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## Weight Management (Foundational Support)

 Template by Fullscript

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### Overview

The U.S. and global prevalence of obesity has been rising steadily in the past decades. Obesity and higher weights are associated with various health complications, including type 2 diabetes, cardiovascular disease, stroke, certain cancers, obstructive sleep apnea syndrome (OSAS), non-alcoholic fatty liver disease (NAFLD), and musculoskeletal disorders.

Weight management to address overweight and obesity involves implementing strategies for achieving and maintaining a healthy weight while recognizing that bodies come in all shapes and sizes. It involves adopting balanced eating habits, engaging in regular physical activity, and prioritizing overall well-being. Factors such as genetics, cultural background, mental health, and socioeconomic status play a role in a person's relationship with food and body image. ([ODS 2022](#))

Individuals with higher weight or obesity can also benefit from incorporating supplements that support metabolic health, along with a balanced diet and regular physical activity.

## Whey protein

### Whey protein

**30–60 g per day ([Sepandi 2022](#)) ([Badely 2019](#))**

- A meta-analysis determined that whey protein supplementation positively affected body composition indicators, including weight, body fat, lean body mass, fat-free mass, and waist circumference. ([Sepandi 2022](#))
- In a systematic review and meta-analysis, whey protein supplementation significantly reduced systolic blood pressure, diastolic blood pressure, high-density lipoprotein (HDL), waist circumference, triglyceride, and fasting blood sugar in intervention groups compared to control groups. ([Badely 2019](#))
- In a systematic review and meta-analysis, a significant reduction of body weight, lean mass, and fat mass was observed in whey protein-supplement groups. ([Wirunsawanya 2017](#))

## Omega-3 fatty acids

### Omega-3 fatty acids (EPA/DHA)

**400–2,040 mg (as 180–600 mg EPA/120–1,620 mg DHA), 1–3 times per day, for 4–12 weeks**

- A meta-analysis of nine studies examined the effects of omega-3 polyunsaturated fatty acid (n-3 PUFA) supplementation in managing overweight and obesity. Results demonstrated that n-3 PUFA was superior to placebo in reducing serum triglyceride levels, and a significant reduction in waist circumference was observed. ([Zhang 2016](#))
- A systematic review and meta-analysis of studies examined fish or n3-PUFA intake and body composition. Participants who consumed fish or fish oil lost 0.59 kg more body weight than controls. Treatment groups lost 0.24 kg m<sup>-2</sup> (body mass index (BMI)) more than controls and 0.49% more body fat than controls. Fish or fish oil reduced waist circumference by 0.81 cm compared to controls. ([Bender 2014](#))
- Thirty-four overweight women participated in a parallel-group, three-arm, randomized trial for 12 weeks. Compared to the placebo (corn oil), the lifestyle modification (LSM) and EPA+DHA concentrate (1.5 g per day, containing ~0.6 g EPA+DHA) group had an increased VO<sub>2</sub>max/kg and decreased body weight, waist circumference, and body fat. ([Sedláček 2018](#))

- Another study found that participants prescribed omega-3 supplementation and exercise experienced significant reductions in body weight, body fat percentage, waist circumference, and abdominal skinfold thickness compared to the control group (placebo and exercise). Supplementation of omega-3 also significantly improved the VO2max outcome compared to the control group. ([Haghravan 2016](#))

## Probiotics

### Probiotics

**≥10 billion CFUs per day of a single- or multi-strain probiotic for a minimum of 8 weeks ([Da Silva Pontes 2021](#))**

- Probiotic consumption significantly reduced body weight by 0.59 kg and BMI by 0.49 kg/m. A greater reduction in BMI was found with supplementation of multiple species of probiotics. ([Zhang 2016](#))
- In six RCTs including 1,720 individuals, probiotics had a significant effect in reducing body weight, BMI, waist circumference, fat mass, insulin, total cholesterol, and low-density lipoprotein (LDL) levels compared to control groups. ([Da Silva Pontes 2021](#))
- In a systematic review examining the effects of probiotics and synbiotics on weight loss in subjects with overweight or obesity, *Lactobacillus* and *Bifidobacterium* strains were the most used and showed the best results in reducing body weight. ([Álvarez-Arraño 2021](#))

## EGCG

### EGCG

**500–800 mg per day for 12 weeks ([Lin 2020](#))**

- ≥800 mg per day of green tea extract for <12 weeks or <500 mg per day of green tea for 12 weeks decreased waist circumference in participants with obesity. ([Lin 2020](#))
- After 12 weeks of high-dose EGCG treatment, the treatment group experienced significant reductions in weight ( $76.8 \pm 11.3$  kg to  $75.7 \pm 11.5$  kg), BMI, and waist circumference. Additionally, reduced LDL plasma levels were observed, and total cholesterol levels decreased by up to 5.33%. ([Chen 2016](#))

## Fiber

### Fiber

**5–20 g per day for 12–16 weeks ([Huwiler 2022](#))([Jovanovski 2020](#))**

- Soluble dietary fiber supplementation ranging from 2.6 g to 29 g per day (mean of 11 g per day) for at least 12 weeks in patients with overweight and obesity showed a significantly higher reduction in body weight (-1.25 kg) accompanied by a significant decrease in BMI (-0.47 kg/m<sup>2</sup>), waist circumference (-1.33 cm), fasting blood insulin (-1.49 mIU/L), and HOMA-IR (-0.92) compared to the control group. ([Huwiler 2022](#))
- Viscous fiber supplementation within a calorie-restricted diet significantly decreased body weight (-0.81 kg), BMI (-0.25 kg/m<sup>2</sup>), and body fat compared (-1.39%) to controls. ([Jovanovski 2020](#))
- Weight, BMI, and percent total body fat were significantly reduced in participants who consumed 12 g of a psyllium fiber supplement. Significant total cholesterol and LDL reductions were observed compared with controls after six and 12 weeks. ([Pal 2010](#))

## CLA

## CLA

### 3–4.5 g per day for 4–12 weeks ([Namazi 2019](#))([Hamdallah 2020](#))

- Conjugated linoleic acid (CLA) supplementation had a moderate anti-obesity effect on body weight, BMI, and total body fat reduction in women when supplemented over six to 16 weeks. ([Hamdallah 2020](#))
- In CLA groups, significant body weight (-0.51 kg) and BMI (-0.18 kg/m<sup>2</sup>) reductions were found compared to controls. In metabolic syndrome (MS) patients, CLA was effective in reducing weight and BMI, but it adversely reduced HDL. Thus, precautions should be taken with CLA use for MS patients. ([Namazi 2019](#))
- Supplementation with CLA increased lean body mass (0.19 kg) and slightly reduced body weight (-0.52 kg), BMI (-0.23 kg/m<sup>2</sup>), and fat mass in individuals with overweight or obesity. ([Namazi 2019](#))

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