

Providing AOMs for Your Clients on Anti-Obesity Medications



Faculty Disclosure

Raina Childers-Richmond, MS, RDN, CHC

Listed no financial interest/arrangement that would be considered a conflict of interest.



A large, diverse audience of people is seated in a dark room, likely a theater or conference hall. They are all facing towards the front of the room, where a bright, glowing screen or stage is visible. The lighting is dim, with the primary light source coming from the front, creating a silhouette effect on the audience members. The text 'Audience Q & A' is overlaid on the bottom left of the image.

Audience Q & A

Never going back...

We have never had a tool like this before.

What are GLP-1s?

Glucagon-Like Peptide-1 is an incretin hormone produced in the gut, brain, and pancreas that helps regulate blood sugar and appetite.

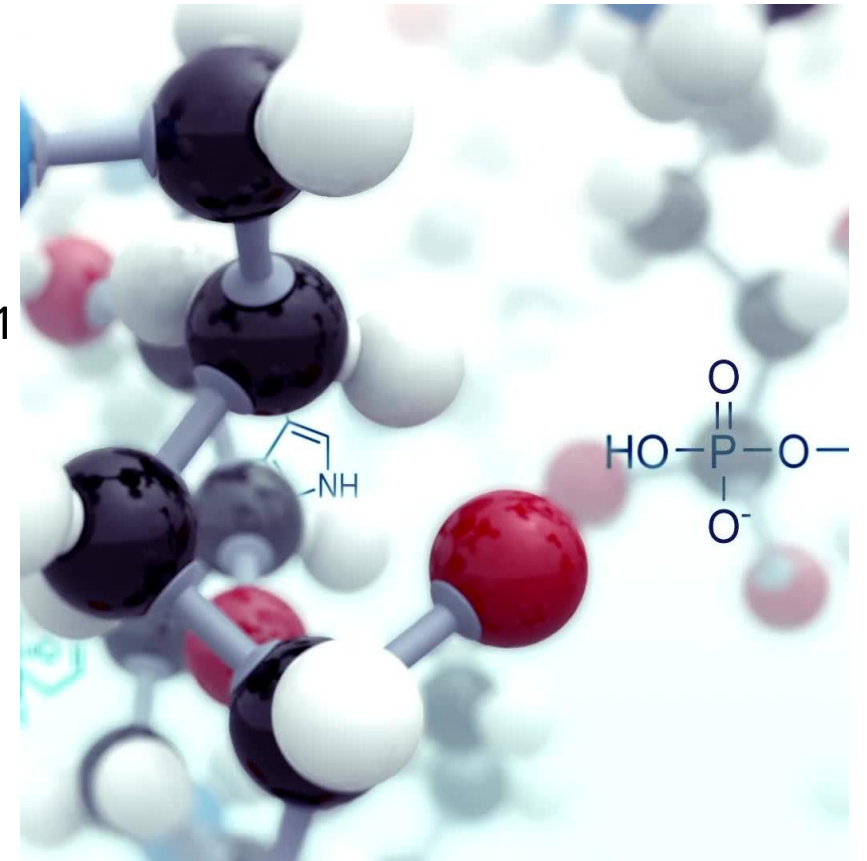
GLP-1 Agonists are medications that mimic the action of natural GLP-1. They last significantly longer than our natural versions.

(Ozempic, Wegovy, Mounjaro, Zepbound, Victoza, Saxenda, more)

