AAHD

American Association on Health and Disability
110 N. Washington Street • Suite 328-J Rockville, MD 20850

PUBLICATIONS, ORGANIZATIONS, AND PROGRAMS PERTAINING TO OBESITY AND PEOPLE WITH DISABILITIES

AMPUTEES

Title **"The Implications of Amputees Being Overweight" by Jason T. Kahle, CPO, LPO, and M. Jason Highsmith, DPT, CP, FAAOP, Volume 18, Issue 2, March/April 2008**

Source inMotion online magazine of the Amputee Coalition of America

Format Online article

Description This article stresses the importance of prosthetists addressing the issue of the need to lose weight in some of their patients. Although some prosthetists feel they should not mention the topic unless the patient brings it up first, the authors state that they think a prosthetist would be remiss if he or she did not address this issue with patients when needed. Although the patient's general physician may have already discussed the need to lose weight, weight gain has specific effects that are unique to amputees, and understanding these implications is crucial to making the most of one's ability to walk as efficiently as possible. The article discusses the rise in obesity in both the general and amputee population. It outlines the effects of obesity on the amputee's body, including orthopedic problems and cardiovascular issues. The problems caused by weight gain are discussed in practical terms; since all prosthetic feet and knees are manufactured and tested for breaking tolerance based on activity level and weight, excessive weight places limitations on the selection of feet and knees available, and prosthetics for overweight amputees are usually very expensive because many of them are custom-made. Excess weight can also limit the choice in socket design and suspension. Reducing caloric intake and increasing one's activity level are crucial components in weight loss.

Contact URL http://www.amputee-coalition.org/inmotion/mar_apr_08/amputees_overweight.html

Contact Name
Contact Title
Contact Dept.

Contact Agency Amputee Coalition of America
900 East Hill Avenue, Suite 205
Knoxville, TN 37915

Contact e-Mail

Contact Dept. Phone In Knoxville (865) 524-8772
Toll-free**:** 1-888/AMP-KNOW (1-888/267-5669)

DISABILITIES, ADULTS WITH

Title **"Cutting the Fat" webpage**

Source Craig Hospital

Format Webpage

Description The focus of this webpage is on diet and facts about fat that can be applied to one's grocery shopping, meal preparation, and eating. Included are things that can be done to lower fat intake and increase the proportion of good fats. It is important to read the labels on food packages and use the information to help limit fat calories. Other tips mentioned are to replace the bad fats with good ones and to increase the amount of fiber eaten.

Contact URL www.craighospital.org/sci/mets/fat.asp

Contact Name
Contact Title
Contact Dept.

Contact Agency Craig Hospital
3425 South Clarkson Street
Englewood, CO 80113

Contact e-Mail

Contact Dept. Phone (303) 789-8000

Title **"Documenting Disparities in Obesity and Disability (Part 1)," Webcast 21 by Dr. James Rimmer and Dr. Margaret Campbell, December 3, 2009**

Source National Center for the Dissemination of Disability Research (NCDDR) at SEDL

Format Webcast

Description The NCDDR held a webcast for National Institute on Disability and Rehabilitation Research grantees and other individuals interested in research on

disparities in obesity rates and consequences experienced by people with disabilities. This webcast is the first of a two-part series on disparities research: part 1 focuses on the disparities in obesity experienced by people with disabilities, potential consequences of these disparities, and efforts to include disability in federal and community health-promotion programs, and part 2 focuses on developing research collaborations and partnerships.

Contact URL http://www.ncddr.org/webcasts/webcast21.html

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for the Dissemination of Disability Research
SEDL
4700 Mueller Boulevard
Austin, TX 78723

Contact e-Mail

Contact Dept. Phone (512) 476-6861
Toll-free (800) 266-1832

Title "Documenting Disparities in Obesity and Disability" by James H. Rimmer, PhD; Edward Wang, PhD; Kiyoshi Yamaki, PhD; and Brienne Davis, MPH, FOCUS: TECHNICAL BRIEF NO. 242010

Source National Center for the Dissemination of Disability Research (NCDDR)

