



EASO
European Association for the Study of Obesity

**The psychology of appetite
and obesity: Coping during
COVID-19**
17th April 2020

WEBINAR 1

EASO
ECPO  European Coalition
for People living
with Obesity

Housekeeping!

All attendees are muted, If you have a question, we would kindly ask you to use the Q&A function on your screen.

If we cannot answer all questions at this time, we will circulate the additional questions and answers after the webinar.

We are recording this webinar; the slides and recording will be available shortly after we have ended the session.

Enjoy, listen & share with your patient community!

AGENDA

14.00 – 14.02	Introduction & Welcome	Vicki Mooney
14.02 – 14.06	COVID-19 and Obesity	Sheree Bryant
14.06 – 14.10	Patient concerns, questionnaire & responses	Vicki Mooney
14.10 – 14.25	Psychology of Appetite & Obesity	Prof. Jason Halford
14.25 – 14.35	Comments and remarks	Dr. Patrick Ritz
14.35 – 14.55	Your questions answered! Q&A with Prof. Jason Halford and Dr. Patrick Ritz	Sheree Bryant (Moderator)
14.55 – 14.58	Final remarks	Prof. Jason Halford & Dr. Patrick Ritz
14.58 – 15.00	Goodbye and Thank you	Vicki Mooney

Introducing our Speakers & Moderators



Vicki Mooney ECPO



Sheree Bryant EASO



Dr. Patrick Ritz
Centre Intégré de l' Obésité



Prof. Jason Halford EASO

COVID-19 & OBESITY

Sheree Bryant

EASO





**COVID-19:
Managing during this
public health emergency**

Sheree Bryant, EASO

What is COVID-19? What are the symptoms?

- Coronaviruses are a large family of viruses which may cause illness in animals or humans.
- **COVID-19 is the infectious disease caused by the most recently discovered coronavirus. This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019.**
- The most common symptoms of COVID-19 are fever, tiredness, and dry cough. Some patients may have aches and pains, nasal congestion, runny nose, sore throat or diarrhea. These symptoms are usually mild and begin gradually.
- **Some people become infected but don't develop any symptoms and don't feel unwell. Most people (about 80%) recover from the disease without needing special treatment. Around 1 out of every 6 people who gets COVID-19 becomes seriously ill and develops difficulty breathing.**

Who is at higher risk and how do we prevent infection?

- Older people, and people with underlying medical problems like high blood pressure, heart problems, diabetes, or obesity are more likely to develop serious illness. People who develop **fever and cough with difficulty breathing should seek medical attention.**
- **People can catch COVID-19 from others who have the virus. The disease can spread from person to person through small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales.**
- Effective ways to protect yourself and others against COVID-19 are frequent hand-washing, cover your cough with the bend of your elbow or a tissue and maintaining physical distancing. Government recommendations differ, some suggest a distance of at least 1 meter; others recommend 2 metres.
- **There is ongoing debate about mask use but wearing a mask when outdoors can not hurt.**

If I have symptoms what should I do?

- If you have obesity and you experience the hallmark symptoms – a dry cough, fever and shortness of breath, continue taking your medication and contact your primary care physician or local health authority.
- **Remember that most people with COVID-19 will have a comparatively mild illness but people living with obesity are at higher risk of complications from COVID-19 infection**
- EASO urges people with obesity to **take precautions to avoid infection.**
- **Learn more on the EASO website**
- <https://easo.org/what-you-need-to-know-about-obesity-and-covid-19-a-guide-for-patients/>
<https://easo.org/covid-19-and-obesity/covid-19-country-resources/>



Concerns & questionnaire results of people who are affected by Obesity

Vicki Mooney
Executive Director

European Coalition of People who live with Obesity.

