food crafts are limitless when you begin to use your imagination!

Here are some fun examples of food-centric crafts for the whole family:

Citrus Stamped Tea Towels

A fun project that can also be a great gift! Slice a variety of citrus fruits in half, dip them in bright colors and use them to stamp a creative design on tea towels. Learn more: *MakingHomeBase.com*

Painted Bowtie Pasta Butterfly Craft

With a few extra craft supplies, turn bowtie pasta into a butterfly themed decoration or spring-time centerpiece. Learn more: *HowDoesShe.com*

DIY Food Stamps

Turn any vegetable into a stamp by slicing it in half or at an angle. Then dip the vegetables in paint and create a masterpiece ready for your kitchen refrigerator door! Or consider using the stamps on blank note cards, gift bags or wrapping paper to make gift-giving fun.

Rainbow Pasta Play

Let your preschooler pick their favorite pasta shape in the pasta aisle, and then when cooking the pasta according to the package directions, add two tablespoons of food coloring of your choice. Then, after the pasta has cooled, place it in a large bowl for sensory play. Cook up more than one color or shape and let them sort and combine for added fun. To learn more, visit: *Tablespoon.com*

Heart-Shaped Popcorn Bird Feeder

Using some wire and popcorn, create a treat all the birds in the neighborhood will enjoy! Learn more: *KiwiCo.com*

Butterfly Snacks

Decorate clothespins with markers to look like a butterfly, fill a snack-size baggie with a healthy snack and then place the clothespin in the center of the baggie to create a fun way to enjoy a snack at school or home! Learn more at: *JugglingWithKids.com*



our attitude toward food and our association with it can change when we're able to explore food in a low-stress environment.

KID'S Corner continued on page 40

Looks Almost Too Good to Eat

You can turn everyday food into edible art to help spark your child's interest in healthy foods and food preparation. Allowing children to help you create these edible Berry Wattle Ice Cream Cone masterpieces is a surefire way to encourage them to actually eat them too.

INSPIRED FOOD CREATIONS:

Berry Waffle Ice Cream Cones

Our friends at Driscoll's Berries have come up with a breakfast or snack recipe that any kid will find fun! All you need are: blueberries, a raspberry, Greek yogurt and frozen whole wheat waffles! For the recipe, please visit: Driscolls.com



Wild Eats

An empty plate, a banana and black and green grapes are all you need to create a fun sheep snack! For this and even more fun ways to create fun and healthy snacks, check out Wild Eats and Adorable Treats by Jill Mills the next time you are shopping on Amazon or visiting your local library or bookstore.

Caterpillar Fun

Make and eat your own caterpillar! Get started today by trying this easy snack idea from *LittleFoodJunction.com*:

- Thread some grapes and a cherry tomato on a wooden skewer.
- Dab some peanut butter onto the cherry tomato and stick on the candy eyes (you can also use a food marker, chocolate chips or peanuts for eyes if the candy variety is hard to find).
- Finally, use a food marker to draw a mouth.

You might also want to read The Very Hungry Caterpillar by Eric Carle to learn even more about food and the eating habits of a very funny caterpillar.





a Health-minded Generation Raising

It's amazing how our attitude toward food and our association with it can change when we're able to explore food in a low-stress environment. If you've ever desperately encouraged your child to "just take one more bite" of his or her vegetables, you know the dinnertime conversation can quickly lead to power struggles and that all-too-familiar game of bargaining.

Instead of labeling foods in black and white categories, bring out your child's curious and creative side by allowing them to have fun with food! Hands-on activities give them an engaging activity to occupy their mind (and time), teach them about healthier food choices that are good for the body, and teach the value of a balanced way of eating.

I hope these fun food-centric arts and crafts not only encourage a habit of healthy eating, but also allow you and your child to bond together and have loads of fun in the process!

About the Author:

Molly Jones, RDN, LD, is a registered dietitian currently working with both the bariatric surgery and telehealth programs at the Medical University of South Carolina in Charleston, SC. She has helped to expand MUSC's telenutrition program by 4000 percent over the past six years, making healthcare more accessible to adults and children living in rural and medically underserved communities across the state. She is especially passionate about childhood and adolescent obesity prevention and awareness and finds that technology can be helpful in connecting with the younger generation.