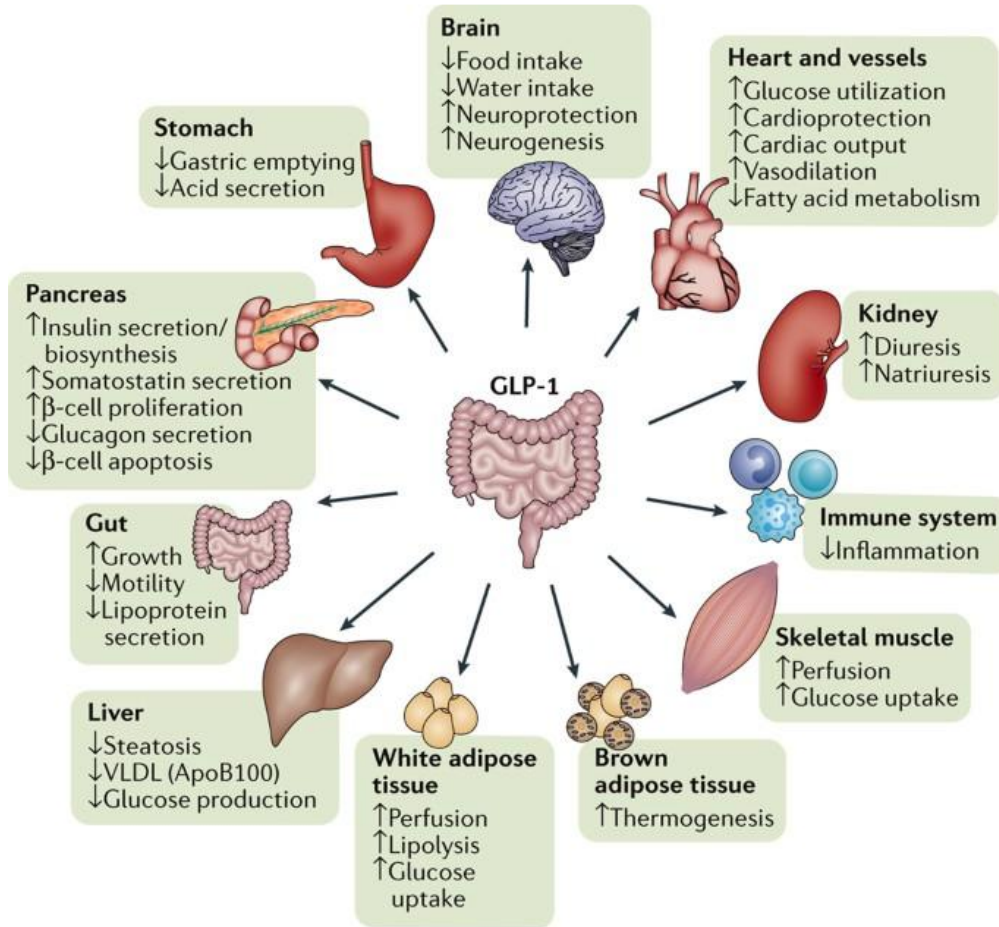
There 100+ medications (hormone-based) currently under development.

- Administration routes- injection, sublingual, oral “pill”

Growth in the compounded variation market (not FDA-tested)



What are these medications doing?



Nature Reviews | Nephrology

- ❖ Acting on multiple body systems
- ❖ Stimulating insulin release to lower blood glucose
- ❖ Reducing the hormone glucagon that raises blood glucose
- ❖ Slowing stomach emptying to promote fullness
- ❖ Increasing feelings of fullness, reducing calorie intake

Weight loss and other Health benefits

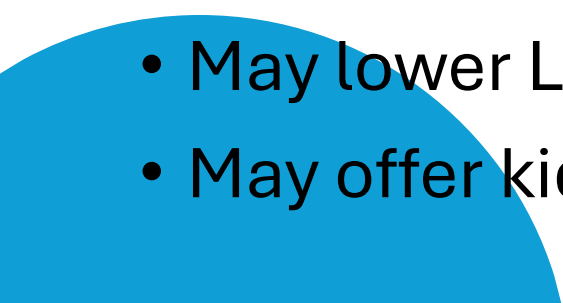


Weight loss:

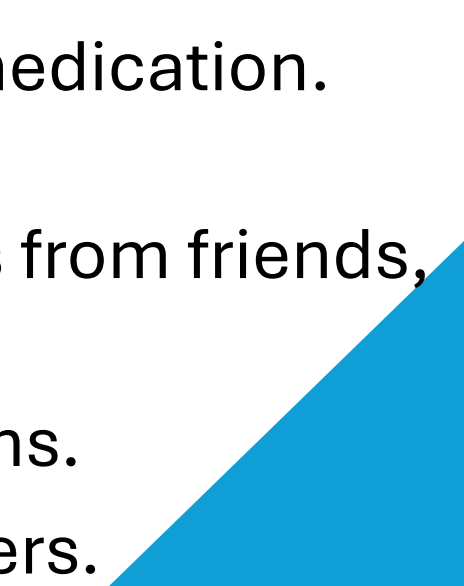
- 60-80% of individuals achieve SIGNIFICANT weight loss, 5-15% of body weight over 6-12 months.
- Initial weight loss may occur within weeks, with substantial results after 3-6 months.