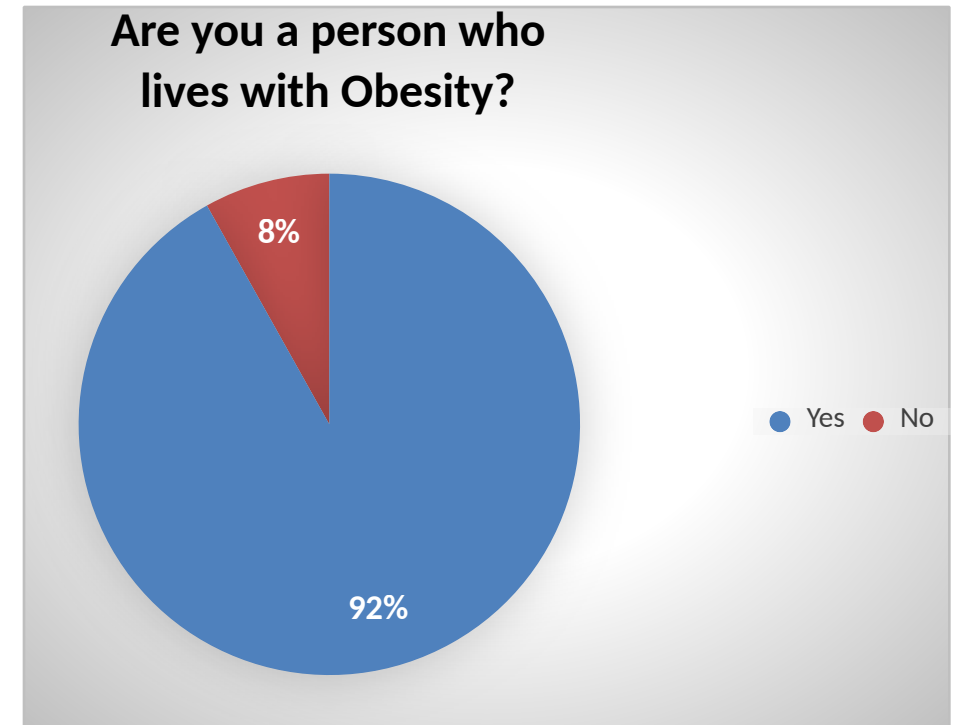
Challenges for People who live with, or are affected by Obesity

- Evidence based information on COVID-19 & Obesity
- The impact of physical distancing on hedonic eating, mental health and motivation.
- Concerns of those who are Bariatric/Weight Loss Surgery patients

