YWM2020 is going virtual!

BEAT THE HEAT: STAYING REFRESHED AND COOL IN THE SUMMERTIME

WHAT ARE THE SIX FACTORS TO FIT?

Prepping for the New School Year

OAC
Obesity Action Coalition
Weight Matters Magazine is the Official Publication of the Obesity Action Coalition
Jackie*
Lost 82 lbs ** on the OPTIFAST® Program!

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*Jackie was a participant in the 2019 OPTIFAST® Patient Advisory Board with expenses paid for travel, accommodations and food.

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*** modified version of Diabetes Prevention Program (DPP) diet.

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OPTI-14846-0320
All or Nothing Nutrition: Why Giving up Some Foods Limits the Potential for Healthy Eating
by Katie Chapmon, MS, RD
Diets can be strict and all-consuming. Learning to portion out food and eat everything in moderation can help you build a healthy and sustainable lifestyle.

What Are the Six Factors to Fit?
by Robert Kushner, MD; and Nancy Kushner, MSN, RN
Dr. Robert Kushner, Program Co-Chair of the OAC’s Annual Convention, gives you the ins and outs of his new book for helping people personalize their approach to weight loss.

Kid’s Corner: Prepping for the New School Year
by Sarah Mantel, RD
The end of summer means it’s time to start getting ready for the new school year. Get your kids prepped with these energizing breakfast, lunch and snack ideas.

Metabolic Syndrome: What Is It and How Does It Affect You?
by Macklin E. Guzmán, DHSc, MPH
When it comes to obesity-related conditions, Metabolic Syndrome often goes overlooked. Get the facts and discover its symptoms, effects on the body and treatment options.

Exercise and Chronic Obesity Medications: How Do They Mix?
by Darshan Suthar, DO; and Scott T. Jannissen, MS
It can be challenging to meet physical activity recommendations if you’re taking certain medications. Find out what medications may affect your performance and how you can continue to stay active.

Delivery Meals: How to Keep them Healthy
Farrah Vigand, RDN, LD, CSOWM
Meal kit delivery services are convenient, have healthy options, and are perfect for the whole family or just one person. A dietician shares which services she recommends and offers tips for keeping your meal choices healthy.

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Pop Design Group
Designer

Weight Matters Magazine - OAC
4511 North Himes Avenue, Suite 250
Tampa, FL 33614
(800) 717-3117 • Fax: (813) 873-7838
www.ObesityAction.org • info@obesityaction.org

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Hello Everyone,

As I sit down to write this letter, the world is confronting an issue of enormous scale and the human impact is immense. Our hearts go out to all who have been affected by the outbreak of COVID-19.

In the past couple of months, our simplest actions have meant everything. Whether it’s staying home or checking in with friends or family, what each of us does matters. The OAC always does what is within our power to make life a little easier for you during difficult times. Through sharing education, resources and programming, we hoped to help our community in these difficult times. We know that there still may be uncertainty in the world right now, which can make it challenging to manage weight and health. I want to invite you to visit ObesityAction.org/Covid19. There you will find links to meaningful resources to support you in your health journey.

The OAC has rescheduled this year’s in-person Convention for next year, July 8-10, 2021, at the Westin Lake Las Vegas Resort & Spa. While we will miss being together in-person this summer, we are excited to announce that we will still come together virtually, at YWM2020 - VIRTUAL! We are busy assembling an amazing line-up of presenters to deliver the top-notch, science-based health education that the OAC is known for in this new and exciting format. So, make plans to enjoy a series of events starting this summer from the comfort of your home! Perhaps the silver lining is that we will be able to share the wonderful education found at our Convention with a world-wide audience and include those that might not have been able to physically or financially travel to an event.

As we face challenges in our daily lives, it is more important than ever before to come together as a community. We may be physically isolating, but we are not isolated. We’re here for you. Keep commenting on our social media pages, posting in our Community Discussion Forum and sharing with us how you are doing. Together, we will get through these difficult times and come out stronger.

“We are stronger together than we are alone”

– Walter Payton

Be well, stay safe.

Michelle “Shelly” Vicari, OAC Chairwoman
GivingTuesday: Fighting for the Pandemic of Obesity

During hard times, there’s a fundamental truth that gives us hope. Together, we can do extraordinary things. Generosity, in all its forms, has been helping the entire world get through uncertain times. On Tuesday, May 5th, the OAC joined in on a special day of giving and unity, #GivingTuesdayNow. The day was honored internationally in response to the needs created by the COVID-19 crisis.

In response to this global effort, the OAC called upon our community to give their time by helping to grow support for the Treat and Reduce Obesity Act (TROA). If passed, this legislation will expand access to obesity treatment for millions of Americans and can help more individuals fight off COVID-19, as obesity has been shown to be a risk factor for severe symptoms and complications.

We were so heartened to see that hundreds of OAC supporters stepped up on #GivingTuesdayNow by writing to legislators, sharing our efforts on social media and donating in support of our mission. Our efforts were impactful, but TROA continues to need our help. If you are interested in supporting this important effort, head to OAC’s Action Center at ObesityAction.org/Action-Center where you can contact your elected officials today.

YWM2020 – VIRTUAL brings Support, Tools and Education Right to Your Home!

The OAC is excited to announce that the Your Weight Matters Annual Convention is going virtual for 2020! This format gives us the opportunity to reach more individuals than ever before who are seeking credible information about their weight and health. Online registration is currently available for the OAC’s most sought-after educational event. This immersive educational experience, taking place as a three-part event series beginning on July 11th, will challenge attendees to “think differently” about weight and health.

YWM2020 – VIRTUAL will bring together the most sought-after health and weight industry experts to present science-based information in an easy-to-understand format, designed to help attendees navigate the complex topic of weight management. This year’s program will allow attendees to dive into the science behind weight, while learning key strategies and gaining access to valuable tools. From digging in to the science behind weight management to exercise strategies and so much more, YWM2020 – VIRTUAL promises to deliver top-notch education.

YWM2020 – VIRTUAL has increased access to quality and science-based education for any individual struggling with their weight, because for the first time, the virtual sessions are being offered at no cost!

YWM2020 – VIRTUAL has different registration options to accommodate the needs of our attendees. At no cost, individuals have access to live streamed sessions and supplemental materials, the ability to chat and ask questions in real time and access to the Virtual EXPO Hall. The YWM Virtual EXPO Hall provides attendees with vetted resources and tools as a part of the Convention. For those interested in after-hours access to recorded sessions and supplemental materials, as well as virtual support opportunities, there is a paid registration option. For nurses and some healthcare professionals, we are offering up to 10 CE credit hours as well as the unique opportunity to grow their knowledge about helping patients manage their weight. To learn more about YWM2020 – VIRTUAL, please visit YWMConvention.com or turn to page 10.
Q&A with Emily Robinson

Q: While reflecting on your struggles with childhood obesity, what were some of the personal challenges you faced?

I struggled a lot with self-blame and I still do. I struggle with feeling like obesity is something I brought onto myself, rather than considering other factors that can contribute to obesity. For example, my mom had a really stressful job while I was growing up. She sometimes worked until 8:00 or 9:00 pm. This increased overall stress levels in the house, and stress plays a large role in weight. I think it did in my household. I also grew frustrated with doctors who would always bring up my weight and suggest that I “lose a few.” As if I hadn’t tried that! I spent a lot of my time yo-yo dieting and trying fad diets I found online. They never worked long term, which was defeating.

When I look back at growing up and struggling with my weight, I thought that health was just physical. If I didn’t look “fit,” then I wasn’t healthy. That’s what society, social media, my peers and doctors were all saying. But now, I see health as mental, emotional, social, financial and physical. Finding that balance is still something I work on every day.

I also think that because my struggles with obesity are less obvious, people will say weight-biased comments toward me. There is actually a group on my college campus that pointed me out in a crowd as having “thin privilege,” and I was taken back. While yes, I’ve lost a lot of weight, that doesn’t mean I don’t still struggle with my weight or obesity. I face a huge mental battle every day because of the way I lost weight, which severely damaged my mental health. Every day, I have to wake up and remember to thank my body for everything it is capable of and everything it has been through.
Q: Do you feel that your struggle with obesity was in any way uniquely challenging because you were still growing up?

Definitely. Because of both my fear and frustration with doctors, I struggled to lose weight on my own by not asking for help. Even now, if I make an appointment for something routine like renewing a prescription, doctors always say to me, “continue diet and exercise.” If only they knew what I have been through!

It was incredibly isolating as a child and teen to feel like I was the only one struggling with my weight. I would research diets online for hours. The first diet I ever did was a juice cleanse and I drank lemonade for an entire week. That’s not how a juice cleanse works, but I was 11 or 12 and I didn’t know any better. I developed a huge fear of certain foods and spiraled into an eating disorder that led me to starve myself. When I did, I was losing weight and everyone around me encouraged it. While that was probably the unhealthiest thing I could do for myself, I was fueled by the comments from people around me. Because pediatric and adolescent weight management care isn’t popularized, I didn’t even know it existed, so I was afraid to ask for help. As a result, I faced a cycle of loneliness and fending for myself, which is why I’m so proud to be working in obesity advocacy now. I can share my story so other young people don’t have to feel alone in their struggles.

“Every day, I have to wake up and remember to thank my body for everything it is capable of and everything it has been through.”

“I can share my story so other young people don’t have to feel alone in their struggles.”
Q: What have you learned about obesity and weight management that you didn’t know when you were younger?