Format Technical brief

Description This issue of FOCUS was developed to provide background information for the two-part webcast series, "Documenting Disparities in Obesity and Disability." This technical brief and the first webcast present research highlighting the disparities in obesity experienced by people with disabilities and the potential consequences of those disparities. The NCDDR Community of Practice on Research Quality sponsored these events to highlight disparities research in disability. The research presented in this issue of FOCUS was carried out through the NIDRR-funded Disability Rehabilitation Research Project (DRRP) titled "Reducing Obesity and Obesity-Related Secondary Conditions in Adolescents with Disabilities" at the Center on Health Promotion for Persons with Disabilities, University of Illinois at Chicago. Project partners include Shriners Hospitals for Children and six national disability organizations (Easter Seals, United Cerebral Palsy, Spina Bifida Association, the Arc, Partners for Youth with Disabilities, and Blaze Sports America).

Contact URL http://www.ncddr.org/kt/products/focus/focus24/Focus24.pdf

Contact Name
Contact Title

Contact Dept.

Contact Agency National Center for the Dissemination of Disability Research
SEDL
4700 Mueller Boulevard
Austin, TX 78723

Contact e-Mail

Contact Dept. Phone (512) 476-6861
Toll-free (800) 266-1832

Title **"The Fairy Tale of Spot Reduction: Can You Turn an Apple into A Prince?" by Amy Rauworth**

Source National Center for Physical Activity and Disability

Format Fact Sheet

Description This fact sheet states that spot reduction is a myth; working a specific muscle group will strengthen that muscle but will not reduce the amount of fat in that specific targeted area of the body. To lose fat, one must burn more calories than one consumes. A successful exercise program includes cardiovascular exercise as well as resistance training. A discussion of the association of various health problems with certain body shapes (apple versus pear shape) is included. The fact sheet stresses the importance of assessing one's risk factors related to developing chronic disease to establish a health promotion plan.

Contact URL http://www.ncpad.org/fitt/fact_sheet.php?sheet=800

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for Physical Activity and Disability
1640 West Roosevelt Road
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone (800) 900-8086

Title "**Fit for Life; Disability and Health"**

Source Disability and Health, New York State Department of Health

Format Brochure

Description This brochure urges people with disabilities to integrate physical activity into their lives. It gives ideas for physical activities such as housework, gardening, playing catch with one's kids, and swimming, and indicates which activities have adaptive equipment available. Being engaged in a sport is not the only exercise available; the important thing is to keep active. Guidelines for starting and maintaining physical activity are provided. The reader is encouraged to tailor activities to fit his or her needs and abilities. The benefits of physical fitness are listed, as well as resources on sports programs.

Contact URL http://www.health.state.ny.us/nysdoh/prevent/fitlife.pdf

Contact Name
Contact Title
Contact Dept.

Contact Agency New York State Department of Health
Corning Tower
Empire State Plaza
Albany, NY 12237

Contact e-Mail

Contact Dept. Phone (518) 474-2011

Title **National Center for Physical Activity and Disability's (NCPAD) 14 Week Program**

Source National Center for Physical Activity and Disability

Format Weight loss program

Description The goal of NCPAD's 14 Week Program, which starts in the Spring, is to provide the participant with tools for increased activity at home. Tips how to modify the intensity of the exercise to accommodate varying abilities of participants is included. The program consists of three stages of four to five weeks, each stage providing a specific group of exercises. The Resources section of the program provides logs including a Goal Setting Log, a physical activity readiness questionnaire (PAR-Q), an Assessment Log, an Activity Log, and a Food Log. NCPAD staff are available to provide support via e-mail and phone in case participants have questions about the program and goals.

Contact URL http://www.ncpad.org/14weeks2010/index.php

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for Physical Activity and Disability
1640 West Roosevelt Road
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone (800) 900-8086

Title **"On Target: Disability and Health in New York State"**

Source New York State Department of Health Disability and Health Program

Format Newsletter

Description This newsletter stresses that while proper nutrition and weight management are key factors in maintaining good health, eating healthy and controlling weight is not always easy to do, particularly for people with disabilities. People with disabilities may find it more difficult to control their weight because: they may not have independent choice in selecting the foods they eat; physical limitations may reduce their ability to exercise regularly; disability-related limitations may cause some people to lack the time, energy or ability to prepare healthy meals; some people with disabilities may need to take medications that can contribute to weight gain; and good nutrition may be a major challenge for persons who have difficulty chewing and swallowing. The newsletter provides a listing of health and wellness resources.

