

New eating device retrains dietary habits and helps children lose weight

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A new computerised device that tracks portion size and how fast people eat is more successful in helping obese children and adolescents lose weight than standard treatments, according to research published on bmj.com today.

The Mandometer device, a portable computerised weighing scale, was developed at the Karolinska Institutet in Stockholm. It helps to retrain individuals to eat less and more slowly by providing real-time feedback during meal times. The device plots a graph showing the rate at which food actually disappears from the plate, compared to the ideal graph programmed in by a food therapist.

<u>Childhood obesity</u> is an increasing global problem and there is little evidence to support one specific treatment programme. While it is unknown whether specific eating patterns are common in all obese people, in this study the patients ate large portions very quickly.

Researchers at Bristol Royal Hospital for Children and the University of Bristol, led by Professor Julian Hamilton-Shield, carried out a randomised controlled trial of 106 obese patients aged between 9-17 years.

One group of participants received Mandometer therapy to lose weight and the other were provided with standard care. Both groups were encouraged to increase their levels of <u>physical activity</u> to 60 minutes of exercise a day and to eat a balanced diet based on the Food Standards



Agency "eatwell plate."

Participants were assessed after 12 months and followed up at 18 months. During the research period they were also regularly monitored and offered telephone support and encouragement.

After 12 months, the Mandometer group not only had a significantly lower average body mass index and body fat score than the standard care group, but their portion size was smaller and their speed of eating was reduced by 11% compared with a gain of 4% in the other group. Levels of 'good cholesterol' were also significantly higher in the Mandometer group.

The improvement in <u>body mass index</u> was maintained six months after the end of treatment, suggesting an element of longer term behavioural change, add the authors.

"Mandometer therapy, focussing on eating speed and meal size, seems to be a useful addition to the rather sparse options available for treating adolescent <u>obesity</u> effectively without recourse to pharmacotherapy," say the authors.

They acknowledge that the Mandometer requires further evaluation in other settings and with different groups of patients, but conclude that "Retraining eating behaviour and reinforcing feelings of satiety, however, does seem to improve weight loss in obese adolescents."

Provided by British Medical Journal

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