Improving Public Health by Understanding Diversity in Metabolism, Body Weight & Calorie Requirements

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# Learning Objectives:

- Use the NIH body weight planner to accurately estimate the calorie requirements of patients who would benefit from changing their body composition
- 2. Use calorie requirements to make practical recommendations for patients



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N Engl J Med. 1990 May 24;322(21):1477-82.

### The response to long-term overfeeding in identical twins.

Bouchard C<sup>1</sup>, Tremblay A, Després JP, Nadeau A, Lupien PJ, Thériault G, Dussault J, Moorjani S, Pinault S, Fournier G.

#### Author information

#### Abstract

We undertook this study to determine whether there are differences in the responses of different persons to long-term overfeeding and to assess the possibility that genotypes are involved in such differences. After a two-week base-line period, 12 pairs of young adult male monozygotic twins were overfed by 4.2 MJ (1000 kcal) per day, 6 days a week, for a total of 84 days during a 100-day period. The total excess amount each man consumed was 353 MJ (84,000 kcal). During overfeeding, individual changes in body composition and topography of fat deposition varied considerably. The mean weight gain was 8.1 kg, but the range was 4.3 to 13.3 kg. The similarity within each pair in the response to overfeeding was significant (P less than 0.05) with respect to body weight, percentage of fat, fat mass, and estimated subcutaneous fat, with about three times more variance among pairs than within pairs (r approximately 0.5). After adjustment for the gains in fat mass, the within-pair similarity was particularly evident with respect to the changes in regional fat distribution and amount of abdominal visceral fat (P less than 0.01), with about six times as much variance among pairs as within pairs (r approximately 0.7). We conclude that the most likely explanation for the intrapair similarity in the adaptation to long-term overfeeding and for the variations in weight gain and fat distribution among the pairs of twins is that genetic factors are involved. These may govern the tendency to store energy as either fat or lean tissue and the various determinants of the resting expenditure of energy.



# Patient Example:

Gender: Women Age: 45 years Height: 5'6'' Weight: 200 lbs BMI: 32.3 Waist Circumference: 40 inches

Fasting blood sugar: 115 mg/dL Hemoglobin A1c: 6.2% Would this patient benefit from decreasing body fat via TLC? How much weight loss should we recommend?

# FROM THE ACADEMY

## **Position Paper**



# Position of the Academy of Nutrition and Dietetics: Interventions for the Treatment of Overweight and Obesity in Adults



#### ABSTRACT

It is the position of the Academy of Nutrition and Dietetics that successful treatment of overweight and obesity in adults requires adoption and maintenance of lifestyle behaviors contributing to both dietary intake and physical activity. These behaviors are influenced by many factors; therefore, interventions incorporating more than one level of the socioecological model and addressing several key factors in each level may be more successful than interventions targeting any one level and factor alone. Registered dietitian nutritionists, as part of a multidisciplinary team, need to be current and skilled in weight management to effectively assist and lead efforts that can reduce the obesity epidemic. Using the Academy of Nutrition and Dietetics' Evidence Analysis Process and Evidence Analysis Library, this position paper presents the current data and recommendations for the treatment of overweight and obesity in adults. Evidence on intrapersonal influences, such as dietary approaches, lifestyle intervention, pharmacotherapy, and surgery, is provided. Factors related to treatment, such as intensity of treatment and technology, are reviewed. Community-level interventions that strengthen existing community assets and capacity and public policy to create environments that support healthy energy balance behaviors are also discussed. J Acad Nutr Diet. 2016;116:129-147.

#### **POSITION STATEMENT**

It is the position of the Academy of Nutrition and Dietetics that successful treatment of overweight and obesity in adults requires adoption and maintenance of lifestyle behaviors contributing to both dietary intake and physical activity. These behaviors are influenced by many factors; therefore, interventions incorporating more than one level of the socioecological model and addressing several key factors in each level may be more successful than interventions targeting any one level and factor alone. "Weight loss of only 3 to 5% that is maintained has the ability to produce clinically relevant health improvements (eg, reductions in triglycerides, blood glucose, and risk of developing type 2 diabetes)."

"Larger weight loss reduces additional risk factors of CVD (eg, low-density and high density lipoprotein cholesterol and blood pressure) and decreases the need for medication to control CVD and type 2 diabetes. Thus, a goal of weight loss of 5 to 10% within 6 months is recommended."



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Metric Units

6

Next Step 🔿

Estimate Your Level

lbs

yrs

in.

v

#### Step 1 of 4 - Enter your starting information

200

45

5

1.6

Female

ft.

Starting Information

Weight

Sex

Age

Height

Physical

Activity Level 1

U.S. Units

#### Switch to Expert Mode

#### Starting Information

Enter your starting information, including your weight, sex, age, height, and physical activity level.

#### Physical Activity Level

Click the "Estimate Your Level" button to find your physical activity level.

Typical physical activity level numbers range from 1.4 (sedentary) to 2.5 (very active).

The default value of 1.6 describes someone who does very light activity at school or work (mostly sitting) and moderate physical activity (such as walking or cycling) at least once a week.

**Disclaimer**: This information is for use in adults defined as individuals 18 years of age or older and not by younger people, or pregnant or breastfeeding women. This information is not intended to provide medical advice. A health care provider who has examined you and knows your medical history is the best person to diagnose and treat your health problem. If you have specific health questions, please consult your health care provider.



#### **Body Weight Planner** | Balancing Your Food and Activity

#### Step 1 of 4 - Enter your starting information

#### Starting Information U.S. Units Metric Units Weight 200 lbs Sex Female v Age 45 yrs Height 5 ft. 6 in. 1.6 Physical Activity Level 1 Estimate Your Level

# Starting Information

Enter your starting information, in physical activity level.