I learned that you can’t blame yourself. I damaged my self-confidence, my mental health and my self-efficacy in doing so. I constantly felt that nothing I did to lose weight was working and I should give up, but I’m rather stubborn and never stopped trying.

Eventually, after 16 years of struggling, I found balance when I connected with like-minded people sharing similar experiences. So, I think another really important step to take if you’re struggling with weight, aside from seeking care, is to find community. That’s why I resonate so heavily with what the OAC and OCEANS Lifestyles are working for. I would still be lost and lonely without those communities. They motivate me to continue striving towards my best self.

Q: You’ve grown to be a strong voice for people affected by obesity. What fuels your passion? What change do you hope to create?

My passion is largely driven by my experience with not having access to care and knowledge about obesity. I think my experience would be drastically different if I had accurate information earlier in my life.

My experiences with obesity have also changed by having a community. When I first went to the OAC’s Annual Convention in 2019, I was so fulfilled by the experience. The information sessions ignited a spark in me. For so long, I thought I was alone in my experiences, but that is simply not true. I hope that one day, every child, teen and adult who struggles with obesity will have access to not only accurate information and care, but to a community that uplifts and supports them. I hope to be part of that change.

Q: What is one thing you wish more people knew about obesity?

I am so exhausted by the “eat less, move more” narrative. It’s echoed in social media, some medical professionals, and even some of my peers! That narrative blames the individual and does not consider the various other factors that can contribute to obesity. The science behind obesity is so complex, yet it’s not popularized or well known.

Turning Pain into Power

Emily’s story is a great example of the power that information and community hold. Without the right knowledge about obesity and support from people you trust, fighting it can feel impossible. Education and support are crucial tools that can change lives more than we may realize. We need advocates like Emily, and like you, to share their story and help change how the world views obesity.

Do You Want to Share Your Story?

Like Emily, sharing your experiences can make a difference. It can be freeing and it can also provide support to others. Visit the OAC’s story-sharing platform at WeightoftheWorld.com to share yours today and consider getting started by answering one of our question prompts.

If you would like your story to be featured in a future issue of Weight Matters Magazine, please email membership@obesityaction.org.
Is There a Difference in Fiber Supplements?

Will any fiber do?

GI regularity can be a challenge for people who have had a bariatric procedure. Like most adults, you may not get enough dietary fiber in your daily diet. Supplemental fiber helps maintain regularity and has been associated with a number of protective health benefits.*

Newly reformulated Advanced Fiber from Bariatric Advantage was designed specifically for the weight-loss patient, with oat fiber and fructooligosaccharide (FOS), a prebiotic that supports a healthy intestinal environment and increases absorption of calcium and magnesium.*

Try adding Advanced Fiber to your protein or meal replacement shake. Find it at BariatricAdvantage.com.


1. Studies in nonbariatric populations.

*This statement has not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.
THINK DIFFERENTLY ABOUT YOUR WEIGHT

FREE VIRTUAL EVENT REGISTRATION

INCLUDES:

• Sessions in Real Time
• Access to Session Slides/Handouts in Real Time
• Ability to Chat and Ask Questions in Real Time
• Access to Virtual EXPO Hall
• Access to Event Program Book

Do you want access to YWM2020 - VIRTUAL but can’t make all three events? Don’t worry, we also are offering a Full Event Registration option that includes YWM2020 After Hours!

Proudly brought to you by the Obesity Action Coalition

To learn more about YWM2020 -
EVENT REGISTRATION

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SESSION 1: THINKING DIFFERENTLY ABOUT YOUR WEIGHT
Presented by Scott Kahan, MD, MPH

SESSION 2: THE ROLLERCOASTER OF LIFE: MAJOR EVENTS AND PERSONAL FACTORS THAT IMPACT WEIGHT
Presented by Robert Kushner, MD

SESSION 3: WHY IS IT SO HARD TO LOSE WEIGHT AND KEEP IT OFF?
Presented by Kevin Hall, PHD

SESSION 4: “EAT LESS, MOVE MORE” – WE KNOW IT’S NOT THAT SIMPLE: FINDING YOUR EVIDENCE-BASED APPROACH
Presented by Christopher Still, DO, FACP, FACN

SESSION 5: ADAPTING TO A CHANGING WORLD - ADDING TO YOUR MENTAL HEALTH TOOLBOX
Presented by Paul Davidson, PhD; and Merrill Littleberry, LCSW, LCDC, CCM, CI-CPT

SESSION 6: BECOME A FOOD BOSS: MANAGE STRESS EATING, BEAT FOOD BOREDOM AND LEARN HOW TO FEEL IN CHARGE
Presented by Dawn Jackson Blatner, RDN, CSSD, LDN

SESSION 7: JUST KEEP MOVING FORWARD - STAYING ACTIVE IN CHALLENGING TIMES
Presented by Tim Church, MD, MPH, PhD

SESSION 8: FIGURING OUT YOUR NEW FAMILY FLOW: MASTER THE ABC’S OF YOUR “NEW NORMAL”
Presented by Nina Crowley, PhD, RDN, LD

EXPERIENCE EDUCATION LIKE YOU’VE NEVER IMAGINED – ALL FROM THE COMFORT OF YOUR OWN HOME!

To learn more about YWM2020 - VIRTUAL, visit YWMConvention.com

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YWM2020- VIRTUAL Sponsors

PLATINUM

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VIRTUAL, visit YWMConvention.com
It's summertime! Grab your beach chairs, sunscreen lotion and cold drinks and head to the pool!

While having fun during the summer is essential, so is staying hydrated and healthy. It is important to stay active, eat refreshing foods and stay hydrated using healthy drinks during this time of year. While it may feel impossible, there are many ways to enjoy summertime flavors and stay active without having to bear the heat or gain weight.

**WATER**

Our bodies are made up mostly of water. This means that drinking water is the most effective form of hydration. Water allows our bodies to maintain a stable internal state (known as homeostasis) and flush out toxins and waste. The balance between water and electrolytes in our bodies drives most of our system functions, including:

- Blood pressure
- Body temperature
- Heart rate
- Healthy metabolism

Even the slightest change to the amount of water in the body, such as a one to two percent decrease, may create symptoms such as:

- Confusion
- Faintness
- Rapid breathing
- Inability to walk

"As appealing as an ice-cold soda may be on a hot summer day, it will not hydrate your body properly and will add unnecessary calories and sugar into your diet."
GET HYDRATED WHILE AVOIDING WEIGHT GAIN

Water isn’t the only form of hydration. While you may want to stray away from sugar-packed sports drinks and sodas, there are still plenty of healthy drink options available that will help you stay hydrated and avoid weight gain. Here are some examples of how you can stay refreshed in the summertime:

INFUSED WATER
An easy way to stay hydrated while also enjoying a tasty drink is to infuse your water with fruits and vegetables. Slices of fruit can add great taste and prove to be just as refreshing as a cold soda. Adding these fruits to your water will keep you refreshed:

- Lemons
- Oranges
- Cucumber
- Mint
- Lime

ICED GREEN TEA
Green tea has zero calories and tastes great! You can buy unsweetened green tea at the store or make it yourself at home. Pouring any kind of tea over ice instantly makes it refreshing while staying healthy. You can even add in a little milk or honey to give it some extra flavor while avoiding a lot of extra calories.

SUGAR-FREE JUICE
While a tall glass of orange juice may sound like the perfect way to start off a summer day, some brands of juice contain a high amount of added sugar that may taste great but is not great for your body. Buying sugar-free juice will allow you to experience the same great taste, but without the added sugar.

SMOOTHIES
If you have a blender, smoothies are a quick and filling way to stay healthy and hydrated in the heat. Grab some fresh or frozen fruit, a little Greek yogurt or milk, and you’re set! Some restaurants or store brands use added sugar while making smoothies, so making them at home or asking for no sugar is a great way to ensure you are drinking a healthy smoothie.

FOODS CAN BE REFRESHING TOO!
An often forgotten but really fun way to stay hydrated is through your food choices! There are a variety of fruits and vegetables that contain above 75% water. Popsicles and watermelon aren’t the only ways to stay cool; strawberries, peaches, cantaloupe, pineapple and plums all have above a 90% water content. Vegetables that hit that same high mark include:

- Cucumbers
- Lettuce
- Eggplant
- Tomatoes
- Peppers

Combining vegetables with hummus, guacamole or salsa is a great way to stay healthy and add taste to your summer snacks.

“POURING ANY KIND OF TEA OVER ICE INSTANTLY MAKES IT REFRESHING WHILE STAYING HEALTHY.”

HEALTHY AND REFRESHING SUMMER RECIPES

MAKE YOUR OWN POPSICLES
If you can use a blender, then you can make popsicles! Instead of juice or regular water, try using coconut water to blend with your fruits for a bonus of electrolytes. If you’re looking for a gourmet popsicle, use almond milk for a creamy version. Just stick your mixture in the freezer for a couple of hours, and boom! You have homemade, healthy popsicles.

Beat The Heat continued on page 14
Whether you are soaking up the sun or keeping cool inside, make it a priority to move your body — no matter where summer takes you.

**EXERCISE**

While summer is all about relaxing and taking it easy, this is commonly a time when routines get re-routed and goals get put on the back burner. Whether you are soaking up the sun or keeping cool inside, make it a priority to move your body — no matter where summer takes you. Many of the exercises shown below can be done with little to no equipment and may even get you to explore new parts of your neighborhood or city.