***This is not an academic survey. This is an immediate examination of the current situation.**

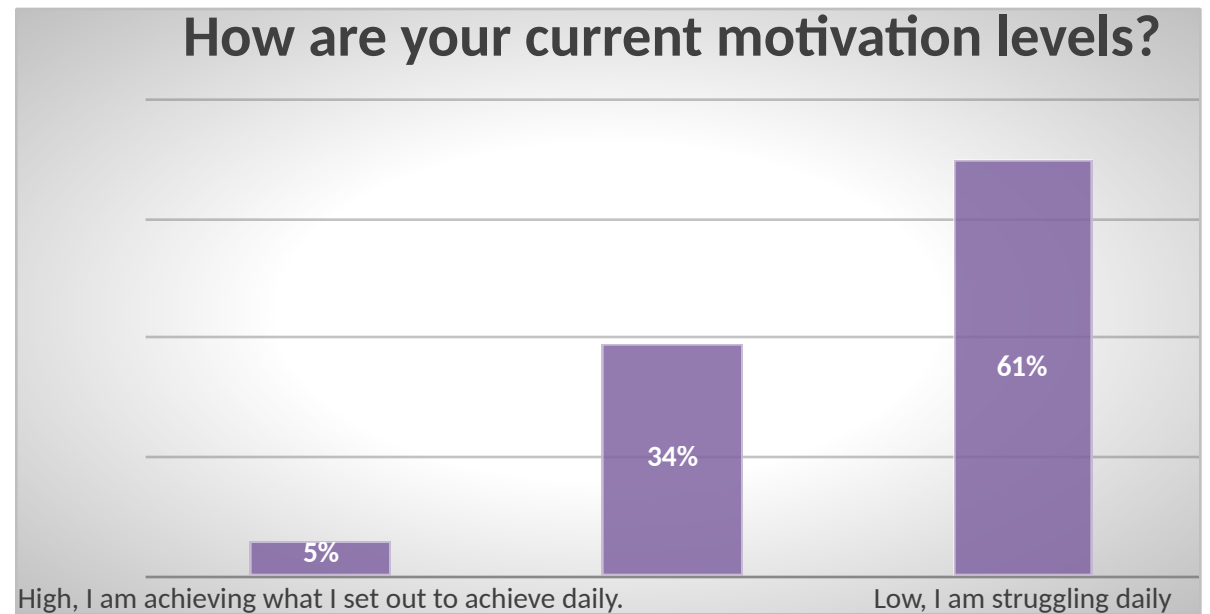
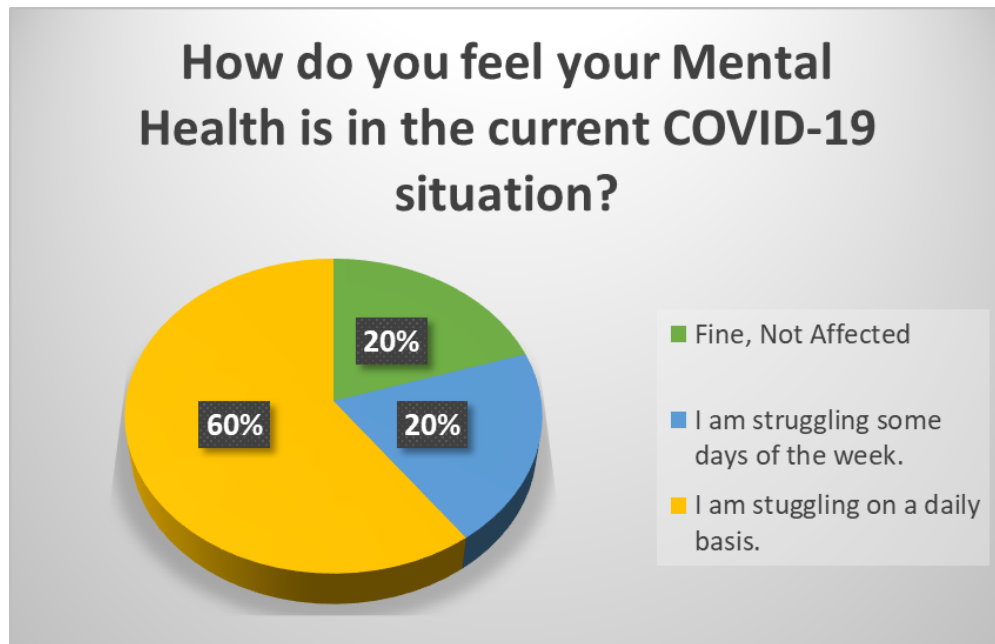
This was a patient created questionnaire with the view of identifying the immediate concerns of people who live with Obesity.

