



# FitRX

*Optimize your ability to lose  
weight and get **"fit"***



Created for:

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**FitDNARX**  
Unlock the power of your genetic code  
[www.FitDNARX.com](http://www.FitDNARX.com)

# Welcome to Your FitRX Personal Report

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## FitRX Personal Report

June 17, 2019

**Congratulations!** You are about to receive insights about your body that, up until now, have never been available. The science of the human body only recently evolved enough to allow scientists to identify and analyze a person's DNA. Your report not only provides you with a roadmap of your specific genes, but gives direction on how you can potentially optimize your health and well-being with this knowledge.

We spend a lifetime trying to learn more about ourselves, especially how our body works and how our health is affected by our habits and behaviors. Traditionally, we have learned what works and what doesn't through trial and error. *But experience alone doesn't always give us the information we need. Your report will help you to better understand the factors that can affect how your body ticks.*

This report will provide you with results in 4 key areas that can affect the way your body looks and feels. Your report includes an analysis of your genotype for certain key genes that are related to weight management, nutrition and exercise.

## What is Genetic Testing?

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Genetic testing utilizes a physical specimen from the body (saliva, blood, or other tissues) to reveal information about a person's chromosomes or their genes. In addition to identifying key genes, information is evaluated about areas on each gene that may differ between people. These areas are known as single nucleotide polymorphisms (SNPs). We use the term genotype to describe the outcome of your individual genetic tests.

## Which Body Traits Were Analyzed?

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To produce your results we look at genes that are related to four major categories: *Weight Loss Ability, Macronutrients in the Diet, Micronutrients in the Diet and Response to Exercise*. Some of the results are directly related to weight loss efforts from diet and exercise. Other results are relevant because they can affect how you feel and how your body functions optimally. This can affect your performance and your efforts to manage your body weight.

## How Are Your Results Determined?

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We provide a genetic analysis that indicates which gene combinations you have in each category. You will receive a rating based on our calculated score for each trait in a category. Some categories only have one gene associated with that trait; other categories have several genes associated with that trait. Our calculated score reflects the potential combined influences from one or more genes.

We also provide personalized health tips based on the potential implications of these results. In most cases, the outcomes

for a genotype are a response to a specific diet or exercise prescription. For example, many of the results are based on looking at study subjects' response to an exercise program where participants did cardio exercise on only three days per week for a certain amount of time each session. Participants may have differed in their response to this regimen based on their genetics. Some may have had better weight or fat loss results than others. If your results suggest a more unfavorable response, be careful of assuming that this suggests that you cannot lose weight from exercise or from a certain diet. You may simply need a slightly different approach to get more favorable results. In some cases, it is unclear exactly what the ideal approach might be. But we have evaluated your potential genetic response and provided suggestions on how to enhance it based on evidence-based dietary and exercise research recommendations, as well as the experience of our medical team.

Your report uses the best available research on which to base your results. We have established stringent criteria for studies that can be used to help us evaluate the potential impact of your genotype for each gene tested. There are many studies that include genetic analyses, but for a variety of reasons, not all of them are reliable or valid. In determining how to process your genetic analysis, we do not accept just any research that has been performed on a gene. We use the largest and most scientifically valid genome-wide association studies to calculate a score for the different genes or gene combinations. It's important to keep updating the analyses as the science evolves. Your report maintains a continually updated research database, and our analyses are modified as new and better research becomes available. There is still much to learn in the field of genetic analysis. We chose the best available research upon which to base our analysis and recommendations.

## Why Is Your Genotype Important?

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Your genotype reveals the blueprint for your body. The ratings we provide reflect your genotypes for each gene or set of genes. This shows you your potential response, based on your genetic analysis, to different aspects of body weight management (e.g., how you might be affected by different types of diets and regular exercise.) Keep in mind that if your results show the presence of certain genotypes and your result suggest that you will exhibit either an "enhanced" or "below average" response, for example, this does not mean that the outcome associated with that genotype is definitely how your body will or does react.

Your phenotype is the physical manifestation, or expression, of your genotype. But your phenotype may be different than your genotype—not all the genetic variations seen in an analysis are manifested. That's because **how the genes that you have are expressed is largely affected by your lifestyle and other environmental factors**. While your analysis might show that you have an increased or decreased potential for a certain health trait, it does not mean that you will, in fact, express that trait. Your phenotype for the trait may be different than the genotype the analysis shows.

This is very important to keep in mind because there is a tendency to view genotype results as a definitive diagnosis and to assume that you absolutely have certain traits, when this is not what a genetic analysis measures. The analysis only measures your risk for different outcomes, or the likelihood that your phenotype will express what your genotype predicts. Your results only suggest that there is a greater or lesser chance that you may exhibit certain traits or responses. The fields of nutrigenomics and exercise genomics are new, but growing, areas of research. Much still needs to be known to understand about genes and their interactions with each other, and the role in which other influences such as diet, exercise and the environment play in whether you will express a trait associated with a certain genotype.

That said, results from a genetic analysis may provide insights into how your body might perform optimally. If you have a certain genotype for a specific trait, knowing how it might affect you and adjusting your behaviors to maximize this information could make a difference in getting better results from lifestyle changes such as diet and exercise. *We provide personalized suggestions that may help you achieve the best results from your weight management efforts.* Our team considers the results of your genetic analysis, along with an analysis of personal factors that you report which may also influence your body weight, as well as evidence-based guidelines that suggest the most effective strategies for weight management. All of this information combined is used to determine which lifestyle behavioral changes may be most helpful to you.

## What You'll Learn About Your Body

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On the following pages, you will see a summary of your results. You'll learn what your genotypes suggest about your ability to lose weight and body fat in response to different types of diets and exercise programs. You will also gain insights into your potential status for a variety of micronutrients, as well as the likely health effects you may experience from regular exercise. Your analyzed genotype results are followed by a detailed explanation and success strategy. Our medical team has evaluated your potential response and taken in to account what evidence-based research recommendations on diet and exercise suggest are the optimal approach for effective body weight management to provide you with concrete success strategies. This guidance may give you that extra edge in finding the right plan that helps you maximize the results you get from dieting and exercise. While we can't change our genes, we can change our behaviors to take advantage of what our genes say about our bodies.

### REPORT SUMMARY



### WEIGHT LOSS



### FOOD



### NUTRIENTS



### EXERCISE

# REPORT SUMMARY



## WEIGHT LOSS

Metabolism	NORMAL	LEPR, CHRNA3, CRY21
Weight Loss Tendency	BELOW AVERAGE	FTO, TCF7L2, MTNR1B, PPARG, BDNF, ABCB11
Weight Regain	NORMAL	FTO, PPARG, BDNF, NEGR1, TMEM18, KTCD15, GNPDA2
Satiety	NORMAL	FTO
Overweight Risk	NORMAL	FTO



## FOOD

Protein Utilization	NORMAL	FTO
Fat Utilization	LOW	PPARG, TCF7L2, APOA5, CRY2, MTNR1B, PPM1K
Carb Utilization	ENHANCED	IRS1



## NUTRIENTS

Vitamin A Tendency	NORMAL	BCM01
Vitamin B6 Tendency	LOW	NBPF3
Vitamin B9 – Folate Tendency	NORMAL	MTHFR
Vitamin B12 Tendency	LOW	FUT2
Vitamin C Tendency	NORMAL	SLC23A1
Vitamin D Tendency	BELOW AVERAGE	GC, NADSYN1, CYP2R1

# REPORT SUMMARY



## EXERCISE

Fat Loss Response To Cardio	LOW	ADRB2, LPL
Fitness Response To Cardio	BELOW AVERAGE	AMPD1, APOE
Body Composition Response To Strength Training	ENHANCED	NRXN3, GNPDA2, LRRN6C, PRKD1, GPRC5B, SLC39A8, FTO, FLJ35779, MAP2K5, QPCTL-GIPR, NEGR1, LRP1B, MTCH2, MTIF3, RPL27A, EC16B, FAIM2, FANCL, ETV5, TFAP2B
Hdl Response To Cardio	ENHANCED	APOE
Insulin Sensitivity Response To Cardio	ENHANCED	LIPC
Glucose Response To Cardio	NORMAL	PPARG

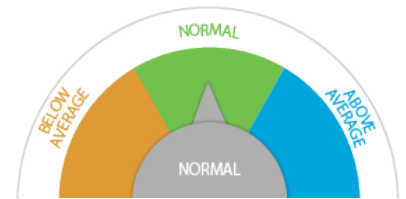


# WEIGHT LOSS

## METABOLISM

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits characteristics that make you likely to have a **NORMAL** RMR and have average responsiveness to diet and exercise in terms of burning fat. You are likely to burn an average number of calories per day outside of physical activity and your resting metabolism may change favorably in response to diet and exercise. That's good news, as RMR accounts for the majority of your calorie burn. You may still want to deliberately expend more energy in your daily life to push your total calorie burn above average and to boost your resting metabolism even further to assist with weight loss.



Your genetic profile indicates you are likely to have a **NORMAL** RMR and to have an average level of metabolic responsiveness to diet and exercise in terms of burning fat

You may burn about the same number of calories at rest as most of your peers and be equally able to raise your resting metabolism

### RELATED GENES / SNPs

**LEPR, CHRNA3, CRY21**

The genes and associated SNPs included in this category have been shown to have significant associations with a person's resting metabolic rate (RMR) and how responsive their metabolism is to diet and exercise in terms of burning fat.

Your metabolism comprises all the chemical reactions that act as your body's engine, turning the food you eat into energy to maintain all the bodily functions you need to stay alive. We measure metabolism in terms of calories burned. RMR is the number of calories you burn when doing nothing more strenuous than sitting and watching your favorite shows.

RMR accounts for about 70% of daily calorie burn in sedentary people. It's influenced by your age, body size and composition, and

### SUCCESS STRATEGIES

Metabolism is not just one "thing," but the combination of many processes that your body performs to use the food you eat and the fuel you store to keep you living and breathing and functioning. Your resting metabolic rate (RMR) is how much energy you use (i.e., calories you burn) at rest.

A high resting metabolism is a coveted quality when it comes to weight loss because it allows you to take a little more leeway in your dietary habits without weight gain consequences. As someone who has a genotype that predisposes you for an average resting metabolism, you likely won't be affected by the occasional indulgence, but will still need to stay on track with your healthy diet, exercise, and lifestyle habits to accomplish your weight loss goals. You may also benefit from taking extra measures to further bump up your RMR in order to make weight loss easier. The following steps will help accomplish those goals.



# WEIGHT LOSS

## METABOLISM

**Know your numbers.** The only way to really know your RMR is to have it tested in a special laboratory. But you can use a formula to get a ballpark estimate of your **basal metabolic rate** or BMR, which is your absolute resting metabolism taken in a dark room upon waking and after fasting. This is a good starting point for understanding your daily resting calorie burn.

Start by using following formula\*:

Men	$BMR = 88.362 + (13.397 \times \text{weight in kg}) + (4.799 \times \text{height in cm}) - (5.677 \times \text{age in years})$
Women	$BMR = 447.593 + (9.247 \times \text{weight in kg}) + (3.098 \times \text{height in cm}) - (4.330 \times \text{age in years})$

\* The Harris-Benedict equations revised by Roza and Shizgal in 1984.

Remember, that number represents the calories your body expends for general functioning. You can estimate how many calories you actually burn in a given day by figuring in your activity level.

Little to no exercise	BMR x 1.2
Light exercise (1–3 days per week)	BMR x 1.375
Moderate exercise (3–5 days per week)	BMR x 1.55
Heavy exercise (6–7 days per week)	BMR x 1.725
Very heavy exercise (twice per day, extra heavy workouts)	BMR x 1.9

**Get up and move once an hour.** Nearly everyone sits too much in our highly automated, computer driven world, and sitting is disastrous for your metabolism regardless of your genotype. When you sit a couple of hours without moving, your body starts to go into energy conservation mode, literally shutting down metabolic functions that keep you healthy. You also store more fat when you're sitting, as opposed to being on your feet. The best way to combat metabolic "sitting disease" is to get up regularly. A study published in the *International Journal of Behavioral Nutrition and Physical Activity* found that people who took six five-minute walks throughout the day—at the top of each hour in this particular study—enjoyed more energy, particularly late in the day, fewer food cravings, and less fatigue than their peers who were sedentary or who took a 30 minute walk in the morning and then sat all day.

gender. As you may have suspected, it's also influenced by your genes, which, depending on your diet, exercise, and lifestyle, can be triggered to influence metabolic factors that ultimately raise or lower your RMR.

In one study of 678 men and women, Canadian researchers found that volunteers with certain genotypes burned about 100 more calories (the amount in about 2 cookies) a day than their peers of different genotypes.

Your genes also can influence how your RMR responds when you diet and/or lose weight. In a large study of 722 overweight adults who were randomly assigned to one of four weight loss diets for two years, researchers found that certain genotypes experienced a 2% increase in RMR, so burned more calories throughout the day, following the intervention.

Your specific genotype also can have an impact on how many calories you burn overnight. One genome-wide association study of 815 children found that certain genetic variants were linked to a 5% to 6% difference in energy burned during sleep.

