Active Counseling Key to Keeping the Weight Off

BY MITCHEL L. ZOLER

NEW YORK — Daily self-weighing helps people who have recently lost weight maintain their lower weight.

People who are trying to maintain weight loss need to "learn to use scale information [the same way] a patient with diabetes uses blood-sugar monitoring," Rena R. Wing, Ph.D., said at a meeting sponsored by the American Diabetes Association. They then need to use the daily weight information to guide their eating and exercise, added Dr. Wing, a professor of psychiatry and human behavior at Brown University in Providence, R.I.

But just getting on a scale every day is not enough. A recently completed study enrolled 314 people who had already lost a substantial amount of weight, and

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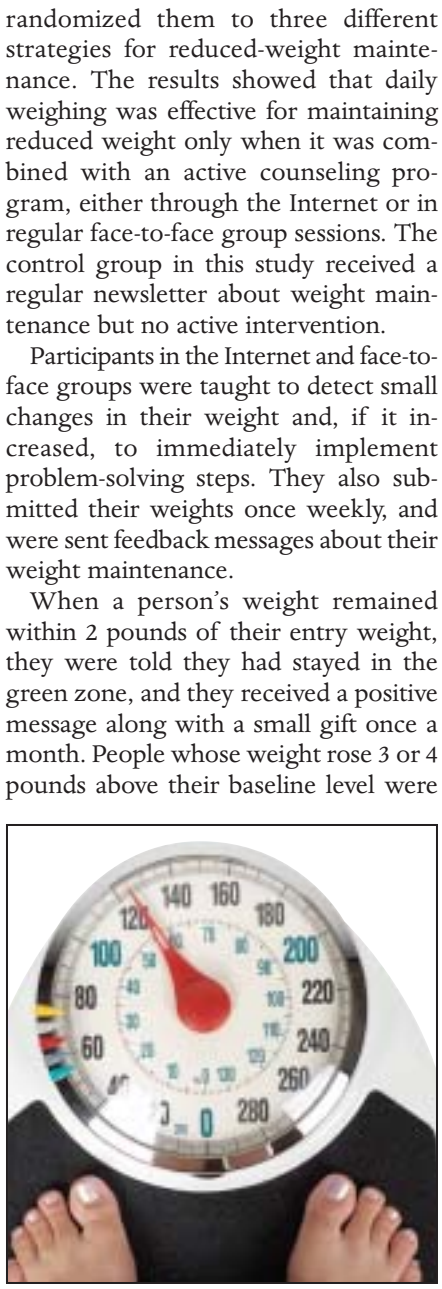
DR. WING

randomized them to three different strategies for reduced-weight maintenance. The results showed that daily weighing was effective for maintaining reduced weight only when it was combined with an active counseling program, either through the Internet or in regular face-to-face group sessions. The control group in this study received a regular newsletter about weight maintenance but no active intervention.

Participants in the Internet and face-to-face groups were taught to detect small changes in their weight and, if it increased, to immediately implement problem-solving steps. They also submitted their weights once weekly, and were sent feedback messages about their weight maintenance.

When a person's weight remained within 2 pounds of their entry weight, they were told they had stayed in the green zone, and they received a positive message along with a small gift once a month. People whose weight rose 3 or 4 pounds above their baseline level were told they had entered the yellow (caution) zone, and they were advised to implement a problem-solving strategy. Participants whose weight rose by 5 or more pounds were told they had entered the red zone and should immediately start a new weight-loss program; they were sent a "tool box" of supplies (such as meal-replacement drinks) to help them.

After 18 months, the percentage of people who regained at least 5 pounds over their entry weight was approximately 70% among the controls (those receiving a newsletter), a significantly higher rate than the 55% rate among those in the Internet program and 46% among those in the face-to-face program, said Dr. Wing, who is also director of the weight control and diabetes research center at Miriam Hospital in Providence. The difference between the rates of high weight regain was not significant between the Internet and face-to-face intervention groups (N. Engl. J. Med. 2006;355:1563-71). However, an additional finding was that although the incidence of weight regain was statistically similar in the Internet and face-to-face groups, people who regained weight gained more if they were in the Internet group, which suggests that the most effective intervention strategy was face-to-face, group follow-up sessions.



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Daily weigh-ins helped, but only when combined with counseling.

These findings also highlighted the high risk for weight gain faced by people even after they have successfully lost a lot of weight. The average weight loss in study participants immediately before their entry into the study was 44 pounds (about 20% of their body weight before their weight loss) during the 2 years preceding their entry into the study. Despite that success, about 70% of those in the control group regained a significant amount of weight during the subsequent 18 months.

"There was something about seeing people face to face that allowed us to be more effective about getting them back on target," Dr. Wing said. The face-to-face group reported using strategies to help their weight maintenance more than the other two groups did. Strategies included setting a weight-loss goal, counting calories, and keeping some kind of record of their food intake and exercise.

Another noteworthy strategy linked to success in keeping weight off was daily weighing. The subgroups who weighed themselves daily had a substantially lower percentage of high weight regainers, compared with those who did not weigh themselves daily. (See box.) ■

Daily Weighing Plus Active Interventions Produce Less Weight Regain

Intervention	People who regained at least 5 pounds and: Weighed themselves daily	Did not weigh themselves daily
Newsletter recipients (controls)	65%	72%
Internet counseling	40%*	68%
Face-to-face group meetings	26%*	58%

*Statistically significant difference, compared with those not weighing themselves daily.
Notes: Based on a study of 314 people. Weight regain, compared with weight at entry, was measured after 18 months in program.
Source: Dr. Wing

Elsevier Global Medical News