

Welcome to StepUP!

We are excited that you have decided to reclaim control of your life and health and look forward to partnering with you to get your weight under control.

SOME THINGS TO KNOW:

1. StepUP recommends regular visits

Accountability starts with regular visits, which is critical for us to safely prescribe medications and monitor your progress as you lose weight. As you progress through the program, we may need to see you more often if you hit plateaus in your weight loss. We may try new strategies to get you going again.

2. Your health insurance may cover the cost of StepUP

We will bill any insurance you have just as we would with any other medical issue. We will, however, be accurate in all our billing processes by including codes for obesity. Please be aware that some insurance denies coverage for obesity treatment, and you would then be responsible for the cost of the visits (approximately \$112-\$158 per visit), not including any lab work that may be necessary). You may be able to clarify whether you have coverage by calling your health insurer before you start the program.

3. StepUP involves using prescription medications

You may be prescribed medications to help you lose weight. Some of the medications we use are not FDA-approved for this purpose. However, all medications we use are frequently prescribed by doctors for weight loss, and we will always advise you of any risks involved with using any medications we prescribe to you. The costs of these medications may be covered by your insurance, but we cannot guarantee that. Because we are using them for non-FDA approved reasons your insurer may decline to cover them, and we cannot change that.

4. StepUP can help with your blood sugar, cholesterol, and blood pressure

Our diet will help you achieve beneficial health goals but is not intended to replace advice given by your doctor. If you are unsure of whether the StepUP diet can be helpful or safe for you, please discuss this with your doctor. Rapid weight loss rarely can result in the development of gallstones or vitamin deficiencies, so please keep us informed of any new symptoms as we progress through the program.

StepUP Dietary Plan Eligibility Criteria

Here are the criteria for you to be eligible for our dietary plan.

CRITERIA:

1. Age

You must be 18 or older.

2. Weight

You must have a Body Mass Index (BMI) of 30 or greater, or a BMI of 27 or greater if you also have any obesity-related illnesses such as diabetes, high blood pressure, high cholesterol, sleep apnea, or arthritis.

3. Health

You must have controlled and stable health conditions.

If you have any other illnesses, they should be stabilized prior to consulting one of our providers. For instance, if your diabetes is out of control, or your blood pressure is poorly controlled, please consult with your primary care doctor for their advice prior to coming to see us.

Personal Goals

Calories per day: _____

Initial BMI: _____

Initial Weight: _____

Goal Weight: _____

Personal Goals:

1) _____

2) _____

3) _____

Apps to use:

MyFitnessPal

CalorieKing

Lose It!

BMI Chart

BMI	Normal		Overweight					Obese				
	19	24	25	26	27	28	29	30	35	40	45	50
Height	Weight in pounds											
4'10"	91	115	119	124	129	134	138	143	167	191	215	239
4'11"	94	119	124	128	133	138	143	148	173	198	222	247
5'0"	97	123	128	133	138	143	148	153	179	204	230	255
5'1"	100	127	132	137	143	148	153	158	185	211	238	264
5'2"	104	131	136	142	147	153	158	164	191	218	246	273
5'3"	107	135	141	146	152	158	163	169	197	225	254	282
5'4"	110	140	145	151	157	163	169	174	204	232	262	291
5'5"	114	144	150	156	162	168	174	180	210	240	270	300
5'6"	118	148	155	161	167	173	179	186	216	247	278	309
5'7"	121	153	159	166	172	178	185	191	223	255	287	319
5'8"	125	158	164	171	177	184	190	197	230	262	295	328
5'9"	128	162	169	176	182	189	196	203	236	270	304	338
5'10"	132	167	174	181	188	195	202	209	243	278	313	348
5'11"	136	172	179	186	193	200	208	215	250	286	322	358
6'0"	140	177	184	191	199	206	213	221	258	294	331	368
6'1"	144	182	189	197	204	212	219	227	265	302	340	378
6'2"	148	186	194	202	210	218	225	233	272	311	350	389
6'3"	152	192	200	208	216	224	232	240	279	319	359	399
6'4"	156	197	205	213	221	230	238	246	287	328	369	410

Source: National Institutes of Health, 1998

*Asians with a BMI of 23 or higher may have an increased risk of health problems.

EXAMPLES of DIET OPTIONS

Atkins Diet

A Low-carb diet essentially designed to help control insulin levels and help the body utilize stored fats for energy. Focused on higher amounts of protein and fat with every meal.

Zone Diet

40% carbs (unrefined), 30% fat, 30% protein with each meal. Nutritional balance for weight loss and body weight control.

Ketogenic Diet

Reducing carbs and increasing healthy fats with each meal, allows the body to burn fat for energy. Healthy fats consist of avocados, oily fish, olive oil, nuts, and coconuts. Used for years to aid in the treatment of epilepsy and other neurologic conditions. Avoid in type 1 diabetics due to ketoacidosis side effects.

Mediterranean Diet

Lots of plant foods, fresh fruits as desserts, beans, nuts, whole grains, seeds, and olive oil as the main sources of dietary fats. Cheese and yogurt are the main dairy foods. The diet also includes moderate amounts of fish and poultry, up to about four eggs per week, small amounts of red meat, and low to moderate amounts of wine. Most studied/researched diet, proven to lower disease risk and improve quality of life.

Whole30 Diet

Think of it as a short-term nutrition reset. No calorie counting or calorie restrictions. The goal is to strip away potentially harmful and inflammatory foods from the diet. To improve metabolism, remove cravings, heal the digestive tract, balance the immune system, and improve sleep, mood, and many medical conditions.

Paleo Diet

Resembles the paleolithic diet (>10,000yrs ago) including lean meats, fish, fruits, vegetables, nuts, and seeds (foods that could be obtained by hunting and gathering). There may be a mismatch in the early body's metabolism compared to the modern diet that includes foods that can be farmed (including dairy and legumes).

Weight Watchers Diet

Focuses on weight loss through a point-based system with network support and accountability. Points depend on fat, sugar, and protein. The higher the protein content, the lower the points gained. The higher the fat and sugar content, the more points that food has, and the less you can eat. The points encourage members to change their dietary habits, to eat more fruits, vegetables, and lean protein, and less fatty, sugary foods.

Vegetarian Diet

(most) do not consume animal-based foods except dairy, eggs, and honey

Vegan Diet

no consumption of any animal-based foods

HEALTHY EATING PLATE

Use healthy oils (like olive and canola oil) for cooking, on salad, and at the table. Limit butter. Avoid trans fat.



The more veggies – and the greater the variety – the better. Potatoes and French fries don't count.

Eat plenty of fruits of all colors.



STAY ACTIVE!

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Harvard T.H. Chan School of Public Health
The Nutrition Source
www.hsph.harvard.edu/nutritionsource



Drink water, tea, or coffee (with little or no sugar). Limit milk/dairy (1-2 servings/day) and juice (1 small glass/day). Avoid sugary drinks.

Eat a variety of whole grains (like whole-wheat bread, whole-grain pasta, and brown rice). Limit refined grains (like white rice and white bread).

Choose fish, poultry, beans, and nuts; limit red meat and cheese; avoid bacon, cold cuts, and other processed meats.

