

Obesity: Other options to reduce weight

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Background. If we are overweight, and would like to lose a few kilos for health, cosmetic or another reason, there are only three options. Either (a) we reduce our food intake; (b) we increase our physical activity; or (c) do both. Regrettably, there are no quick fixes; no magic bullets. As we are all only too well aware, there are many, many ways advertised or promoted which claim to help us in this mission. They include diets absolutely guaranteed to lose us several kilograms in only a few weeks, if not days; exercise machines, supplements and routines which make belly fat just melt away; drugs which slim us down miraculously; foods from exotic places which really cut down our appetite; dietary supplements which make us feel full, or boost our metabolism; and activities like fasting and massage which lead to impressive weight loss. Many of these do indeed lead to a satisfying reduction of body mass – to begin with. Alas, many, if not most, of these do not work in one crucial aspect – *any weight loss is not kept up*. And when the diet or whatever is discontinued, the early weight loss is rapidly regained, and even worse, surpassed soon after. *Dieting usually leads to weight gain*.

For Tibb, achieving a satisfactory body mass is a task best achieved via holistic lifestyle changes. Harmony between energy income as food and drink, and energy spent to support growth, survival and reproduction needs to be re-established, applying measures which do not upset or interfere with Physis, our inner doctor and administrator.

Modifying food and drink

For those of us who are overweight, but not yet ready or reluctant to take on a diet, weight loss can be achieved by making relatively simple changes to our normal daily food and drink intake. The main dietary culprit for weight gain is undoubtedly sugar, whether as table sugar (*sucrose*) or, increasingly, corn (fructose) syrup. These sweeteners are now present in a vast, and surprising, range of commercially available foods, especially in processed items and soft drinks, and often in the most unexpected products.

The changes in eating habits include:

- **Drastically cut down sugar.** Many processed foods are simply loaded with sugar or corn syrup. These refined sugars are the main suspects behind obesity, type 2 diabetes and several other chronic disorders. And not just foods: drinking soft drinks and beverages boosted with sugar or corn syrup, for example, notoriously cause body weight to rise rapidly in both children and adults.
- **Eat more fish and chicken.** These contain less ‘bad fats’, and more ‘good fats’ than hard red meats. Foods rich in animal fats are not now considered as risky as they were in the recent past, but they are still energy dense.

- **Consume more vegetables and fruit.** These contain more fibre, and act to suppress appetite. Not an easy option; so continuing motivation needs to be high for most of us.
- **Control regular alcohol intake.** Alcoholic drinks are calorie-rich, and usually contain lots of sugar. They also tend to reduce our motivation to lose weight.

Dieting

Dieting is a formal pattern of eating and drinking, where the amounts and types of food and drink we consume is listed in order to: (a) lose excess body mass; (b) to look better, more attractive; (c) improve health, so lead a longer and healthier life; (d) as part of a spiritual or philosophical commitment.

Restricting our consumption of processed food, especially refined sugar and bread products, is the key to sustained weight loss. Most processed foods, such as breakfast cereals and pastries, contain high levels of sugar or corn syrup as sweeteners, and these are rapidly absorbed into the body. This leads to a response by Physis to restore normal blood glucose metabolism, by bringing insulin (and other regulatory hormones) into play. The eventual result is the laying down of body fat in our energy storage sites.

No doubt: most diets work in for a while. If we stick to an eating plan that restricts the intake of energy-providing calories, then weight loss will occur, especially if we exercise as well. Unfortunately, this effect only persists for a short time, so the 'feel good' factor quickly dissipates.

Tibb accepts that serious dieting is easier said than done. Real weight loss usually takes some time. Diets claiming rapid weight loss disturb inner harmony severely, and our Physis acts to compensate for this. The result is that rapid weight gain usually follows rapid weight loss.