- 197 responses
- 24 hour period 14-15th April 2020
- Prominently western European responders
- Circulated via Social Media by ECPO



What are patients concerned about?

- 73% of respondents said they were concerned regarding Covid-19 as people who live with Obesity.



Psychology of appetite and Obesity

Professor Jason Halford

EASO





The Psychology of Appetite and Obesity: Coping during COVID-19

Jason Halford, Leeds University

Components of appetite

What appetite processes lead to eating?

- **Hunger:** The drive to consume, elicits and sustains eating
- **Wanting:** The motivation to consume a specific food experienced strongly through cravings, demonstrated by food cue (sight, smell) responsiveness
- **Liking:** The sensory pleasure of food that leads to wanting

What should lead us to stop?

- **Satiation:** Processes during a meal that lead to concluding eating (negative feedback)
 - strengthened by meal volume
 - weakened by palatability
- **Satiety:** Post meal satisfaction that should suppress hunger and further food intake

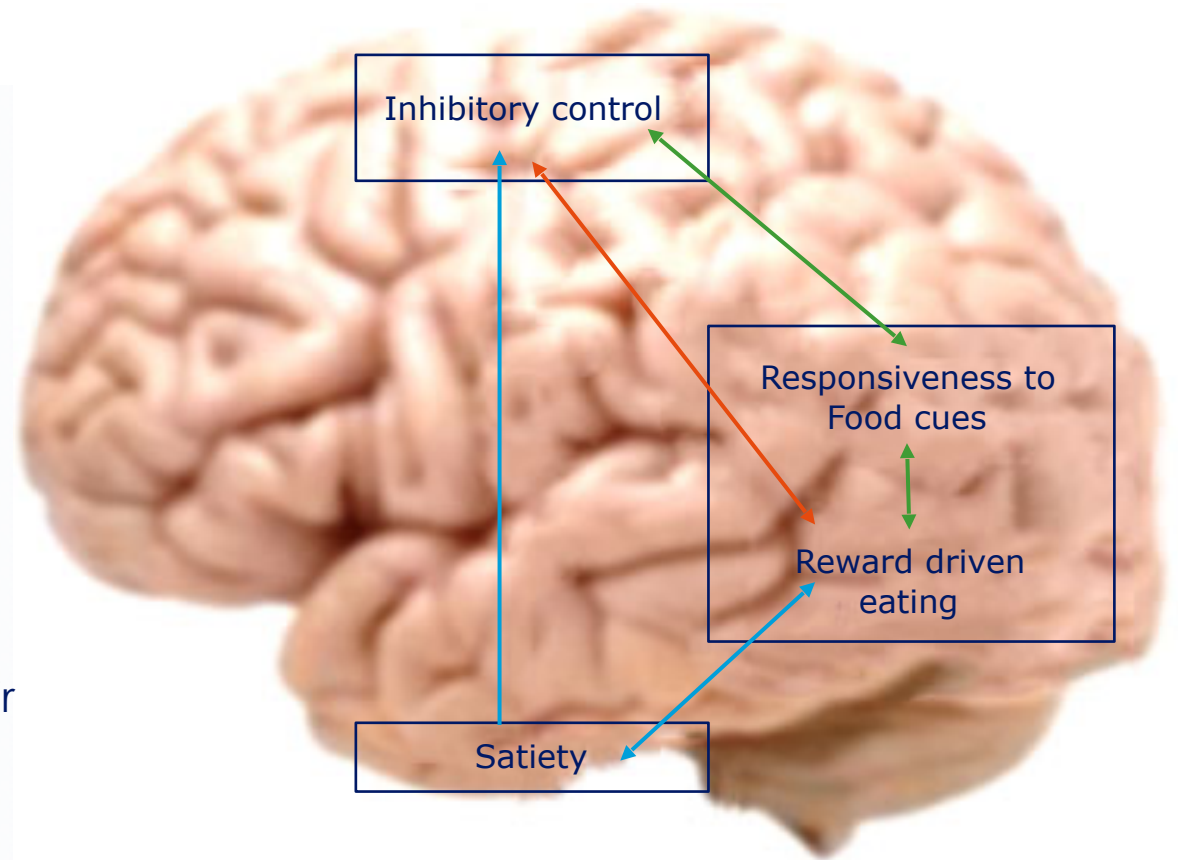
Behavioral phenomena associated with adiposity

Inadequate response to food consumed

Less control of ingestion

Under normal circumstances these impair control of eating behavior

Current circumstances rob people living with obesity their normal strategies to combat this



Biological mechanisms act to increase appetite

during and after weight loss

After weight reduction, the brain is stimulated to increase caloric intake by changes in levels of circulating hormones

