

Nutritional Considerations for People on AOMs: Where Are We?



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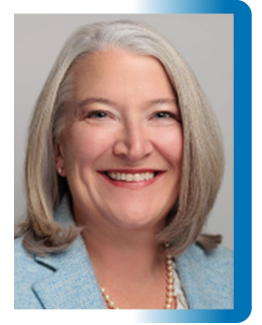
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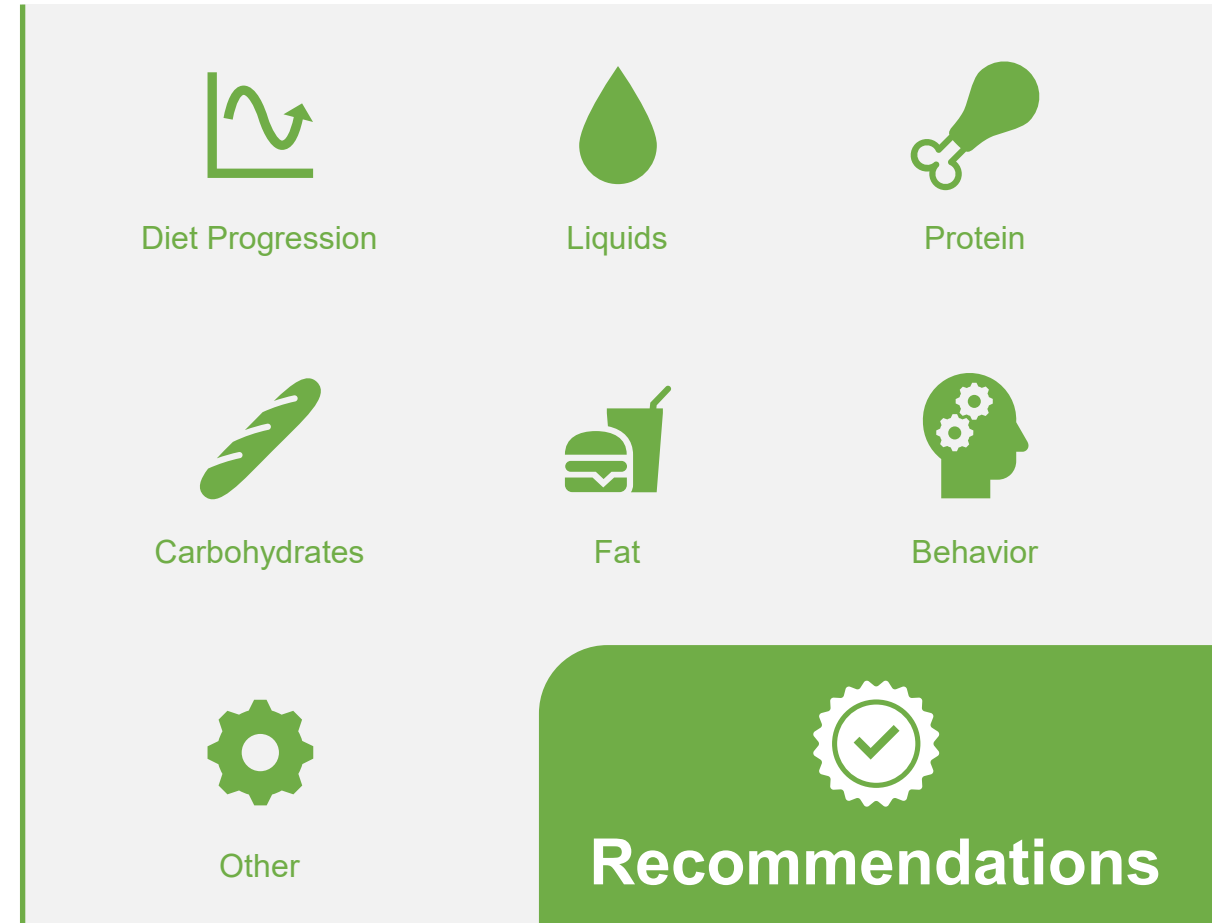
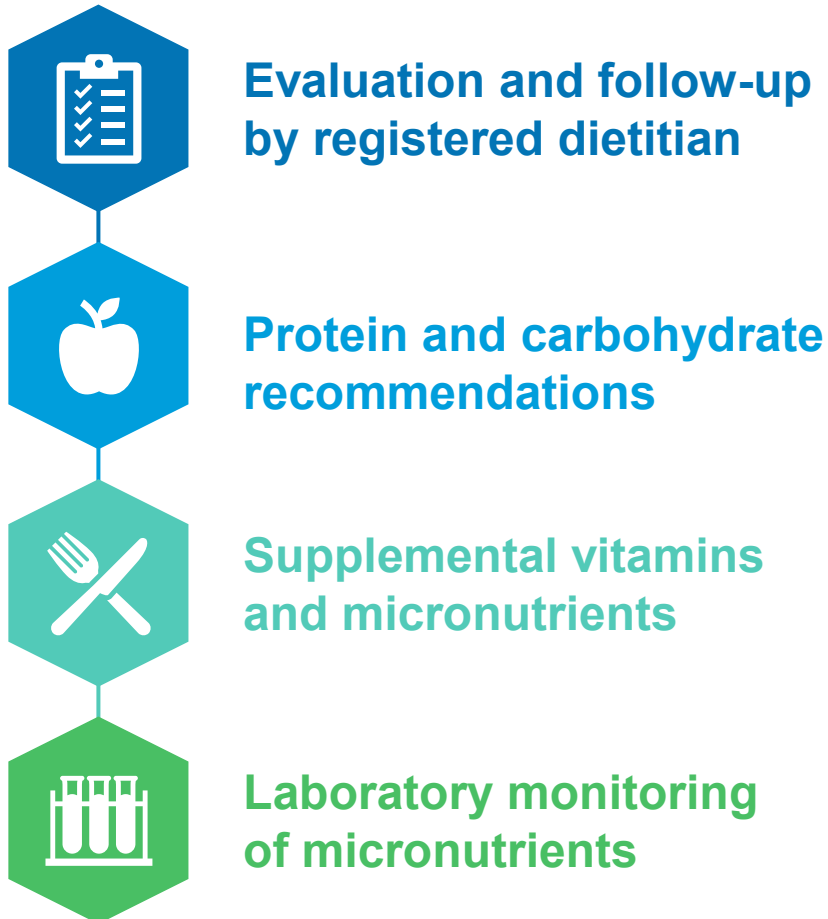
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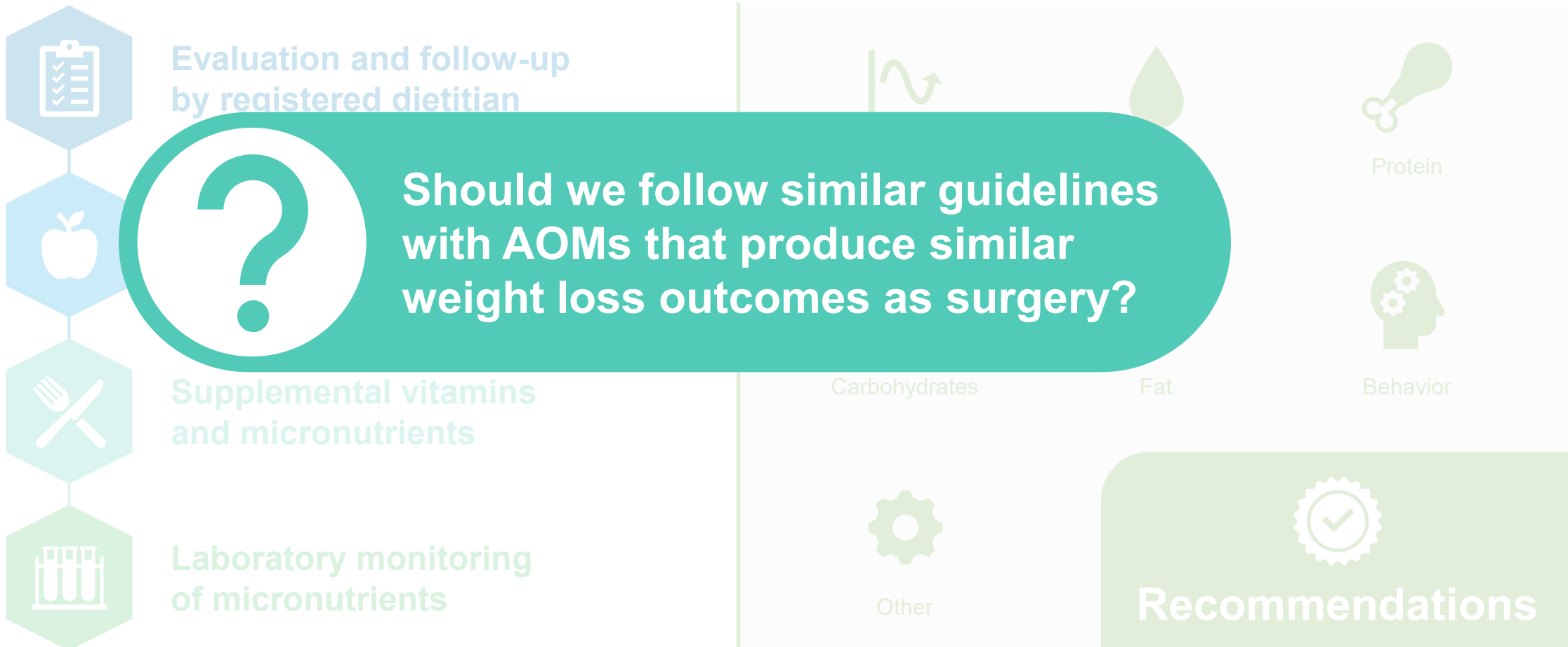
Speaker Bio