Contact URL http://www.health.state.ny.us/nysdoh/prevent/target10.htm

Contact Name
Contact Title
Contact Dept.

Contact Agency New York State Department of Health
Corning Tower
Empire State Plaza
Albany, NY 12237

Contact e-Mail

Contact Dept. Phone (518) 474-2011

Title **"Personalized Exercise Program (PEPRx): A Personalized Physical Activity and Nutrition Program for Overweight/Obese Adults with Mobility Disabilities," James H. Rimmer, Project Director**

Source The University of Illinois at Chicago, in collaboration with the Rehabilitation Institute of Chicago, with funding by the Centers for Disease Control and Prevention

Format 3-year grant

Description A previous grant conducted by the researchers showed that an intensive phone-based health behavior coaching intervention encouraged extremely obese participants with mobility disabilities to make significant increments in physical activity, which resulted in a substantial reduction in body weight. The purpose of the present grant is to reduce secondary conditions in people with mobility disabilities through a similar phone-based intervention that focuses on improvements in nutrition and physical activity. The work from the last grant is extended in three ways: 1) it replicates the intervention to a broader target population of adults with mobility disabilities, 2) it examines the effects of adding coaching and content on nutrition as an additional intervention component to try to further enhance positive health outcomes, and 3) the intervention protocol is being standardized and delivered through a train-the-trainer model to determine if the findings can be generalized to other populations.

Contact URL http://uic-chp.org/CHP_A4_PEP_01.html

Contact Name
Contact Title
Contact Dept.

Contact Agency University of Illinois at Chicago
Center on Health Promotion for Persons with Disabilities
1640 West Roosevelt Road, 7th Floor
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone Toll-free 1-800-900-8086

Title "**A Report of the Surgeon General: Physical Activity and Health--Persons with Disabilities"**

Source The President's Council on Physical Fitness and Sports

Format Online fact sheet

Description The primary message of this fact sheet is that significant health benefits can be achieved with a moderate amount of physical activity, which can be obtained in longer sessions of moderately strenuous activities or in shorter sessions of more intense activities. Physical activity should be build upon gradually, especially in the case of sedentary individuals; people with disabilities should also check with their doctor before starting a new exercise program. Some of the physical health benefits of exercise are listed, as well as how communities can provide opportunities for people with disabilities to increase their physical activity.

Contact URL http://www.fitness.gov/disab.htm

Contact Name
Contact Title
Contact Dept.

Contact Agency President's Council on Physical Fitness and Sports
Department W
Tower Building, Suite 560
1101 Wootton Parkway
Rockville, MD 20852

Contact e-Mail

Contact Dept. Phone (240) 276-9567

Title **"Understanding Weight Loss" by Christine Pellegrini**

Source National Center for Physical Activity and Disability

Format Fact sheet

Description This fact sheet explains overall energy balance, which means that one's weight is determined by the amount of energy taken in (i.e., calories from foods and drinks) and the energy burned (i.e., calories burned from movement). If trying to lose weight, it is necessary to burn more calories than calories consumed. Examples of weight loss and weight maintenance are provided, along with the mathematic calculations. It is very important to track one's caloric intake in weight loss.

Contact URL http://www.ncpad.org/yourwrites/fact_sheet.php?sheet=798

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for Physical Activity and Disability
1640 West Roosevelt Road
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone (800) 900-8086

Title **YMCA Health and Fitness Programs and Services**

Source YMCA

Format Health and fitness programs and services

Description Several local YMCAs across the United States offer a variety of health and fitness programs and services geared toward people with physical and/or mental disabilities, including adaptive swim, land-based aerobics classes, and personal trainers. Interested individuals can search the YMCA website for local Y's and contact them directly to determine the types of programs available at that particular location.

