

OBESITY — Public Health Enemy #1

by David Zeiger, D.O.
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Today many American adults, teens and children are facing the alarming fact that they are either overweight or obese. Metabolic obesity, as it is known, is a factor of neuropsychological stress, hormonal imbalances and dietary lifestyle. The following statistics are staggering:

- The U.S. Bureau of the Census estimates that approximately 58 million American adults (26 million men and 32 million women) are obese.

- According to the National Institutes of Health, 55% or 97 million adults in the U.S. are overweight or obese, with at least 33% (58 million) of adults considered overweight and 22% (39 million) considered obese.

- The prevalence of obesity increased from 12.0% in 1991 to 17.9% in 1998. A steady increase was observed in all states; in both sexes; across age groups, races and educational levels; and occurred regardless of smoking status.

More than a problem of appearance, obesity can also be a life threatening condition. As the number of pounds increases, the risk for gallstones, high blood pressure, heart and kidney diseases, stroke, colon and breast cancer escalates. Other medical problems associated with obesity, include adult onset diabetes, hormonal imbalances, osteoarthritis, fatigue and sleep apnea — abnormally long pauses in breathing during sleep.

Genes, Hormones and Sensible Metabolic Planning

Medical research indicates there may be a genetic basis for 40-60% of persons at risk for developing obesity. However, the more common causes may actually reside within the complex interaction of these genes that code for an individual's metabolism and the additional effects of such hormones as; estrogen, insulin, triiodothyronine (T3—a thyroid hormone), cortisol, as well as, lifestyle and dietary choices.

Chemicals called **leptins** act as the 'middlemen' messengers between the brain and one's fat cells effecting hunger and the feeling of satiety. Stress, high carbohydrate meals, lack of exercise, and in some women added estrogen from the use of birth control pills — even Premarin™ — will often contribute to a marked increase in body fat. Note here that estrogen promotes an increase in the size and number of fat cells.

Stress releases cortisol from the adrenal gland. This hormone single-handedly impacts on your thyroid, estrogen and carbohydrate metabolism. High cortisol levels will make more estrogen and decrease triiodothyronine the powerhouse thyroid hormone that drives cell metabolism. High carbohydrate diets release insulin. In some patients it might not be immediate, but eventually, there may be a tendency over time that the bodies' cells become insensitive or even unreactive to the insulin it produces. Even though this effect may be transient, such higher than normal insulin levels stimulate the production of fat stores in your body.

Furthermore, fat (adipose tissue) is a major source of estrogen metabolism in postmenopausal women through an enzymatic con-

version of testosterone into estrogen. This is usually seen in men as gynecomastia and symptoms of hyperestrogenism in women as I discussed in a previous article in April 2002 issue of *Conscious Choice*.

Obesity is defined as being 20% over the ideal or desirable weight, and severe obesity as being 40% above desirable weight. For instance, if your normal/desirable weight is 135 pounds and you current weight is 161 pounds you are already considered **obese**. If you normal/ideal weight is 135 pounds and your current weight is 192, you are considered **severely obese**. Anything above 40% is considered **morbidly obese**.

Dieting gimmicks, such as grapefruit binging, metabolite enhancers, fat and sugar blockers or pasta banning have been proven ineffective for long term weight loss success, often accompanied by unwanted side effects for the consumer. It's not about

fad plans or "take it off quick" schemes. It's about learning to maintain **healthful, enjoyable** eating choices along with a **realistic** exercise routine. The key is balance.

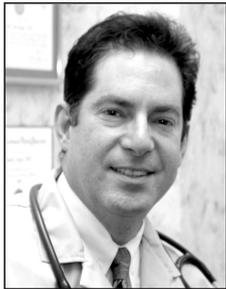
Slimming down does not have to involve a whole life overhaul. Small, effective changes can go a long way in helping you reach a healthy goal weight.

The Correct Weight Loss Plan for the Right Reasons

When evaluating your weight loss program consider the following:

- Under the supervision of a Licensed Health Care Professional who has the experience and knowledge on the subject.
- Metabolically tailored and personalized to meet your specific needs.
- Implementing a safe and effective rate of loss. Rapid weight loss can decrease muscle mass, and lead to thyroid and menstrual irregularities.
- Offering a "Non-Dieting, Non-Hunger" approach, with One-On-One, Private Nutrition Counseling Sessions.
- Incorporating all the five food groups; Protein, Carbohydrate, Vegetables, Fruits and Healthy Fats into the daily diet.
- Teaching portion size control at home and while dining out.
- Offering strategic planning for holidays and special occasions.
- Offering solutions for unwanted cravings.
- Implementing "Menu & Meal Planning" sessions.
- Including continuing education on Foods for Health Maintenance & Disease Prevention.
- Giving you the option to choose Home, Restaurant or Healthier Fast Food Choices.
- Setting Realistic Goals that fit into your personal & professional lifestyle.
- Teaching you not only how to lose the weight, but how to keep it off.
- Address the possible issue of Adrenal, Thyroid or Hormonal Imbalances.

Unfortunately, just checking for obesity genes won't help much. However, evaluating an individual's metabolic makeup can be very useful. Checking for glucose-insulin resistance, a specialized blood test called a 2-hour glucose tolerance test (2-hour GTT) begins the process. Mea-



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asuring salivary hormones levels of estrogen, cortisol and T3 provides clues to the individual's hormones regulating fat metabolism. In addition we utilize, state of the art computer **bioelectrical impedance analysis (BIA)**. BIA is just like getting an ECG (electrocardiogram). It is much less expensive as well as taking all of 3 minutes. BIA provides an efficient, reliable and reproducible method of measuring and monitoring an individual's body composition of percent fat to lean muscle, intracellular to extracellular hydration status and overall cell vitality. Combining all this with a thorough physical exam and nutritional/dietary/lifestyle history gives Judy Manisco and myself the information to work with you in obtaining your unique health goals.

To Life and Good Health,

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Dr David Zeiger is board certified Family Physician in private practice. He specializes in Integrative Medicine treating chronic/acute illness ie IBS, Allergies, CFIDS/Fibromyalgia,

Woman's Health Issues, Diabetes, Hypertension, Thyroid-Adrenal Fatigue Syndrome, and Neuromuscular Pain Management; using Acupuncture, Osteopathic Medicine, Functional Nutritional Medicine, Homeopathy/Homotoxicology, Neural Therapy, and Ligament Regeneration Therapy.

Judy Manisco, L.D., C.N., is a Licensed Dietitian & Clinical Nutritionist utilizing a Wholistic/Integrated approach in her nutrition counseling practice. Ms. Manisco specializes in Safe and Effective Weight Loss, along with Functional Nutritional Therapy for such health conditions as Diabetes, High Cholesterol, Food Allergies, Gluten Intolerance, Hormonal Imbalance and Unhealthy Eating Habits. She is creator of the "Slim For Life™" and "Body Balance™" Programs.

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