FEEL GOOD ABOUT GREAT TASTE

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Benefits Beyond Coloring Your Plate

Raspberries, blackberries, blueberries and strawberries!

Are these foods the healthiest foods on earth? These plump, juicy fruits are full of fiber, antioxidants, vitamins and minerals. Who wouldn't want to add them to their day? They are colorful, tasty treats which also happen to be power foods that pack a serious punch. How do you get their maximum benefit and where do they fit into your nutritional plan?

First, let's talk about berries. Did you know there are many different types of berries to choose from? Don't limit yourself to the usual suspects. There are many types of berries you can try.

Some well-known berries include:

- Acai berries
- Strawberries
- Cranberries

Unusual berries you might want to try are:

- Huckleberries
- Elderberries
- Gooseberries
- Salmonberries

Adding a variety of healthy berries to your meals and snacks can ensure you are getting a variety of nutrients. Eat up!

What makes berries so healthy? Each type of berry has its own set of health benefits and choosing a variety can ensure you get the maximum amount of nutrition that you can!



Berry Blast continued on page 44



PROUD SUPPORTER OF THE OBESITY ACTION COALITION (OAC)

At Nalpropion, we understand that losing weight is a journey best traveled together. That's why we're proud to support the OAC and its efforts to help each individual. Together, we hope to help the millions of people struggling with obesity through personalized support, effective weight loss strategies, and programs that fit each person's lifestyle.

Learn more about Nalpropion at nalpropion.com



What are Berries Made of?

Berries have an impressive nutritional breakdown, which is why so many dietitians suggest eating them. Not only are they naturally sweet, but they are also a low-calorie food. Each one-cup serving of fresh berries has at most between 50-75 calories—that's all! What a great way to get that sweet taste you are craving without the extra calories. Compare that to a hot fudge sundae!

Berries are primarily a carbohydrate (*having around 10-15 grams per serving*), but they are also a high-fiber food. Did you know the American Heart Association recommends consuming 25-30 grams of fiber every day? Fiber can help keep you full, improve your blood sugar and cholesterol levels, and help with constipation. Many Americans fall short of this recommendation and only get around 10-15 grams each day. Adding berries can be a great way to increase the fiber content of your diet.

Check out how much fiber is in just one cup of the following berries:

Raspberries: 8 grams
Strawberries: 3 grams
Blueberries: 3.6 grams
Blackberries: 8 grams

Adding a cup (or even two) of berries to any meal or snack will get you well on your way to meeting your daily fiber goal.

Add-up the Vitamins and Minerals

Berries are a great source of vitamins and minerals that keep your body going strong. Berries can be a great source of nutrients when they are added to a balanced diet. One serving of berries can't get you everything you need, but it can give you a great jump start!

Vitamin C:

Vitamin C boots your immune system and can speed up healing. It can also help reduce hypertension and has been shown to fight free radicals. It is recommended adults take 65-95 milligrams of vitamin C every day, and berries can be a great source. In just one serving (one cup), strawberries have 85 milligrams and raspberries have 32 grams.

Potassium:

Potassium has many functions in the body, including regulating blood pressure, decreasing muscle cramps, decreasing anxiety and improving brain health. It is suggested that adults get 3500-4700 milligrams of potassium each day. Berries can provide a good amount of this, but do not meet your needs entirely. The berries with the highest levels of potassium are: blackberries (233 milligrams per cup), raspberries (186 milligrams per cup) and strawberries (220 milligrams per cup).

Manganese:

Berries can also be a good source of Manganese. What does manganese do? It is essential for metabolism, calcium absorption and blood sugar regulation. The recommended amount is 2.3 milligrams every day for adult men and 1.8 milligrams every day for adult women. Two berries that are high in manganese are strawberries (0.6 milligrams per cup) and blackberries (0.45 milligrams per cup).

Vitamin K:

It is recommended that adults take in between 90-120 micrograms of vitamin K every day. Vitamin K is essential for blood clotting, regulating blood calcium levels and bone metabolism. Both blackberries (29 *micrograms per cup*) and blueberries (28 *micrograms per cup*) can be a good source of vitamin K.