Contact URL http://www.ymca.net/

Contact Name
Contact Title
Contact Dept.

Contact Agency YMCA of the USA
101 North Wacker Drive
Chicago, IL 60606

Contact e-Mail

Contact Dept. Phone (800) 872-9622

DISABILITIES, CHILDREN WITH

Title "**Disability/Condition: Children with Disabilities and Obesity"**

Source National Center for Physical Activity and Disability

Format On-line fact sheet

Description This fact sheet states that children with disabilities are at an even greater risk for obesity than children in the general population because of their sedentary lifestyle. It describes the many medical problems that may arise later in life due to body weight in children. Childhood obesity also may affect the child's psychological well-being and cause depression due to teasing or being excluded from social groups at school. As a result, the child's self-esteem can be lowered, which will carry on later in life and may prevent him or her from succeeding both personally and professionally. The benefits of activity are listed, as well as dietary guidelines. Many parents believe that because of their disability, their children cannot be physically active, but this is not true. The fact sheet provides ideas on ways to include physical activity in the lives of children with disabilities. The importance of parents encouraging children to exercise and becoming positive role models by regularly exercising are emphasized.

Contact URL http://www.ncpad.org/disability/fact_sheet.php?sheet=488

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for Physical Activity and Disability
1640 West Roosevelt Road
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone (800) 900-8086

Title "A Paradigm Shift in Youth Sports and Recreation Is Needed to Include More Youths with Disabilities and Health Conditions Including Obesity into the Mainstream of Sports and Recreation in America" by James H. Rimmer

Source National Center for Physical Activity and Disability

Format Online news article

Description This article points to the lack of activity due to the introduction of computers and cable TV into millions of U.S. homes as a contributing factor to the increase in obesity among children and adolescents; Mrs. Obama's concern over childhood obesity is certainly well-founded, and this is a problem without an immediate end. To address this epidemic, the Obamas have developed a Taskforce on Childhood Obesity, which is responsible for four goals: (1) ensure access to affordable and healthy food; (2) increase physical activity in communities and schools; (3) make available healthier food in schools; and (4) empower parents with tools and information to make healthy choices for themselves and their families. The author hopes that the Task Force will consider ways to make physical activity, sports, and recreation more inclusive for youth who are obese and youth with disabilities who are and are not obese. He states that there have been many accessibility issues in terms of playgrounds and sports fields and suggests that the Task Force focus on things that are missing from these sports and recreation venues in America.

Contact URL http://www.ncpad.org/director/fact_sheet.php?sheet=799

Contact Name
Contact Title
Contact Dept.

Contact Agency National Center for Physical Activity and Disability
1640 West Roosevelt Road
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone Toll-free 1-800-900-8086

Title "Reducing Obesity and Obesity-Related Secondary Conditions in Adolescents with Disabilities," James H. Rimmer, Principal Investigator

Source The University of Illinois at Chicago, funded by the National Institute on Disability and Rehabilitation Research (NIDRR) at the U.S. Department of Education, working in partnership with Shriners Hospitals for Children and six national disability organizations (Easter Seals, United Cerebral Palsy, Spina Bifida Association, the Arc, Partners for Youth with Disabilities, and Blaze Sports America)

Format Disability Rehabilitation Research Project (DRRP) on Obesity and Secondary Conditions in Youth with Disabilities, a 3-year center grant

Description The DRRP is based on the premise that there are substantial health disparities between youth with and without disabilities, as noted by the prevalence of higher rates of obesity and chronic and secondary health conditions in youth with disabilities. In the past, obese and overweight youth with disabilities have reported a higher prevalence of secondary conditions compared to youth of healthy weight regardless of their ambulatory condition. The DRRP consists of three projects: 1) the creation and distribution of a national survey for adolescents with disabilities and their parents to determine possible causes and consequences of obesity, and to explore how these factors might differ from the general population;) the evaluation of the validity and usefulness of another approach for establishing more accurate cutoff points for overweight and obesity in adolescents with disabilities who use wheelchairs; and 3) the development of a pilot intervention using an innovative personalized exercise and nutrition program to manage obesity in youth with physical and developmental disabilities.

