

Commercial weight loss system expands diabetes prevention access

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A new randomized controlled study conducted by Indiana University School of Medicine researchers and published online today in the *American Journal of Public Health* found that adults with prediabetes who followed a nationally-available weight management program with a prediabetes-specific component, Weight Watchers, lost significantly more weight and experienced better blood glucose control than those following a self-initiated program using supplemental counseling materials. With 86 million Americans estimated to have prediabetes, these study findings suggest that nationally available weight loss programs with a specific prediabetes module can be a powerful tool in preventing prediabetes from becoming type 2 diabetes, and have the potential to offer an immediate and important impact on public health.

"The findings suggest that Weight Watchers, a widely-available, empirically-validated weight management program, could significantly expand access to effective [diabetes](#) prevention programs," said lead investigator Dr. David Marrero, J.O. Ritchey Professor of Medicine, Indiana University School of Medicine. "The flexibility of the Weight Watchers model - with curriculum available online and at various locations, days and times throughout the week - is compelling to those who need flexibility to accommodate today's busy lifestyle."

Previous research has shown that people with prediabetes can reduce their risk of developing type 2 diabetes by 58% if they lose 5% to 7% of their body weight through a structured lifestyle program aimed at weight loss, dietary change and an increase in physical activity. Despite this

evidence, it has been difficult to scale prevention programs to address growing [public health](#) demands.

To determine whether a widely-available weight management program could achieve sufficient weight loss in those with prediabetes to reduce diabetes risk, Indiana University School of Medicine researchers evaluated the effects on weight and metabolic regulation of the Weight Watchers program plus a specific prediabetes component compared with a control group who received instruction on how to initiate a self-led [weight loss](#) and activity program using diabetes education materials, among 225 people with prediabetes at baseline, six months and 12 months.

The study found that those who participated in the prediabetes-specific Weight Watchers program lost significantly more weight than the control group at both six and 12 months. On average, Weight Watchers participants lost 5.5% of their body weight at six months and fully maintained that loss at 12 months, while the control group lost 0.8% of their body weight at six months and experienced slight regain for a loss of 0.2% of their [body weight](#) at 12 months. This translated, on average, to 4.6 more kilograms (10.14 pounds) lost at six months, and 5.3 more kilograms (11.68 pounds) lost at 12 months, for intervention participants than participants in the control group.

"This study demonstrates that widely-available programs, such as Weight Watchers, can be tailored for and produce [weight](#) loss in people with prediabetes consistent with that seen in the National Diabetes Prevention Program at a reasonable cost," said Gary Foster, PhD, Chief Scientific Officer at Weight Watchers. "These data show that Weight Watchers provides an effective and accessible approach to diabetes prevention without the need to create additional infrastructure, disseminate complex treatment programs, and train new treatment providers."

The prevalence of type 2 diabetes has reached epidemic proportions, affecting more than 29 million Americans with costs exceeding \$245 billion annually. It is troubling that an estimated 86 million Americans (37% of those aged 20 years and older) have prediabetes, a metabolic condition that significantly increases the risk for developing type 2 diabetes. If prediabetes is not effectively managed, there will be a significant increase in the number of people who develop type 2 diabetes, as well as the associated medical, social and fiscal costs attributable to the disease.

Provided by Indiana University

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