**GETTING ACTIVE AT HOME**

If it feels too hot outside to exercise but you still want to get your body moving, try using these common features/tools in your home to get active.

- **Laundry Baskets or Toy Chests:** Use filled toy or laundry baskets as extra weight for hip hinges or squats. Make sure to lift with your legs to decrease the excess load you may experience in your lower back.

- **Stairs:** Stairs are the perfect household feature because there are so many exercises you can do on them. Pushups, stair hops, side steps, toe taps and lunges are all things you can do on your stairs that add intensity to a workout.

- **Hallways:** Use a hallway in your house to perform different versions of lunges such as forward, backward and side lunges. If the hallway isn’t too slippery, you can also do sprints, butt kicks or high knees to add some cardio to your workout.

**THE GREAT OUTDOORS**

If you want to get outside for some sun and fresh air, take advantage of your city! Whether you are out for a walk or a run, take advantage of these common features to mix up your workout:

- **City Blocks:** If you live in a city, try using city blocks as a form of measurement instead of time or repetition. Try walking a block and when you arrive at the next one, safely use the curb for step-ups or calf raises.

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**NO-MAYO ALMOND CHICKEN SALAD**

A salad that can nourish your body while keeping you cool on a hot day makes lunchtime a success. Your choices for toppings include more than just a lettuce, tomato and carrots combination. For example, chicken salad is a perfect lunchtime meal or snack. This no-mayo almond chicken salad (recipe below) uses almond butter instead of mayo to deliver the creaminess of chicken salad without all of the fat and dairy. Enjoy it with multi-grain crackers, put it on rice cakes or scoop it over a bed of iceberg lettuce.

Prep Time: 30 minutes  
Serves: 10 people  

**INGREDIENTS:**

**Sauce**
- ½ cup of almond butter
- 3 tablespoons of extra virgin olive oil
- ½ teaspoon of salt
- ½ teaspoon of black pepper
- 1 teaspoon of minced garlic
- 1 teaspoon of lemon juice
- 4 to 5 tablespoons of warm water

**Salad**
- 1 cup of shredded chicken
- 1 cup of matchstick carrots
- 2 cups of broccoli slaw
- 2 tablespoons of diced green onions
- ½ cup of slivered almonds
- 1 tablespoon of sesame seeds (optional)

**INSTRUCTIONS:**

1. To prepare this dish, start with the sauce. Mix the almond butter with olive oil until both have equal proportions in the mixture. Then add all other ingredients and stir. This works best using a standard blender or a hand blender to make sure all ingredients are well-mixed.

2. In a large salad bowl, mix all the ingredients for the salad except for the sesame seeds. Pour your dressing over the salad and sprinkle sesame seeds on top. Serve chilled. Store it in the refrigerator for up to 48 hours. For the best taste with crunchy almonds, consume this salad when fresh.
You can also use each block on your route for a different type of leg exercise. These exercises can include walking at a faster pace, bringing your knees up to your chest, lunges, and even side stepping. If you side-step, make sure to alternate which leg is leading.

- **PARK BENCHES:** If you live close to a park, benches are a great way to get some upper body exercise. As you go along the trail in the park, try performing push-ups, planks and even tricep dips every time you pass a bench. Make sure to alternate between exercises so your arms do not get too tired.

- **HILLS:** If you typically walk around a neighborhood with flat surfaces, try finding another local neighborhood with elevation. This allows your body to try out new challenges such as hills and slopes. The added intensity can help prevent your results from plateauing. Walking up hills is a great and easy way to boost your heart rate without having to increase speed.

### CONCLUSION

Whether you’re traveling during summer or just staying at home with friends and family, make it a priority to eat healthy and stay active. Utilize everyday household tools and other objects to make a workout more fun, or experiment with new fruits and vegetables to create an awesome smoothie. Staying active and eating healthy is easy when you’re having fun doing it!

**About the Authors:**

Carolina Lima Jantac, MS, RD, LD, creates uniquely vibrant and imaginative recipes for food companies as well as health and nutrition seminars for corporate wellness and public speaking programs. Jantac received a Bachelor of Science degree from the University of Florida, where she majored in food science and human nutrition. She then focused her Master’s degree on nutritional research.

Angelic Juaneza, MSEd, NASM-CES, FMS, SFMA, is an exercise physiologist in the Lone Star state specializing in functional movement for athletic to sedentary populations. She is passionate about educating clients throughout their health and fitness journeys by using personal training and nutrition to create and sustain a well-balanced lifestyle.

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Multi-Complete 45 contains all of the vitamins and minerals that are in our original bariatric multivitamin formula PLUS 45 mg of iron per daily serving. This product meets the ASMBGS guidelines* for patients who have had a Vertical Sleeve Gastrectomy or Gastric Bypass and are looking to avoid taking a separate iron supplement.

*Excluding Calcium

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(877) 424-1953
Dear Doctor

I’m Gaining Weight After Bariatric Surgery. Are there Medications for Me?

Bariatric surgery is a treatment option for obesity that can help you lose weight and achieve a healthier lifestyle. However, there may be some challenges you face as a patient along the way. Adjusting to your body and lifestyle after surgery can be wonderful and difficult at the same time. While you are experiencing the benefits of bariatric surgery, you must also face the challenges that come with it – and that includes avoiding weight regain.

Types of Bariatric Surgery

Before discussing weight regain and chronic obesity medications, it is important to understand the different types of bariatric surgery:

1. **Roux-en-Y Gastric Bypass (RYGB)**
   This surgery involves creating a small pouch from the stomach and connecting the newly-created pouch directly to the small intestine.

2. **Vertical Sleeve Gastrectomy (VSG)**
   This surgery involves removing a large portion of the stomach in order to leave behind a smaller stomach.
3. **Adjustable Gastric Banding (Lap band)**
   In this procedure, the surgeon puts an adjustable band around the top part of the stomach. This creates a very small stomach pouch that will help the patient feel full after eating less food.

4. **Intragastric Balloon Placement**
   This procedure involves placing a saline-filled silicone balloon in your stomach. The balloon assists with weight loss by limiting how much you can eat and helping you feel fuller faster.

5. **Biliopancreatic Diversion with Duodenal Switch (BPD/DS – Gastric Bypass)**
   This is a less common bariatric surgery procedure that entails two major steps:
   
   - The first step is a sleeve gastrectomy in which about 80% of the stomach is removed, leaving a smaller tube-shaped stomach that is similar to a banana.
   
   - The second step bypasses the majority of the intestine by connecting the end portion of the intestine to the duodenum near the stomach. A BPD/DS limits how much you can eat and reduces the absorption of nutrients, including proteins and fats.

"Post-surgical follow-up appointments are crucial for keeping patients on track. Often, old habits resurface that result in weight plateaus or weight regain."

"Dear Doctor continued on page 18"
Weight Loss After Bariatric Surgery

After bariatric surgery, progressive weight loss is the goal that both you and your bariatrician are working for. Studies show that 25% - 35% of patients who undergo bariatric surgery have either demonstrated less than ideal weight loss or weight regain two to five years post-surgery. Post-surgical follow-up appointments are crucial for keeping patients on track. Often, old habits resurface that result in weight plateaus or weight regain. The sooner that these issues are addressed, the higher the chances are of getting back in the weight loss trajectory.

How Your Bariatrician Can Help

The role of a bariatrician is to identify reasons for weight plateaus or weight regain, and to provide you with a proper treatment plan.

A bariatrician keeps a close eye on your status after surgery, which includes monitoring any health conditions related to obesity. Oftentimes, health conditions related to obesity may predispose the patient to weight regain. While keeping an eye on any health conditions, a bariatrician must also alter any medications that promote weight regain, if possible.

If the patient is still experiencing a weight plateau or weight regain, a bariatrician may then recommend an appropriate obesity medications.

FDA-approved Chronic Obesity Medications

- **Lomaira and Adipex P (Phendimetrazine) and Bontril (Phentermine)**

  Phentermine (better known as Bontril) and Phendimetrazine (better known as Lomaira or Adipex P) are appetite suppressants. These medications stimulate the central nervous system in order to suppress appetite, thus helping people manage their hunger and lose weight.

- **Qysmia (Phentermine and Topiramate)**

  Qysmia is considered “combination drug therapy.” It contains both Phentermine and Topiramate. The Phentermine starts working immediately and reduces your appetite, while the extended release of Topiramate helps you feel fuller throughout the day and can alter the taste of certain foods.

- **Contrave (Bupropion and Naltrexone)**

  Contrave is also considered “combination drug therapy.” It contains both Bupropion and Naltrexone. Bupropion is an antidepressant medicine that can also decrease appetite, while Naltrexone can curb hunger and food cravings.

- **Saxenda (Liraglutide)**

  A Liraglutide injection is used with a diet and exercise program to control blood sugar levels in adults and children 10 years of age and older with type 2 diabetes. Saxenda is an injectable prescription medicine that contains Liraglutide and may help some adults with overweight or obesity, who also have weight-related health issues, to lose weight and keep it off.

- **Orlistat (Pancreatic lipase inhibitor)**

  Orlistat uses a pancreatic lipase inhibitor to decrease the absorption of fat. Lipase inhibitors are substances used to reduce the activity of lipases (enzymes that break down dietary fats) found in the intestine. Lipases are secreted by the pancreas when fat is present. The primary role of lipase inhibitors is to decrease the gastrointestinal absorption of fats. Instead of absorbing fats, fats tend to be passed in feces.

