BSS transcript EP 203 Kim T.txt

Dr Susan Mitchell (00:00.558)
When you stop a GLP-1, your appetite returns, but your metabolism doesn't unless you train for it. That's where resistance training comes in. It's about keeping your lean tissue so you can maintain the loss you've worked so hard for. Pair that with smart protein-first nutrition and you've got a formula that's evidence-based, realistic, and completely in your control.

Don't go anywhere, bariatric sports dietitian Kim Tirapelle joins me to cut through all the noise with real science on how to prevent weight regain and stay strong when you stop a GLP-1.

Dr Susan Mitchell (00:46.67)
I'm bariatric dietitian, Dr. Susan Mitchell. You're listening to the bariatric surgery success podcast. I'm so glad you're listening in today. It matters where you get your nutrition information. And I'm really excited. I'm excited because bariatric sports dietitian, Kim Tirapelle is back in the studio combining her passion for sports nutrition and bariatric nutrition. She works with active bariatric individuals.

and individuals on GLP-1s who have fitness goals, but you don't know exactly how to adjust your nutrition to meet your need. Well, Kim knows how. As a certified specialist in sports dietetics, Kim works one-on-one with her clients to optimize nutrition to meet exercise goals. You can also listen to Kim on her fabulous podcast, Active Bariatric Nutrition.

Find all of Kim's contact information in the show notes. Hey Kim, welcome back to the podcast.

Kim Tirapelle, MS, RD, CSSD (01:49.098)
Hey there, thank you so much for having me. I'm so glad to be here today.

Dr Susan Mitchell (01:52.747)
So much going on with GLP-1, so much, right?

Kim Tirapelle, MS, RD, CSSD (01:57.532)
Absolutely, there's so much talk and more and more folks are learning about it or want to know more about it and how to utilize these medications for sure.

Dr Susan Mitchell (02:04.142)
That's just why we're here. And we're asked this popular question a lot. Do I or will I take GLP-1s for the rest of my life? You know, sometimes insurance stops covering your prescription and maybe the side effects are ongoing and bothersome. Maybe you just get the goal weight that you want and you don't want to take them anymore. There are a lot of reasons that someone goes off the medication. So talk to us about

GLP-1s from your view of lifelong versus until you reach a goal weight.

Kim Tirapelle, MS, RD, CSSD (02:41.442)
I mean, I think it's such an important and common question that we receive in working with our clients. my honest thoughts on GLP-1 use is that they're going to be very individualized based on the unique needs of each person. Much like other chronic conditions, incretin-based therapies may be needed for lifelong management of obesity when appropriate. And for others, it may just be a short-term tool to help achieve metabolic improvements and long-term success being achieved with those sustainable lifestyle factors.

So I think it's gonna be really individualized. And I'll just add this too, besides just achieving a number on the scale or body composition changes, other ways to know whether it's an appropriate time to come off is how are other metabolic factors looking in my body like hemoglobin A1C or your blood pressure or your lipids or your visceral fat stores.

fatty liver disease markers. These are all other things that, you know, GLP-1 medications can help with. And so it's important to look at the full picture as to whether this is a long-term, you know, treatment for you that you need to continue with, or, you know, you've achieved these, you're in healthy ranges for all of these, and it's time to come off. So again, it'll be so individualized.

Dr Susan Mitchell (03:45.368)
Mm-hmm.

Dr Susan Mitchell (03:51.95)
And I love what you just said, because most of the time, all we hear about is number on the scale or, you know, side effects, or I'm wanting to take it for this reason, but the picture is so much bigger than that. As you just said, from blood lipids to A1C to blood pressure, these drugs can have many wonderful beneficial effects and that for your health, way beyond just the number on a scale.

And that's what I absolutely loved about them. And when talking to your healthcare provider, you may reach certain points, like you said, that they're going, hey, know, maybe we need to titrate down or go off of these. So let's say that I made this decision to stop, okay? My blood pressure's looking good, my lipids are down. Is there a best way or best practice to come off a GLP-1?