• **The Banting diet:** The person dieting selects foods which are low in carbohydrate, high in fat. Avoided are sugary foods, cereals and vegetable-based foods – bread, pasta, rice, mealie, confections, and many fruits. Instead favour of high protein items like fish, eggs and meat, fatty foods like animal fats and full-fat dairy products, and fruits like berries and avocado. The aim of the diet is to control insulin resistance, which is regarded as the metabolic disturbance underlying obesity, diabetes and other chronic disorders.

• **The Atkins diet:** By cutting down on carbohydrate-rich foods, swings in our insulin level are controlled. These are responsible for the laying down of fatty deposits as a reserve energy store. People on this diet instead eat more high quality protein, which does not easily convert to fat in the body. Foods made up of refined carbohydrates, sugar, corn syrup and white flour are rigorously excluded.

• **The Paleo diet:** Also called the 'caveman diet', it is basically a high-protein, high-fibre eating programme. The dieter eats plenty of fresh, lean meat, fish, fruits, and vegetables, and healthier fats.

• **The Mediterranean diet:** The person dieting eats plenty of cereals and other plant-rich foods, moderate amounts of oily fish, and lots of fresh fruit, nuts, peas and beans. Olive oil is the main source of fats in the diet, supported by yoghurt and cheeses. Some lean red meat is allowed, as is wine and fruit juices in moderation.

• **The Zone diet:** The dieter eats meals made up of around 40% good quality carbohydrates, with the rest divided equally between fats (esp. olive oil and avocado) and protein (eggs, beans and nuts). The aim is to regulate insulin levels, as wild swings of this hormone occurring in the normal Westernised diet leads to fat depositing as an energy reserve.

• **The Vegetarian diet:** Most dieters eat only fruit, vegetables, nuts and legumes. Some allow some animal-derived foodstuffs, like fish, honey, eggs or dairy products.

• **The Weight Watchers diet:** This is part of a long-term self-monitoring programme of diet, exercise and social support. The programme is based on a points system, depending how overweight the person dieting is. Portions of different foods are allocated a certain number of points. Dietary fibre features prominently, but hard fats are avoided.

Tibb accepts that diets which help to restore harmony to the endocrine factors regulating our body mass are valuable for reducing obesity. However, many diets are (a) ineffective; (b) difficult to maintain over the long run; (c) possibly dangerous through disturbing our homeostasis; (d) demand a lot of personal motivation.

Appetite suppressants

Most of these synthetic, new-to-nature drugs control appetite regulation and the person's feelings of fullness by increasing the brain levels of certain nerve chemicals (*serotonin* and *catecholamines*) involved in appetite. They only work as long as they are taken, so any weight loss is generally regained soon after they are stopped. A major problem over time is their side effects: headache, insomnia, constipation and sweating. Whilst most are relatively harmless, they can nevertheless have a negative impact on the person's quality of life. Other problems are (a) their potential for abuse and addiction; (b) increased risk in patients with high blood pressure, heart problems or in danger of a stroke.

Tibb views these drugs as unacceptable for a person who is chronically overweight. Apart from the expense, their side effects usually rule out long term therapy. Dependence is a real problem with these drugs, which is difficult to deal with as it is not identified until late on.

Physical exercise

This is a critical part of our effort to lose weight. Food restriction and physical exercise go hand-in-hand. We are unlikely to lose weight from exercise alone: fat stores may reduce, but muscle mass increases. However, without it we are not likely to succeed in losing any meaningful body weight. By increasing physical activity and exercise, our body's fat deposits are drawn upon to provide the extra energy demanded. In addition, our basic metabolism is increased by regular exercise, so even when resting our weight loss lingers on.

There are many practical ways to increase exercise or activity; one or more that suits us best should be chosen.

They include:

- **Personal** – jogging, biking, rowing, swimming
- **Routine activities** – housework, washing car, using steps rather than lift, gardening, parking some distance away.
- **Social** – organised walking, dancing, hiking clubs.

