

PUBLIC HEALTH

Winning the Weight Battle

The first step in winning the weight battle is to recognize your own individual need to declare war on the extra pounds that may be threatening your health and well-being.

By FAYE MARLEY

► IF YOU WANT to have normal weight you can—if *you* are normal and have will power.

Wishful thinking while you lie back in an easy chair and munch chocolates or drink high-caloric beverages will not do the trick. You must recognize a need, not one prescribed by the physician alone, but one that you feel is more important to your well-being than physical indulgence.

With most people this need will be one of appearance.

"I looked in a downtown mirror one day and saw a fat slob," a successful dieter recalled. "I decided I wanted to look like I used to, and so I reduced the calories I was taking in. At the same time, I increased my exercise, which meant more walking and less driving. Now I am not afraid to look in a mirror."

There are other more important life-or-death reasons for maintaining normal weight.

Most Frequent Problems

The most frequent medical problems reported in a recent study were, in addition to obesity itself, hypertension, or high blood pressure, osteoarthritis of the knees, chronic phlebitis of the legs and sterility.

"My doctor told me I would have a stroke if I did not take off weight," a woman said firmly as she refused her hostess's offer of hot buttered biscuits and jam, served at a meal with potatoes and gravy. Eating to be polite is not worth risking extra pounds.

An occasional extra-calorie meal can be balanced with smaller meals in the same day, but you are only cheating yourself when you "cheat" on your diet. You must sincerely try to reduce.

This sincere desire to reduce brings to mind, however, a study reported by Dr. Charlotte M. Young, professor of medical nutrition in the graduate school of nutrition, Cornell University, Ithaca, N. Y.

"Not all obese persons should attempt weight reduction," Dr. Young told the American Medical Association meeting at Atlantic City last June. "In some ways it may be harmful."

Those who have deep emotional problems may find overeating is the most satisfactory way for them to meet life's situations, she explained. When they try to cooperate in a diet regimen and fail, guilt feelings are added to their problems.

After more than 20 years of working with obese people in clinics and studying their metabolism, Dr. Young has found that patients most likely to be successful in weight reduction have the following characteristics:

1. They are reasonably well adjusted emotionally.

2. They have a reason meaningful to them for losing weight.

3. For them, weight loss is a meaningful goal.

4. They are in the early stages of obesity.

5. Obesity developed in adult life rather than in childhood.

6. They have no previous history of losing weight and then putting it all back on again.

Recent surveys have shown ten per cent of this country's children are definitely overweight, but doctors do not recommend active reducing unless there is obesity, which means 25% above normal weight.

Gorging at meals and the snack habit while watching television should be discouraged among children and adolescents. Heredity and glandular difficulties are responsible for some overweight, but overeating is the main cause, especially if the young person does not exercise.

Calories *do* count. In fact they are all that makes the difference in weight and overweight, Dr. Frederick Stare, chairman of the department of nutrition at the Harvard School of Public Health, emphasizes.

Even more stress is put on exercise by a co-worker of his, Dr. Jean Mayer, who has compared the caloric intake and cholesterol levels of Swiss village people with city-dwellers in Basel, Switzerland.

The rural group, whose routine demands intense activity, had better weight and cholesterol levels than the more sedentary city group even though the Basel inhabitants consumed fewer calories.

Dr. Mayer's Study

Dr. Mayer's study, reported in *Postgraduate Medicine* (Dec. 1963) was aimed at preventing heart disease—one of the risks of overweight. An increasing number of studies, she pointed out, have shown that inactivity is of considerable importance in the development of heart trouble.

At least one of these studies reached similar conclusions concerning exercise. Dr. H. L. Taylor and his co-workers reported in the *American Journal of Public Health* (52:1697, 1962) that railroad workers, section hands and switchmen, who exercised at their work, had less hardening of the arteries than clerks.

In Switzerland, of course, much of the diet consists of dairy products, especially among the rural population. Not only did those in the Alpine group consume more cheese, cream, butter and milk, but they also ate large amounts of potatoes and bread. The per capita consumption of the Alpine families was 3,643 calories, of which 34% came from fat.

TO TAKE OFF WEIGHT

Here is a sample day's food that guides the weight watcher. Estimated calories are from the U.S. Department of Agriculture Home and Garden Bulletin No. 74.