Kim Tirapelle, MS, RD, CSSD (04:45.142)
Yeah, so at this point, the large randomized controlled trials on these medications didn't actually look at how to taper off, meaning it wasn't part of the studies. So the studies looked at putting the people on the medications at a variety of doses, but they never looked at the down, the backside, right, which is coming off of them. So I can't say that there is this research-based way to do it. However, there is, I would say,

Dr Susan Mitchell (04:52.758)
I know. You're right.

Dr Susan Mitchell (05:03.692)
Yeah. Yeah.

Kim Tirapelle, MS, RD, CSSD (05:11.862)
best practices and of course based on clinical experience and working with your doctor, you can look at titrating down and generally speaking it's done over a slow period of time so your body can adjust. So maybe every four weeks, maybe for people that have been on it long-term like a couple years, they may even do titrating down every four to eight weeks. It's going to be very individualized paired with looking at protein and staying active and resistance training and all these other things we'll talk about.

Dr Susan Mitchell (05:39.682)
Yeah, I'd much rather see someone slowly go off and just say, okay, done, I'm off of it because I just think your body goes, whoa, you know, what have you just done to me here? I'm used to you doing this and now you're not doing this. What am I supposed to do? I think the body just responds so much better when you just give it a little bit of time to adjust, you do a lot better and you feel better, right?

Kim Tirapelle, MS, RD, CSSD (05:47.264)
Yes.

Kim Tirapelle, MS, RD, CSSD (06:05.75)
Yeah. And I'll just add too, remember that going up in dose is done the same way, which is a stepwise progression. You don't just jump up to the highest dose and you don't just drop down to the no dose, right? So again, stepwise going up and stepwise coming down is, it seems to be most in consensus with most practitioners at this point.

Dr Susan Mitchell (06:09.72)
Yeah!

Dr Susan Mitchell (06:13.982)
Absolutely. Yeah.

Dr Susan Mitchell (06:24.47)
Yeah, I would agree with that totally. So the question on everyone's mind, how do I prevent weight regain if I get off the meds, regardless how I go off, whatever my method is, how do I prevent that weight regain?

Kim Tirapelle, MS, RD, CSSD (06:41.652)
this is gonna be really multifaceted because just like in the treatment of the disease of obesity is multifactorial, it's going to be the same in terms of, okay, I've used this tool, maybe this tool isn't going to be something I use long-term, but what are the other tools to support me in weight maintenance? And that's going to be focusing on obviously your movement, resistance training is so important. Also the behavioral aspect, the mental health part.

Dr Susan Mitchell (06:44.302)
Yeah.

Dr Susan Mitchell (07:02.531)
Yeah.

Yes.

Kim Tirapelle, MS, RD, CSSD (07:07.21)
having healthy relationship with food and working with professionals, whether that's mental health experts, registered dietitians to help with nutrition. There's so many things that we wanna continue to focus on and use in this journey to help us maintain the weight that we've achieved.

Dr Susan Mitchell (07:15.48)
Yes.

Dr Susan Mitchell (07:25.058)
Totally agree, gives you the most successful outcome over time for sure to have all of those pieces of the puzzle together. So, let's because being dieticians as we are, we like to put the spotlight on nutrition. So what strategy or strategies should you keep top of mind when you're going off the medication?

Kim Tirapelle, MS, RD, CSSD (07:45.866)
Yeah, so absolutely first thing is to take a look at our intake. Are we focused on around our protein and our fiber? So, you know, before reducing, I would say look at your intake. Where

are some opportunities to optimize my overall protein intake? Because again, as we titrate down, you might notice hunger increase slightly. Protein will help increase satiety, so will fiber, right? It's gonna help us with better blood sugar response as well.

Dr Susan Mitchell (08:03.682)
Yeah.

Kim Tirapelle, MS, RD, CSSD (08:09.982)
Also keeping our fluids up, just like we've been telling folks to do while they're on the medication to help prevent constipation and keep things flowing. Making sure we're staying hydrated helps again with making us feel full, right?