Contact URL http://uic-chp.org/CHP_A6_DRRP_01.html

Contact Name
Contact Title
Contact Dept.

Contact Agency University of Illinois at Chicago
Center on Health Promotion for Persons with Disabilities
1640 West Roosevelt Road, 7th Floor
Chicago, IL 60608

Contact e-Mail

Contact Dept. Phone Toll-free 1-800-900-8086

DISABILITIES, WOMEN WITH

Title **"Health Behaviors--Weight Management" webpage**

Source Center for Research on Women with Disabilities (CROWD)

Format Webpage

Description This webpage states that although most women with physical disabilities report that they follow a healthy diet, when asked specifically about their dietary behaviors, there is usually a discrepancy between perceived "healthy diets" and reported fruit and vegetable intake. The prevalence of obesity as a secondary condition in women with disabilities is discussed, and a link to a Body Mass Index Table is included to help determine whether or not one is overweight. Barriers to weight management are listed, including barriers to increasing physical activity and to healthy diet. The website includes steps in managing weight, such as learning about calories, carbohydrates, body mass index, low-fat diets, low-carb diets, and weight loss programs. Resources on information about diets and weight management are included.

Contact URL http://www.bcm.edu/crowd/?pmid=1430#do

Contact Name
Contact Title
Contact Dept.

Contact Agency Baylor College of Medicine
Center for Research on Women with Disabilities
1475 West Gray, Suite 165
Houston, TX 77019

Contact e-Mail

Contact Dept. Phone (713) 523-0909
Toll-free 1-800-44-CROWD (800-442-7693)

MENTAL HEALTH

Title **"Mind/Body Health: Obesity" by Sara Weiss, Ph.D., and Nancy Molitor, Ph.D.**

Source The American Psychological Association

Format Fact sheet

Description This fact sheet describes obesity as one of the country's most serious health problems that increases the risk of many health conditions. It discusses possible causes of obesity, including certain reactions to sadness, anxiety, or stress. There is a close connection between obesity and depression; depression can cause and result from stress, which may affect activity and eating habits; as a result, there is a strong mind/body connection. Suggestions made on how to deal with obesity include: tracking one's eating habits by recording everything eaten, including time of day, amount of food, and emotions accompanying the eating; reducing portions while eating the same foods; resolving issues dealing with stress and other negative emotions first before starting a weight-loss program; getting support from family and friends when trying to eat healthier; using the "buddy system" by asking a family member or friend or to be "on-call" for moral support; and avoiding obsessing about "bad days" when backsliding occurs on the

new healthy eating plan. It is suggested that a psychologist be contacted for help in developing a plan for dealing with feelings that lead to overeating.

Contact URL http://www.apa.org/helpcenter/obesity.aspx

Contact Name
Contact Title
Contact Dept.

Contact Agency The American Psychological Association
750 First Street NE
Washington, DC 20002

Contact e-Mail

Contact Dept. Phone (202) 336-5500
Toll-free 1-800-374-2721

MENTALLY ILL

Title In SHAPE Program

Source Monadnock Family Services

Format Health promotion program

Description In SHAPE, a health promotion program for people with mental illness, strives to improve physical health and quality of life, reduce the risk of preventable diseases, and lengthen the life expectancy of individuals with severe mental illnesses. In SHAPE participants work with trained health mentors to create a Self Health Action Plan for Empowerment (SHAPE) that includes physical activity, healthy eating goals, and attention to medical needs, including smoking cessation when needed. Mentors help participants implement their SHAPE plans by encouraging participation in a variety of activities already existing in the community and attending the activities with participants until they feel comfortable going alone. Every 12 weeks, participants attend a celebration, where verbal recognition and incentive items are provided for their efforts. In February 2009, two mental health centers, The Providence Center in Providence, RI and the Genesee County Community Mental Health Center in Flint, MI, worked with Monadnock Family Services in a year-long training process to become certified In SHAPE providers. Ongoing efforts continue in replicating this program in locations across the country.