#### Physical Activity Level

Click the "Estimate Your Level" bu

Typical physical activity level num active).

# Describe your physical activity at work or school: Very Light v Sitting at the computer most of the day, or sitting at a desk. Describe your physical activity at leisure time: Moderate v Regular activity at least once a week, e.g., walking, bicycling (including to work) or gardening. Save Cancel The default value of 1.6 describes someone who does very light activity at school or work (mostly sitting) and moderate physical activity (such as walking or cycling) at least once a week.

Estimate Your Physical Activity Level

Next Step 😑



## Step 2 of 4 - Enter your goal weight Switch to Expert Mode Goal Weight Weight Goal Enter your goal weight and when you would like to reach it. Goal Weight 180 lbs You can enter a number of days OR choose a specific date using the calendar. I want to reach my goal in 140 days OR select a date I want to reach my goal by 9/24/2018 Θ Previous Step Next Step 👄 National Institute of ΝH **Diabetes and Digestive** and Kidney Diseases



Recommendations for 1 lb of fat loss per week



Recommendations for 2 lbs of fat loss per week



#### Body Weight Planner | Balancing Your Food and Activity Æ Starting Information Lifestyle Change Goal Weight Weight 200 lbs Weight Goal Physical Activity Change (Optional) Results Weight Change Phase Goal Weight 180 Kilojoules lbs Calories Sex Female v 9 To reach my goal, I will change my physical activity by % Calculate I want to reach my goal in 140 In order to maintain days Age 45 yrs 2,515 your current weight, you should eat: Calories/day **Goal Maintenance Phase** OR select a date 9 Height 5 ft. 6 in. feet To maintain my goal, I will % change my physical activity by Calculate To *reach* your goal of **180 lbs** in **140 days**, **\*\*\*** I want to reach my goal by 9/24/2018 1,899 1.6 Physical Calories/day you should eat: Activity Level 1 Estimate Your Level To *maintain* your goal of **180 lbs**, 2,416 Calories/day you should eat:

## Body Weight Planner | Balancing Your Food and Activity

Starting Information	Advanced Controls: OFF		
Weight	200	lbs 🔻	
Sex	Female	v	
Age	45	yrs	
Height	5 ft. 6 in.	feet 🔻	
Physical Activity Level <b>1</b>	1.6 Estimate Yo	Jurlevel	



- ① The information you entered results in a calorie level that is too low.
- Calorie goals must be at least 1000 calories/day. Food group targets and nutrient recommendations will not be met below 1000 calories/day.
- The last change you made has been reset so that you can enter a different value. Try giving yourself more time to achieve your goal, changing your activity level, or setting a different goal.



 Patients can track food & calorie intake with an App on their phone, like My Fitness Pal, using goals & calorie recommendations from the NIH body weight planner







 Tracking body weight over time provides insight into calorie intake & expenditure

Calorie Deficit = Decreasing Weight

Calorie Balance = Weight Maintenance

Calorie Surplus = Increasing Weight

# How else is this information useful?





3. Provide calorie guidelines for meals & snacks that patients can use when eating out:

Daily goal: 1,900 calories/day

If a patient ate 3 meals and 2 snacks per day, they could aim for 500 calorie for meals and 200 calories for snacks





<b>Nutrition Facts</b> Serving Size 2/3 cup (55g) Servings Per Container About 8					
Amount Per Servin	g				
Calories 230	Ca	lories fron	n Fat 72		
		% Dail	y Value*		
Total Fat 8g			12%		
Saturated Fat	1g		5%		
<i>Trans</i> Fat 0g					
Cholesterol Or	ng		0%		
Sodium 160mg			7%		
Total Carbohy	drate 37	7g	12%		
Dietary Fiber 4	1g		16%		
Sugars 1g					
Protein 3g					
Vitamin A			10%		
Vitamin C			8%		
			20%		
Iron			45%		
* Percent Daily Values are based on a 2,000 calorie diet. Your daily value may be higher or lower depending on your calorie needs.					
Total Eat	Calories:	2,000	2,500		
Sat Fat Cholesterol Sodium Total Carbohydrate Dietary Fiber	Less than Less than Less than	20g 300mg 2,400mg 300g 25g	25g 300mg 2,400mg 375g 30g		

<b>Nutritio</b>	n Facts
8 servings per cor Serving size	ntainer 2/3 cup (55g)
Amount per servin Calories	<sup>®</sup> 230
	% Daily Value*
Total Fat 8g	10%
Saturated Fat 1g	5%
<i>Trans</i> Fat 0g	
Cholesterol Omg	0%
Sodium 160mg	7%
Total Carbohydrat	te 37g 13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Ad	ded Sugars 20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 235mg	6%



4. Understanding the daily calorie deficit necessary to reduce body fat allows a provider to predict the impact of individual dietary change

2,515 - 1,899 = **616 calorie deficit** 

Body Weight Pl	anner   Balancing				
Step 4 of 4 - Results					
➡ Results	➡ Results				
Calories	Kilojoules				
In order to <i>maintain</i> your current weight, you should eat:	2,515 Calories/day				
To <i>reach</i> your goal of <b>180 lbs</b> in <b>140 days</b> , you should eat:	1,899 Calories/day				
To <i>maintain</i> your goal of <b>180 Ibs</b> , you should eat:	2,416 Calories/day				
🗢 Previous Step	Expert Mode \varTheta				

24 ounces of Pepsi (300 calories)



1. The NIH Body Weight Planner is a free, easy to use & evidence based tool to estimate calorie requirements

2. This information can be used to educate patients during visits & make practical recommendations that don't necessarily require counting calories

Thank you! Any Questions?

Gavin Moloney, MS, RD