OBESITY AND WEIGHT MANAGEMENT

Childhood Obesity
- Overweight, Undernourished and At-Risk: Tackling Today’s Childhood Nutrition Problems
- Childhood Obesity: Handle with Care
- Childhood Obesity: No Blaming and No Shaming
- Factors Contributing to Overweight and Obesity in Children with Special Needs: What our Role can be to Prevent and Minimize Risk
- Social and Environmental Determinants of Childhood Obesity**
- Childhood Obesity News: Downward Trends, Positive Programs and the Problem with Bullying

Health, Wellness and Management
- Can You Be Fit and Fat?
- The Nutrient Density Approach to Healthy Eating: Challenges and Opportunities
- Curb those Irresistible Food Cravings
- Medical Nutrition Management of Obesity Disease**
- Using MyPlate to Conquer Obesity and Diabetes
- Small Changes, Big Results: Successful Weight Loss Strategies
- Preserving Muscle Mass During Weight Loss

Understanding Obesity
- Diet or Physical Inactivity: Which is the Major Cause of the Obesity and Diabetes Epidemic
- Physical Inactivity: A Major Public Health Problem for the 21st Century
- Overcoming Our Obesogenic Environment
- We Will Never Manage the Obesity Epidemic Until we Have a Better Understanding of Energy Balance**
- Physical inactivity and the Obesity Plague: Fact or Over-Egging?**
- Physical Inactivity or Obesity: Which Is the Bigger Health Problem?**

**New or Updated Topics

SPEAKERS AVAILABLE FOR THE CATEGORY:
- Martha Belury, PhD, RD
- Steven Blair, PhD
- Felicia Busch, MPH, RD, FADA
- Melissa Joy Dobbins, MS, RD CDE
- Linda Farr, RD, LD
- Constance J. Geiger, PhD, RD, CD
- Dayle Hayes, MS, RD
- Susan Johnson, PhD
- Georgia Kostas, MPH, RD, LD
- Donald Layman, PhD
- Kevin C. Maki, PhD
- Barbara Mayfield, MS, RD
- Theresa A. Nicklas, DrPh, MPH, LN
- Nancy Rodriguez, PhD, RD
- Elizabeth Ward, MS, RD
- Nikki Withrow, MS, RD
- Richard Wood, PhD
- James Swain, PhD, RD, LD, FAND
**Childhood Obesity**

Overweight, Undernourished and At-Risk: Tackling Today’s Childhood Nutrition Problems

Children around the globe are in the midst of a nutrition crisis – suffering epidemics of obesity, eating disorders, and adult diseases. These interwoven problems demand creative, collaborative solutions. Review current trends in the weight, activity, and nutritional status of young people. Learn about effective (and fun) food and fitness interventions – for families, schools, and communities.

*Possible Learning Needs Codes: 4000, 5000, 6000*

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**Childhood Obesity: Handle with Care**

The rising prevalence of overweight among children is a troubling concern of health professionals, parents and policy makers. The reasons for this increase encompass a wide array of genetic, environmental and lifestyle factors. How to address and change this trend is subject to debate, with health professionals taking up sides. This presentation will address the weighty issue of childhood obesity and discuss how to handle it with care so as not to do more harm than good.

*Possible Learning Needs Codes: 4000, 5000, 6000*

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**Childhood Obesity: No Blaming and No Shaming**

Often when this issue is discussed there is a lot of finger pointing – it’s video games, it’s the fault of parents, it’s the soda industry’s fault, it’s all because of school lunches. Or, worse yet, young children who are overweight are made to feel shameful about their size and may be at risk of bullying. We certainly need to learn how to come alongside parents, school food service personnel, and children who are feeling blamed and shamed, and provide support and encouragement to promote healthy weight.

This presentation will address the weighty issue of childhood obesity and discuss how to handle it with care so as not to do more harm than good.

*Possible Learning Needs Codes: 4000, 5000, 6000*

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**Factors Contributing to Overweight and Obesity in Children with Special Needs**

This presentation provides an overview of the prevalence of overweight and obesity among children with an ASD v. typically developing. Participants will Factors contributing to overweight and obesity in children with special needs v. typically developing and what our role can be to prevent and minimize risk.

*Possible Learning Needs Codes: 4000, 6000, 8000*

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**Social and Environmental Determinants of Childhood Obesity**

Childhood obesity research has focused of late on family and social influences on children’s eating and activity patterns. Eating and activity behaviors undergo important developmental shifts during childhood and research has revealed that children’s eating and activity behaviors are strongly influenced by the social environment. Social demands imposed by caregivers to modulate children’s eating and activity begin early in life and even the young child is significantly impacted by social and environmental cues that influence eating and activity levels. Parenting related to food and eating, family meals, mealtime routines and environments, and eating in other settings (e.g. child care and school) are important factors influencing children’s dietary intake and weight status.

