IMPROVING WEIGHT LOSS MAINTENANCE: THE INTERNATOINAL WEIGHT CONTROL REGISTRY

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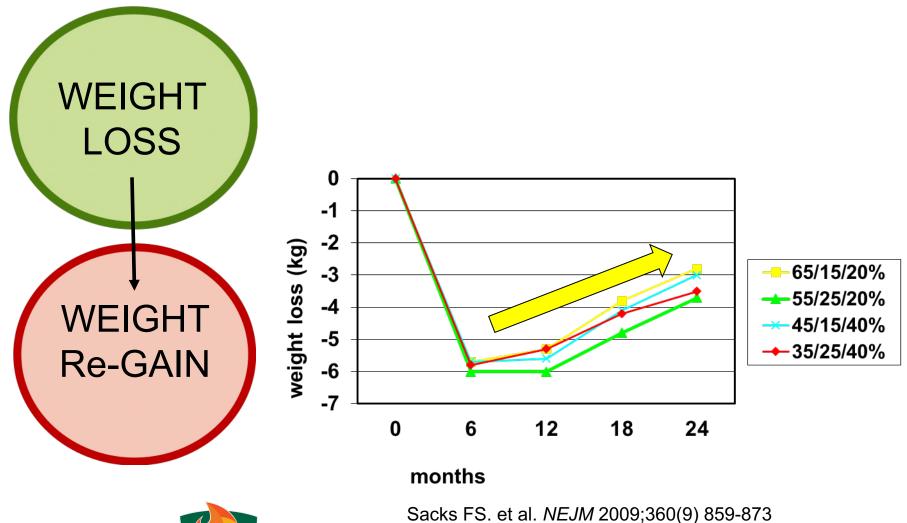
THE PROBLEM





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COMPARISON OF WEIGHT LOSS DIETS WITH DIFFERENT COMPOSITIONS OF FAT, PROTEIN AND CARBOHYDRATES (N=811)

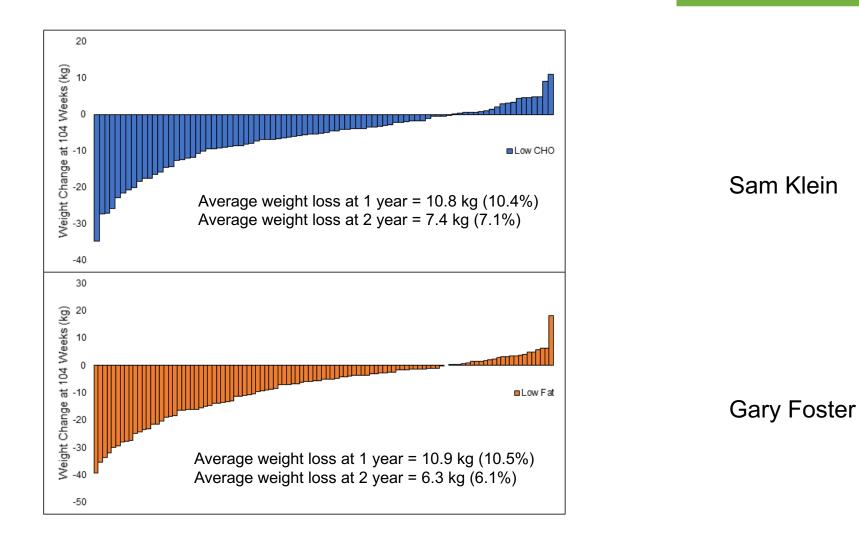




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WHICH DIET WORKS BEST?





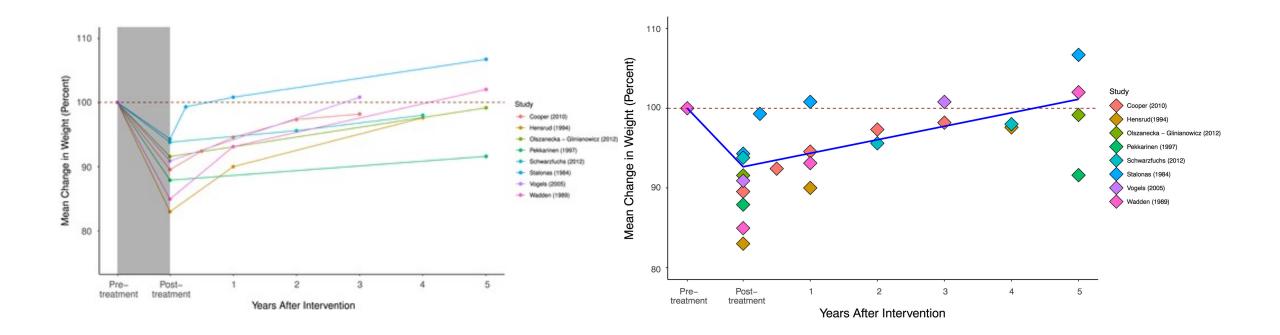
Courtesy of Washington Univ website



Courtesy of WW website

Foster et al. Ann Intern Med. 2010.

