

# Applying a **RESTING METABOLIC RATE** measurement to your Bariatric Practice

**SAFE TRANSITION TO MAINTENANCE** REE (RMR) drops anywhere from 20-40% after a significant weight loss. Predictive formulas do not accurately account for this drop.<sup>1</sup> Measuring RMR will ensure a safe transition to an individualized maintenance goal.

**MANAGE EXPECTATIONS** Unmet expectations lead to high drop out. A baseline RMR measurement allows you to predict initial weight loss. Realistic expectations lead to decreased attrition.<sup>2</sup> Consider the results of 3 patients with identical pre-program BMI's:<sup>3</sup>

	Patient A	Patient B	Patient C
Estimated REE	1,900 cal/day	1,900 cal/day	1,900 cal/day
Measured REE	1,900 cal/day	3,000 cal/day	1,100 cal/day
Caloric Prescription	700 cal/day	700 cal/day	700 cal/day
Daily Caloric Deficit	1,200 cal/day	2,300 cal/day	400 cal/day
<b>Weight Loss in 6 months</b>	<b>62 lbs</b>	<b>118 lbs</b>	<b>21 lbs</b>

**PLATEAU BUSTER** Generally, a plateau is caused by one of two reasons:

#1: The patient's metabolic rate has dropped due to the changes in body composition. In this instance you must get back to a negative energy balance through decreasing calories or increasing exercise. An RMR test will show just how much of an adjustment needs to be made.

#2: Complacency has crept in and patient compliance is the issue. Addressing compliance is tough and can cause some animosity between the patient and caregiver: no one wants to be called a cheater. By using RMR results to show the patient that their body is still burning enough calories to lose weight, the data of their own body confronts them regarding non-compliance. The machine is the bearer of bad news. The practitioner is able to maintain a positive position to talk about portion sizes, hidden calories, mindless eating, etc, to get the patient back on track.

**ELIMINATE EXCUSES** Although most obese patients think a slow metabolism is to blame for their weight problems, this is true for a small minority<sup>4</sup>. That excuse is removed when you show patients the results of their own RMR test that indicates that their body is indeed burning calories. This allows you to focus them on the things they can control: eating, exercise, and lifestyle changes.

1. Jequire E Energy Metabolism in Human Obesity. Soz Praventivmed. 1989;34(2):58-62

2. Moroshika I et al. Obesity Reviews 2011;12:912-934.

3. Feurer ID et al. Resting energy expenditure in morbid obesity. Ann Surg. 1983; 197(1):17-21.

4. Thielecke F et al. Determination of total energy expenditure, resting metabolic rate and physical activity in lean and overweight people. Z Ernahrungswiss. 1997 Dec;36(4):310-2.



## TESTIMONIALS

### **Dr. Kathleen T. Baskettt**

*St Vincent Healthcare, Billings Montana*

*I have been using the ReeVue for about 5 years and have found it to be an invaluable piece of diagnostic equipment for my bariatric practice. It is user friendly and provides accurate results within 10-20 minutes. Patients appreciate being able to have this scientific and objective measurement of their metabolism.*

*With all of my medical weight loss patients, I perform the test at their initial evaluation. I am then able to guide patients as to where they need to be calorically to bring about weight loss. If/when patients plateau, I can repeat the ReeVue to assess their calorie needs. Likewise, the ReeVue can be used to determine calorie needs for weight maintenance.*

*In addition it is useful for those bariatric surgical patients that are not losing weight post-surgically or have regained weight post-surgery. I am able to demonstrate to them where they need to be to bring about a healthy weight loss.*

*Our clinic also offers a pediatric/adolescent weight management program. I measure each young person's RMR with the ReeVue to determine his/her calorie needs that will result in a gentle and healthy weight loss. I then give them play money equivalent to their calorie budget. It makes sense to them as they now know how many calories they can "spend" each day!*



### **Dr. Brent Larsen**

*Physician For Living, Salt Lake City, Utah*

*In our medical weight loss clinic, we use the ReeVue Indirect Calorimeter. We use the RMR to set a diet based on how many calories patients burn at rest. The test takes about 10 minutes, the clients feel like they are getting a really good assessment, and they are all really interested in what their metabolic rate is. Testing someone's metabolic rate is key to finding those few people who lie outside the norm so you know where to set their caloric limits.*



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