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ITS COMPLICATED

Its complicated and not just based on Energy balance.



Environment and/or society								
Eating culture		Те	Television		Transportation		Smoking	
Policies	Computer games			Social media			Food marketing	
Economic systems		ns	Food environment		Workplace		Recreational drug use	
Genetics	Noise pollution	Food intake	Metab energ	polism and by expenditure	10 10 10	ysical civity	Shift work Stress	Sleep
Epigenetics Internal clocks Signals fadipose			tissue, 🗸	Brain	and s		ocircuits of appetite atiety regulation	
IIII aiiiii acioii		pancreas and gut	s, liver	Central rewa system	ra	Microb		Addiction penia
Weight cycling (intentional weight loss and subsequent weight regain)		Adipose tissue expandability and distribution		Insulin resist	Pain nsulin resistance Psy		chiatric diseases	

Its partly genetic, there are over 50 genes taht have been linked to obesity

Biology

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ITS HORMONAL

Its hormonal....

MENOPAUSE and PERIMENOPAUSE is associated with a decrease in baseline activity level (i.e. burn factory) and a redistribution of fat to the abdominal skin (i.e. muffin top area) and more importantly, around the internal organs.

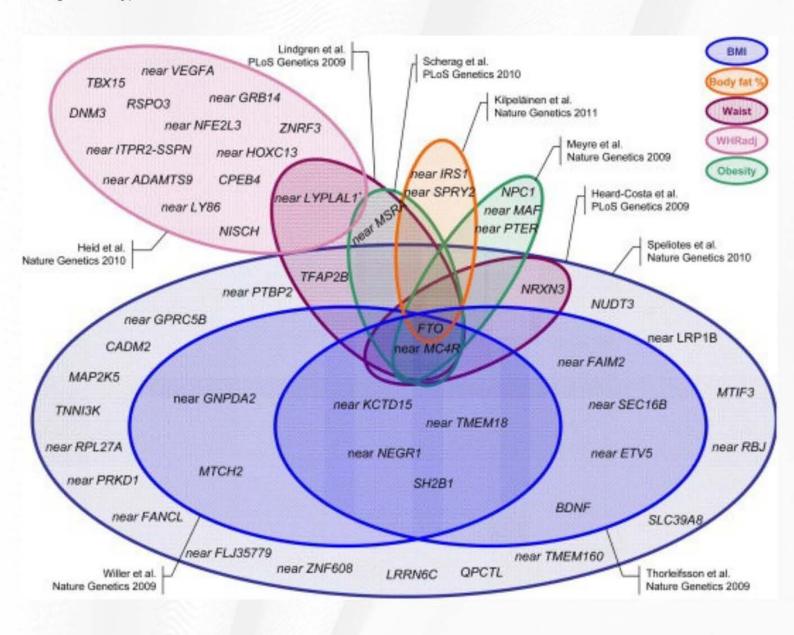
Its related to STRESS and SLEEP levels

MEDICATIONS can contribute

Medical conditions can contribute..... especially INSULIN RESISTANCE

What is Insulin resistance and why is insulin so important??

Insulin resistance is the process where the body no longer responds to insulin in the way it should. It often precedes a diagnosis of type 2 diabetes. *Diabetes Australia*



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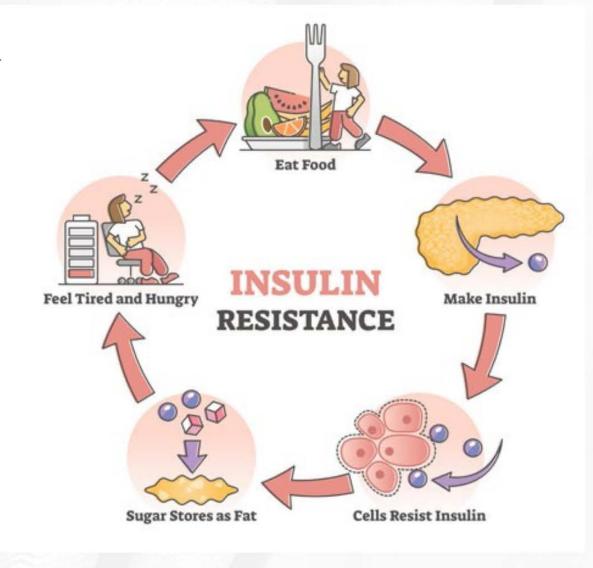


INSULIN

Insulin is a hormone produced by the pancreas in response to a rise in blood glucose (sugar) level. It acts on the liver, muscle and adipose (fat) tissue to increase glucose uptake into these organs, conversion of excess sugar into fat, and allows for fat storage.

So high insulin levels and insulin resistance - Increased FAT production and storage.

How do we address insulin resistance? by reducing the triggers for a rise (diet), weight loss or diabetes medications (sometimes)



Most importantly... hunger is controlled by signals to your BRAIN

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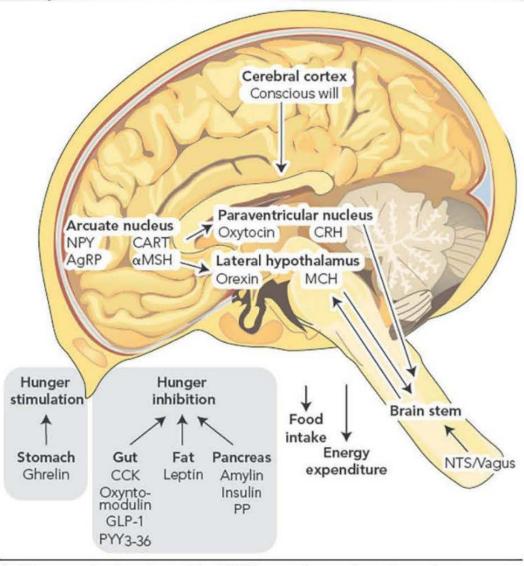


WEIGHT LOSS MEDICATION

And these signals are often the target for WEIGHT LOSS MEDICATIONS

However, behavioural response to food/eating is also very important to address

Weight control is complicated and intricately controlled by many factors. Come in for a consultation today and lets work towards a weight loss goal.



AgRP = agouti-related peptide. CART = cocaine and amphetamineregulated transcript. CCK = cholecystokinin. CRH = corticotropin-releasing hormone. GLP-1 = glucagon-like peptide. MCH = melanin-concentrating hormone. αMSH = alpha melanocyte-stimulating hormone. NPY = neuropeptide Y. NTS = nucleus of the tractus solitarius. PP = pancreatic polypeptide. PYY = peptide YY.