#### **World Obesity Day 2018**

# Obesity experts about failure, motivation and body composition



44%\* stay on the ball when muscle increases and fat decreases.

"The quantification of fat mass is very important in setting a therapeutic goal and boosting patient motivation."

Professor Dr. med. Yurdagül Zopf

Doctor of nutritional medicine, internist and gastroenterologist,

University Hospital Erlangen

» More information

40%\* give up weight loss plans if the scale hardly changes despite efforts. "The improvement in body composition is more critical than general weight reduction for the long-term prognosis."

Dr. Dejan Reljic

Sports doctor, Sports Research Management, University Hospital Erlangen

» More information





In 40% the attempt to lose weight fails due to a lack of persistence.

"The more a patient knows about his body composition, the easier it is to explain an ostensible failure." Dr. Heike Niemeier

Oecotrophologist and Nutritionist

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"The change in body composition reveals success even before the patient sees a change in the mirror or the weight."

Stefanie Wirtz

Self-help association AdipositasHilfe Deutschland e.V., Coordinator of the Adipositaszentrum Lüneburg

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28%\* fail because of the lack of faith that they can really do it.

"Knowing that I am not just made of fat but also of lots of water and muscle was incredibly good for my self-esteem and motivation."

Stefanie Bohn Affected Person

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### 44%\* stay on the ball when muscle increases and fat decreases.

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"The fast and differentiated measurement with the mBCA permits systematic use in the hospital and personalized customization of treatment. In obesity therapy we use the seca mBCA diagnostically to detect any changes in a patient's body composition at an early stage. The measurements also are used to monitor the progress of nutrition and exercise treatments. Problems with water levels can be quantified better and muscle mass can be assessed more accurately with

an mBCA measurement. It is important to quantify the fat mass in patients affected by obesity in order to set a goal and increase the patient's motivation with measurements and visualization of body composition over the course of treatment. We also use the seca mBCA for patients with cancer or chronic illness, such as chronic inflammatory bowel disease, unexplained weight gain and short bowel syndrome."



# 40%\* give up weight loss plans if the scale hardly changes despite efforts.

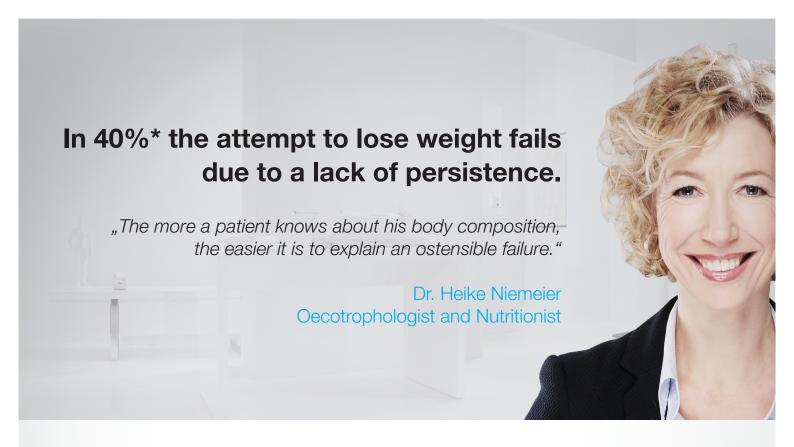
"The improvement in body composition is more critical than general weight reduction for the long-term prognosis."

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"More physical exercise and proper nutrition are the cornerstones of obesity prevention and treatment. Statistics show, however, that 30 to 50% of people who start a sports program give it up after just a few weeks. The causes are varied, but a (perceived) lack of training success is one of the most frequently cited for loss of motivation. As a rule, patients affected by obesity measure the "success" of the exercise program primarily in terms of weight loss. The increased exercise-induced energy expenditure is an important component for weight loss. Above all, targeted training improves the patient's cardio-metabolic risk profile and physical performance. That's more relevant for the long-term prognosis and a decrease of subsequent diseases than overall weight reduction. In particular, maintaining or building up muscle is so important not only because muscle supports and

mobilizes, but also because it is the largest metabolic organ in the body. When muscle is built up, everyday functionality and quality of life are improved and the basic metabolic rate is increased, which is critical for the long-term stabilization of the patient's weight.