Our analysis investigated which genotype for these genes was present in your DNA. Your rating of **BELOW AVERAGE**, **NORMAL**, or **ABOVE AVERAGE** reflects whether your genotypes included those that carried the likelihood of having a higher RMR and having a metabolism that is responsive to diet and exercise in terms of burning fat.





# WEIGHT LOSS

## METABOLISM

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Also consider using a standing desk if your job is particularly sedentary. While standing rather than sitting doesn't burn many additional calories—research finds that people who use a standing desk burned only 8 more calories an hour than when they worked sitting down—studies suggest that standing throughout the day is still better for blood sugar control and metabolic health.

**Get your recommended dose of exercise, including some intensity.** RMR is one part of your metabolism. The energy you use during activity is another—and one you can use to your weight loss advantage. Aim for at least the minimum recommended 30 minutes a day of aerobic activity, which Duke researchers have found burns fat best. Also include some short harder efforts, like sprints during studio cycling classes, which fire up your metabolism and keep it fired up longer than more moderate exercise.

**Build your fat-burning engine.** Pound for pound, muscle tissue uses three times as much energy as fat tissue to sustain itself. That makes it a major driver of your metabolism. As you age, muscle decreases and fat increases, both of which dampen your metabolism. If left unchecked, you can expect to lose as much as 5% of your muscle mass per decade after age 30, according to Harvard Health. The solution is strength training. Practice progressive resistance training (where you make your workouts harder by lifting heavier weights or more sets and reps as you get stronger) two to three days a week. And it's never too late to see benefits. One meta analysis of 49 studies, representing 1,328 adults over the age of 50 found that the average exerciser was able to add 2.4 pounds of metabolism-raising lean body tissue through strength training. Research shows that resistance training also helps you maintain the muscle tissue you want while losing the fat you don't when you're dieting.

**Fuel the fire.** To keep your metabolism humming, you must eat, not starve yourself. Your body burns calories when you eat: it's called the thermic effect of feeding, which accounts for about 10% of your daily energy expenditure. Also, when you reduce your food intake too severely your body goes into starvation mode and slows down your metabolism to conserve energy. Eating regular meals and occasional healthy snacks prevents this.

**Prioritize your protein.** Protein burns twice as many calories during digestion as fat or carbohydrates. Increasing your protein also helps change weight-regulating hormones such as GLP-1, peptide YY, cholecystokinin, and ghrelin in your favor, so you feel satisfied longer and have fewer cravings. The Recommended Daily Allowance for protein is 0.8 grams per kilogram (1 pound = 2.2 kg) of body weight. To maintain your metabolism and lose weight Duke Diet and Fitness recommends doubling this amount.

**Quell runaway stress.** Ohio State University researchers found that women who were dealing with stressful work or family situations before eating a high-fat meal burned 104 fewer calories afterwards than their non-stressed peers. They also had higher insulin levels, which encourages fat storage, and lower fat burning. Chronic stress can hinder even an otherwise healthy metabolism and add up to 11 extra pounds a year, according to the researchers' estimates. Try yoga (you'll also get exercise) or another form of relaxation to quell stress.

**Sleep well.** Your metabolism goes into hibernation when you deprive it of sleep. Regularly shortchanging your sleep (especially if you get less than 6 hours a night) wreaks havoc on your energy storage and appetite-controlling hormones, leaving you hungrier and more likely to store rather than burn the calories you eat. Aim for a metabolically healthy 7 to 9 hours of shut eye a night, as recommended by The Sleep Foundation.

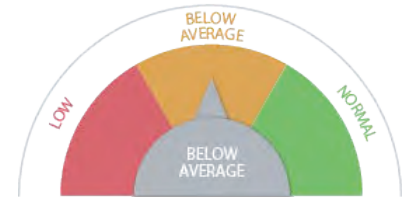


# WEIGHT LOSS

## WEIGHT LOSS TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile is rated **BELOW AVERAGE** for Weight Loss Ability. Your score reflects the fact that among the genes investigated, you had a few of the unfavorable gene combinations that could make you slightly resistant to both losing weight and keeping it off. This means that, compared to someone else with a more favorable genotype, you might lose less weight than someone else with a different genotype when you make lifestyle changes by cutting calories in your diet and by burning extra calories when you exercise. This result also suggests that you may be at a slightly higher risk of later regaining the weight you lose compared to someone else with a more favorable genotype.



Your genetic profile indicate that your weight loss ability is **BELOW AVERAGE**.

You may lose slightly less weight or body fat than expected from a lifestyle intervention. So make sure to choose a well-designed plan and employ strategies to stick with it for the long term.



Does this result mean that you cannot lose weight? Absolutely not! Remember that these results only indicate your potential based on genetic factors, but many other factors also affect the outcome. Even if you have the genotypes that may decrease your ability to lose weight, whether those genes are expressed or not depends upon diet, exercise and environmental influences. However, your results do suggest that it may be a good idea to employ strategies that will maximize your results.

### SUCCESS STRATEGIES

Weight loss comes from reducing the number of calories you eat and increasing the number of calories that you burn from exercise. The most powerful — and permanent — weight loss comes when you do both. Choose a plan that is most likely to work for you. Following the GxSlim suggestions from the genetic analysis of your Food and Exercise genes can help you

### RELATED GENES / SNPs

**FTO, TCF7L2, MTNR1B, PPARG, BDNF, ABCB1**

The six genes and their associated SNPs that are included in this category have all been shown in scientifically sound studies to have statistically significant associations with a person's ability to lose weight and keep it off. Several large studies have shown that people who participated in intensive and long-term diet and exercise programs exhibited significantly different weight loss responses based upon their genetic profile. Those people who carried the most 'unfavorable' pairs of genes, or genes, lost weight with the diet and exercise program—but, on average, they tended to lose less weight compared to other participants who had fewer, or who did not carry the 'unfavorable' genotypes. Also, after completing the diet and exercise program, people with more of the 'unfavorable' genes were, on average, also likely to regain some of the weight that



# WEIGHT LOSS

## WEIGHT LOSS TENDENCY

Identify foods and a fitness plan that may make it easier to lose weight. Different approaches work for different people. Here are some diet and exercise tips that may be helpful.

### TIPS FOR EFFECTIVE DIETING:

- Choose a plan that you will enjoy and that you will be able to stick to. It should include foods that taste good to you and an approach that fits with your lifestyle.
- Pay attention to influences that make it hard for you to choose the right foods or stick to a diet. For example, if you travel frequently and find it hard to eat well on the road, identify foods you can carry with you and the healthiest fast-food choices you might need to rely on.
- Identify reasons why you didn't stick to past diets. Develop back-up plans so that you aren't derailed from your diet if the same, or similar, circumstances arise again. For example, if you know that you will eat an entire bag of chips or package of cookies if you keep them at home, then take them off your shopping list. But give yourself a back-up snack that you can go to when you are having an I-Need-A-Cookie moment. It might be a nutritious nut energy bar, or simply some fresh blueberries.

### TIPS TO GET THE GREATEST EXERCISE CALORIE BURN

- If you are trying to burn more calories through exercise, favor the kind of exercise that burns the most calories in the amount of time that you spend exercising. This tends to be cardio workouts like walking, running, cycling, swimming, aerobics, dancing and any of the cardio machines. You can also get a sizable calorie burn from a fast-paced, boot camp-style or circuit training with weights workout. Slower-paced workouts like yoga and Pilates do not burn as many calories, so if you are doing these types of workout on most days of the week, focus on doing more cardio workouts instead.
- Exercise intensity is key for most people: the harder you work during both cardio and muscle conditioning exercise, the more calories you can burn, and the fitter your muscles and heart will become. But if you are a new exerciser, or if you are trying a new type of workout, you'll need to start easy and, over time, work up to workouts that last longer and feel harder. Start with 10-20 minute walking sessions if you need to, and over weeks add more time to the sessions and work at a harder intensity. When lifting weights, start with light weights and as movements feel easier, work your way up, over time, to using heavier weights.
- If you are a regular exerciser, you may need to push harder than you think. Many people believe that they are exercising intensely, when they are not.
- *For the most effective results, you'll need to burn enough calories to affect your body weight: aim to get in a minimum of 150 minutes and up to 300 minutes per week—or more—of moderate-to-vigorous cardio exercise (e.g., jogging, walking, swimming,*

they had lost. Keep in mind, however, that great individual variation is seen in research studies like these. The stated results are an average of all those within a group, but there can still be differences even among those with the same genotype.

Our analysis investigated which genotype for each of these 6 genes was present in your DNA. Your rating of either **NORMAL**, **BELOW AVERAGE** or **LOW** reflects whether your genotypes included those that carried a risk of reduced weight loss ability.



# WEIGHT LOSS

## WEIGHT LOSS TENDENCY

*etc.). Ideally, you should incorporate some cardio every day, at least five days per week.*

- Weight-training should be a part of your exercise plan. When you lift weights, you can make a diet more effective by preventing or minimizing the loss of muscle that occurs with dieting alone. Plus, certain types of high-intensity weight-lifting (doing circuits with cardio intervals, for example) may help rev your body up to burn a few extra calories in the hours after a workout.
- Reduce your sitting time! While standing more or moving around throughout the day is not considered 'exercise', the physical activity does add up and can help you burn more calories all day.

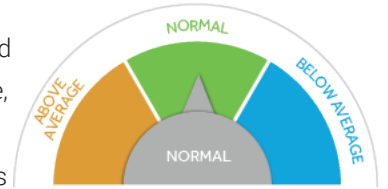


# WEIGHT LOSS

## WEIGHT REGAIN

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits characteristics that make you likely to have a **NORMAL** likelihood of regaining weight following a weight loss intervention. That's not bad news, but it's not necessarily good news, either, given that some reports indicate that, on average, about 80 percent of people regain lost weight and that genetics play a role. That does not mean you are destined to regain your weight, of course. Your genotype is just one of a myriad of factors that influence weight regain. By implementing smart diet, exercise, and lifestyle maintenance strategies, you can help prevent pounds from creeping back on after you've reached your weight loss goal.



Your genetic profile indicates you are likely to have a **NORMAL** likelihood of regaining weight after losing weight through a lifestyle intervention.

In this case, average is not the best scenario, because most people regain pounds following weight loss. You will need to practice weight maintenance behaviors to prevent weight regain.

### RELATED GENES / SNPs

**FTO, PPARG, BDNF, NEGR1, TMEM18, KTC15, GNPDA2**

The genes and associated SNPs included in this category have been shown to have significant associations with a person's likelihood to regain weight after lifestyle induced weight loss.

Losing weight is a two-part process. First there's the hard work and dedication to drop the unwanted pounds; then there's what can sometimes be the even harder work and dedication to keep those pounds from coming back. Research shows that approximately 80 percent of people who lose weight will go on to regain it—a phenomenon scientists have been working hard to understand.

What's clear is that the regain isn't due to one singular factor, but rather a confluence of factors. People often slip back into old

### SUCCESS STRATEGIES

Weight loss is hard work. Maintaining that loss is a lifetime job. That can be difficult news to swallow at first, but the fact is that the vast majority of people who lose a substantial amount of weight will go on to regain most, if not all of it in the following years. Genetics play a role. As someone whose genotype gives you an average likelihood of regaining weight, you'll need to take diet, exercise, and lifestyle steps to make sure your hard earned weight loss sticks. But don't get discouraged. Surveys find that if you can keep the weight off two to five years, your odds of keeping it off become much higher. The following strategies will help.

**Embrace the "new normal."** We often get into the mindset that we need to work hard to lose weight, and then once the unwanted pounds are off, we can get back to "normal." However, it's important to remember that much of



# WEIGHT LOSS

## WEIGHT REGAIN

what was “normal” is what resulted in the weight gain to begin with. To maintain lost weight, you need to adjust your mindset to embrace the “new normal.” That means maintaining the eating, exercising, and lifestyle habits that allowed you to lose weight. That doesn't mean you have to shun special treats for the rest of your life, but it does mean remembering that the new, lighter you is someone who watches portion sizes, eats healthfully most of the time, exercises regularly, and follows the same routines that got you to your weight loss goal.

**Make physical activity a daily priority.** Exercise is essential for weight maintenance. Based on a growing body of research, the American College of Sports Medicine recommends at least 200 to 300 minutes—about 30 to 45 minutes a day—of exercise a week to prevent regain after losing weight. In one weight loss review, researchers found that members of The National Weight Control Registry who had lost an average of more than 70 pounds and kept it off for more than five years exercised about an hour a day.

Regular exercise doesn't just burn calories, but also appears to help your body adjust your appetite according to your new lower body weight. One study found that physical activity appears to make your body more sensitive to leptin, a hormone that helps regulate your body's energy balance by blunting hunger, so you don't have the urge to eat more than you need.

**Tame your appetite.** A groundbreaking study published in the journal *Obesity* confirmed what frustrated dieters have long suspected: weight loss makes you hungry—like really hungry. The study, which analyzed the relationship between weight loss and energy intake, found that weight loss leads to a proportional increase in appetite. Specifically, people ate an additional 100 calories for every two pounds they lost. Exercise helps control your appetite. Smart food choices will also help reduce hunger.