Contact URL http://www.inshapeprograms.com/ and
http://www.rwjf.org/reports/grr/063029.htm#AftertheGrant

Contact Name Peter Sebert
Contact Title

Contact Dept.

Contact Agency Monadnock Family Services
17 93rd Street
Keene, NH 03431

Contact e-Mail psebert@mfs.org

Contact Dept. Phone (603) 283-1675

Title "Monitoring and Managing Weight Gain in the Mentally Ill," with presentations by Rohan Ganguli, MD, and Betty Vreeland MSN, APRN, NP-C, BC, 2007

Source This E-View online learning program is part of the E-View Series "Strategies to Integrate Physical Health Care Into Mental Health," chaired by John W. Newcomer, MD, from the Department of Psychiatry, Washington University School of Medicine in St. Louis, Missouri.

Format E-View online learning program

Description This online learning program geared toward practitioners serving people with mental illness discusses interventions with these patients, focusing primarily on lifestyle. It covers weight reduction and preventing weight gain and some tools that can be used.

Contact URL
http://www.medfair.com/content/cme/lectures/eview/mentalhealth/ganguli_transcript/index.htm

Contact Name
Contact Title
Contact Dept.

Contact Agency Physicians Postgraduate Press, Inc.
P.O. Box 752870
Memphis, TN 38175

Contact e-Mail

Contact Dept. Phone

SPINA BIFIDA

Title "Obesity"

Source Spina Bifida Association

Format Webpage

Description This webpage discusses how obesity develops, special concerns for people with spina bifida, how to make preventing obesity a family affair, strategies for success, and weight reduction.

Contact URL
http://www.spinabifidaassociation.org/site/c.liKWL7PLLrF/b.2700287/k.C25F/Obesity.htm

Contact Name
Contact Title
Contact Dept.

Contact Agency Spina Bifida Association
4590 MacArthur Boulevard, NW
Washington, DC 20007

Contact e-Mail

Contact Dept. Phone (202) 944-3285, Toll Free: 800-621-3141

SPINA BIFIDA, CHILDREN WITH

Title **"The Consequences of Obesity in Children with Spina Bifida," By Janet G. Marshall, CPO/LPO, January 2010**

Source OandPBusinessNews (orthotics and prosthetics)

Format Online news article

Description This article is geared toward families of children with spina bifida and the practitioners who work with these children. It states that at least 50% of children with spina bifida have a likelihood of being overweight beyond age 6, and from adolescence through adulthood more than 50% of those with this disability are obese. This is due to low physical activity caused by the disability. The article suggests several activities in which families can participate without much special equipment and that can be accessed in a wheelchair. Home activities such as interactive computerized fitness programs that promote coordination skills and exercise are also recommended. Suggestions are also made to the practitioner, who can provide a network of resources to help in achieving and sustaining a healthy lifestyle for children with spina bifida, such as posting listings of adaptive sports and activities in the community for children with physical disabilities. The adult Paralympics should be emphasized to children to raise their awareness of achievable goals through perseverance. Practitioners can also establish a mentoring network of adult athletes with and without disabilities who are interested in helping children with disabilities.

Contact URL http://www.oandpbiznews.com/201001/4.asp

Contact Name
Contact Title
Contact Dept.

Contact Agency

Contact e-Mail

Contact Dept. Phone

SPINAL CORD INJURY

Title **"Special Nutritional Needs for People with SCI/D," March 2006**

Source United Spinal Association

Format Webpage

Description According to this webpage, people with spinal cord injury or disorders (SCI/D) are more likely to be obese, which causes many health issues, including increased risk for diabetes and heart disease, which may be deadly for this population. The webpage describes the study by Dr. David Gater Jr., director of Spinal Cord Injury Medicine at the University of Michigan and a research physician at the Ann Arbor Veterans Affairs Medical Center, which examined the epidemic of obesity in people with SCI/D. It is important for people with SCI/D to heed advice such as avoiding sweets and fats, and if he or she has a skin wound such as a pressure ulcer, his or her protein needs will be greater.

