

For Immediate Release
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RESEARCHERS AT JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH FIND MEAL REPLACEMENT MORE EFFECTIVE FOR WEIGHT LOSS AND REDUCTION IN DIABETIC MEDICATION THAN STANDARD FOOD DIET

– Participants using Medifast lost twice as much weight and were twice as likely to complete both phases of the study compared with those following a diet based on the American Diabetes Association dietary guidelines –

– 24% of Medifast users decreased diabetic medication after 34-week weight loss phase, compared to 0% of participants on the standard food diet –

OWINGS MILLS, MD. – June 13, 2005 – Researchers from Johns Hopkins Bloomberg School of Public Health released the results of an 86-week diabetic weight loss study that found participants using Medifast’s portion-controlled, meal replacement program lost twice as much weight and were twice as likely to complete the study as participants following a standard food diet based on the dietary guidelines of the American Diabetes Association (ADA). Additionally, 24 percent of the Medifast users decreased or eliminated their diabetes medication, compared to 0 percent on the standard food diet.

The study, “Long-Term Efficacy of 2 Diet Plans for Type 2 Diabetes on Weight Loss and Weight Maintenance,” was officially presented by Johns Hopkins Bloomberg School of Public Health Associate Professor Dr. Lawrence J. Cheskin, MD, during the American Diabetes Association’s 65th Annual Scientific Session in San Diego this past weekend.

Dr. Cheskin’s study enlisted 112 overweight or obese people with type 2 diabetes using two weight loss approaches of equal caloric prescription – a portion-controlled, supplement-based diet (Medifast) and a traditional reduced-calorie diet based on the ADA’s recommended dietary guidelines. The study tracked the participants’ progress over 86 weeks (approximately a year and eight months), including an initial weight loss period of 34 weeks, followed by a 52-week maintenance phase.

“Weight loss is critical for controlling type 2 diabetes, but individuals with the disease are faced with health issues that make it significantly more difficult to lose weight than people without the disease,” explained Dr. Lawrence J. Cheskin, MD. “While type 2 diabetes cannot be cured, losing weight can significantly improve one’s quality of life by reducing or even eliminating the need for daily medication and/or frequent treatment. People with type 2 diabetes are in need of weight control options they can commit to long term.”

According to the results, the Medifast group lost twice as much weight and was twice as likely to complete the study as the group on the standard food diet. Of patients completing the initial weight loss phase (34 weeks), average weight loss was 16 pounds on Medifast and 8.1 pounds on the standard diet. After completing the additional 52-week maintenance period, average weight loss after 86 weeks was 13 pounds for those who received Medifast in Maintenance vs. 5.3 pounds on the standard diet. Also, 44 percent of the Medifast participants maintained more than a five percent body weight loss vs. only 14 percent on the standard diet.

“There is no room for miscalculating portions when using portion-controlled foods, which might explain in part why participants on Medifast achieved superior weight loss results and demonstrated significantly better completion rates,” added Dr. Cheskin. “In addition, meal replacements are easy to follow and require less effort, which is why they can be an effective weight loss option for many people in serious need of losing weight.”

A crucial finding was a significant drop in diabetes medication intake for the Medifast group. After the 34-week weight loss phase, 24 percent of the Medifast participants either decreased or eliminated their diabetes medication. None of the participants on the standard food diet could say the same.

“The difference in diabetes medication intake between the two diets reflects that Medifast was significantly more effective at helping to control type 2 diabetes than a standard food diet,” explained Dr. Cheskin.

Brad MacDonald, CEO of Medifast, Inc., states, “This study reinforces the fact that with Medifast, people not only lose weight, but their health improves as well.”

Key Findings

	Medifast	ADA
Average weight loss after weight loss phase (week 34)	16 lbs	8.1 lbs
Average weight loss after weight loss and weight maintenance phases combined (week 86)	13 lbs	5.3 lbs
Percentage of participants maintaining at least a 5% weight loss (week 86)	44%	14%
Participants completing the program for the full 86 weeks	16	7
Percentage of participants that reduced their diabetes medication after 34 weeks	24%	0%

Dr. Lawrence J. Cheskin, M.D., F.A.C.P., is a board-certified internist and Associate Professor of Human Nutrition at Johns Hopkins Bloomberg School of Public Health. He is the director and founder of the Johns Hopkins Weight Management Center. He is also the principal investigator on a number of research grants and is a frequent contributor to research and popular articles on weight management.

Dr. Cheskin’s study, “Long-Term Efficacy of 2 Diet Plans for Type 2 Diabetes on Weight Loss and Weight Maintenance,” was funded by Medifast.

Medifast has been helping people lose weight and achieve better health for almost 25 years. Its meal replacement foods have been recommended by over 15,000 physicians and used by more than 1,000,000 customers. Medifast offers its customers world-class customer service, technical and medical support.