

# XXVIII IFSO World Congress

9-12 September 2025 | Santiago, Chile



## The Importance of Psychosocial Factors in the New Era of Combined Therapies

David Creel, PhD, RD, ACSM-CEP  
Cleveland Clinic

# IFSO 2025 Santiago

Combined Therapies, The Dawn of a New Era

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# Disclosure Slide

Nothing to Disclose



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# Psychosocial Variables

(Measured within Evidence Sources Referenced in Health Economic Models)

Depression

Anxiety

Dietary Restraint

Social Support

Binge Eating

Health Attitudes

Perceived Stress

Habit

Self-Regulation

Problem Eating Behavior

Life satisfaction

Self-Monitoring

Resources

Self-efficacy

Outcome Expectancies

Hedonic hunger

Self-esteem

Mood

Affect (positive and negative)



# Systematic Review and Meta-Analysis: GLP-1s and Mental Health



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- Not associated with increased risk of psychiatric adverse events or worsening of depression symptoms relative to placebo
- Improvement in QOL
- Improvements in restrained eating
- Improvements in emotional eating

Pierret, et al., JAMA Psychiatry, July 2025 PMID 40366681

# Umbrella Review: Mental Health Outcomes with MBS



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## Improvements

Anxiety

Depression

Eating Disorders (BED)

## Concerns

Suicide

Self-harm

Alcohol Use Disorder

Law, et al. *Front Endocrinol*, Nov, 2023

# Psychosocial and behavioral correlates of weight loss 12 to 15 years after bariatric surgery



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**Table 2** Psychological functioning and correlations with %TWL

Outcome variable	M (SD)	Range	r
<u>Life satisfaction</u>	24.98 (6.82)	6.5–35	.18*
<u>Conscientiousness</u>	38.59 (6.68)	23–50	.27**
<u>Positive affect</u>	33.91 (8.11)	12–50	.35***
Negative affect	19.41 (7.00)	10–40	–.05
<u>Food addiction symptoms</u>	1.91 (1.30)	0–7	–.29**
Negative urgency	1.95 (.61)	1–4	–.10
Positive urgency	1.45 (.56)	1–3.9	–.07

%TWL, percent total weight loss; M, mean; SD, standard deviation; r, Pearson's Product-Moment correlation coefficient

\* =  $p < .05$ . \*\*  $p < .01$ . \*\*\* =  $p < .001$



# Psychosocial variables interact with each other and behavioral factors



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**Table 3** Results of the stepwise linear regression predicting %TWL

	B	SE(B)	$\beta$	t	p	F	p	R <sup>2</sup>
Full model						9.27	<.001	0.23
Positive affect	0.45	0.15	0.28	3.04	0.003			
Food addiction symptoms	-2.52	0.92	-0.25	-2.75	0.007			
Regular exercise	5.39	2.42	0.21	2.23	0.28			

- Psychosocial variables are often overlapping and interacting
- It is important to consider physical activity in the context of life satisfaction, positive affect, and impact on executive functioning



**ORIGINAL ARTICLE**



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**Combination of GLP-1 receptor agonists and behavioural treatment in type 2 diabetes elicits synergistic effects on body weight: A retrospective cohort study**

Maria Letizia Petroni<sup>1</sup> | Luca Montesi<sup>1,2</sup> | Santo Colosimo<sup>1</sup> | Maria Turchese Caletti<sup>1</sup> | Arianna Mazzotti<sup>1,3</sup> | Giulio Marchesini<sup>1</sup>

Retrospective:

