

## Time-restricted eating early in day more effective for weight loss

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Time-restricted eating (TRE) by eating early in the day (eTRE) is more



effective for weight loss at 14 weeks than eating over a period of 12 or more hours daily, according to a study published online Aug. 8 in *JAMA Internal Medicine*.

Humaira Jamshed, Ph.D., from the University of Alabama at Birmingham, and colleagues examined whether eTRE is more effective than eating over a period of 12 or more hours in a 14-week trial. Participants were aged 25 to 75 years with obesity and received weightloss treatment. Ninety participants were randomly assigned to eTRE plus energy restriction (ER; eight-hour eating window from 7:00 to 15:00) or control eating plus ER.

The researchers found that the eTRE+ER intervention was more effective for weight loss (–2.3 kg) but did not affect body fat or the ratio of fat loss to weight loss. The effects of eTRE+ER intervention were equivalent to an additional 214-kcal/day reduction in calorie intake. Improvements were seen in diastolic blood pressure (–4 mm Hg) and mood disturbances, including fatigue-inertia, vigor-activity, and depression-dejection for the eTRE+ER intervention. Between the groups, all other cardiometabolic risk factors, food intake, physical activity, and sleep outcomes were similar. eTRE+ER was more effective for losing body fat and trunk fat than the control group in a secondary analysis of 59 completers.

"The eTRE intervention may therefore be an <u>effective treatment</u> for both obesity and hypertension," the authors write.

One author disclosed financial ties to the health and nutrition industry, including being inventor of an app used to measure food intake.

**More information:** Humaira Jamshed et al, Effectiveness of Early Time-Restricted Eating for Weight Loss, Fat Loss, and Cardiometabolic Health in Adults With Obesity, *JAMA Internal Medicine* (2022). DOI:



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Shalender Bhasin, Time-Restricted Eating to Improve Health—A Promising Idea in Need of Stronger Clinical Trial Evidence, *JAMA Internal Medicine* (2022). DOI: 10.1001/jamainternmed.2022.3038

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