Antioxidants Improve Health

Berries are not only a source of vitamins, but they are also a good source of antioxidants. During cell production, free radicals are produced in your body. Antioxidants are in substances that slow down damage to your body's cells by reducing oxidative stress from these free radicals. By reducing this stress, the risk of developing diseases can decrease. Different types of berries contain a variety of antioxidants—all providing multiple health benefits to your body.

Blueberries specifically contain anthocyanin, an antioxidant that has shown to benefit the heart by improving blood flow and countering the buildup of plaque. Anthocyanin may help to reduce the risk of heart disease by reducing levels of LDL (*bad*) cholesterol and increasing HDL (*good*) cholesterol. This antioxidant has also been shown to improve blood glucose.

In general, berries provide a wide variety of health benefits. Strawberries contain vitamin C and anthocyanins, as well as polyphenols which help reduce inflammation in the body. In raspberries you will find the antioxidants anthocyanin and polyphenols that work against oxidative stress to reduce the risk of some cancers and tumor growth. Acai berries are one of the best sources of antioxidant polyphenols and may contain as much as ten times more antioxidants than blueberries.

We know that berries are a wonderful source of nutrition, but how do you fit them into your day? Here are some great ideas to get you started.

How can you make berries a part of every day?

- Pack them in your lunch box as a snack.
- Mix them in your oatmeal.
- Throw them on top of your salad.
- Create a fruit salad for dessert.
- Make a smoothie with low-fat yogurt and berries.
- Sprinkle them on top of your yogurt.
- Serve them as an after-school snack.

Fun Berry Recipes to Try this Spring



Mixed Green Salad with Berries

Source: TastesBetterFromScratch.com

Below is a delicious salad with a mix of berries and vegetables. Turn this into a dinner option by adding chicken, shrimp or your favorite protein.

Salad Ingredients:

- 10 cups mixed greens lettuce (red lettuce, romaine, spinach, or whatever you like)
- ½ cup fresh strawberries, sliced
- ½ cup fresh blueberries
- ½ cup fresh raspberries
- ¼ cup red onion, diced
- 1 sweet apple, chopped
- 1 cup candied pecans
- ½ cup feta cheese crumbles

Creamy Poppy Seed Dressing Ingredients:

- 5.3 ounces strawberry yogurt
- √ ½ cup mayonnaise
- 1 small piece red onion
- 2 tablespoons milk
- 2 tablespoons granulated sugar
- 3 tablespoons apple cider vinegar
- 1 tablespoon poppy seeds

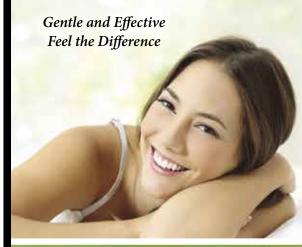
Directions:

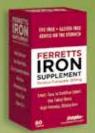
- 1. Add all of the dressing ingredients to a blender and blend until smooth.
- Taste. Add additional vinegar if you want it tangier, more sugar if you like it sweeter, or a dab more mayo and splash of milk if you want it creamier.
- 3. Stir in poppy seeds. Store dressing in the fridge for up to two weeks.
- Make candied pecans.
- 5. Prepare, wash and dry berries and chop the apple and onion. Add greens to a large mixing bowl. Add toppings (*I like to set aside a spoonful of each topping to add at the end, for aesthetics*).
- 6. Toss the mixture in desired amount of dressing. Serve immediately.



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Source: SkinnyTaste.com

Looking for a quick after-school snack or breakfast on the way out the door? Try this recipe full of berries and a little bonus protein!

Ingredients:

- ½ cup blackberries and raspberries
- 5 medium strawberries
- 1 cup crushed ice
- 6 ounces nonfat Greek yogurt
- A few drops of liquid stevia for sweetness (*Recommend: NuNaturals*)

Directions:

• Place all ingredients in a blender and blend until smooth.



