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Protocol for the Healthy for Life Study

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Disclosures

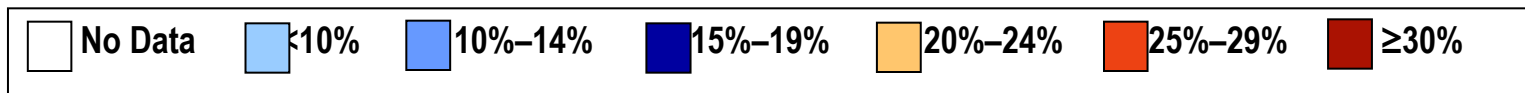
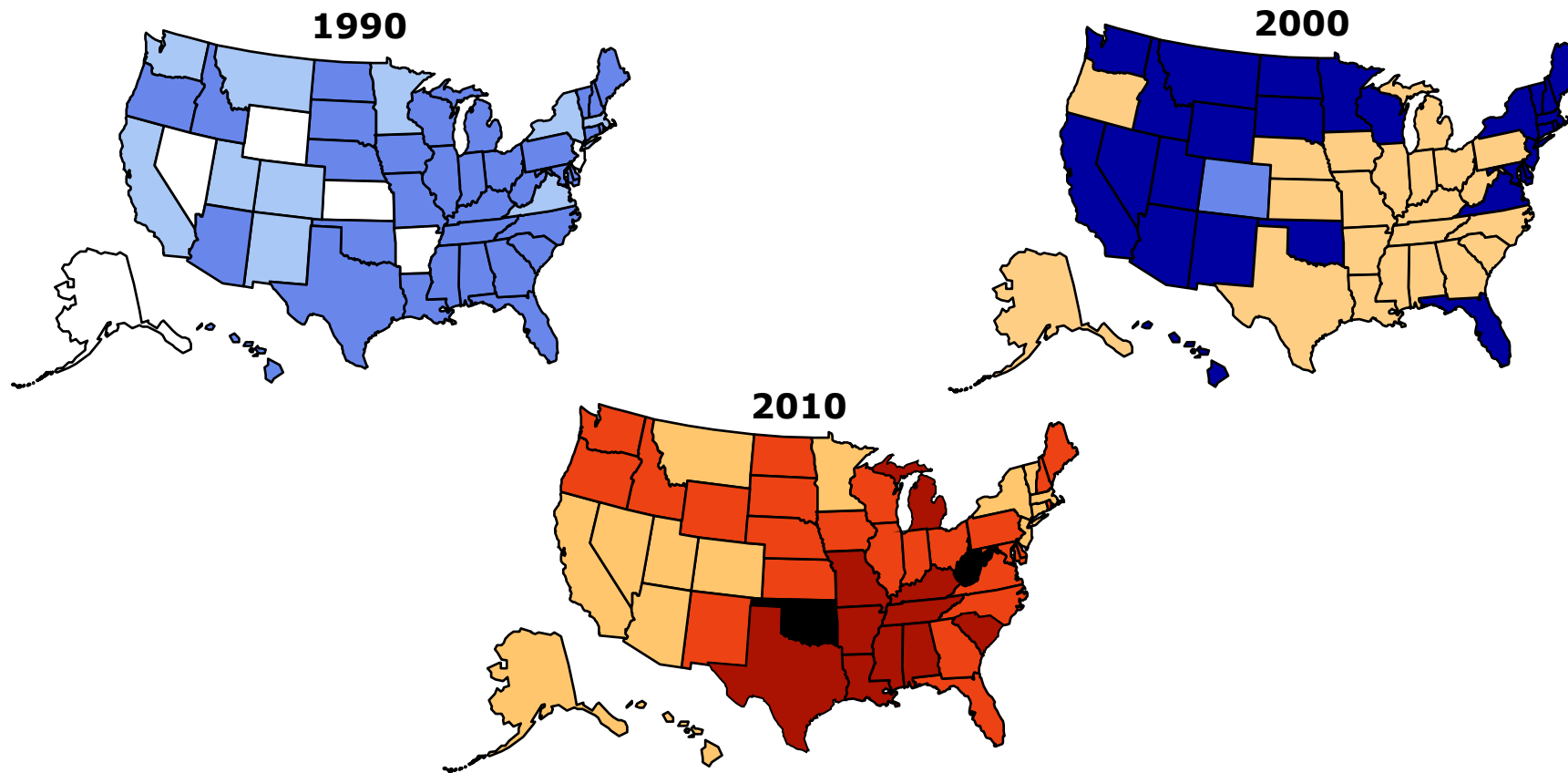
- Relevant Financial Relationships:
 - None
- Relevant Nonfinancial Relationships:
 - None



