

The relationship between early self-monitoring, weight loss, and attendance in a 15-week weight loss program.

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Background: The utility of dietary and exercise self-monitoring is not clearly established for meal replacement-based weight loss programs. This study examined the relationship between early self-monitoring and weight outcomes in a 15-week multidisciplinary weight management program. **Method:** Participants were the first 186 patients to enter the program. The meal plan during weeks 1-8 was 1040-1300 kcal/day from meal replacement products and one food-based meal. Portion control exchange plan diets (~1200 kcal/day) were consumed during weeks 9-15. Participants were asked to track intake and exercise by completing self-monitoring cards during weeks 1-8. At baseline, means for age, weight, and BMI were 46.5 ± 12.0 years, 99.1 ± 21.5 kg, and 36.1 ± 7.3 kg/m², respectively. **Results:** The average total percent weight loss (PWL; last observation carried forward) was $7.8 \pm 4.8\%$ of initial weight. During weeks 1-8, the mean number of self-monitoring cards completed was 4.2 ± 3.0 . Self-monitoring cards were correlated ($p < .01$) with PWL ($r = .43$), weight loss during the first 8 weeks ($r = .43$), total attendance ($r = .58$), and attendance at sessions 1-8 ($r = .52$) and 9-15 ($r = .54$). Among participants attending through session 9, self-monitoring was related ($p < .01$) to PWL ($r = .28$), to weight loss weeks 1-8 ($r = .29$), total number of weeks attended ($r = .38$), and attendance at sessions 1-8 ($r = .24$) and 9-15 ($r = .38$). Attendance at sessions 1-8 was significantly correlated ($p < .01$) with PWL ($r = .38$) and session 9-15 attendance ($r = .45$). **Conclusion:** Results suggest that early self-monitoring and attendance predict subsequent continuation and overall weight loss in a weight management program using meal replacements.

There are no known conflicts of interest.