

## 6 lifestyle changes patients with obesity, prediabetes should make

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For patients affected by obesity—or prediabetes—there can be physical and emotional consequences. However, patients can make lifestyle changes to improve their health and well-being.

A healthy way for patients to lose weight and make appropriate lifestyle changes is through participation in a National Diabetes Prevention Program (National DPP) lifestyle change program. The AMA's Diabetes Prevention Guide supports physicians, care teams and health care organizations in defining and implementing evidence-based diabetes prevention strategies.

This comprehensive and customized approach helps clinical practices and health care organizations identify patients with prediabetes and manage the risk of developing type 2 diabetes, including referring patients at risk to a National DPP lifestyle change program based on their individual needs.

Many patients often do not seek medical attention or delay scheduling appointments due to their fear of being stigmatized because of their weight, according to AMA member Fatima Cody Stanford, MD, MPH, MPA, an obesity medicine specialist in Boston and assistant professor at Harvard Medical School. She has co-written a book, *Facing Overweight and Obesity: A Complete Guide for Children and Adults*, with colleagues Jonathan R. Stevens, MD, and Theodore A. Stern, MD.

The book describes quite a few lifestyle changes patients can make to address obesity and reverse prediabetes. Here are some changes that your patients can make.

**Identify small, measurable goals.** When patients decide to change their eating habits, they should focus on making health improvements rather than on decreasing their weight. Instead of participating in the latest diet fad, patients should identify small, measurable goals that they are willing to do and maintain. Patients should also make a goal achievable within a specific timeframe.

**Adopt tactics for eating well.** Patients who are uncertain that they need to make nutritional changes can keep a food log for three to seven days of everything they ate or drank. It may be helpful to use a

smart phone application to help. Some tactics for eating well include maintaining a schedule, listening to your body and enjoying a variety of foods. Eating every three to four hours can also help patients achieve stable blood glucose levels and help their metabolism.

**Eat a variety of foods.** Eating a well-balanced diet should not encourage avoiding certain foods or entire food groups without medical necessity. Patients should eat a variety of foods to meet the body's nutritional needs. And because of the diverse nature of nutrients provided by each group, it is important to select different portions from each food within the group.

**Drink plenty of water.** Having an adequate fluid intake is essential for overall health. The amount of fluid a person needs depends on their medical conditions, body weight and physical activity level. Plain water has zero calories, which can help with managing body weight and reducing caloric intake when substituted for drinks with calories, such as regular soda.

**Manage emotions.** Patients sometimes use food to manage their emotions and might not recognize when they are doing it. Whether they are happy, sad, bored, excited, lonely or stressed, these emotions can lead to a patient eating when they are not hungry. To prevent emotional eating, encourage patients to pause and ask whether they are hungry or eating to relieve their current emotions. It is also important for them to seek out appropriate mental health care services.

**Health-related physical fitness.** Patients with obesity should improve their cardiorespiratory fitness, body composition and muscular fitness. Encourage patients to incorporate both aerobic and muscle-building exercises into their routine. Have patients begin with 10 minutes of exercise and slowly increase duration. Examples of aerobic activities include walking, biking and swimming.