Harvard Medical School
Harvard Health Publications
www.health.harvard.edu



GENERAL NUTRITION RECOMMENDATIONS

FOODS TO CONSUME

VEGETABLES: lettuce, spinach, kale, broccoli, carrots, asparagus, celery, cucumber, cauliflower, zucchini, green beans, peppers, mushrooms, onions, brussel sprouts

FRUITS: strawberries, raspberries, blackberries, apples, pears, grapefruit, watermelon, kiwis, lemons/limes

BEANS: lentils, black beans, kidney beans, chickpeas/garbanzo beans

NUTS/SEEDS: almonds, walnuts, flax/hemp/pumpkin seeds

WHOLE GRAINS: 100% whole-wheat bread, steel-cut oats, whole-grain pasta, brown rice, whole-grain cereal

PROTEIN: lean poultry, fish, beans, seeds, nuts, soy products (*recommend 5.5oz/day*)

HEALTHY FATS: (*monounsaturated or polyunsaturated*) avocados, fatty fish, nuts, seeds, nut butters, olive/canola/sesame/peanut oil

FOODS TO LIMIT/AVOID

RED & PROCESSED MEATS: sausage, hot dogs, bacon

STARCHY VEGETABLES: white potatoes, corn, green peas, butternut/acorn squash

HIGH SUGAR FRUITS: grapes, bananas, mangos, pineapples, cherries, dry fruits (raisins/apricots)

REFINED GRAINS: white bread, white rice, sweetened cereals

PROCESSED FOODS: pre-packaged snack foods, frozen meals, instant soups

UNHEALTHY FATS:

Saturated Fats - meats, egg yolks, butter, cheese, full-fat milk products

Trans Fats - partially hydrogenated oils found in fast foods, packaged foods-cookies/baked goods, shortenings

ADDED SUGARS: sugar-sweetened drinks, including sodas, teas, juices, sports drinks

SALT: limit to 1500-2300 mg/day

ALCOHOL: not drinking is the healthiest choice. If you choose to drink, limit to 1/day for females, 2/day for males

TIPS:

- ❖ Make fruits and vegetables a part of each meal
- ❖ Use a smaller plate for meals
- ❖ Add more colorful (non-white) foods to meals
- ❖ Keep healthy snacks readily available - raw vegetables, fruits, nuts
- ❖ Avoid using food as a reward

**Be mindful of food triggers, including where/when/how often/emotions*

À la Carte Meal Plan

BREAKFAST

**fiber and protein*

Home Choices: (lowest to highest in calories)

- 1/2 cup berries (40)
- Toast, wheat, 1 slice (65)
- Egg, 1, (70)
- 1 cup skim milk (80), plain soy milk (100)
- 1 medium banana, apple, or pear (100)
- Yogurt, 1 cup, plain or greek (120)
- 1 cup plain cooked oatmeal (150)
- Cereal, 1 cup: Cheerios or Rice Chex (100), Special K (120), Kix (132), Kashi Go Lean Original (140), Honey Bunches of Oats or Life (160)
- Protein bar (150-250)
- Protein shake/smoothie (150-250)

Toppings:

- Cream Cheese, 1 TBSP (35)
- Peanut Butter, 1 TBSP (100) ***PB2, 2 TBSP (45)**
- Butter, 1 TBSP (100)
- All-Fruit Spread, 1 TBSP (30)

LUNCH

**biggest meal of the day*

Proteins (Meat/Fish):

- Ham, beef, turkey, chicken, deli-sliced, 2 oz=2 slices (90)
- Tuna, light canned, 1 cup (180), Tilapia, 6 oz (200)
- Chicken, 1 cup diced (230), 1 whole breast (280)
- Salmon, 6 oz (350)

Sides and Others:

- Salad, plain, (w/o dressing or croutons) (25)
- 1 cup broccoli, carrots, green beans, yellow/zucchini squash (~50)
- Wheat Bread, 1 slice (65)
- Egg, 1, (70)
- Cheese, string - 1 stick (80), Cheddar cheese 1/2 cup diced (265)
- 1 medium banana, apple, or pear (100)
- Avocado, 1/2 cup (116)
- Beans, 1/2 cup (100)
- 1/2 cup rice, white or brown (100)
- 1 sweet potato, size 2"x5", (100), 1 white potato, 2"x5" (145)
- Cottage Cheese, low-fat 2%, 1 cup (200)
- Nuts, 1/4 cup whole (170-200)
- Sandwich- 2oz meat, 1 slice- bread and cheese, lettuce, tomato, 1T L mayo (300)

***2 bread sources per day (100 cal sandwich rounds)**

Toppings:

Freebies: lettuce, tomato, onion, mushrooms, bean sprouts

- 2 TBSP Light Italian (50), 2 TBSP Light Ranch (60), 2 TBSP Light Mayo (85)
- 1/2 cup croutons (60-80), 1 slice swiss or cheddar cheese (100)

***Lettuce wraps**

***Mason jar salad**

DINNER

****2 hours before bed/ no white foods***

Proteins (Meat/Fish):

- Ham, beef, turkey, chicken, deli-sliced, 2 oz=2 slices (90)
- Tuna, light canned, 1 cup (180)
- Tilapia, Flounder/Sole, Cod, Halibut 6 oz (150-200)
- Ground Beef (95% lean) 4oz (185), Ground Turkey (*breast, lean) 4oz (130)
- Pork Tenderloin 4 oz (190)
- Beef tenderloin, filet mignon, 4 oz (202), Beef sirloin, 4 oz (212)
- Chicken, 1 cup diced (230), 1 whole breast (280), chicken breast 3 oz (140)
- Salmon, 6 oz (350)

Sides:

- Salad, plain, (w/o dressing or croutons) (25)
- 1 cup broccoli, carrots, green beans, yellow/zucchini squash (~50)
- 1/2 cup corn, or 1 corn-on-cob (65)
- Wheat Bread, 1 slice (65)
- Cheese, string - 1 stick (80), Cheese, cheddar, 1/2 cup diced (265)
- Beans, 1/2 cup (100)
- 1/2 cup rice, white or brown (100)
- 1 sweet potato, size 2"x5", (100), 1 white potato, 2"x5" (145)

Toppings:

Freebies: lettuce, tomato, onion, mushrooms, bean sprouts

- 2 TBSP Light Italian (50), 2 TBSP Light Ranch (60), 2 TBSP Light Mayo (85)
- 1/2 cup croutons (60-80)
- 1 slice Swiss or cheddar cheese (100)

***Supper = Supplemental meal**

SNACKS

***1-2 snacks per day
(100-150 cal)**

Savory Treats:

Freebies: raw carrots, celery, cherry tomatoes, mushrooms, broccoli

- Popcorn, air-popped, 1 cup (31)
- 1/2 cup berries (40)
- Rice Cake (50)
- Cheese, string - 1 stick (80) * weight watchers
- Nature Valley Oats & Honey Granola Bar, Quaker Chewy Oatmeal Raisin (90)
- 1 medium banana, apple, or pear (100)
- Yogurt, 1 cup, plain or greek (120)
- Wheat Thins, reduced fat, 16 crackers (130)
- Snack Bars: Fiber One (140), **KIND BARS, THINK THIN, RX BARS**
- Nuts, 1/4 cup whole (170-200) **walnuts and almonds**
- Cheddar cheese 1/2 cup diced (265)

Sweet Treats:

(Weight Watchers ice cream bars, Skinny Cow, Dove Dark Chocolate)

- Non-fat whipped topping, 2T (20)
- 1/2 cup berries (40)
- 1 medium banana, apple, or pear (100)
- Ice cream sandwich or Skinny Cow (140)
- McDonald's Vanilla Cone (150)
- Yoplait Light, 6 oz (100)

BEVERAGES

The Ideal Beverage:

- Water (0)

Non-Alcoholic Beverages:

- Coffee (0)
- Tea, w/o sweetener (0)
- Diet soda (0)
- Crystal Light, 1 serving (5)
- Caffe Latte (Starbucks) Nonfat Milk 8 oz (67)
- Milk, Skim, 1 cup (90)
- Orange Juice, 1 cup/8oz (110)

Alcoholic Beverages:

- Wine, 5oz or Light Beer 12oz (100)
- Liquor, 80 proof (ex. Gin, Vodka, Rum), 1 jigger/1.5 oz (100)

On the Go Tips

Chinese

- **Look for:** Stir-fried (ask to have it prepared in little or no oil) or steamed dishes with lots of vegetables, steamed rice, poached fish, and hot and sour soups
- **Avoid:** fatty spareribs, fried wontons, egg rolls, shrimp toast, and fried rice. To limit sodium, ask that your food be prepared without salt or monosodium glutamate (MSG). Request soy sauce (high in sodium) and other sauces on the side.