POOR LONG-TERM OUTCOMES



Nordmo, Danielsen, Nordmo Obesity Reviews 2019





- Weight loss acute; executive function; just produce negative energy balance
- Weight loss maintenance chronic, more than executive function, exact achievement of energy balance

 We have lots of studies on weight loss, but few on weight loss maintenance



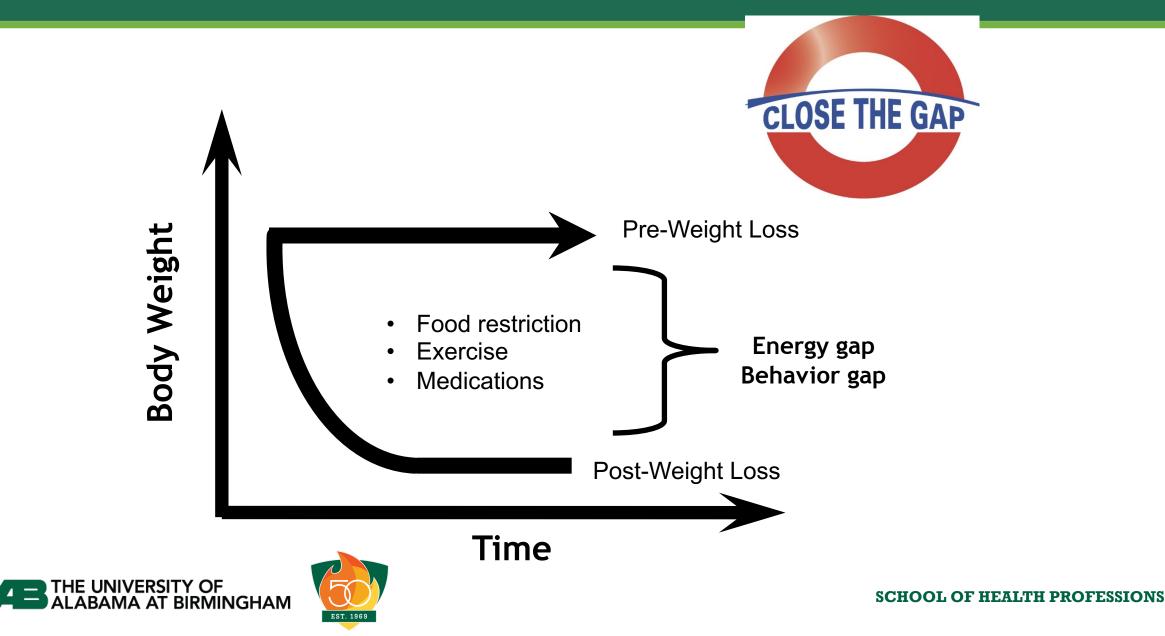
WHY IS WEIGHT LOSS MAINTENANCE HARD?

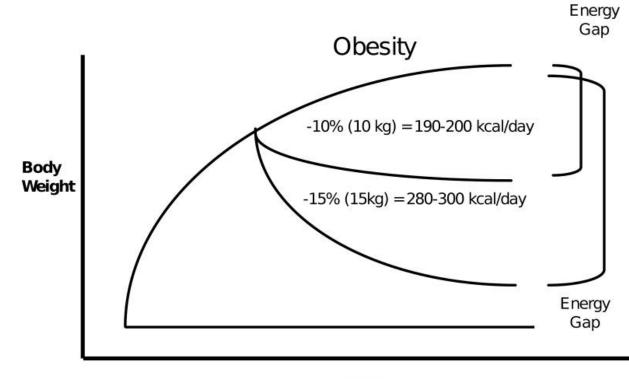
- Biological reasons
- Behavioral reasons
- Environmental reasons
- Other reasons?