*Possible Learning Needs Codes: 4000, 5000, 6000, 9000*

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**Childhood Obesity News: Downward Trends, Positive Programs and the Problem with Bullying**

Many child nutrition experts have grown concerned about the negative or counter-productive effects of some approaches to childhood obesity prevention. This informative and thought-provoking session will describe the current trends in childhood weight, nutritional status, eating problems and physical activity.
It will explore the relationship of bullying in school to student weight, as well as physical and emotional health. Attendees will learn about the best school-based “do no harm” practices to promote healthy weights and well-being for all children.

At the end of this session, participants will be able to:

- Describe most current trends in childhood weight, nutritional status, eating problems and physical activity.
- Identify potential negative and counterproductive effects of some childhood obesity programs.
- Discuss relationship of bullying to student weight and health.
- Outline best school-based practices to promote healthy weights for all children.

Possible Learning Needs Codes: 2000, 4000, 6000, 9000
**Health, Wellness and Management**

**Can You Be Fit and Fat?**
Does being overweight mean a person can’t be fit too? Explore the newest research on the importance of staying fit and the role of regular exercise routines. Learn how obese individuals who are fit are less likely to develop premature diabetes than those who are overweight but unfit. Learn from a leading expert how you can help overweight clients become more physically active.

*Possible Learning Needs Codes: 4000, 5000, 6000, 9000*

**The Nutrient Density Approach to Healthy Eating: Challenges and Opportunities**
Americans’ waistlines are expanding, yet people are increasingly undernourished. In fact, more than two-thirds of Americans are overweight or obese, yet more than 20 percent are not meeting the Dietary Reference Intakes for many essential nutrients. Now, more than ever, it’s important for health professionals to look at different approaches in dietary guidance to help consumers find realistic ways to achieve a healthful diet. This session takes a new look at the long-standing principle of nutrient density. By focusing on naturally nutrient-rich foods first your clients will learn how to make their calories count by obtaining more nutrient power in fewer calories.

*Possible Learning Needs Codes: 2000, 4000, 6000, 8000*

**Curb those Irresistible Food Cravings**
Whether food cravings are physiological or psychological, they are real and can sabotage your diet. The daily food choices you make can affect body chemicals that regulate appetite, mood and cravings. Learn why you have food cravings and how to combat them.

*Possible Learning Needs Codes: 2000, 4000, 6000, 8000*

**Medical Nutrition Management of Obesity Disease**
Are you a physician or health care professional that works directly with patients and clients? Do you find it difficult to stay up on all the most recent scientific evidence about the treatment of obesity? While there are several methods available to treat obesity disease such as surgery, drugs and counseling, there is strong evidence-based science on the role of the Registered Dietitian Nutritionist (RDN) in providing personalized, evidence-based nutrition therapy for weight loss and long-term weight maintenance. Common weight loss myths and evidence-based nutrition guidelines related to diet, behavior change and physical activity will be presented.

*Possible Learning Needs Codes: 2000, 4000, 5000, 6000, 8000*

**Using MyPlate to Conquer Obesity and Diabetes**
Creating the ideal plate-look to counter the epidemics of obesity and diabetes requires balancing protein and carbohydrates at each meal. The meal composition of protein and carbohydrates determines muscle health, body fat storage or use, and satiety. The presentation will examine the research behind creating an ideal plate-look.

Objectives:
- Review recent advances in understanding macronutrient balance for cardiometabolic health
- Evaluate research about dietary protein and saturated fat for renal and cardiovascular health
- Examine the impact of lifestyle changes on muscle health and cognitive responses
- Examine the application of higher protein reduced carbohydrate diets in a sustainable health environment

*Possible Learning Needs Codes: 4000, 5000, 6000, 8000, 9000*

**Small Changes, Big Results: Successful Weight Loss Strategies**
Small changes that eliminate only 100-150 calories per day can lead to a 10-15# weight loss in one year. Small changes don’t make you feel deprived and are easier to implement over a long period of time. Ways to cut calories from meals at home, at work and in restaurants will be discussed. Want to make permanent changes? Start small!