Scientific studies have demonstrated a 5% - 15% weight loss when medications are added to a treatment plan, either during a weight plateau or during weight regain. In addition to helping with weight, they can:

- Improve blood sugar levels
- Lower blood pressure
- Improve fasting lipid panels
- Decrease risk factors for heart disease

Conclusion

In summary, weight loss medications are a useful tool in bariatric surgery patients who:

- Have not attained their desired weight loss
- Are at a weight plateau
- Are dealing with weight regain

The sooner the patient consults their bariatrician about chronic obesity medications and how to avoid weight regain or weight plateaus, the sooner their weight loss can begin or continue.

About the Author:

Bharti Shetye (Dr. Abby), MD, FOMA, DABOM, is an internist practicing obesity medicine in St. Petersburg, FL. She is an advocate for the Obesity Action Coalition (OAC) and has visited Capitol Hill to speak with United States legislators about supporting the Treat and Reduce Obesity Act. Her own struggles with weight pushed her to want to help patients and provide them with the necessary resources, support and advocacy they need. She often volunteers for the Obesity Medicine Association (OMA), and in her free time she enjoys exercising and exploring her own healthy lifestyle.
Meet NEW YOU Winner, Craig & His Wife Denise — Lost a Combined 275 lbs!

Craig lost 185 lbs*  Denise lost 90 lbs*

“Once your mind’s set, you can do anything!”  “We did it together — it worked for us!”

The OPTIFAST® program is a medically monitored meal replacement weight-loss program that can help you lose 2x as much weight as a reduced-calorie, food-based diet.**

Learn what the OPTIFAST® program can do for you at optifast.com!

* The success stories of OPTIFAST® New You Contest winners are representative of those individuals only and do not represent all OPTIFAST® patients. OPTIFAST® patients who actively participate in a 26-week program typically lose approximately 30 lbs. and maintain approximately a 25-lb. weight loss at 1 year.** In a separate study, OPTIFAST® patients maintain an average weight loss of approximately 19 lbs. after 2 years and 15 lbs. after 3 years from starting the program.** Ard JD, et al. Obesity. 2018;27:22-29.

** modified version of Diabetes Prevention Program (DPP)
At the end of this year, Plenity (originally called Gelesis 100), a new device that comes in pill (capsule) form, will become available to patients struggling with weight.

Technically, the Food and Drug Administration (FDA) cleared Plenity as a device, but it is actually a pill (capsule) that is taken daily with lunch and dinner to help with weight loss. Through some impressive food engineering, these capsules release thousands of particles that swell and enlarge in the stomach. The particles then mix with food and travel through the intestines, where they increase fullness and help patients lose weight.

What is Plenity and How Does It Work?

Plenity is a new class of weight management options called “super absorbent hydrogels.” Here is how it works:

- The pill is swallowed with meals and contains thousands of small particles that expand up to 100 times when taken with water. It has the firmness of solid food similar to vegetables. Plenity mixes with food in the stomach and travels down the intestines in this enlarged form.

- The pill is able to expand because it absorbs water in the stomach. It is made from just two naturally occurring food-grade substances: cellulose and citric acid. The ingredients that make up this pill are considered “GRAS” by the FDA, which means they are Generally Regarded As Safe because they are derived from food-grade substances. The pill expands in the stomach and stays expanded as it works its way through the first part of the intestines.

- When Plenity reaches the end of the intestines (colon or large intestine), the water is reabsorbed by the intestines. When the intestines reabsorb the water, the particles shrink down to their original small size and get eliminated with the next bowel movement.
How Do You Take Plenity?

Patients should be instructed to take three pills by mouth with lunch and dinner. The pills need to be taken every day, 20-30 minutes before lunch and dinner, and most importantly, with 16 ounces (or two cups) of water. This daily habit of taking three pills twice a day can be challenging, so the company that makes Plenity offers the pill in “pods.” Each of these pods contains three pills that you can easily carry around with you. To make storage easier in different locations, Plenity comes in “tubes” that have a week’s worth of pods and can be carried or kept in different locations.

Is Plenity Right for You?

Plenity is FDA-cleared for patients with excess weight or obesity who are trying to lose weight. Plenity is unique because it is approved for patients with mild or moderate excess weight, and patients do not need to have a medical problem related to their weight (diabetes, high blood pressure, sleep apnea etc.) in order to take it. In other words, Plenity can generally be used safely in anyone who wants to lose weight for various reasons.

When taken just before a meal, Plenity stays in the intestines and does not go into the blood. This way, it does not affect any other organs other than the intestines.

It should also be noted that Plenity is meant to be used with a proper diet and exercise for the best weight loss outcomes:

- Plenity, combined with diet and exercise, may help patients lose an average of 5% - 10% of their total body weight.
- Some patients may be extra responsive to Plenity and lose more weight than others, averaging close to 10% weight loss.
- Those who tend to “respond better” to Plenity are those who lose three percent or more of their weight in the first eight weeks of using it.

Conclusion

Plenity is a breakthrough new weight management option because it uses technology to turn food-grade material into an expanding device. It’s different from other weight loss devices because it moves naturally through the intestines thanks to thousands of small elastic particles with the consistency of food. Plenity mixes with food and takes up more space in the intestines than the meal that was eaten, causing the patient to feel fuller and eat less. Even though they swallow a pill, it stays in the intestines and doesn’t get absorbed into the bloodstream. This makes it safe for long-term use so patients can lose weight and keep it off.

If you had asked me ten years ago whether a food-grade substance could be made to expand 100 times its size in the stomach, then safely pass through the intestines, break down and leave the body naturally, I would not have believed you. That time has come and the science is remarkable.

About the Author:
Ken Fujioka, MD, is currently the Director of Nutrition and Metabolic Research and Obesity Telemedicine at Scripps Clinic in the Department of Diabetes and Endocrine. He has completed more than 150 clinical trials and authored more than 100 peer reviewed papers.
Diets these days can give an “all or nothing” perception. This way of thinking can result in obsessions about what time of day you should be eating and what you should be eating – and that NEVER works. You don’t have to have an “all or nothing” mindset in order to lose weight and succeed at your health goals.

Some Common Scenarios:

1. Joe goes out to eat with friends from work. When he’s “being good,” he has a salad. When he’s “being bad,” he has a double cheeseburger, fries and a shake. He notices that when he only has the salad while all his friends have burgers, he feels deprived and left out. Later, he sometimes goes home and has ice cream. On the other hand, when he eats the cheeseburger, fries and shake, he feels ill and berates himself for eating unhealthy. Either way, he feels distressed around food.

2. This week, Karen is following a clean eating routine. She wants to check it out to see how she feels and explore whether it’s something that she can keep up with. During the next seven days, she jumps in all the way and plans to evaluate her progress at the end of the week.

Do any of these scenarios sound familiar? These are examples of “all or nothing” nutrition, often referred to as black and white thinking. For some, this type of thinking may be helpful. For others, it can ignite a harmful relationship with food.
How All or Nothing Nutrition Can Go Wrong

Where all or nothing nutrition can go wrong is when anything less than “perfect” is perceived as a failure. All or nothing nutrition is commonly seen in people with eating disorders such as bulimia nervosa, binge eating disorder and anorexia nervosa.

This kind of rigid dieting defines food and eating behaviors as either good or bad. Thinking of eating in this way can then extend to defining one’s character in those same terms. Food can be viewed as scary and challenging, causing irrational thoughts. When all or nothing nutrition goes wrong, it can leave you feeling stuck, unhealthy and out of balance. You might even be constantly yo-yo dieting from one extreme to another.

Learning to change these thoughts requires you to start living in shades of gray. Living in the gray area means accepting that eating foods in moderation can be part of a balanced and healthy way of eating. In other words, this way of eating is flexible enough to be sustainable and embrace ambiguity at the same time.

How to Portion Your Meals

I like to call nutrition an art and a science. Portioning meals to include varied food groups allows you to get all of your necessary nutrients. Nutrition components that we include in our body are always changing. As you age and experience activity and environmental changes, it is important to stay in tune with your body and adjust your nutrition along the way.

A rough guide for balancing each meal is to be vegetable-forward. Half of your plate, or more, should be filled with vegetables which offer fiber and plenty of micronutrients. Make the most of your proteins and carbohydrates by choosing quality foods that are fueling. Proteins such as lean meat, poultry, fish, eggs or tofu should take up a little more than a quarter of your plate. Complex carbohydrates include both starchy vegetables and complex grains:

- Spaghetti squash
- Butternut squash
- Sweet potatoes
- Brown rice
- Quinoa

Ideally, carbohydrates should consist of a little less than a quarter of your plate. Add in about a half tablespoon of a healthy fat (avocados, nuts, etc.) and then you will have a balanced meal. From there, you can make adjustments to your meals based upon how often you eat, how hungry or full you are and how much physical activity you get.

Eggplant and Tomato Sauce

This simple and delicious sauce is vegetable and flavor forward. It is great served over a pasta and zoodle mix, but it’s also great as a side dish on its own.

Ingredients:
- 1 medium eggplant (cut in ½-inch cubes)
- 4 cloves garlic (smashed and chopped)
- 2 tablespoons extra virgin olive oil
- 28 oz. canned plum tomatoes, including juice (coarsely chopped)
- Salt and fresh ground pepper
- Chopped basil or parsley (this can be used as garnish and/or for added flavor)

Instructions:
1. Heat oil over medium-high heat in a large deep skillet. Once hot, sauté the garlic in oil.
2. Add eggplant and cook about 3 minutes, until it begins to soften.
3. Add coarsely chopped tomatoes to skillet, along with the juices.
4. Season with salt, pepper and fresh chopped herbs. Enjoy!

