# **Type 2 Diabetes Prevention: Lifestyle Change and Coverage Considerations**

# Helping People Make Lifestyle Changes that Stick

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# **Detail findings from Look AHEAD and POUNDS LOST studies**

### **Outline**

- Detail findings from Look AHEAD\* and POUNDS LOST\*\*
- I.D. factors for successful weight loss
- I.D. factors for successful weight maintenance post weight loss

\*Look AHEAD: Action for Health in Diabetes

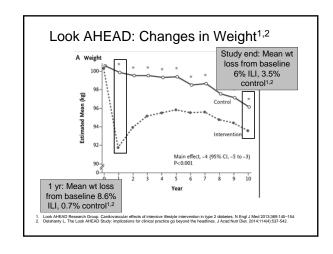
## Look AHEAD Trial



- Study details:
  - Long term (start ~2000), multicenter, RCT, ended early 20121,2
  - ->5,137 (55-76 yrs), overwt or obese individuals<sup>2</sup>
  - T2 diabetes for  $6.8 \pm 6.5$  yrs (range 3 mos 13 yrs)<sup>3</sup>
  - Median follow up 9.6 yrs<sup>4</sup>
- · Primary Outcome:
  - Will intentional weight loss reduce the incidence of fatal and nonfatal cardiovascular and cerebrovascular events?
- http://www.nih.gov/news/health/oct2012/nidsk-19.htm
   Look AHEAD Research Group. Reduction in weight and cardiovascular disease risk factors in individuals with type 2 diabetes. Diabetes Cere. 2007;30(6):1374-1383
   Berton, et al. Journal of Dabetes and risk Compilications. 2008;22(1-9).
   Look AHEAD Research Group. Cardiovascular effects of intensive lifestyle intervention in type 2 diabetes. N Engl J Med 2013;369:146-154.

# Look AHEAD Trial – Groups Defined

- Intensive Lifestyle Intervention (ILI):1,2
  - 7% > wt loss at one year
  - >175 minutes physical activity/week
  - Calorie goal: 1200-1800 cals/day, ≤ 30% of cals as fat
  - Support: significant, especially early
- Diabetes Support and Education (DSE)/(control)



<sup>\*\*</sup>POUNDS LOST: Preventing Overweight Using Novel Dietary Strategies

# Look AHEAD - Positive Results, Despite Headlines<sup>1,2,3</sup>

- Median follow up 9.6 yrs1
- Mean wt loss from baseline 6% ILI, 3,5% control<sup>1</sup>
- A1c lowering ILI group 0.2%1
- Primary outcome: Failed to reduce CVD events in ILI vs. control
- Other health benefits:
- Reduced sleep apnea, depression, urinary incontinence and improved QOL3
- Subjects with early T2D = most health benefits
  - Shortest duration
  - Not on insulin
  - Good baseline glycemic control
- Lock AHEAD Research Group. Cardiovascular effects of intensive lifestyle intervention in type 2 diabetes. N Engl J Med 2013;389:146.
  Delaharty, L The Lock AHEAD Study: implications for clinical practice polysoprof the headiness. J Acad Nati Disc. 2014;114(5):537-642.
  Moreover, Commission of the Comm

# Look AHEAD: Benefits of Weight Loss on CVD1

- . ILI who lost >10% of BW
  - 20% lower risk of the primary outcome\*
  - 21% lower risk of secondary outcome\*
- Change in fitness was not significantly associated with a change in the primary outcome
- · Key factor = amount of weight loss

\*Primary outcome: composite of death from CV causes (non-fatal acute MI, non-fatal stroke, or hospital admission for angina

\*\*Secondary outcome: primary plus hx of CABG, carotid endartectomy, percutaneous coronary intervention, hospitalization for CHF, peripheral vascular disease, or total mortality (death)

Gregg EW. Association of the magnitude of weight loss and changes in physical fitness with long-term cardiovascular disease outcomes in overweight or obese people with type 2 diabetes: a post-hoc analysis of the Look AHEAD randomised clinical trial. Lancet Debates Endocrinol. 2016 Nov4(41):1913-921

# Look AHEAD - Positive Results, Despite Headlines<sup>1,2</sup>

- Financial analysis<sup>2</sup>:
  - ILI produced mean relative per-person 10-year healthcare cost savings of \$5,280; not evident in ppl w/ hx of CVD
  - Average annual savings ~\$600/participant
  - ILI used fewer medications (7%)
  - ILI had fewer hospitalizations (11%)
- Look AHEAD continues as observational trial until 1/20213

