

Anti-Obesity Medications




Springfield
clinic

A COMMUNITY OF CARING

MANAGE CRAVINGS. IMPROVE MINDFULNESS. BECOME MORE AWARE



Help!

I'm on anti-obesity medications and I don't want to eat!

Anti-obesity medications are a great tool to help manage cravings, improve mindfulness when eating and become more aware of why we are eating to assist you in your weight loss journey.

Even when these medications are part of your care plan, meeting your calorie needs are still important so your body will burn fat and not muscle.



Smaller, more frequent meals/more substantial snacks.



The larger the meal, the slower the meal will empty.

Eating smaller, more frequent meals/snacks will help you meet your energy needs so you are losing body fat and not muscle.



Try aiming for 200-300 calorie small meals or snacks more often throughout the day instead of larger meals.

Individual energy needs for weight loss vary per person, but it's important for women to not fall below 1200 calories per day and men to fall below 1500 calories per day to ensure metabolism support.

Some Menu Examples:

(each provide ~300 calories)

- ¼ cup hummus + 1oz pretzels + small apple
- 1 slice white toast + peanut butter (1 tbsp) + small banana (5-6 inch)
- 2% milk cheese (1 slice) + crackers (serving of wheat thins) + low fat yogurt (6oz)
- Low fat Greek yogurt (6oz) + low fat granola (¼ cup) + strawberries (½ cup) mixed with 1 tbsp powdered peanut butter

Alternate higher fiber foods throughout the day or try smaller amounts.



Fiber is fabulous in that it keeps us full longer, but with anti-obesity medicine, too much fiber can further reduce desire to eat enough.



Alternate between meals and snacks:

Raw and cooked vegetables/fruits

Cooked vegetables/soft/peeled fruits and vegetables have less fiber than raw and often sit in the stomach differently.

Higher and lower fiber grains

Higher fiber: 3g or higher on food label

- Whole grain pasta
- Brown rice
- High fiber tortillas (like Mission Carb Balance, Whole Wheat Tortillas)
- High fiber cereals (like Fiber One, Kashi, Shredded Wheat)
- Raw fruits and vegetables/peel on
- Dried fruits
- Legumes/dried beans

Lower fiber: <3g on food label

- Cooked fruits/vegetables
- White pasta
- White rice
- Lower fiber containing cereals (like: Rice Krispies, Cheerios, Original Special K)
- Legumes/dried beans

Add some healthy fat

and/or try smaller amounts/space out higher fat foods throughout the day to see if it is better tolerated.



Fat is a necessary nutrient for body functions from keeping us warm and protecting our organs. Like fiber, it also empties a little slower from the stomach, which can cause you to feel overly full while on AOM.



Adding a serving of healthy fat to a meal or snack can help to meet your energy needs in a small volume of food.

You may need to split these servings up even further throughout the day if you find yourself feeling overly full and not wanting to eat.

- Add 1-2 Tbsp natural peanut butter or nut butters
- ½ avocado
- ¼ cup nuts



It's about the amount of fat at a sitting vs just type of fat.

Your heart knows the difference between a heart helpful fat or a heart harmful fat...your stomach only cares about the amount at one time.

Choose foods that are lower in fat:

- A good guideline is 3 g total fat for every 100 calories a food has in it.

Food Fluids

Add in some “food fluids” to help meet your energy goals.



Liquids tend to empty a little easier from the stomach than solids do. When taking AOM, this can be a great way to help meet your fluid and intake goals.



Try adding:

- Up to 24oz of low fat/fat free milk per day
- 8oz of 100% fruit juice
- Liquid protein supplement or meal replacement shake
 - Premiere Protein
 - Fairlife Milk or Core Power Protein Shake
 - 1 scoop Nectar or Unjury protein powder mixed with 8-12oz low fat/fat free milk



Set a reminder or alarm so you don't forget to eat!

Hunger can look and feel different on AOM. It's important to remember your body still needs fuel to live and burn body fat. Set alarms to remind yourself to eat and/or check in with your body throughout the day.

Sample Menu

Minimum 1200-1300 calories (meals ~300 calories/each)



Meal 1

- 1 egg + 1 slice 2% milk cheese
- 2 tsp butter
- ½ English muffin



Meal 2

- 8oz Fairlife 2% milk
- Small 6in banana
- 1 tbsp Natural No stir peanut butter



Meal 3

- 2 oz deli turkey
- 2 tbsp hummus
- 1 oz feta cheese
- 6 inch whole grain tortilla
- ½ cup raw spinach
- Cucumber slices
- Small apple



Meal 4

- 1 cup chicken
- stir fry veggies
- 1 cup jasmine rice

TOTAL CALORIES: ~1300 CALORIES



Sample Menu

Minimum 1400-1500 calories (meals ~300 calories/each)



Meal 1

- 1 egg + 1 slice 2% milk cheese
- 2 tsp butter
- ½ English muffin
- 4oz 100% orange juice



Meal 2

- 8oz Fairlife 2% milk
- Small 6in banana
- 1 tbsp peanut butter



Meal 3

- 2 oz deli turkey
- 2 tbsp hummus
- 1 oz feta cheese
- 6 inch whole grain tortilla
- ½ cup raw spinach
- Cucumber slices
- Small apple



Meal 4

- 1 cup chicken
- stir fry veggies
- 1 cup jasmine rice



Meal 5

- 8oz Fairlife 2% milk

TOTAL CALORIES: ~1550



Common Side Effects & Ways to Manage Them

Nausea/GERD:

A lot of times patients are dehydrated or have not eaten anything and are simply hypoglycemic. It is important for patients to stop and think about why they are battling nausea. If they have achieved these two items, the next thought should be focused on their last few meals/snacks. Foods that are fatty/greasy or highly processed tend to take longer to breakdown and can exacerbate side effects of these medications namely GERD/reflux and nausea and should be eaten in moderation. Lastly, remember the importance of satiety cues. If ignored and one overeats, nausea can be extreme and even lead to vomiting or reflux. Patients may receive a prescription for anti-nausea medications when they first initiate a GLP1 such as Ozempic/Saxenda/Wegovy. This can help when they are having an especially bad day, that said, one must avoid becoming dependent or masking symptoms! Same can be said for using Tums or protonix/omeprazole for GERD.



Constipation:

Due to the delayed gastric emptying, we know that patients can have extreme constipation on these medications. This is sometimes worsened as patients are not eating enough and often very protein first focused. Obviously, patients need to add in as much dietary fiber as possible, but if this is difficult patients could consider initiating fiber supplementation. Hydration is also critical with at least 64 ounces of water daily and activity to help stimulate the bowel. If there is no bowel movement in three days, patients should discuss starting MiraLAX until they are going regularly with their provider.

Sulfur Burps:

While it is less common, sulfur burps are something that occasional pops up. Remember that digestion starts in the mouth, so slow down and chew food to applesauce consistency as it will allow initial digestion enzymes to start the process. Again, limit greasy/fatty foods as well as processed foods, as they are more complex and harder to breakdown. Stay active to keep food moving through the GI system! If constipated (see above) as we need to focus on moving food through the system to help with symptoms! Consider starting a probiotic to assist with gut flora and food breakdown.

If you have a particularly bad day with any of the above symptoms, consider taking a step back in your diet and deferring to a liquid diet for 2-3 meals to allow for easier and faster digestion.





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