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Personalized nutritional program and product development for professionals and their clients.

New Direction Outcome Study: A Summary

By Robard Corporation and Palos Community Hospital

Objectives

1. To assess maintenance of weight loss achieved while on the New Direction program.
2. To identify lifestyle characteristics common to successful patients.
3. To develop a baseline of weight management outcomes upon which efficacy of new services can be compared.

Subjects

A listing of 955 patients enrolled at Palos Community Hospital's New Direction program since its opening was compiled. Of these, 437 patients were eligible to participate in the study. Patients who completed the Reducing Phase of the New Direction program, who attended at least one class in the Adapting Phase and who participated for at least one year prior to the study were considered eligible. Of the 437 eligible patients, 141 agreed to participate.

On average, study participants started the New Direction program with a BMI of 36.8. They achieved a 19% reduction in body weight at the end of the Reducing Phase lowering their BMI to 28.6.

Procedures

Each of the 141 participants returned to the center for a follow-up appointment. Their weight was measured and they completed a lifestyle questionnaire, from which we measured:

- Percentage of entry body weight lost at follow up
- Percentage of weight loss maintained
- Diet and exercise habits

Results

Objective One

- Half of the participants achieved medically significant weight loss at the 1-year post Reducing Phase, 31% at 2-years and 17% at 3-years. Medically significant weight loss is defined as weight loss greater than or equal to 10% of initial body weight.
- At 1-year post reducing 47% of the participants maintained greater than or equal to 50% of their weight loss, 25% at 2-years and 11% at 3-years.
- As the number of Sustaining sessions attended increased, percentage of body weight reduction increased. For example, those who attended 0-8 sessions experienced a 3% reduction from their initial body weight in comparison to those who attended 17-24 sessions who experienced a 16% reduction.
- Individuals who attended more Sustaining sessions also maintained more of their weight loss. For example, those who attended 0-8 sessions maintained 5% of weight loss, in comparison to those who attended 17-24 sessions maintained 59% of their weight loss.

Objective Two

- Both Maintainers* and Non-Maintainers* ate low fat diets; however, the scores for the Maintainers' diets were significantly lower in fat than Non-Maintainers.
- Maintainers had significantly higher exercise scores than Non-Maintainers.
- Almost 50% of Maintainers reported that they often work up a sweat during exercise in comparison to almost 50% of Non-Maintainers who never engage in exercise long enough to work up a sweat.

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Objective Three

- Strategies Maintainers reported include: monitoring/tracking their food intake 3 or more times per week, checking body weight or using clothing fit to assess weight change, and gaining better control of emotional or stress eating behaviors.

Conclusions

As the post-Reducing years progressed, more patients were less likely to maintain their weight loss. Early intervention should be considered, as patients may be less likely to regain their weight if follow up is early, more intense and consistent.

The study indicates that the Sustaining Phase of the New Direction program is key to long-term success. Patients who participated in more sessions during the Sustaining Phase were more likely to have low-fat eating patterns and a commitment to an exercise program, which contributed to their success. Therefore, Sustaining Phase participation needs to be encouraged and strengthened. Offering workshops on related topics, such as Binge Eating and Body Image may be helpful.

Finally, monitoring weight management outcomes for each New Direction center is always important. Data assists with program monitoring, analysis and improvements. Robard has an Excel worksheet that can assist your center with tracking important data and, in a few months, we will be providing information on a new web-based tracking program, BARIDATA.

* Maintainers are defined as individuals having maintained greater than or equal to 50% of weight loss at follow up. Non-Maintainers are defined as individuals having maintained less than 50% of their weight loss at follow up.

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Clinical Results

Metabolic Study

Population: In-patients using New Direction in controlled environment for 28 to 35 days

- Average weekly weight loss: 3.4 pounds
- Decrease in total cholesterol: 40mg/dL
- Decrease in blood pressure: systolic 6-12 mm Hg, diastolic 1-11 mm Hg
- Body protein preserved: Positive nitrogen balance by day 9

Clinical Study

Population: Outpatients using New Direction beverage in a semi-controlled environment for 16 weeks

- Average weekly weight loss: 2.7 pounds
- Weight loss mainly fat rather than lean body mass
- Palatability of beverage rated high

Diabetes Study

Population: Obese patients with type 2 diabetes randomized to New Direction beverage and conventional therapy (CT) and followed 12 months. Results for patients on beverage (not for those on CT)

- Weight reduction
- Improved glycemic control
- Improved blood pressure level

Population: Patients on oral agent or insulin placed on regimen of New Direction beverage for 6 months

- Improved glycemic control
- Improved blood lipid profile
- Reduction or elimination of oral diabetes medication and insulin

Outcome Study

Population: Moderately obese patients on OUTLook for 16 weeks

- Levels and total cholesterol/HDL ratio
- Average weekly weight loss: men—1.54 pounds: women—0.95 pounds
- Decreased blood pressure, triglyceride and cholesterol

Hypertension Study

Population: Hypertensive (HTN) and normotensive (NTN) New Direction patients undergoing 24 hour blood pressure (BP) monitoring at base line, during weight loss (three times), and 3 months into maintenance

- Average weight loss: HTN—49.22 pounds: NTN—55.13 pounds
- Significant reduction in HTN systolic BP at each point during weight loss; in diastolic after 3 months of reducing
- Significant reduction in average number of medications per day after 6 months of maintenance—1.25 to 0.46—with average cost savings of —\$326.65-\$112.24