↓ LEPTIN ↑ GHRELIN ↓ GLP-1



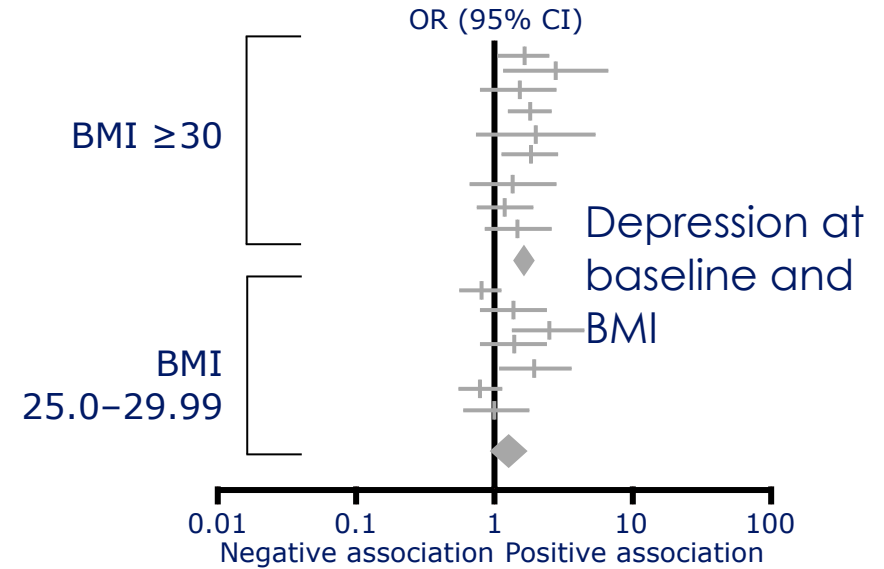
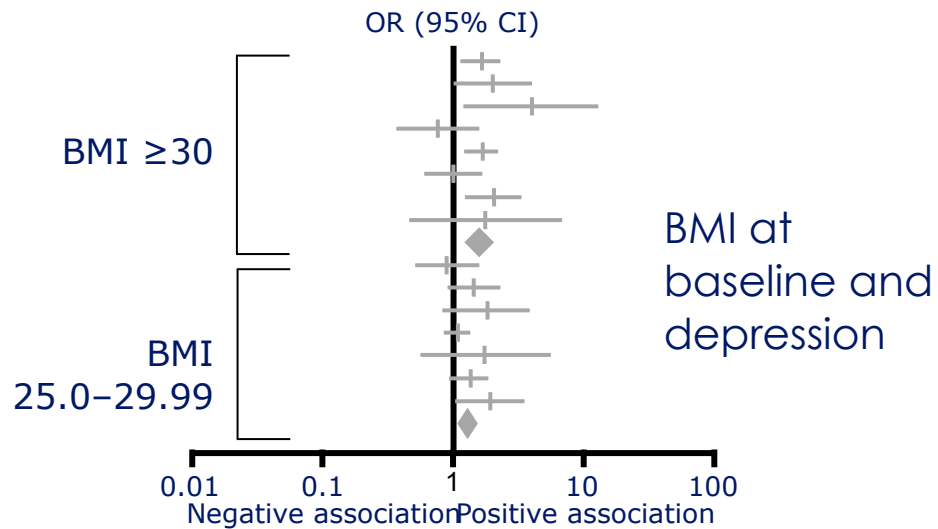
↑ Increased preference for energy-dense foods (high-fat/sugary foods)

↑ Increased appetite

Biology and environment in the control of appetite and energy intake in obesity

Increased energy intake is an understandable response to the environmental and biological realities of living with obesity, particularly during stressful times

Bidirectional association between depression and obesity



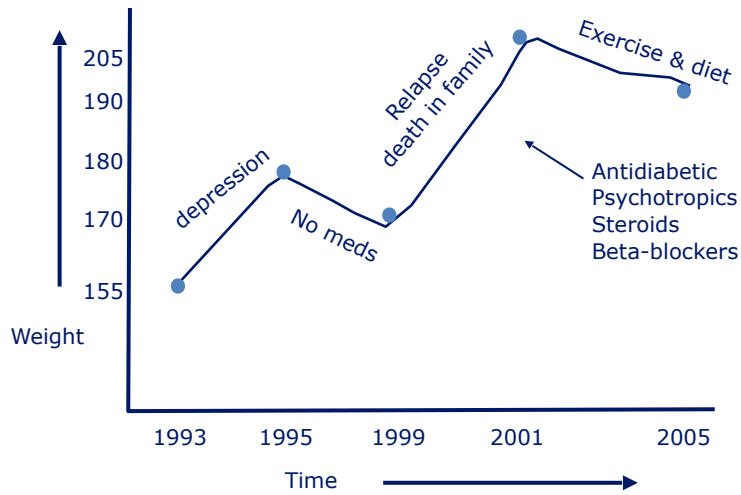
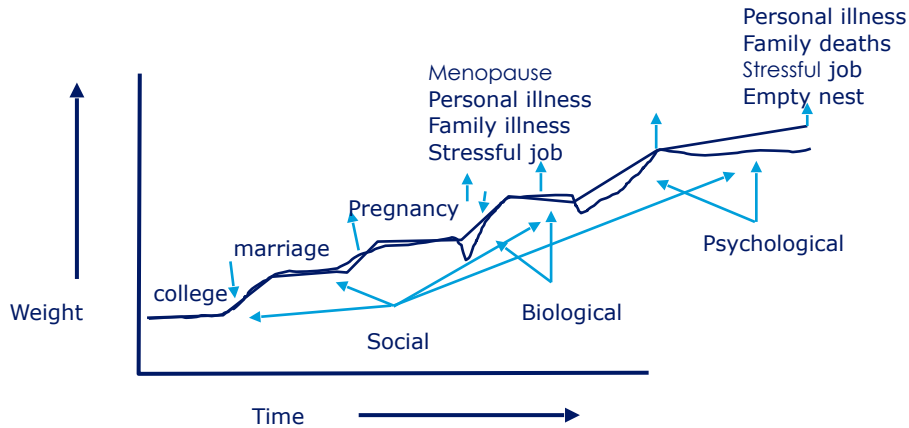
Overweight, Obesity, and Depression

