



Weight Management Program Substantially Reduces Risk Factors for those with Pre-Diabetes

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Objective

To document medical outcomes and lifestyle changes in a group of patients with pre-diabetes who participated in an ongoing weight-management treatment program that is structured and research-based.

Subjects

- ✓ All maintenance patients who had completed a follow-up health risk appraisal (HRA) between January 2004 to April 2005 and had a pre-treatment fasting plasma glucose 100-125 mg/dl but no diagnosis of diabetes (n= 175).
- ✓ Patients had lost weight using a very-low, low-calorie, or moderately restricted diet.

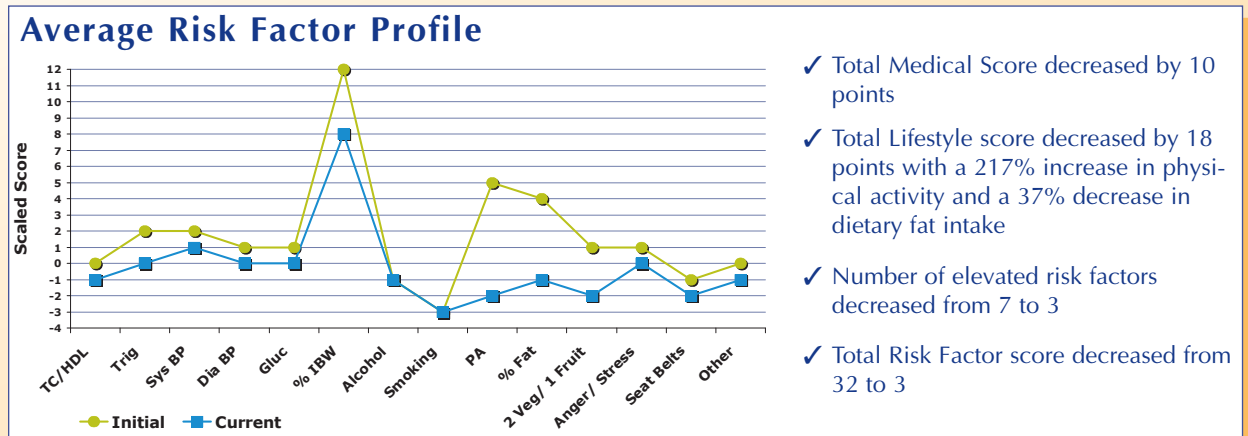
Program

HMR offers intensive behavioral treatment programs for all levels of weight loss. The program commitments include: weekly attendance including a midweek phone call, and daily/weekly record keeping. The program focus is on three defined behaviors: a minimum of 5 HMR meal replacements per day for weight loss (35/week), a minimum of 2000 calories of physical activity (PA) per week, and a minimum of 5 servings of vegetables and fruits per day (35/week) for some program options.

Results

Measure	Initial	Follow-up (Avg. 2.6 Years)	Change
Weight	258 lbs.	211 lbs.	↓47 lbs.
Total Cholesterol/HDL	4.32	3.49	↓19.2%
Triglycerides	168	114	↓32.1%
Systolic Blood Pressure	134	123	↓11 mm/Hg
Diastolic Blood Pressure	82	75	↓7 mm/Hg
Fasting Blood Glucose	107	96	↓10.3%

- ✓ Medical changes occurred in addition to substantial decreases and/or elimination of medications.
- ✓ At follow-up only 2% of patients were on oral diabetes medications, no patients were on insulin.
- ✓ 38% of patients had discontinued hypertensive or cholesterol medications.



Conclusions

An intensive weight management program is effective in delaying the progression from pre-diabetes to type 2 diabetes in the clinical, non-academic setting.