THE ENERGY GAP



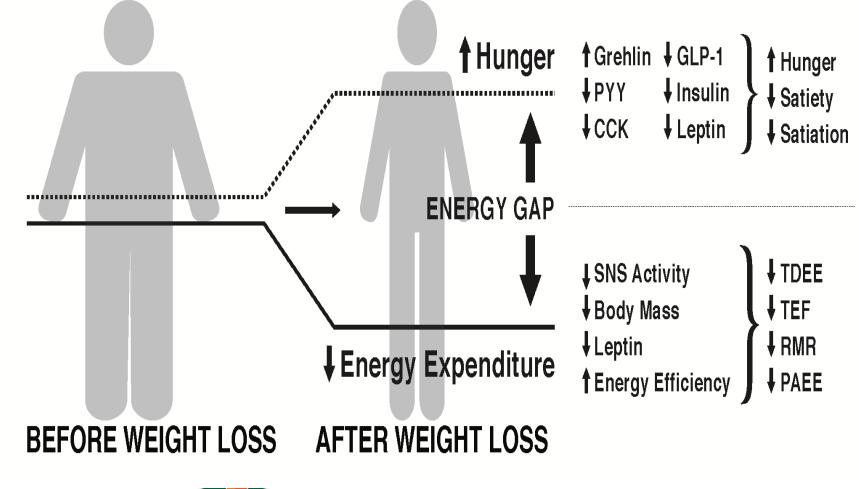


Time





Example for 100 kg person

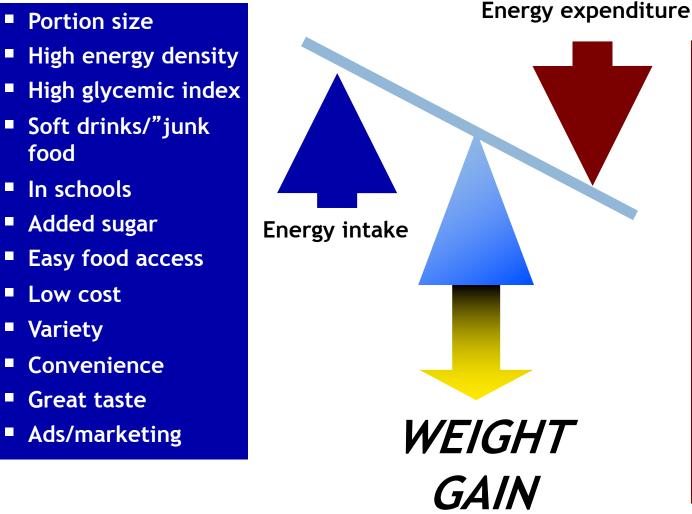






MULTI-FACTORAL BEHAVIORAL CAUSES

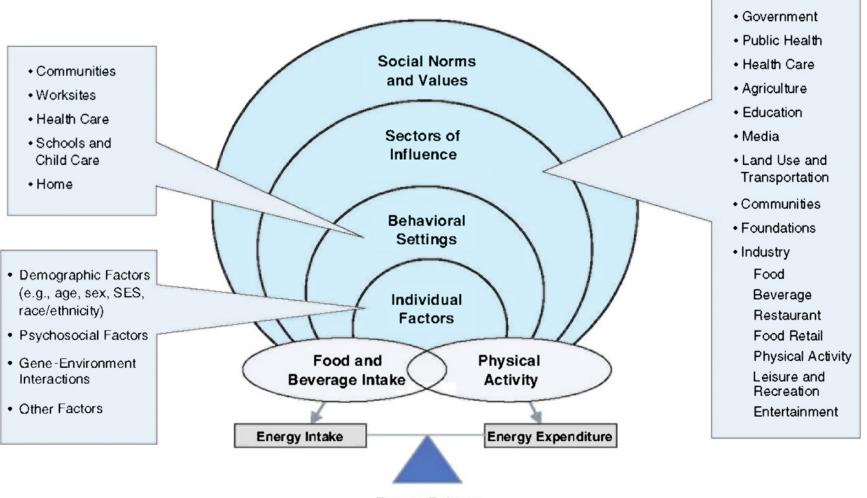
food



Sedentary

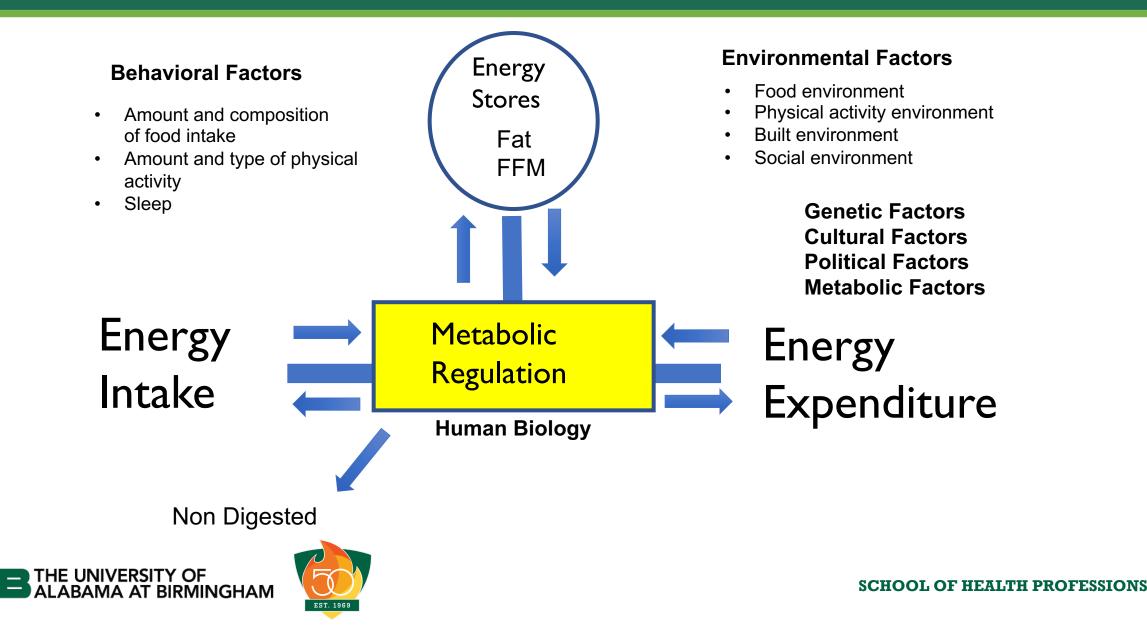
- workplaces
- Sedentary schools
- Activity "unfriendly" community design
- Automobiles
- Drive-through conveniences
- **Elevators/escalators**
- **Remote controls**
- Sedentary entertainment
- Labor saving devices
- Television/computer

