Nutrition for Weight Management

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Eating Behaviors

• For maintenance of long-term weight loss, you MUST commit to lifestyle changes for the rest of your life. These include:
  o Consuming a healthy diet
  o Consistent self-monitoring
  o Regular physical activity

• If not, weight regain is likely to occur.

• Learn to practice mindful eating.
Calories

- Your body’s energy currency
- Sources in your diet:
  - Carbohydrates (4 calories/gram)
  - Proteins (4 calories/gram)
  - Fats (9 calories/gram)
- When you meet with the dietitian, they will discuss your individual calorie needs for weight loss.
Weight Management

- **Benefits:** A weight loss of as little as 5-10% can have a positive impact on health.
- Focus on gradual, sustainable weight loss rather than “quick fix” diets.
- In order to lose weight and keep it off you will need to decrease the amount of calories you consume and increase the amount of calories you burn (through exercise).
Weight Management Basics

- Eat an overall healthy diet that emphasizes nutrient dense foods:
  - A variety of fruits and vegetables
  - Whole grains
  - Low-fat dairy products
  - Skinless poultry and fish
  - Nuts and legumes
  - Non-tropical vegetable oils
- Limit intake of saturated fats, trans fats, sodium, red meat, fried foods, and sweets
- Avoid foods and beverages with added sugars
- Consume alcohol only in moderation (empty calories)
- Limit your portion sizes
- When eating out
  - Skip the bread, chips, crackers brought before the meal
  - Order appetizer portions or split entrée with friend/family
  - Ask for a to-go box before food arrives
  - Skip dessert
- Be active most days of the week
Plate Method

Non-starchy vegetables

Lean Protein  Starch

Fruit  Dairy
Portion Distortion

- A “serving” size is a specific measurement of food or drink such as 1 slice of bread or 1 teaspoon of oil and is based on dietary guidelines.
- A “portion” size is the amount of food or drink a person chooses to consume at one time whether at home or out at a restaurant. The portion you consume may be more or less than a serving.
- Portion sizes have grown and are much larger now than even just 20 years ago. This contributes to extra calorie intake, which can add up quickly.
- The next few slides demonstrate this “portion distortion.”

Slides marked with 👨‍⚕️ are adapted from National Heart, Lung, and Blood Institute Obesity Education Initiative, Portion Distortion Slides

https://www.nhlbi.nih.gov/health/educational/wecan/eat-right/portion-distortion.htm
**20 Years Ago**

Coffee  
(with whole milk and sugar)

45 calories  
8 ounces

**Today**

Mocha Coffee  
(with steamed whole milk and mocha syrup)

350 calories  
16 ounces

Calorie Difference: 305 calories
PEPPERONI PIZZA

20 Years Ago

500 calories

Today

? How many calories are in two large slices of today’s pizza?

850 calories

Calorie Difference: 350 calories
20 Years Ago

390 calories
1 ½ cups

Today

? How many calories are in today’s chicken Caesar salad?

790 calories
3 ½ cups

Calorie Difference: 400 calories
What Can I Expect When I See A Dietitian?

- Dietitians are food and nutrition experts
- Your first appointment will last roughly an hour
- Usually you will get asked some version of “what brings you in to see me today?”
  - Think about the five reasons you most want to lose weight
- You’re going to be asked questions about:
  - Medical history
  - Prior attempts at weight loss/weight history
  - Weight Goals
  - Food allergies
  - Medications/supplements
  - Who does the majority of cooking/grocery shopping
  - Frequency of eating out
  - Physical activity
- Please bring a 3-5 day detailed food record.
- Goal setting
- Receive education on healthy lifestyle habits for weight management
Stages of Change

- **Precontemplation**: not even thinking of changing behaviors
- **Contemplation**: considering making changes
- **Preparation**: actively planning to make changes in the next month
- **Action**: making behavior changes (within the past 3 to 6 months)
- **Maintenance**: engaging in new behavior for >6 months, new behavior is now part of routine, some slips may have occurred
- **Relapse**: full regression to old behaviors
Self-Monitoring