Another positive feature is that increased physical activity suppresses the appetite naturally, so leading to lower food consumption. Aerobic exercises (rather than anaerobic ones like weight lifting) are preferred. Anaerobic exercise tends to put on weight due to it stimulating increased muscle mass.

Tibb sees physical exercise as a major lifestyle factor in reaching optimum body mass. However, the temperament of the person losing weight needs to be considered. Also, weight loss is rarely achieved with exercise alone – other lifestyle factors have to be involved.

Unfortunately, physical exercise over the long term does require a certain level of personal commitment, perseverance and even social support.

Weight loss plans

Mildly obese persons may seek the help of a commercial weight-loss programme. These are 'motivation heavy' and emphasise realistic goals, gradual progress, sensible eating, and exercise. They are very helpful for many, and are recommended by many healthcare practitioners

Programmes that promise unrealistically rapid weight loss or feature highly restricted diets are not effective, can lead to rebound weight gain, and, in some cases, can be dangerous due to disturbed metabolism and harmony. This therapy, however, should not be confused with commercial liquid protein diets or commercial weight-loss shakes and drinks. Doctors may tailor these diets to specific patients who are monitored carefully, and use the diets for only short periods of time.

Dieting additives and supplements

A diverse range of substances, natural or artificial, are taken to help those who wish to lose body mass. They act in different ways, for different outcomes. They include:

Caffeine: This commonly consumed alkaloid boosts the body's metabolism.

Chromium: This metallic element increases the sensitivity and response of the body's cells to the hormone insulin.

Co-enzyme Q₁₀: This is a natural substance, used in the body to help regulate fat metabolism.

5-Hydroxytryptophan: This natural metabolite is involved in reducing appetite intensity.

Fibre supplements: These increase the feeling of fullness by the stomach, so depress the urge to eat.

Surgery

Severely obese people whose dieting and behavior modification have been unsuccessful may undergo surgery. Although less risky now because of better techniques, it is still only performed as a last resort, where other strategies have failed, and where obesity seriously threatens health. One technique involves reducing the size of the stomach (*gastric bands*). Another is liposuction, which physically removes fat from beneath the skin. Yet another is jaw wiring, which can cause painful muscle spasms and damage teeth and gums.

Motivation

Underpinning all our efforts to lose weight is one overwhelming issue: we need to be totally committed and motivated when adopting uncomfortable or unpleasant measures which may be difficult to maintain, anti-social, disruptive of normal daily routines, and even expensive. Weight loss may not occur as expected, or may be erratic, making us disheartened and waver in our efforts.

