

Understanding Weight Management

Weight management (aka obesity and overweight management) has evolved in the past decade. The Merriam-Webster dictionary of obesity as most people know it – a condition characterized by the excessive accumulation and storage of fat in the body – is an antiquated definition and does not reflect the current thinking of the complex hormonal and disease interaction related to excess body fat. We all know that carrying excess weight has its cosmetic concerns, but the inflammation associated with obesity directly contributes to development of coronary artery disease, cancer, fatty liver disease, sleep apnea and many other medical conditions. This edition of the newsletter is dedicated to act as a primer to highlight some of the complex issues involved with weight management.

Why is fat weight so hard to keep off?

Weight reduction induces a myriad of changes in the body to create more efficient utilization of the calories we eat and will cause the body to work hard to increase the drive to eat more when weight reduction is achieved. It is good to understand some of the basic hormones involved in the fat maintenance. Fat cells secrete an important hormone called leptin. Leptin interacts with our satiety center in the brain and when leptin levels are high – typically indicating more fat mass in the body - we have less of an appetite. With weight reduction overall leptin levels are decreased. Another hormone – appropriately named the “hunger hormone” – is called ghrelin. This hormone is secreted from the gut and will increase during fasting and decline during periods of eating. With fat weight loss – leptin declines and ghrelin increases leading to increased appetite driving some individuals to have insatiable appetite, reduced satiety when one eats, increased response in the brain to food stimulus and less restraint in portion control when eating.

Another change is in our muscles. With weight reduction, muscles learn to use calories more efficiency. The weight reduced individual needs fewer calories to maintain their weight than their prior heavier selves once did. Our muscles learn to do more with less and this is why incorporation of strength training/machine weights into your exercise routine is very important to offset this change in energy efficiency.

Another, lesser-known change is a reduction in sympathetic nervous system activity. The sympathetic nervous system is also known as the “fight-or-flight” system and is the innate system that provides us the physiologic reaction to avoid harmful events, attack, etc. and is important in metabolic regulation. The contrary system is the parasympathetic system – aka the “rest-and-digest” system - and is active most of the time during inactivity and sleep. Weight loss, fortunately, creates more parasympathetic system activation

Many of our current medical problems are thought related to excessive sympathetic stimulation – for example high blood pressure, as well as, excessive cortisol stimulation causing fat weight retention and if persistent can lead to elevated blood sugars, insulin resistance and type 2 diabetes. Unfortunately, this shift toward the parasympathetic system also can slow the metabolism and we require fewer calories for body maintenance. Physical activity of any type can help offset this metabolic change.

Next, are the psychological challenges typically associated with obesity which can be exacerbated with repeated attempts to reduce weight. Depression, anxiety, and overall mood changes during “dieting” are commonplace. This discussion is too complex for this one-page review, but many have experienced the sense of failure when not achieving their weight loss goals and this has a significant, negative impact on continued better lifestyle choices and will contribute to recurrent weight gain. Getting away from the term “dieting” and viewing weight management as a series of healthy choices for lifestyle change is a better way to manage the emotional struggles and can lead to success in weight management.

What might work for me?

Coupled with lifestyle therapy, there are many medications which have been successfully utilized to support weight management. These medications are often used to manage other medical conditions such as type 2 diabetes, depression, and migraines which usually present in the obese patient.

Despite some limitations, the current definition of obesity is based on body mass index (BMI) - which is a simple formula comparing weight at a given height. A BMI ≥ 30 is considered obese. A BMI between 25 and 30 is overweight, a BMI between 25 and 19 is considered normal weight, and < 19 is considered underweight.

Please speak with your doctor if you have concerns about weight to better understand what options are right for you. Also consider a visit with one of our nutritionists to help develop meal plans and build your knowledge on healthy diet habits

Administrative Update:

North Texas Preferred Health Partners continues to grow! Please welcome Bill Shumate, MD to our Plano location on July 1st. Dr Shumate is our newest Family Medicine physician, seeing patients age 6 and up. We are also establishing our first office outside of North Texas in Austin. James Marroquin, MD, an established Internal Medicine physician, starts October 1st as Central Texas Preferred Health Partners. His information will be added soon to our website.

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HEALTHY HABITS

Bruschetta Pasta Salad

From: JoyBauer.com

Yield 8 Cups

Ingredients

- 8 ounces (½ box) lentil or protein pasta (~4 cups cooked)
- 5 Roma tomatoes, finely chopped (~3 cups)
- ½ cup red onion, finely chopped
- 4 cloves garlic, minced
- ¼ cup minced fresh basil leaves
- 2 Tablespoons extra virgin olive oil
- 1 Tablespoon balsamic vinegar
- ¼ teaspoon Kosher salt or more to taste
- ¼ teaspoon ground black pepper or more to taste
- 8 ounces mozzarella pearls

Instructions:

1. Prepare pasta according to package directions.
2. Meanwhile, in a large bowl, combine tomatoes, onion, garlic, basil, olive oil, balsamic vinegar, salt, and pepper. Gently stir to combine.
3. Once the pasta is cooked and drained, add the pasta to bowl with bruschetta and toss.
4. Add mozzarella, then season with salt/ pepper, along with extra dashes of olive oil, balsamic and minced basil.
5. Refrigerate for at least 30 minutes then Enjoy!

This pasta salad would be a great addition to any summer picnic or an easy weekday lunch!