- Exenatide BID
- Liraglutide
- Exenatide ER
- Dulaglutide

Standard Care

Elementary Nutrition Education – 5 groups

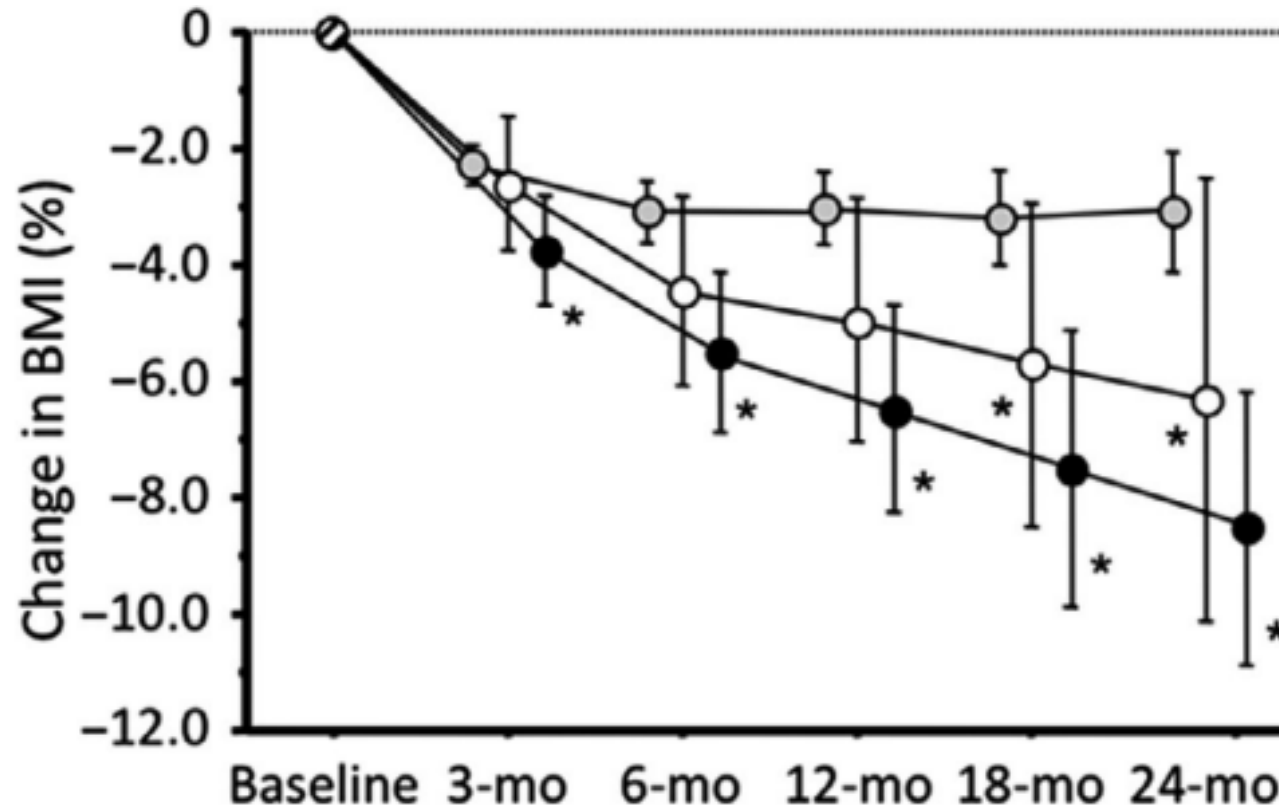
CBT 12 group sessions





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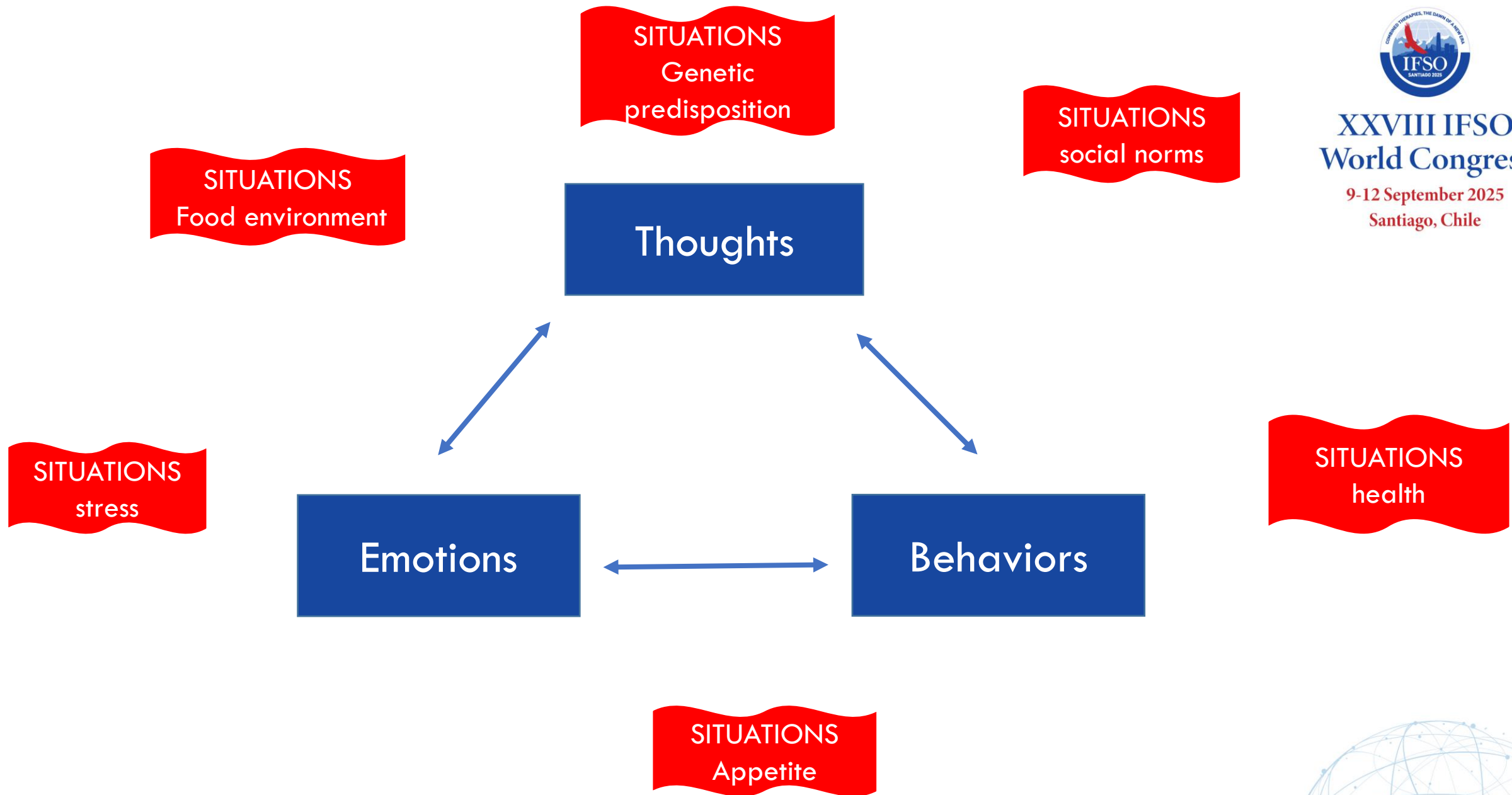
- Standard Care
- Nutrition Education
- Cognitive Behavioral Therapy

Petroni et al., *Endocrinology, Diabetes & Metabolism*, 2019



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### The Serenity Prayer (Alcoholics Anonymous)

God grant me the serenity to  
accept the things I cannot  
change, courage to change  
the things I can: and wisdom  
to know the difference.

Emotion-Focused Coping

The diagram consists of two rounded rectangular boxes. The top box is blue and contains the text "Emotion-Focused Coping". The bottom box is green and contains the text "Problem-Focused Coping". Two red arrows originate from the text "accept the things I cannot change" in the prayer and point to the blue box. Two red arrows originate from the text "courage to change the things I can" and point to the green box.

Problem-Focused Coping



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# Emotion-Focused Coping

When you can't fix the problem...

- **Distraction**
- **Calming**
  - Breathing
  - Physical Activity
- **Processing**
  - Journaling
  - Prayer/Meditation
  - Talking to Others



# 3 mindfulness pillars



Present Moment Awareness

Mind Body Connection

Acceptance/Non-Judgement



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# Mindful Eating

- Mindful Eating: “a nonjudgmental awareness of physical and emotional sensations associated with eating.”

1. When there are leftovers that I like, I take a second portion even though I am full.
2. I eat so quickly that I don't taste what I am eating
3. I think about things I need to do when I'm eating.
4. I snack without noticing that I am eating
5. When a restaurant portion is too large, I stop eating when I am full.
6. I recognize when I am eating and not hungry.
7. I taste every bite of food that I eat.
8. Before I eat, I take a moment to appreciate the colors and smells of my food.



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Framson, C., Kristal, A. R., Schenk, J. M., Littman, A. J., Zeliadt, S., & Benitez, D. (2009). Development and validation of the mindful eating questionnaire. *Journal of the American Dietetic Association*, 109(8), 1439–1444.  
<https://doi.org/10.1016/j.jada.2009.05.006>

# Summary



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- Psychosocial factors are important with all levels of obesity treatment
- Improvement in mental health is common
- Challenges persist with long-term weight management
- We should consider the following long-term psychosocial treatment objectives
  - Identify and engineer our environments for success
  - Help patients understand the interaction between thoughts, emotions, and behaviors
  - Use both problem-focused and emotion focused coping
  - Build skills and habits consistent with mindful eating