A Systematic Review and Meta-analysis of Longitudinal Studies

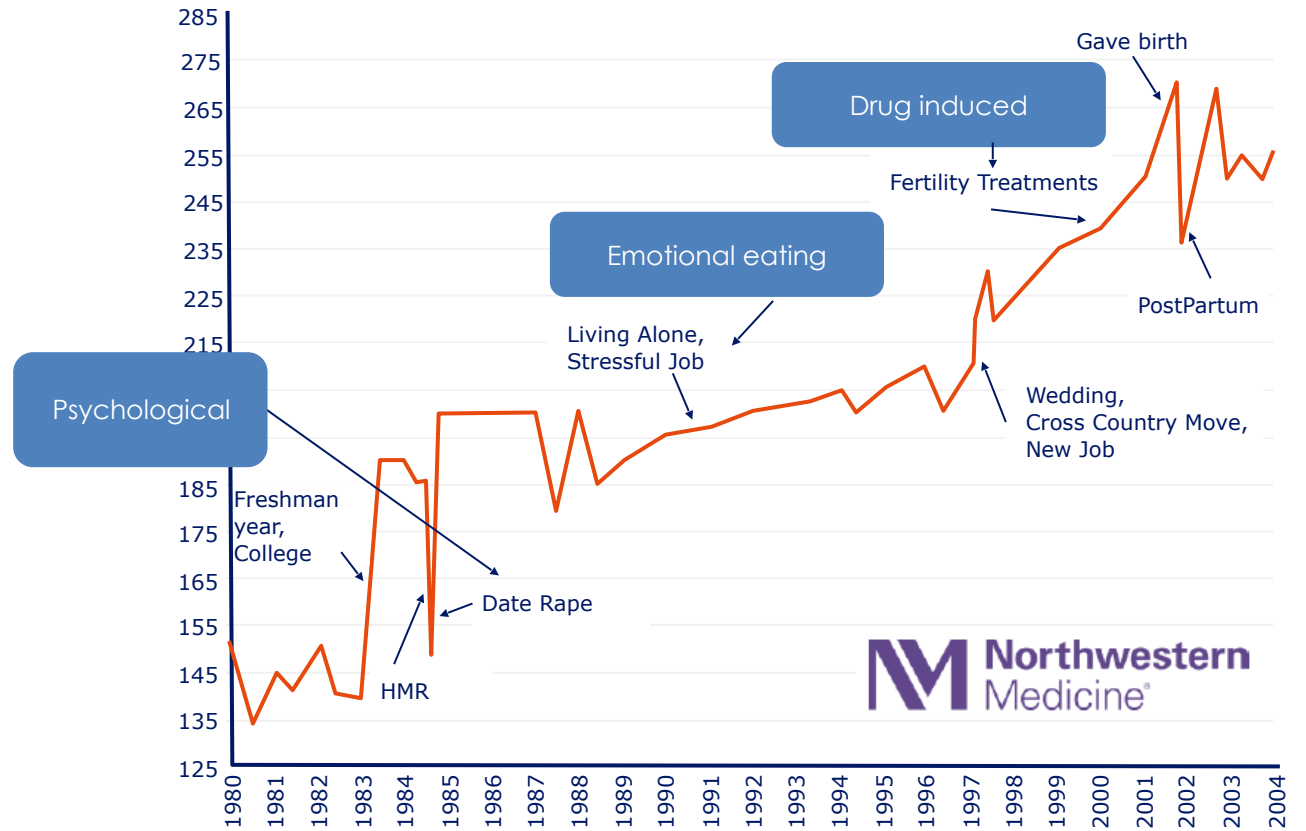
Floriana S. Luppino, MD; Leonore M. de Wit, MS; Paul F. Bouvy, MD, PhD; Theo Stijnen, PhD; Pim Cuijpers, PhD; Brenda W. J. H. Penninx, PhD; Frans G. Zitman, MD, PhD