Contact URL http://www.unitedspinal.org/2006/03/14/national-disability-organization-recognizes-special-nutritional-needs-for-people-with-scid/

Contact Name
Contact Title
Contact Dept.

Contact Agency United Spinal Association
75-20 Astoria Blvd
Jackson Heights, NY 11370

Contact e-Mail

Contact Dept. Phone (718) 803-3782

Title "**Weight Gain"**

Source Craig Hospital

Format Fact sheet

Description This fact sheet describes the risks involved when people with disabilities gain weight, such as increased risk of injury, more pressure and moisture on the skin due to excess weight, and problems finding attendants to help. It also discusses: the changes the body's metabolism undergoes following spinal cord injury; why ideal body weight should be different in people with spinal cord injury compared to people without disabilities; the importance of moving past denial and using the two standard components of responsible weight management, which are exercise and diet; and finding motivation. Diet tips are provided.

Contact URL http://www.craighospital.org/SCI/METS/weightGain.asp

Contact Name
Contact Title
Contact Dept.

Contact Agency Craig Hospital
3425 South Clarkson Street
Englewood, CO 80113

Contact e-Mail

Contact Dept. Phone (303) 789-8000

Title "Weight Management after Spinal Cord Injury" by Suparna Rajan, PhD, Catherine Warms, PhD, ARNP, and Barry Goldstein, MD, PhD, Spinal Cord Injury Update, Summer 2008: Volume 17, Number 3

Source University of Washington, Northwest Regional Spinal Cord Injury System Rehabilitation Medicine

Format Online article

Description This article states that being overweight is common in people with spinal cord injury (SCI) due to reduced activity, which is based on the extent of the injury. It describes the effects of excess fat, how body fat is estimated, and weight loss methods for SCI. A 12-week weight loss program is described, which used a combination of behavior modification techniques, diet, and activity in a group of 16 people with SCI and resulted in weight loss and improvements in BMI, waist and neck circumference, total fat mass, diet behavior, and measures of psychosocial and physical functioning ("Obesity intervention in persons with spinal cord injury," Chen et al., 2006). Research is needed to determine if other medical and surgical treatments for obesity used in people without SCI are safe and effective for weight loss in people with SCI. The article mentions a

research study being conducted by the author which asked people with SCI about weight management, including what people with SCI have done to lose or maintain weight, and what strategies have or have not worked (for more information, see http://sci.washington.edu/info/newsletters/articles/08_sum_weight_study.asp).

Contact URL http://sci.washington.edu/info/newsletters/articles/08_sum_weight.asp

Contact Name
Contact Title
Contact Dept.
Contact Agency University of Washington
Northwest Regional Spinal Cord Injury System
Rehabilitation Medicine, Box 356490
Seattle, WA 98195

Contact e-Mail

Contact Dept. Phone (206) 616-2183
Toll-free 1-800-366-5643

Title **"Weight Management following SCI--SCI InfoSheet #8"**

Source University of Alabama in Birmingham Spinal Cord Injury Model System

Format Webpage

Description This webpage states that after experiencing a spinal cord injury (SCI), people usually experience dramatic weight changes; the initial reaction of the body is weight loss, but over time, this loss turns into gain due to a slower metabolism caused by inactivity and a decrease in muscle mass. It also describes the benefits of a healthy weight management program for people with spinal cord injury (SCI). Healthy changes in food choices are discussed, as well as behavior changes in meal planning, shopping, cooking, and dining out. It is important to improve self-talk and replace negative thoughts with positive ones. Other tips include working on reducing stress and setting realistic goals. In addition to helping lose fat and gain muscle mass, participating in physical activities helps people feel better and have more energy. Ideas for ways to get physical activity are provided. One should visit the doctor at least once per year to manage any nutritional problems that may arise, as well as other problems.

Contact URL
http://www.spinalcord.uab.edu/show.asp?durki=21481&site=1021&return=21583

Contact Name
Contact Title
Contact Dept.

Contact Agency UAB Spinal Cord Injury Model System

619 19TH Street South - SRC 529
Birmingham, AL 35249-7330

Contact e-Mail

Contact Dept. Phone (205) 934-3283

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