Regular measurement of body composition is therefore an essential diagnostic element in obesity treatment. By quantifying the separate body components of muscle, fat and water, the seca mBCA provides us with a fast, straightforward and objective view of the course of treatment. Additionally, treatment success can be strikingly visualized in the differentiated presentation of changes to fat and muscle mass. Patient motivation increases significantly as a result."



"Many overweight persons fail at losing weight because they lack knowledge. They frequently fail in the long run because they eat too little or the wrong things and then cannot cope with the hunger pangs. Or they do not know that they may have developed an insulin resistance because they have too much abdominal fat. In that case, it is nearly impossible to lose weight without a professional plan. Patients' frustration is especially great when they supposedly eat a healthful diet and get regular exercise, but the results on the scale do not meet their expectations. Not infrequently the bathroom scale becomes an object of hatred that determines whether the day will be good or bad.

That's one reason the number on the scale plays hardly any role in how I view my patients. It is particularly important with patients affected by obesity to see body composition in terms

of water, fat and muscle mass and then to personalize treatment and make success visible. With the help of the medical Body Composition Analyzer (seca mBCA), I can show my patients exactly how they look inside and whether their weight loss is attributed to water or valuable muscle mass and not to fat. I also can explain to them why there's little change on the scale, but that they have built up muscle mass and lost dangerous abdominal fat. Then their perceived failure is suddenly explicable and can even be turned into a success. My patients get an enormous boost in motivation when they recognize the change in their body composition. The feeling of self-efficacy returns and self-esteem increases when they see in black and white on the trend graphs that they can change something. Then lasting success is possible."



# 61%\* are motivated when efforts pay off on the scales.

"The change in body composition reveals success even before the patient sees a change in the mirror or the weight."

Stefanie Wirtz
Self-help association AdipositasHilfe Deutschland e.V.,
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"All the persons who come to us in the selfhelp group or the hospital have a long history of weight loss attempts. The reasons for the repeated failures are varied. They include lack of knowledge about how the body functions, no support from friends and family, or too little persistence when they do not drop kilos as quickly as unhealthy and unrealistic promises about diets have led them to expect. Still another completely different problem comes into play. In many countries no regulated care of patients affected by obesity or financing of holistic treatment is provided. The problem starts with prevention and the fact that hardly anyone – whether fat or thin – is regularly weighed at the doctor's office! Patients may feel left alone with their problem and that too, along with their repeated failures and the stigmatization by society, greatly influences their motivation.

Motivation and knowledge are decisive factors in keeping patients on the ball, particularly during difficult phases. That's why I put all who come to us on the seca mBCA to determine their body composition and help them to get to know their own bodies. For when patients know how they are composed of water, muscle and fat, they are more apt to understand how to succeed at weight loss. On top of that, success becomes visible in body composition measurements even before the patient can see the changes in the mirror or on the bathroom scale. That increases motivation and treatment compliance enormously! Furthermore, the weight loss graphs in clinical work provide valuable input for further treatment by the family doctor and evidence for health insurers that our treatment is effective and therefore deserving of reimbursement. This is an incredibly valuable argument for many patients in the battle for financial support."



"Diets, nutritional changes and the endless battle with the scale have been with me my whole life. From A as in Apple to Z for zucchini, I know all the diets in between – and have failed on all of them. Most doctors assessed me using only my Body Mass Index and then quickly wrote me off as a lazy fatty. The stigmatization hurt me most of all because I exercised, ate a balanced diet and still tended to gain instead of lose weight. Absolutely frustrating!

When my natural health practitioner measured my body composition with a special scale, it became clear that my weight loss attempts could work only with great difficulty because a large portion of my weight consisted of water, not fat. With exercise and diet alone, I could not have gotten rid of the water. It was an incredible relief for me to know that I am not just made of fat as I often thought. That was good for my self-esteem and for my motivation too. Because now that I know about my body composition, I can take a more targeted approach to managing my weight.

The regular measuring and the progression now visible in my analyses, give me the strength to stick to it. Even if the weight itself does not change as quickly as I want it to, I can see in the changes to my body composition whether I'm going the right direction."