

Non-pharmacological approaches for obesity management

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Obesity Type Factors Into Weight Loss Success

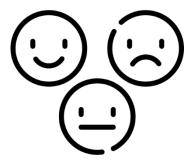


HUNGRY BRAIN

"When these patients start eating, they go for seconds and thirds and don't feel full. They usually don't feel hungry, but once they start eating, they cannot stop."

HUNGRY GUT

"These folks eat to normal fullness and within an hour or two they start feeling hungry again. The gut is not giving the signal to the brain."



EMOTIONAL

HUNGER

"They eat for reward

Some call this 'food

and sensations.

addiction.' "

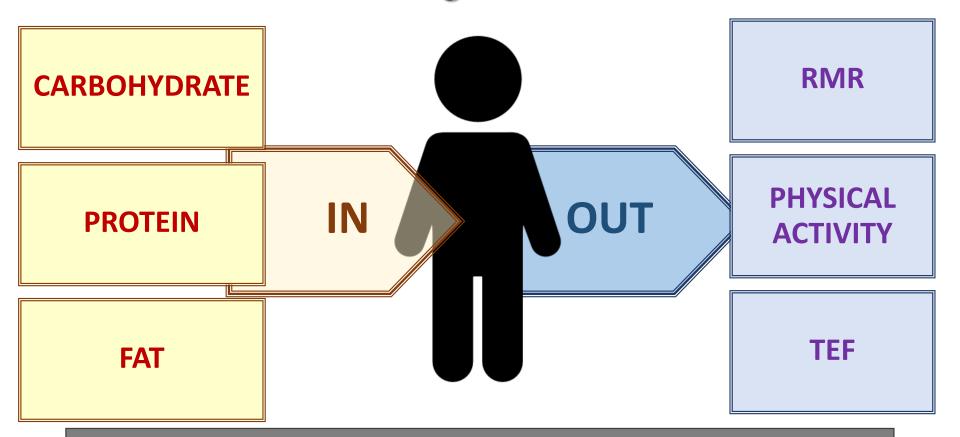


SLOW BURN

"These patients have a faulty metabolism and aren't burning calories efficiently."



Energy balance for weight control



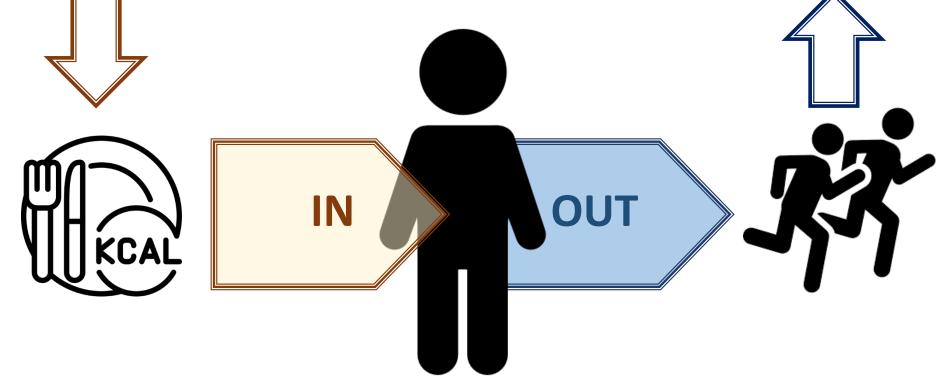
ENERGY INTAKE

TOTAL ENERGY EXPENDITURE

3



Energy balance for weight loss



ENERGY INTAKE

TOTAL ENERGY EXPENDITURE



Weight management trends

- Manipulation of macronutrient contents (i.e., low-fat diet, low-carb diet)
- Restriction of specific foods and/or food groups

(i.e., vegetarian, DASH, Mediterranean diet)

Manipulation of timing

(i.e., intermittent fasting)



Comparison of

dietary macronutrient patterns

of 14 popular named dietary programmes for weight and cardiovascular risk factor reduction in adults: systematic review and network meta-analysis of randomised trials

Ge L, et al. BMJ 2020;369:m696.



