

Weight Management Workbook

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Weight Management Workbook

The information in this pamphlet is based on Obesity Canada's Guideline.

What is obesity?

Obesity is a disease that causes you to have extra or abnormal body fat that affects your health.

In health care settings, it is important for health care providers managing obesity to work to lower:

- **Weight bias:** This is when a person has a negative opinion about someone based only on their body weight, size, and/or shape. Weight bias can be **external** (towards others) or **internal** (towards yourself).
 - › This can cause the person living with obesity to have feelings of anxiety, shame, self-blame, and/or guilt.
- **Weight stigma:** This is when a person stereotypes or labels someone because of their body weight, size, and/or shape (for example, thinking that a person living with obesity is lazy or not motivated).
 - › Weight stigma can affect a person's weight bias.
- **Weight discrimination:** This is when someone treats a person differently or unfairly because of their body weight, size, and/or shape. This can cause the person living with obesity to be left out of social situations and feel alone, which can affect their mental health.

Reflection:

- Have you experienced weight bias, weight stigma, or weight discrimination from yourself or others? Please share examples, if you feel comfortable doing so.

What causes obesity?

- **Obesity is a chronic (ongoing) disease.** It happens in the brain and is affected by your **genetics** (passed down from parents to their children) and your environment.
- **You cannot control your genetics with willpower.** Recognizing this can help to lower weight bias and stigma.

How is the brain involved?

There are 3 brain systems that regulate (control) **appetite** (feelings of hunger) and **metabolism** (how quickly a person's body turns food into energy):

1. **Executive system:** This is the thinking part of the brain that helps with making decisions and self-control.
 2. **Hedonic system:** This is the reward part of the brain.
 3. **Homeostatic system:** This is the hypothalamic part of the brain. It makes hormones.
- When you lose weight, the homeostatic system tells the hedonic system to find food to help you survive. This is why diets often stop working and people go back to their usual eating habits.
 - The executive system often “falls asleep” during this process. When the executive system is asleep, you may act on your urges to eat and rationalize overeating.
 - › For example, “What’s 1 dessert going to do?”
 - **The role of behaviour change in obesity treatment is to retrain your brain** so your executive system helps you:
 - › Pause
 - › Reflect
 - › Make choices that match your values (see page 6)

This will help you to keep up your lifestyle changes.

How do genetics affect obesity?

- Hormone levels that drive hunger and fullness, and how your brain reacts to fat loss, are mostly **inherited** (passed down from parents to their children).
- This is why weight loss may be easier for some people and harder for others.

How does the environment affect obesity?

- Over time, our environment has changed:
 - › Portion sizes have doubled.
 - › Many foods are highly processed and are advertised to try to tempt us.
 - › Highly-processed foods are easy to access, while home-cooked meals are less common.
 - › Many people have jobs where they sit for long periods of time.
 - › Food manufacturers may “health wash” foods. This includes using certain words to make a food sound healthy even though it may not be.
 - › There is a lot of information about healthy eating online, which can make healthy choices confusing.
- Our surroundings affect our behaviour:
 - › We tend to match other people’s eating choices in social settings.
 - › Our brains form strong food associations based on reward learning. This means that if you eat something delicious once, your brain will:
 - › Remember the events that led to that delicious food
 - › Make you want to eat it again under the same circumstances
 - › For example, if you often eat a snack while watching TV, your brain will learn this pattern and trigger a craving for a snack whenever you sit down to watch TV.
 - › You can help to trick your brain into not wanting a snack by changing where you do the activity or by doing a different activity.

Reflection:

- When are you most likely to eat or drink extra calories or choose high calorie and low nutrition snacks foods?

- What is happening at that time of day? Where are you? Who are you with?

- Try changing either the activity or the location to see if it helps to lower your craving. Write down the change you made and whether it helped.

My weight journey

- Think about when you have gained or lost weight. What was happening in your life at those times?

- What is going well for you in your weight loss journey?

- What do you feel is preventing you from losing weight?

- What has worked well when you have tried to lose weight in the past?

- What is 1 thing you could change today that would help you reach your health goals?

What are my values and goals?

- **Values** are your **why** (the direction you want to go in and the reason behind your actions).
 - › Your values are what is most important to you. They reflect the things you care about deeply. Your values help to guide your decisions.
- **Goals** are your **what** (the targets that move you in the direction of your values).
 - › **Goals** are specific, short-term targets that you can complete. Your health care team will work with you to set weekly, biweekly (every 2 weeks), and monthly goals that are in line with your values. When your goals match with your values, you are more likely to stay motivated.

Reflection:

- What is your **why** for wanting to lose weight?

- **Values statement:** Even if my weight loss is slow, I can stay motivated by remembering that I value:

- Put a reminder of your **why** (like a quote or a photo) somewhere where you will see it each day (like on your phone or your fridge). This can help you:
 - › Reflect each day on what matters most to you
 - › Check if your behaviours are lined up with your values

Finding my best weight

- If you have a goal weight in mind, you may want your weight to come off as quickly as possible. But the best way to keep up your weight loss is to:
 - › Make lifestyle changes that cause you to lose weight slowly over time
 - › Make lifestyle changes that you can keep up long-term
- People who are losing weight often get to a **plateau** (their weight stays the same) after losing weight for 4 to 6 months. This is usually because the weight they expected to lose was not realistic. This can be discouraging.
- If you get to a weight loss plateau, ask yourself if the way you eat and move is healthy and if you can keep it up.
- Your **best weight** is your weight when:
 - › You are taking in the least amount of calories you can, while still enjoying life and not feeling restricted
 - › You are moving as much as you can in a way that feels enjoyable and like you can keep it up long-term

Reflection:

- If you have gotten to a plateau, do you think it is because you are at your best weight?