Aim to include fiber-rich veggies in every meal; drink plenty of water throughout the day, opt for complex carbs and healthy fats, and pump up your protein intake. Protein helps tame hunger by increasing hormones that help boost satiety and by reducing hormones that increase hunger, so it's easier to keep your food intake in check.

**Manage stress.** They don't call it “stress eating” for nothing. Uncontrolled stress increases levels of the fight or flight hormone cortisol, which has been linked to increased appetite, impulsive and binge eating, as well as increased belly fat. Practice daily stress management techniques like mindfulness, meditation, or yoga. Exercise also helps relieve stress.

eating habits and let their exercise routines slide. Your metabolism may slow following a significant weight loss, making it harder to keep pounds off. **Your appetite may increase as your body tries to find homeostasis.**

Research shows that your genes also play a significant role in weight regain. In one study of 3,234 overweight or obese adults where participants followed an exercise, medication, and/or lifestyle plan to lose 7% of their body weight, researchers identified three SNPs that were associated with weight regain, regardless of the weight loss method used. The researchers concluded that genetic screening could help identify people who require additional support to maintain weight loss after a treatment intervention.

Another large-scale study on nearly 3,900 overweight or obese adults identified SNPs associated with the FTO gene that were strongly related to weight regain. In fact, among those who had successfully lost weight after one year, those with specific risk alleles (variant forms of a gene) for the FTO gene regained about 3 pounds for every risk allele they carried at the four-year follow-up.

Our analysis investigated which genotype for these genes was present in your DNA. Your rating of **BELOW AVERAGE**, **NORMAL**, or **ABOVE AVERAGE** reflects whether your genotypes included those that carried the likelihood of regaining weight.



# WEIGHT LOSS

## WEIGHT REGAIN

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**Make muscle.** Strength training helps you maintain metabolism-revving muscle while you lose fat. It also helps you keep the weight off by keeping your metabolism humming along. Surveys show that weight lifting is also one of the habits of successful long-term weight loss maintainers. Lift two to three times a week, targeting all your major muscles, to help fend off weight regain.

**Stay on the scale.** You may not love it, but the bathroom scale is one of your strongest allies for maintaining weight loss. Successful maintainers weigh themselves regularly to keep themselves accountable and prevent pounds from slowly slipping back on. It's one of the top habits of "successful losers" in The National Weight Control Registry. One study found that people who weighed in daily ate nearly 350 fewer calories a day, likely because the weigh in made them more mindful of their behaviors the rest of the day, than those who stepped on the scale less frequently. Weigh yourself at least weekly, more frequently if you feel you need extra accountability to keep yourself on the right track.

**Be consistent.** It's normal to want to cut loose and splurge on the weekend, but Saturday night nachos can roll into Sunday morning all-you-can-eat brunch and before you know it, you've slipped back into old habits and derailed your hard earned progress. The National Weight Control Registry reports that eating consistently across weekdays and weekends is one of the top habits of highly successful weight loss maintainers. Consistency can be difficult at first, but once you cement your healthy habits, it will become second nature.

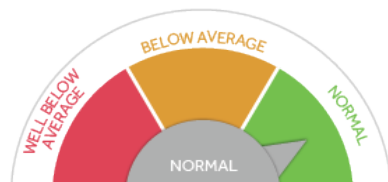


# WEIGHT LOSS

## SATIETY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits characteristics that make you likely to have a **NORMAL** satiety response and likelihood of experiencing food cravings. That means your hunger and appetite regulating hormones ghrelin and leptin will likely respond normally following a meal and you are likely to feel satisfied after eating. You also are likely to have a normal level of food cravings. This is good news, as it will help you maintain healthy portion sizes, resist second helpings, and be less tempted to snack during the day, all of which goes a long way in helping you reach your weight loss goals.



Your genetic profile indicates you are likely to have a **NORMAL** satiety response and likelihood of food cravings.

This makes it easier to watch your portion sizes and keep your snacking in check, both are good news for meeting weight loss goals.

### SUCCESS STRATEGIES

All our lives we are told to only eat when we are hungry and to stop when we are full, maybe even before we are completely full if we want to maintain or lose weight. That feeling of fullness that suppresses hunger after a meal is called satiety, and we now know it is largely influenced by genetics.

Your genotype is favorable for having a normal feeling of fullness after a meal and to not be susceptible to strong food cravings outside of meals. You can maximize your favorable genotype by prioritizing foods that are known to improve satiety, such as high-fiber, whole grain breads and cereals, as well as legumes and fruits and vegetables. A diet that is higher in protein also can help you feel full longer and be less likely to have food cravings between meals and regular snacks.

### RELATED GENES / SNPs

#### FTO

The gene and its associated SNPs included in this category have been shown to have significant associations with a person's satiety, or how likely you are to have difficulty feeling "full" even after eating a meal, as well as how vulnerable you are to having food cravings.

Satiety is triggered by the expansion of your stomach and your "hunger hormones," including leptin, which decreases appetite (also sometimes called the satiety hormone) and ghrelin, which increases it, that are released during digestion and absorption of the food and beverages you take in. All these signals come together in the brain, which then tells you you've had enough to eat.

How well your body produces and responds to satiety signals is also determined by your genes. A number of genes, of which FTO





# WEIGHT LOSS

## SATIETY

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Go easy on known appetite enhancers, especially alcohol, which lowers your inhibitions and may encourage you to eat more than planned (as well as adds empty calories to your daily intake). Also limit sugary beverages, which are high in calories and less satiating than solid foods.

is most prominent, help regulate satiety. Numerous studies have linked SNPs in the FTO gene with higher food intake, decreased satiety response, and dysfunctional appetite regulation.

Specifically, research shows that people with one copy of the A allele for this gene have a higher chance of feeling less satiated, having higher ghrelin and lower leptin levels, and having food cravings. Those born with two copies of the A allele have even greater odds of having low satiety and increased cravings.

Unsurprisingly, there's a strong correlation between satiety and weight, and the impact starts early. One study of 2,258 children found that their satiety responsiveness was strongly linked to both BMI and waist circumference. Low satiety is an important avenue through which your genetic predisposition can lead to weight gain and make it harder to lose weight, especially in today's world, where food is everywhere you look.

Our analysis investigated which genotype for FTO was present in your DNA. Your rating of **NORMAL**, **BELOW AVERAGE**, or **WELL BELOW AVERAGE** reflects whether your genotype included those that carried the likelihood of having low satiety and increased food cravings.

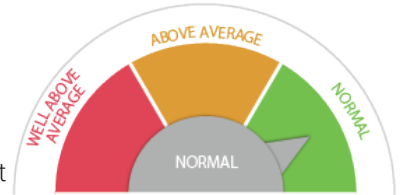


# WEIGHT LOSS

## OVERWEIGHT RISK

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits characteristics that make you likely to have a **NORMAL** likelihood becoming overweight as an adult. That's good news, since genetics play a significant role in overweight risk, but that does not make you immune to the condition. It is still important to take diet, exercise, and lifestyle measures to avoid excessive weight gain, because overweight is a common condition in the US. Currently more than two-thirds of the adult US population is overweight or obese, which can lead to heart disease, stroke, type 2 diabetes, and certain cancers. .



Your genetic profile indicates you are likely to have a **NORMAL** likelihood of becoming overweight during adulthood

That's good news, as overweight is a very common condition and can be hard to reverse. Take advantage of your favorable genotype and protect yourself further through healthful diet, exercise, and lifestyle habits.

### SUCCESS STRATEGIES

Overweight is defined as having a BMI of over 25. As someone with a normal risk for overweight based on your genotype, you can take steps to avoid excessive weight gain by following healthful eating, exercise, and lifestyle behaviors.

Exercise is important for maintaining a healthy weight. Aim to get at least 30 to 45 minutes of physical activity most days a week, which is the amount research suggests can help avoid weight gain. Exercise alone, however, is not enough to prevent weight gain in adulthood. Research shows that what you eat plays a far more significant role in avoiding weight gain.

Following a healthy diet can be a challenge, but it is your best defense against becoming overweight. Portion control is key, as is eating nutritious, filling

### RELATED GENES / SNPs

#### FTO

The gene and associated SNP included in this category have been shown to have significant associations with a person's likelihood of being overweight in adulthood.

The genetics of weight gain are complex. However, when it comes to overweight, the FTO or "obesity gene" as it became known after its discovery in 2007, has by far the strongest association with the risk of becoming overweight as an adult. In one genome wide study involving 38,759 participants, researchers found that those carrying two copies of a variant in the FTO gene—about 16% of the population—were about 1.7 times likely to be obese.

The gene also appears to increase risk across various ethnic populations, according to a meta-analysis including 59 studies and more than 111,500 people of a variety of



# WEIGHT LOSS

## OVERWEIGHT RISK

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foods that will help you control your appetite, such as plenty of vegetables, fruits, lean proteins, healthy fats, and whole grains.

Take extra care to avoid foods that are closely associated with weight gain, specifically soda and sugar-sweetened beverages. A recent study found that the calories from sugar-sweetened drinks cause more weight gain and increase your risk for disease than white bread or potatoes.

ethnic backgrounds.

How the “obesity gene” triggers weight gain is still not entirely known, but it appears to impact the functioning of the hypothalamus of the brain, which is the area responsible for regulating appetite and satiety. Simply, those with the risk-associated FTO allele are genetically prone to have higher circulating levels of ghrelin, otherwise known as the “hunger hormone,” in their blood, have a greater appetite for high calorie foods, and feel less full and satisfied after eating.

Also, while it's clear that FTO plays a significant role in gaining weight, research shows that the gene doesn't appear to interfere with losing weight. In a study of more than 9,500 overweight or obese adults, researchers found that even people carrying the most high-risk variant of the FTO gene lost weight at the same rate, regardless of weight loss method they used, as those with more favorable genotypes.

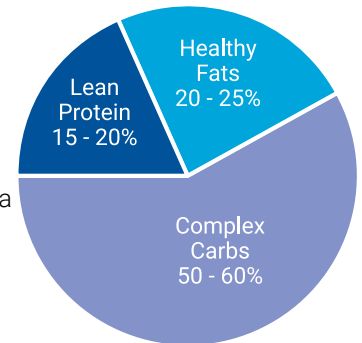
Our analysis investigated which genotype for these genes was present in your DNA. Your rating of **NORMAL**, **ABOVE AVERAGE**, or **WELL ABOVE AVERAGE** reflects whether your genotypes included those that carried the likelihood of becoming overweight or obese.



## SUMMARY

# What foods do you need to eat?

Your genotype suggests that you may have a better response to a weight-loss diet if daily calories come from the following proportions of fat, carbohydrates, and protein. You can monitor this with a diet log.



Based on your gender, age, height, current weight and current activity level, we recommend a diet of approximately **1,935 calories per day** to lose weight. This number was calculated estimating your total energy expenditure, or the number of calories your body needs each day. Since you are interested in losing weight, you will need to eat fewer calories than your total energy expenditure. We suggest a modest calorie reduction of 20 percent. We have calculated this reduction into our calorie recommendation for you, so if you eat around 1,935 calories per day, you can expect to lose weight. This is not a drastic calorie reduction, so you should not feel hungry or like you are denying yourself food if you eat this many calories.

The amount of exercise you get can change your energy requirements. Therefore, you may need to eat more calories than this is if you are performing 45 minutes or more of moderate-to-high intensity cardio exercise on a daily basis.

RECOMMENDATION	PERCENT	GRAMS	CALORIES
<b>PROTEIN</b> Choose a reduced-calorie diet that is between 15-20% protein. Get your protein from mostly plant food sources such as beans, legumes, nuts, seeds, whole grains and vegetables.	15% to 20%	73g to 97g	290 to 387
<b>FAT</b> Choose a diet low in fat and saturated fat. Get your fats mostly from plant foods, but avoid excess added oils.	20% to 25%	43g to 54g	387 to 484
<b>CARBOHYDRATES</b> Choose a plant-based diet that is high in complex carbs (veggies, beans, whole grains, etc.), and avoid simple or processed carbs (fries, chips, crackers, etc.).	50% to 60%	242g to 290g	968 to 1161

The total number of calories or grams of each macronutrient shown represent a recommended amount to consume each day.

It's tough to keep track of this simply by reading food labels. That's because most foods contain a combination of the macronutrients. A food item usually contains either protein and fat (such as meat), carbohydrates and fat (such as oil-sauteed vegetables or French fries), or protein, carbohydrates and fat (beans, nuts and seeds, a chicken salad or a hamburger with a bun).

It's not easy to know how much of any one macronutrient you are getting or if you are achieving your macronutrient goals simply by looking up the content of one food item. To determine your percentages of macronutrients, such as the fat or protein content of



# FOOD

## SUMMARY

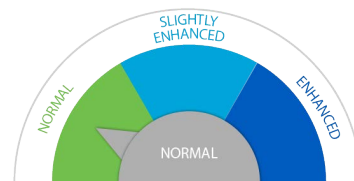
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ALL the foods you eat in a day, you'll need to use a dietary app or online food log. You input what you eat and it will assess your overall macronutrient breakdown at the end of each day. We provide you with sample menus that can give you an idea of what a menu with your recommended macronutrient ranges will look like. But the only way to really know if you are reaching the suggested ranges for each macronutrient is to keep track by entering what you eat into a food log online or on an app.