) 121 RCTs

21,942 adults (≥18 years)

overweight (BMI 25-29 kg/m²) or obese (\geq 30 kg/m²)

Type of diet	Carbohydrates, % kcal	Protein, % kcal	Fat, % kcal
Low carbohydrate	≤40	~ 30	30-55
Moderate macronutrients	~ 55-60	~ 15	21-30
Low fat	~ 60	~ 10-15	20

C Usual dietary habits, dietary advice
O Weight loss, BP, Lipid profiles, CRP



Macronutrient pattern on weight loss at 6 months

Usual diet				
0.02 (-1.71 to 1.76)	Dietary advice			
4.37 (3.03 to 5.74)	4.35 (2.56 to 6.15)	Low fat		
4.63 (3.42 to 5.87)	4.61 (3.01 to 6.23)	0.26 (-0.92 to 1.45)	Low carbohydrate	
3.06 (2.04 to 4.10)	3.04 (1.60 to 4.48)	-1.31 (-2.40 to -0.22)	-1.57 (-2.29 to -0.86)	Moderate macronutrients

High certaintyModerate certaintyLow certaintyVery low certainty

Values correspond to difference in median weight loss between column and row at six months, (eg, low fat had a median weight loss of 4.37 kg at six months compared with usual diet).

Values in bold indicate a statistically significant treatment effect



Macronutrient pattern on weight and CV parameters at 6 months

	Diet <i>v</i> usual diet	Weight loss (kilograms)	Systolic blood pressure reduction (mm Hg)	Diastolic blood pressure reduction (mm Hg)	Low density lipoprotein reduction (mg/dL)	High density lipoprotein reduction (mg/dL)	C-reactive protein reduction (mg/dL)
LC	Atkins	5.46	5.14	3.30	-2.75	3.41	0.64
	Zone	4.07	3.46	2.33	-2.89	-0.33	0.27
Mod	DASH	3.63	4.68	2.84	3.93	-1.90	NA
	Mediterranean	2.87	2.94	1.03	4.59	-0.61	0.25
	Paleolithic	5.31	14.56	3.85	7.27	-2.52	0.52
	Low fat	4.87	3.95	2.22	1.92	-2.13	0.33



"Almost all dietary patterns and popular named diets showed a minimally clinical important weight loss of 2.0 kg compared with a usual diet for up to 12 months.

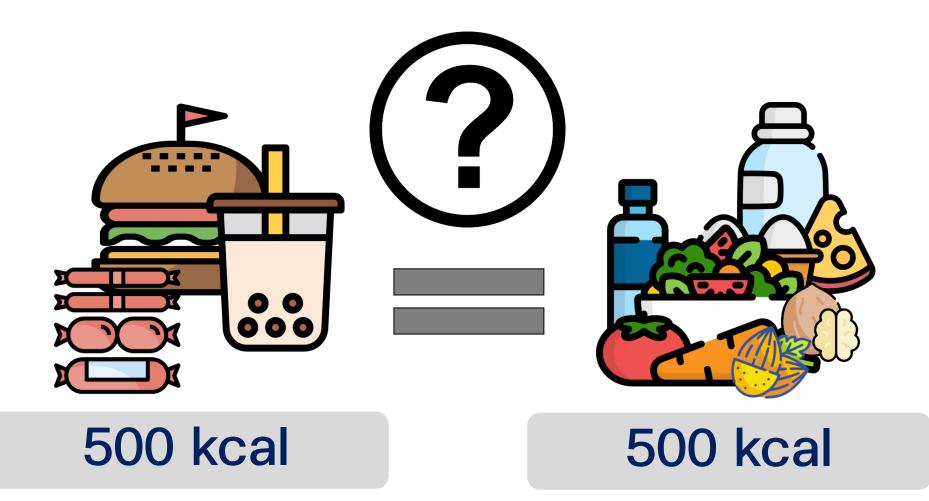
The evidence was inadequate to recommend any particular diet."