Dr Susan Mitchell (08:21.228)
Right. And I like to make sure that we're getting enough fiber because fiber kind of gets pushed to the side, but fiber also can give satiety and it keeps and kind of helps you think, okay, I'm doing all right here. I'm feeling full. I'm not constipated. I'm not starting to have other problems that I don't need. So I like to look at both the protein and the fiber. In fact, do your protein goals change post GLP-1? Do you have like a certain schedule for protein intake or do you kind of stay the same?

Kim Tirapelle, MS, RD, CSSD (08:24.938)
Yes.

Kim Tirapelle, MS, RD, CSSD (08:39.285)
Yes.

Kim Tirapelle, MS, RD, CSSD (08:50.794)
Yeah, and I think this is an important point too, which is encouraging folks to stay on a consistent eating schedule. And I do tell folks that yeah, protein needs may slightly increase because perhaps, you know, as their overall intake slightly increases or maybe their goals change, they wanna start increasing movement or they wanna gain more muscle, protein is going to likely increase over time, okay? And so I would definitely keep that as a focus of...

making sure at least, and if you wanna just look at it meal by meal, I tell my folks, try to get within 20 to 40 grams. You can go above that if you can tolerate more. But every time we sit down, we want a great blast of protein also paired with the fiber as you just mentioned, and then we increasing our fluids in between our meals, absolutely.

Dr Susan Mitchell (09:28.91)
Yeah.

I love that. That's an easy way to remember it. A blast of protein. You know, that's a great way to think of it. Give me that blast of protein. Because GLP-1s lower appetite. So would you, let's speak a minute on that. Like, why? Why is that happening with GLPs? They lower appetite. Well, that probably then lowers protein intake, which then changes your lean muscle mass. So how is metabolism being affected if your appetite's low on a GLP-1?

Kim Tirapelle, MS, RD, CSSD (09:34.646)
Yep.

Kim Tirapelle, MS, RD, CSSD (10:01.876)
Yeah. Well, so first off, I'll just answer the first part, which is there's three major pathways that GLP-1 acts in terms of reducing appetite. So the first one is they activate the GLP-1 receptors in our hypothalamus, which decreases hunger signals and it leads to reduced cravings and

interest in food decreases, generally speaking. It also impacts our GI tract. So it slows gastric emptying. So we feel full sooner and longer. So you feel satisfied with smaller meals.

And then lastly, GLP-1s will reduce the dopamine-mediated reward from food in our brain. So simply, food just isn't naturally as appealing. And that's that food noise aspect that so many folks talk about and see the benefits of these medications because we're just not kind of seeking food, thinking about food all the time. It just kind of really quiets that. So that in turn then, of course, yields lower overall intake, which

Dr Susan Mitchell (10:41.944)
Yeah.

Dr Susan Mitchell (10:57.162)
Right.

Kim Tirapelle, MS, RD, CSSD (10:57.278)
When we are lowering protein intake, and we're gonna talk about this, but resistance training is gonna be key in terms of stimulating muscle. But when we do reduce overall protein intake and we're in a caloric deficit, our body can utilize muscle as an energy source because amino acids are needed for so many different functions in our body. So our body may break down muscle as an energy source to maintain these essential functions. Yeah, and then that in turn can lead to...

Dr Susan Mitchell (11:03.182)
Yeah.

Dr Susan Mitchell (11:19.278)
Yeah, absolutely.

Kim Tirapelle, MS, RD, CSSD (11:24.552)
again, less muscle mass, which then lastly yields to lowering of our resting metabolic rate, which is how many calories we burn at rest. And so when we look at it from the other side, which is, okay, if we stop these medications or if we go back, you know, we're training down, we might see, you know, hunger increase or intake start to increase, but our resting metabolic rate may not necessarily respond in the exact same manner unless we start doing more resistance training and we really focus. Yeah.

Dr Susan Mitchell (11:37.027)
Hmm?

Dr Susan Mitchell (11:49.078)
Yeah, which we're going to get more into in a minute because we're both big believers of that. And I think so often people go, well, I just don't know what to eat. So if you're thinking about that.