# PROTEIN UTILIZATION

## WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits a **NORMAL** utilization of protein. Your score reflects the fact that your genotype did not carry the allele combinations that seem to influence weight loss and lean body mass loss in response to the percentage of protein in the diet. *This suggests that the amount of weight or body fat that you lose from a diet is not likely to be affected by the percentage of protein that you eat.*



Your genetic profile indicate that your response is **NORMAL**.

This indicates that the amount of weight you lose from a diet is not likely to be affected by the percentage of protein that you eat. Choose a diet that is 10 to 30% protein from plant or animal food sources.

## SUCCESS STRATEGIES

Your genotype suggests that you are not likely to be affected in terms of greater or lesser amounts of weight loss from eating either a lower or a higher protein diet. However, it is important to note that the percentage of protein that you should eat is relative to the total amount of daily calories you take in, and so what is a “low” vs “high” amount can vary depending upon how many calories you ingest overall.

The body must get a certain minimum amount of protein for normal functioning, and that is considered to be around 10 percent of total daily calories when you are eating enough food to meet your daily energy needs. This minimum amount of protein must be eaten to support processes such as enzyme and hormone production, cell repair and synthesis of skin and hair cells. But this means that when you cut calories by dieting, you may need to opt for a slightly higher percentage of protein because you are eating less food overall.

On the other hand, eating a high percentage of protein is not necessarily

## RELATED GENES / SNPS

### FTO

The gene and associated SNP included in this category has consistently been shown to be associated with body fat mass and BMI. One large study found that people with the unfavorable genotype who dieted lost more weight, body fat and fat in the torso if they ate a moderate-to-high protein diet (25% of total daily calories) compared to a lower protein diet (15% of total daily calories), regardless of fat and carbohydrate distribution. However, they also lost more non-fat mass—which includes muscle—with the weight loss.

Our analysis of your genes investigated which genotype for this SNP was present in your DNA. Your rating of either **NORMAL**, **SLIGHTLY ENHANCED** or **ENHANCED** reflects whether your genotype included those alleles that exhibited protein sensitivity because their presence resulted in increased weight and fat loss on a moderate-to-high protein, reduced-calorie diet.

## PROTEIN UTILIZATION

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beneficial, especially if you are not dieting. This is because excess protein is not stored in the body. If you consume more calories than you burn, the insulin release that is triggered by dietary protein (as well as by carbohydrates) spurs any excess amino acids from protein to be converted to body fat.

If you are dieting and therefore eating a reduced-calorie diet, consuming a “high” percentage of protein is recommended so that you make sure to obtain the minimum amount your body needs. The recommended daily allowance for protein is determined based on your body weight. On average, the recommendation is to obtain between 0.8 and 1 gram of protein per 1 kilogram of body weight. So if you weigh 175 lbs, or 80 kg, it is recommended that you get between 64 and 80 grams of protein per day. That means if you eat 2,500 calories daily while on a normal food plan, you can get this amount by eating between 10% and 13% protein in your diet. But if you go on a calorie-reduced diet and consume only 1,500 calories, to reach your quota you may need to eat a slightly higher percentage of protein, around 17 percent to 21 percent protein.

It's a good idea to get a sense of how much you are getting by recording your food intake for at least a week and entering it into a diet app or online nutrition log that can calculate the percentage of each of the macronutrients you eat.

### SUGGESTED PROTEINS

*suggested servings contain listed grams of protein*

Chicken Breast (3oz) - 25g

Ground Turkey (3oz) - 22.5g

Lean Beef (3oz) - 22g

Broiled Fish (3oz) - 20g

Lentils/Black Beans (1/2c) - 9g

Turkey (3oz) - 24g

Pork/Lean Ham (3oz) - 18g

Lamb (3oz) - 21g

Quinoa (1/2c) - 12g

Tofu (1/2c - 4.4oz) - 11g

## FAT UTILIZATION

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits a **LOW** utilization of fat. Your score reflects the fact that for the genes investigated, your genotype includes some of the unfavorable allele combinations. This means that you may be sensitive to the amount and type of fat in your diet. Research has shown that people with a similar genotype profile tend to have more body fat when they have more fat in their diet

and they lose less weight when they are on a diet that contains a high amount of fat, especially saturated fat. This result also suggests that you may have a reduced level of fat oxidation, or fat-burning ability, when you eat a high fat diet.



Your genetic profile indicates that your utilization of fat is **LOW**.

You may be sensitive to too much total fat and/or too much saturated fat in your diet. If you are dieting, or reducing calories to create a negative energy balance, you may experience less weight loss with a higher-fat diet. Aim for a low total fat and low saturated fat, reduced-calorie diet.

### SUCCESS STRATEGIES

Since your genes suggest that you may be sensitive to the fat in your diet and that you may be less efficient at burning fat when you eat a high fat diet, following a low fat diet and keeping saturated fat to a minimum may help you to control your body weight and body fat, and to lose more weight when you diet.

### RELATED GENES / SNPS

**PPARG, TCF7L2, APOA5, CRY2, MTNR1B, PPM1K**

The six genes and their associated SNPs that are included in this category all have been shown in scientifically sound studies to have statistically significant associations with how sensitive people are to eating a diet high in fat. In other words, these studies showed that the amount of fat in the diet affected how much weight individuals lost from a lifestyle intervention depending on the genotype at these genes. One study found that those people with an unfavorable genotype were more likely to have more body fat, a larger waist size and a higher BMI the more fat they ate, compared to others without the same genotypes. Another study found that people with a protective genotype appeared to be able to consume greater amounts of fat, but without exhibiting higher BMIs. Another study found that people who went on a low-calorie diet that was higher in fat lost less weight if



# FAT UTILIZATION

## SO HOW MUCH FAT SHOULD YOU EAT?

There are varying definitions of what is considered “low fat.” Studies that look at dietary fat vary in how they quantify fat and there is no clear consensus on what constitutes a “high fat” vs. a “low fat” diet. The Acceptable Macronutrient Distribution Range (AMDR) for dietary fat that is recommended by the Institute of Medicine is a daily fat intake that is between 20% and 35% of total daily calories and it is recommended to eat less than 10% of calories from saturated fats.

A “high fat” diet is usually considered to be one consisting of a percentage of fat intake on the upper end of the AMDR range, so from 30% to 40% of the day's total calories. People who eat a lot of fast food and animal foods like meat and cheese can have fat intakes that are 50% or greater. However, some people who choose to eat a very low carb diet may consume up to 60% or 70% fat.

A “low fat” diet is usually considered to be one consisting of a percentage of fat intake that is on the lower end of the AMDR range, so from 15% to 25% of the day's total calories.

Since your genetic profile indicates that you might benefit from a lower-fat diet, it is suggested that you aim for the lower end of the fat intake range, so from 20% to 25% of total calories coming from fat, and very little saturated fat.

Although some media reports have recently reported that high amounts of saturated fat are not harmful, these opinions are based on only a few research studies that have been criticized for having major flaws. Among them is the fact that the “low fat” diets that were compared with higher fat diets weren't really “low fat” and there was, in fact, not much of a difference in the fat percentage of the diets. The overwhelming consensus from research to date is that saturated fat has deleterious health effects and should be consumed sparingly, less than 10% of total calories or lower.

Certain foods are labeled as high in certain kinds of fat, but what many people do not realize is that foods that contain fat tend to contain an array of all of the different types of fatty acids. One food item like cheese, chicken or a peanut will contain both saturated and the unsaturated types of fat (mono and poly.) But each food will be higher in a certain type over another, and ratios of the varying fats within a food will vary. Whichever fat is considered to be the most prevalent type is how a food is usually characterized. Even though all animal foods contain both saturated and unsaturated fats, since they are especially high in saturated fats, they are considered to be a major source of both total fat and especially saturated fat, even in the “leaner” versions of the food. This is why if you tend to eat meat and/or dairy foods at every meal, your diet is likely to not only be high in total fat, but high in saturated fat, as well. Diets high in either saturated fat or animal foods have been associated with higher risks of certain diseases such as heart disease.

It's tough to know how much fat you get unless you are actively tracking what you eat and entering it into a diet app or online nutrition log. You might find it helpful to first determine how much fat you are currently eating so that you can identify ways to decrease it to desired levels if it is too high.

they had an unfavorable genotype.

Our analysis of your genes investigated which genotype for each of these 6 genes was present in your DNA. Your rating of either **NORMAL** or **LOW** reflects whether your genotypes included those that carried a risk of reduced weight loss ability from a diet that was high in fat.

# FAT UTILIZATION

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If you are eating more fat than is recommended, analyze what you eat and use the tips below to reduce the fat.

## EASY WAYS TO REDUCE YOUR TOTAL FAT:

- Stick to a plant-based diet: Eat fewer — or cut out completely — animal foods (meat, poultry and dairy foods).
- If you eat animal foods, choose leaner or lower-fat versions. Since even lean meats still contain fat, including saturated fat, control portion sizes and avoid eating meat at every meal, or even every day.
- Substitute plant versions of animal foods: Try almond, soy or coconut-based yogurts, substitute plant milks (soy, almond, rice, etc.) for dairy milk.
- Identify foods you prepare that you normally add fat to (oil, butter, cream, cheese, meat) and try to find a non-fat substitute. For example, if you normally add oil and bacon to cooked beans, skip both and add red peppers and jalapenos for flavor instead. Or if you butter your toast, spread with a bean dip instead. Saute vegetables in vegetable broth rather than in olive oil.
- Reduce the amount of oil you use, or omit it completely.

## TO REDUCE SATURATED FAT:

- Try vegan cheeses (such as nut cheeses made from cashews, almonds or macadamia nuts), but control portions since they still contain unsaturated fats.
- Use healthy oils (sunflower, safflower, coconut) instead of butter or cream for cooking or seasoning, but control portions since they still contain unsaturated fats and can add to your daily total fat intake.
- Choose plant-based spreads instead of using butter. Use peanut butter, hummus, pesto sauce, avocado, etc. Watch portions, since the unsaturated fats can still add to your total fat intake.

## SUGGESTED FATS

*suggested servings contain listed grams of fat*

Avocado (1/2 fruit) - 10g

Coconut Oil (1T) - 14g

Olive Oil (1T) - 14g

Nut Butters (1T) - 8g

Coconut (1 piece, 2" x 2" x 1/2") - 15g

Olives (1T) - .9g

Nuts/Seeds (1/4c) - 13g

Butter (1T) - 12g

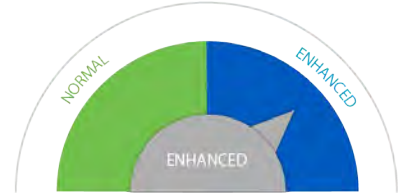
Oils (1T) - 14g



## CARB UTILIZATION

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits an **ENHANCED** utilization of complex carbohydrates. Your score reflects the fact that your genotype appears to favor a higher complex carbohydrate diet. You may experience better weight loss results from a diet that focuses on complex carbohydrates that make up a majority of your daily calories.



Your genetic profile indicates that your utilization of complex carbohydrates is **ENHANCED**.

This suggests that you may experience the best weight loss results if you follow a diet that is higher in complex carbohydrates. This means that you should focus on including more whole, unprocessed plant foods in your diet, including beans, whole grains, nuts, seeds, fruits and vegetables. Use added oils sparingly. Instead of sautéing vegetables in olive oil, for example, use vegetable broth.

### SUCCESS STRATEGIES

#### *Eat more complex carbohydrates*

- People who eat diets high in complex carbohydrates tend to be leaner, and this diet approach provides optimal energy and nutrients. Complex carbs are unprocessed carbs; strive to eat whole plant foods as opposed to processed, "junky" carbs. Eat a potato instead of potato chips, eat beans instead of white bread, eat whole fruits instead of fruit juices.

### RELATED GENES / SNPS

#### IRS1

The gene and associated SNP included in this category has been shown to be associated with a person's insulin sensitivity and the effects of carbohydrates in the diet. Insulin is a hormone produced by the body that helps cells take in glucose, or sugar, that is present in the blood after the digestion of carbohydrates in foods. All cells use glucose for fuel, and brain cells and red blood cells use glucose as a primary source of energy. If cells have trouble absorbing blood sugar, the body releases greater amounts of insulin to help. Increased amounts of insulin can lead to insulin resistance. People who are overweight and/or physically inactive are at higher risk of insulin resistance and the condition can lead to diabetes, or uncontrolled high blood sugar. Greater amounts of insulin released can also encourage fat storage.