>> Adherence to the diets

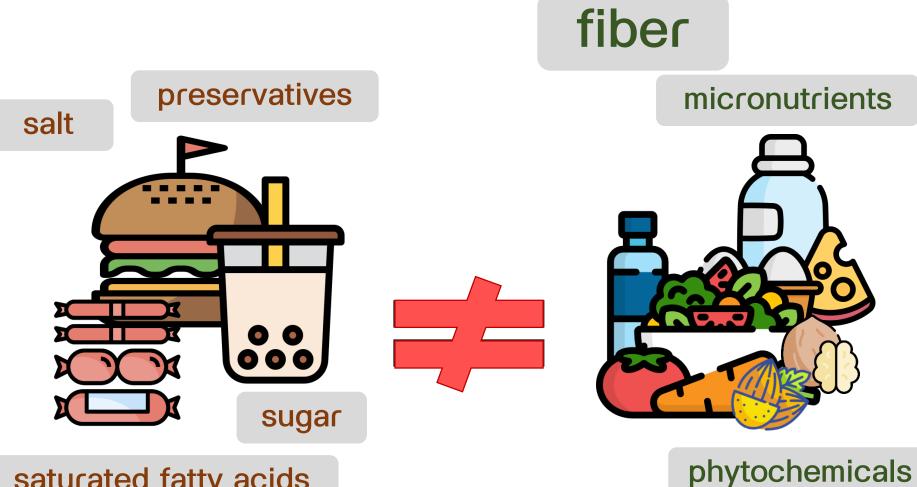


¹⁰ Ge L, et al. BMJ 2020;369:m696 Reducing dietary energy intake —regardless of macronutrient composition— Amount and quality of diets together with exercises are more important. Encouraging a modest 5-10% loss in BW Focusing on how to maintain any weight loss achieved









saturated fatty acids

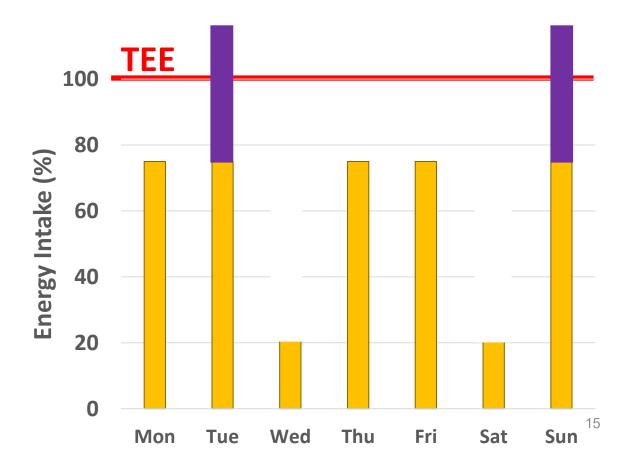
mono/polyunsaturated fatty acids

Adherence to diets



Intermittent Energy Restriction

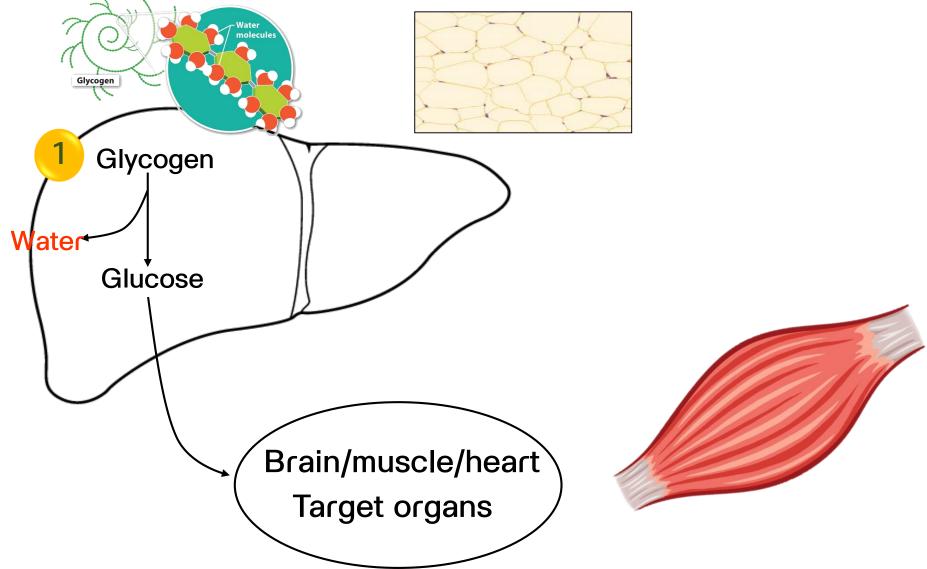
- Diet pattern contains "Fed/Feast" and "Fast" periods
 - Fed ad libitum or energy intake125-150% TEE
 - Fast no calorie **or** energy intake less than 25% TEE