Honey Lime Berry Salad

Source: TasteOfHome.com

Looking for a side dish to bring to your next pitch-in dinner or make a batch to put in your children's lunch boxes this week? Try this berry-based salad.

Ingredients:

- 4 cups fresh strawberries, halved
- 3 cups fresh blueberries
- 3 medium Granny Smith apples, cubed
- ½ cup lime juice
- ¼ to ½ cup honey
- 2 tablespoons minced fresh mint

Directions:

 In a large bowl, combine strawberries, blueberries and apples. In a small bowl, whisk lime juice, honey and mint. Pour over fruit; toss to coat.

Conclusion

Here comes the fun part. Pick up a container of berries at your local market and enjoy. Berries are a great addition to any healthy diet, so choose them as often as you can this spring!

About the Author:

Sarah Muntel, RD, is a Registered Dietitian from Indianapolis, IN. She has worked in the field of bariatrics for the past 18 years. She has worked with both bariatric and metabolic surgery patients as well as medical weight-loss patients. Throughout her career, Sarah has worked in several bariatric centers in Indianapolis. She is currently the Bariatric Coordinator with Community Health Network. Sarah is an active member of the Obesity Action Coalition (OAC), serves on the OAC Education Committee and frequently contributes to Weight Matters Magazine. She also plays an active role in the Indiana State Chapter of the American Society for Metabolic and Bariatric Surgery (ASMBS). In her free time, Sarah enjoys spending time with her husband and watching her three kids play sports.



Does it feel like your hunger is stuck in the "on" position?

Insatiable hunger can make it hard for you to focus, and no matter what you do, you continue to gain weight. That could be because a rare genetic disorder of obesity is preventing your brain from telling you you're full.



LEADforRareObesity.com



New Insight into Weight Gain and Genetics:

Rare Genetic Disorders of Obesity

by Dawn Laney, CGC; and Carol Ogg, BS Pharm

Many of us know that obesity is a complex disease. A number of factors can cause it and there is no simple cure. Usually, a combination of healthy eating, physical activity and medical weight management gives the best results. However, it is not that way for everyone.

Some adults find it is nearly impossible to lose weight no matter what they try or how many times they talk with their healthcare provider. Some children develop severe obesity at an early age and struggle to manage their weight.

It can be challenging and discouraging to have this happen to you or someone you love. While it can mean a new combination of treatments should be tried, it can also mean something more. It can be a sign of a newly discovered type of obesity.

The Hunger-Brain Connection

Not all obesity is the same. Some types of obesity can leave you feeling hungry no matter how much you eat. Others can make it hard for weight management efforts to work. These types of obesity can be rare genetic disorders of obesity. The reason is the Hunger-Brain Connection.

Scientists are constantly learning more about how our genes (the information that decides things like if we are tall or have red hair) control appetite and hunger with signals sent by the brain. These signals are regulated by a "hunger switch." The switch should turn "off" when you are full. If you feel hungry all the time, your hunger switch could be stuck in the "on position."



Josh is a child with a rare genetic disorder of obesity. One of his mom's first concerns appeared when they were buying him new clothes every couple weeks, instead of every few months.

What is Hunger?

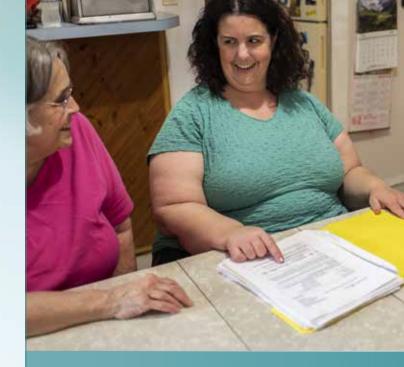
This might come as a surprise: Hunger doesn't start in your stomach. Hunger starts in your brain.

In a perfect world, the signals in your brain act like a traffic light. When they "turn green," they tell you that your body needs more fuel and to eat. After eating, these signals "turn red" and tell you that you're full and to stop eating.

If the signal switch in the brain is broken, the signal from your brain that says, "You're full and it's time to stop eating," never arrives.

