



## Dealing with Doubt and Self-Worth

*Dr. Charles Shaffer*

I'm amazed at how many patients come doubting that they can lose weight. Many times, their sibling, mother, or father has been through the program and has done well. Due to COVID-19, many patients have had to stay home and indoors. Patients have had to change their eating habits to match family's traditions and slowly drift back to their old habits – usually with many excuses.

Recent literature in the Obesity Journal has given more credibility to insulin resistance than initially determined. If patients understand the genetic component of insulin resistance, it will give them more hope to succeed. Your genetic pool is one of many reasons we check and monitor your insulin levels. This helps us determine the adjustments needing to be made regarding food intake.

WHAT YOU'LL FIND INSIDE:

- **DEALING WITH DOUBT AND SELF-WORTH**
- **COST COMPARISON**
- **THE RECIPE OF THE MONTH**



Now, time for a little history: In 1968, Dr. Jean Meyer pointed out obesity may have been a legitimate consideration between the cause-and-effect relationship of insulin in adipose tissue and fat deposition around the abdomen. He noted patients who use insulin in the abdominal area were increasing girth.

In 1921, the initial discovery of insulin was linked between obesity and diabetes. This has been a controversial topic that still continues today; mainly with physicians treating type II diabetes who studies and monitors patient's increasing weight.

Some individuals tend to develop a 'beer stomach'. This is due to their body's central adiposity. The key is insulin resistance. This is why we review your insulin and check it every six months with the goal of seeing your progress and to dropping your insulin resistance.

As you recover from quarantine, we're hoping you listen to our directions so we can help you lose the rest of your weight and achieve your goals. Our greatest joy is helping people come off their medications, seeing their weight go down, and their self-esteem grow.

I'll leave you with another interesting historical fact. In the 1930s, clinicians in the United States used insulin to fatten up their underweight patients. They found they could increase their weight from 6-12 pounds per week by giving them a small dose of insulin and prescribing a significant carbohydrate diet. They also thought it had an effect on individuals with substantial schizophrenia and depression, which later proved untrue. They based their thought process on individuals who were obese tended to be jolly, such as Santa Claus. Of course, this was untrue as well. What they found was these individuals were more discouraged about their appearance and abilities to move around.

Pay close attention to what you are eating and READ LABELS. Now is one of the most important times to read labels so you do not have to fight to restart.

As we approach another month of isolation and quarantine, I am hoping you will spend some time reading past newsletters and asking yourself how you can truly improve.

Remember, we are here to help you in any way we can. I am praying for each of you to be safe and conscious of your surroundings. Wash your hands, respect distance, and do not 'quarantine' at friend's homes.

Blessings to all, Chuck Shaffer MD

# Cost Comparison

*Tricia Foley, MS, RDN, CLT*

In an article in Money magazine, *Slim Your Body, Not Your Wallet* by Amanda Gengler in the June 2011 issue, the annual medical cost of having a higher BMI was printed. The following were the results:

- BMI of 25: \$1,938
- BMI of 30: \$2,086
- BMI of 35: \$2,963
- BMI of 40: \$5,510
- BMI of 45: \$13,327

Of course, their chart looked much prettier than this but you understand the idea. They went on to discuss employers who charge people with certain health issues (including high BMI) extra money for their insurance and how the number of employers who practice this was projected to increase to 33%. They then discussed weight loss. How difficult it was to “do it yourself” and the benefits of having an accountability factor and what you could expect to pay per pound with the Big Three. Here is the short, simple version of the article.

- Weight Watchers: \$97 per pound
- Nutrisystem: \$130-\$139 per pound
- Jenny Craig: \$131-\$174 per pound
- Dietician-tailored plan: \$118-\$126 per pound

This got us to thinking along the same lines. We asked ourselves “Are we a good value for our clients?” and “What are our clients paying per pound?” So, we started adding up weight loss and totaling costs. In the Money magazine article, they used a theoretical approach of a person losing 25 pounds in 6 months time, so we did the same. I cannot speak for other companies, but at the Weigh Station we have a complete physical examination including an EKG, Physician supervision, necessary supplements, weekly accountability, access to a Registered Dietician, support, hugs if you need them and a boot to the rear end if you need that, too.

Even though we are happy with the results, we still felt something was off. Some of you may already see it but it took us a few minutes of looking to put our finger on it. What was off was 25 pounds in 6 months! That led us to a different calculation. We pulled 50 random charts, totaled up the weight lost in the first 10 weeks and calculated average weight loss and cost per pound. Here are our results:

- Average 2.5month weight loss: 24.4 pounds
- Average cost per pound: \$29.18 per pound

# The Recipe of the Month

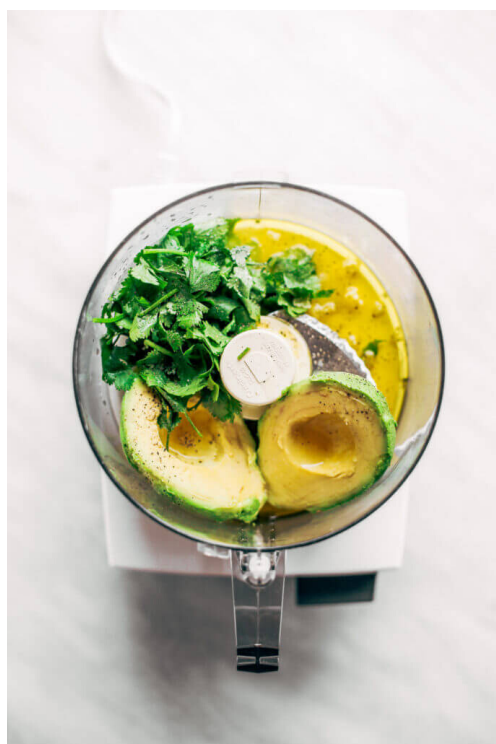
## *Cilantro Avocado Dressing*

### *Ingredients*

- 1 - 1.5 C loosely packed cilantro, stems removed and roughly chopped
- 1/2 avocado
- Squeeze of lime juice from 1/2 lime
- 2 garlic cloves
- 1/4C olive oil
- 1 1/2 tsp white wine vinegar
- 1/8 tsp sea salt

### *Directions*

Puree all ingredients in a food processor or blender until smooth. Taste and adjust seasonings if necessary.



**Creamy,  
Smooth, Yum.**