Welcome to the podcast series of Raising the Bar Sydney, raising the bar in 2019, saw 21 university of Sydney academics take their research out of the lecture theatre and into bars across Sydney, all on one night. In this podcast, you’ll hear Amanda Salis’ talk, Shakeup Your Weight Loss. Enjoy the talk.

[ Applause ]

Thank you, Catherine, for your introduction, and good evening everything. Welcome to this talk. I’m going to help you to shake up your weight loss. Now, if you or somebody that you care about have weight that you or they want to lose and you just feel that nothing is working and you need to lose weight fast, then tonight I’m going to give you practical and evidence-based strategies of things that you can do to help get the weight moving along and off your hips and thighs and anywhere else that you might want to get rid of it from. So, is there anyone in that situation who knows somebody or who is wanting to lose weight or is it just general interest? Oh, a couple, thank you for the hand raises. I know it’s a shy thing to talk about. I shouldn’t do that to you, sorry. I can assume we’re all here for that. Now, when we say effective weight loss, what do we mean by a weight loss strategy that works? Well, for me, when I was attempting to manage my weight, so I have actually lost 30 kilos. I did used to be around 30 kilos heavier than I am now, and the thing that would tell me that my weight loss strategy was working was when I was able to fit into my clothes and feel good in my miniskirts. So, that’s how I know that it is working for me. When I talk with other people, they often say things very shyly. They say, oh, I have this really nice dress that I wore when I met my partner many years ago, and I want to fit back into that, or, you know, people are often motivated by clothes. So, we know it’s working when our clothes are fitting. Healthcare professionals will often talk about weight loss strategies that work in different ways. They’ll talk about strategies that get weight off and to such an extent that health is improved. It used to be considered that losing five percent of your body weight would result in clinical benefits to health, and yes, we do know that five percent weight loss results in many benefits to health. In fact, even losing two percent of your body weight results in benefits to health. But we now know that in order to get very strong benefits to health, we need to lose more than two or five percent of our body weight. We need to lose much more of the kind of level that’s likely to help you fit into the clothes that you want to wear or have the revenge body or whatever it is that’s driving you. So, for example, we know that you need to lose at least 7.7 percent of your body weight in order to get a noticeable reduction in pain from osteoarthritis in knees and hips. It doesn’t cover if a person loses five or two percent of their body weight. It’s not enough. Seven point seven percent was the magic number. We know that if people loses five or two percent of their body weight, then they have, and if those people have diabetes, diagnosed
diabetes, they have an 80 percent chance of being in remission from diabetes one year after the diet. It doesn’t cut it to lose five percent or even 10 percent of the body to reverse diabetes. These levels of weight loss only result in maybe five or 10 percent of people having remission from diabetes. If a person wants to really boost their chances of being in remission from diabetes, 15 percent or more of body weight is the amount to lose, and 20 percent weight loss results in even greater health benefits. So, a diet that works is a diet that not only, or a weight loss strategy that works, not only helps you to get so much weight off that you can fit back into that dress or those pants or whatever it is and get the revenge body, it’s also the same amount of weight loss that will bring clinical health benefits. So, we’re looking at 10 percent or more of one’s initial body weight. So, if a person weighs 100 kilos, we’re looking at losing 10 kilos. Most weight loss strategies that are based on conventional approaches using food, diet, and exercise do not work in that they do not achieve ten percent or more weight loss after a year. Now, there’s thousands of different diets that you can follow in order to lose weight. These are all food-based strategies to lose excess weight. You probably know somebody who’s been on a half a dozen of these different types of diets. Maybe you’ve tried a half a dozen or more of them yourself. They’re all good in terms of avoiding processed foods and eating more nutritious foods and promoting the general health of your body, but they do not get weight off in the long term. I’ll talk about the stats in a moment. These diets include things like cutting down on carbohydrates, so counting carbohydrates and reducing the amount of carbs in your diet. That’s one way to eat a healthier diet, because there’s a lot of processed foods that contains a lot of carbohydrates. Another way is increasing the protein in your diet. So, some people will focus on protein, increasing protein. This will cut appetite and encourage people to eat less, and that results in some weight loss. There’s also calorie counting or kilojoule counting. You can use kilojoule trackers and things. These are all other ways of counting foods and eating a bit less. There’s the F plan. There’s the Atkins diet. There’s the Zone diet. There’s all sorts of commercial diets, but there’s intermittent fasting, five two diets, you know. They’re all the same in that they’re all based on eating foods, real foods, cutting down on the number of kilojoules that are consumed in one way or another, and all of them in clinical trials with the best available help from psychotherapists, physical therapists, dieticians, you name it. You know, after one year, a person who does one of these diets, at the end of the year, they’ll lose on average five percent of their body weight. In some cases, people will lose, you know, maybe eight percent of their body weight on average in these trials, but typically, all of these food-based diets result in five, eight percent weight loss at the end of one year. That’s not enough to get you excited about opening your closet and saying, woo hoo, I’m going to wear my blah or my blah today. It’s not the kind of weight loss that’s going to give you that killer body, and it’s not, you know, the revenge body, and it’s not the kind of weight loss that’s going to help your health in a large, large, large extent in terms of weight, although eating healthy is always good. So, it doesn’t mean don’t eat healthy. It just means don’t eat healthy with the expectation that it’s going to result in
weight loss because statistically it will not, and you could get disappointed, and
you could give up and think, oh, nothing is working, I'm a failure. I'm hopeless.
