Weight Management in Rural Communities

By Dr. Joseph E. Donnelly

Weight management is difficult enough if you live in an urban setting let alone if you are a rural dweller with limited resources. Much of Kansas and Missouri is rural with lots of wide open space and many of us are thankful for this.

In addition to the treatment options available at our KUMC programs, we have just been awarded a 5-year grant from The National Institutes of Health to explore ways to bring weight management treatment to rural Kansas and Missouri. We will provide training to rural health clinics to train staff to identify, recruit, and treat individuals who would benefit from weight management. Treatment options will vary from traditional face-to-face counseling to programs delivered remotely by group conference call. Additional technology may be employed including devices to automatically record physical activity and computer programs to monitor diet. Social networks may be used to provide support and further develop group dynamics.

The overall aim is to diminish barriers for rural residents so they may receive the same state-of-the-art treatments formerly only offered to urban residents. This project will get underway in the fall of 2016 and you can obtain information from our website- www.ebl.ku.edu.
As a reproductive endocrinologist at the Center for Advanced Reproductive Medicine (CARM) at the University of Kansas Hospital, we see many patients with medical conditions related to overweight/obesity. I primarily see patients who are trying to conceive and many need assistance with weight loss to improve their odds of pregnancy. Recently, a research study from Legro RS et al. showed that a 5-7% reduction in weight loss can improve both ovulation and live birth rates in women with polycystic ovary syndrome (PCOS; a common reproductive disorder). This news is exciting as many women with obesity and ovulation disorders need medicines to induce ovulation which can be expensive and carry up to a 20% risk of multiple gestation pregnancy. At CARM, we are committed to providing excellent care for all women and work closely with the KU Weight Management Program (KUWMP) to assist women in weight loss before conception.

Not only does weight loss improve the odds of pregnancy, but also improves reproductive outcomes. Obese women are at increased risk for miscarriage, gestational diabetes, gestational hypertension, preeclampsia, preterm delivery, and operative delivery (such as cesarean section). Also, the fetus of an obese mother is at increased risk for medical complications such as stillbirth, neonatal death, congenital anomalies, and growth disorders (intrauterine growth restriction or macrosomia). Growing evidence supports a negative role of maternal obesity on intrauterine environment which may have lifelong consequences for children including diabetes and obesity. Although there is not a large body of evidence to support reduced maternal and fetal risk by preconception weight loss, a current multi-center randomized controlled trial is ongoing in Canada to assess impact of weight loss on reproductive outcomes.

At CARM, we have had lots of positive feedback from the women who participated in the KUWMP. All women at our clinic with a body mass index (BMI) above 29 are advised to lose weight before conception and are offered a referral to the KUWMP. Those who participate in the KUWMP seem to lose more weight in a shorter amount of time. Many times, the partner will also participate in the KUWMP with our patient. Our patients who have completed the KUWMP frequently praise the program and cite how successful they were with their assistance. As the KUWMP is in a group setting, I often tell women that they may find emotional support by participating in the program. A diagnosis of infertility can be very difficult and treatment for infertility often exacerbates the emotional stress associated with infertility. Social support in the group setting at KUWMP may provide a coping strategy for dealing with infertility beyond the benefits of weight loss. Finally, our patients get crucial information on how to maintain weight loss after they have completed the KUWMP.

The most exciting part of our collaboration with KUWMP in assisting women with weight loss is the success stories. We have had multiple women become pregnant while losing weight and not need our assistance for conception. Some couples have lost over 100 combined pounds and became pregnant easily after their first treatment cycle. In our non-fertility patients, we have had an average of 50-70 lbs. weight loss with the KUWMP. After significant weight loss, they report better mood, improved sleep and are often able to come off of medicines for pre-diabetes or high blood pressure.

At CARM, we strive for all women to achieve a healthy weight, whether they desire pregnancy or are working on reducing co-morbidities seen with obesity. My research interests include preconception weight loss, and the pathophysiology behind obesity in PCOS patients. Currently, we are applying for a grant to support research in women with and without obesity to better understand why PCOS women are more likely to be obese. We will have all our study participants look at pictures of food and non-food items after a small meal while getting functional magnetic resonance imaging of the brain. This will help us understand how PCOS process food and which hormones may correlate with brain activity in response to food. We are hoping to use the data to better understand obesity in PCOS women and provide better weight loss strategies for PCOS women.

In conclusion, our partnership with the KUWMP has been crucial for helping many women (and their partners) attain a healthy weight. As an extremely busy practitioner, the KUWMP has been essential in providing comprehensive care to patients. Although achieving a healthy weight is a strong priority for all of our practitioners, most do not have time to fully address the needs of patients attempting weight loss. Through the KUWMP, we have been able to help many couples achieve healthy pregnancies. We have also helped many patients who were struggling with multiple medical co-morbidities and helped them reduce the number of medications they take and improve the quality of their lives. We are very fortunate to have a wonderful resource like the KUWMP at the University of Kansas and hope to continue our fruitful partnership for many years.
Weight Management in Individuals with Autism
By Dr. Lauren Ptomey

March is Autism Awareness Month. Recent surveys show that 67% of adolescents with autism are overweight or obese. The Center for Physical Activity and Weight Management is researching strategies to improve weight management and physical activity in adolescents with intellectual and developmental disabilities, including autism. We recently completed a physical activity study in 31 adolescents with disabilities including autism. In this study our health educators delivered 30-minute physical activity lessons, 3 days a week, to groups of participants over video chat on iPad tablets. Participants increased their daily steps by around 2,000 steps per day. We have just started another study looking at strategies to promote weight management in adolescents with disabilities including autism. In this 18-month study adolescents will be given a personal health educator who will work with them to eat better and increase their physical activity. They will follow one of two different diets, and have the program delivered to them face to face or over an iPad tablet.