# POUNDS LOST Study<sup>1</sup>

### Study details:

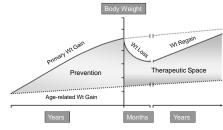
- NIH 2 yr wt loss trial, 800+ subjects, 2 sites
- Overwt adults, BMI: 25 40
- 4 diets, varying % calories:
  - CHO Low 35% to high of 65%
- Sacks, F, et al. Comparison of Weight-Loss Diets with Different Compositions of Fat, Protein, and Carbohydrates New Eng J Med. 2009;360(9):859-873.
- \*Preventing Overweight Using Novel Dietary Strategies

# POUNDS LOST Study<sup>1</sup>

- No one nutrient composition faired better than another (subjects modified towards diet goal, but didn't reach diet's goal)
- · Weight loss:
  - 6 months: similar weight loss 7% (6 kg/13 lbs)
     12 months: regained similar amounts of weight

  - 2 years weight loss remained similar: 4 kg/9 lbs
  - Subjects attending 2/3rd of sessions lost: 9 kg/20 lbs
- · Clinical improvements:
  - Reduced cardiovascular disease and type 2 diabetes risk factors including lower LDL-cholesterol, BG and serum insulin levels; and slightly lower BP
- Sacks, F, et al. Comparison of Weight-Loss Diets with Different Compositions of Fat, Protein, and Carbohydrates. New Eng J Med. 2009;360(9):859-873.

# Natural History: Wt Gain, Loss, Regain<sup>1</sup>



Eckel RH et al: Obesity and type 2 diabetes: What can be unified and what needs to be individualized? Diabetes Care 34:1424-1430, 2011

# Weight Loss Matters Most — When?¹ Natural History of Type 2 Diabetes Post-med glucose Post-med glucose Post-med glucose Presting glucose Insulin realisance Presting glucose Presting glucose Presting glucose Presting glucose Presting glucose Insulin realisance Presting glucose Resultin Feed Resultin Feed

# Words of Wisdom and Sanity from Experts: Arya Sharma, MD



- Obesity/overweight a chronic, progressive condition
- Early, aggressive management is critical
- · It's not a treat it, you're done condition
- Our goal should NOT be to help people get thinner, but to help people get healthier. Take the attention off of weight.
- "I only care about the weight you can keep off."

AADE 2013, http://www.presentdiabetes.com/ezines/fezine413.
Chair in Obesity Research and Management at the University of Alberta in Edmonton and Director of the Alberta Health Services Debesity Porgram. <a href="http://www.drsharma.ca/">http://www.drsharma.ca/</a>.
http://www.drsharma.ca/

# 15 Dietary Approaches Associated with Weight Loss by Expert Panel<sup>1</sup>

Among 15, range of options:\*

- Higher protein (25%), fat (30%), carbohydrate (45%)
- Lacto-ovo-vegetarian-style
- Low-fat (10% to 25% of total calories from fat) vegan-style
- Low-carbohydrate (initially <20 g/day carbohydrate)
- Mediterranean-style diet with prescribed energy restriction

\*If reduction in dietary energy intake is achieved.

 Jensen MD, et al. Guideline for the Management of Overweight and Obesity in Adults: A Report of the ACC, AMA, TOS Task Force on Practice Guidelines. Circulation. https://circ.ahajournals.org/content/early/2013/11/11/01.cir.0000437739.71477.ee.hull.pdf-html?sid=6a/28578-67bi4 bbb1-3446-91eba813898 (published in a Sascistation journals)



# Words of Wisdom and Sanity from Experts: David Katz, MD



- (On DIETFITS 2/23) "A shift to wholesome foods in sensible
  combinations is effective at lowering weight and improving
  health regardless of fat or carbohydrate levels, even among
  those with insulin resistance at the start...study suggests best
  way to lose weight and improve health...is not by fixating on
  macronutrients or calories, but by eating wholesome foods...
  emphasizing whole, minimally processed plant foods."<sup>1</sup>
- (On LA Times Taube, Teicholz editorial low carb, high sat fat 2/2) "On what planet did the American public ever try these diets [Dietary Guidelines]? Clearly, not this one. A high quality, traditional Mediterranean diet, the DASH diet all others that ranked well on the [U.S. News] Best Diets are more alike than different...Emphasis on whole, minimally processed vegetables, fruits, whole grains, beans, lentils, nuts, and seedswith or without lesser amounts of minimally processed dairy products, lean meats, eggs, fish, and seafood.<sup>2</sup>

https://www.linkedin.com/pulse/horse-sense-weight-loss-david-l-katz-md-mph-facpm-facp-facim/
 https://www.linkedin.com/pulse/diet-obesity-myth-mystery-david-l-katz-md-mph-facpm-facp-facim/?trk=mp-reader-card