That's what I used to think when I was struggling with my weight. I used to
think, oh, you know, everyone else can do it. I can't do it. I must be so bad.
But that's not the case because everyone, nobody can do it statistically. What
about exercise? Well, exercise helps in terms of keeping weight off, and we know
that people who've lost weight and who've kept it off, they do exercise a lot.
Statistically, from the clinical research, it's been shown that what we call big
time losers like me, I guess, who've lost a large amount of weight and who have
kept it off for a long period of time, they exercise around an hour per day. So,
this is exercise. This is not just a bit of a saunter around the house and garden.
This is not just taking some extra steps around the office. This is not going
for a stroll around the shopping centre. This is exercise. It's kind of vigorous
stuff. I wish it wasn't true that exercise was important for keeping weight off
but it is. I must be the laziest most efficient person in the world. I'm always
looking for ways in which I can do things faster and more efficiently and with
less energy, and if I didn't have to move my body much at all, I would be feeling
very good. But if I don't, if I don't move, I get fatter again. And using things
like trackers to help track that exercise are really important and really valuable
for weight management. But exercise, although it helps to keep weight off, it
does practically nothing in terms of losing weight in the first place. Although if
you do diet plus exercise together, you'll lose a little bit more than if you just
do exercise on its own or just diet on its own, but as a weight loss strategy,
exercise is not the way to go, which doesn't mean don't do it. We all need
exercise and plenty of it. We need it for mental health. We need it for physical
health. We need it for so many things. But just don't do it expecting that it's
going to result in weight loss because you could be disappointed, and that can
be discouraging. So, moving along. If diet and exercise don't really work for
weight loss and we know that whether a person does diet alone, exercise alone,
or diet and exercise together, then statistically speaking at the end of 12 months
of a 12-month programme, only, you know, the average weight loss will be less
than 10 percent, usually more like five to six or eight percent. And we know
that only 30 percent of people who do these programmes with the best help
in clinical trials with psychotherapists, dieticians, physical therapists, etc., only
30 percent of these people will achieve weight loss of 10 percent or more. A 30
percent success rate, that's even lower than tossing a coin. You know, if you
think, okay, I'm going to do a weight loss programme, which one will I do, and
you put yourself through all the pain of finding a diet, organising your kitchen,
doing everything to try and help yourself lose weight, and just think, okay, I've
got a 30 percent change at the end of a year I will have lost a level of weight that
helps me fit well and feel happy in my clothes and improves my health a lot a
lot. Thirty percent. That's less than tossing a coin. And in the longer term, so
after three years or five years, the success rate is more like two percent. So, diet
and exercise in themselves do not work for weight loss, but what does work for
weight loss is three things. And these three things must be combined with diet
and exercise because diet and exercise is always important for health and for
weight maintenance but, yeah, they’re not what works for weight loss. These three things are number one, bariatric surgery. This is when a surgeon either slices off two thirds of your stomach and throws it away, or when a surgeon puts a band around the top part of your stomach, and in both strategies less food can fit in your stomach, or when a surgeon masterfully reengineers all of your gastrointestinal system so that the top of this thing is stuck onto the bottom of that thing, and for some reasons, this results in less hunger, higher metabolic rate, massive weight loss with about 90 to 95 percent success rate after one year and even persisting out to 10 and 15 years. So, this works, but it can be a bit permanent, and I think we’ll probably find some other strategies that work without redesigning the whole GI tract. But it is very effective, and it’s not something to sneeze at. It’s not the easy option. You know, it’s still a hard option, and it still needs to be combined with diet and exercise. So, it’s a really valid strategy to investigate for weight management. Unfortunately, it’s extremely expensive, and it’s not suitable for everybody. So, what else is there? The first strategy is bariatric surgery. The second strategy is weight loss medications. These are things like [inaudible] has gone off the market now because people were dying [laughter], but there still is, we still have Duromine on the market in Australia. There’s a new one, Saxenda. They have a terrible history, weight loss medications. They do have side effects; however, they are not to be sneezed at. They are an option that can give people a little bit of an extra help. You know, losing weight and keeping it off is hard work. It’s never easy. So, a medication that helps to make the diet and exercise just a little bit easier can be, is a valid option. It’s something that’s something to consider, something to even talk with your doctor about. But like bariatric surgery, these are expensive. You know, they often say, oh, it costs less than a cup of coffee per day. Well, I’d rather have my cup of coffee per day than have the, you know, the whatever else it is. So, it’s not suitable for everyone.