Possible Learning Needs Codes: 4000, 5000, 6000, 9000

Preserving muscle mass during weight loss
As obesity and diabetes remain at the forefront of concern in public health, weight loss is a therapy of significant interest. However, a percentage of weight loss comes from fat-free mass, of which a considerable amount is muscle mass. Muscle mass is critical to function and metabolism, so preserving muscle mass during weight loss should be a high priority. As we learn more about different weight loss strategies, it appears that diets of differing macronutrient distribution may have different effects on the preservation of muscle mass. A key cohort of patients are those with sarcopenic obesity: having a low amount of muscle mass and a high amount of fat mass concurrently. Preserving muscle mass during weight loss in such patients is extremely important. This presentation will begin with an introduction to sarcopenic obesity, followed by a review of how various dietary treatments impact fat-free mass. Next, the effects of exercise during weight loss will be covered, and finally the effects of combined diet and exercise strategies.

Possible Learning Needs Codes: 4000, 5000, 6000, 9000

Understanding Obesity

Diet or Physical Inactivity: Which is the Major Cause of the Obesity and Diabetes Epidemic?
Review of data on dietary intake and physical activity as they relate to risk for becoming obese and/or developing diabetes. It is clear that changing dietary and physical activity patterns have both contributed to the dramatic increase in the prevalence of obesity, although the relative contributions are less clear. This talk explores lifestyle habits and other factors that have been associated with risks for obesity and diabetes, along with practical advice for helping patients and clients to make changes that will help lower their risks.

Possible Learning Needs Codes: 4000, 5000, 6000, 9000

Physical Inactivity: A Major Public Health Problem of the 21st Century
Sedentary habits are highly prevalent in most countries of the world. In the U.S. approximately 25-35% of adults are inactive, meaning that they have sedentary jobs, no regular physical activity program, and are generally sedentary around the house and yard. Given that sedentary and unfit individuals are at approximately two-fold higher risk for many health conditions than those who are moderately active and fit, the population attributable risk (PAR) of inactivity is high. Over the past few decades we have largely engineered the need for physical activity at home, on the job, and during leisure-time out of the daily lives of most people in industrialized societies. To address the major public health problem of physical inactivity we will need to consider and evaluate societal, environmental, and individual approaches to making physical activity more common for more people more of the time.

Possible Learning Needs Codes: 4000, 5000, 6000, 9000

Overcoming Our Obesogenic Environment
To succeed at achieving and maintaining a healthy weight, the clients and families you work with must overcome an obesogenic environment that promotes excess intake and prevents adequate daily movement. Awareness of the impact of our environment is the first step.
environment and making healthier choices when faced with temptations to eat more and move less is the second. Helping change our obesogenic environment through community involvement and social change is the ultimate answer. We can help people succeed on all fronts.

We Will Never Manage the Obesity Epidemic until we have a Better Understanding of Energy Balance**

It is indisputable that obesity rates have been increasing in most countries around the world over the past few decades. The causes of this epidemic are complex and are not well understood. It is clear that persistent weight gain over time is caused by individuals being in positive caloric balance, consuming more calories than they burn on too many days. Therefore the obesity epidemic is due to too many people being in positive caloric balance, where their energy intake exceeds their energy expenditure. Although positive energy balance can be caused by increases in intake, decreases in expenditure, or a combination of the two; most of the attention in the scientific and lay press focuses on the intake side of the equation. This imbalance in attention to the energy expenditure side of energy balance and a major focus on the intake side is unlikely to produce policies, strategies, and tactics that will be effective in reducing the obesity epidemic. This lecture will include information on both sides of the energy balance equation and I will discuss current flawed strategies and make suggestions for new directions.

Physical inactivity and the Obesity Plague: Fact or Over-Egging?**

The causes of the obesity epidemic are complex and poorly understood. It is indisputable that persistent weight gain is caused by chronic positive energy imbalance via increases in caloric intake or decrements in energy expenditure or some combination of the two. Nevertheless, the scientific and lay literature focus primarily on energy intake as the cause of obesity while dismissing the role of energy expenditure. It is unlikely that the obesity epidemic is due entirely to increased dietary intake, and there is a consistent bias that ignores total energy expenditure. We must focus our attention on accurate measurement of both sides of the energy balance equation, and the independent contributions of obesity and physical activity on health outcomes.

Physical Inactivity or Obesity: Which Is the Bigger Health Problem?**

Overweight and obesity are well established as health risks, and the prevalence of these conditions is increasing rapidly in many countries around the world. There have been numerous calls to action to address the public health problem of overweight and obesity, from the World Health Organization and many national health authorities. The role of physical activity in relation to overweight or obesity and health status is mentioned in most reports and recommendations. A fit and active way of life reduces the risk of substantial weight gain over time, is useful in weight loss programs, appears to be crucial in maintaining weight loss, and provides health benefits to overweight and obese individuals. Public health programs and recommendations on obesity should include much greater emphasis on physical activity for weight management than is done at present.

**New or Updated Topics