COVID-19 is an emerging, rapidly evolving situation. Get the latest public health information from CDC: <u>https://www.coronavirus.gov</u>. Get the latest research from NIH: <u>https://www.nih.gov/coronavirus</u>. Find NCBI SARS-CoV-2 literature, sequence, and clinical content: <u>https://www.ncbi.nlm.nih.gov/sars-cov-2/</u>.

FULL TEXT LINKS

ELSEVIER FULL-TEXT ARTICLE

Clinical Trial J Am Diet Assoc. 2005 Jun;105(6):929-36. doi: 10.1016/j.jada.2005.03.011.

Size acceptance and intuitive eating improve health for obese, female chronic dieters

Linda Bacon¹, Judith S Stern, Marta D Van Loan, Nancy L Keim

Affiliations PMID: 15942543 DOI: 10.1016/j.jada.2005.03.011

Abstract

Objective: Examine a model that encourages health at every size as opposed to weight loss. The health at every size concept supports homeostatic regulation and eating intuitively (ie, in response to internal cues of hunger, satiety, and appetite).

Design: Six-month, randomized clinical trial; 2-year follow-up.

Subjects: White, obese, female chronic dieters, aged 30 to 45 years (N=78).

Setting: Free-living, general community.

Interventions: Six months of weekly group intervention (health at every size program or diet program), followed by 6 months of monthly aftercare group support.

Main outcome measures: Anthropometry (weight, body mass index), metabolic fitness (blood pressure, blood lipids), energy expenditure, eating behavior (restraint, eating disorder pathology), and psychology (self-esteem, depression, body image). Attrition, attendance, and participant evaluations of treatment helpfulness were also monitored.

Statistical analysis performed: Analysis of variance.

Results: Cognitive restraint decreased in the health at every size group and increased in the diet group, indicating that both groups implemented their programs. Attrition (6 months) was high in the diet group (41%), compared with 8% in the health at every size group. Fifty percent of both groups returned for 2-year evaluation. Health at every size group members maintained weight, improved in all outcome variables, and sustained improvements. Diet group participants lost weight and showed initial improvement in many variables at 1 year; weight was regained and little improvement was sustained.

Conclusions: The health at every size approach enabled participants to maintain long-term behavior change; the diet approach did not. Encouraging size acceptance, reduction in dieting behavior, and heightened awareness and response to body signals resulted in improved health risk indicators for obese women.

Related information

MedGen

LinkOut - more resources

Full Text Sources

Elsevier Science

Medical MedlinePlus Health Information