Since carbohydrate intake triggers insulin release, many people assume that eating more carbs is not healthy and can lead

## CARB UTILIZATION

- Unprocessed foods that contain carbs include legumes (beans), whole grains (such as brown rice, quinoa and oats), nuts, seeds, vegetables and fruits. Keep in mind that most of these foods also contain protein and some (nuts, seeds, avocados and beans) also contain some fat.
- Use the glycemic index (GI) as a tool to help choose foods. The glycemic index is a rating assigned to foods that contain carbohydrates that reflects their potential effects on blood glucose levels. The higher the GI number, the faster a food may be digested and absorbed, potentially resulting in higher blood glucose levels and greater insulin release. However, there is great inter-individual variation in tested foods and in people's responses, so a food's stated GI value may vary. Also, other factors affect a GI number, including the other foods that will be eaten at the same meal.
- Foods high in carbohydrates that are more processed may have higher GI numbers. So this tool may help you identify foods that may be more or less processed and this may help you make more nutritious food choices. Some people believe that choosing low glycemic foods can aid weight loss, but there is no evidence that glycemic index affects body weight. How many calories you consume, no matter the type, is the best predictor of weight loss: the fewer you eat, the more weight you will lose.

to body fat and weight gain, as well as diabetes. But the relationship is not that simple: many people who eat a high carbohydrate diet are not overweight and do not have diabetes. The type of carbs consumed as well as other foods in the diet and physical activity levels can all play a role. The gene in this category seems to influence insulin resistance and the body's response to carbs in the diet. One long term study found that people with a variant of this gene who ate a high carbohydrate, low fat diet, that consisted of high fiber, whole plant foods, as opposed to processed, lower fiber carbs, had greater insulin sensitivity—and lower levels of insulin and insulin resistance—and experienced greater weight loss compared to a lower carb, higher fat diet.

Our analysis of your genes investigated which genotype for this gene was present in your DNA. Your rating of either **NORMAL** or **ENHANCED** reflects whether your genotype included those genes that increase risk of reduced weight loss ability from a low carb, higher fat diet.

### SUGGESTED CARBOHYDRATES

*Preferred Vegetables - 1 1/2 cups raw or cooked contains 15g of carbohydrates*

Artichoke	Eggplant	Radishes
Asparagus	Green onions or scallions	Salad greens
Bean sprouts	Greens (collard, kale, mustard, turnip)	Sauerkraut
Beans (green, wax, Italian)	Kohlrabi	Spinach
Beets	Leeks	Summer squash
Broccoli	Mixed vegetables (no corn or peas)	Tomato (canned, sauce, juice)
Brussels sprouts	Mushrooms	Turnips
Cabbage	Okra	Water chestnuts
Carrots	Onions	Watercress
Cauliflower	Pea pods	Zucchini
Celery	Peppers	
Cucumber		

# CARB UTILIZATION

## *Preferred Legumes (Beans) - 1/2 cup contains 15g of carbohydrates*

Garbanzo/Chickpeas	Kidney beans	Split peas	Edamame beans
Pinto beans	White beans	Black-eyed peas	Navy beans
Northern beans	Black beans	Lentils	Mung
Fava/Broad beans			

## *Preferred Starchy Vegetables - suggested serving size contains 15g of carbohydrates*

Peas, green (1/2 c)	Yam, sweet potato, plain (1/2 c)
Red/New Potato, baked or boiled, 1 small (3 oz)	Squash, winter - acorn, butternut (1 c)

## *Preferred Fruits - suggested serving size contains 15g of carbohydrates*

Apple, unpeeled, 1 small (4 oz)	Grapes, 17 small (3 oz)	Pear, fresh, 1/2 large (4 oz)
Apricots, fresh, 4 whole (5 1/2 oz)	Honeydew, 1 slice (10 oz or 1 c cubes)	Pineapple, fresh 3/4 c
Banana, small 1 (4 oz)	Kiwi, one (3 1/2 oz)	Plums, 2 small (5 oz)
Blackberries (3/4 c)	Mango, small, 1/2 fruit (5 1/2 oz or 1/2 c)	Raisins (2 T)
Blueberries (3/4 c)	Nectarine, 1 small (5 oz.)	Raspberries (1 c)
Cantaloupe, small (1/3 melon or 1 c cubes)	Orange, 1 small (6 1/2 oz)	Strawberries, whole berries (1 1/4 c)
Cherries, sweet, 12 fresh (3 oz)	Papaya, 1/2 fruit (8 oz or 1 c cubes)	Tangerines, 2 small (8 oz)
Grapefruit, 1/2 large (11 oz)	Peach, fresh, 1 medium (6 oz)	Watermelon, 1 slice (13 1/2 oz or 1 1/4 c cubes)

## *Preferred Grains - 1/2 cup contains listed grams of carbohydrates*

Couscous - 15g	Quinoa - 28g	Oats - 15g
Kamut - 26g	Barley - 22g	Amaranth - 23g

## PROCESSED/LESS DESIRABLE CARBOHYDRATES

### *Less Desirable Starchy Vegetables*

Mixed vegetables with corn or peas	Corn on the cob	Corn
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### *Less Desirable Grains*

Bread	Cereal	Rice
Bagel	Crackers	Pasta
Pancake/Waffle		



## SUMMARY

### What nutrients do you need?

NUTRIENTS	TENDENCY	GOOD SOURCES INCLUDE
Vitamin A	NORMAL	Carrots, Kale, Tuna
Vitamin B6	LOW	Pistachios, Watermelon, Potatoes
Folate	NORMAL	Pinto Beans, Asparagus, Broccoli
Vitamin B12	LOW	Lean meat, Seafood, Fortified Dairy Product
Vitamin C	NORMAL	Red Bell Peppers, Strawberries, and Oranges
Vitamin D	BELOW AVERAGE	Salmon, Egg Yolks, Fortified Dairy Milk

#### HOW DO MICRONUTRIENTS AFFECT MY BODY WEIGHT?

Micronutrients have not been shown to have a direct effect on body weight or body fat. So why are they included in this genetic analysis?

The vitamins tested play important roles in a variety of functions in the body that may affect your body weight—or your ability to manage it.

Many micronutrients are involved in the body's metabolism of fat, carbohydrates and protein. When you are eating and exercising, you want your metabolism to function smoothly. The body does find ways to cope when some nutrients are not available. But for optimum performance and energy, you'll do best when your body has all it needs to work properly.

Some nutrients such as vitamin C and vitamin D may not affect body weight directly, but they play a role in bone health, inflammation and healing. The stresses you put your body under when exercising may be bolstered if you are well nourished in these nutrients.

#### DO MY RESULTS SHOW THAT I AM LOW IN NUTRIENTS?

If you scored **LOW** or **BELOW AVERAGE**, your genotype results show that you may have a higher risk for having blood levels of certain nutrients that may be in the lower end of the normal range. For a few nutrients, such as vitamin B12, it may be optimal to be in the mid range of normal, or higher. This genotype risk assessment is based on studies where study participants with certain genotypes for the various nutrients tested were shown to be more likely to be in the lower end of the normal range for a nutrient.

Be careful of assuming these results indicate you are low, or deficient in a certain nutrient. The only way to know for sure if you are in the low end of the normal range for a nutrient, or if you are actually deficient, is to consult with your physician and get a specific blood test designed to assess a specific nutrient. This genetic test can only assess your risk; the blood test is what can assess your actual levels.



## SUMMARY

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### WHICH FOOD CHOICES FOR CERTAIN MACRONUTRIENTS ARE THE BEST FOR ME?

Our genetic testing analyzes your genotype and assesses your potential levels of macronutrients. This testing does not test your individual sensitivity or response to certain foods that may contain these macronutrients. You may have other individualized responses that are not detected in the genetic tests. For example, you may be allergic to the proteins in dairy foods. Or you may have a negative response to the lactose sugars in dairy products. This report cannot inform you about these reactions. Any food recommendations that are suggested to help you obtain certain nutrients should be modified based on other factors that you may already know about.

### HOW CAN I MONITOR MY NUTRIENT INTAKE?

Your body absorbs a certain amount of nutrient as food or supplements are digested. Then your body uses or stores the nutrient as needed. There are many factors that affect how much of a nutrient you take in, how much of a nutrient is absorbed and used by your body, and whether your body stores are in the normal range.

Your genotype for certain nutrients can indicate that you may be at risk for having lower levels of certain nutrients. But since the genotype analysis is not measuring what you eat, the supplements you take, or actually measuring levels in your blood or tissues, the genotype analysis alone cannot relate your true status.

People who are low or deficient in a nutrient may absorb more from food than someone who is not deficient. A person who needs more of a certain nutrient may absorb more of it from a food than someone who has normal levels. There are also other factors that can affect absorption positively or negatively, and that can affect how your body uses what you take in.

How do you know what your true nutritional status is? A blood test is generally the only way to truly test your true nutritional status. What is in the blood when tested may not always reflect what is in the tissues or how much is being used by the body. But at present, this is the measure used for most nutrients. There may also be different blood tests that monitor the same nutrient.

Keep these factors in mind as you interpret your genotype results and the suggestions given. No one result is going to give you all the information you need. But taken together, the results of your genotype analysis, along with a blood test can help you spot potential areas where you can optimize your nutrition.

### SHOULD YOU TAKE A SUPPLEMENT?

Most nutritionists recommend that nutrients be obtained first through food. Research studies have tended to show more favorable outcomes when research participants obtained nutrients from food sources rather than from supplements. Nutritional experts vary in their opinions about whether people should take supplements or not.

Most supplements are considered safe. But be cautious with dosing because research on appropriate levels has identified ranges for some nutrients beyond which toxic effects can occur. These ranges are known as the Upper Intake Level, or UL. It is difficult to reach the UL by getting the nutrients from food, but it is easy to reach these high risk levels from supplementation.

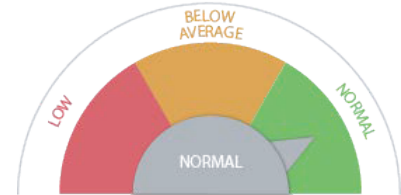
If you do choose to supplement, keep track of the nutrients you get from all foods. Read food labels since some foods that you eat may also be fortified in the supplements you are taking. Use dietary software to input what you eat and supplement with so you can keep an estimate of your total nutrient intake and will be less likely to overdose. Also consult with your doctor if needed. Some supplements, including vitamin A and vitamin B6, can interact with medications you may be taking.



## VITAMIN A TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits a **NORMAL** ability to process vitamin A from a beta-carotene supplement. Your score reflects the fact that, for the gene investigated, your genotype showed few, if any, of the allele combinations that showed a diminished response to converting high doses of beta carotene from a supplement into its more active form.



Your genetic profile indicates that your response is **NORMAL**.

This suggests that your ability to convert high doses of beta-carotene from a supplement into an active form of Vitamin A is unlikely to be reduced.

This means that if you take a beta-carotene supplement, your ability to convert the nutrient into an active form of vitamin A is not likely to be reduced. It is unclear what this genotype suggests about converting betacarotene from food sources, however.

### SUCCESS STRATEGIES

Vitamin A is needed for good vision and needs may increase in women who are pregnant or lactating. It is easy to get vitamin A in foods, and the plant forms of beta-carotene also act as a free-radical fighting antioxidant. Based on this result, it appears that you are unlikely to have problems converting beta-carotene into the active form of vitamin A. But do make sure to get enough beta-carotene and/or vitamin A from foods you eat.

### RELATED GENES / SNPs

#### BCM01

The gene and its associated SNPs that are included in this category have been shown to have statistically significant associations with a person's blood levels of Vitamin A. Vitamin A promotes good vision, is involved in protein synthesis that affects skin and membrane tissues, and helps support reproduction and growth. The nutrient is found in plant foods in its precursor forms such as beta-carotene. Beta-carotene is converted by the body into different active forms of Vitamin A: retinol, retinal and retinoic acid. Animal foods, such as meat and dairy, provide the retinol form of Vitamin A.

It is rare to over-consume beta-carotene in plant foods to reach toxic levels. However, it is possible to consume toxic levels of Vitamin A from organ meats or fortified foods. Pregnant women are advised to eat liver no more than once every two weeks.

Vitamin A in the form of beta-carotene is found in foods such as vegetables, especially





## NUTRIENTS

### VITAMIN A TENDENCY

especially leafy greens like spinach and orange foods such as carrots, sweet potatoes, apricots, mango and cantaloupe, as well as in the retinol form in dairy and in organ meats like liver.



#### VITAMIN A-RICH FOODS TO INCLUDE IN YOUR DIET:

Broccoli, Swiss chard, collard greens, kale, carrots, butternut squash, apricots, goat's cheese, liver, tuna.

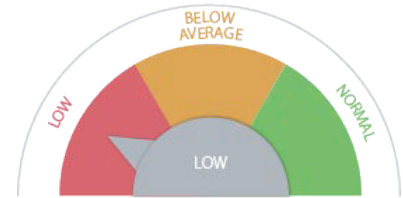


# NUTRIENTS

## VITAMIN B6 TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic response is **LOW**. Your score reflects the fact that your genotype showed the most unfavorable allele combination. This means there is a risk that your blood levels of B6 may be lower than normal. Keep in mind that increased risk does not mean that your blood levels are low. You can only know this by requesting a blood test from your physician or other healthcare provider.



Your genetic profile indicates  
that your response is **LOW**.

indicating that you are at risk for having low levels of Vitamin B6. Check your status by asking your doctor for a blood test. Eat enough B6-rich foods and supplement if you are low.