Rare genetic disorders of obesity are caused by a broken signal from your brain. The signal can never "turn red" or tell your body that you are full. The signal process in the brain that controls hunger is a called the melanocortin-4 receptor (MC4R) pathway. Scientists continue to learn more about this pathway and how it works in people living with rare genetic disorders of obesity.

Weight Gain and Genetics continued on page 50



Becky is an adult with a rare genetic disorder of obesity. She describes it as, "I have a very painful gnawing sensation in my stomach. The only way to relieve the pain is by eating something."

simple tools simply healthy







Nate is a child who has a rare genetic disorder of obesity, his mother Karen describes it as, "Hunger is his mortal enemy. He was born hungry. He wakes up in the morning hungry. He spends all day hungry. He goes to bed hungry. He will live his whole life hungry. He will die hungry."

This research has taught us that:

- Weight and hunger are controlled and regulated by genes and signals in your body.
- If the signals for weight gain and hunger are broken, it may cause severe obesity in young children and excessive, never-ending hunger in all ages.
- There are many signals that control hunger, eating, feeling full and storing fat.
- · If any signal is broken, issues with appetite, hunger, calorie burning and others can happen.

How Do You Know if You Have a Rare Genetic Disorder of Obesity?

There are three main signs and symptoms that you should look for:

- Severe obesity at a young age: an infant or child who quickly gains weight, as early as a few months old
- Never-ending hunger: when you can't stop your hunger cravings, no matter how much you eat
- Inability to lose weight: when you struggle to lose weight, even with very healthy eating and a lot
 of physical activity

Please see your healthcare provider (HCP) if you think you may have a rare genetic disorder of obesity. Your HCP might send you to see a specialist or recommend genetic testing. It is important to talk about your results with your HCP and a genetic counselor.

Genetic counselors are specialists that can help schedule testing and explain results. They can also help you understand treatment options. If you live in the United States, a list of genetic counselors in your area can be found at the National Society of Genetic Counselors: Nsgc.Org/page/find-a-genetic-counselor.

"Rare genetic disorders of obesity are caused by a broken signal from your brain. It can never "turn red" or tell your body that you are full."

Conclusion

Rare genetic disorders of obesity are not common. Scientists are working to learn more about how signals for hunger and weight gain connect to your brain. This research will help with testing and treatment options.

To learn more, please visit:

- **LEADforRareObesity.com**: for help finding support, information or how to talk with your healthcare provider.
- ThinkGenetic.com: for information about specific rare genetic disorders of obesity.

About the Authors:

Dawn Jacob Laney, MS, CGC, CCRC, is a genetic counselor, assistant professor, clinical researcher and director of the genetic clinical trials center in the Department of Human Genetics at Emory University in Atlanta, Georgia. She is a co-founder of ThinkGenetic, Inc., which empowers patients who want to know about possible genetic causes for their medical issues or obtain real-life answers to their questions about the impact of living with a genetic disease. Ms. Laney also enjoys writing children's books (some of which are not about living with a genetic disorder).

Carol Ogg, BS Pharm, is a licensed clinical pharmacist and President of The COCo Consulting Group, LLC, specializing in rare genetic disorders. Carol is a critical advisor and consultant to ThinkGenetic, Inc., focusing on reducing the time to diagnose rare genetic conditions. Carol's direct patient care experience makes her a valuable advocate in educating the community with essential and actionable information. Prior to joining the ThinkGenetic team, Carol held leadership roles in the biotech industry and was instrumental in launching greater than a dozen products to meet the unmet needs of patients around the globe living with rare genetic disorders.

Meal Replacement Myth or Fact?

Myth: Meal replacements don't work.