French

- **Look for:** Steamed shellfish, roasted poultry, salad with dressing on the side, and sauces with a wine or tomato base, such as bordelaise.
- **Avoid:** French onion soup (high in sodium and high in fat if it has cheese), high-fat sauces (béchamel, hollandaise, and béarnaise), croissants, and pate.

Greek

- **Look for:** Plaki (fish cooked with tomatoes, onions, and garlic), chicken kebabs (chicken broiled on a spit with tomatoes, onions and peppers), or a Greek salad
- **Avoid:** Dishes with large amounts of butter or oil, such as baba ghanouj (eggplant appetizer) and baklava (dessert made with phyllo dough, butter, nuts, and honey). To limit sodium, avoid olives, anchovies, and feta cheese.

Italian

- **Look for:** Marinara (tomatoes with garlic and onions), Marsala (based in wine), clam sauce and pasta primavera with fresh vegetables and a small amount of oil. Simply prepared fish and chicken dishes are also good choices.
- **Avoid:** Pasta stuffed with cheese or fatty meat and dishes with cream or butter sauces. Veal scaloppini and parmigiana (cooked with Parmesan cheese) contain added fat.

Japanese

- **Look for:** Steamed rice, soba or udon noodles, yakisoba (stir-fried noodles), yakitori (chicken teriyaki), shumai (steamed dumplings), tofu, sukiyaki, kayaku gohan (vegetables and rice).
- **Avoid:** Shrimp or vegetable tempura, chicken katsu, tonkatsu (fried pork), shrimp agemono, and fried tofu (bean curd).

Mexican

- **Look for:** Grilled fish, shrimp and chicken with salsa made of tomato, chilies, and onion. Order corn tortillas (lower in fat and calories than flour) as long as they aren't deep fried. For a side dish, order rice or beans (black, pinto, refried). Make sure your side dishes aren't cooked with fat or lard (ask your server).
- **Avoid:** Dishes with large amounts of cheese, sour cream and guacamole. Chips can also add a lot of fat and calories

***Basket of chips = 500 calories/ 10 chips= 50 calories**

Carbohydrate Counting

Carbohydrates provide energy, fiber and nutrients other foods cannot. However, carbohydrates are the foods that affect blood glucose the fastest. If one consumes too much carbohydrate, blood glucose rises rapidly, if too little is consumed, blood glucose can drop too low. Therefore, in people with diabetes, carbohydrates need to be balanced with non-carbohydrate foods, medication, insulin, and exercise.

What foods contain carbohydrates?

- Grains (bread, pasta, rice, tortillas, cereal)
- Starchy vegetables (corn, peas, potatoes and beans)
- Chips, pretzels, crackers, popcorn
- Fruit and fruit juice
- Milk and yogurt
- Sweets and desserts

How much carbohydrate can I have?

	Weight Loss	Individual Goals
Women	30 g per meal *15 g per snack	g Per meal
Men	45 g per meal *15 g per snack	g Per snack # Snacks/d

*Snacks optional

How do I know how much is in my food?

	Serving Size	Carb Servings	Carb Grams
Starch	-1 slice bread -6" tortilla -1/3 c pasta or rice -1/2 c starchy veggies -3 c popcorn	1 each	15 g each 80 calories
Fruit	-1 sm round fruit (apple, peach, orange) - 1/2 banana -1c berries or melon - 1/2 c canned fruit	1 each	15 g each 60 calories
Milk	-8 oz fluid milk -6 oz plain or lite yogurt	1 each	12 g each 80-150 calories

Reading Nutrition Labels

Nutrition Facts	
Serving Size 1 (44g)	
Amount Per Serving	
Calories 96	
	% Daily Values*
Total Fat 1g	2%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 1mg	0%
Total Carbohydrate 22g	7%
Dietary Fiber 0g	0%
Sugars 6g	
Protein 1g	2%

*Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.

	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2400mg	2400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

- Always check the serving size first
- Ignore metric serving size (148 g)
- Check grams of Total Carbohydrate
- Sugar and fiber are included in the total, no need to count these separately
- Dietary Fiber may be subtracted from total carbohydrate

Starches:

1 serving = 15 g carbohydrate Bread

Bagel	¼ large (4 oz)
Biscuit, 2 ½"	1
Bread, reduced-calorie	2 slices
Bread, white or whole grain	1 slice (1 oz)
Cornbread, 2" cube	1 (1 ½ oz)
English muffin	1/2
Hot dog or hamburger bun	1/2 (1 oz)
Pita (6" across)	1/2
Tortilla, corn or flour (6")	1
Waffle or Pancake (4" across, ¼ " thick)	1

Cereals & Grains

Barley, couscous, millet, pasta, rice, quinoa, or polenta, cooked	1/3 c
Bulgur, grits, plain oatmeal, or wild rice, Cooked	1/2 c

Starchy Vegetables

Acorn, butternut or pumpkin	1 c
Baked beans	1/2 c
Beans (black, kidney, navy or pinto)	1/2c
Cassava or plantain	1/3 c
Corn, green peas or parsnips	1/2 c
Lentils	1/2 c
Potato, baked with skin	¼ lg (3 oz)
Potato, mashed	1/2 c
Sweet potato or yam	1/2 c

Crackers & Snacks

Chips, potato or tortilla	9-13 pieces
8 Crackers, graham	3 (2 ½" squares)
Crackers, saltine or round butter	6
Popcorn	3 c, popped
Rice Cakes	2 (4" across)

Milk:**1 serving = 12 g carbohydrate**

Fluid milk, any type 8 oz

Yogurt, plain or flavored with no sugar
added, fat-free or low-fat..... 6 oz**Fruits:****1 serving = 15 g carbohydrate**

Apple.....1/2 c

Banana...1/2 large

Blueberries or blackberries...3/4 c

Fruit, canned in juice...1/2 c

Fruit, dried or raisins..... 2 Tbsp

Fruit, frozen (no syrup).....1/2 c

Fruit, whole..... 1 small (4 oz)

Fruit juice, unsweetened 4 oz

Grapefruit, large, fresh.....1/2 fruit or 3/4 c

Grapes, small.....17 (3 oz)

Mango, fresh, small..... 1/2 fruit or 1/2 c

Melon..... 1 c

Pineapple, fresh.....3/4 c

Plums, fresh, small.....2

Raspberries... 1c

Strawberries...1 1/4 c

Tangerines, small.....2

Non-starchy vegetables**Free**

Artichoke

Artichoke hearts

Asparagus

Baby corn

Bamboo shoots

Beans (green, wax, italian)

Bean sprouts

Beets

Bok choy

Broccoli

Brussels sprouts

Cabbage

Carrots

Cauliflower

Celery

Chayote

Cucumber

Daikon

Eggplant

Greens (collard, kale, mustard, turnip)

Green onions

Hearts of palm

Jicama

Kohlrabi

Leeks

Lettuce (all types)

Mushrooms

Nopal

Okra

Onions

Peppers (all varieties)

Radishes

Rutabaga

Salad greens

Sauerkraut

Spinach

Squash (cushaw, summer, crookneck,
spaghetti, zucchini)

Sugar snap peas

Swiss chard

Tomatillos Tomato

Tomato sauce (1/2 c)

Tomato/vegetable juice (6 oz)

Turnips

Water chestnuts

Watercress

Zucchini

Sweets & Desserts

1 serving = 15 g carbohydrate

Brownie or cake, unfrosted.....	2" square
Chocolate chip cookies (2 ¼ ")	2
Ice cream.....	1/2 c
Jam or jelly (regular)	1 Tbsp
Pudding, sugar-free	1/2 c
Sports drink	8 oz
Sugar, syrup, agave or honey	1 Tbsp
Syrup, light.....	2 Tbsp
Yogurt, frozen.....	1/3 c

1 serving = 30 g carbohydrate

Cake, frosted	2" square
Pudding, regular.....	1/2 c

1 serving = 45 g carbohydrate

Doughnuts (glazed).....	2
Pie (8", 2-crust, fruit).....	1/6 pie

Combination Foods

1 serving = 15 g carbohydrate

Soup or stew	1 c
Taco, flour or corn, no beans.....	1

1 serving = 30 g carbohydrate

Casserole	1 c
Lasagna	4"x3"x2"
Macaroni 'n Cheese	1 c
Pizza.....	1/4 of 12" thin-crust
Potato or macaroni salad.....	1/2 c