>> You’re listing to Raising the Bar Sydney 2019.

>> And the third thing that works to get weight off and keep it off in the long term is total meal replacement diets. This is what I do my research in. So, this is my research, area of research expertise. Total meal replacement diets. Because a long with bariatric surgery, which I don’t do research in, and weight loss medications, which I don’t do research in, total meal replacement diets also have an approximately 80 percent chance of success. So, if you or somebody you care about who needs to lose excess weight were to start a meal replacement programme today or tomorrow, diets always start tomorrow, to start tomorrow, and these programmes typically last six to 20 weeks, somewhere in that range, then at the end of the year, so one year from now, it is 80 percent likely that you would be 10 percent less, you would weigh 10 percent less than you weigh now or even more than 10 percent less than what you weight now, because that’s what the clinical trials show. Let me first tell you what these diets are before you get too excited about them. Because the reason I started research in these diets, total meal replacement diets, is because I thought, that must be the worse diet in the world. I lost weight with a food-based diet, and I always thought
that food was the best way to lose weight, and you know, food is best. It kind of makes sense that, you know, you should eat food and not drink synthetic meal replacement products because that’s what people do when they’re on a total meal replacement diet. They replace all of the food that they normally eat with nutritionally replete, chemically synthesised, artificial meal replacement products like shakes full of protein powders and multivitamin substances and minerals and some extra supplements or bars. You know, these bars are often in the shape of a chocolate bar. I thought, that can’t be good. You place all your food with a chocolate bar, you know, how much of a nutritional education is that? Or these formula foods come in the form of soups and some of them even come in the form of dessert. So, instead of eating salad and chicken and healthy stuff, quinoa or quinoa, whatever it’s called, you’re eating chocolate bars and desserts. It sounds weird. But the thing is, you’re only eating three of them a day, three or four if you’re bigger, and nothing else. There’s sometimes some of these diets there’s an addition of some, a few vegetables but not very exciting vegetables, and it seems like celery and watercress. No quinoa or quinoa, whatever it is. Sometimes they involve having some things like, you know, if you’re really craving a party in your mouth, you can have a diet cola or a diet jelly if you really want to go to town or a, you know, a diet chewing gum. Woo hoo. That’s the kind of thing you add to this. Basically meal replacements, nothing else. And there’s very little ambiguity in the diet. It’s oh, I’m in a café with my friends, oh, I wonder if I can have a skim cappuccino? Well, the answer is no. You’re in a bar with your friends, and you’re thinking, oh, I wonder if I could have a little bit of rum in my Diet Coke. Well, the answer to that is no. You know, whatever the question is, can I have this, can I have that, the answer is always, no. And it’s really easy to follow. So, what else. Oh, with these diets, people lose weight fast. If you were to start one of these diets tomorrow, and the diet would last, you know, anything from six to 20 weeks say, you could expect at the end of six to 20 weeks, you would expect to lose 10 percent of your weights as a minimum up to around 25 or so percent of your weight. All of that in six to 20 weeks. That’s a lot of weight really fast. It’s time to, you know, don’t throw away any of those thin clothes that you’ve got in your wardrobe, because you’ll be wearing them all again in, you know, less than 20 weeks. It’s the fabulous way to get a revenge body and feel really great and have health benefits. The other thing is, despite these diets involving severe energy restriction, so you’re not eating anything except for these products, and a few mints or a , you know, a leaf of watercress or something, and despite the fact that they result in rapid weight loss, they paradoxically do not result in hunger. And this is the weirdest thing. We’ve done experiments in people where we’ve measured their levels of hunger during these total meal replacement diets. We’ve asked them how hungry they are. We’ve measured their hunger hormones to try and see how hungry they’re feeling if we don’t believe what they’re saying about how hungry. We look at their hormones to see how hungry they might be. And we know that whereas normal food-based diets lead to people feeling hungry and hangry and agitated, you know that feeling, these diets don’t do that. Of course, you know, people will feel hungry during one of
