



Dear All

It is officially spring and the spring is expected to have a positive effect on the development of the covid-19 pandemic understood as the spread of infection is reportedly reduced. This probably means that society is starting to reopen, as the Danish Government has just announced with effect from Monday 22 March. The outdoor number of people gathered is increased from 5 to 10 people, certain places in the country are opened up for graduating students to return and the number of people gathered is increased from 25 to 50 people for outdoor sports activities and also for outdoor church ceremonies.

It is a good development for social interactions and thus supports, as we had hoped, our Seminar 1 scheduled to be held on 27-28. April 2021 at Hotel Scandic in Ringsted can thus be held without problems, of course with due regard to the current covid-19 restrictions. We are in contact with Hotel Scandic about the restrictions and we have just been informed that you are welcome to gather more than 10 people when it comes to teaching. In addition, a distance of 2 meters is maintained, meals are taken in the Seminar room, just as face masks are worn when moving around. The Scandic chain has been adept at making it work in their conference day.

#STAYSAFE AT SCANDIC







The Holbæk-model Annual Conference 2021 will be held on Tuesday, September 7th, 2021 at 8.30-16.30 at Hotel Nyborg Strand on Fyn. You are welcome to register from 8.00 AM.

The program for the Holbæk-model Annual Conference 2021 is still taking shape. See the preliminary program <u>here</u>.

If you have suggestions for the program, please contact Dorte at klinikken@drholm.com

Price for participation in the Annual Conference is DKK 1.250, - per participant. If you want to register for the Annual Conference, send an email to Dorte at klinikken@drholm.com

If you register before 1st of June, there is a 15% discount on the registration (early bird price: DKK 1.062.50).

Accommodation from 6th to 7th of September can be purchased.

We are really looking forward to conference and expect it to be a fantastic day. ©

MASTERCLASS

MasterClass on February 26th, 2021 dealt with the Danish Veterinary and Food Administration's new recommendations, see our newsletter from <u>February</u> and a discussion of the expected



new lifestyle recommendations from the Danish Health Authority (SST) that have been more than 2 years in the making.

The recommendations from SST relate to offers of lifestyle intervention in severe overweight in children and adults, where lifestyle intervention in severe overweight is understood as a holistic effort with the aim that children achieve a healthier weight and an appropriate weight development as well as better quality of life and well-being - primarily through changed health behaviour in form of healthier habits. The healthier habits focus on eating, eating and physical activity habits, but also include habits on sleep, sedentary time, stress, smoking and alcohol as well as psychosocial issues. In the new recommendations, it is important to recognize the many and serious complications of obesity already in childhood: psychosocial problems, such as bullying and lower quality of life, but also physical complications, such as type 2 diabetes, high blood pressure, sleep apnoea and fatty liver and even more importantly, recognizing the genetic and physiological causal components and shifting the responsibility for obesity from the shoulders of the individual to a societal problem. Furthermore, the development of overweight and obesity is a result of a number of individual (genetic, physiological and behavioural) and societal (e.g. the price and availability of healthy / unhealthy foods and beverages, the nutrient content of foods and beverages, portionand packaging size, the framework for sedentary behaviour and participation in physical activity, discrimination and stigmatization) factors, there is a need for a broad and open debate on stigma and a targeted effort to spread the understanding that the



development of severe obesity is a societal problem, that requires societal solutions, and is not solely an individual matter and the responsibility of the individual.

Tracing and referral

In the tracking, emphasis is placed on the importance of the child examinations in general practice and the school health service's height and weight measurement in schooling and schooling examinations and possibly in the middle of the school year.

Already in the case of obesity (and not only severe obesity), but your own doctor must also decide on the further investigation and treatment of overweight and related complications. In addition, in the case of severe obesity, general practice must refer children to a children and adolescent ward for the purpose of investigation and possibly treatment of any sequelae if the child is severely overweight. This framework obviously means that children's wards must be equipped to take care of those who are severely or complicated overweight.

