

## Diets in the news

*Dr Frankie Phillips*

**As memories of Christmas excesses fade, the one sure thing that many people will be turning their January thoughts to is their waistlines. Here Dr Frankie Phillips, Independent Registered Dietitian presents the scientific research and evidence which gives HCPs the upper hand when it comes to dealing with obese and overweight patients grappling with the latest 'magical' diet solution.**

### **The size of the problem**

It's shocking to read the recent reports from the Office of Health Economics [http://www.ohe.org/lib/liDownload/692/OHE\\_Spreads.pdf?CFID=3853238&CF\\_TOKEN=53570229](http://www.ohe.org/lib/liDownload/692/OHE_Spreads.pdf?CFID=3853238&CF_TOKEN=53570229) and the NHS Information Centre statistics on obesity [http://www.ic.nhs.uk/webfiles/publications/opad10/Statistics\\_on\\_Obesity\\_Physical\\_Activity\\_and\\_Diet\\_England\\_2010.pdf](http://www.ic.nhs.uk/webfiles/publications/opad10/Statistics_on_Obesity_Physical_Activity_and_Diet_England_2010.pdf). In England, in 2008, 24% of men and 26% of women were obese, and 66% of men and 57% of women were overweight. Consequently the UK ranks 5<sup>th</sup> in the world in terms of obese populations (USA is 34% obese adults). Using other indices of obesity, 39% of adults in England had a raised waist circumference (above 88cm for women and 102cm for men), compared with 23% in 1993. Based on current trends, it is estimated that by 2050, 60% of all males and 50% of all females will be obese.

The impact on both the health and the economic wealth of the country is clear: severely obese people have a life expectancy 11 years less than healthy weight individuals with the Department of Health estimating that obesity costs the NHS £4.3 billion per year. This is all despite obesity having been a strategic issue for Government for over a decade.

### **The diet solution**

The diet industry is estimated to be worth over a billion pounds, but it is unclear just how many people are following a diet to lose weight. Current dietetic strategies use a number of tools, including learnings from psychology as well as physiology. Motivational interviewing and cognitive behavioural therapies can lend themselves to weight loss interventions with individuals and groups but the basic physiology relating energy in and energy out remains the cornerstone of treatment as well as prevention. Overall, a flexible and pragmatic approach is vital as patients have increasingly varied lifestyles and motivations.

### **Top diets**

Various methods have been used to help people to lose weight and importantly to maintain weight loss instead of 'yo-yo' dieting where weight lost is regained repeatedly. As well as straightforward one-to-one counselling from dietitians, groups exist to give members support (including commercial groups based on dietary plans such as Weight Watchers and Slimming World). Many extreme diets, based on restricted dietary intakes of certain food groups (often wheat or dairy) make their way into the news showing extraordinary effects on the changing shapes of top celebrities. Very low calorie diets and meal replacements come in various guises promising rapid weight loss at a cost.

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See table 1 for a summary of the advantages and disadvantages of some key diets.

**Table 1: Generic diets: advantages and disadvantages**

Diet type	Advantages	Disadvantages
<b>Meal replacements</b>	No need to plan meals or spend time preparing. Can give effective short-term effects.	Does not 're-educate' on how to manage diet when the meal replacements stop.
<b>Low carbohydrate / High protein ('Atkins' type diets)</b>	Can lead to weight loss results sooner than conventional low-calorie low-fat diets. Higher protein can reduce appetite, leading to lower energy intake.	Unclear long-term effects on metabolism, can lead to bad breath and possibly low in fibre and fruit / vegetables in the early stages.
<b>Commercial slimming groups</b>	'Communities' giving support to encourage adherence to diet plans.	Can be expensive over the long term. Some people may not like the 'public' nature of groups.
<b>Low-fat diets</b>	Can be closely aligned to current UK dietary guidelines – balanced nutritionally.	Weight loss can be slow and may have effect of reduced motivation if quick results are not noticed.
<b>Very low calorie diets</b>	Rapid weight loss.	Far removed from normal eating patterns. Lack of a holistic approach leads to weight re-gain.

A landmark randomised controlled UK trial examined the efficacy of four popular commercial weight management diets: Slimfast (a meal replacement approach), Weight Watchers (an energy controlled diet with weekly group meetings), Atkins new revolution (a low-carbohydrate diet) and Rosemary Conley (low-fat diet with weekly exercise class)<sup>1</sup>. The results showed all 4 lead to similar weight loss after 6 months, with a clinically useful weight loss of 10% maintained after 12 months in those who adhered to the diet. This illustrates that a range of different strategies have a place in helping people with differing needs in terms of support to achieve a healthier weight.

A relatively new commercial diet 'Jenny Craig' has received some interest. It incorporates an eating plan (based on a range of convenience meals and snacks) with behaviour, coaching and physical activity. Supported by dietitians and medical doctors, preliminary studies have shown encouraging results, however, it is not a cheap option.

### Focus on Very Low Calorie Diets

Very low calorie diets [VLCDs] are defined according to the international CODEX standardisation, the US Food and Drugs Administration and the European Union as *total diet replacements with an energy content between 450 and 800kcal /day*<sup>2,3</sup>. They are intended as a complete source of nutrition

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to be consumed as the sole dietary intake containing all essential vitamins, minerals, electrolytes and fatty acids. A controversial dietary treatment for the management of obesity, if used appropriately they can lead to rapid weight loss compared to conventional low-calorie diets.

Popular VLCDs in the UK include LighterLife, the Kee Diet, Howards Way, Targetslim and New You. A typical diet plan recommends 3 or 4 products to be consumed every day. VLCD products are available without prescription, and monitoring by a HCP, although advised, cannot be guaranteed.

NICE recommends VLCDs to be used continuously for a maximum of 12 weeks or intermittently with a low-calorie diet. VLCDs less than 600kcal/day should be used only with clinical supervision<sup>4</sup>.

Studies suggest a weight loss of 1.5-2.5 kg / week may be achieved in the short term, with a 9-26kg loss possible during the course of a whole programme<sup>5-7</sup>. The new generation VLCDs are unlikely to cause harm in otherwise 'healthy' obese people. However, they are only intended to be a short-term option when other weight loss attempts have not succeeded.

Their main disadvantage is that they do not necessarily incorporate behaviour modification to develop a healthy long-term relationship with food; consequently, many patients regain weight. Studies have shown 25-35% of individuals maintained a clinically significant 10% weight loss up to 7 years, but the majority return to pre-treatment weight<sup>8-10</sup>. A systematic review showed improved maintenance of weight loss when a VLCD is used as part of a weight management programme including behaviour modification as part of follow up<sup>11</sup>.

### **The way forward**

Clinicians' work with obese and overweight patient groups is challenged by the vast array of new diets that hit public consciousness every New Year. Put into the context of practicality, many of these diets simply don't have longevity. Dietitians and other health professionals working in the field of obesity can draw on the interest in diet in the media to raise messages that are effective.

The NICE clinical guidance for obesity identified three main strategies (<http://www.nice.org.uk/nicemedia/pdf/CG43NICEGuideline.pdf>)

- Support to improve diet and increase physical activity
- Pharmacological interventions
- Bariatric surgery

### **Conclusion**

A number of strategies may be effective in supporting people through their journey to achieve a healthier weight, with health professionals drawing on flexible approaches to achieve realistic, positive results for their patients.

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