these diets before lunch or they’ll feel hungry before dinner or before breakfast, but then they’ll go and have one of these meal replacement products, and the hunger goes away for another two or three or four hours. So, they’re remarkable in that they result in rapid weight loss without excessive hunger, which makes them really easy to follow. Another thing is what about weight regain. People often think that, well, you know, if you lose weight fast, then you might regain the weight fast. But recent research has shown that the rate of weight regain with a total meal replacement diet is no faster than with any other diet. So, the rate of weight regain is the same for every type of diet, fast or slow, however, because the person on a total meal replacement diet will lose 20 percent of their weight as opposed to six or seven percent of their weight, well, at the end of three years when everyone has regained some weight, the person who lost weight with a total meal replacement diet will still be better off. And in fact, research has shown that after what is, what’s the number? Yeah, so after 12 months, 80 percent of people who do a meal replacement diet will be 10 percent lower than their starting weight compared to only 30 percent of people on a food-based diet, and even after three years and five years, after five years still 30 percent of people who did a total meal replacement diet will still be 10 percent lower than their starting weight compared to only a few percent for people on a food-based diet. So, these diets may seem like the worst diet in the world, but research shows that they do result in the best long-term weight management out of all diet-based strategies. And in fact, the weight loss that they induce is almost as great as the weight loss induced by bariatric surgery although bariatric surgery is always the winner in terms of the total amount of weight lost. So, I think these diets are the way to tackle obesity and excess weight. I think that in the world in general, we’ve been pussyfooting around with food-based diets. You know, in theory, food-based diets seem like the right way to lose weight, it seems like the healthy way to lose weight, but decades of research is showing that food-based diets, they do not work for weight loss, and we have generations of people just totally disheartened by not being able to lose weight, feeling like they are the failure. I felt like I was the failure. But it’s not. It’s just that these, you know, food-based diets don’t work. That’s all there is to it. We just need to use another strategy, and one of the three strategies is total meal replacement diets. So, if you’re going to start one of these tomorrow, or if you’re looking at encouraging somebody that you care about to start one of these diets, there’s some really important precautions you need to keep in mind. The first is that you need to use very good products. These are the products that on the box it says this diet is intended for use as a total meal replacement product, and on the [inaudible] if you find a product that says, you know, not for use as a total diet replacement, you don’t use that. That’s for, you know, just replacing a lunch or a breakfast here or there, and you eat the rest of your food as food. So, you have to look for products that it says on the box it’s used, it’s intended for total meal replacement. So, with my colleagues at the University of Sydney, we did a poll, like an analysis of all of the products available on the Australian market for use as total meal replacement products, and we saw that some of them were better than others. There was two of those that we’re better. If
you’d like to know those, you can email me, and I’ll send you a link to that article so you can see. The importance of using good products for a total meal replacement diet cannot be underestimated. In the 1970s, when these diets first became available, there were 14 people around the world who died because the diets were not nutritionally replete. And it’s probably because of that that a lot of healthcare professionals are very scared about prescribing these diets to their patients, they can be dangerous if they’re not nutritionally replete, so look for the proper products. The good products are more expensive than the ones that you’ll buy in Aldi’s or any other supermarket because you know, the other ones are not intended for total diet replacement. However, they cost less per day than the average Australian expenditure on food. So, they’re actually cheaper than eating food. The other thing is in terms of professional support that you need to support yourself with one of these diets, a study showed that it cost three times less to help somebody with dietetic support to lose weight with a total meal replacement diet than it did with a food-based diet. So, it’s something where you can save money in terms of professional support. The second precaution about these diets is they absolutely must not be done without the okay from your licenced healthcare professional. These diets can be dangerous for people with some health conditions, and many of these health conditions are asymptomatic, so you don’t know if you’ve got that health condition. These include some slight perturbances in kidney function or a little bit dodginess in liver function or a little bit of a weakness in bones, so osteoporosis or osteopenia or insulin-dependant diabetes. These are some examples of diseases or conditions where total meal replacement diets can be dangerous if not done in conjunction with medical care. So, you want to make sure that if you’re doing one of these diets or someone that you care about, don’t just go to the pharmacy like my sister did before she was getting married and she bought some boxes of Optifast off the shelf and did a total meal replacement diet. Don’t do that. Get the okay from your doctor that these diets are okay for you. But with medical supervision, these diets are safe. Number three, the other precaution with these rapid weight loss diets is that exercise is nonnegotiable. Exercise is always important for health. It’s always important for weight management. But when it comes to losing weight with a very rapid method of weight loss, exercise is going to help with maintaining