1. Obesity and overweight increased the risk depression.
2. Depression increases the odds for developing obesity.

Impact of life events on body weight



Individual Patient Data reveals the importance of life events



Life Events – Weight graph

Psychological impact of quarantine during and after

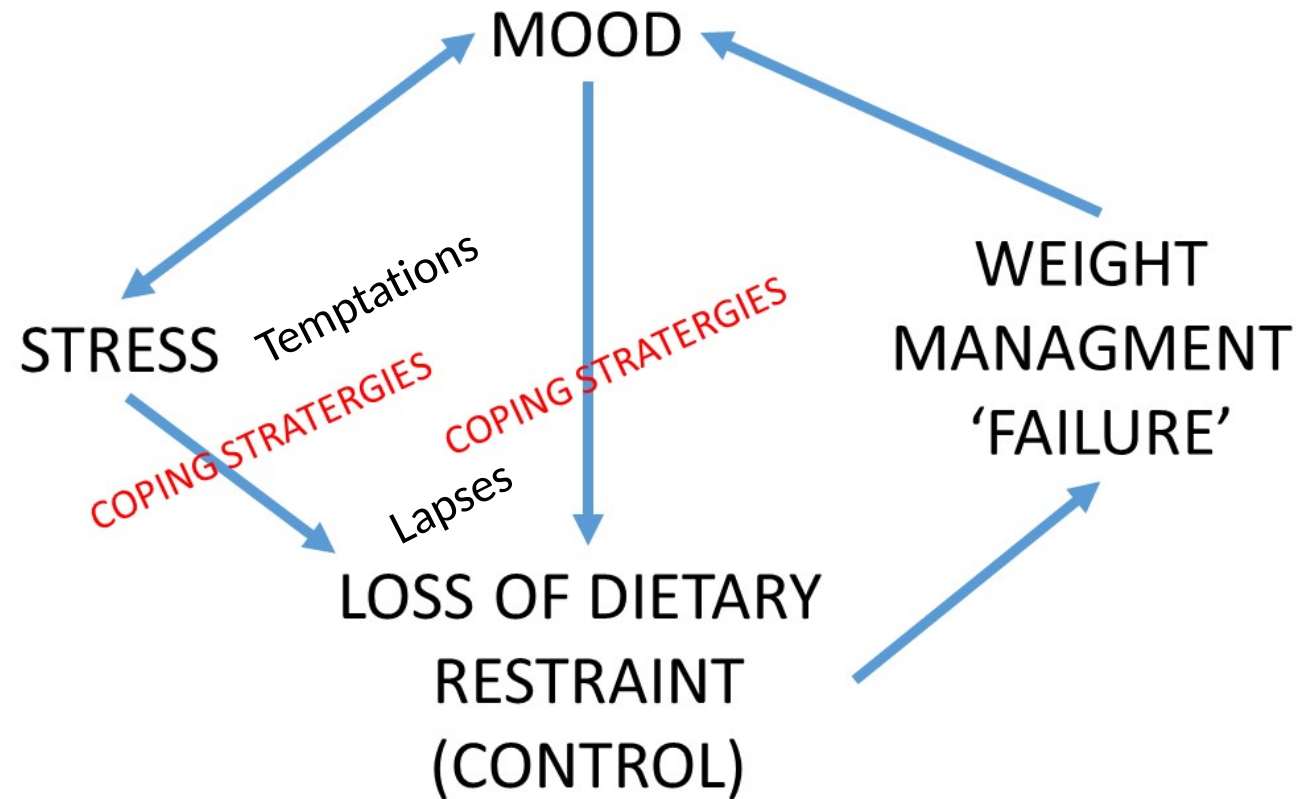


The psychological impact of quarantine and how to reduce it: rapid review of the evidence

Samantha K Brooks, Rebecca K Webster, Louise E Smith, Lisa Woodland, Simon Wessely, Neil Greenberg, Gideon James Rubin

- Most reviewed studies reported negative psychological effects including post-traumatic stress symptoms, confusion, and anger.
- Stressors included longer quarantine duration, infection fears, frustration, boredom, inadequate supplies, inadequate information, financial loss, and stigma.
- Some researchers have suggested long-lasting effects (PTSD).

