

Supporting weight-loss medications with adequate, tailored nutrition

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While weight-loss medications are having a positive effect on many Americans' health, it is important to also talk about nutrition. Not just the "please eat healthy and exercise" narrative (despite its truth), but

making sure that patients on weight-loss medications are able to manage side effects, stay hydrated and consume adequate nutrients.

Medications for obesity approved by the Food and Drug Administration often work by decreasing appetite and increasing fullness. Popular glucagon-like peptide 1 medications slow gastric emptying, or the rate at which food leaves the stomach. This can lead to common side effects such as nausea, constipation and vomiting.

For most, these side effects are mild and temporary. They are likely to be most bothersome at medication start or with a dose increase, and they may resolve or improve within days to weeks.

For many, side effects become manageable with time and intention. Users should eat slowly, avoid large meals, drink plenty of fluids and maintain [protein intake](#). If calories become a concern (less than 1,200 a day), work on increased calorie and nutrient density with meals, beverages and snacks.

Items such as Greek yogurt, smoothies, protein shakes and soups are often nutrient-dense and easy to digest. Soft, blended or liquid meals may be better tolerated. Remember that hydration is crucial because the lack of it may cause or worsen side effects including nausea, constipation, headaches and fatigue. Make sure to have water or another healthy beverage on hand, and sip throughout the day.

Building a bank of habits is key for the long haul. While more medication options will be available in the coming years, it's important to consider skillset, should someone need or choose to go off the weight-loss drug. Weight regain can be a scary and very real concept.

Just as someone who relies on a medication to keep their [blood pressure](#) in a healthy range, eliminating the medication would likely result in

hypertension again. That's why the word "tool" is used when it comes to weight-loss medications, procedures and surgeries. They are an added benefit, but that one tool is not doing all the work. By focusing on [nutritious meals](#) and establishing an [exercise routine](#) immediately, the groundwork is set for long-term success, regardless of whether the tool is being used in the future.

Rapid weight loss, whether from [lifestyle changes](#), medications or procedures, will lead to some muscle mass loss. Focus on and divide sources of protein from food or beverages throughout the day. To not add volume to meals, brainstorm ways to add protein without adding bulk, like adding a protein powder or Greek yogurt to a morning smoothie, dipping veggies in cottage cheese or adding beans to a favorite soup. Eating protein as the first item in the meal is also a helpful strategy to make sure it's not left on the plate.

Engaging in strength training is equally as important. Start with body weight if needed, and increase weight or difficulty over time. Can't nail a push-up yet? That's OK! Practice first by using the wall. Then try from the arm of a couch. Progress to your knees, and don't feel bad if a push-up from your toes just isn't going to happen.

The goal here is to maintain and/or build all muscle groups. Other [body-weight](#) exercises include squats, lunges, planks, triceps dips and wall sits.

In addition to the medication prescriber, patients may benefit from programs designed specifically for weight-loss [medication](#) users.

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