All or Nothing continued on page 27
When it comes to LOSING WEIGHT AND KEEPING IT OFF

“We’ve always had the WILL. Now we have another WAY.”

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®
• 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
Managing your weight long term requires more than willpower alone

Saxenda® can help you lose weight and keep it off

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

Ask your health care provider about FDA-approved Saxenda®

Check your prescription coverage at SaxendaCoverage.com

Important Safety Information (cont’d)
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 stomach 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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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® and insulin 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 in children under 18 years of age.

Who should not use Saxenda®?

Do not use Saxenda® if:

• you or any of your family have ever had a type of thyroid cancer called medullary thyroid carcinoma (MTC) 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).
• you have or have had problems with your pancreas, kidneys or liver.

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 liGarlaglude 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 liGarlaglude 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. Saxenda® may harm your unborn baby. Call your healthcare provider if you breastfeed.

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.

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

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

• Serious allergic reactions can happen with 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)
  • fever
  • 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:
  • shakiness
  • weakness
  • hunger
  • sweating
  • feeling jittery
  • dizziness
  • 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.

The most common side effects of Saxenda® include:

• nausea
• diarrhea
• vomiting
• upset stomach
• feeling dizzy
• fast heartbeat
• headache
• confusion
• dizziness
• weakness
• hunger
• sweating
• feeling jittery
• drowsiness
• irritability

Signs and symptoms of low blood sugar may include:

• dizziness
• fast heartbeat
• headache
• confusion
• skin sweats
• shakiness
• weakness
• hunger
• sweating
• feeling dizzy
• nausea
• vomiting
• abdominal pain
• diarrhea
• constipation
• low blood pressure
• cold sweat
• weakness
• numbness
• confusion

Saxenda® can cause severe nausea and vomiting.

• 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®.
• 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.

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.

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

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PATENT Information:

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How to Lean Yourself into an All or Nothing Diet

Some people want to try an all or nothing approach or they want to have some clear guidance with eating. If you’re considering leaning into an all or nothing approach, reflect on these self-evaluating questions that might help you figure out where to begin:

- Is it sustainable? If so, for how long?
- Have you tried something like this before? If so, how well did it go? What went well and what was difficult?
- Are there some foods that could be utilized or adjusted instead of eliminated?
- How different is this from what you’re currently doing? Will switching up your way of eating feel jarring?
- Could you practice some curiosity and take pauses to evaluate this approach?

It’s important to have a balanced nutritional baseline to start out with prior to approaching a strict meal plan. It’s typically difficult to adjust well to a strict meal plan because of the abrupt change in your diet. Once starting at a baseline, consider taking a week to practice a certain change. Evaluate what is sustainable, what is helpful (and what may not be) and then decide on your next steps. Leaning into an all or nothing approach takes a lot of evaluation and consideration.

Conclusion

Having a set plan for nutrition can guide you in your eating habits for a little while, but it also may feel too rigid and can even potentially lead to disordered eating. Perfectionism can throw off even the most logical mind, leading to lots of frustration and barriers with making progress. An all or nothing approach needs to be met with thoughtful consideration. Note that progress takes time and our efforts matter.

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 in-person and virtually all across the country.

Bountiful Bowl with Chicken, Mushrooms and Avocado

I love the color in this bowl and the burst of flavor that comes with it. This basic recipe can be modified to accommodate different nutritional focuses.

Ingredients:

- 1 lb. chicken breast, cut into cubes
- ¼ cup coconut aminos (a gluten-free alternative to soy sauce) or soy sauce
- Salt and pepper to taste
- 1 English cucumber, peeled, deseeded and sliced into matchsticks
- 1 teaspoon Yuzu hot sauce (or a combo of white vinegar, sesame oil and a hot sauce)
- 4 tablespoons mayonnaise
- 3 tablespoons Sriracha, adjusted to desired level of heat
- 3 tablespoons avocado or coconut oil, divided
- 1 lb. riced cauliflower or 3 cups rice (or you can use a combination of both)
- 10 oz. shiitake mushrooms, sliced
- 1 large avocado, sliced
- 1 tablespoon sesame seeds

Instructions:

1. Prep the chicken: Place chicken in a plastic bag with coconut aminos or soy sauce, salt and pepper. Mix until chicken is coated and marinate in the refrigerator for 30 minutes or up to 2 hours.

2. Prep the cucumber slaw: Toss the cucumber matchsticks with Yuzu hot sauce. Set aside, keeping cool.

3. Prep the Sriracha mayonnaise: Mix mayonnaise and Sriracha until completely combined.

4. Heat 1 tablespoon oil in a skillet. Add chicken, then cook until browned and cooked through (about 10 minutes). Use tongs or a spatula to ensure the pieces are cooked on all sides. Set aside.

5. Meanwhile, heat 1 tablespoon oil in a separate skillet. Add cauliflower rice/regular rice and sauté until softened (about 10 minutes). Halfway through, add salt and pepper. Set aside.

6. In the same skillet as the chicken, heat 1 tablespoon oil and add mushrooms. Cook until tender (about 10 minutes). Halfway through, add ground ginger, salt and pepper.

7. Place chicken, mushrooms, cucumber slaw and sliced avocado over cauliflower rice. Drizzle Sriracha mayonnaise and sprinkle sesame seeds on top.
WHAT ARE THE SIX FACTORS TO FIT?

by Robert Kushner, MD; and Nancy Kushner, MSN, RN
Interview by Nancy Kushner, MSN, RN

Wife and co-author, Nancy Kushner, MSN, RN, conducts an interview with her husband, Robert Kushner, MD, about his new self-help Book, *Six Factors to Fit: Weight Loss that Works for You!*

Dr. Kushner is a nationally-renowned obesity medicine physician and is regarded as an expert across the world. He has a distinguished career history of helping patients think differently about their weight. He graciously volunteers at the OAC and is the Co-Chair of the OAC’s Convention Program Committee.

**What Inspired You to Write *Six Factors to Fit Weight Loss that Works for You?***

As a young doctor interested in diet, nutrition and weight control, I learned that I needed to incorporate various treatment approaches if I wanted to help my patients lose weight and keep it off. Merely helping them adjust their carbohydrates, fats or calories just wasn’t enough.

I also needed to become an expert in helping them take control of other lifestyle factors that affected their weight, including:

- Physical activity
- Behavior change
- Stress management
- Sleep

While diet books promising one-size-fits-all solutions to weight loss were popping up everywhere, I took a completely different approach. I was paying attention to the different habits contributing to weight gain that were emerging in my patients, so I began to create treatment plans that met the individual needs of each patient.

Although I am an active clinician and see thousands of patients throughout the Northwestern Medicine Center for Lifestyle Medicine in Chicago, I wanted to share my expertise and experience with those who can’t see me in the Center. Having written this book allows me to change more people’s lives and give new answers to those who struggle with weight and want to get healthier.
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Why Do So Many People Struggle with One-Size-Fits-All Weight Loss Programs?

Most food-focused diet plans can help people lose weight, but because they’re so restrictive and often don’t address other lifestyle and mindset issues, they don’t equip people with tools for when life gets in the way.

When this happens, many people fall back into old habits, thoughts and behavior patterns that led them to gain weight in the first place. The six factors I cover in my book are the top default habits and mindset patterns that people fall back into.

What are the Six Factors?

Through my published research, I identified the following six factors that are major barriers to long-term weight management.

- **“All or Nothing Doer”** is the individual who tends to be a black or white thinker when it comes to trying to lose weight. This person may be “all in” or wonder, “Why bother?”
- **“Easily Enticed Eater”** describes someone who struggles with eating temptations. They may also have an emotional connection with food.
- **“Fast Pacer”** describes someone who feels stressed and struggles with incorporating a healthy lifestyle into a busy life.
- **“Convenient Diner”** is someone who tends to eat out a lot and grabs what is convenient, without much planning ahead.
- **“Exercise Struggler”** is someone who is not physically active at the present time because of health restraints, or they just don’t enjoy it.
- **“Self-Critic”** describes someone who engages in negative self-talk and may have poor body image and low self-esteem. These factors can easily get in the way of managing weight and moving forward in life.

Six Factors to Fit continued on page 30
With Your Book, How Do People Learn to Overcome Their Personal Challenges?

The program I offer in my book starts by having readers take a short Six Factor Quiz that is only 5-10 minutes long and is scientifically validated. The quiz reveals their scores for each of the six factors I described earlier. You can take the quiz online at DrRobertKushner.com/quiz and get your personalized results.

Based on these scores, readers are then given a personalized roadmap to the program that tackles the issues and challenges which are unique to them.

What if Someone is a Picky Eater? Is This a Hard Diet to Follow?

The Six Factors to Fit program is based on solid nutritional principles and is not about diet fads that eliminate entire food groups.

Instead, the program uses the foundations of calorie awareness and portion control to help you visually create a mix of foods that “fuel” you, fill you up and leave you mentally satisfied.

The program also includes nutrition recommendations that are spearheaded by Dawn Jackson Blatner, RDN. Dawn is our esteemed contributor and registered dietitian nutritionist who is nationally acclaimed for her work in nutrition. She is also a returning and beloved speaker at the OAC’s Annual Convention. With Dawn’s advice in this program, you can look forward to using “progressive meal planning” to ease your current diet into a healthier eating pattern.