Stress, Mood, Dietary Restraint and Weight Management Coping



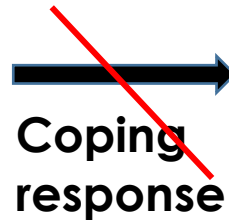
The effects of stress and mood on dietary restraint and weight management success are well known and widely acknowledged

Temptations and lapses – The role of coping

Temptation

a sudden urge to break diet when you were close to the brink

- Appetite – **greater** hunger, **less** fullness
- Situation – anywhere, any time
- Mood – **greater**: sadness, deprivation, stress, and boredom; **Less**: Relaxed, content, feeling of being in control



Lapse

An incident where you broke your diet

- Appetite – **greater** hunger, **less** satisfied
- Situation – home, evening, and weekends
- Mood – **greater**: sadness, deprivation, stress, and nervousness; **Less**: Relaxed, and feelings of being in control
- Abstinence Violations – **greater** worry; **Less** prepared to resist, less confidence in success, and will power

Need to i) reduce exposure to temptations, ii) prevent them triggering lapses and iii) manage the consequences of lapses

Carel et al, 2001 Eating Behav. 2:307-321; Carel et al, 2004 j. Con. Clin. Psych, McKee et al 2014 Ann. Behav. Med. 48:300-310; Forman et al 2017 Ann Behav Med 51:741 753

Resilience and mental health

PRACTICAL ADVICE ON MAINTAINING HEALTH DURING THE COVID-19 PANDEMIC

RESILIENCE AND MENTAL HEALTH



Follow regular schedules
for waking up, dressing, eating, exercising, working, entertainment, and going to sleep.



Establish objectives
for each day as well as for the whole week.



Keep well informed
but limit the time spent focusing on COVID-19-related information.



Limit caffeine intake



Take slow deep breaths
into your abdomen in the morning, before and after exercise and when stressed. Breathe in through your nostrils and concentrate on the temperature of the air as it goes in (cool) and as it comes out (warm). Count the time it takes to breathe in and try to make your exhalation twice as long. This diaphragmatic breathing can help you to remain calm.



Try to get solar exposure
if the sun can be viewed from your window, balcony or private garden in accordance with national isolation rules and safe sun guidance.



Stay in contact
with family, friends and colleagues without breaking physical distancing guidance (2 metres or 6 feet is the typical physical distancing recommendation).



Prioritise keeping your mind active
Reading, writing, playing an instrument, and working on puzzles and playing games can help.



www.easo.org

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NHS Every Mind Matters COVID-19 Anxiety Management Tips

1. Stay connected

maintain healthy relationships with friends via social media etc.

2. Talk about your worries

Normal to feel worried, scared, helpless. It is OK to share that with those you trust or via helplines

3. Support/Help Others

Helping some else can benefit your mental health. Are there people you could message or online groups you could support?

4. Feel Prepared

Working through implication of self isolation should help you feel more prepared. What are the problems and how could they be solved?

5. Look after your body

Physical health has a big impact on how we feel. Easy to fall into unhealth habits. Plan exercise and eating.

6. Stick to the Facts

Find credible sources you can trust and fact check other info. Reduce time on media. Consider the impact of sending inaccurate information to others.

7. Difficult Feelings?

Try and focus on things you can control and engage in recommended anxiety management strategies (locate recourses online)

10. Look after your sleep

Quality sleep has a big impact on mental and physical health. Get enough and maintain regular patterns (reduce screen time before bed, decrease caffeine)

9. Focus on the present

Rather than worrying about the future can help with difficult emotions and improve well-being

8. Do things you enjoy

Focusing on a interest or something that relaxes you can help with anxious feelings. Online courses & social interactions.

Summary

Increased energy intake is an understandable response to the environmental and biological realities of living with obesity, particularly during stressful times

The current situation is unprecedented and it poses a dramatic challenge to people living with obesity

Dr Patrick Ritz is Professor of Clinical Nutrition, and head of the nutrition units in Toulouse, France, at the Centre Intégré de l' Obésité.

Dr Ritz is devoted to work in obesity, eating disorders and malnutrition. As the pilot centre of one of 5 national reference centres in obesity, the DNA of his work is helping people living with Obesity in setting up their own projects. The Centre also has units in paediatrics and surgery and can accommodate people for three weeks while they develop their own projects.

Patrick and his team have started a Patients' University initiative, training patients and HCPs together to support teamwork in developing cross-competencies.



Q&A

Moderator
Sheree Bryant

Panelists
*Prof. Jason Halford &
Dr. Patrick Ritz*



FINAL REMARKS

&

THANK YOU!