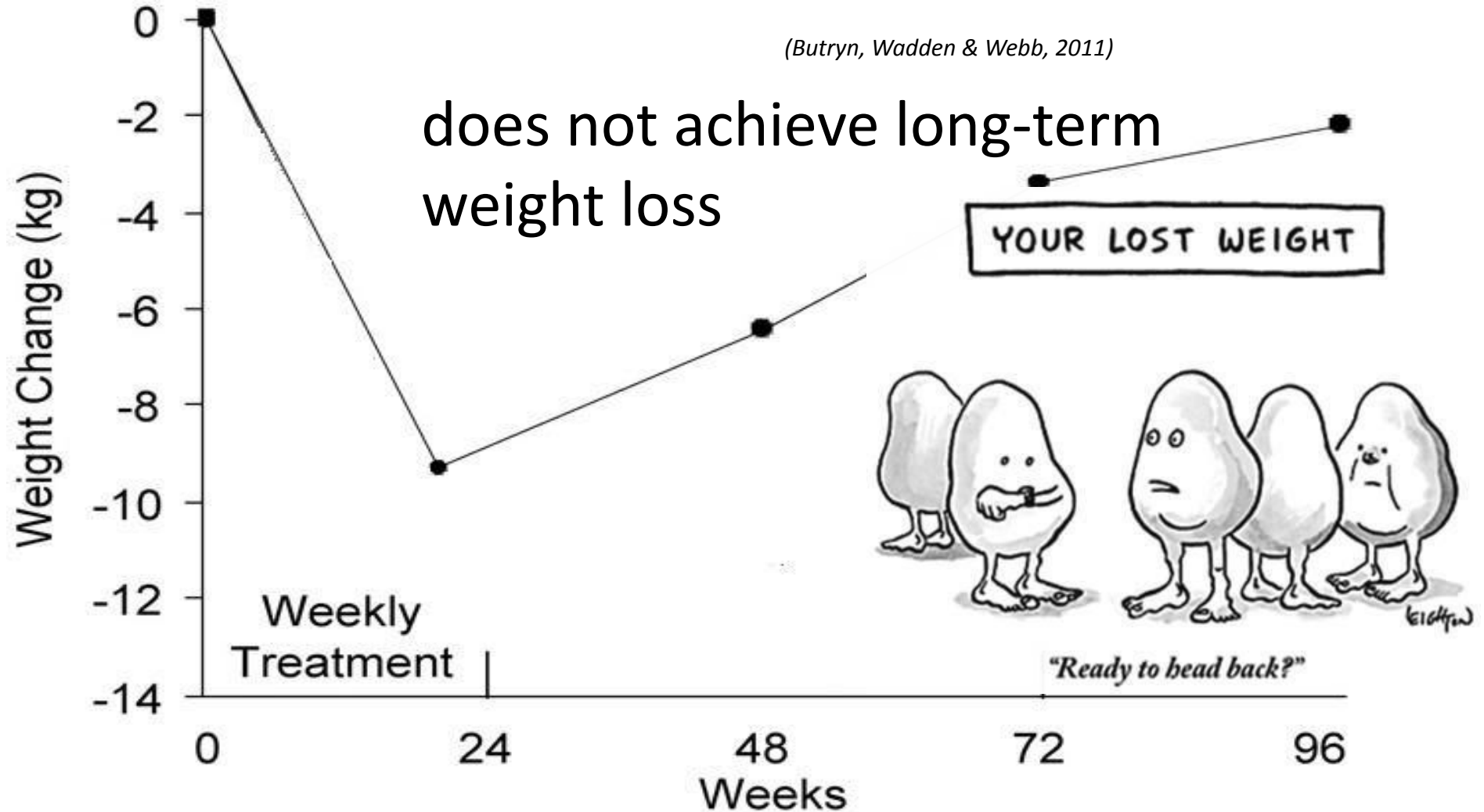
Obesity Trends* Among U.S. Adults

BRFSS, 1990, 2000, 2010

(*BMI ≥ 30 , or about 30 lbs. overweight for 5'4" person)



Gold Standard Behavioral Intervention...