1 serving = 45 g carbohydrate

Burrito.....	1 (5 oz)
Dinner-type frozen meal.....	1 (14-17 oz)

Flavor freebies

Flavor extracts, garlic, herbs, hot sauce, mustard, lemon juice, lime juice, salsa, spices, sugar substitutes, vinegar

Fats

1 serving = 0 g carbohydrate

Monounsaturated

Avocado, medium	1/8 (1oz)
Oil (canola, olive, peanut)	1 tsp
Olives:	
ripe(black)	8 large
green, stuffed.....	10 large
Nuts:	
almonds, cashews.....	6 nuts
mixed (50%peanuts)	6 nuts
peanuts	10 nuts
pecans.....	4 halves
Peanut butter, smooth/crunchy.....	2 tsp

Polyunsaturated Fats

Margarine, (stick, tub, squeeze)	1 tsp
Margarine, reduced-fat.....	1 Tbsp
Mayonnaise, regular	1 tsp
Mayonnaise, reduced-fat.....	1 Tbsp
Miracle Whip, regular.....	2 tsp

Saturated Fats

Butter, stick.....	1 tsp
whipped.....	2 tsp
Butter, reduced fat.....	1 Tbsp
Bacon	1 slice
Coconut, shredded.....	2 Tbsp
Cream, light or half and half.....	2 Tbsp
Cream, sour, regular	2 Tbsp
Cream, sour, reduced fat	3 Tbsp
Cream, heavy, whipping	1 Tbsp
Cream cheese, regular.....	1 Tbsp
Cream cheese, reduced fat.....	2 Tbsp
Shortening or lard.....	1 tsp

Meat & Meat Substitutes

1 serving = 0 g carbohydrate

Very Lean

Cheese (low-fat or fat-free)

Egg Whites Egg substitute

Fish (cod, flounder, haddock, halibut, trout; tuna, fresh or canned in water)

Game (Duck or pheasant (no skin), venison, buffalo, ostrich)

Poultry (chicken or turkey, no skin)

Shellfish (Clams, crab, lobster, scallops, shrimp, imitation shellfish)

Lean

Beef (USDA Select or Choice grades of trimmed lean round, sirloin, and flank steak; tenderloin; and roast (rib, chuck, rump); steak (T-bone, porterhouse, cubed); ground round)

Cheese (cottage cheese (4.5% fat), grated parmesan, diet cheeses (3 grams fat or less))

Fish (oysters, tuna (canned in oil, drained) herring, salmon (fresh or canned), catfish, sardines (canned))

Game (goose, no skin and rabbit)

Lamb (Roast, chop, leg)

Pork (Lean pork such as fresh ham; canned, cured, or boiled ham; Canadian bacon, tenderloin; center loin chop)

Poultry: Chicken (white meat with skin), chicken (dark meat, no skin), turkey (dark meat, no skin), domestic duck or goose (well drained of fat, no skin)

Veal (Lean chop, roast)

Medium-Fat

Beef (Most beef products fall into this category. Examples are ground beef, meatloaf, corned beef short ribs, and prime grades of meat trimmed of fat such as prime rib)

Cheese with 5 g of fat or less per ounce (feta, mozzarella, ricotta)

Egg, whole

Fish (Any fried fish product without breading)

Lamb (Rib, roast, ground)

Pork (Chops, top loin, Boston butt, cutlets)

Poultry (Chicken (dark meat with skin), ground turkey or ground chicken, fried chicken (with skin))

Sausage (with 5 g fat or less per ounce)

Tofu

Veal (cutlet, unbreaded)

High-Fat

Bacon

Cheese (all regular cheeses, ex: American, Cheddar, Jack, Swiss)

Hot dog or Frankfurter

Lunch meats (unless labeled "Lean")

Nut butters (almond, cashew, peanut)

Pork (spareribs, ground pork, sausage)

Sausage

Calories Burned in 1 Hour

This chart shows the estimated number of calories burned while performing various exercises for one hour. Calorie expenditure varies widely depending on the exercise, intensity level, and individual.

Activity (one-hour duration)	Weight of person and calories burned		
	160 pounds (73 kilograms)	200 pounds (91 kilograms)	240 pounds (109 kilograms)
Aerobics, high-impact	511	637	763
Aerobics, low-impact	365	455	545
Aerobics, water	292	364	436
Backpacking	511	637	763
Basketball game	584	728	872
Bicycling, < 10 mph, leisure	292	364	436
Bowling	219	273	327
Canoeing	256	319	382
Dancing, ballroom	219	273	327
Football, touch, flag, general	584	728	872
Golfing, carrying clubs	329	410	491
Hiking	438	546	654
Ice skating	511	637	763
Jogging, 5 mph	584	728	872
Racquetball, casual, general	511	637	763
Rollerblading	913	1,138	1,363
Rope jumping	730	910	1,090
Rowing, stationary	511	637	763
Running, 8 mph	986	1,229	1,472
Skiing, cross-country	511	637	763
Skiing, downhill	365	455	545
Skiing, water	438	546	654
Softball or baseball	365	455	545
Stair treadmill	657	819	981
Swimming, laps	511	637	763
Tae kwon do	730	910	1,090
Tai chi	292	364	436
Tennis, singles	584	728	872
Volleyball	292	364	436
Walking, 2 mph	183	228	273
Walking, 3.5 mph	277	346	414
Weightlifting, free weight, nautilus, or universal type	219	273	327

+ Food - Exercise = Net cal per day; Women net > 1000/ Men net > 1200

Adults who are physically active are healthier, feel better, and are less likely to develop many chronic diseases, such as cardiovascular disease, type 2 diabetes, and several types of cancer than are adults who are inactive. Regular moderate-to- vigorous physical activity also reduces feelings of anxiety and depression and improves sleep and quality of life. Even a single episode of physical activity provides temporary improvements in cognitive function and state anxiety. Adults who are more physically active are better able to perform everyday tasks without undue fatigue. Increased amounts of moderate-to-vigorous physical activity are associated with improved cardiorespiratory and muscular fitness, including a healthier body weight and body composition. Adults who are more physically active can more easily carry out daily tasks like climbing stairs, carrying heavy packages, and performing household chores. These benefits are true for men and women of all ages, races, and ethnicities.

Adults gain most of these health benefits when they do the equivalent of 150 to 300 minutes (2 hours and 30 minutes to 5 hours) of moderate-intensity aerobic physical activity each week. Adults gain additional and more extensive health benefits with even more physical activity. Muscle-strengthening activities also provide health benefits and are an important part of an adult's overall physical activity plan. This chapter provides guidance for men and women ages 18 through 64 years.

Key Guidelines for Adults

Adults should move more and sit less throughout the day. Some physical activity is better than none. Adults who sit less and do any amount of moderate-to-vigorous physical activity gain some health benefits.

For substantial health benefits, adults should do at least 150 minutes (2 hours and 30 minutes) to 300 minutes (5 hours) a week of moderate-intensity, or 75 minutes (1 hour and 15 minutes) to 150 minutes (2 hours and 30 minutes) a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate- and vigorous-intensity aerobic activity. Preferably, aerobic activity should be spread throughout the week.

Additional health benefits are gained by engaging in physical activity beyond the equivalent of 300 minutes (5 hours) of moderate-intensity physical activity a week.

Adults should also do muscle-strengthening activities of moderate or greater intensity and that involve all major muscle groups on 2 or more days a week, as these activities provide additional health benefits.

Explaining the Key Guidelines

The key guidelines for adults focus on two types of activity - aerobic and muscle strengthening. Each provides important health benefits.