I've got some quick ideas for dinner for you tonight. So I'm a big fan of sheet pan dinners. don't know Kim, if you are not, but I make them probably every week. I know that sounds like boring, but I use salmon, shrimp, chicken, whatever. Like this past weekend, did one, I used chicken tenders and I just did chicken tenders, red and green peppers and onion. So anyway, they're easy. And I have a freebie that you can grab. So I'm going to put the freebie in the show notes if you want to get it right now.

Kim Tirapelle, MS, RD, CSSD (12:06.102)
Me too. Yes.

Dr Susan Mitchell (12:27.394)
you can go to breakingdownnutrition.com slash sheet pan dinners and we'll give you a couple of ideas that you can use right now when you're thinking, okay, I hear Kim, I need to work on this. Well, here's like a few recipes for you. Okay, think about this. You didn't just lose fat on your GLP. You lost some of the very tissue muscle mass that keeps fat off. So cardio alone doesn't cut it.

post GLP-1. Why not?

Kim Tirapelle, MS, RD, CSSD (13:00.234)
I think it's a great question and I'm so glad you asked it because it's important to know cardio. Yes. Does it burn calories? It does, but it doesn't rebuild muscle, which you may have lost during this weight loss. Right. And so

Dr Susan Mitchell (13:06.243)
Yes.

Dr Susan Mitchell (13:11.982)
Yeah, and I think, don't you think you can almost say you will lose? I mean, the data is pretty clear that people lose a pretty significant amount, most, unless, don't want, just we'll always leave a little room, but most everyone loses a lot of muscle mass.

Kim Tirapelle, MS, RD, CSSD (13:23.648)
Yeah, yeah. And they can, and I think it's important to note that's, you know, whether you're in a caloric deficit from a diet or the GLP-1s, absolutely, we can lose muscle at the same time as body fat if we are not honing in on the strategies that we're talking about today. And I feel like cardio is something that we, you know, have kind of been almost trained to think like, that's what I need to do in order to lose weight or body fat. And what we're really trying to hone in on is the importance of maintaining the muscle

Dr Susan Mitchell (13:36.574)
Yes. Yes.

Dr Susan Mitchell (13:46.038)
Yeah.

Kim Tirapelle, MS, RD, CSSD (13:53.504)
throughout weight loss so that we're targeting more primarily if we can, we can't specify it, but if we can target more fat loss versus muscle, it's going to be so helpful for you. So resistance training, way better.

Dr Susan Mitchell (13:58.562)
Right.

Dr Susan Mitchell (14:02.414)
And I think, don't you think people just, we've just not, strength training has never had the focus on it that it should. It's always just been, okay, get out there and do that cardio, learn some calories. But this is a whole new ball game here with these GLP ones and the change in the body. And I think what we so want people to hear is that this isn't just about calories in, calories out. It's not just about the scale. We're talking about the metabolic pathways of the body and...

lean muscle mass versus fat mass and how all of this is affected, which you and I really big on. So some people might be going resistance training, resistance training. Is that the same as strength training? What is that really?

Kim Tirapelle, MS, RD, CSSD (14:47.602)
Yeah, it's a great question. You know, they're used pretty much interchangeably resistance training, strength training, and that's really just any type of exercise where your muscles are working against a force. So this can be your own body weight, dumbbells, know, kettlebells, resistance bands, weight machines, barbells, et cetera. So anything where you are pushing, pulling or lifting against resistance, the goal is to create. No, it can be any of those. Yeah, and it's just really about

Dr Susan Mitchell (15:08.396)
And it doesn't have to be just one of them either, right? And that's what I want people to understand.

Kim Tirapelle, MS, RD, CSSD (15:16.8)
creating enough tension in the muscle so that it has to adapt by getting stronger and more metabolically active. So it's just being under a force or tension. That is exactly what resistance training or strength training is.

