

Know What's on Your Patients' Plates: Reviewing Fad Diets



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The best diet...

Your patient's best diet has fewer calories than their current diet, but satisfies hunger and retains liveability. In the history of medicine, for weight loss, never has one diet been proven to be better than another.

Point #1

Diet Books

Eight thousand different diet books are available on Amazon.ca™ and all of them work, so long as they lead you to consume less calories than you burn. Unfortunately, in terms of long term success, there is at least a 95% failure rate.¹

For the most part, diet books can be divided into three categories:

- 1) **Low-fat**, which aims for fat intake to reflect less than 20% of daily calories.
- 2) **Low-carb**, which aims for carbohydrate intake to reflect less than 40% of daily calories.
- 3) **Desperate**, which simply looks for miracles.

Point #2

Diets fail due to the restriction of food to the point of hunger or suffering. Regardless of how much weight is lost, patients will eventually choose to stop suffering and their old habits will return. With the return of old habits comes an increase in the number of calories that are consumed. As a result, the weight returns.

Canada's Food Guide...

Canada's Food Guide to Healthy Living is not a weight loss diet. Following it and ignoring calories will likely lead healthy-weight patients to gain and will not help overweight patients to lose weight.

Recommended Resources...

Eat, Drink, and Be Skinny by Dr. Walter C. Willett and Dr. Mollie Katzen

The No Sweat Exercise Plan by Dr. Harvey Simon

www.sparkpeople.com
—free online food diary

www.calorieking.com—
online, PDA and
desktop food diary
software

www.ftc.gov/dietfit/—
Federal trade
commission reference
for consumer weight
loss safety

Point #3

Commercial Weight Loss Programs

A myriad of commercial weight loss programs are available. It is important for physicians to be aware of what they entail.

Weight Watchers™ offers inexpensive, low-fat diets, with group support. Patients track dietary points which, when converted into calories, amount to 1200 to 1400 calories per day. In 2003, a randomized trial compared Weight Watchers™ with self-help.

After two years of attendance, the average Weight Watcher™ lost a grand total of 2.9 kg vs. 0.2 kg for self-help.²

LA Weight Loss describes their staff as sales counselors and pays them commission for selling supplements.³ There are no formal requirements for their staff to have any medical counseling or nutritional backgrounds.⁶

The costs associated with LA Weight Loss can be quite expensive with the purchase of their supplements. LA Weight Loss has been

successfully sued by New York State and Washington State for consumer fraud.⁵

Dr. Bernstein Health and Diet Clinics

advocate a severely restrictive diet while injecting patients with vitamin B6 and vitamin B12. This occurs despite Dr. Bernstein statement, “There is no specific literature that will tell you that B vitamins are going to burn off fat.”⁷ According to registered dietitians, the diet consists of roughly 500 calories per day.⁷ The costs are very expensive.

Optifast® often operates through hospitals and involves a 12-week, all-liquid, 800 to 1200 calorie diet. It also involves group counseling.

According to a meta-analysis of studies, the best-case scenario involves maintaining five per cent of total weight loss after four years. This statistic does not include the over 25% of patients who were not followed-up on or who dropped out of the program. These program dropouts presumably gained back most of their weight. The costs are very expensive.⁸



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The bottom line...

Patients must be able to confidently say that they can live with their choices for the rest of their lives; otherwise, weight will return.

Point #3 Continued

Herbal Magic requires the purchase of supplements and couples them with a restrictive low-calorie diet. Costs can be quite expensive with the purchase of supplements. Simply put, there are no magic herbs that will help your patients lose weight.

Jenny Craig® sells low calorie foods. If your patient only consumes their products, they will lose weight. However, transitioning from the pre-packaged goods to home cooking is very challenging. Depending on

how long a patient purchases these products, things can get very expensive.

Curves is a gym, not a weight loss program. Like all gyms, weight loss is rare, because in order to lose one pound per week, a person needs to exercise vigorously for one hour everyday of the week. Furthermore, they cannot reward their exercise with food. Costs are inexpensive.

Point #4

There are three important messages that your patients must receive:

1. Eating three meals and three snacks per day minimizes hunger and removes it as an influence on dietary decisions.
2. Knowing what you're eating is crucial to losing weight. Keeping a food diary is an incredibly
3. Exercise is cumulative and every thing counts. Ten minute walks, playing with children, doing housework—exercise does not need to take place in a gym.

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References

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