How can weight loss help my health?

- Losing weight is not just about the number on the scale. If you are able to lose 5 to 10% of your weight over several months, you will:
 - › Lower your risk for type 2 diabetes
 - › Improve your blood pressure
 - › Improve your cholesterol
 - › Improve your sleep
 - › Improve your sleep apnea symptoms (if you have sleep apnea)
 - › Improve your pain

Reflection:

- What are some of the things you have achieved so far that are not related to your weight? It may help to write them down so you can reflect on them when you feel off track or like you are not progressing in the way you want to.

1. _____

2. _____

3. _____

4. _____

5. _____

- Some people find it helps to write their achievements on sticky notes and put them where they will see them often.

What are my treatment options?

Retraining my executive system

- When you have a craving, your executive system (see page 2) follows **permission thoughts** because it is asleep:

› Craving → Permission thought → You eat more than you need to

Examples:

- › “I’ve been good all week. I deserve this.”
- › “I’ve had a hard day, so I need this to feel better.”
- › “I’ve been off track since yesterday, so I’ll just start again on Monday.”

- **Restraint thoughts** wake up your executive system.

› Craving → Restraint thought → You eat in line with your values

Examples:

- › “I do deserve a treat, but this does not line up with my values.”
- › “There are other things I could do to make me feel just as good that do not involve food.”
- › “I have gotten off track and it’s time get back on track. I can do this!”

- **With practice, you can make restraint thoughts automatic.**

Reflection:

- List all of the permission thoughts you had this week and the restraint thoughts you used to change your thinking.

Permission thought:

Restraint thought:

What else can I do to lose weight?

While we cannot control some of the things that may cause weight gain, there are many things that we can control. Some of these include:

Sleep

- Not getting enough sleep or getting poor sleep can raise your hunger hormones and lower your satiety (fullness) hormones. This can make it hard to keep a regular appetite.

Stress

- Stress can increase your cravings for high calorie and low nutrition snacks. Once you get off track for 1 day, you may feel like giving up. To help you keep going, remind yourself of your **why** (see page 6).

Eating patterns

- Going too long without food during the day can raise your hunger hormones. When you do eat something, it can be very hard to stop eating beyond that meal. Eating regularly, even smaller, more frequent meals, can help appetite regulation and metabolism.

Activity

- Exercise does not directly cause weight loss, but it is important for your mental, cardiovascular, and overall health. For example, if you are having a craving, going for a 10-minute walk can stop it.

Reflection:

- What is 1 thing you could work on to affect your appetite regulation?

- What is your plan to make improvements in this area?

Make a self-care box

- › Fill a small box with things you love (like a new magazine or book, a cozy pair of socks, a skin care product, a “coupon” to go do something you love).
- › When you feel like using food to help you cope with stress, choose a self-care reward from the box instead.

You will have days when you get off track. This is normal. What is important is what you do after these days. Use the skills you have developed to get back on track and go easy on yourself.

Medication

- Some people living with obesity may need medication.
 - › **Note:** Medication is not meant to help you lose weight quickly. It is only **1 part** of a treatment plan that will also include healthy eating, behaviour changes, and other supports. **Medication does not replace healthy habits.**
- You may need medication if you:
 - › Have a **body mass index (BMI) of 30 or higher**
 - or
 - › Have a **BMI of 27 or higher and health concerns related to your weight** (like type 2 diabetes, sleep apnea, or high blood pressure)
- Each weight management medication works in a different way. It may:
 - › Lower your appetite
 - › Help you feel full sooner
 - › Regulate your blood sugar and improve insulin resistance
 - › Make it easier to keep up healthy lifestyle changes by lowering **food noise** (always thinking about food or eating)
- **Medications approved in Canada:**
 - › Semaglutide (Wegovy®)
 - › Tirzepatide (Zepbound®)
 - › Liraglutide (Saxenda®)
 - › Naltrexone and bupropion (Contrave®)
 - › Orlistat (Xenical®)

What will happen when I take medication for obesity?

- Each person is different. Some people lose more weight than others.
- You may have side effects, especially when starting a medication. These often go away over time.
- Your health care provider may need to adjust your dose (amount) to find the amount that is right for you.
- If a medication is not helping, your health care provider can change or stop it and you can try a different one. **Do not** change or stop taking your medication without talking to your health care provider or pharmacist first.
- **Before you start taking medication for obesity, it is important to know:**
 - › These medications usually need to be taken long-term.
 - › If you stop taking the medication, you may gain back the weight you lost. This is common.
 - › These medications work best when combined with a healthy lifestyle.
- These medications can also help to improve other conditions you may have, like:
 - › Blood sugar levels and diabetes control
 - › Heart health
 - › Sleep apnea
 - › Joint pain
 - › Fatty liver disease

Bariatric surgery

- Bariatric surgery (also called weight loss surgery) is a proven treatment for people with severe (very bad) obesity, particularly when healthy eating habits and physical activity have not helped.
- For more information, visit:
 - › www.nshealth.ca/clinics-programs-and-services/truro-obesity-care-team

What are your questions?
Please ask a member of your health care team.
We are here to help you.

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.