### RELATED GENES / SNPs

#### NBPF3

The gene and its associated SNPs included in this category have been shown to have statistically significant associations with a person's blood levels of Vitamin B6. In one large study, people who carried the most unfavorable pairs of genes, or alleles had lower levels of Vitamin B6.

Vitamin B6 is important for nerve cell function, energy metabolism and the production of hormones, such as serotonin and epinephrine. Low levels of B6 are also linked to higher levels of homocysteine, which increases heart disease risk. B6 is found in many foods including grains, legumes, vegetables, milk, eggs, fish, lean meat and flour products.

### SUCCESS STRATEGIES

Since you are at risk for having lower levels of Vitamin B6 in your blood, it is especially important that you get adequate amounts of this nutrient in your diet. Monitor your intake by keeping a food log and using a dietary app to obtain a nutrient analysis to see how much Vitamin B6 you consume. It's a good idea to keep a food log periodically, especially if you go through periods in life where you are aware that you may not be eating properly.

If your blood tests show low levels, you may wish to take a Vitamin B6 supplement. Be sure to avoid high doses, as they can cause nerve damage.



# NUTRIENTS

## VITAMIN B6 TENDENCY



### VITAMIN B6-RICH FOODS TO INCLUDE IN YOUR DIET:

Pistachios, pinto beans, wheat germ, bananas, watermelon, carrots, spinach, peas, squash, potatoes, avocados, yellowfin tuna, sunflower seeds

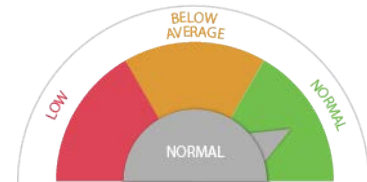


# NUTRIENTS

## VITAMIN B9 – FOLATE TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile is **NORMAL**. It appears that you are likely to have normal blood levels of folate. This suggests that you may not have to worry about increased heart disease risk from higher levels of homocysteine.



Your genetic profile indicates that your response is **NORMAL**.

You appear to be likely to have normal blood levels of folate. To make sure you get enough, make sure to eat plenty of whole plant foods every day.

### SUCCESS STRATEGIES

- All women should ensure they get enough folate in their diet. You will get folate that is added to whole grains in cereals and breads, but you should also eat other food sources of folate. The foods highest in folate include legumes, fruits and vegetables, especially greens.
- Smoking can also decrease folate levels. You may need to consume more through food and/or supplements if you smoke — or better yet, quit smoking!
- If you eat few vegetables and fruits, your folate intake and blood levels may be low, despite having a more favorable genotype. You may wish to ask your doctor to assess your levels of serum folate with a blood test.

### RELATED GENES / SNPs

#### MTHFR

This gene and its associated SNPs have been shown to have significant associations with a person's folate, or vitamin B9, status. Folate plays many important roles in the body, including acting as a coenzyme in DNA creation and in energy metabolism reactions. Folate also plays a role in biochemical processes that affect the metabolism of an amino acid, homocysteine. One SNP associated with this gene is associated with enzyme activity that can lead to higher levels of homocysteine. Since homocysteine is a risk factor for heart disease, high levels may be of concern. In child-bearing women, getting sufficient amounts of folate is important because low levels can lead to neural tube birth defects. As a public health measure, grains are fortified with folate to ensure that women of childbearing age get enough. Low levels of folate can also lead to anemia.

In studies on this gene, people who carried the most unfavorable pairs of genes, or alleles, had only a 10%-20% efficiency



## NUTRIENTS

### VITAMIN B9 – FOLATE TENDENCY

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at processing folate. And those with the below average allele had a 60% efficiency at processing folate. People with more of the unfavorable alleles are more likely to have high homocysteine and low Vitamin B12 levels. Poor ability to process folate may be fairly common: Around 53% of women appear to have these unfavorable genotypes.



#### **FOLATE-RICH FOODS TO INCLUDE IN YOUR DIET:**

Lentils, pinto beans, asparagus and broccoli are excellent sources of folate.



# NUTRIENTS

## VITAMIN B12 TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic response is **LOW**. Your score reflects the fact that your genotype showed a higher risk allele combination. This suggests that you may have a chance of having blood levels of Vitamin B12 that are at the low end of the acceptable range. This does not mean that you are likely to be deficient, but even levels at the low end of the normal range have been associated with subclinical symptoms.



Your genetic profile indicates that your response is **LOW**.

This suggests that your blood levels of Vitamin B12 may be at the low end of the acceptable range. Ask your doctor to check your Vitamin B12 levels and get them checked on a regular basis. If your levels are low, in addition to getting more Vitamin B12 through foods, you may wish to supplement.

Since Vitamin B12 is stored in the body and is also recycled for reuse, it can take several years before deficiency symptoms may appear.

### SUCCESS STRATEGIES

Since you may be at risk of having lower Vitamin B12 levels, it is recommended to speak to your doctor about getting periodic blood tests to monitor your levels of Vitamin B12, as well as a related test for methyl malonic acid (MMA.)

Monitor your intake with a food log using a dietary app that will give you a nutrient analysis of what you eat. If your intake appears to be low, you may wish to supplement or include more fortified foods, especially if you are a vegan.

A blood test can assess how well nutrients from food and supplements are absorbed. If absorption is impaired, your blood levels may still be low despite

### RELATED GENES / SNPS

#### FUT2

The gene and associated SNPs included in this category have been shown to have significant associations with a person's blood levels of Vitamin B12. In one large study, those women who carried the most unfavorable pairs of genes, or alleles, had slightly lower levels of Vitamin B12, although they were in the acceptable, but low, end of the range. Around 70% of people have genotypes that suggest they may be at risk for having blood levels of B12 that are at the lower end of the normal range. There are several reasons why blood levels of B12 can be low. Some people do not get enough in their diet and so they are simply not getting enough of the nutrient. Some other people get enough, but do not absorb it efficiently. A small percentage of people over 50 or those who have had gastrointestinal surgery or GI disorders such as Crohn's disease may also have reduced abilities to absorb it.

Vitamin B12 is important for many processes in the body, including red blood



# NUTRIENTS

## VITAMIN B12 TENDENCY

an adequate intake. If absorption may be a problem, it is often recommended to bypass the digestive system with either under-the-tongue tablets that are absorbed into the mouth, or injections or a nasal gel which are both available by prescription.



### VITAMIN B12-RICH FOODS TO INCLUDE IN YOUR DIET:

Lean meat, seafood, dairy products, eggs, fortified nutritional yeast, fortified plant milks.

cell formation, neurological function and cognitive performance. Deficiencies of B12 can cause pernicious anemia, and is also associated with high levels of homocysteine, which may impair arteries and increase risk of heart disease. There is some evidence that subclinical symptoms may be associated with being in the low end of the normal range.

Vitamin B12 is produced by microorganisms found in soil and water, and in both the guts of animals and humans. In the modern world, highly-sanitized food processing systems have eliminated many naturally-occurring sources of B12-providing bacteria in plant products. So B12 is typically obtained from animal foods such as meat, or fortified foods such as dairy and plant milks or breakfast cereals. Certain mushrooms and seaweed may provide some B12, but are not considered to be reliable sources.

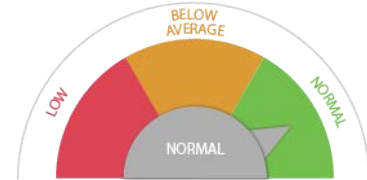


# NUTRIENTS

## VITAMIN C TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile suggests that you are likely to have **NORMAL** levels of Vitamin C. Your score reflects the fact that for the gene investigated, your genotype did not show the unfavorable allele combinations. This means that if you consume enough Vitamin C in the foods you eat, blood levels of L-ascorbic acid should be in the normal range. If you smoke, however, you may deplete some of your Vitamin C and may need more.



Your genetic profile indicates that your response is **NORMAL**.

If you eat enough Vitamin C-rich foods, you should have normal levels in your blood.

### SUCCESS STRATEGIES

- To ensure your body gets the Vitamin C it needs, make sure to include a wide variety of plant foods, including citrus in your diet.
- If you wish to supplement with Vitamin C, avoid very high doses because they can cause diarrhea and gastro-intestinal distress.



### VITAMIN C-RICH FOODS TO INCLUDE IN YOUR DIET:

Broccoli, red bell peppers, kiwi fruit, Brussels sprouts, strawberries, oranges, watermelon, pinto beans.

### RELATED GENES / SNPS

#### SLC23A1

The gene and associated SNP included in this category has been shown to have statistically significant associations with a person's blood levels of L-ascorbic acid, or Vitamin C. Those people who carried more unfavorable pairs of genes, or alleles, were more likely to have lower blood levels of the nutrient.

Vitamin C is a nutrient that has many functions in the body, including acting as an antioxidant, and is needed for skin and membrane tissues. Low levels have also been associated with diseases such as heart disease and cancer. Vitamin C also helps with the absorption of iron. The nutrient must be obtained from foods since the human body cannot make its own, as some other animals can. Vitamin C can be found in citrus fruits, but is also in many fruits, vegetables and legumes.



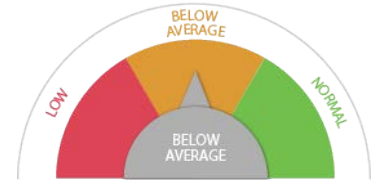


# NUTRIENTS

## VITAMIN D TENDENCY

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic response is **BELOW AVERAGE**. Your score reflects the fact that for the genes investigated, your genotype showed some of the unfavorable allele combinations. This means you have a risk of having low levels of Vitamin D. You will not know your actual levels, however, unless you obtain a blood test.



Your genetic profile indicates that your response is **BELOW AVERAGE**.

so your levels of Vitamin D may be low and possibly deficient. Get your blood tested for Vitamin D. If your levels are low, increase your sun exposure and add more Vitamin D-rich foods or supplements.

### SUCCESS STRATEGIES

- Get tested! Even though you may be at risk of having low Vitamin D levels, you will not know if you do unless you get a blood test from your doctor.
- Expose yourself to the sun on most days of the week for at least 10 to 15 minutes (30 to 50 minutes if you have naturally dark skin). Spend more time outdoors in winter months, or if you live in northern latitudes.
- If you are deficient in Vitamin D, do a nutrient analysis to determine how much Vitamin D you consume, then eat more foods that contain Vitamin D.
- If you are low, you may wish to take a Vitamin D supplement. Avoid overly-high doses, unless by prescription through your doctor, as they may cause adverse effects.

### RELATED GENES / SNPS

**GC, NADSYN1, CYP2R1**

The genes and their associated SNPs that are included in this category have been shown to have statistically significant associations with a person's blood levels of Vitamin D (which is actually a hormone). One study found that several SNPs linked to low levels of Vitamin D were from genes that may play a role in the Vitamin D conversion and delivery process. Those people who carried unfavorable pairs of genes, or alleles, had a higher risk of low levels of Vitamin D, and those who carried several unfavorable SNPs had a much higher chance of being deficient in Vitamin D.

Vitamin D has been proven in research to be crucial for bone health. Low levels of Vitamin D have been associated with a variety of health conditions, including heart disease, diabetes, depression and cancer.

A blood test from your doctor can determine your blood levels of Vitamin D. Vitamin D is primarily produced by the body from exposure to ultraviolet rays from



# NUTRIENTS

## VITAMIN D TENDENCY



### VITAMIN D-RICH FOODS TO INCLUDE IN YOUR DIET:

Salmon, mackerel, sardines, egg yolks, fortified almond, soy or other plant milk, fortified dairy milk.

sunlight, and this is considered to be the optimal source since Vitamin D generated by the body lasts longer in the body than Vitamin D taken in supplement form. Your levels are likely to be higher if you live in the southern latitudes and during the summer. However, it is not uncommon for people with lots of exposure to the sun to still have low levels of Vitamin D. In general, only 10 to 15 minutes of sun exposure to bare skin per day during the summer months is needed for a Caucasian to produce the Vitamin D he or she needs. Darker skinned people will need to spend 2-5 times more time in the sun. Since Vitamin D is stored in the body, stores can be built up during warmer months and may compensate for less sun exposure during winter months.

Vitamin D can be obtained through foods such as oily fish and egg yolks, as well as fortified dairy and plant milks, and fortified cereals. Vitamin D can also be taken in supplements. If you test low and choose to take a Vitamin D supplement, be careful of taking higher doses because there can be adverse effects.



## SUMMARY

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# How much should I exercise?

Your body weight and body fat levels are the direct result of how much you eat as well as how much and how you move. Certain genes can play a role in your response to what you eat and how you exercise.

Traditionally, most people focus on dieting to lose weight, but exercise is a key part of losing weight effectively and it's been proven in research to be crucial for keeping the weight you lose off.

There are two major things you should know about exercising to lose weight:

1. Any regular exercise can enhance weight loss from dieting. If you have a certain genotype, you may experience a greater or lesser response compared to others, but your response still depends on the type and amount of exercise that you do. For weight loss and fat loss, the more calories you burn through exercise, the better your results will be.