What if Someone Needs to See Quick Results to Stay Motivated? What Can They Expect from Your Book?

By taking the Six Factor Quiz, you can expect to quickly see which factors have been getting in the way of achieving successful weight loss. Odds are, they are the same problems you may have been hoping other diet plans would help you solve.

You can also expect many “aha” moments as we help you think differently about achieving weight loss success. For example, you’ll learn:

• How one’s desire for the “quick fix” can be a set up for failure
• How to change a self-defeating mindset into a successful mindset

Our goal is to make long-term weight management easier by empowering you with evidence-based strategies that are tailor-made for you and have the best chances of working.

Different from other diet plans, this program has no restrictive phases to “reboot” or “cleanse” your body. These are not needed, and they only divert your attention away from what you need to do in order to adopt healthier habits for long-term success. I recommend a healthy pace of weight loss, which is half a pound to two pounds per week. Consistent weight loss that fits your lifestyle is the best approach to losing weight.

Is Your Book Helpful for Someone Who Has Had Bariatric Surgery?

Following a healthy diet, remaining physically active, and having a positive mindset are important for anyone who wishes to lose weight and keep it off. The lifestyle factors that contributed to your weight gain before surgery do not magically go away after surgery.

Although surgery typically forces a change in dietary habits, many people may still struggle with:

• Choosing healthy foods while on-the-go
• Eating out of boredom or unpleasant emotions
• Making time to fit in exercise

Still, others hold onto perfectionistic or ‘all or nothing’ thinking, or they have self-critical perceptions of their body. These factors may stall weight loss or even contribute to weight regain in the years following bariatric surgery.

In my practice, we have patients take the Six Factor Quiz before and periodically after surgery as a tool for focusing on and treating these personal barriers.

Does Your Website Offer Any Ongoing Support for Those Following the Six Factors to Fit Program?

Yes, it does! We offer up-to-date information through:

• Ongoing blogs
• A monthly Healthy Nudges Newsletter (the option to sign up is at the bottom of each website page)
• News links for my interviews about obesity or “Six Factors to Fit”
• The ability to re-take the Six Factor Quiz periodically
• A contact page where you can ask me a question

Recent blog topics include stress eating and tips for staying healthy at home during the COVID-19 pandemic.

What Was it Like Working with the Academy of Nutrition and Dietetics (AND) as Your Publisher?

They were great partners, as the entire completed manuscript was sent out to weight management experts around the country for peer review. Through this review and our own consultation with experts, all of the book’s information has been vetted by registered dietitian nutritionists, psychologists, physicians and an exercise physiologist. Successful weight loss and maintenance really is a team sport.
Our goal is to make long-term weight management easier by empowering you with evidence-based strategies that are tailor-made for you and have the best chances of working.

What Was it Like Writing a Book with Your Wife?

Birthing this book together has been a labor of love that was years in the making. Nancy, a nurse practitioner and health writer, is more than just my writing partner (this is actually the third book Nancy and I have written together). She is also my life partner (married 43 years!) and dance partner (you may have seen us dancing at the OAC’s Your Weight Matters Conventions). We share a passion for healthy living and helping others.

Nancy has been instrumental in helping to maintain the website as we collaborate on new ideas for blog and social media posts that offer up-to-date help for those who struggle with weight.

Learn More or Get in Contact

If you want to learn more about Dr. Kushner, or read articles that he has contributed, please visit the OAC’s article library, ObesityAction.org/Community/Article-Library. You can also purchase his book on Amazon, Barnes & Noble or Indiebound.

Dr. Kushner can be reached on Twitter (Twitter.com/DrRobertKushner), Facebook (Facebook.com/DrRobertKushner) and LinkedIn (LinkedIn.com/in/RobertKushnerMD). He is always willing to answer your questions and provide the best help that he can.

About the Author:

Dr. Robert Kushner, MD, is the Medical Director of the Center for Lifestyle Medicine at Northwestern Medicine in Chicago; Professor of Medicine at Northwestern University Feinberg School of Medicine; Past President of The Obesity Society; a founder of the American Board of Obesity Medicine which certifies physicians in the care of patients with obesity; and Program Co-Chair of the OAC’s Annual Your Weight Matters Convention & EXPO.

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Time to pack up your flip flops and get ready for the upcoming fun of a new school year! It’s time for school activities, fall sports, and for many, a much busier schedule. This can be a very different schedule than the lazy days of summer. Don’t forget that proper nutrition needs to find a way into your family’s school year plan. Now is a good time to develop a plan that can set your children up for success and fuel them throughout the school day.

We know that good nutrition is a cornerstone for any child’s health, but what are the nutrition basics for a healthy school year? There are several.

- First, ensure you have healthy and nutritious foods available for your kids at meal time. Good food choices include proteins, vegetables or fruit, complex carbohydrates and healthy fats.

- Tasty options are another must. It is important that your kids like their food and will want to eat it.

- Lastly, plan ahead so you have time to choose and prepare healthy foods. That can be difficult with a busy schedule, so let’s come up with a plan.

Serve Energizing Breakfast Brain Foods

Breakfast is the first step in fueling up for the day. Food is fuel, and getting the right mix of nutrients is important to staying awake, focused and energized. Eating breakfast is linked to weight control in kids. Also, kids who eat breakfast are more likely to get all the essential nutrients they need. Meal skipping can lead to a shortage in essential nutrients. Breakfast also helps build a child’s attention span and stay focused in class.

The balance of foods you serve your child is also important. A healthy mix of protein, complex carbohydrates, fruits, veggies and dairy work together to make the ultimate breakfast.

“We all know, food is fuel, and the right mix of all nutrients is imperative for a successful day.”
Components of a Healthy Breakfast

- Protein helps maintain muscle mass and keeps kids full until lunch.
- Complex carbohydrates (like whole-grain toast, low-sugar cereal and oats) fill your child up with fiber and give them enough energy for the day ahead.
- Fruits and vegetables are packed with essential vitamins and minerals.
- Lastly, dairy foods like milk and yogurt provide the calcium your kids need.

All of these foods may seem like a lot for a meal at breakfast, but you can vary your choices each day to get a variety of nutrients and flavor.

Sometimes, eating a healthy breakfast can be challenging in a world of sugary pastries and pancakes with syrup. Although tempting, breakfasts like these are not the healthiest option. I've included some healthy breakfast ideas in this article that will start the day off right.

Healthy Breakfast Ideas:

- Whole grain cereal and milk with sliced bananas
- Scrambled eggs with cheese and veggies
- Oatmeal with milk and berries
- Whole grain bagel with turkey and cheese
- Whole grain toast with peanut butter
- Turkey sausage and oranges
- Yogurt with granola and fruit
- Whole grain waffle with low-fat cream cheese and strawberries

Peanut Butter Banana Smoothie

Source: AllRecipes.com

Serves 4

Mornings can sometimes be hectic. Instead of skipping breakfast, how about making a smoothie for your kids to drink on their way out the door?

Ingredients:

- 2 bananas broken in chunks
- 2 cups milk
- ½ cup peanut butter
- 2 tablespoons honey
- 2 cups ice cubes

Directions:

1. Place ingredients in blender and blend for 30 seconds.

Time for a Quick Snack

Sports practices and evening events can sometimes lead to late dinners. In these scenarios, planning healthy snacks for your child may be necessary. A healthy snack should have a good mix of protein, complex carbohydrates and healthy fats to keep your child fueled until their next meal. Fruits, vegetables, lean proteins, whole grains and low-fat dairy can all be great options.

After School Snack Mix

Source: LifeMadeSimpleBakes.com

Ingredients:

- 1 cup corn cereal (like Chex or Crispix)
- 1 ½ cups cheese crackers (Cheez-Its or Goldfish)
- 1 ½ cups regular or peanut butter-filled pretzels
- ½ cup lightly salted or roasted peanuts
- ½ cup lightly salted or roasted almonds
- ½ cup raisins or yogurt-covered raisins
- ½ cup M&M candies

Directions:

1. Toss ingredients together in a large mixing bowl.
2. Portion into individual servings or store in a large airtight container for up to 3 weeks.
Next Up… Add a Healthy Lunch

A great lunch can keep your child’s energy levels up throughout the day so they can stay focused through the afternoon. However, packing a healthy lunch can sometimes be a challenge. The best way to ensure your kids will eat their lunch is to get them involved with choosing what goes in their lunchbox.

First, it’s important to know that a balanced school lunch can set your kids up for success. Multiple studies show that when kids eat a healthy lunch, they are better able to focus and maintain energy throughout the day. Some studies even show improved test scores. Additionally, with the rise in childhood obesity rates, a healthy lunch plays a big impact on a child’s long term health.

First Step to a Healthy Lunch:

Make sure you have the necessities: a great lunch box, a thermos and food storage containers. If your child gets a new water bottle, they are more likely to fill it with water and skip the fruit punch. The right variety of containers will also help you pack the foods you need. For instance, if you want to pack a salad, you can find different containers to make all the salad ingredients fit perfectly. Spending a few extra dollars on food storage containers can make packing a healthy lunch so much easier.

Beyond the Basics

We all know about sandwiches, fruit and yogurt, but what are other options that can help your kids eat healthy? Add one or two of the below foods to your lunch box:

- **Build Your Own**: Put together whole grain crackers, pepperoni and cheddar cheese to create a mini sandwich.
- **Sensational Salads**: Try a lettuce-based salad with grilled meat or whole grain pasta salad with chicken.
- **Keeping it Warm**: Fill a thermos with chili, soup or last night’s dinner.
- **Meatless Miracles**: Try pairing cottage cheese and fruit, peanut butter with crackers, or just do a simple whole grain cheese quesadilla.