Other Health Benefits: (Lots of research ongoing)

- Improves HbA1c levels
- May reduce risk of cardiovascular events in those with type 2 DM
- May lower LDL cholesterol levels and blood pressure
- May offer kidney protection



A big decision!

- Designed to support individuals who are managing cardio-metabolic disease! Giving hope!
 - Designed to be a long-term intervention at some dose (TBD)
 - May choose or be forced to discontinue the medication.
(Weight regain reality)
 - Some are hiding the use of these medications from friends, family, personal trainers, dietitians, etc.
 - If weight loss is a goal, ask additional questions.
 - Seeing you more frequently than other providers.
- 

How can we support their success?

1

Provide
Activity
Guidance

2

Encourage
the
Optimizing
of Nutrition
Strategies

3

Monitor for
Medication
Side
Effects

4

Support for
Long-term
Engagement

Activity Guidance



Your clients need you!

Your overall message doesn't change.

Key to good health despite the reality of weight loss without it.

Just the Facts...

We are still learning. With these meds, over-promising what exercise can do for weight loss or to preserve muscle is still not proven.

Yes, to weight training/resistance training- help them gain confidence and mastery with this important exercise area.

Discover their “WHYs” outside of weight loss. Tap into non-scale victories, make quality of life the focus.





Optimizing Nutrition Strategies

- Collaborate with Nutrition Professionals (RDNs)- watch scope creep.
- Encourage a diet rich in veggies, fruits, whole grains, lean protein, and healthy fats
- Lead with, “Eat your protein first.” First goal- 80-100gm per day
- High-quality meal replacements can help when energy is low and only small volumes are tolerated.
- Promote adequate hydration. First goal- 2-3 L of low-calorie fluid.
- Limit alcohol intake.
- Encourage food/drink tracking, when it makes sense (at least protein tracking). There are so many user-friendly apps.

Side Effects: Check in, don't freak out.

Diarrhea

- Stay hydrated, increase fluid intake (consider low sugar, electrolyte-containing beverages)
- Incorporate soluble fiber foods (applesauce, bananas, oatmeal, baked potato)

Constipation

- Stay hydrated 2-3 L per day
- Incorporate fiber (fruit, veggies, nut/seeds, whole grains), may benefit from over-the-counter fiber supplement

Side Effects Continued

Loss of appetite

- Eat small, frequent meals/snacks
- Try not to fill up on empty calorie foods, may use meal replacements, eat protein and fiber first

Nausea

- Eat small meals slowly, that are bland without strong smells
- Eat cold foods
- Avoid doing activities that add to nausea (cooking raw meat, cleaning the bathroom)

Side Effects Continued

Reflux

- Eat small, frequent meals/snacks
- Eat slowly
- Do not lay down after eating/drinking
- Avoid being physically active soon after eating or drinking
- Avoid alcohol
- Limit high-fat or overly spicy foods.

If any side effects are not improving and/or impacting the ability to eat and drink to meet nutrition and hydration needs, refer them back to their primary care provider ASAP.

Support Long-term Engagement

These medications are tools, they don't replace healthy lifestyle practices.

Focus on healthy habits that will help support their new lower body weight now and in the future.


People desire autonomy and mastery in self-care, but that takes time.



Do your approach, your services, and programs:

- Encourage sustainable lifestyle changes?
- Identify barriers and potential challenges/blockers?
- Focus on mental/emotional health?
- Promote a support system for community and accountability?
- Encourage regular check-ins with their healthcare team?





You, Your Team, Your Organization

- Provide, obtain, or encourage general topic education/training for yourself and your team
- Set up collaborative relationships within your organization and/or community (Obesity medicine providers, Dietitians, Pharmacists, Mental Health providers, Physical Therapists, Health Coaches)
- Create unique experiences that can be individualized
- Track outcome data and listen to client feedback

Questions and Contact Information

Questions?

Contact Information:

Raina Childers-Richmond, MS, RDN, CHC

raina@hnthealth.com

LinkedIn: <https://www.linkedin.com/in/raina-childers-richmond/>



Resources

- [“Position of the Academy of Nutrition and Dietetics: Medical Nutrition Therapy Behavioral Interventions Provided by Dietitians for Adults with Overweight and Obesity.”](#)
- [“Exercise for Clients Taking an Anti-Obesity Medication,”](#) Renee Rogers, Ph.D., FACSM.
- [“Management of Hyperglycemia in Type 2 Diabetes, 2022. A Consensus Report.”](#) American Diabetes Association and the European Association for the Study of Diabetes.