Content of the lifestyle intervention

The recommendations from SST focus on a holistic approach and thus not only focus on diet and exercise, but also on psychosocial conditions, sleep, sedentary time, passive smoking, and possible stress as well as smoking and alcohol. The effort should be planned individually and there should be an ongoing assessment of the treatment. If the intervention does not work as intended, the intervention is then adjusted. It is emphasized that the treatment of overweight and severe obesity requires an



interdisciplinary effort: where the offers should involve health professionals with different qualified competencies. A direct educational requirement has thus been formulated for the various professional groups so that the diet element should be handled by professionals with competencies corresponding to a professional bachelor in nutrition and health, where health professionals should have knowledge about overweight and weight development in children. The element of physical activity should be handled by health professionals with specific knowledge of physical activity for children with severe obesity, as well as being able to plan and supervise the training and advice on specific physical exercises adapted to the individual child.

Completion and follow-up

In principle, up to 12 months of treatment for obesity is added and after the intervention, the child's weight development (BMI-z-score), well-being and habits are assessed with a view to whether the child should continue in a further intervention or quit. It should be possible for the child to receive a new offer of lifestyle intervention if, after the intervention has ended, the child again begins to increase the degree of overweight (increased BMI-z-score), or suspicion of comorbidities arises. It is recommended "Follow-up (contact to the family) no later than 12 months after completed treatment".

Overall, we think that there are a number of good elements in the new recommendations from SST, but we miss the fact that severe obesity is directly declared as a chronic, serious, recurrent, and progressive disease, which the European Commission has actually



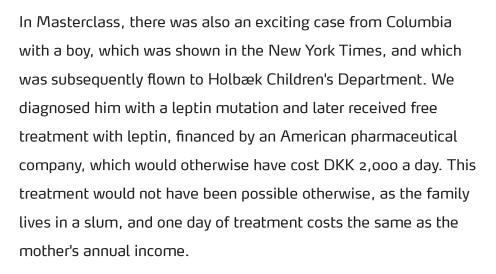
just adopted in March 2021. We miss that one integrates the understanding of the neuroendocrinological regulation of the fat mass into the understanding of the treatment of severe obesity which very briefly understood means that the fat mass actively defends and preserves itself. There are beats in the recommendations that indirectly add to it when both General Practice and Children's Departments are appointed to perform key functions and that one recognizes "the genetic and physiological causal components" and that "the responsibility for obesity is shifted from the individual's shoulders to a societal problem". On the other hand, the recommendations are still too undeveloped when you mention both lifestyle and habits, both of which mean that the arrow alone points to the patient! Furthermore, it would be shameful to question both motivation (which puts even more guilt and shame on the patient) and calorie restriction which can be understood as a planned defeat in relation to fat mass regulation and which does not take growth and development properly into account. Finally, a focus on 12 months of treatment (which for the vast majority is too short) is out of step with the treatment of a chronic, severe, progressive, and recurrent disease.

At the last Masterclass, both written material and a video link were sent with Jens-Christian Holm's review of the Danish Veterinary and Food Administration's dietary advice and a video presentation on the Danish Health Authority's recommendations; Offer of lifestyle intervention in severe overweight in children and adults, see it here.









We also talked about body positivism, that it is completely understandable that you want to be recognized for who you are, which we agree with, but that you have to keep in mind that severe obesity is the cause of 9 % of all cancer morbidity and mortality, 35 % of all cardiovascular morbidity / mortality and 85 % of all type 2 diabetes morbidity / mortality as well as more than 20 other complications of obesity. Therefore, we need to take severe obesity seriously and treat it with dignity, as a chronic, serious, progressive and recurrent disease.



Next MasterClass is on Friday 23rd of April 2021 at 14-15.

If you would like to participate, send Dorte an email at klinikken@drholm.com.

The only requirement for participation is that you have at least attended Seminar 1 in the Holbæk-model's competence development courses (Seminar 1-4). If you want to discuss a case, you can inform Dorte about this by registering.



NEW ARTICLE ON THE BODY'S OWN CONTENT OF GLP-1

In this new article, just published in an international scientific journal, we investigated whether humans' own fasting GLP-1 concentrations are different in children and adolescents with normal or overweight, respectively, and whether there was an association with cardiovascular risk factors.

We used the Danish Biobank for Children and Adolescents, where we compared the group that has been included in Holbæk Obesity Treatment (HOT) (1,978 patients), with a random sample of the background population (2,334 children and adolescents), all aged 6-19 years of age. Fasting GLP-1 concentrations and risk factors for cardiovascular disease were measured.