Achieve a greater calorie burn by focusing on cardio exercise such as walking, running, cycling or cardio machines. When you move, you can increase your calorie burn in one of two ways. You can exercise harder at a higher intensity, or you can keep your intensity easier and exercise at a moderate pace, but for longer sessions. We'll explain how to monitor and manipulate your intensity in greater detail later in your report.

2. Muscle matters, too. It keeps you strong, it helps your body stay firm and shapely. You may have a certain genotype that makes you more or less muscular, or that makes you more or less strong, but your muscle response to both dieting and exercise will still be affected by the type and amount of exercise that you do.

When you are dieting, it is very important to include exercise that helps to strengthen muscle. When a person loses weight by only dieting and not exercising, they are likely to lose more muscle mass along with the pounds of fat that are lost. If you exercise, especially if you do resistance training (lift weights), you can prevent or minimize the loss of muscle mass that can occur with weight loss.

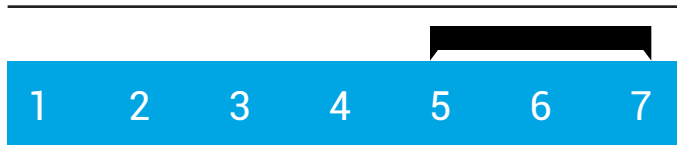


# EXERCISE

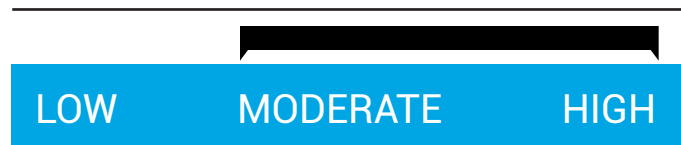
## SUMMARY

### CARDIO EXERCISE

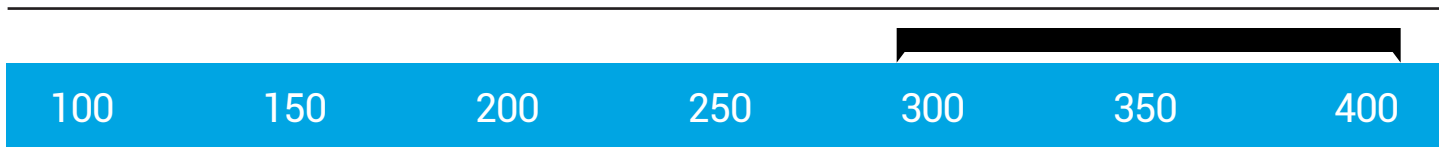
#### FREQUENCY (days per week)



#### INTENSITY



#### DURATION (minutes per week)



Perform moderate to vigorous intensity cardiovascular exercise 5 or more days a week for minimum of 300 minutes per week. You can achieve greater results by lengthening the duration of moderate intensity cardio, focusing on endurance activities like biking or running.

### STRENGTH TRAINING



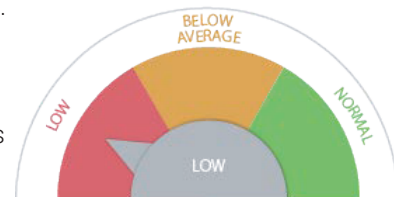
Lift weights 2 to 3 days per week using weights that are heavy enough to challenge you at the end of each of 2 to 3 sets of 8 to 15 reps. If by the end of each set of repetitions, you feel like you could keep performing the exercise, the weight you are using is too light to provide a sufficient muscle-strengthening stimulus. As you near the end of the exercise, you should feel like the last 2 to 3 reps are difficult to complete while maintaining good form.



## FAT LOSS RESPONSE TO CARDIO

### WHAT YOUR GENES SAY ABOUT YOU:

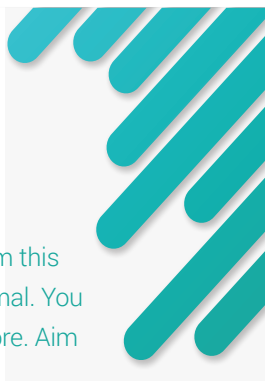
Our analysis indicates that your genetic profile exhibits a **LOW** fat loss response to cardio. Your score reflects the fact that among the genes investigated, you had the 'unfavorable' gene combinations. This means that, based on your genes, you have a greater chance of showing a reduced fat loss response to doing cardio exercise for 30 to 50 minutes 3 days per week. Thus, you may lose little fat if you follow a similar cardio exercise program.



Keep in mind that having an 'unfavorable' genotype does not mean that you cannot lose body fat, it only suggests that you may have a more difficult time losing as much as someone else with a more favorable genotype. Genetic predisposition plays a role in fat loss, but other factors also affect how much fat you lose. However, your results suggest that you may have to do more and work harder to experience greater amounts of fat loss. It is smart to choose the most effective program for you and to adopt behaviors that help you to stick to the lifestyle changes.

Your genetic profile indicates that your fat loss response to cardio is **LOW**.

This does not mean that you cannot lose fat from this amount of cardio, but your fat loss may be minimal. You are likely to get optimal fat loss by exercising more. Aim for at least 200 to 300 minutes per week.



### RELATED GENES / SNPs

**ADRB2, LPL**

The genes and their associated SNPs that are included in this category have been shown in a study to have significant associations with a person's ability to lose fat from a regular program of cardio exercise.

A large study investigating these genes put sedentary men and women on a 20-week endurance exercise program. They exercised on a bike 3 times per week, starting at a moderate intensity for 30 minutes per session over the first few weeks. They built up to a longer, slightly harder workout that lasted 50 minutes for the last 6 weeks. Men in the study did not appear to have a different response based on their genotype. However, women who carried the most 'unfavorable'

### SUCCESS STRATEGIES

- Official exercise recommendations suggest that exercising 3 days per week for 150 or fewer minutes is not enough to manage body weight. For optimal fat loss and weight loss results from exercise, increase one or all of the following: the number of days per week you exercise, the length of time of your exercise session, and/or the intensity of your exercise session.



## EXERCISE

# FAT LOSS RESPONSE TO CARDIO

- For optimal fat and weight loss results from exercise, aim for 5 or more days per week of cardio exercise for a total of at least 300 minutes per week.
- Incorporate cardio interval training where you alternate very intense bursts of activity with intervals of exercise at a more moderate intensity. You can do this by doing cardio only or with weight training. During cardio, you might walk for 10 minutes at an easy pace to warm up, then jog or run for 30 seconds to 2 minutes. Then return to an easy pace walk for 3 to 5 minutes and then jog or run again for 30 seconds to 2 minutes. As you get fitter, you can lengthen the high-intensity intervals and shorten the recovery intervals.
- Make sure to include muscle-strengthening exercises 2 to 3 days per week.
- While it is possible to lose fat and weight from exercise alone, you will experience faster fat loss if you focus on sticking to a reduced-calorie diet, in addition to exercise. Follow the tips from the GxSlim analysis of your Weight Loss Ability and Food recommendations for optimal results.

genotypes lost fat from the exercise program—but they tended to lose less fat compared to other participants who did not carry the ‘unfavorable’ genotypes.

No matter the genotype, even though some fat loss was seen with the 3 days per week, 90-to-150-minutes-per-week regimen in this study, for dramatic decreases in body fat that also result in weight loss, most people will get better results if they do more exercise per week.

Our analysis investigated which genotype for each of these genes was present in your DNA. Your rating of either **NORMAL**, **BELOW AVERAGE** or **LOW** reflects whether your genotypes included those that carried a risk of reduced fat loss response from a regular program of cardio exercise.

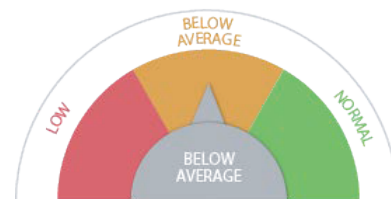


# EXERCISE

## FITNESS RESPONSE TO CARDIO

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits a **BELOW AVERAGE** fitness response to high-intensity exercise. Your score reflects the fact that your genotype showed the 'unfavorable' gene combinations. This means you have the potential to not see the same improvements in fitness from high-intensity cardio workouts as someone else with a more favorable genotype would. The good news is that you might be able to attain the same cardiovascular benefits by working at lower intensities.



Your genetic profile indicates that your fitness response to moderate-to-high-intensity cardio is **BELOW AVERAGE**.

You may be less likely to experience optimal cardiovascular fitness improvements from high-intensity cardio compared to others with a more favorable genotype. This does not mean that you will not improve your fitness. You can. But you will likely see greater gains from longer, moderate-intensity workouts. Or you may benefit from endurance-based resistance workouts such as circuit training and power training.

### SUCCESS STRATEGIES

Your genotype suggests you might benefit most from sticking to moderate intensity workouts. Therefore, you might see better fitness results from longer endurance workouts.

Aim for more moderate-intensity cardio workouts on four or more days per week that last longer over time. Start with 20 to 30 minute sessions and work up to 60 to 90 minutes. You may want to consider training for an endurance event like a charity bike race or a 10K, half-marathon, or even a full marathon.

### RELATED GENES / SNPs

#### AMPD1, APOE

The genes and associated SNPs included in this category have been shown to have significant associations with a person's response to moderate-to-high intensity exercise.

Many factors play roles in being able to push hard without feeling overly fatigued when exercising. One reflection of fitness is oxygen capacity, also known as VO2 Max. As a person becomes fitter, their ability to take in more oxygen improves, which helps them to work out harder and longer. The greater one's VO2 Max, the more exercise they can handle since they can take in more oxygen that working muscles need during intense physical activity.

Several large studies investigating these genes had sedentary men and women do cardio exercise 3 to 4 days per week for 5 to 6 months. They used a variety of cardio machines (bike, treadmill, rowing machine, step-climber, etc.) for up to 50 minutes.



## EXERCISE

# FITNESS RESPONSE TO CARDIO

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Those people with the 'unfavorable' genotype experienced smaller gains in their cardiovascular fitness from the training. They seemed to show a decreased ability to perform at higher effort levels, suggesting their optimal fitness response may be better achieved at a lower intensity of exercise.

Our analysis investigated which genotype for these genes was present in your DNA. Your rating of either **NORMAL**, **BELOW AVERAGE** OR **LOW** reflects whether your genotypes included those that carried a risk of reduced cardiovascular fitness response from moderate-to-higher intensity exercise.



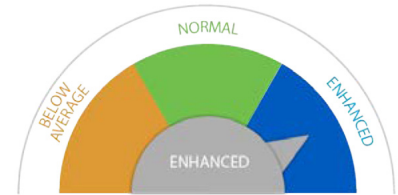


## EXERCISE

# BODY COMPOSITION RESPONSE TO STRENGTH TRAINING

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits an **ENHANCED** body composition response to muscle-strengthening exercise. Your score reflects the fact that your genotype showed the 'favorable' gene combinations. This means that, in addition to improvements in strength and muscle mass, you are likely to experience weight loss and a reduction in your body fat percentage from weight training.



Your genetic profile indicates that your body composition response to strength training is **ENHANCED**.

In addition to strength improvements, you are more likely to see reductions in your body fat percentage from weight training. Make sure to include resistance exercise two to three times a week.



### RELATED GENES / SNPs

NRXN3, GNPDA2, LRRN6C, PRKD1, GPRC5B, SLC39A8, FTO, FLJ35779, MAP2K5, QPCTL-GIPR, NEGR1, LRP1B, MTCH2, MTIF3, RPL27A, SEC16B, FAIM2, FANCL, ETV5, TFAP2B

The genes and their associated SNPs that are included in this category all have been shown to have significant associations with a person's ability to improve their body composition and decrease their body fat percentage from resistance exercise. Resistance training, or weight training, improves strength and the amount of muscle a person has. Weight training can also reduce the percentage, and sometimes amounts, of body fat. An improved body composition, which is a higher proportion of muscle to body fat, contributes to a leaner look and, potentially, a greater number of calories burned each day.

Although resistance training alone has not

### SUCCESS STRATEGIES

Make sure to lift weights that are heavy enough to work at a moderate-to hard intensity, performing two to three sets of eight to 15 repetitions of each exercise. When the exercises become easy, add more weight to continue to obtain the benefits.

You will experience greater fat and weight loss by incorporating cardio workouts on most days of the week, aiming to accumulate 150 to 300 minutes or more of physical activity per week.



## EXERCISE

# BODY COMPOSITION RESPONSE TO STRENGTH TRAINING

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been shown to produce clinically significant weight loss (because weights workouts do not burn as many calories as cardio), people with the more 'favorable' genotype in a large study experienced an improved ability to lose weight and reduce their body fat percentage with resistance training. Those with the 'unfavorable' genotypes showed a decreased ability to lose weight and reduce body fat percentage from resistance training. When you are trying to lose weight, it is very important to include resistance training in your routine. Resistance training can minimize or prevent that loss of muscle mass that occurs with weight loss when you are dieting.

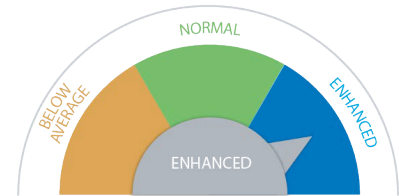
Our analysis investigated which genotype for these genes was present in your DNA. Your rating of either **ENHANCED**, **NORMAL** or **BELOW AVERAGE** reflects whether your genotypes included those that carried a risk of an enhanced or reduced HDL response to cardio exercise.