- Research shows that individuals who self-monitor tend to be more successful with weight loss and maintenance of weight loss. Techniques for self-monitoring include:
  - Food journaling
  - Regular weighing—about once a week
  - Exercise logs/equipment such as pedometers or accelerometers
Self-Monitoring: Food Journaling

- Be specific, record everything you eat and everything you drink
  - “If you bite it, write it”
    - Even that handful of M&Ms from your coworker’s candy dish or bite of your child’s food
  - Measure and record portion sizes and calories
  - Try using free apps such as MyFitnessPal or LoseIt
- Try to “write before you bite”
  - Recording in food diary before you actually eat the food helps you to determine whether or not you actually want to eat the specific food
  - If you don’t record right away, you are more likely to forget what you’ve had to eat or drink
Self-Monitoring: Regular Weighing

- Weighing yourself weekly can help you track your progress with weight loss/weight maintenance
- Don’t weigh yourself more than once a week
  - Daily fluctuations may occur that are not necessarily an indicator of actual weight
- Pick a consistent scale to weigh on and try to weigh on a consistent day/time (ex. Every Monday at 0700)
- Keep a log of your weights
  - This can help you stay on track or get back on track more quickly
Self-Monitoring: Exercise Log

- Keep an exercise log that includes:
  - the number of minutes engaged in exercise
  - the type of exercise engaged in
  - perceived level of exertion (easy, moderate, difficult, etc)

- Many of the food tracker apps also allow you to log exercise

- Apps such as MapMyFitness use GPS on phone to track routes and distance

- Fitbits and other devices can help you track your daily movement, heart rate, etc
Physical Activity

- Health benefits of moderate exercise include:
  - Improved blood circulation, blood pressure, and cholesterol levels, which reduces risk of heart disease
  - Improved blood sugar levels
  - Increased energy levels
  - Preventing bone loss
  - Stress reduction
  - Improved sleep
  - Improved mood
  - Weight control
Physical Activity

- For overall heart health, American Heart Association recommends:
  - At least 30 minutes of moderate-intensity aerobic activity at least 5 days per week for a total of 150 minutes/week
  - AND
  - Moderate-to high-intensity strength training at least 2 days per week

- If unable to exercise for 30 minutes, try breaking up exercise into 5-10 minute blocks, several times per day

Remember, *SOMETHING* is always better than nothing!
Mindful Eating

THREE STEPS TO MINDFUL EATING

STEP 1: TASTING FOOD

STEP 2: IDENTIFYING MINDLESS HABITS

STEP 3: KNOWING YOUR TRIGGERS
Mindful Eating

- Focus on being in the present, avoiding distraction while eating
- Involves paying attention to:
  - WHAT you eat
  - HOW you eat
  - WHEN you eat
  - WHERE you eat
- You may find yourself more satisfied by what you are eating, if you start practicing mindful eating and truly take the time to taste and savor your food
Weighing Your Options

Restrictive and Malabsorptive

Gastric Sleeve

Restrictive

Restrictive and Malabsorptive
The Basics: “How do I eat to live not live to eat?”

- **Protein** is the priority
  - Must be eaten first
  - Must be eaten at each meal
- **STOP** at the first sign of fullness
  - Intake at meals should be $\frac{1}{4}$- $\frac{1}{2}$ cup (4-8 Tbsp)
- Eat/sip slowly, take small bites, and CHEW *until liquid*
- Limit snacking
The Basics: “How do I eat to live not live to eat?”

- Eliminate high fat and high sugar foods
- Beverages must be sugar free (<10 calories/serving), non-carbonated, and caffeine free. No straws
- Liquids must be separate from meals by 30 min before and after eating
- Vitamins/minerals must be taken daily for the rest of your life
- Even after surgery, weight re-gain is likely if you do not adopt required diet and exercise habits for life
Beyond the Food

- WLS is a TOOL, it will NOT “fix” food issues.
- Weight loss and maintenance still takes work.
- Some things to think about:
  - What will I do when I cannot turn to food for comfort? How will I deal with those underlying emotions/memories?
  - Am I willing to sacrifice the foods I currently like and a “normal” eating pattern for the benefits of weight loss?
  - Will my family and friends support my changes?
  - Do I think that just because I am finally thin, all my problems will be solved? What if they aren’t?
Diet Stages