- Angela Fitch, MD, FACP, MFOMA is the current past president of the Obesity Medicine Association. She practiced primary care for 10 years before becoming a diplomate of the American Board of Obesity Medicine in 2012.
- She is currently the Chief Medical Officer and Co-Founder of knownwell, a comprehensive longitudinal obesity treatment and primary care clinic focused on delivering unbiased non-stigmatizing care for patients with obesity throughout the country.
- She is a former Assistant Professor of Medicine at Harvard University, the former co-director of the Massachusetts General Hospital Weight Center, a former ex-officio board member of the Obesity Action Coalition, and a founding member of the Massachusetts Coalition for Action on Obesity.
- Dr. Fitch is board-certified in obesity medicine, internal medicine, and pediatrics.

Current Nutritional Recommendations for Bariatric Surgery Patients



Current Nutritional Recommendations for Bariatric Surgery Patients



Adapted from: Mechanick, J. et al.; Endocr Pract. 2019;25(12):1346-1359

Ten Take-Aways in Nutrition Therapy for Obesity





Nutritional Recommendations Using AOMs

Almandoz JP, Wadden TA, Tewksbury C, et al.
Obesity (Silver Spring). 2024;32(9):1613–1631.

Benefits of Protein Intake



1-1.5g protein/kg IBW
recommended for weight loss
by consensus expert opinion



Data suggests increased lean
body mass retention during
weight reduction



Increased satiety



Increased thermogenesis
(thermic effect of food)

Paddon-Jones D, et al. Am J Clin Nutr, 87 (2008), pp. S1558-S1561.

Weight Loss vs Weight Maintenance

Are they different?

- Patients may notice more acute appetite suppression when starting on AOM therapy vs long term
- May need to follow a more prescriptive meal plan, especially in first several months of treatment
- Data from Look AHEAD and DiRECT trials show greater treatment response with meal replacement use. Should we consider more use of meal replacements?
- Goal 1-1.5g/kg IBW of protein intake during weight loss
- Focus on adequate hydration is also critical
- May notice changes in types of food preferred
- Appetite returns over time which can be hard for people to cope with but opens up opportunity to work on better nutritional quality long term

Dr Fitch 5 P's

- Planned Portions
 - Regular consistent eating that is portion controlled
- Plants and Protein-whole foods
 - Vegetables, fruit and 1-1.5g/kg ideal body weight of protein
- Power
 - Strength training
- Pillow
 - Adequate sleep
- Pause
 - Avoid eating in the night



References



Alexander L, Christensen S, Richardson L, et al. Nutrition and physical activity: an obesity medicine association (OMA) clinical practice statement 2022. *Obesity Pillars* 2022;1:100005.

Almandoz JP, Wadden TA, Tewksbury C, et al. Nutritional considerations with antiobesity medications. *Obesity (Silver Spring)*. 2024; 32(9): 1613-1631. doi:[10.1002/oby.24067](https://doi.org/10.1002/oby.24067)

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Paddon-Jones D, Westman E, R.D. Mattes, Wolfe RR, Astrup A, Westerterp-Plantenga M. Protein, weight management, and satiety. *Am J Clin Nutr*, 87 (2008), pp. S1558-S1561. <https://doi.org/10.1093/ajcn/87.5.1558S>.