The Turning Point

In 2007 I returned to Indiana and decided to go back to school to finish my bachelor's degree. I attended Purdue University, and I connected with a professor there who was researching self-efficacy. Self-efficacy is basically a person's ability to believe that certain goals are attainable. My professor's areas of specialty were weight gain and drug addiction. I was curious about the weight-loss patients involved in the study; I wanted to know more about what inspired them to lose weight. This opportunity was the motivation I needed to start on my own road to self-improvement.

My study involved finding a bariatric clinic where I could meet with patients considering weight-loss surgery. Bariatric surgery makes changes to a person's digestive system in order to decrease food intake or decrease the absorption of food into a person's body. In some cases, portions of a patient's stomach are removed, making that area smaller. The most common type of bariatric surgery is the gastric bypass. Most people turn to this as a last resort to combat obesity. I attended many support-group meetings and procedural meetings where people were taught about the surgery and instructed in how to change their lives to align with the process. I developed a survey and conducted a study to determine what the patients' motivations (intrinsic or extrinsic) were to keep the weight off after the procedure. During this process, I met a lot of people and heard many different stories.

Some of the patients were at a place in life where they needed to get the surgery. These folks didn't have the time or strength to do what it would take to lose the excess weight. They understood their predicament, and they had an intrinsic motivation to do what was necessary to save their lives. They went on to live successfully after the procedure. But there were others I met who only wanted an easy way out. These patients were very focused on dropping pounds, but they never wanted to eat right or work out. Their interest in the surgery was purely cosmetic. Although the surgery was designed to help restrict their eating, it could not be responsible for changing negative thought patterns or for stopping self-destructive behavior.

After initially following the doctor's instructions during their recovery period, those who hadn't committed to a lifestyle change returned to eating

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extraordinarily large meals. They would eat past the point they were supposed to, stretching their stomachs to a dangerous level. Not only did the fat come back, they did serious damage to their internal organs. Some of these folks had parts of their original stomachs removed during surgery. Overextending their stomachs after the surgery put them in medical risk. Eventually, they ended up in the hospital again, feeling that they had wasted their money. Unfortunately, some of these patients died before they had a chance to try again.

I met a woman who was four hundred pounds. She looked at me (weighing a little over two hundred pounds at the time) and said: I wish I were your size again. I wish that when I was your size I had made some changes. She told me that she had become too comfortable with her heaviness. Every day she would go home, take out a box of brownie mix, bake the treats, and eat the whole pan of brownies. She felt like she couldn't stop. Meeting this woman made me seriously think about my own eating habits.

Something else caught my attention. Several of the patients struggled with "dumping." Sometimes after part of your stomach is taken out in a bariatric procedure, you can't digest sugar anymore. If you're a sugar addict in this situation and you indulge yourself, you can get sick within minutes. I saw patients running to the toilet, overcome with diarrhea, because they literally couldn't eat sweets without getting sick. Well, I loved my sweets, and I didn't want to imagine a life in which I would get sick from a piece of cake! I began to consider the track I was on in life and thought to myself: If this is what's in store for me…I need to make some changes.

For the first time, I started seeing that I was headed off a cliff. I wasn't confronted with these issues or learning these lessons anywhere else. There were definitely heavy people in my personal life, but most of them were not morbidly obese like the patients I observed. It blew my mind that some of the patients used to be thinner than I had been when their weight gain started! Moreover, the core problems that led to their weight gain were similar to my issues. Everyone was dealing with some type of unresolved pain. Some were struggling with broken marriages, whereas others were dealing with the loss of a child. Several were victims of abuse. All of them found comfort in different forms of food. It was the only way they could induce a pleasurable feeling. I identified with them. Eating

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gave us control. We couldn't control the people and many of the situations in life. But at least we could control what went into our mouths and the pleasurable feelings that resulted. The more I built relationships with the people at the clinic, the more the wheels began to turn in my head. I started thinking: Can this happen to me?

I wish someone had taken the time to teach me how to be healthy at a younger age. I had no concept of the damage I was inflicting on my own body. At one point, I was a slender teenager and ran track. Sidelined by pregnancy and a host of life issues, it took me twenty years to become active again. If I could go back in time, I would educate my younger self about fitness. I would have learned more about how my body functions. I would have told myself: Everything you put in your mouth has to be used up or stored. Your body will use food nutrients in a healthy way to give you more energy. But if you just sit around all day, your body will accumulate fat. But since I can't travel to the past, I am sharing this information with you today, hoping to inspire you to change for the better.

Periodically, throughout the rest of this book, I will provide hypothetical examples to illustrate some of the principles I am sharing with you. Hopefully these stories will make your own fitness journey a little less complicated.

Hypothetical Case Example A: "The Worry Wart"

Wanda is an insurance salesperson who constantly feels like she is under pressure. Ever since she was a teenager, she has been known as "the caretaker" because she practically raised her younger siblings after her parents died. She is now the married mother of two teenage boys, who sometimes get into trouble with their friends in the neighborhood. Financial strain is another burden this woman carries. The size of her paycheck depends heavily on her sales performance, and her husband has recently become unemployed. Amid the frequent arguments at home, she doesn't sleep well, and she is starting to gain a little weight. It seems everyone has an opinion as to how she should run her life, and she receives more criticism than helpful suggestions from the people around her. At her latest physical, her doctor stated that she is overweight, and her blood pressure is a bit high.

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Wanda constantly feels stressed. Her tension, worrying, and high blood pressure are huge signals that many of her weight issues could very likely be related to elevated cortisol levels, which can raise blood pressure. Wanda needs to learn some easy ways to reduce stress.

- 1. Relax—One quick suggestion is to take fifteen minutes to listen to soft music before entering the house. She could turn the car off, close her eyes, and just listen for a bit. This can be done repeatedly in order to practice de-escalating stress levels. This is a very effective method of helping a person to mentally regroup and to better deal with stressful situations.
- 2. Exercise—Cardio activity can actually help reduce stress, so let's look at what kinds of daily exercises have a cardio base. Some cardio activities include jogging, playing racquetball, cardio rowing, riding a bike, or walking on a treadmill. Cardio exercise has been proven to have a positive impact on our sense of well-being. Not only does it increase blood flow to the brain, it also releases dopamine and serotonin in the brain. These brain chemicals help us to stay calm, to maintain focus, and to fight depression. Because exercise is so important to balancing our mood, Wanda should make it a priority. Even if she has to get up twenty minutes earlier and take a walk around the neighborhood, it will be worth the investment. If Wanda exercises in the morning, there is a good chance that she'll be more committed and more successful in scheduling cardio exercise into her life.
- 3. Diet—I need to know a little bit more about Wanda's eating habits. What I've seen over the years is that people who are highly stressed tend to gravitate toward foods that are salty or high in sugar. Sometimes salty foods are associated with crunchiness, which may provide a type of soothing for some people. Wanda may want to include some foods in her diet that are known to help lower stress levels, like blueberries, almonds, bananas, dark chocolate, and chamomile tea.

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