Socioecological Models

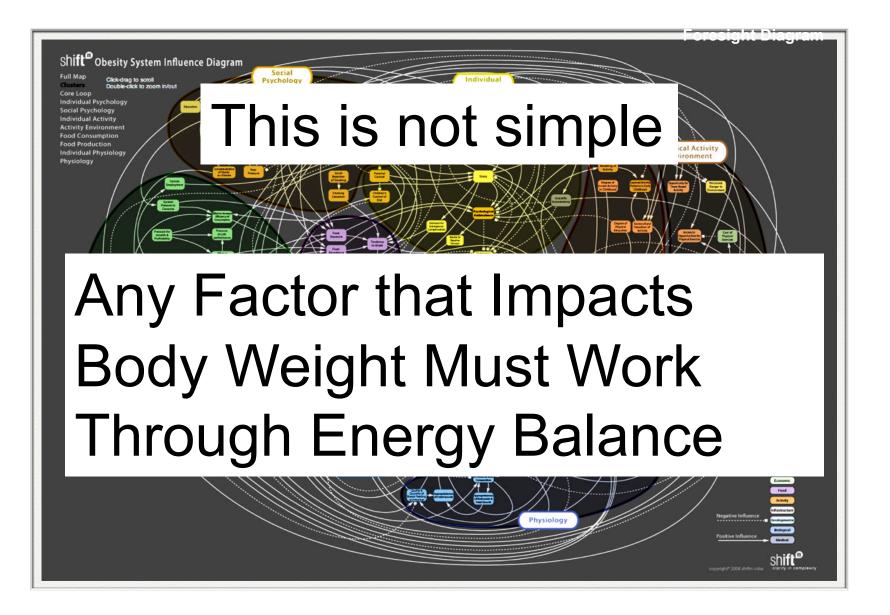


Energy Balance

THE ENERGY BALANCE SYSTEM



THE ENVIRONMENT AND YOU: SYSTEMS



THE NATIONAL WEIGHT CONTROL REGISTRY











What can we learn from successful weight loss maintainers?

STATUS: MARCH 2020

- Mean (SD) weight loss at entry: 75.8 (40.0) lbs or 34.4 (18.1) kg
- Mean (SD) duration of weight loss at entry: 5.0 (6.5) years

WHAT THEY DO: COMMONALITIES AMONG NWCR PARTICIPANTS IN WEIGHT MAINTENANCE

- Low fat diet, attention to calories
- High levels of physical activity
- Self-monitoring
- Behavioral consistency
- Dietary restraint
- Breakfast

Area of life	Improved	No difference	Worsened		
	%	%	%		
Quality of life	95.3	4.3	0.4		
Level of energy	92.4	6.7	0.9		
Mobility	92.3	7.1	0.6		
General mood	91.4	6.9	1.6		
Self-confidence	90.9	9.0	0.1		
Physical health	85.8	12.9	1.3		
Interactions with					
Opposite sex	65.2	32.	0.9		
Same sex	50.2	46.8	0.4		

SUMMARY FROM NWCR

- Weight loss is different from weight loss maintenance
- Many diets work for weight loss; maintenance is hard
- Successful losers have some behaviors in common
- Success is associated with improved health and happiness

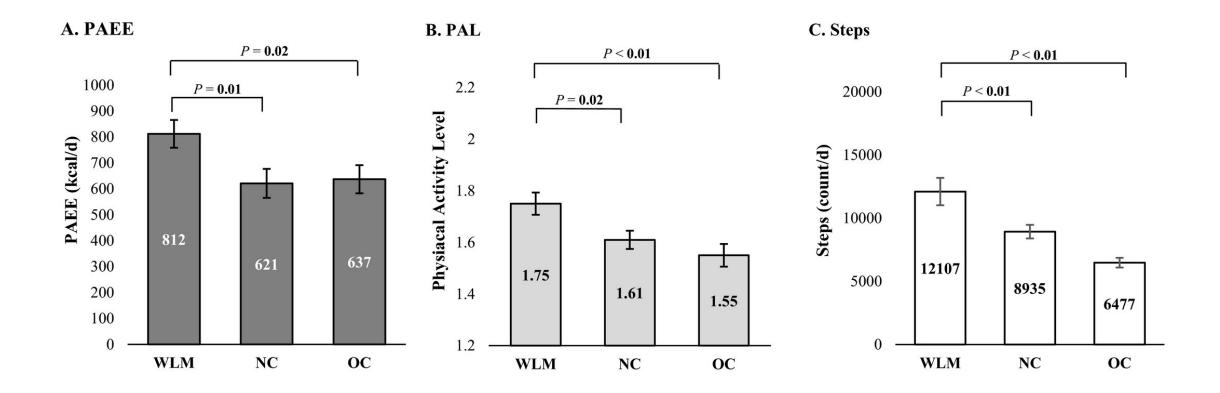
National Weight Control Registry (Hill & Wing)

- Most (93%) exercise regularly
- Average is about 60 min/day
- Decrease in exercise associated weight regain





DO SUCCESSFUL WEIGHT LOSS MAINTAINERS EXERCISE MORE?