Dr Susan Mitchell (15:27.682)
Yeah, I love that. So don't miss this because Kim and I want you to think of strength training or resistance training as your new prescription. One that keeps working long after the medication stops. Don't miss that. It keeps working long after the medication stops. Kim, I've heard you say, and I love this because most people are going to go, what? That resistance training

can be even more important than protein intake in stimulating muscle growth and preventing muscle loss, which of course helps prevent weight regain. Now, okay, yes, you heard it right here. We're dieticians and we're scooting over the protein because we really, really, really want you to get how important this is.

Kim Tirapelle, MS, RD, CSSD (16:19.358)
No, and this is because your body will not build or preserve muscle mass unless it senses some kind of mechanical tension. And that's the stress that's placed on your muscle fibers during lifting, pushing, pulling, whatever it is resisting a load. And it's the tension that triggers muscle protein synthesis and adaptations that increase the number and the size of your muscle fibers and strengthen them for the future. So protein is helpful, but protein alone isn't what triggers this. Protein is what is going to be helpful for

providing the amino acids to repair and build muscle. But the resistance training is what is going to be the stimulus in that, that get that process started.

Dr Susan Mitchell (16:57.024)
Yeah. And I think that is such good information because I really think there's a lot of confusion, especially with protein, the belief that well, if I just eat the protein, I'm good to go. And that's just not the way it is. You have to mix that in with the resistance training. So how many times a week do you like to include resistance training?

Kim Tirapelle, MS, RD, CSSD (17:21.278)
Yeah, so in general, know, anywhere, you know, if people are just starting two times a week and building up to four times a week, that range in there, all of those ranges, you any of those amount is going to be helpful for seeing strength gains, muscle mass gains, and again, paired with adequate nutrition. But again, incorporating progressive overload. So meaning you're

pushing yourself each workout to challenge yourself. That is what is going to be helpful for, you know,

gaining and building muscle. it's not, don't have to jump into five days a week. You can start with two and build up over time. Yeah.

Dr Susan Mitchell (17:49.696)
Yeah, yeah, now you don't. And let's talk about to don't you just agree that mentally when you do strength or resistance training, you just just like with aerobic you feel so good and you start to feel like, hey, it's a it's a powerful confidence. Don't you think?

Kim Tirapelle, MS, RD, CSSD (18:08.406)
I totally agree with you. And oftentimes we're gonna see strength gains more quickly as compared to seeing like muscle mass gains. Cause that takes time, it takes energy, it takes consistency. So it's exciting when you are able to go in and push yourself and push more weight or move more weight or do things around your home that maybe you couldn't do before, lift heavy things. That's exciting. And it is so helpful for your confidence. Yeah, absolutely.

Dr Susan Mitchell (18:28.597)
It is exciting.

So this is really the time to stop chasing the number on the scale and start chasing the version of you who feels strong, stable, and confident from the benefits of strength training. So Kim, as we wrap up, what take home message do you want to leave us with when it comes to resistance training and GLP wants?

Kim Tirapelle, MS, RD, CSSD (18:57.662)
Yeah, I just want to say that, you know, this GLP ones are a very powerful, helpful tool and just know, like other treatments that are out there for treating disease of obesity, you still have to use the other tools like nutrition, resistance training to help with the muscle preservation, adjusting mental health changes, working with professionals that can support you and give you accountability and feedback. So I would say, use this as a tool, but please make sure that you're still factoring in the important pieces of nutrition, resistance training and mental health as well.

Dr Susan Mitchell (19:27.724)
totally agree. Great information and realistic. Very usable. Thank you for always coming in and sharing your valuable time and your expertise with us. I so appreciate you.

Kim Tirapelle, MS, RD, CSSD (19:39.382)
Thank you so much. So good to talk to you today.

Dr Susan Mitchell (19:41.89)
So here's what I want you to do this week. Are you in the process of reducing your GLP-1 dose to get off of it? Or have you already stopped the medication? If so, resistance training should already, right now, be part of your weekly routine. Whether you're a seasoned lifter or you're just starting out, it does not matter. This is about your success.

Do what you need to do to move forward with resistance training. Get guidance if you need it, join a class, whatever works for you, but don't let it slide. You are worth it.