muscle mass and maintaining bone density. Because we know that weight loss results in loss of muscle mass, and it also results in some loss of bone density, and we do know that exercise, especially that most obnoxious type of exercise, which is called strength training, when you know, you have to really squeeze your muscles and do things that are kind of painful, not painful, but you know, why would anyone want to do that, you know, pushups and things like that. These exercises are really important because they have been shown to prevent muscle and bone loss during weight loss. So, losing weight with a total meal replacement diet, it becomes extra important to do exercise, especially strength-based exercises. Another thing, only three more precautions to watch out for. If you or someone you care about is doing one of these diets, you need to get support, especially at the end of the diet. So, we know from research that people, you know, if they have some instructions about how to
do these diets, they can pretty much do them themselves. They’re incredibly simple. As I said, the answer is always, no, you can’t have this, you can’t have that. You know, it’s not hard. You don’t feel hungry. But the support is after the diet. When you finish the diet and you go back into the real world of food and transitioning into real-world, that’s when the support is really important. So, having either, you know, a group of people that are losing weight with you and you can support each other or healthcare professional who helps people with weight loss. I know healthcare professionals seem to be getting more and more expensive every year, but that’s where having the group of people can be helpful, online forums. Just know that it’s going to be difficult at the end of the diet and getting yourself enlisted or getting support enlisted for you is important. The other thing to point out is that accepting weight regain as a normal part of the weight loss process can help you with weight loss. So, typically when people lose weight and they start to regain weight, which is so normal, you know, everything in our environment, in our physiology, in our, you know, psyche, everything is made towards regaining weight. It’s just normal. Everybody regains weight. I just came, yesterday came back from Turkey, and I had three weeks of eating Turkish ice cream, which is so dense that you have to eat it with a knife and fork, oh. I loved that, and I ate that every day. And so weight is coming back on, but you know, that’s just normal. Okay, back on the waggon and keep going, keep trying, accept that this is just a normal part of the process, and there’s nothing wrong with you because you’ve regained some weight. You’re just a normal human being in this environment, that’s all. So, just get back on the waggon and do it again. You know, there’s no mystery for why so many cultures around the world, whole countries of people will fast for a month every single year because, you know, 2000 years ago they knew, 5000 years ago they know that what people lose one year, they’ll gain it back, so they need to fast again. It’s just normal. The other thing is that keep in mind that other options may help you as well. So, losing weight with a total meal replacement, keeping it off will be, you know, it’s going to be a lifetime adventure, and sometimes medications or even bariatric surgery could help with that adventure. So, don’t discount those as options. So, I’d like to say, if you feel that nothing is working in your attempts to manage weight or if you know somebody and it seems like nothing is working for them to manage their weight, then it’s probably that really nothing is working because anything other than bariatric surgery, medications, and total meal replacement diets do not result in significant weight loss in the long term. So, I’d like to suggest that total meal replacement diets are an option that you might like to investigate as a strategy for weight management. Of course, it must be done with supervision from a healthcare professional. Probably if you go to a healthcare professional tomorrow and say I want to do a total meal replacement diet, they will probably tell you, oh don’t do that. That’s really dangerous. That’s a really bad idea. You can tell them, I went to Amanda Salis’ talk from the University of Sydney, look up my website, have a look at the research that I’m doing in this field. It is a valid evidence-based strategy that works. It’s something recommended by the National Health and Medical Research Council of Australia as a valid
strategy. It’s not a crash diet. It’s not some quack thing. If your doctor, if your healthcare professional says not or can’t help you with that and there’s not so many healthcare professionals who know how to use these diets, look around, and you’ll find somebody else who can help you. And then, know that the answer will always be no, so it’s not like it’s a simple diet to follow, but it feels shocking at first. However, hunger will not be an issue, and you can expect that whatever weight you start at, you’ll be 10 percent less or, you know, maybe 20 percent less a year later. And you can get that revenge body that you want or fit into whatever clothes that you love in your wardrobe and get yourself a bucketload of health benefits. So, with that, I’m here for some questions, and I’d like to say, see you later. [laughter]

[ Applause ]

>> Thank you for listening to the podcast series of Raising the Bar Sydney. If you want to hear more podcasts from Raising the Bar, head to raisingthebarsydney.com.ua.