Aerobic Activity

Aerobic activities, also called endurance or cardio activities, are physical activities in which people move their large muscles in a rhythmic manner for a sustained period of time. Running, brisk walking, bicycling, playing basketball, dancing, and swimming are all examples of aerobic activities. Aerobic activity makes a person's heart beat more rapidly and breathing rate increase to meet the demands of the body's movement. Over time, regular aerobic activity makes the cardiorespiratory system stronger and more fit.



The purpose of aerobic activity does not affect whether or not it counts toward meeting the key guidelines. For example, physically active occupations can count toward meeting the key guidelines, as can active transportation choices (walking or bicycling). All types of aerobic activities can count as long as they are of sufficient intensity. For health benefits, the total amount of moderate-to-vigorous physical activity is more important than the length of each physical activity episode.

How Much Total Activity a Week?

When adults do the equivalent of at least 150 minutes of moderate-intensity aerobic activity each week, the benefits are substantial. These benefits include lower risk of all-cause mortality, coronary heart disease, stroke, hypertension, type 2 diabetes, some cancers, anxiety, depression, and Alzheimer's disease and other dementias. Physically active adults also sleep better, have improved cognition, and have better quality of life.

As a person moves from 150 minutes a week toward 300 minutes a week, the health benefits become more extensive. For example, a person who does 300 minutes a week has an even lower risk of heart disease or type 2 diabetes than a person who does 150 minutes a week.

Furthermore, adults who are regularly active at or near the higher end of the key guideline range-300 minutes a week-gain additional health benefits. These additional benefits include further risk reduction for several cancers and prevention of unhealthy weight gain (by physical activity alone).

The benefits continue to increase when a person does more than the equivalent of 300 minutes a week of moderate-intensity aerobic activity. Research has not identified an upper limit of total activity, above which additional health benefits cease to occur.

How Many Days a Week and for How Long?

Aerobic physical activity preferably should be spread throughout the week. Research studies consistently show that activity performed on at least 3 days a week produces health benefits. Spreading physical activity across at least 3 days a week may also help reduce the risk of injury and prevent excessive fatigue.

All amounts of aerobic activity count toward meeting the key guidelines if they are performed at moderate or vigorous intensity. Episodes of physical activity can be divided throughout the day or week, depending on personal preference.

How Intense?

The key guidelines for adults focus on two levels of intensity-moderate and vigorous. To meet the key guidelines, adults can do either moderate-intensity or vigorous-intensity aerobic activities, or a combination of both. It takes less time to get the same benefit from vigorous-intensity activities than from moderate-intensity activities. A general rule of thumb is that 2 minutes of moderate-intensity activity counts the same as 1 minute of vigorous-intensity activity. For example, 30 minutes of moderate-intensity activity is roughly the same as 15 minutes of vigorous-intensity activity.

The intensity of aerobic activity can be tracked in two ways - absolute intensity and relative intensity.

Absolute intensity is the amount of energy expended during the activity, without considering a person's cardiorespiratory fitness. The energy expenditure of light-intensity activity is 1.6 to 2.9 times the amount of energy expended when a person is at rest. Moderate-intensity activities expend 3.0 to 5.9 times the amount of energy expended at rest. The energy expenditure of vigorous-intensity activities is 6.0 or more times the energy expended at rest.

Relative intensity is the level of effort required to do an activity. Less fit people generally require a higher level of effort than more fit people to do the same activity. Relative intensity can be estimated using a scale of 0 to 10, where sitting is 0 and the highest level of effort possible is 10. Moderate-intensity activity is a 5 or 6. Vigorous-intensity activity begins at a level of 7 or 8.

Offsetting the Risks of Too Much Sitting

People who sit a lot have an increased risk of all-cause and cardiovascular disease mortality, as well as an increased risk of developing cardiovascular disease, type 2 diabetes, and colon, endometrial, and lung cancers. The mortality risk related to sitting is not observed among people who do 60 to 75 minutes of moderate-intensity physical activity a day, but this amount of activity is far more than most people obtain. Therefore, both reducing sitting time and increasing physical activity will provide benefits.

The table below lists some examples of activities classified as moderate-intensity or vigorous-intensity based on absolute intensity. Either absolute or relative intensity can be used to monitor progress in meeting the key guidelines.

Examples of Different Aerobic Physical Activities and Intensities Based on Absolute Intensity

Moderate-Intensity Activities

- Walking briskly (2.5 miles per hour or faster)
- Recreational swimming
- Bicycling slower than 10 miles per hour on level terrain
- Tennis (doubles)
- Active forms of yoga (for example, Vinyasa or power yoga)
- Ballroom or line dancing
- General yard work and home repair work
- Exercise classes like water aerobics

Vigorous-Intensity Activities

- Jogging or running
- Swimming laps
- Tennis (singles)
- Vigorous dancing
- Bicycling faster than 10 miles per hour
- Jumping rope
- Heavy yard work (digging or shoveling, with heart rate increases)
- Hiking uphill or with a heavy backpack
- High-intensity interval training (HIIT)
- Exercise classes like vigorous step aerobics or kickboxing

Spotlight on Aerobic Activities: A Tried and True Favorite and Two Increasingly Popular Options

Walking

Walking is an easy physical activity to begin and maintain as part of a physically active lifestyle. It does not require special skills, facilities, or expensive equipment. Many studies show that walking has health benefits and a low risk of injury. It can be done year-round and in many settings.

Yoga and Tai Chi

Many different forms of yoga exist, and they range in intensity level from more meditative Hatha yoga to power yoga. For this reason, yoga may include time that would be characterized as light-intensity physical activity or as moderate-intensity physical activity. Yoga may also be considered both aerobic and muscle strengthening, depending on the type and the postures practiced.

Tai chi is typically classified as a light-intensity physical activity but may be considered relatively moderate intensity for some adults. It includes balance activities, and some forms may be considered muscle strengthening.

High-Intensity Interval Training

High-intensity interval training (HIIT) is a form of interval training that consists of alternating short periods of maximal-effort exercise with less intense recovery periods. There are no universally accepted lengths for the maximal-effort period, the recovery period, or the ratio of the two; no universally accepted number of cycles per session or the entire duration of the session; and no precise relative intensity at which the maximal-effort component should be performed.

When using relative intensity, people pay attention to how physical activity affects their heart rate and breathing. As a rule of thumb, a person doing moderate-intensity aerobic activity can talk, but not sing, during the activity. A person doing vigorous-intensity activity cannot say more than a few words without pausing for a breath.

Older or less fit adults may find that activities in the table labeled as moderate intensity are experienced as vigorous intensity. These adults will gain health benefits from starting with activities that would be considered light intensity and, as they are able, to gradually build up to moderate- or vigorous-intensity activities. In contrast, younger or more fit adults may experience activities labeled as moderate intensity easy enough that they can sing while doing them. These adults may need to do more vigorous-intensity activities to gain certain health benefits.

Talk Test

As a rule of thumb, a person doing moderate-intensity aerobic activity can talk, but not sing, during vigorous-intensity activity cannot say more than a few words without pausing for a breath.