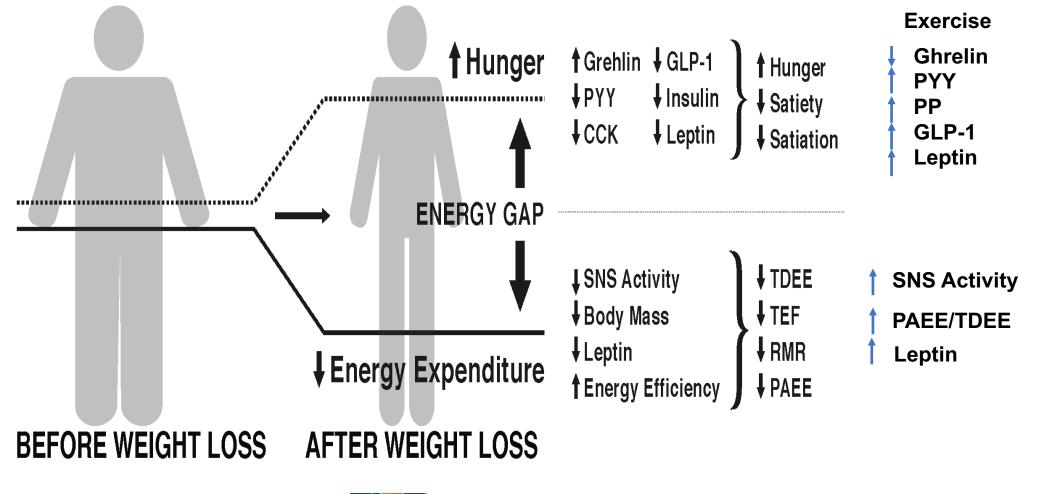
Ostendorf et al. Obesity 2018



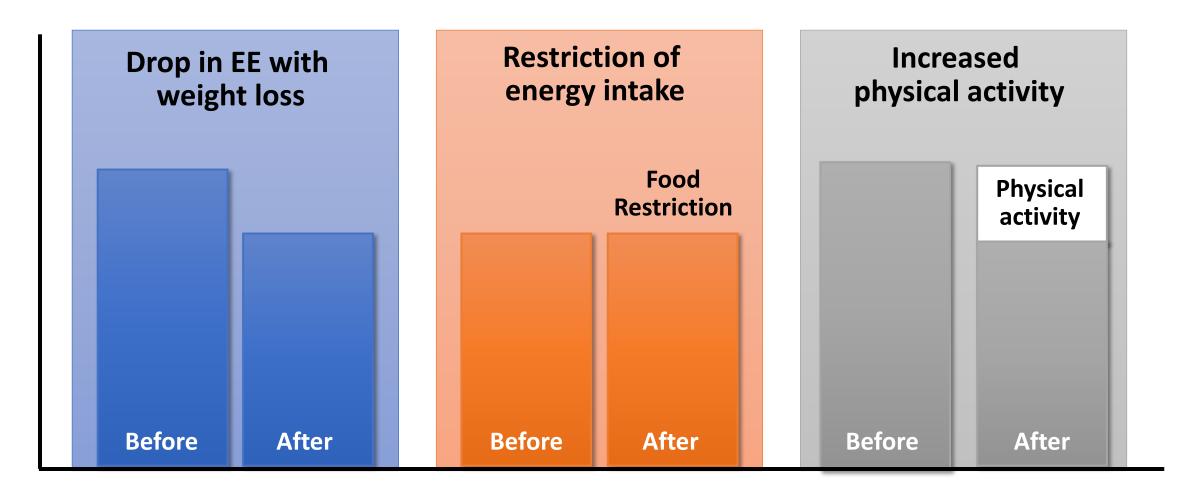


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BENEFITS OF EXERCISE







Region	Obesity Rate (%)
U.S.	27.94
Midwest	29.91
South	29.85
Northeast	25.52
West	24.43





Source: NHANES

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Other factors?

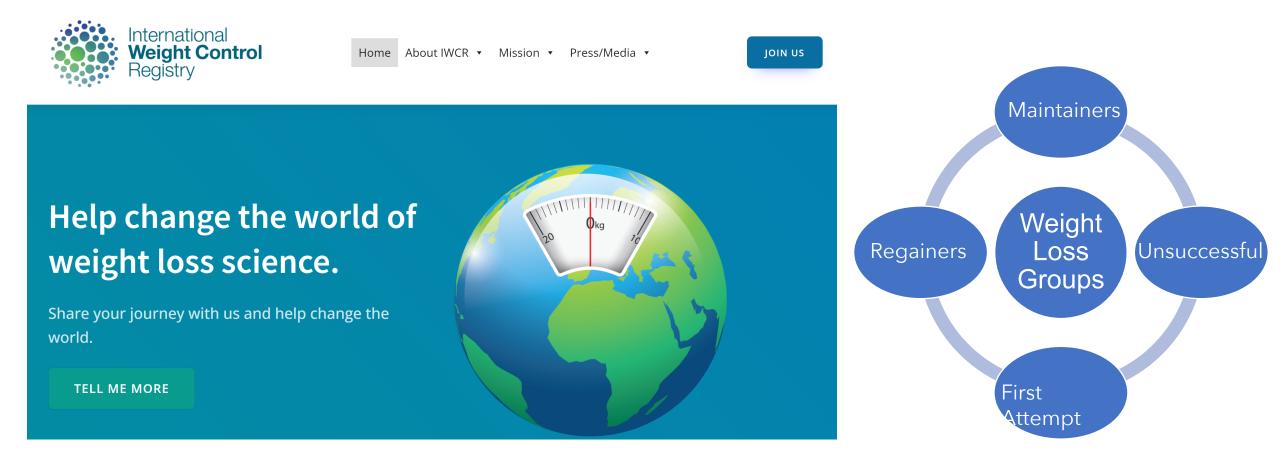




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INTERNATIONAL WEIGHT CONTROL REGISTRY

What can we learn by comparing successful with unsuccessful people?



WHAT INFORMATION IS COLLECTED CURRENTLY?

Domain	Category	Instrument(s)				
Biological	Anthropometry	Height, Weight History (Current, Highest Adult, and Lowest Adult)				
	Overall Health and Wellbeing	36-Item Short Form Health Survey				
Behavioral	Usual Dietary Intake and Diet Quality	Meal and Snack Patterns, Sugar Sweetened Beverage, Eating Away from Home Questionnaires				
	Physical Activity and Sedentary Behavior	Wearable device data via Validic,, International Physical Activity Questionnaire				
	Sleep Behavior	Medical Outcomes Survey Sleep Questionnaire and Morningness-Eveningness Questionnaire				
Environmental	Objective Food, Physical Activity Environment	Home Zip Code, Address				
	Self-Reported Food and Physical Activity Environment	Perceived Nutrition Environment Measures Survey, Neighborhood Environment Walkability Scale				
	Socioeconomic and Social Status	Educational Attainment, Annual Household Income, Food Security				
	Social Environment	Household Size, Marital Status, BMI of Spouse/ Partner, Weight-Related Social Norms Scale				
	Food Cravings	Trait Food Craving Questionnaire – Reduced				
	Dietary Restraint, Disinhibition, and Hunger	3-Factor Eating Questionnaire				
	Stress Reactivity	Perceived Stress Reactivity Scale				
Psychosocial	Motivation for Weight Management	Treatment Self-Regulation Questionnaire				
	Motivation for Exercise	Exercise Identity and Behavioral Regulation				
	Delay Discounting	5-Trial Adjusting Delay				
	Life Course Trajectory	Life History Theory Questionnaire				
	Self-Compassion	Self-Compassion Scale – Short Form				
	Centered Identity – Resilience	Psychological Well-Being – Short Form				

HOW IS THE IWCR DIFFERENT?