Powerhouse Sides

Adding sensible sides to any meal will give it more taste and make it more filling. These sides can work with any main entrée. Let your kids choose!

- Edamame
- Baked chips
- Almonds
- Peppers and hummus
- Sliced cucumbers and dip
- Side salad
- Low-fat yogurt
- Banana
- Graham crackers
- Applesauce with no added sugar
- Walnuts
- Strawberries
- Blueberries
- Pears
- Cottage cheese
- Whole grain crackers
- Pretzels
- Popcorn
- Pasta salad
- Avocado slices
- Raspberries
- Dried fruit
- Animal crackers
- Last night’s veggies

A healthy snack should have a good mix of protein, complex carbohydrates and healthy fats to keep your child fueled until their next meal.
Putting It All Together

Nutritious food doesn’t just happen. There are several factors you should consider in planning for success. How do you make all these factors come together? It takes time and planning, but a little leg work earlier on can make the following days of the week easier.

- **Use a calendar:** Put your child’s school year activities on a calendar to determine what your days look like. Which nights are busy sports nights? What would be a good night for a family dinner? Find a mix of several different quick and easy options.

- **Set yourself up for success:** Pre-pack school lunches the evening before. Ask your kids to help choose foods and pack their own lunch. Set out easy breakfast options on the table the night before for a grab-and-go meal.

- **Weekend preparation:** Use extra time on the weekend to plan meals ahead and pre-cook some of your choices. Pre-cut fruits and veggies and individually package them to make mealtime easy. Take time to shop for what you need during the weekend.

- **Get your kids involved:** Ask your kids what they prefer. Many times, they can come up with ideas for foods they will actually eat. Without asking them, you may never know that they are throwing away that baggie of chopped vegetables every day!

In the End

Set your sites high for your family this upcoming school year, but remember that progress is important. Don’t feel like you have to be perfect. Strive for small steps of progress. Just swapping an apple for a cookie is a great place to start. Here’s to a fun and nutritious school year!

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, working with both bariatric and metabolic surgery patients as well as medical weight loss patients. Throughout her career, she has worked in several bariatric centers in Indianapolis and is currently the Bariatric Coordinator with Community Health Network. Sarah is an active member of the Obesity Action Coalition (OAC) and frequently contributes to OAC’s Weight Matters Magazine and Your Weight Matters Blog. She also plays an active role in the Indiana State Chapter of the American Society for Metabolic and Bariatric Surgery (ASMBS).

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Metabolic syndrome is an obesity-related condition that is commonly overlooked by healthcare providers. Because of this, those who have metabolic syndrome might not even know about it.

**What is Metabolic Syndrome?**
Metabolic syndrome is a group of weight-related health conditions (high blood pressure, high blood sugar, excess body fat, high cholesterol levels) that increase your risk for:

- Type 2 diabetes
- Heart disease
- Certain types of cancers (liver, bladder, colon, etc.)

**Why is Metabolic Syndrome Dangerous?**
Metabolic Syndrome has been called the ‘new silent killer’ by scientists when comparing it to the high blood pressure crisis of the 1970s. Up to one-third of the global population has metabolic syndrome and it is often overlooked in clinical settings. Healthcare providers usually evaluate each risk factor individually.

Obesity, high blood pressure and type 2 diabetes all cause significant damage to the body. All together, they are an extremely dangerous combination. Since it is generally under-screened and underdiagnosed, many people are unaware that they have metabolic syndrome – nor are they informed of the long-term negative health consequences of having it. The first step toward overall wellbeing and managing metabolic syndrome is to inform yourself about how it can affect your body and understand the potential negative effects on your health.

**How Common is Metabolic Syndrome?**
Approximately 32% of the U.S. population has metabolic syndrome. The prevalence of metabolic syndrome increases to approximately 60% - 75% in people with obesity and 85% in people with a chronic disease such as type 2 diabetes. The prevalence of metabolic syndrome also increases with age, with 40% of people affected being over the age of 60.

**Complications Associated with Metabolic Syndrome**

- Type 2 Diabetes
- Heart Disease
- Cancer
- High Blood Pressure
- High Blood Sugar
- High Cholesterol

Weight loss and intensive lifestyle behavioral therapy are effective treatments in curbing the onset of metabolic syndrome.
How is Metabolic Syndrome Diagnosed?

Metabolic syndrome is diagnosed after a physical exam and several blood tests that screen for blood sugar, cholesterol and triglyceride levels.

Particularly, a diagnosis of metabolic syndrome is made if a person has three or more of the following risk factors:

- Abdominal obesity (excess weight around the belly), defined as a waist circumference of greater than 40 inches in males and greater than 35 inches in females
- Triglyceride levels of 150 mg/dL or above. These are types of fat found in your blood.
- HDL (good) cholesterol (40 mg/dL or lower in males; 50 mg/dL or lower in females), which helps remove other forms of cholesterol from the bloodstream
- Blood pressure of 130/85 mm HG or greater
- Fasting blood glucose levels of 100 mg/dL or above, which measure how much glucose is in a blood sample after an overnight fast

Who is at Risk?

People with one or more of the following characteristics have been shown to have an increased risk of developing metabolic syndrome:

- Obesity
- Type 2 diabetes or a family history of type 2 diabetes
- Tobacco smokers
- Chronic drug or alcohol abuse
- Females with a history of polycystic ovarian syndrome (PCOS)
- Mental health conditions such as bipolar disorder and depression

What Are Some Complications Associated with Metabolic Syndrome?

Once someone develops metabolic syndrome, there are many problems that can follow. Metabolic syndrome doubles the risk of developing blood vessel and heart disease, which can then lead to heart attacks and strokes. Additionally, people with metabolic syndrome also have an increased risk of developing type 2 diabetes which is associated with complications of the eyes, nerves and kidneys.

How Can You Combat Metabolic Syndrome?

Many obesity-related chronic diseases, such as metabolic syndrome, share similar underlying causes. This makes them preventable and, in many instances, reversible through intensive lifestyle behavioral changes such as weight loss and diet.

In a study published in 2019 in the Journal of Public Health, researchers found that approximately one in two patients with obesity who attended a non-surgical medical weight management program had metabolic syndrome. Weight loss and intensive lifestyle behavioral therapy are effective treatments in curbing the onset of metabolic syndrome. In fact, the results of the study found that the prevalence of metabolic syndrome was reduced by about 45% in the first three months of program participation and by 73% in one year. Weight loss was associated with improvements in waist circumference, triglyceride levels, HDL cholesterol levels and blood pressure at 52 weeks.

Your Healthcare Provider Can Help!

Your healthcare provider can develop a treatment plan that is unique to your needs and based on your individual risk factors. If possible, seek help from an obesity medicine specialist or enroll in a medically supervised weight management program that offers evidence-based strategies. The goal of treatment for metabolic syndrome will focus on reducing or eliminating underlying problems such as obesity and limited physical activity. It is important to recognize that metabolic syndrome can be prevented or reversed through proper lifestyle changes and choices, including:

- Regular exercise
- Weight loss
- Healthy and balanced eating

Take charge of your health and speak with your healthcare provider about metabolic syndrome.

About the Author:
Macklin E. Guzmán, DHSc, MPH, is the Chief Science Officer at Medi-Weightloss*. Dr. Guzmán is an epidemiologist, clinical scientist and global health expert with professional and research experience in infectious and chronic disease epidemiology, public health, and clinical research.
While exercise is beneficial for your mind and body, it is also important to recognize the potential risks of exercising while on certain medications.

Talk to Your Healthcare Provider

When talking about mixing exercise with medication, patients are commonly advised to speak with their healthcare provider before engaging in any new exercise regimen. While often heard, this statement carries a lot of weight. By informing your healthcare provider about your exercise routine, they can determine if you require additional testing. This assessment is based on your current level of physical activity and any medical conditions such as:

- Heart disease
- Lung disease
- Kidney disease
- Diabetes

A medical evaluation from your healthcare provider is key in preventing any risks associated with exercise such as injury, heart attack, or in severe cases – death. Overall, there are many strong benefits of exercise and physical activity, so having this conversation with your healthcare provider is essential.

Disclaimer: Please speak with your healthcare provider before beginning any new exercise regimen.
Do these two symptoms sound like you?

Extreme weight gain early in life?

Hyperphagia, or insatiable hunger?

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

To learn more and receive updates, visit LEADforRareObesity.com.
Being Mindful of Medications

There are some common medications to be aware of when considering exercise and the potential risks and benefits they may pose.

**Beta-blockers (i.e. Metoprolol, Atenolol)**

Beta-blockers are a common class of medications used for a range of medical conditions, including high blood pressure. They can decrease heart rate and blood pressure, both at rest and with physical movement. Exercise should not be limited by beta-blocker use unless symptoms become apparent such as lightheadedness or dizziness caused by low blood pressure. Other side effects of beta-blockers may include:

- Slow heart rate
- Fatigue
- Weight gain

**Angiotensin-Converting Enzyme Inhibitors or “ACE-Inhibitors” (i.e. Lisinopril, Enalapril) and Angiotensin II Receptor Blockers or “ARBs” (i.e. Losartan, Valsartan)**

These medications can be used to treat a range of conditions including heart failure, diabetes, high blood pressure and kidney disease. This class of medications can decrease blood pressure without affecting the heart rate. They can help increase exercise capacity in those with and without heart failure. However, they can also pose a risk of low blood pressure. Other side effects may include:

- Cough
- Dizziness
- Kidney injury

**Antilipemic Agents (i.e. Atorvastatin)**

These medications help treat high cholesterol and ultimately help improve cardiovascular function. On the other hand, they can pose a risk of fatigue and therefore reduced exercise tolerance.