Fact: Clinical studies have shown that meal replacements are a valuable tool for both weight loss and weight loss maintenance, and are recommended by Expert Working Groups (EWGs) to support weight loss efforts.1,2

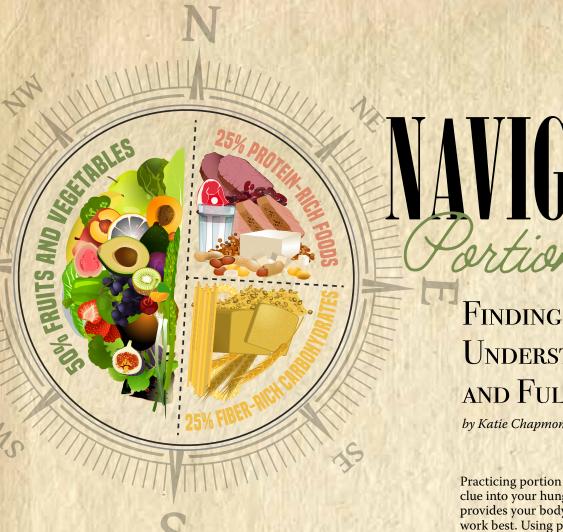
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HEN TRYING TO EAT LESS, MORE BALANCED OR EVEN IN A DIFFERENT WAY, YOU MAY HAVE TO USE NEW TOOLS TO BE ABLE TO ACHIEVE YOUR HEALTH GOALS. ONE SUCH TOOL MAY BE PORTION CONTROL. Upon hearing the words "portion CONTROL," SOME MAY INSTANTLY IMAGINE TINY BITES OF BLAND, UNAPPEALING FOOD AND FEELINGS OF RESTRICTION. HOWEVER, PORTION CONTROL ISN'T ABOUT TELLING YOURSELF TO ENIOY UNAPPETIZING MEALS IN A LIMITING WAY. IDEALLY, IT'S ABOUT HOW TO MAKE EACH MEAL ENJOYABLE IN THE MOMENT WITHOUT FEELING TOO FULL AT THE END.

FINDING YOUR WAY TO Understanding Hunger AND FULLNESS SIGNALS

by Katie Chapmon, MS, RD

Practicing portion control helps you eat mindfully, clue into your hunger and fullness cues and provides your body with the nutrition it needs to work best. Using portion control is simply about balancing and monitoring the amount of food in your meals and snacks. Portion control is a practice. When it comes to any practice, we have to start somewhere and work at it consistently for it to become "normal."

PORTION CONTROL AND WEIGHT MANAGEMENT

Portion control can truly work for weight-loss and management as it reduces the total number of calories someone consumes while offering balanced nutrition for optimal energy. Many studies have shown that when people are offered larger portions, they eat more. A 2012 study from Cornell University found that people ate 50 percent more when they were given no visual cues as to what a portion size ought to be.

Portion control begins with shifting your outlook on what a "normal" serving looks like. Let's start with the basics. What does a healthy portion look like? One cup or three ounces can be tricky to visualize, so many compare measurements to household objects or their hand size.

A ROUGH GUIDE FOR EACH MEAL IS:





PROTEIN FOODS (*meat, fish, poultry or beans*): One palm-sized portion for women or two palms for men. A palm size is about the same as a deck of cards.





VEGETABLES AND SALADS: A fist-sized portion for women and two fists for men. A fist is also compared to a tennis ball.





CARBOHYDRATE FOODS (whole grains and starchy vegetables): One cupped-hand is a portion for women and two for men. A cupped hand is equal to a half of a tennis ball.





HIGH-FAT FOODS (butter, oils and nuts): One thumb-sized portion for women and two for men. A thumb size is also referred to as two dice.

Another option for visualizing portion control is to divide your plate into portions of $\frac{1}{2}$ vegetables, $\frac{1}{4}$ protein and the remaining $\frac{1}{4}$ healthy carbohydrates.

PORTION CONTROL AND MINDFULNESS

Mindfulness not only helps you become aware of what you put on your plate, but also how you eat and how you recognize cues for hunger and fullness. These cues can often be missed if we eat too quickly. Slowing down and taking a moment to savor each bite can help you enjoy the meal more and recognize these important cues. If you're afraid you might not have those cues, using portion control can help you find and follow them.