Includes populations underrepresented in research

- Health disparity populations, individuals with disabilities, wide age range
- Successful and unsuccessful (and aspirational)
- Sufficient sample size to allow precision approach

Focus extends beyond just behavior

- Identify the contexts in which behavior occurs
- Collect objective data remotely
- Long-term follow-up
- Has flexibility to grow and evolve
- Established to foster team science and research training
- Builds partnership with target population
- Recruitment for sub-studies

THE IWCR CAN:

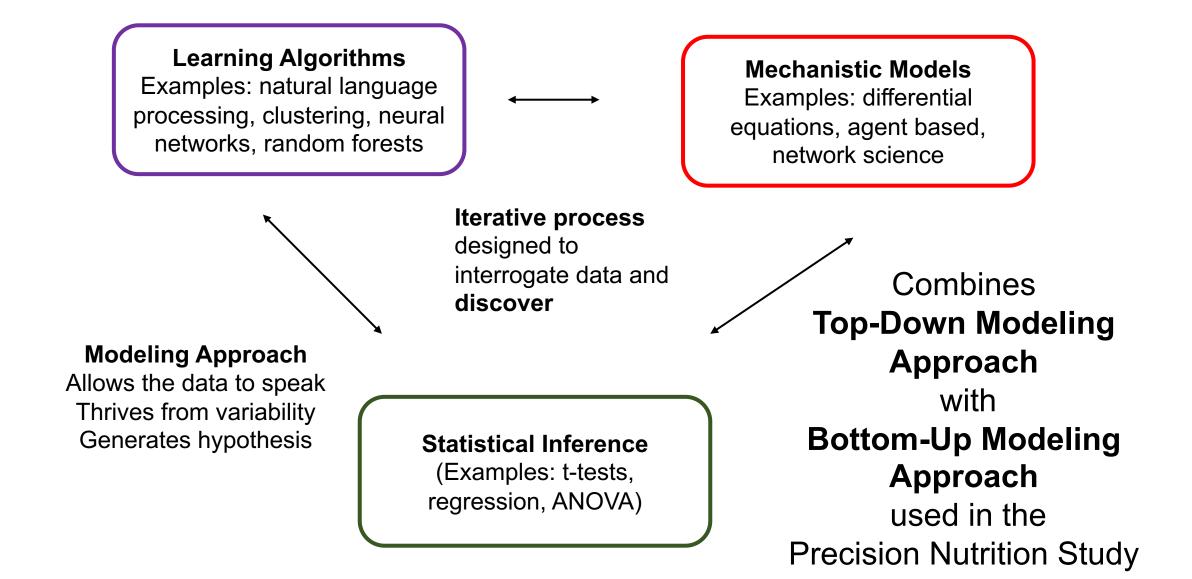
- 1. Test **specific hypotheses** about factors that impact weight management.
- 2. Use **discovery science** to develop new hypotheses for how combinations of factors in specific people in specific contexts are associated with successful weight loss maintenance.
- 3. Provide **long-term follow-up** for people who lose weight to facilitate the study of weight loss maintenance.



EXAMPLE QUESTIONS

- What are the behaviors and psychological profiles and their combinations in people who are successful and unsuccessful at weight loss and maintenance in different environments?
- What contextual factors are associated with successful and unsuccessful outcomes for weight loss and maintenance among people with similar behavioral and psychological profiles and their combinations?
- What are the <u>individual</u> contextual, metabolic, microbiomic, and genotypic factors associated with successful and unsuccessful weight loss and maintenance among individuals selected from the various clusters?

DISCOVERY SCIENCE



HISTORY OF THE IWCR

2019–2020 The Foundation

- Partner institutions
- Co-investigators
- Survey selection
- Single IRB approval
 - Mary Evans group meeting at TOS

2020–2021 NORC Supplement

- Governance
- Optimized database
- Participant-focused
- 3,000+ enrolled
- Initiate data analyses
- Descriptive paper
 in revision at IJO
 - 8 abstracts accepted (4 TOS, 3 EASO, 1 ASN)

