

Exploring Diet Plans

Making sense of the claims of various diet programs and books can prove quite confusing at times. To help you sort through them, this chart examines some of the most common diet plans. Ones that offer quick results may work

initially, but remember that the only proven way to maintain weight loss over the long run is to make permanent changes in dietary and exercise habits. Only follow a diet that can provide solid evidence of its benefits.

Diet Plan	Claims	Comments
Commercial weight loss companies (Weight Watchers; LA Weight Loss)	A high-carbohydrate, low-fat diet is best for weight loss. These plans provide advice on making healthy food choices and reducing calorie intake. They stress moderate weight loss (1 to 2 lbs. per week). Group or individual counseling sessions provide support and behavior modification techniques.	This approach is safe and effective. Because these programs emphasize gradual, healthy weight loss, they can be followed for a long time and lead to the permanent adoption of healthy diet and exercise modifications. As a result, weight loss should be maintained.
Fasting	Periodic fasting will help keep calorie intake low and aid in weight loss. Fasting also has the advantage of cleansing the body of toxins that can contribute to weight gain.	Starvation diets are rarely recommended, even for the severely obese. One-day fasts are unlikely to contribute to weight loss, and longer fasts deprive the body of nutrients. There's no evidence that fasting removes toxins from the body.
Fat-burning diets (Cabbage soup diet; grapefruit diet)	Certain foods can accelerate the body's ability to burn fat stores. Eating large quantities of these foods results in fast weight loss.	No food burns fat. If these diets work, it's usually because they are low in calories. In addition, the focus on one food makes these diets boring and nutritionally unbalanced.
Food-combining diets (Beverly Hills Diet; Suzanne Somers' Eat Great, Lose Weight)	Certain foods should not be eaten together (e.g., carbohydrates and protein; foods of varying textures; fruit at any time of day but morning) because they do not digest well, slow down metabolism, and produce toxins that prevent the elimination of waste.	There's no evidence to support food combining. All foods, even when eaten individually, are a combination of protein, fats, and carbohydrates. The food texture theory has no scientific basis. Fruit is nutritious at any time of day.
Insulin-resistance diets (The South Beach Diet; The Zone)	Consuming unrefined or low glycemic index carbohydrates or eating foods in proper protein-to-carbohydrate ratios will combat insulin resistance (a poor response to the actions of insulin that leads to overproduction of insulin), which otherwise prompts fat storage and makes weight loss difficult.	These diets combine the rationales of high-protein diets and food-combining diets, and are ineffective for the same reasons. There's no evidence that a diet high in complex carbohydrates increases appetite or causes the body to store more fat. Obese people are often insulin resistant, but obesity is the cause, rather than the result, of this condition.
Low-carbohydrate/high-protein diet (Atkins diet; Protein Power)	Glucose (a primary source of body fuel) is usually derived from carbohydrates but can be formed from protein. This conversion requires extra energy that speeds fat breakdown and produces substances called ketones that suppress appetite.	High-protein diets are low-calorie diets. An initial rapid weight loss is mostly water, not fat. Even the small amount of carbohydrate in these diets is enough to prevent ketosis. A high-protein diet usually cannot be continued indefinitely; when eating returns to normal, weight may be regained. The high-fat content of high-protein diets may increase the risk of heart disease.
Meal-replacement drinks (Dyna-Trim; Slim-Fast)	A liquid shake (either prepackaged or made from powdered mix and milk) or candy-type bar replaces one or two meals a day, thus helping to cut calories. Shakes contain sugar, protein, fiber, vitamins, and minerals and about 200 calories each.	Hunger may not be satisfied by the shakes, and some individuals may add these drinks to their food intake rather than replace food. If the shake is used for two meals a day, calorie intake may be too low. Weight is usually regained when the product is no longer used.
Prepackaged meal plans (Jenny Craig; Nutri/System)	This approach teaches portion control by supplying the food. Counselors help set weight goals and provide information on exercise and behavioral techniques. In-house doctors may prescribe appetite suppressant drugs or supplements.	People lose weight because calorie intake is strictly controlled. Weight loss maintenance depends on how successful you are at making the transition from prepackaged meals to regular food. These plans are expensive to join, and the food and drugs must be purchased separately.