Lose Weight and Sleep Better
By Dr. Amanda Szabo-Reed

A recent report for the Centers for Disease Control (CDC) suggests that one-third of Americans do not get enough sleep. Getting less than 7 hours of sleep per night is associated with an increased risk of obesity, type II diabetes, high blood pressure, and the list goes on. In the short, we all need to find ways to get more rest at night.

You may say to yourself, I don’t have time to sleep. This means you need to improve your sleep efficiency. To do this, the answer may be as easy as 1,2,3!

1. Exercise- Research suggests that getting moderate aerobic exercise everyday (CDC recommends 30 minutes or more) can help to not only improve the amount of time you stay asleep, but also the amount of deep sleep (REM).
2. Eat better- Besides eliminating caffeine, alcohol and nicotine before bed, decreasing foods with processed sugar and adding in more healthy fruits, vegetables, and lean protein can also help.
3. Lose weight- Research has shown that obesity-related sleep disorders, such as sleep apnea, improve markedly with weight loss. In addition, losing weight can help to reduce snoring, daytime sleepiness, and improve overall sleep quality.
Identifying a Good Weight-Loss Program

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With all the focus on weight in our society and the fact that excess body weight is linked to increased risk of multiple health issues, it isn’t surprising that millions of people are seeking weight-loss programs. While some diets or eating patterns are healthy and can lead to weight loss, be aware of extreme, unrealistic plans that do not improve your health and will set you up for failure.

Whether you are a clinician referring patients to a weight-loss program or you are someone seeking out a weight-loss program on your own, how can you identify a good weight loss program? A joint report from the American College of Cardiology, American Heart Association Task Force on Practice Guidelines and The Obesity Society identified a few key components to look for when in search of a weight-loss program:

1. Intensity. Does the program have enough intensity to have an effect (14 or more sessions in six months)? Currently, the most effective behavioral weight loss treatment is a comprehensive in-person or over the phone weight loss interventions providing individual or group sessions by a trained interventionist with a minimum of 14 sessions within a 6 month period.

2. Dietary Modification. Does the program follow research based dietary strategies? Diets that promise rapid weight loss or tell you to cut certain foods out of your diet, are often not sustainable over long periods of time. A good, sustainable weight management program incorporates healthy lifestyle changes and provides you with evidence-based research showing effectiveness of the diet and improves people’s health and quality of life over the long-term.

3. Physical Activity. Is physical activity encouraged as part of the program? A comprehensive lifestyle intervention program should prescribe increased aerobic physical activity (such as brisk walking) for minimum of >150 minutes/week (equal to >30 minutes/day, most days of the week). Higher levels of physical activity, approximately 200 to 300 minutes/week, are recommended to maintain lost weight or minimize weight regain long-term (>1 year).

4. Behavioral Strategies. Are effective self-monitoring and planning activities incorporated? Comprehensive lifestyle interventions should provide a structured behavior change program that includes regular self-monitoring of food intake, physical activity, and weight. These same behaviors are recommended to maintain lost weight, with the addition of frequent (i.e., weekly or more often) monitoring of body weight.

5. Unproven Supplements. Does the program sell herbal and dietary supplements with no therapeutic value? If the program uses supplements that include dietary supplements, nutraceuticals, or other products that are not approved by the Food and Drug Administration in the treatment of obesity (e.g., vitamins, minerals, herbal, botanicals, amino acids, enzymes, hormones) then these programs should be approached with caution.
Celebrating National Nutrition Month– “Savor the Flavor of Eating Right”
By Felicia Steger, RD

Family meals promote healthier eating and family relationships. Food is a source of pleasure and enjoyment. You can enjoy food traditions while choosing foods that provide nourishment and nutrients to your body. Each year the Academy of Nutrition and Dietetics celebrates National Nutrition Month during March, and this year the theme is, “Savor the Flavor of Eating Right,” emphasizing mindful eating and a healthier lifestyle.

Where are you eating your meals? With whom are you eating them? If the majority of meals and snacks are eaten in front of the TV or computer screen, nibbled between meetings, or eaten on the way to or from errands, you are missing out on the benefits of mindful eating. Taking the time to really stop and enjoy the smell, texture and taste of your food while appreciating the nourishing components can mean less reliance on sugar, fat, and salt to shock our taste buds into awareness. It also helps us develop a better sense of what our body needs and can prevent overeating while encouraging foods that provide more than just flavor. Further, show appreciation for the health of your friends and loved ones by preparing a new dish and slowing down to enjoy it together.

Tips:
· Experiment with various herb and spice blends to provide flavor to nourishing foods without calories or salt. New combinations can put a fresh spin on foods and bring out the flavor components of fruits and vegetables. Notice how the changes impact the aroma and flavor.
· Take advantage of the remaining weeks of prime citrus ripeness with broiled grapefruit halves sprinkled with ground cinnamon and ginger.
· Ask your family or friends what they think and what healthy recipes they have tried and appreciate healthy eating for the health of your bodies as well as your social relationships.