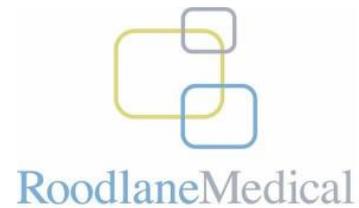


Health & Well-being



Guest Blog

Exercise reduces hunger better than dieting

Recent thinking has been that the best way to lose weight is to control what we eat and that exercise doesn't help us lose weight. Certainly calorie restriction is needed to lose weight, and exercise helps in that you burn more energy increasing the calorie deficit.

But does exercising mean you eat more or less? The answer to this was inconclusive anecdotally at least with some people feeling they chose healthier food and generally ate better and felt less hungry whilst exercising regularly whilst others said they feel they can eat 'whatever they want' when they exercise so they can over eat.

An interesting study conducted by scientists at Loughborough University, and published in "Medicine & Science in Sports & Exercise" looks at the impact of exercise on how hungry we feel has just been published.

Their results demonstrated that exercise does not increase one's hunger, it actually curbs it. Study participants who used exercise to achieve a calorie deficit were found to eat less than participants who restricted food intake.

The two-part study aimed to compare appetite responses of men and women. In the first study, calorie intake was restricted through diet or exercise (a moderate intensity 90-minute treadmill run), and appetite responses were measured over a nine-hour period.

Where a calorie deficit was achieved by food restriction, participants showed increased levels of the hunger hormone ghrelin and lower levels of a hunger suppressing hormone known as peptide YY, while this reaction was not evident in participants exercising to achieve the calorie deficit.

Calorie restricted participants also ate almost a third more at a buffet meal compared to when the same energy deficit was created via exercise: participants ate an average 944 calories following food restriction compared to 660 calories after exercise.

"We've shown that exercise does not make you hungrier or encourage you to eat more - at least not in the hours immediately following it," said study author David Stensel. "Our next step is to see whether this benefit continues beyond the first day of exercise."

So get out there and exercise – you'll eat more not less!



Looking after your Lifestyle

Should we stop drinking pop?

The announcement in the budget by Chancellor George Osborne that a tax on sugary drinks is to be introduced in the UK came as quite a surprise - as it seemed the government was against the idea.

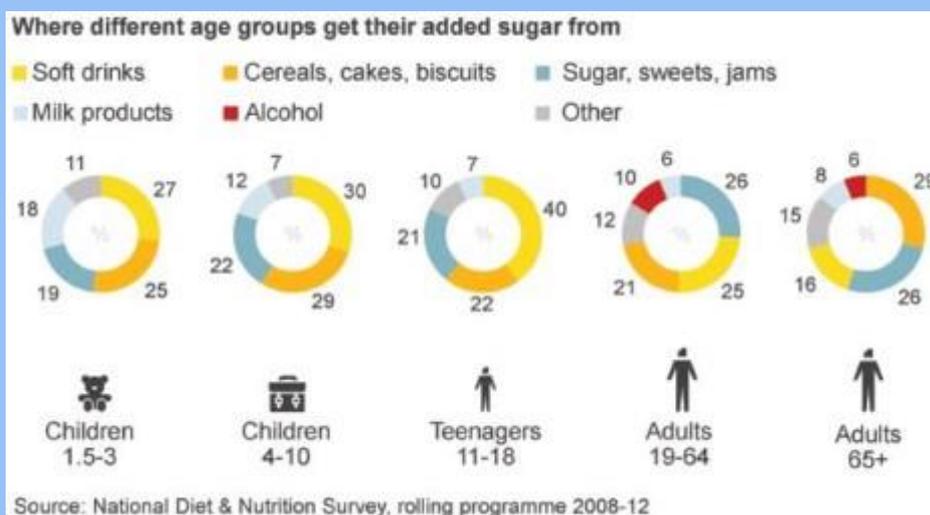
At this point it's not possible to know what difference it may make - for example - will it have an impact on child obesity rates? One in ten children start primary school obese, by the end of school it's one in five!



Sugar has been hitting the headlines for some time with recent reports suggesting that its not just children who need to cut their intake considerably. Two key reasons are diabetes and tooth decay:

Doctors are saying our intake should be lowered to just 14g a day - the equivalent of 4 blocks of Cadbury's Dairy Milk chocolate or half a can of fizzy drink for those of you who need a visual!

In addition, children should not be given sugary snacks as a treat while schools and hospitals should not serve them at all in a bid to tackle tooth decay. The WHO recently lowered the recommended sugar limits to a maximum of 50g per day for the average adult and ideally no more than 25g, but this is still too high, warned doctors from University College London.