Overweight children and adolescents had significantly higher GLP-1 concentrations than children and adolescents from the background population. BMI SDS, waist circumference and total body fat percentage were indicative of the fasting GLP-1 concentrations in girls and boys. In addition, there was an association between fasting GLP-1 concentrations and HOMA-Insulin Resistance, fasting values of insulin, hs-CRP, C-peptide, triglycerides, ALT, HbA1c and diastolic and systolic blood pressure standard deviations scores (SDS).

The study concluded that obesity and severe obesity are associated with increased fasting concentrations of GLP-1 and are also indicative of elevated cardiovascular risk factors. You can see the article here.



It is very important to get accurate knowledge about the body's own regulation of the GLP-1 system. Not least because the GLP-1 system is currently under rapid development with a view to developing new drugs for the treatment of severe obesity in both children and adults. In previous newsletters, we have just described treatment effects caused by drugs based on the GLP-1 system, see it here.

SEMINAR 4

We are proud to present the new "Seminar 4", which has the main focus on the therapist's pedagogy and communication in practice. Next dates for Seminar 4 are 25th-26th of May 2021.



It will be an interactive seminar, where patients with their families come live on the seminar, just as there will be exercises with both language and body language analyzes in the consultation, with clips from the DR1 series GXL and more. We have previously used live patient cases with great satisfaction among the students. The overall goal is insight into how we ourselves influence and help to make difficult patients easier, so that they can thus benefit more from the treatment, and that we understand that we ourselves have a significant influence on the treatment outcomes.

THE HOLBÆK METHOD = WEIGHT LOSS WITHOUT NO TO FOOD

"When our daughter was 9-12 months old, she was a BIG but positive, cheerful, outgoing girl who was in full swing developing





language and motor skills filled the age, despite her size. But when she was so big, she became associated with doctors and dietitians at the Department of Children and Youth at Viborg Hospital. Here they quickly made a VERY scraped diet for her, in it there is very little she can get and in very small amounts during a whole day. We trust the professionals, and day care cooks it for her too and weighs it down. We often go for weighing's and checks, but the weight does not go down. After a little 2-3 months we can feel a girl who penetrates herself, loses all language, no joy of life to feel and keeps to herself. After several meetings for 1 year, without our concerns being listened to, we stopped coming. It took us many years and a really hard mental battle to find our girl again, and not least to investigate the possibilities of weight loss in children. When she and we parents were ready again, we took over Viborg Hospital again, and after a fight we managed to be referred to Jens-Christian Holm at Holbæk Hospital. This has had a really big positive impact on our daughter's life. From the first time we came to Holbæk we were warmly welcomed, Maria Lucia felt really safe and cosy and did not feel she was alone as she could see and not least talk to others who had also just started on the Holbæk-model. One big change Maria Lucia has noticed is that now she is allowed to eat, just the right thing and this by not only getting NO all the time for food, but she does also not experience a frustration of prolonged hunger. After a fantastic year on the Holbæk-model, we have a cheerful girl who has much more positive energy for movement and play throughout the day. Linguistically, she is now above age-appropriate level and doing



well in school; now she sees opportunities rather than limitations in life".

Maria Lucia & Mom.





Contact Us

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UPCOMING SEMINARS IN THE DR HOLM-MODEL

The next seminar in the Dr Holm-model is Seminar 1, which will be held on 27th-28th of April 2021. The seminar is held at Hotel Scandic Ringsted, Nørretorv 57, 4100 Ringsted.

Seminar 1: 27th-28th of April 2021.

Introductory course.

Seminar 2: 22th-23th of June 2021.

Follow-up course; follow-up on treatment.

Seminar 3: 23th-24th of November 2021.

Immersion course; our values in a meta-perspective.

Seminar 4: 25th-26th of May 2021.

Focus on the therapist's pedagogy and communication.

Brush Up: 30th of November 2021

To make the patient easy.

https://www.jenschristianholm.dk/uk/our-products/seminars-for-healthcare-professionals.aspx

Obesity Treatment Tool Pro is now part of the seminar content on all seminars.



Read more about *Obesity Treatment Tool Pro* here: https://www.jenschristianholm.dk/uk/our-products/obesity-<u>treatment-tool-pro.aspx</u>

All seminars are held at Hotel Scandic, Nørretorv 57, 4100 Ringsted.