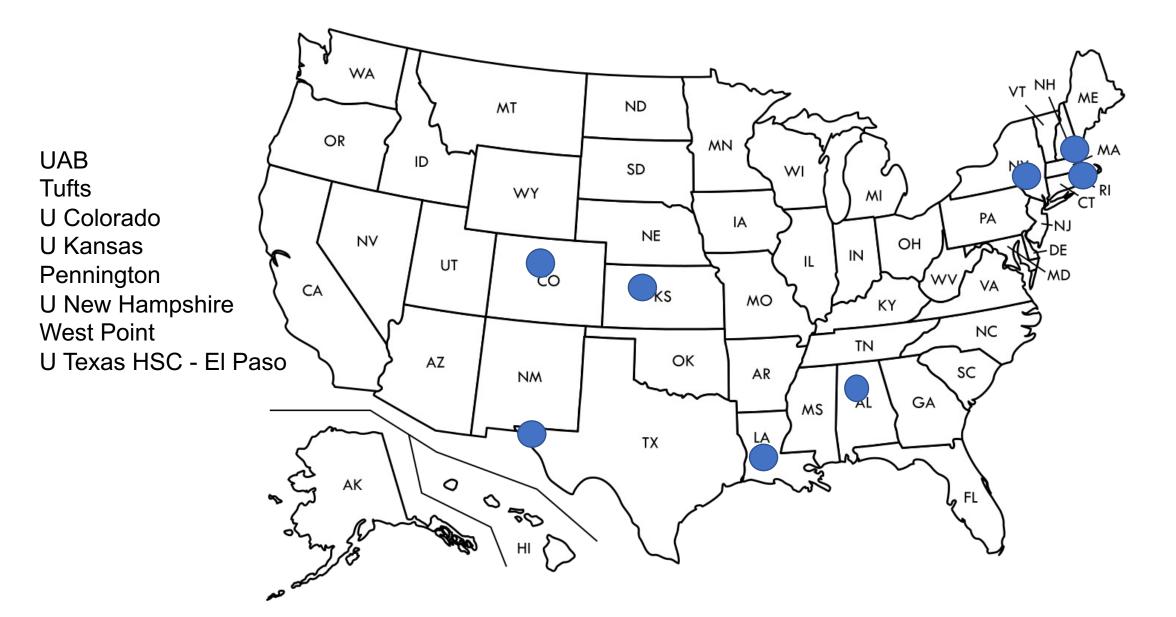
<u>202<mark>2</mark> and Beyond</u> The Future

- Wearable and scale integration
- 24-hr recalls
- Environmental assessments
- Longitudinal follow-up
- Continuous improvement
- Sustaining financial support

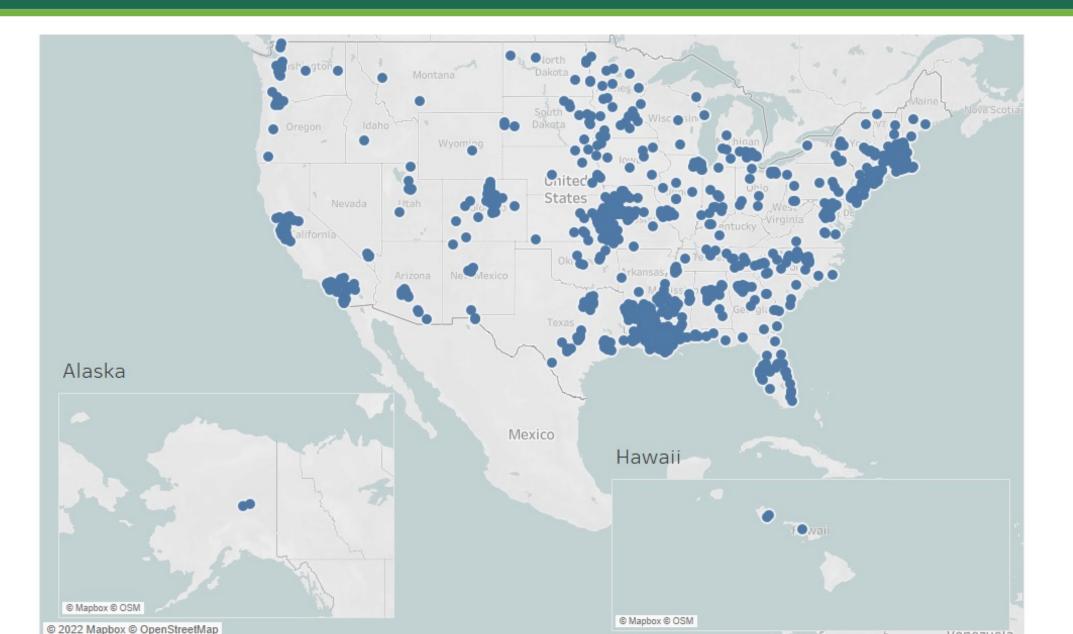
<u>2018</u>

- The Concept
- Hill and Roberts'
 initial discussion

WHO IS INVOLVED



U.S. ENROLLMENT BY ZIP CODE



INTERNATIONAL SITES

S.M.

New Ci

Bahrain Greece Brazil India Canada Italy China Jordan Egypt Kuwait Finland Lebanon France Morocco Palestine Germany

Portugal Qatar Saudi Arabia Sweden Tunisia UAE UK UK USA

P--

CURRENT ENROLLMENT: 3380

	1										Weight Loss Category		%
		Ethnic Categories									Maintained weight loss		28
Racial Categories	Not Hispanic or Latino			Hispanic or Latino		Unknown/Not Reported Ethnicity		Total	for at least 1 year		20		
	Female	Male	Unknown/ Not Reported	Female	Male	Unknown/ Not Reported	Female	Male	Unknown/ Not Reported		Lost weight but regained it		57
American Indian/ Alaska Native	4	1	-	4	-	-	-	-	-	9	Tried unsuccessfully to lose weight		10
Asian	35	18	-	-	-	-	2	1	_	56	First attempt to lose weight		4
Native Hawaiian or Other Pacific Islander	3	-	-	-	-	-	-	2	_	5	RUCA %		
Black or African	309	66	_	7	_	_	10	_		392	Urban 90		
American	505	00		,			10	_		332	Rural	10	
White	1,112	225	3	40	7	-	20	21	_	1,428	Age %		
More Than One											18-29	8	
Race	30	4	-	13	1	-	3	-	-	51	30-39	15	
Unknown or Not	15	3	-	15	1	-	19	5	1,381	1,439	40-49	21	
Reported					_					_,	50-59	22	
Total	1,508	317	3	79) 9	-	54	29	1,381	3,380	60-69	25	
									≥70	8			

