Weight Loss Maintenance
The people’s story

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MAINTENANCE RESEARCH (the current state of play)

• Over 40 RCTs
• Several meta-analyses
  - Dombrowski et al, BMJ 2014
  - Simpson BMJ 2011
  - Dansinger et al, Annals Int Med 2007
MAINTENANCE RESEARCH
(the current state of play)

In order to change a behaviour, you first
need to understand it
## Behaviour change techniques used

<table>
<thead>
<tr>
<th>Technique</th>
<th>% arms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-monitoring</td>
<td>58</td>
</tr>
<tr>
<td>Barrier identification /problem solving</td>
<td>58</td>
</tr>
<tr>
<td>Provide instruction on how to perform the behaviour</td>
<td>56</td>
</tr>
<tr>
<td>Goal setting (behaviour)</td>
<td>40</td>
</tr>
<tr>
<td>Plan social support</td>
<td>39</td>
</tr>
<tr>
<td>Relapse Prevention</td>
<td>28</td>
</tr>
</tbody>
</table>

Pretty much based on self-regulation + social support

Dombrowski et al, Personal Communication, 2014
Qualitative approach

• A good way to develop understanding of complexities and challenges
  – What works for whom in what circumstances)

• Focus on perspectives /experiences of the person trying to lose weight

• Theory building

• Can help identify new / innovative intervention strategies
Study aims

• To synthesise qualitative literature on WLM on the beliefs, attitudes and experiences of adults who have intentionally lost weigh

• To construct a conceptual model of WLM

• To generate ideas for WLM interventions
Methods

Screening criteria
- Qualitative Accounts
- Views of currently/previously overweight adults
- Substantial focus on weight loss maintenance
- Weight changes not associated with medical condition, medication side-effect or pregnancy
- English Language, post-1990

Data Extraction
- Study and sample characteristics
- Primary data
- Secondary interpretations

Thematic Synthesis (Thomas & Harden 2008)
- Descriptive coding
- Deriving conceptual themes
- Development of conceptual model
Results

• 23 studies with 649 participants
• Australia (1), Finland (3), Greece (1), Sweden (1), US (9), UK (8)
• 77% female ; Multi-ethnic samples
• Initial weight loss by
  o Diet ± physical exercise (16)
  o Bariatric surgery (4)
  o Weight loss medication (2)
  o 257 (40%) ‘successful’ in WLM
• 9 studies compared Maintainer/Regainer narratives
SOCIAL CONTEXT

ENVIRONMENT

COGNITIONS

STABLE WM

SOURCES OF TENSION
- Force of habit
- Disruption of needs fulfilment
- Negative script
- Cognitive fatigue

RESILIENCE
- Self-regulation
- Manage external influences
- Personal insight
- Develop automaticity
- Identity shift
- Motivation

UNSTABLE WM

EMOTIONS

PHYSIOLOGY

PERSONAL CIRCUMSTANCES
Self-regulation

• Appraisal
• Mobilisation
• Enactment
• Response (to challenges)
SOCIAL CONTEXT

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STABLE WM

UNSTABLE WM

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EMOTIONS

PHYSIOLOGY

PERSONAL CIRCUMSTANCES
Implications...
Individualised assessment & skills for influence management

CBT techniques for
  - Self-concept
  - Thinking style

Functional analysis of eating and PA behaviours

Impulse management skills

Self-regulatory up-skilling

Techniques for habit changing
Implications – what’s new

Develop components of Behavioural Resilience

• Self-regulation
  – Set boundaries; monitor; stepwise lapse plans
  – Impulse management

• Management of external influences (highly individual)
  – Assessment and problem-solving skills
  – Social skills and support: co-option vs dependence

• Habit-breaking and habit-forming techniques

• Facilitate insights
  – What needs does my obesogenic lifestyle fulfil?
  – How else can I address these needs?

• Facilitate change in self-concept and personal narrative

Poltawski, Greaves et al 2014, In Prep
Implications for interventions

Profiling people in terms of

a) Tension: How much are they struggling
b) Resilience: How resilient they are in each resilience domain

This could guide individually tailored support in terms of both type and intensity

Poltawski, Greaves et al 2014, In Prep
Conclusions

• Weight loss maintenance requires management or (preferably) resolution of the tension generated by lifestyle change

• Implied intervention techniques include
  – Self-regulation and problem-solving skills
  – Social and impulse-management skills
  – Functional analysis of obesogenic behaviours
  – Habit breaking and habit-forming tools
  – Facilitating change in self concept
Thank you!