Pre-Surgery Liquid Diet - 2 weeks
- 800-1200 calories per day using low-carbohydrate, low-fat, high protein shakes
- Potential products include Atkins Advantage®, EAS Myoplex Carb Sense®, Designer Whey®
- Purpose
  - to decrease liver size and fatty tissue around stomach
  - to prevent a “Last Supper” or final binge prior to surgery
Diet Stages

Post-Surgery:
- Clear Liquid Diet – while in hospital
- Full Liquid Diet – 2 weeks
- Pureed Diet – 1 week
- Soft Diet – 1 week
- Regular Diet (texture)
Working with the Dietitian

- Required to meet with dietitian for a minimum of three (3) nutrition appointments but you must continue seeing your dietitian monthly
  - Goals:
    - Know what is expected of you
      - Learn about lifestyle modifications for successful weight loss and maintenance of that weight loss
      - Be engaged and participate in visits
    - Show that you understand and are willing to follow guidelines
      - Keep a daily food and exercise log, bring to every appointment
      - Lose weight (1-2lb/week)
        - Must lose minimum of 10lb to be a candidate for surgery
      - Attend at least (5) support group meetings—no more than 1 a week
Support Group Meetings

**Walter Reed Bethesda**
1st and 3rd Thursdays
Time: 11:00am
Location: General Surgery Conference Room
POC: Lauryn Muller
Phone: 301-295-4442

2nd and 4th Fridays
Time: 11:00am
Location: General Surgery Conference Room
POC: Lauryn Muller
Phone: 301-295-4442

**Ft. Belvoir Army Community Hospital**
1st Tuesday of each month
Time: 4:30pm-5:30pm
Location: Oak 1-333
Phone: 571-231-3369

**Kimbrough Ambulatory Care Center**
2nd Friday of each month
Time: 12:00
Phone: (301) 677-8606

**Dumfries Health Center**
3rd Tuesday of each month
Time: 4:30pm – 5:30pm
Location: Conference Room
POC: 703-441-7506

**Other Options**
Washington Hospital Center
Time: 9:30am-11am
1st Saturday of the month
POC: (202) 877-7788

**Remote conference (VTC) available for WRB support group from Dumfries and FBCH**
Dietitian Follow-up After Surgery

- Periodic post-surgery appointments
  - Follow-up with an RD is very important for success with weight loss AND prevention of malnutrition
  - Recommended minimum follow-up with RD:
    - Sleeve and Bypass
      - 1 weeks
      - 3 months
      - 6 months
      - 9 months
      - Every 6 months x 2 years
      - Yearly
While You Prepare...

- Making changes now helps you determine if the benefits of surgery are worth the sacrifices
  - Eliminate beverages with sugar, caffeine, and carbonation
  - Do not drink with meals
  - Eliminate fried food, processed meats, and other fatty foods
  - Start listening to hunger and fullness cues
  - Take smaller bites and chew 20-30 times before swallowing
  - Eat a protein source at each meal (3 meals/day)
  - Start an exercise/walking program (if physically unable, a note from your doctor is required stating such)
Dietitians

- Walter Reed National Military Medical Center (Walter Reed Bethesda)
- Ft. Belvoir Community Hospital
- Andrew Rader Health Clinic (Ft Myer)
- Dumfries Health Center
- Kimbrough Ambulatory Care Center (Ft Meade)
- Dover Air Force Base

- Call 301-295-4442 to make appointment with Dietitian in Bariatric Clinic at Walter Reed Bethesda
- Call Appt. Line 1-855-227-6331 to make an appointment with Dietitian at different location or see your packet for specific contact info for different locations
Questions?

DIETITIAN
APPOINTMENTS, WRNMMC GENERAL SURGERY CLINIC
301.295.4442

EXERCISE PHYSIOLOGIST
APPOINTMENTS, WRNMMC OUTPATIENT NUTRITION CLINIC
301.295.4065