Item of Food	Estimated Calories
Slice of bread, no butter, ½ inch thick	60
(Whole wheat or rye)	55
Cup of whole milk	165
(Buttermilk or skim milk)	90
1 large egg, including fat for frying	100
(Poached or boiled)	80
Small steak (3 ounces)	330
Potato, medium size	90
(Fried)	235
Coffee, black	0
Tea without lemon or cream	0
Asparagus, 6 medium spears	20
Beets, ½ cup	35
Broccoli, ½ cup	20
Tomatoes, one medium	30
(½ cup cooked)	25
String or wax beans, ½ cup	15
Spinach, ½ cup	20
Turnips, ½ cup	20
Apples, 1 medium	70
Bananas, 1 medium	85
Grapefruit, white ½	50
(pink or red)	55

"We concluded," Dr. Mayer said, "that while such dietary factors as fat content of the diet, and proportion of saturated and unsaturated fat are probably important in determining serum cholesterol levels, they appear to be less important than the activity factor."

Also good news for the dairy industry and for dieters who enjoy limited amounts of real butter and whole-fat milk, is a study recently reported by Dr. Efraim Racker of the Public Health Institute of the City of New York.

"Unsaturated fatty acids, an important part of many anti-cholesterol diets," Dr. Racker said, "may well have some insidious long-term effects."

Acting as "uncouplers," unsaturated fatty acids bring about fundamental changes in the physiologic mechanism of energy production, Dr. Racker warns.

"They divert the cells' oxidative processes from the production of adenosine triphosphate (ATP), the body's prime source of energy, and cause foodstuffs to be burned without yielding useful calories."

Linoleic acid, in particular, has been of interest in the prevention and management of coronary heart disease. Dr. Racker pointed out, however, that the lowered blood cholesterol level observed during a regimen rich in this unsaturated acid may mean only that less energy will be available for the production of cholesterol. This is because less energy is being produced in the body due to the intake of linoleic acid.

"Whether such a generally lowered energy level will have undesirable side effects

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should probably be investigated," he said.

Excessive amounts of lactic acid, known to be present in malignant tumor cells, also have been reported by Dr. Racker as related to energy changes brought about by "uncouplers." Animal fats, when forming a large part of a person's diet, similarly are believed to stimulate tumor growth in animals, however.

Most authorities agree that low fat diets are best for persons whose family history indicates susceptibility to artery hardening.

High protein diets with fruits and vegetables are recommended for those who tend to be overweight. Vegetables such as carrots, beets, onions, squash and peas have intermediate energy value, so average servings may be eaten by the dieter. However, potatoes, corn, parsnips and lima beans should be eaten in small amounts because of their high caloric value. You may eat all you wish of tomatoes, cabbage, celery, cauliflower, lettuce and other greenstuffs. Leave off salad dressings, sauces and butter if you are trying to cut calories.

All fresh fruits except bananas have low-calorie value, and even bananas may be included because of their value in promoting a "full" feeling. Avoid sugar and cream on fruits, and remember that dried fruits pack more calories than fresh.

Live Longer

If you want to live longer, Metropolitan Life Insurance statisticians say, you will find that weight reduction pays off.

These statisticians have found that a man 45 years old of medium frame who is five feet eight inches tall and weighs about 150 pounds can look forward to about four years longer life than an identical man weighing 200 pounds, which is about 35 pounds above average weight.

One in every five men is at least ten per cent above average weight and one in 20 is at least 20% above average. For women the corresponding proportions are somewhat higher. If you are going to reduce, however, check with your physician to find out how much you ought to lose and how many calories to include in your daily diet.

Eat regular meals and plan them around foods that you like.

Remember, chances are that faddist diets will not be successful, partly because you will not like them as a regular fare. Also they will not contain enough nutritionally important foods.

Pills to curb the appetite should not be necessary and many doctors forbid them. One hospital regime for dieters gave no pills or medication except an occasional tranquilizer. If constipation occurred, as it often does on a 1,000 calorie per day diet, detergent and medicated suppository preparations were advised.

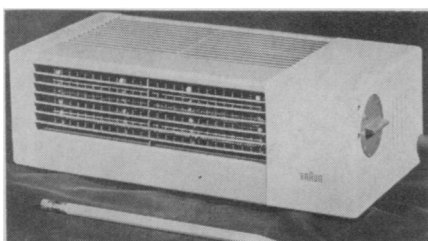
If you are really obese, it may be that a hospital stay will be necessary under close supervision. Complete fasting for two weeks has been successful in many cases. When fasting, the patient gets vitamins and non-caloric liquids only.

• Science News Letter, 85:230 April 11, 1964

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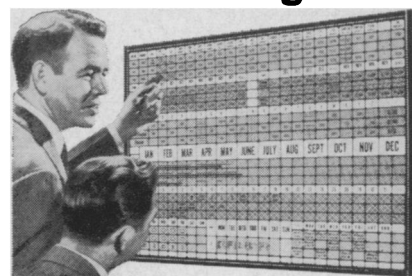
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