Muscle-Strengthening Activity

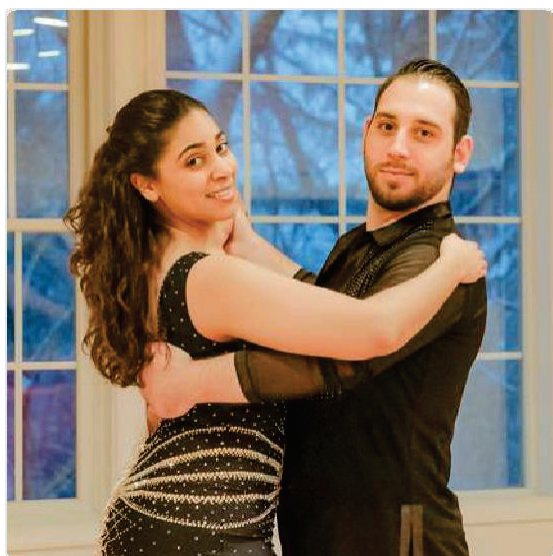
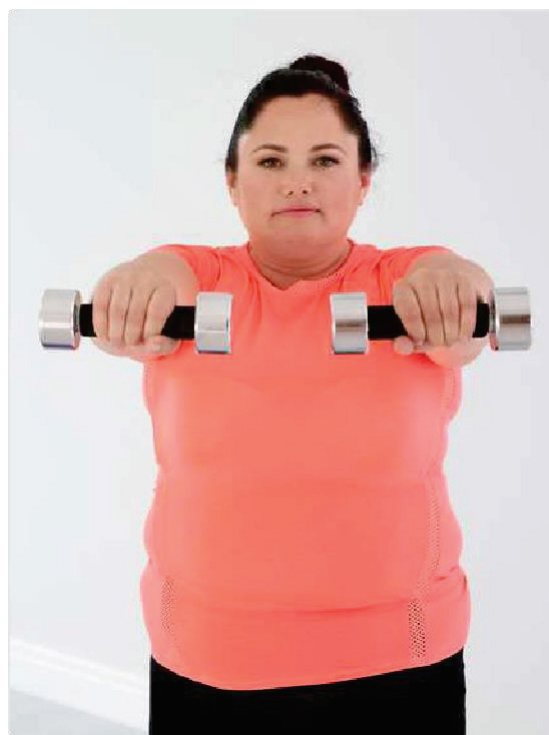
Muscle-strengthening activities provide additional benefits not found with aerobic activity. The benefits of muscle-strengthening activity include increased bone strength and muscular fitness. Muscle-strengthening activities can also help maintain muscle mass during weight loss.

Muscle-strengthening activities make muscles do more work than they are accustomed to doing. That is, they overload the muscles. Examples of muscle-strengthening activities include lifting weights, working with resistance bands, doing calisthenics that use body weight for resistance (such as push-ups, pull-ups, and planks), carrying heavy loads, and heavy gardening.

Muscle-strengthening activities count if they involve

a moderate or greater level of intensity or effort and work the major muscle groups of the body—the legs, hips, back, chest, abdomen, shoulders, and arms. Muscle-strengthening activities for **all** the major muscle groups should be done at least 2 days a week. The improvement in, or maintenance of, muscle strength is specific to the muscles used during the activity, so a variety of activities is necessary to achieve balanced muscle strength.

No specific amount of time is recommended for muscle strengthening, but muscle-strengthening exercises should be performed to the point at which it would be difficult to do another repetition. When resistance training is used to enhance muscle strength, one set of 8 to 12 repetitions of each exercise is effective, although 2 or 3 sets may be more effective. Improvements in muscle strength and endurance are progressive over time. Increases in the amount of weight or the days a week of exercising will result in stronger muscles.



Flexibility Activities

Flexibility is an important part of physical fitness. Some types of physical activity, such as ballet or salsa dancing, require more flexibility than others. Flexibility activities enhance the ability of a joint to move through the full range of motion. Stretching exercises are effective in increasing flexibility, and thereby can allow people to more easily do activities that require greater flexibility. For these reasons, flexibility activities are an appropriate part of a physical activity program, even though their health benefits are unknown and it is unclear whether they reduce risk of injury. Time spent doing flexibility activities by themselves does not count toward meeting the aerobic or muscle-strengthening key guidelines.

Warm-Up and Cool-Down

Warm-up and cool-down activities are an acceptable part of a person's physical activity plan. Commonly, the warm-up and cool-down involve doing an activity at a slower speed or lower intensity. A warm-up before moderate- or vigorous- intensity aerobic activity allows a gradual increase in heart rate and breathing at the start of the episode of activity. A cool-down after activity allows a gradual decrease at the end of the episode. Time spent doing warm-up and cool-down may count toward meeting the aerobic key guidelines if the activity is at least moderate intensity (for example, walking briskly as a warm-up before jogging). A warm-up for muscle-strengthening activity commonly involves doing exercises with lighter weight.



Meeting the Key Guidelines

Adults have many options for becoming physically active, increasing their physical activity, and staying active throughout their lives. In all cases, adults should try to move more and sit less each day. In deciding how to meet the key guidelines, adults should think about how much physical activity they are already doing and how physically fit they are. Personal health and fitness goals are also important to consider.

In general, healthy men and women who plan gradual increases in their weekly amounts of physical activity do not need to consult a health care provider before becoming physically active.

Inactive or Insufficiently Active Adults

Adults who do not yet do the equivalent of 150 minutes of moderate-intensity physical activity a week (inactive or insufficiently active) should work gradually toward this goal. The initial amount of activity should be at a light or moderate intensity, for short periods of time, with the sessions spread throughout the week. People likely gain some health benefits even when they replace sitting time with light-intensity activity. Sitting less and doing moderate- or vigorous-intensity physical activity has even more benefits. The good news is that "some is better than none." The biggest gain in benefits occurs when going from no physical activity to being active for just 60 minutes a week.

To reduce risk of injury, it is important to increase the amount of physical activity gradually over a period of weeks to months. For example, an inactive person could start with a walking program consisting of 5 minutes of walking several times each day, 5 to 6 days a week. The length of time could then gradually be increased to 10 minutes per session, 3 times a day, and the walking speed could be increased slowly.

Courtesy of



Strategies Proven to Help People Eat Healthier and Exercise More

PLANNING AHEAD

Planning ahead and setting goals are key.

“SMART” goals are:

S: Specific

- If you plan to exercise, think carefully about what you plan to do, when, how much, and how often. (I will walk 3 blocks after work Monday, Wednesday, and Friday this week.)

M: Measurable

- Write down how far or how long you walk each day. Some people like to use a pedometer (such as Fitbit) and write down how many steps they take each day.
- One way you can pay attention to what you eat is to track calories by writing down your food intake. Free apps for your phone or computer, such as MyFitnessPal or Lose It!, can help you do this.
- Another important measure to track is your weight. Experts recommend weighing at least once a week, around the same time of day, wearing the same amount of clothing. But remember, weight changes slowly; keeping track is to help you see how you are doing and to let you know if you may need to adjust your plan.

A: Achievable

- Set realistic and reasonable goals. For example, if your goal is to walk, start with 10 to 20 minutes a day, 4 days a week.
- When making a plan, consider your schedule, weather, etc.
- Achievable goals also include taking a dance class twice a week, switching from sugary sodas to flavored water or Crystal Light, or packing a healthy lunch 3 days a week.

R: Relevant

- Set a goal that you are ready to work on. Think of what will motivate you to stick to your plan, such as building up your endurance to be able to walk with your child or to restart playing a fun sport.

T: Time-bound

- Set goals that you can realistically complete in a specific amount of time. (I will lose 2 to 4 pounds a month for 3 months or until I lose the weight I want to lose.)

PROBLEM SOLVING

Losing weight and keeping it off call for problem solving and support.

One of the best ways to work through challenges is to ask friends, family, a dietitian, or other healthcare provider to help you solve problems that come up.

- Many benefit from building a team of people who are also attempting to lose weight. Support can also come from group programs such as Weight Watchers.
- Several apps offer opportunities to connect with a weight loss community (such as SparkPeople or MyNetDiary).

STAYING MOTIVATED

Even with the best made plans and a strong support team, it can be hard to stay motivated.

- Remind yourself of your goals, write them down, and put them where you will see them every day. Think about why you want to lose weight, like having more energy, feeling less pain in your knees and back, or being able to play on the floor with your children or grandchildren.
- Praise yourself and reward yourself for sticking with your plan. Be kind to yourself. Don't beat yourself up for slipping.
- Remember, it takes time and a long-term commitment to lose weight and make lasting health changes.

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Courtesy of



How Much Weight Do I Need to Lose?

The good news is that losing a few pounds can make a difference in your health.