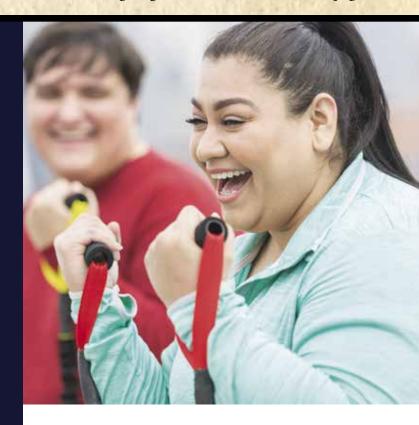
Navigating Portion Control continued on page 54

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Part of a mindful eating practice is to eat in a peaceful and attentive space. That means not eating when you are hurried and eating at a table or space without distractions. Eat slowly and deliberately, savoring each bite. Food seems to be more satisfying when it is eaten without rushing and you can pay more attention to your body's natural cues. Fullness signals are released after about 20 minutes of eating. When people eat very quickly, they are more likely to eat more than they need (*or possibly want*) by not allowing their body a chance to tell their brain that they are full.

A SMALL PLATE CAN LEAD YOU TO EAT SMALLER PORTIONS, BUT THE COLOR OF THAT PLATE MAY ALSO MAKE A DIFFERENCE. PEOPLE EATING FROM A COLORED PLATE, ESPECIALLY A SOOTHING COLOR, HAVE BEEN FOUND TO EAT SLOWER AND RECOGNIZE FULLNESS CUES.

MINDFULNESS: SHOW DO YOU BEGIN?

First, make sure your brain can visualize different portion sizes. You can do this by getting out your measuring cups before you prepare or plate your food so you aren't just trying to guess. Another option is to use containers or plastic baggies that are sold in grocery and home stores that are premeasured—some with portioned compartments like a Bento box and others color-coded for the size and type of food.

You can also try switching out the color and size of your plate. A small plate can lead you to eat smaller portions, but the color of that plate may also make a difference. People eating from a colored plate, especially a soothing color, have been found to eat slower and recognize fullness cues. However, you should also know that a larger plate can be used in your favor. It's really tough to make a fulfilling salad on a small plate, so if there is an abundance of vegetables — choose the larger plate instead.

WHAT DO I DO WHEN I'M OUT TO EAT?

Restaurants are famous for serving portions larger than we need. As soon as your plate is set in front of you, divide the serving in half and ask your server to wrap up the other half for you to take home. Doing this right away often helps to make something out of sight, out of mind. You may also choose to share your food with a friend and "serve" yourself on another plate or ask for the food to be split in the kitchen for more balanced portions. You may even want to consider ordering from the appetizer or the children's menu to ensure a smaller size. Or request that a bread basket not be brought to your table if you think that having one in sight would be tempting or make portion control more difficult.

OTHER IMPORTANT THOUGHTS TO CONSIDER:

- HYDRATION: Don't forget to drink water! Water improves digestion and can help you feel full.
- START SMALL: To keep your body's hunger and fullness cues in check, start with less food on the plate. Once you've finished, wait 10-20 minutes before going back for more. This will give your body time to recognize whether it's actually still hungry.
- CUT-UP YOUR FOOD: It may sound silly, but this is a helpful visual! When you chop up what you have plated (a chicken breast and a sweet potato for example) it takes up more space on your plate, which can be more visually satisfying.
- SET DOWN YOUR FORK: While eating, pause between bites by setting down your fork. It allows you to slow down and to notice fullness cues.

Conclusion

Practicing portion control emphasizes the big picture. It's not a diet, it's a practice (and a lifestyle, too)! Learning to moderate portion sizes will let you feel your best after eating and through the day. Start with focusing on one meal a day. Focus on the portions while preparing and plating your meal and then take the time to eat mindfully. Notice how these changes make you feel at different times throughout the day. Taking the first step towards developing your personal wellness habits will allow you to find your best self.

About the Author:

Katie Chapmon, MS, RD, is a Los Angeles based Registered Dietitian specializing in the field of metabolic surgery and weight management since 2008. She currently works with individuals at Your Life Nutrition practice in Pasadena, California. Katie is the recipient of the 2018 Academy of Nutrition and Dietetics (AND) Weight Management Excellence in Practice Award. Throughout her years in this field, she has presented on various subjects at national conferences and for several societies surrounding weight management and metabolic surgery. She plays active roles on committees with the American Society of Metabolic and Bariatric Surgery and AND Weight Management Dietetic Practice Group.

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