IWCR PUBLICATIONS

- 1 published paper
- 12 manuscripts in progress
- >12 abstracts presented or submitted

ALIGNMENT WITH NIDDK STRATEGIC PLAN

Goal 1: Advance understanding of biological and environmental contributions to health and disease

Goal 2: Advance pivotal clinical studies and trials for prevention, treatment, and cure in diverse populations

Goal 3: Advance research to disseminate and implement evidencebased prevention strategies and treatments in clinics and community settings, to improve the health of all people, more rapidly and effectively

Goal 4: Advance stakeholder engagement, including patients and other participants as true partners in research

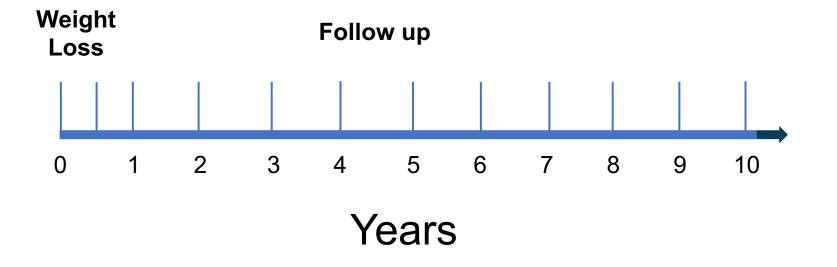
TREATMENT OF OBESITY

Behavioral Treatment 7-10%

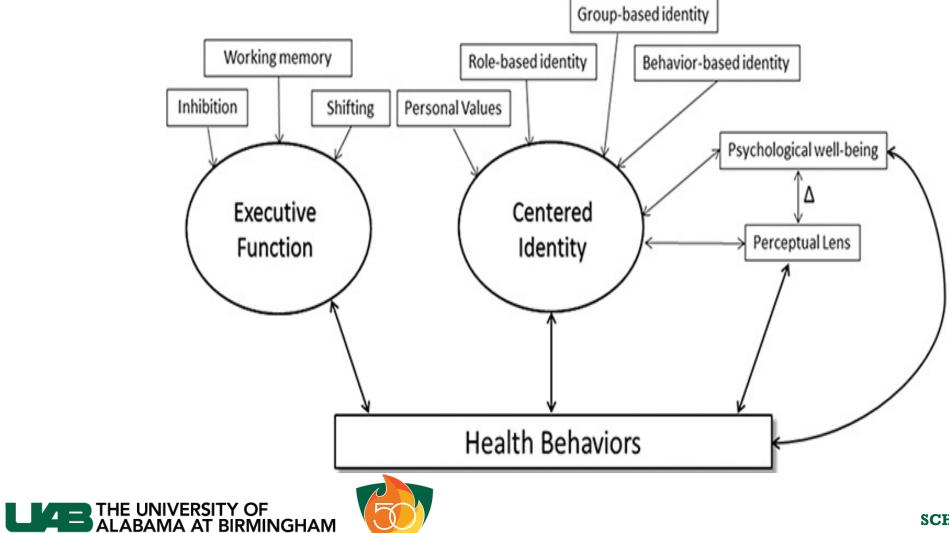
Pharmacological Treatment 5-20%

Surgery 30-40%

LONG-TERM FOLLOW-UP



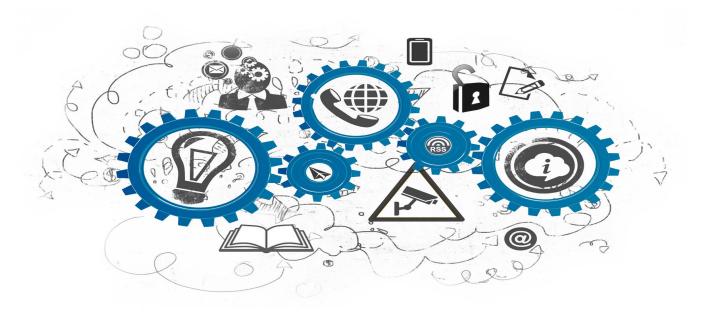
MAINTAIN IT MODEL



EST. 1969

INVESTIGATOR RESOURCE NEEDS

- 1. Overall Project Leadership
 - Hill, Roberts MPIs
- 2. Other Key Personnel
 - Data Support Team
 - Recruitment/Retention
 - Project Operations



- 3. Training/Development of Early Career Investigators and Investigators from Groups Underrepresented in Obesity Research
- 4. Graduate Students

IWCR: A UNIQUE PLATFORM

- A volunteer-scientist partnership
- A global collaboration
- A precision approach to weight management
- Use of AI, Machine Learning, Modeling to develop new testable hypotheses about obesity treatment
- A virtual project that is consistent with the future of clinical research
- We welcome collaborators, new ideas, and support
- A resource for the obesity research community

www.internationalweightcontrolregistry.org

SUMMARY

- We can reliably produce weight loss, but not weight loss maintenance
- We do not completely understand reasons for weight regain after voluntary weight loss
- There is not likely to be a single strategy for weight loss maintenance
- Weight loss maintenance is difficult to study prospectively
- The IWCR can be a source of hypothesis generation to help develop prospective studies of weight loss maintenance

University of Alabama at Birmingham