In a new study they plotted average sugar intakes in various populations around the world and compared them to the levels of tooth decay. They found people who eat little or no added sugar had little or no tooth decay. The difficulty of course is avoiding sugar - vending machines offer us confectionary and sugary drinks at work and in public places, sugary treats are always on display in cafes and until recently at supermarket check-outs.

In addition to their contribution to tooth decay, sugary drinks could be causing nearly 8,000 cases of [type 2 diabetes](#) a year, according to research. A study led by the University of Cambridge found sugar-sweetened drinks could give rise to over 79,000 cases in the UK over the next 10 years. Sugar-sweetened beverages were consumed by 49.4% of people.

They concluded that regular consumption of sugar-sweetened beverages may be linked to 2-6% of type 2 diabetes cases in the UK, and this is independent of an individual's obesity status.

Emerging research notes that drinking fizzy drinks also causes other health concerns:

They can make us fat

This one may seem obvious. However, what you may not know is that diet soft drinks can still affect [our waistline dramatically](#). A study found that those who drank diet fizzy drinks saw their waistlines expand nearly three times as much as non-drinkers and even more so than those drinking non-diet versions.

They can increase our risk of Alzheimer's

Scientists found that mice fed the equivalent of 5 cans of sugary drinks a day had worse memories and twice the amount of brain deposits associated with the disease than mice without added sugar in their diet. This suggests that fizzy drinks could be linked with [Alzheimer's](#).

They can increase our risk of cancer

There have been many studies that have looked at the links between various types of cancer and fizzy drink consumption. They suggest:

- Drinking just 2 sugary soft drinks a week increases the amount of insulin the pancreas produces and can [double the risk of developing pancreatic cancer](#).
- Drinking just 1 fizzy drink a day could increase a man's chance of [developing prostate cancer](#) by around 40%.

They can change our brains

As well as affecting the body, fizzy drinks have been found to alter the protein levels in the brain, which could lead to [hyperactivity](#).

They can cause premature aging

Phosphates used in fizzy drinks, as well as many other processed foods, has been found to speed up the [ageing process](#). This is not bad just in terms of wrinkles, but also health complications that come with age, such as chronic kidney disease and cardiovascular calcification.

So in answer to the question - Should we stop drinking the pop? The answer is we should at least be reducing the amount of sugary drinks we consume and the amount of sugar in general.

Doctors Corner



Dear Doctor,

I have been experiencing symptoms of burning stomach pain and indigestion recently. Is there anything I can do that will make me feel more comfortable?

Dear Patient,

Your symptoms could be due to a condition known as gastritis, which means inflammation of the stomach lining. Overproduction of stomach acid can impact on the stomach lining causing it to break down leading to stomach pain and nausea and vomiting. Excess acid can also secrete into the oesophagus leading to heartburn and acid reflux.

Common causes include:

Infection - Helicobacter pylori bacterial infection most commonly but also other viral, bacterial, parasitic and fungal infections. Your GP can test for Helicobacter pylori by stool antigen test or breath test.

Lifestyle factors - excess caffeine, alcohol, spicy food, smoking

Medication - regular use of medications such as aspirin, ibuprofen classed as non-steroidal anti-inflammatory drugs (NSAIDS) and oral steroids (prednisolone)

Stress – high stress levels can trigger increased stomach acid production

Rarely gastritis can be caused by specific autoimmune conditions such as Hashimotos thyroiditis or Type 1 diabetes.

If the stomach lining is worn away significantly stomach ulcers can develop, causing pain and bleeding.

You can treat the early symptoms of gastritis by

Modifying your lifestyle:

- try to reduce your intake of spicy and fried food
- cut out cigarettes and alcohol
- avoid eating a large meal late in the evening and going to bed
- managing high stress levels with exercise, relaxation, restorative sleep and meditative practice.

Using over the counter medications:

- antacids such as Gaviscon
- Ranitidine (a histamine/ H2 blocker) which reduces acid production

Asking your GP for a prescription medication to reduce the production of stomach acid, such as Omeprazole, Lansoprazole. These medications are known as proton pump inhibitors and are more effective than H2 blockers.

Testing for and treating Helicobacter pylori infection with eradication therapy (a combination of PPI and antibiotics)

If your symptoms persist after initial treatment or if you experience significant pain or any bleeding (blood in vomit or stools) your GP will refer you to a specialist for an endoscopy. This will enable a closer examination of the upper digestive tract and interventional treatment.



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