**Anticoagulants (blood thinners)**

Blood thinners are commonly used to treat patients who suffer from blood clots or conditions that may predispose them to blood clots. This class of medication has not shown a negative impact on exercise capacity. However, it is important that you know why you are on this medication in the first place.

For example, if you have been diagnosed with Acute DVT (Deep Vein Thrombosis), it is likely that you have been prescribed this medication. In this scenario, it is not recommended that you start with high-intensity exercise training.

**Bronchodilators**

Individuals suffering from Asthma may be on bronchodilators, known as “Beta-2-agonists” (i.e. Albuterol), to help with symptoms like shortness of breath. These medications can be useful in those suffering from Exercise-Induced Asthma (EIA). Symptoms may include shortness of breath or cough, particularly after the first few minutes of exercise.

It is recommended to use a Beta-2-agonist prior to exercise to prevent symptoms of EIA. Side effects may include a fast heart rate and heart palpitations.

**Sulfonylureas (i.e., Glipizide) and Insulins**

There are a wide range of medications that treat diabetes. Some of the most concerning medications may be Sulfonylureas (i.e., Glipizide) and Insulins, as they can cause very low blood sugar levels. Symptoms of low blood sugar may include:

- Weakness
- Dizziness
- Sweating
- Heart palpitations

It is recommended that individuals avoid intensive exercise at least two to four hours prior to taking a sulfonylurea. Insulins should generally be administered with meals.

Furthermore, it is important to note that these two classes of medication can contribute to weight gain. To reduce your risks of exercise, it is important that you have a conversation with your healthcare provider regarding your current medications.

**The Safe Amount of Exercise**

In deciding how much exercise is too much and how much is too little, one of the best questions to ask is, “How do I measure my exercise intensity?”

Fortunately, there are many ways to measure exercise intensity. This is known as your perceived level of exertion or how hard you are working.

**The Talk-Test**

A tactic that is widely used across healthcare is the “talk-test.” The talk-test is a way to gauge one’s exercise intensity through conversation. Simply put, if you can talk but not sing while exercising, then your exercise intensity is moderate. If you cannot talk or sing while exercising, then your exercise intensity is vigorous.
The Rating System

Another helpful alternative for assessing exercise intensity is the subjective rating system, which is scored on a level of 0-10. A level 0 indicates a very light intensity and a level 10 indicates maximum intensity. Using generalized criteria, this is what all scores indicate:

- Score of 0-2: indicates a very light to moderately-light intensity
- Score of 3-6: indicates moderate intensity
- Score of 7-10: indicates vigorous intensity nearing maximal effort

Warming up and Cooling Down

To reduce your risk of harm or injury while exercising, there are important components that you should implement. Two of them are “warming up” and “cooling down,” which prepare your body for a workout and bring it back to its resting state once you are done exercising.

Cooling down after your workout typically includes walking or stretching. Examples of warming up include:

- Walking
- Slow jogging
- Lunges
- Squats
- Arm circles
- Stretching
- Butt kicks
- Yoga
- Jumping jacks

Conclusion

At the end of the day, there are almost always steps you can take to exercise safely. Some of these steps include monitoring your intensity level while exercising and following proper guidelines for warming up and cooling down.

If you are unsure about how your specific medication(s) may be impacting your ability to exercise safely, please consult your healthcare provider.

About the Authors:
Darshan Suthar, DO, is board-certified by the American Board of Internal Medicine. He has experience as a Hospitalist in the San Francisco Bay Area and is currently a fellow of the Clinical Nutrition & Weight Management Fellowship at Geisinger Medical Center in Danville, PA.

Scott T. Jamieson, MS, is the Metabolic Phenotyping Laboratory Manager for Geisinger Medical Center, Center for Nutrition & Weight Management, and the Obesity Institute. Dr. Jamieson holds degrees in Exercise Physiology from East Stroudsburg University and The University of Akron, and is board-certified by the American College of Sports Medicine.
These days, you can pretty much snap your fingers and get anything you want in an instant! The food industry has exploded with meal delivery services that top the charts by accommodating just about anyone. Thanks to heightened meal kits and ready-to-heat delivery services, you now have multiple options to keep your meals nutritious and delicious.

**MEAL KIT DELIVERY SERVICES**

Meal kit delivery services offer a box delivery to your door with each individual ingredient and recipes to prepare and cook at home. Some of the most commonly used meal kit delivery services include:

- Blue Apron
- Hello Fresh
- Sun Basket
- Dinnerly
- EveryPlate
- Gobble
- Home Chef
**BENEFITS**

Meal kit delivery services can be great for everyone – not only because they are healthy, but also because they can serve a short-term purpose in many people’s lives.

One of the reasons someone might not eat healthy is because they lack the opportunity to meal prep or grocery shop. With meal kit delivery services, you don’t have to do either! You get the fun of cooking without the hassle of having to go to the store and buy all the ingredients yourself.

Here are some other benefits to using meal kits:

- They are easily applicable to all experience levels
- They can include a variety of food groups
- They can accommodate various healthy eating and food preferences

Meal kit delivery services are like cooking labs! They show you how to cook and prepare a meal, and then you can keep the recipe for future use. In addition, having a pre-portioned meal plan at home can help break the behavior chain of leaving work tired and passing the fast food drive thru that results in eating fried food, sweets and supersized portions!

**FULLY-PREPARED MEAL KIT SERVICES**

Ready-to-eat meal delivery services offer pre-prepped meals that are fresh and ready to be eaten, able to be kept in your fridge or stored in the freezer to be warmed up later. Some common examples of fully-prepared services include:

- Clean Eatz
- Freshly
- Veestro
- Trifecta

These boxed-up meals make great healthy alternatives for those who frequently fall into bad habits like skipping meals, making meals out of vending machine snacks, or dining with many courses and large portions. Ready-to-eat options offer a wide range of meal plan options for a variety of dietary needs.

**HELPFUL TIPS FOR NAVIGATING MEAL KIT DELIVERY SERVICES**

As great as meal kit delivery services are, there is always a risk of spending too much money or straying away from the healthy options. Here are some tips that can help you pick the perfect meal:

- Use caution when eliminating specific food groups and choosing trendy meal plans without expert guidance from a Registered Dietitian Nutritionist (RDN). For example, individuals training for a marathon, diagnosed with diabetes, pregnant, or aiming to lose weight, are all going to require very different eating plans.

- Don’t overkill with delivery. Three meals a day, seven days a week is a bit much to rely on to keep you healthy! You can adhere to a budget while enhancing those meal planning skills if you prepare a few meals on your own.

- Aim for balanced food groups with a “classic” dish (protein, vegetable or fruit, grain, and healthy fat).

- Look for buzz words including “grilled,” “broiled” or “steamed,” meaning the food is cooked with less fat. Also, avoid dishes with descriptions such as “fried,” “breaded,” “smothered,” “alfredo” or “rich and creamy.”
Delivery Meals continued from page 45

- Hold the salt! Salt plays a significant role in food preservation. Therefore, there is no need to add additional salt to these meals. If you find that your meal needs a little more flavor, choose fresh or dry herbs or seasoning powder.

- Transfer your meal to a plate with a size range of six inches. This will help you to get a feel for what a pre-portioned meal looks like on a standard plate size while practicing portion control in any setting.

- Include a variety of colorful vegetables, legumes and whole grains in your meals, including colors like dark green, purple, red and orange.

- Go “lean” when choosing protein. Opt for skinless and boneless poultry, beef that is 90% or more lean, pork “loin” or pork “round,” seafood, soy, low-fat or 2% milk-based cheeses, beans, peas, lentils, bison, deer, eggs and egg whites.

- Choose low-fat dairy including milk, yogurt, cheese and/or fortified soy beverages.

- Eat smart at the table without distractions. Eating with distractions, such as watching the television, can lead to mindless eating habits that are hard to break.

- Avoid empty calories with added sauces, dressings and desserts.

CONCLUSION

Developing and maintaining a healthy lifestyle is constant work, especially in the fast-paced world that we live in today. Delivery meals are a great way to help you maintain a healthy lifestyle by allowing extra time for physical activity, good sleep habits, and more time with family and friends. Added stress can put a huge burden on your health, so welcome those meals to your door and enjoy your stress-free meal at the table!

About the Author:
Farrah Wigand, RDN, LD, CSOWM, has been a Registered Dietitian Nutritionist and Licensed Dietitian since 2003. She obtained her Bachelor of Science degree in Nutrition from the University of Kentucky and completed her dietetic internship at Spalding University in Louisville, Kentucky. Farrah is also an active member of the Obesity Action Coalition (OAC) Community. Her weight management specialty allows her to share personal experiences with weight and can actively demonstrate how to overcome it.
Lomaira is a low dose (8mg) of phentermine HCl, taken 30 minutes before meals.

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.

*Data on file KVK Tech, Inc. Newtown., PA
FEEL GOOD ABOUT GREAT TASTE

30g PROTEIN
160 CALORIES / 1g SUGAR

Premier Protein

Premier Protein

Premier Protein

Premier Protein

Caramel
Chocolate
Café Latte
Vanilla

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