Losing just 3% to 5% of your weight (ie, if you weigh 200 pounds, losing 6 to 10 pounds) can lower:

- blood sugar
- risk for developing diabetes
- triglycerides, a type of fat in the blood

Losing a little more weight is even better

Losing 5% to 10% of your weight (10 to 20 pounds if you weigh 200 pounds) can:

- lower your blood pressure
- improve your cholesterol
- reduce need to take medicine for blood pressure, diabetes, and lipids
- lower triglycerides and blood sugar even more

Losing weight can also help with problems like:

- sleep apnea
- liver damage
- osteoarthritis (wear and tear on knees and other joints)

Losing weight helps you feel better

- gives you more energy
- makes it easier for you to move around
- improves your quality of life
- helps keep you from having weight-related health problems in the future

Best ways of losing weight and keeping it off

- Small changes in your eating can make a big difference
 - Eat smaller portions
 - Remember, protein helps fill you up
 - Limit sugary drinks like soda, juice, and special coffee drinks—they are full of calories
 - Minimize snacking

- Be active—aim for 30 to 40 minutes of activity most days of the week
 - Do things you enjoy and ask a friend to join you
 - Walk more, dance more, take the stairs, and play with your children or grandchildren—all activity counts
 - Join an exercise class
- Weigh regularly
- Get a good night's sleep; when people are tired, they often crave fatty or sweet food (most adults need 7 to 9 hours of sleep a night)

What about medications to lose weight?

- Sometimes medicine can help people lose weight.
- Ask your healthcare provider if medicine is right for you.
 - Your weight should be checked after 3 months to see if you have lost at least 5% of your weight
 - If you have not lost weight, your healthcare provider may want to put you on another medicine or a different treatment plan

Bariatric surgery

- For those who need to lose more weight for their health, surgery may be helpful
- The average long-term weight loss with sleeve gastrectomy is about 24% and about 33% with gastric bypass
- Devices and endoscopic therapies, such as a stomach “balloon,” usually result in less weight loss than bariatric surgery

Do not give up!

- Most people try many times to lose weight
- Everyone loses weight at a different pace
- For most people, their weight loss slows down over time and then levels off after 6 to 12 months
- After your weight loss slows down, most people gradually regain some weight; regaining weight may be slower if you take weight loss medicine or you have had bariatric surgery
- If you are struggling, consider consulting with an obesity medicine specialist

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Courtesy of



Can My Medicines Affect My Weight?



Before starting a new medication or changing your dosage, find out whether it can lead to weight gain.

- Some drugs cause weight gain in some people and weight loss in others.
- Some drugs lead to weight loss at first and then cause weight gain over time.
- Often, a medicine's effect on weight depends on a person's medical and family history (including insulin resistance and type 2 diabetes) as well as dietary and exercise patterns.
- If you are taking a drug that causes weight gain, talk to your healthcare provider.
 - Ask about alternative drugs that are less likely to cause weight gain.
 - Talk to your provider about taking the lowest dose for the shortest amount of time.
 - Find out about dietary, physical activity, and lifestyle changes that may help to offset the weight gain.

Here are some examples of medicines that can affect weight:

Diabetes medicines

- Insulin and sulfonylurea drugs (like Glucotrol [glipizide] and DiaBeta, Micronase, and Glucovance [glyburide]) frequently cause weight gain.
- Other diabetes medicines are less likely to cause weight gain and may even help with weight loss including:
 - Fortamet, Glucophage, Glumetza (metformin)
 - Saxenda, Victoza (liraglutide)
 - Trulicity (dulaglutide)
 - Invokana, Invokamet (canagliflozin)
 - Jardiance, Synjardy (empagliflozin)
 - Farxiga, Xigduo XR (dapagliflozin)
 - Symlin Pen (pramlintide)

Blood pressure medicines

- Some beta-blockers (such as Tenormin [atenolol], Lopressor and Toprol [metoprolol], and Inderal and InnoPran [propranolol]) can slow metabolism and make it hard to lose weight. You may benefit from switching to a beta-blocker that has less risk for weight gain (such as Coreg [carvedilol] or Bystolic [nebivolol]).
- Other blood pressure medications won't likely cause weight gain. These include:
 - ACE inhibitors (such as Vasotec [enalapril] or Prenilil and Zestril [lisinopril])
 - Angiotensin receptor blockers (such as Cozaar [losartan] or Avapro [irbesartan])
 - Calcium channel blockers (such as Cardizem, Dilt-CD, and Tiazac [diltiazem] or Adalat CC and Procardia XL [nifedipine])

Medications for depression and other mental health conditions

- Among antidepressant medications, Paxil (paroxetine) and many others can cause weight gain. Prozac, Sarafem, and Selfemra [fluoxetine] and Zoloft (sertraline) may have less effect on weight
- Wellbutrin [bupropion], also known as Aplenzin, Forfivo, and Zyban, is the only antidepressant that has been linked to weight loss.
- Antipsychotic medications (such as Zyprexa [olanzapine]) and medications for bipolar disorder (such as Lithobid [lithium]) frequently cause weight gain

Steroids and certain contraceptive medications may cause significant weight gain. Talk to your provider about alternatives.

Not all brand names for these medications are listed here. You can search for the generic name on websites such as <https://medlineplus.gov/druginformation.html> to find other brand names you may be using.

**Different medications are appropriate for different people.
Ask your healthcare provider about which drugs are best for you.**

Courtesy of



Weight Management: 10 Keys to Success

Here are helpful ways to lose weight discovered through decades of research, including the National Weight Control Registry's report of more than 10,000 successful people who have lost and kept off 30 or more pounds (often much more).

1. Find an eating plan that works for you.

Low-carbohydrate, low-fat, Mediterranean, or other diet patterns work well for many people. No one diet is best for everyone. It may be helpful to work with a dietitian or another healthcare provider or to follow a weight loss plan with a friend.

2. Limit some foods.

Regardless of which eating plan you follow, some foods may make it harder to lose weight. Start by limiting sugary drinks (like soda and juice), fast food, junk food, and sweets. It's OK to have these once in a while, but it will be easier to lose weight if you limit how often you have these foods.

3. Think of using convenient "meals."

People who use foods like protein bars or shakes, prepared meals, and even frozen meals often lose more weight. These foods make it easier for many people to stick to a diet plan.

4. Write down what you eat.

This can help you pay more attention to what you are eating and help you make healthy choices. Some studies show that people who do this lose up to 10 times more weight compared to those who don't.

5. Commit to an exercise plan that you enjoy.

The goal is to move more; whether you set aside a time every day to exercise or aim for a few minutes here and there, every little bit helps. If you have not been active, start slowly and aim for 10 minutes a day. Pick something you enjoy, such as walking outdoors, sports, dancing, or a group exercise class. Ideally, build up to 20 to 30 minutes several days a week. It helps some people to find a personal trainer or exercise group.

6. Weigh yourself regularly.

Weighing once weekly works well for most people. If your weight isn't going in the right direction, it's better to catch it early so that you can rethink your strategy or reach out for help. Try not to judge yourself based on the number; instead, think of the number on the scale as useful information that can help guide you.

7. Ask for support and guidance.

Support helps us to stick with our plan when it gets tough. Doctors, nurses, dietitians, counselors, and other healthcare professionals can be great sources of guidance and support. Group support can also help. This can include weight loss programs, the YMCA, or even online support. Don't be tempted to cancel an appointment if you're struggling—this is the best time to reach out for help.

8. Reduce stress and get a good night's sleep.

Stress and too little sleep can make you hungry and cause you to gain weight. In some cases, meeting with a sleep specialist or a counselor can help you learn to manage stress and/or improve sleep.

9. Ask your healthcare provider if medicine you are taking causes weight gain.

If your medications are making it harder for you to lose weight, ask about switching to another medication. If there are no better options, talk to your healthcare provider about taking that medication at a lower dose and/or for a shorter amount of time.

10. Consider weight medications and bariatric surgery.

If your weight is causing health problems or you have already tried many times to lose weight, talk to your healthcare provider about medications for weight loss or bariatric surgery.

Courtesy of



Dietary Supplements for Weight Loss...

...What You Need to Know

With little oversight over dietary supplements or evidence that they work, it is important not to believe the advertising claims.

Dietary supplements promise incredible weight loss, but medical studies show most do not work, and some may be harmful. Despite this medical evidence, Americans spend over \$2 billion a year on weight loss supplements.