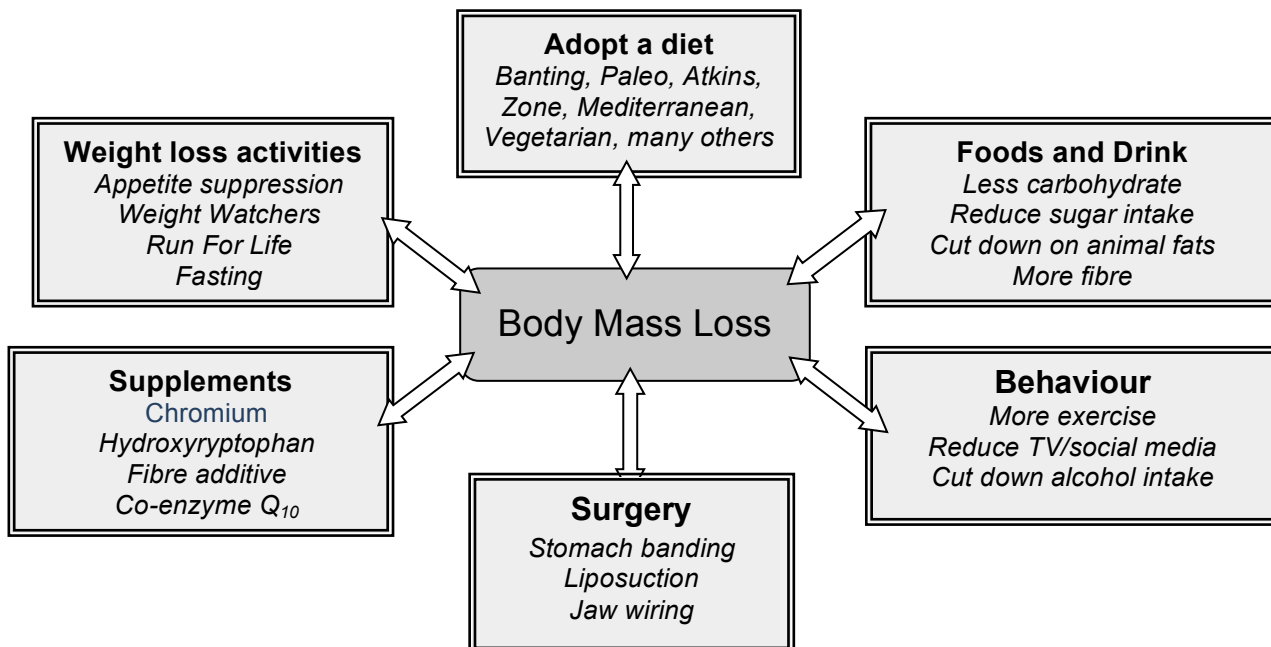
Even so, we need to be convinced that excessive body weight can result in many serious, potentially life-threatening health problems. These not only reduce the quality of our immediate life, but also threaten that of our future. We need to be aware of the dangers that hypertension and diabetes, both constant partners of obesity, pose. We need to be convinced of the increased risk of asthma, arthritis, heart attack and certain cancers which accompany persistent excess body weight. We need to appreciate that many common everyday disorders, like heartburn, lower back pain, gum disease, skin disorders, and some emotional and social problems are the consequence of excessive body weight. Once the reality of these threats is accepted, then the incentive to lose weight becomes firmly embedded.

For Tibb, motivation to lose weight is achieved by providing plausible information on the reality of obesity's threat to health and quality of life. This provides the basis to empower the overweight person into keeping to the Tibb-inspired lifestyle changes, therapies and changes to personal habits which need to be adopted on a permanent basis.

Summary

Losing body mass involves either reducing energy intake by eating less, or increasing energy expenditure, usually by exercising more. The predominant conventional method for losing weight in our society is adopting one of the many diets around, some rational and plausible, others based on doubtful information, often recommended by friends or celebrities. Increasing physical exercise and involving other Lifestyle Factors does not feature so prominently in weight loss attempts. Alas, most diets are doomed to failure: weight regulation is far too complex for a simple intervention such as restricting food intake to work. Most dieters eventually put on weight, despite the promises made by celebrities, promoters of diet pills, and complex behaviour plans. Reducing excess body mass, and keeping it off, takes considerable effort and commitment, and needs a lot of encouragement. 'Yo-yo' dieting can leave the dieter tired, dispirited and heavier still, and with disturbed metabolic harmony. Tibb sees excessive body weight as mostly a lifestyle issue, and needs a holistic approach. Obesity is a visible manifestation of internal disharmony due to a complex mix of influences, both environmental and internal. In addressing this major problem, restoring inner harmony is a priority.

Summary: The conventional approach to reducing body mass:



Further information

Dangers of obesity: www.nhlbi.nih.gov/health/health-topics/topics/obe/risks

Meaning of diets: <http://medical-dictionary.thefreedictionary.com/Diets>

Natural ways of weight loss: www.myhealthtips.in/2013/09/home-remedies-to-treat-obesity-naturally.html

Weight loss plans: www.fitnessmagazine.com/weight-loss/plans/?page=1

Appetite suppressant drugs: www.drugs.com/article/prescription-weight-loss-drugs.html

Tibb and Lifestyle Factors: www.tibb.co.za/articles/lifestyle-the-bedrock.pdf