

Weight loss for IIH, a personal view

There is a strong association between a person's weight and Idiopathic Intracranial Hypertension (IIH). This is a sensitive issue for people that have IIH, as not all overweight people get IIH. Medical studies have shown that in some people recent weight gain causes IIH and that as our weight increases there is a higher chance of getting IIH.

There are now a number of medical studies that show that weight loss leads to an improvement in how you feel. These include reduced headaches, whooshing noises in the ears (pulsatile tinnitus) and blurred eyesight. Currently weight loss is the only treatment that puts the disease into remission (Newborg 1974; Koppersmith 1998; Johnson 1998; Sinclair 2010).

This booklet is a personal view from Miss Ruchika Batra, a Neuro-Ophthalmologist who looks after IIH patients. This is what she tells patients regarding weight and lifestyle in IIH.

What is Body Mass Index (BMI)?

In order to determine if you are a healthy weight for your height, your Body Mass Index (BMI) is a useful calculation. Details of what this means and how to calculate your BMI are available on the NHS choices website:

<https://www.nhs.uk/Livewell/loseweight/Pages/height-weight-chart.aspx>

What is a normal BMI?

For most adults an ideal BMI is in the 18.5 to 24.9 range. This table explains the BMI ranges.

BMI (kg/m²)	What this called
Below 18.5	Underweight
Between 18.5 and 24.9	Normal weight
Between 25.0 and 29.9	Overweight
Between 30 and 35	Obesity grade 1
Between 35 and 40	Obesity grade 2
Over 40	Obesity grade 3

Does everyone with IIH need to loose weight?

Weight loss is recommended in everyone with IIH and a BMI above 30kg/m². It may also be of benefit in people with a BMI between 25-30kg/m².

How much weight should I loose?

The amount of weight loss required to make you better is not known and this may differ from person to person. We know that an increase in body weight by 5-15% can make you develop IIH. In the Birmingham IIH weight loss study (Sinclair 2010) 15% weight reduction significantly reduced the brain pressure, and improved papilloedema (swelling at back of eyes), vision and headaches. The condition was put into remission in all patients who lost this amount of weight.

How do I start to lose weight?

The key to successful weight loss is making lifestyle changes that are achievable and sustainable. Your weight is determined 80% by what you eat and 20% by

your level of exercise and so it is very important that you choose a healthy pattern of eating. We do not recommend crash dieting or fad diets as these tend to lead to long-term increases in weight.

I have heard of lots of diets, which is the best?

Long term maintenance of weight loss is difficult and is typically as little as 2–4kg reduction in overall body weight at 2 years irrespective of the dietary regime followed. This is why lifestyle modification is thought to be better long-term.

Are there any tips on healthy lifestyle?

- Do not skip breakfast
- Aim to eat three healthy, balanced meals per day
- Eat when you are hungry and stop eating when you are full
- It takes about twenty minutes for your stomach to send feedback to your brain that you are full so if you eat slowly and steadily, you will eat less overall
- Try to avoid snacking in between meals but if you need to snack, choose healthy snacks such as fruit, vegetables or small portions of unsalted nuts

I have heard that drinking plenty of water is good for me, why is that?

The body frequently confuses hunger and thirst and so if you feel hungry drink a big glass of water and then see how you feel.

What is portion control?

Portion size (the amount of food on a plate) has increased over the years. Controlling portion size is important for weight management. It is, however, important to eat meals which keep you full for several hours. One approach to

achieve this is to make sure that your meals are a balance of the food groups: protein, carbohydrates, fats, vegetables and dairy.

What are good examples of the different food types to eat?

- Protein: choose lean poultry (chicken or turkey breast), fish, beans or pulses. Protein keeps you full for longer.
- Vegetables: eat these with every meal as they are a great source of vitamins and fibre and vegetables are relatively low in calories. Lots of vegetables with each meal will help to fill you up and make your plate look colourful and attractive.
- Healthy fats (such as avocados and full fat Greek yogurt) in your meal will keep you fuller for longer.
- Slow release or complex carbohydrates (such as wholegrains, potatoes, sweet potatoes, beans and lentils) take the body longer to break down and convert into energy.

Why are slow release carbohydrates so good?

Since slow release carbohydrates take the body longer to break down, the result is that energy is given to the body over an extended period, with only a small impact on blood sugar levels. Controlling blood sugar levels helps to stabilise the body's levels of the hormone insulin which, in turn, can reduce fat storage.

Is there anything I should try and avoid?

Cut out simple carbohydrates such as white bread, chocolate, cakes, biscuits, most breakfast cereals and sugary drinks as these are absorbed rapidly, causing sharp spikes and dips in your blood sugar that make you hungry a short time later. Try and avoid pre-prepared or processed foods as these may contain

excess sugar or salt and are usually of lower nutritional value than freshly prepared foods.

What else can I do, besides dieting?

- Try to exercise for one hour at least three times per week
- Aim for at least 7 hours of sleep per night. Lack of sleep can raise your body's stress hormone (cortisol) which causes you to gain weight. Sleep deprivation can also cause you to make unhealthy food choices.
- Do not weigh yourself every day as it is normal for your weight to fluctuate (related to body water content etc) and this can be disheartening. Some recommend not weighing yourself more than once a week.

I am finding this hard, is there anything else to help?

Losing weight can be difficult and therefore getting support from family and friends, who may help to motivate you or join you, can be very helpful.

The National Institute for Health and Care Excellence (NICE) recommends that weight management services are provided for adults with a body mass index of more than 25, as part of a tiered (level) approach to weight management services. However, these services are not as widespread as hoped across the UK and England.

On the NHS the weight management pathway consists of 4 four tiers:

- tier 1 covers universal services;
- tier 2 covers lifestyle weight management services;
- tier 3 covers specialist multi-disciplinary team weight management services;
- tier 4 covers bariatric surgery (weight loss surgery).

You can also ask your General Practitioner (G.P.) to refer you to a dietitian or weight management program that may be available in your area on the NHS.

Write notes or questions for your appointment here:

Where can I get more information?

IIH UK website

www.iih.org.uk/

NHS choices website

<https://www.nhs.uk/Livewell/loseweight/Pages/height-weight-chart.aspx>

This booklet is the personal views of Miss Batra, Consultant Neuro-Ophthalmologist, University Hospitals Birmingham. It was assessed in the draft stage by the ophthalmology nursing team at University Hospitals Birmingham (UHB). It was reviewed by a group of patients who have IIH, and also assessed by friends and family that attended the Joint Idiopathic Intracranial Hypertension clinic at UHB. It was critically reviewed by IIHUK trustees. R. Batra is responsible for the final version. The views expressed in this booklet are of the author and not their employers or other organisations.

Please note we have made every effort to ensure the content of this is correct at time of publication, but remember that information about weight loss may change. This information booklet is for general education only.

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