

INDUSTRY FACT SHEET

Weight of the World

FACT: Nearly two-thirds of adults in the United States are overweight, and 30.5 percent are obese (1999-2000 National Health and Nutrition Examination Survey (NHANES))

FACT: Less than one-third (31.8 percent) of U.S. adults get regular leisure-time physical activity (defined as light or moderate activity five times or more per week for 30 minutes or more each time and/or vigorous activity three times or more per week for 20 minutes or more each time). About 10 percent of adults do no physical activity at all in their leisure time. (Barnes MA, Schoenborn CA. *Physical activity among adults: United States, 2000. National Center for Health Statistics. Advance Data. 2003;(333)*)

FACT: Most studies show an increase in mortality rate associated with obesity. Obese individuals have a 50 to 100 percent increased risk of death from all causes, compared with normal-weight individuals. White men between 20 and 30 years old with a BMI ≥ 45 could shorten their life expectancy by 13 years; white women in the same category could lose up to 8 years of life. Young African American men with a BMI ≥ 45 could lose up to 20 years of life; African American women, up to 5 (Fontaine KR, Redden DT, Wang C, Westfall AO, Allison DB. *Years of life lost due to obesity. Journal of the American Medical Association. 2003;289(2):187-93.*)

FACT: As the prevalence of overweight and obesity has increased in the United States, so have related health care costs—both direct and indirect. Direct health care costs refer to preventive, diagnostic, and treatment services (for example, physician visits, medications, and hospital and nursing home care). Indirect costs are the value of wages lost by people unable to work because of illness or disability, as well as the value of future earnings lost by premature death. What is the cost of overweight and obesity? As of 2001, total cost: \$117 billion, Direct cost: \$61 billion, Indirect cost: \$56 billion, which is a figure comparable to the economic costs of cigarette smoking. (Wolf, AM, Manson JE, Colditz GA. *The Economic Impact of Overweight, Obesity and Weight Loss. In: Eckel R, ed. Obesity: Mechanisms and Clinical Management. Lippincott, Williams and Wilkins; 2002.*)

New Approach Offers Renewed Hope

Live telephone-based personalized coaching and support specific to weight loss is a relatively new development that is growing exponentially in popularity, as evidenced by the fact that healthy companies of all kinds have introduced this service as part of a larger program. On-demand telephone-based weight loss support offers consumers a happy medium between often impersonal online diet plans and in-person counseling offered via commercial weight loss programs or clinic-based healthcare professionals. Phone coaching allows consumers to speak one-on-one to a live, certified weight loss coach at the exact moment of need.

Demand > Supply

Quality phone coaching programs are few and far between in the United States and, until TrimTalk, none were available to the general public as a stand-alone service. Bally's, the nation's largest health club chain offers the service, but one must be a club member to use it. Midwest HMO HealthPartners has a program, but one must subscribe to their health plan. HMR At Home is another diet phone program, but the company pressures consumers to purchase HMR company's diet foods. And, NutriSystem does provide live telephone support, but, again, one is required to buy their branded diet foods, which cost upwards of \$70 per week.

Clinical Research is Proof Positive

In June 2005, Consumer Reports notes: "...Of all the diet strategies, personal support is the most successful. In our 2002 survey, the dieters who worked one-on-one with a 'counselor' or 'consultant' said it was second in effectiveness only to devising their own personal diet and exercise plan."

The magazine goes on to say that in one of the largest diet studies ever conducted, involving more than 3,200 overweight people at high risk for diabetes, intensive counseling to support diet and exercise changes worked better than a drug to prevent diabetes and induce weight loss. Many other studies of group counseling have produced similar results. The diet drop-out rate is generally lower than with other types of diets, and participants lose a clinically meaningful amount of weight.

In addition, according to a recent Stanford University article entitled: "Telephone-Assisted Counseling for Physical Activity," researchers have concluded that phone counseling is convenient, gives program participants greater access to counselors and promotes physical activity for those who may not be responsive to face-to-face training."

What this Means for TrimTalk

TrimTalk's development and subsequent launch of its comprehensive, convenient and affordable live diet support resource is significant, given the glaring need for such a service coupled with the notable lack of service providers. As such, TrimTalk's first-to-market program, which have been developed by a highly qualified team of health industry experts, is uniquely positioned to acquire significant early adopter market share, particularly as Americans grow older and more concerned about their state of personal health and well-being – and controllable variables such as body weight.