Rationale

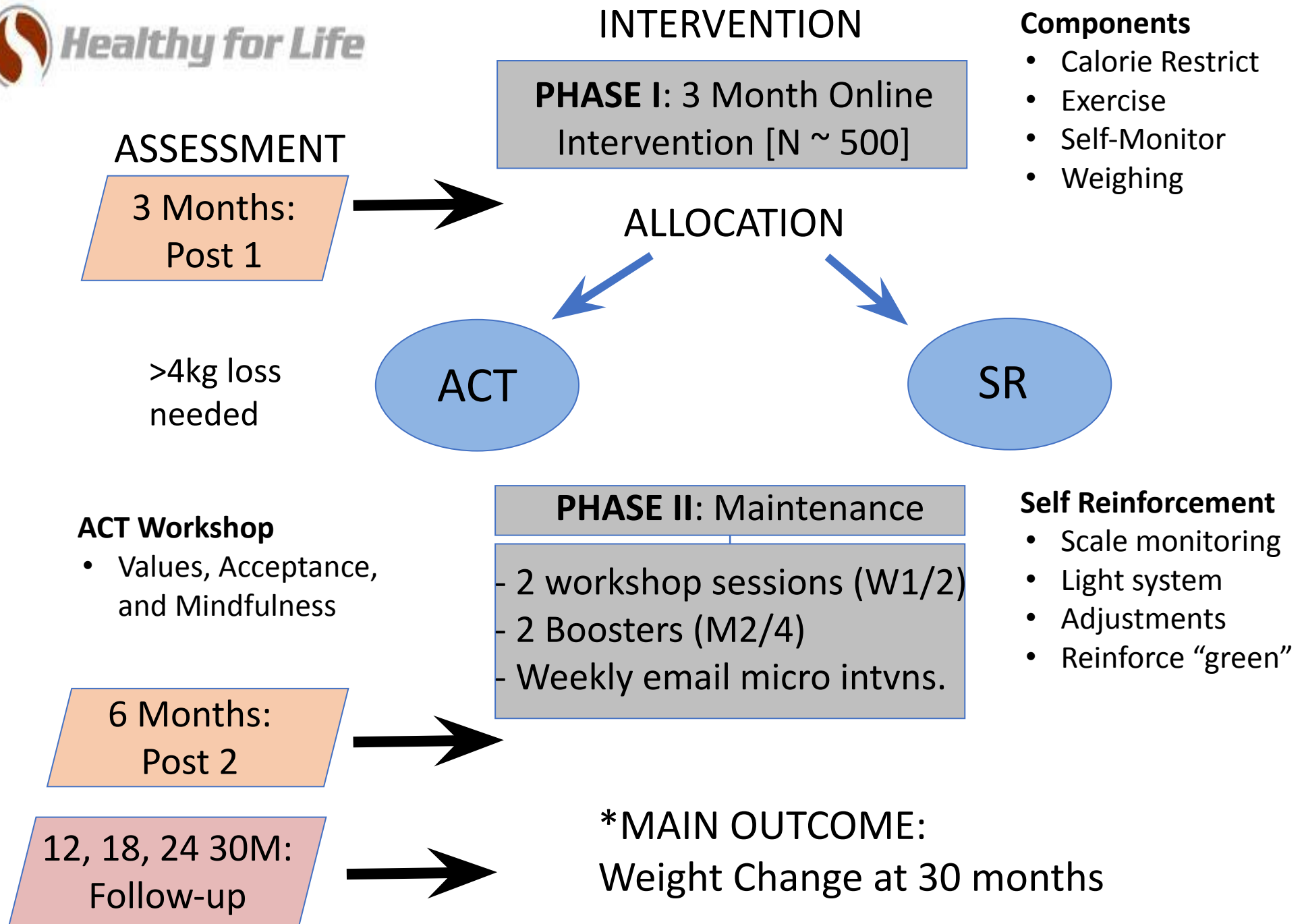
- Maintenance requires “different skills”
 - Core behavior change strategies work, but individuals do not persist over time
 - Gains slow (plateau), motivation wanes, effort/burden goes up
- ACT positioned well to address long-term
 - Values skills for motivation
 - Acceptance and defusion for barriers to persisting with healthy behavior change



Project Overview

- NIDDK funded (R01) randomized trial comparing two different WLM interventions
 - ACT vs Self-Regulation (STOP Regain)
 - ACT evidence from pilot trial (K23)
 - Self-regulation previously validated in different format
- Randomization and workshops delivered after standardized weight loss phase





Scientific Rigor

- Control for initial weight loss (validated program)
- Random assignment to maintenance groups
- Objectively measured DVs: Weight and PA
- Blind assessment
- Counterbalanced intervention delivery with adherence to treatment protocol analysis
- Investigator team with expertise/allegiance to both conditions
- Independent Safety Monitor oversight



Progress to date

- N = 436 Phase I participants to date (excludes cohort 7)
 - 6 of 7 cohorts completed weight loss program (Phase I)
- N = 190 Phase II participants to date (excludes cohort 7)
 - 5 of 7 cohorts completed WLM programs (Phase II)



Assessment Attendance

Interval	ACT		SR		Total	
	N	%	N	%	N	%
6-12M	95	97	96	93	191	95
18-24M	11	92	15	100	26	96

Session Attendance

Session	ACT		SR		Total	
	N (93)	%	N (97)	%	N (190)	%
1	93	100	97	100	190	100
2	90	97	93	96	183	96
3	86	92	89	92	175	92
4	73	89	76	88	149	89

Main Outcomes

- Investigators remain blind to all outcomes until all data collected
- 2 years of data collection remain

Challenges

- First cohort launched when COVID hit
 - In-person vs virtual
 - Reduced progression to Phase II
 - Recruitment woes



END

Thanks to

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