Anton SD, et al. Obesity. 2018;26(2):254-68. Stockman M-C, et al. Curr Obes Rep. 2018;7(2):172-85.



Fasted State Metabolism



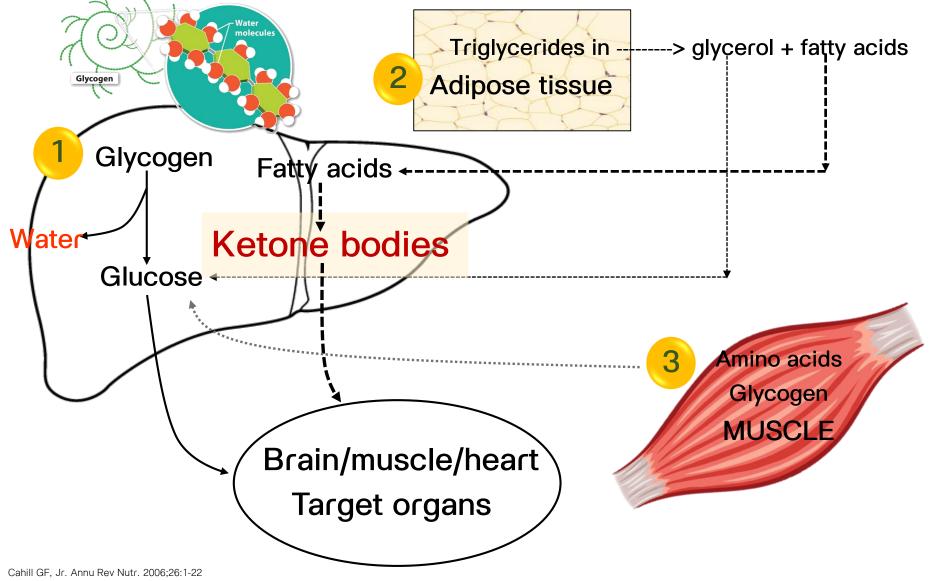
Cahill GF, Jr. Annu Rev Nutr. 2006;26:1-22

Berg JM, et al. Biochemistry. 5th ed. New York: W H Freeman; 2002. Section 30.3, Food Intake and Starvation Induce Metabolic Changes. Available from:

https://www.ncbi.nlm.nih.gov/books/NBK22414/



Fasted State Metabolism



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Common side effects of IF

- Hunger
- Irritability
- Lack of concentration
- Dizziness
- Headache
- Nausea
- Sleep disturbance



Cautions of IF

- Pregnant, Breastfeeding, Children
- Elderly with polymorbid
- Diabetes treated with insulin or oral hypoglycemic agents
- Eating disorders
- Psychiatric conditions
- Genetic disorders of macronutrient metabolism
- Cirrhosis
- Uncontrolled hypo/hypertension
- Current GI symptoms

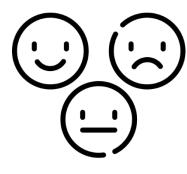






Safety





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