Identify factors for successful weight loss, maintenance from recent evidence

# National Weight Control Registry (NWCR) - 10 years1

- Initiated 1993, Wing and Hill
- Goal: ID successful wt loss maintainers and describe their strategies
- Criteria: ≥ 30lbs maintained ≥ 1 yr; now > 10,000
- 10 yr study: enrolled 1993 2000
- Total: 2886 completed > 2 of 10 annual f/u surveys

# NWCR - 10 years Predictors of Success<sup>1</sup>

- · Magnitude of initial wt loss and duration
- · Increased physical activity
- Low calorie and low fat intake
- · High restraint and low disinhibition around food
- · Self-weighing > several times/wk

"Continued adherence to each behavior can improve long term outcomes."

# NWCR: Low Calorie Sweeteners and Weight Control<sup>1</sup>

Design: Random sample (N=434) of NWCR participants (mean wt loss: 34.2 ± 18.5 kg maintained for 7.8 ± 5.2 yrs) responded to online survey about their consumption of low/no calorie sweetened beverages (LNCSB)

- 53% regularly used LNCSB, while 10% regularly consumed SSB.
- 78% who regularly used LNCSB reported they helped them control calorie intake
- Top 5 reasons for using LNCSB were: taste (54%), satisfy thirst (40%), part of their routine (27%), reduce calories (22%), go with meals (21%)
- Participants reported:
  - Changing their beverage choices was "very important" to successful weight loss (42%) and weight maintenance (40%) efforts
  - Increasing water consumption was the most common strategy reported with reducing SSB intake second
- Catenacci VA, Pan Z, et al: Low/No Calorie Sweetened Beverage Consumption in National Weight Control Registry. Obesity. 2014;22(10): 2244-2251. http://onlinelibrary.wiley.com/doi/10.1002/oby.20834/abstract

# Weight Loss: Successful Strategies

- Ready, willing and able?1,2
- Focus, don't overwhelm1,2
- Choose behaviors most ready to change 1,2
- Reduce total fat to  $\leq$  30% fat (don't focus on carb)<sup>2,3</sup>
- Use of meal replacements/structure<sup>3</sup>
- Include physical activity<sup>2-5</sup>
- Early success (wt loss) predicts later success (frequent contact early)<sup>5,6</sup>

issent. Lessors from the DPP, On the Custing Eggs, Dablesto Care and Education. 2003;29(s).

shakings: I, Nathan J. On the Assoc. 1200 (1500)(Begs) 1566-77.

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# Words of Wisdom and Sanity from Experts: B.J. Fogg, PhD

Fogg equation:

BC (behavior change) = M (motivation) + A (ability to make the change) + T (the trigger).

- Tie new behavior to existing, easier to accomplish
- Build "success momentum" one tiny habit change after another
- Can't break bad habits. We can, overtime, "untangle" them
- Behavior change mastery occurs due to continual practice. Eventually "healthy reflexes" emerge
- "Help people change what they already want to change, not what they know they should change but don't really want to.



https://www.bjfogg.com/

# Weight Maintenance: Successful Strategies

- Physiologic realities<sup>1</sup>
  - Lower calorie needs to maintain lower weight: 300 400/day
- · Food/Calories:
  - Low calorie, low fat intake<sup>2,3,4</sup>, eat breakfast<sup>2,5</sup>
  - Simplify eating plan, minimize choices<sup>3</sup>
- Physical Activity<sup>4</sup>:
  - Regular significant physical activity (60-90 min/day)<sup>2,4</sup>
     Minimize sedentary behavior eg TV watching<sup>5</sup>
- Maintain continuous support · Relapse prevention plan
- Regular self weigh-ins<sup>4,5</sup>

Kosenbaum M. Weight Managament DRG Symposium. 2013.

Retherly, on the Culting Edge, Debetes Care and Education. 2008.29(4).
Wadden, TA, Nebberg, RH, Wing, RR, et al., The Look A/READ Research Group. (2011), Four-Year Weight Losses in the cotors Associated Winton-green Success. 1009.

Look A/READ Research Group. Eight-year weight losses with an ILL The Look A/READ Study. Oberbg 2014.22(1):5-13.

Graham Tomasu J at "Weight-boss markennace for 10 yea in NVICR. An J Prew Med. 2014.62(1):17-23.