Problems with Dietary Supplements

Unlike FDA-approved medications, dietary supplements do not have to be proven to be effective or safe before being advertised or sold. They are not rigorously regulated by the FDA or state boards of pharmacy.

- Some people believe products are safe if they are advertised as “natural” and do not require prescriptions.
- There is little evidence that any herbal or over-the-counter weight loss aid helps with significant weight loss.
- Although advertisers claim that studies support their products, the studies are almost always unscientific and poorly done. They do not prove the product is effective or safe.

What are the Risks of Taking Dietary Supplements?

Some dietary supplements may cause heart problems, liver or kidney problems, or even death. The FDA warns against several products that contain toxins or banned drugs. An example of lack of safety is HCG shots which are advertised as “natural.” They are sold inappropriately as part of miracle weight loss diets.

- HCG is a hormone produced during pregnancy.
- The FDA approved the shots to treat some cases of infertility. However, it required a label stating HCG has not been proven to help with weight loss.
- Still, HCG shots are used with extreme calorie limits of 500 calories a day. Studies have shown this does not work for weight loss and is likely unsafe.



Safe Over-the-Counter Dietary Supplements

There are two over-the-counter options for losing weight that have been proven effective with scientific studies.

The first is Alli®: It is not a dietary supplement. Alli is an over-the-counter version of orlistat (a prescription medication approved by the FDA in 1999).

- Several studies show that orlistat can help people lose a reasonable amount of weight and keep it off long term.
- One study showed that orlistat (at the full prescription dose, which is twice the dose of over-the-counter Alli) led to 10% body weight loss over 1 year when used with a behavioral weight loss program.
- The people in this study maintained their weight loss after 4 years. They were also 45% less likely to develop diabetes than people who did not take it.

The second is fiber supplements.

- Fiber supplements help make you feel full and slow digestion.
- The most commonly used fiber supplement is psyllium. It leads to small weight losses and may also lower cholesterol.
- At recommended levels, the risk of side effects is low.
- Or increase fiber in your diet and get the same benefits.



Tell your healthcare providers about all the supplements you are taking.

Ask your healthcare provider or pharmacist if a medicine or supplement is safe for you to take and if it will help you lose weight.

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The Obesity Patient Page is a public service of The Obesity Society (TOS) and its Clinical Committee. These recommendations are appropriate in most instances, but they are not a substitute for medical diagnosis. Consult your healthcare provider for specific information concerning your personal medical condition. This page may be photocopied noncommercially by healthcare practitioners to share with patients. Healthcare practitioner is defined as being legally permitted to provide healthcare services and advice as defined by governing state laws and regulations. To purchase bulk reprints, call (781) 388-8507.

Disclosure: Members of the TOS Clinical Committee report consulting fees from Novo Nordisk, Takeda, Vivus, Orexigen, and Eisai.

PHENTERMINE: \$15-45 (not covered)

Mechanism: Stimulant - increases metabolism, decreases appetite

Short-term use only 3-6 months, used to kick start weight loss

Serious Reactions	Common Reactions
Dependency, abuse Withdrawal if abrupt D/C (long-term, high dose use) Psychosis Tachycardia High blood pressure Pulmonary hypertension Heart valve heart disease	Palpitations Fast heart rate Restlessness Insomnia Dizziness Elevated mood Tremor Headache Dry mouth* <i>increase water intake</i> Constipation* <i>miralax</i> Diarrhea Urticaria Impotence Hypertension

WELLBUTRIN (Bupropion HCL) (covered)

Mechanism - An antidepressant works on dopamine, increases mood and energy, and decreases cravings. Do not take if you have a history of seizures

Serious Reactions	Common Reactions
Suicidality Depression exacerbation Psychiatric disorder exacerbation Behavioral disturbance Agitation Psychosis Hallucinations Paranoia Mania Seizure Arrhythmia/tachycardia Migraine Stevens-Johnsons Erythema multiforme Anaphylaxis Hepatotoxicity	Weight loss Constipation/diarrhea/nausea Abdominal pain/flatulence Rash Dizziness Diaphoresis Anxiety/agitation** Abnormal dreams/insomnia Tinnitus Tremor

TOPIRAMATE (TOPAMAX) (covered)

Mechanism: changes taste - salty, sweet, carbonation, alcohol
 Off-label use when used alone. Normally used for migraine prevention

Serious Reactions	Common Reactions
Severe kidney stones	Neonatal cleft lip/palate (1st trimester use)
Osteoporosis - Softening of the bones	Metabolic acidosis
Nearsightedness, acute changes in the retina	Tingling
Glaucoma, secondary angle-closure	Sleepiness
Decreased sweating	Dizziness
Hyperthermia	Weight loss**
Diabetes mellitus	Fainting
Low white blood cells	Nervousness
Anemia psychosis	Fatigue
Suicidality	Anorexia
Erythema multiforme (rash)	Unclear thinking*
Stevens-Johnson syndrome (rash)	UTI
Toxic epidermal necrolysis (rash, severe skin peeling)	Wobbly walk
Pemphigus (rash, blisters)	Abnormal vision
Liver disease	Diarrhea
Pancreatitis	Mood disturbances
Deep Vein Thrombosis (DVT)	Nystagmus
Metabolic acidosis	Nausea
Pulmonary embolism	Double vision
	Insomnia
	Depression
	Infection
	Fever
	Tremor
	Rhinitis/sinusitis
	Heartburn
	Generalized weakness
	Anxiety
	Abdominal pain
	Decreased skin sensitivity
	Taste changes
	Hair loss

NALTREXONE

\$90-\$120 (not covered) Compounding pharmacy (PeoplesRx, Stonegate, etc.)

Mechanism - medication used for drug addiction, a compound in small doses used for overeating and binge eating. Reduces appetite.

Serious Reactions	Common Reactions
Suicidality	Anorexia
Depression	Abdominal pain
Withdrawal syndrome	Nausea/vomiting/constipation
Hypersensitivity reaction	Fatigue/somnolence
Hepatotoxicity	Headache
	Dizziness
	Rash
	Myalgia

QSYMIA (phentermine/topiramate) \$200 (not covered)

**Combination branded weight loss medication
(see both phentermine and topiramate for common reactions)**

CONTRAVE (naltrexone/bupropion) \$300 (not covered, \$99 specialty pharmacy)

**Combination branded weight loss medication
(see both bupropion and naltrexone for common reactions)**

Metformin (covered)

Mechanism - decreases hepatic glucose production and intestinal glucose absorption and increases insulin sensitivity. Reduces appetite, used for diabetes and PCOS.

Serious Reactions	Common Reactions
Lactic acidosis Anemia	Diarrhea* Nausea/vomiting Flatulence Asthenia Indigestion Abdominal discomfort Anorexia* Headache Metallic taste Rash Ovulation induction

GLP-1 \$1200(not covered)

Semaglutide - **Wegovy** (weekly injection)

Tirzepatide - **Zepbound** (weekly injection)

Liraglutide - **Saxenda** (daily injection)

Mechanism - activates GLP-1 receptor in the brain, regulating appetite and caloric intake. Decreased portion sizes and appetite.

Serious Reactions	Common Reactions
Thyroid-C-cell tumor (animal studies) Medullary thyroid carcinoma risk Papillary thyroid carcinoma Colorectal malignancy Anaphylaxis Angioedema Nephrotoxicity Pancreatitis Cholelithiasis Cholecystitis Suicidal ideation	Nausea** Diarrhea Constipation** Vomiting Headache Appetite decrease Dyspepsia*** Fatigue Dizziness Abdominal pain Abdominal distension/flatulence GERD*** Gastroenteritis Eructation UTI Cholelithiasis Lipase increase Injection site reaction Anxiety Tachycardia

** Compounded versions of these medications are available at specialty pharmacies. These compounds are not FDA-approved and, therefore, come with risk. Including but not limited to inconsistencies with purity, stability, and availability. It is up to the provider that you are seeing if they feel comfortable prescribing compound. The cost is typically \$200-400, depending on the drug and pharmacy used.*