## HDL RESPONSE TO CARDIO

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits an **ENHANCED** HDL response to cardio exercise. Your score reflects the fact that your genotype showed the 'favorable' gene combinations. This suggests that you are likely to experience a substantial beneficial boost to your HDL levels from a regular cardio exercise program.



Your genetic profile indicates that your HDL response to cardio is **ENHANCED**.

For optimal results, do cardio five or more days per week.



### SUCCESS STRATEGIES

Your genotype suggests that you can successfully raise your HDL levels with regular cardio. To obtain this benefit, the key is consistency. Every workout you do will boost HDL levels, but to maintain the effect you need to exercise on a regular basis, at least three to four days per week.

- Higher intensities may give you a greater boost. Aim to push past your comfort zone by moving a little harder or faster during your cardio workouts.
- What you eat is crucial to help normalize all of your cholesterol levels. A diet high in fiber-filled plant foods and low in saturated animal fats will help lower your total cholesterol, LDL cholesterol and triglyceride values.

### RELATED GENES / SNPs

#### APOE

The gene and associated SNPs included in this category have been shown to have significant associations with a person's HDL cholesterol response to cardio exercise. HDL is a protein particle in the blood that carries cholesterol to the liver, helping to clear it from the blood. Excess cholesterol lingering in the blood can contribute to plaque that causes heart disease. So having higher levels of HDL is beneficial—which is why it's considered "good" cholesterol. Even one session of cardio exercise can boost HDL, and regular exercisers tend to have higher HDL.

This gene plays a role in the HDL response to cardio. One large study had men and women exercise for 30 to 50 minutes, 3 times a week for 5 months. Those people with the more "favorable" genotype experienced greater than average boosts to their HDL levels. Those with the 'unfavorable' genotype showed a decreased response: smaller increases in HDL.



## EXERCISE

### HDL RESPONSE TO CARDIO

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Our analysis investigated which genotype for this gene was present in your DNA. Your rating of either **ENHANCED**, **NORMAL** or **BELOW AVERAGE** reflects whether your genotypes included those that carried a risk of an enhanced or reduced HDL response to cardio exercise.

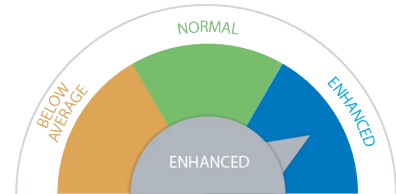


## EXERCISE

# INSULIN SENSITIVITY RESPONSE TO CARDIO

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits an **ENHANCED** insulin sensitivity to cardio exercise. Your score reflects the fact that your genotype showed the 'favorable' gene combinations. This suggests that you are likely to see beneficial improvements to your insulin sensitivity if you exercise regularly.



Your genetic profile indicates that your insulin sensitivity response to cardio is **ENHANCED**.

Performing 3 or more days of cardio per week should improve your glucose uptake. You can optimize these effects by working out more than three days per week and including resistance training in your workouts.

### SUCCESS STRATEGIES

- The more often you exercise, the greater the benefits. For optimal insulin response, perform cardio exercise at least three to four times a week and stick to it.
- Strength training can also improve insulin sensitivity, so include some form of resistance training two to three times per week, targeting all the major muscle groups as part of your weekly routine.

### RELATED GENES / SNPs

#### LIPC

The gene and associated SNPs included in this category have been shown to have significant associations with a person's insulin sensitivity in response to cardio exercise. Insulin is a hormone that plays a crucial role in delivering glucose, a form of sugar, in the blood to cells in the body that use it for energy. In a healthy person, cells are sensitive to this action of insulin and blood glucose levels are kept in their optimal range. If insulin sensitivity declines, a person may become insulin resistant. This keeps blood glucose levels high and diabetes can develop.

Even one session of exercise can improve insulin sensitivity. Exercise also helps keep blood glucose levels low because exercising muscles can absorb glucose without needing insulin to do so. Exercise over time can prevent diabetes—and it can help those who already have it.



## EXERCISE

# INSULIN SENSITIVITY RESPONSE TO CARDIO

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This gene seems to play a role in the insulin sensitivity response to cardio. One large study had men and women perform cardio exercise at a moderate-to-high intensity for 30 to 50 minutes, 3 times a week.

Those people with the more 'favorable' genotype experienced greater than average improvements in their insulin sensitivity.

Those with the 'unfavorable' genotype were less likely to improve their insulin sensitivity by exercise.

Our analysis investigated which genotype for this gene was present in your DNA. Your rating of either **ENHANCED**, **NORMAL** or **BELOW AVERAGE** reflects whether your genotypes included those that carried a risk of an enhanced or reduced HDL response to cardio exercise.

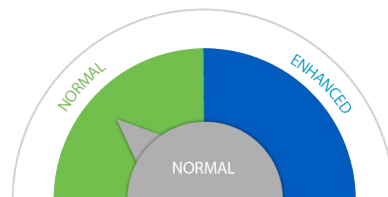


# EXERCISE

## GLUCOSE RESPONSE TO CARDIO

### WHAT YOUR GENES SAY ABOUT YOU:

Our analysis indicates that your genetic profile exhibits a **NORMAL** glucose response to cardio exercise. Your score reflects the fact that your genotype showed the 'unfavorable' gene combinations. This means that you are likely to experience smaller decreases in glucose from doing cardio exercise at least 2 to 3 times per week.



Your genetic profile indicates that your glucose response to cardio is **NORMAL**.

You are likely to experience minimal decreases in blood glucose from cardio exercise. However, you can boost your response by exercising 4 or more days per week, by working out at higher intensities and by adding resistance training to your routine.

### SUCCESS STRATEGIES

Increasing the amount and intensity of exercise you do will help to improve your glucose regulation. Perform cardio on five or more days a week.

And rather than just performing moderate-intensity workouts, after you are fit enough to push a little harder, include more high-intensity minutes into your cardio workouts. Aim to work at an intensity level that leaves you slightly breathless and that feels 'hard.' After a few minutes, recover by continuing to move at an easier pace. Then pick up the intensity for a harder interval, again followed by an easier recovery interval.

- Incorporate resistance training 2 to 3 days per week to enhance your blood glucose response.

### RELATED GENES / SNPs

#### PPARG

The gene and associated SNPs included in this category have been shown to have significant associations with a person's glucose response to cardio exercise. Glucose is one of the body's main sources of energy and it comes from the breakdown of carbohydrates in the diet. Brain and nerve cells, as well as red blood cells, exclusively use glucose for energy. That's why blood glucose is maintained at constant levels—so that all the cells in the body that need it can access it. If blood glucose levels rise and stay high, eventually insulin resistance and diabetes can develop. Exercise helps regulate blood glucose levels because every session of exercise uses glucose in the muscle for energy, and the blood glucose supply is then tapped into to replenish the muscle reserves.



## EXERCISE

# GLUCOSE RESPONSE TO CARDIO

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- What you eat also affects your blood glucose level. Increase the amount of fiber you eat by eating more whole plant foods at every meal. But make sure that these foods are unprocessed so that you obtain more nutrients and experience a lower glycemic response from the food.

This gene seems to play a role in the glucose response to cardio and appears to be a reliable indicator of whether exercise will have beneficial effects on insulin resistance. Several studies involved a variety of individuals, both diabetics and non-diabetics, performing regular cardio for 2 to 3 days per week for up to 5 months. Those people with the more 'favorable' genotype experienced greater-than-average clearance of blood glucose. Those with the 'unfavorable' genotype showed a decreased response, or smaller drop in glucose levels. People with this genotype also had a decreased weight-loss ability—they loss less weight compared to people with different genotypes.

Our analysis investigated which genotype for this gene was present in your DNA. Your rating of either **ENHANCED** or **NORMAL** reflects whether your genotypes included those that carried a risk of an enhanced or reduced glucose response to cardio exercise.



# LINKS TO RELATED STUDIES:

## WEIGHT LOSS

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**Human cardiovascular disease IBC chip-wide association with weight loss and weight regain in the look AHEAD trial**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24081232>

McCaffery JM, Papandonatos GD, Huggins GS, Peter I, Erar B, Kahn SE, Knowler WC, Lipkin EW, Kitabchi AE, Wagenknecht LE, Wing RR; Genetic Subgroup of Look AHEAD; Look AHEAD Research Group.

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**FTO genotype and 2-year change in body composition and fat distribution in response to weight-loss diets**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=22891219>

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**FTO predicts weight regain in the Look AHEAD clinical trial**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=23628854>

McCaffery JM1, Papandonatos GD, Huggins GS, Peter I, Kahn SE, Knowler WC, Hudnall GE, Lipkin EW, Kitabchi AE, Wagenknecht LE, Wing RR; Genetic Subgroup of Look AHEAD; Look AHEAD Research Group.

Diabetes. 2010 Mar;59(3):747-50. doi: 10.2337/db09-1050. Epub 2009 Dec 22.

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**TCF7L2 genetic variants modulate the effect of dietary fat intake on changes in body composition during a weight-loss intervention**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=23034957>

Mattei J, Qi Q, Hu FB, Sacks FM, Qi L.

Am J Clin Nutr. 2014 Feb;99(2):392-9. doi: 10.3945/ajcn.113.072066. Epub 2013 Dec 11

**Variants in glucose- and circadian rhythm-related genes affect the response of energy expenditure to weight-loss diets**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24335056>

Mirzaei K, Xu M, Qi Q, de Jonge L, Bray GA, Sacks F, Qi L.

## LINKS TO RELATED STUDIES:

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**Genetic predictors of weight loss and weight regain after intensive lifestyle modification, metformin treatment, or standard care in the Diabetes Prevention Program**

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Diabetes. 2002 Aug;51(8):2581-6.

**Association of the Pro12Ala polymorphism in the PPAR-gamma2 gene with 3-year incidence of type 2 diabetes and body weight change in the Finnish Diabetes Prevention Study**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=12145174>

Lindi VI, Uusitupa MI, Lindström J, Louheranta A, Eriksson JG, Valle TT, Hämäläinen H, Ilanne-Parikka P, Keinänen-Kiukaanniemi S, Laakso M, Tuomilehto J; Finnish Diabetes Prevention Study.

Clin Genet. 2003 Feb;63(2):109-16.

**The PPAR-gamma P12A polymorphism modulates the relationship between dietary fat intake and components of the metabolic syndrome**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=12145174>

Robitaille J, Després JP, Pérusse L, Vohl MC.

Clin Genet. 2003 Feb;63(2):109-16.

**Interaction between a peroxisome proliferator-activated receptor gamma gene polymorphism and dietary fat intake in relation to body mass**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=14506127>

Memisoglu A, Hu FB, Hankinson SE, Manson JE, De Vivo I, Willett WC, Hunter DJ.

## FOOD – PROTEIN UTILIZATION

Int J Obes (Lond). 2013 Dec;37(12):1545-52. doi: 10.1038/ijo.2013.54. Epub 2013 Apr 3.

**FTO predicts weight regain in the Look AHEAD clinical trial**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=23628854>

McCaffery JM1, Papandonatos GD, Huggins GS, Peter I, Kahn SE, Knowler WC, Hudnall GE, Lipkin EW, Kitabchi AE, Wagenknecht LE, Wing RR; Genetic Subgroup of Look AHEAD; Look AHEAD Research Group.

# LINKS TO RELATED STUDIES:

## FOOD – FAT UTILIZATION

Diabetes Care. 2012 Feb;35(2):363-6. doi: 10.2337/dc11-1328. Epub 2011 Dec 16.

**Genetic predictors of weight loss and weight regain after intensive lifestyle modification, metformin treatment, or standard care in the Diabetes Prevention Program**

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Lindi VI, Uusitupa MI, Lindström J, Louheranta A, Eriksson JG, Valle TT, Hämäläinen H, Ilanne-Parikka P, Keinänen-Kiukaanniemi S, Laakso M, Tuomilehto J; Finnish Diabetes Prevention Study.

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**TCF7L2 genetic variants modulate the effect of dietary fat intake on changes in body composition during a weight-loss intervention.**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=23034957>

Mattei J, Qi Q, Hu FB, Sacks FM, Qi L.

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**Dietary intake of n-6 fatty acids modulates effect of apolipoprotein A5 gene on plasma fasting triglycerides, remnant lipoprotein concentrations, and lipoprotein particle size: the Framingham Heart Study.**

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**A polymorphism in the apolipoprotein A5 gene is associated with weight loss after short-term diet.**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=15996212>

Aberle J, Evans D, Beil FU, Seedorf U.

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**APOA5 gene variation modulates the effects of dietary fat intake on body mass index and obesity risk in the Framingham Heart Study.**

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**APOA5 gene variation interacts with dietary fat intake to modulate obesity and circulating triglycerides in a Mediterranean population.**

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Sánchez-Moreno C, Ordovás JM, Smith CE, Baraza JC, Lee YC, Garaulet M.

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**Variants in glucose- and circadian rhythm-related genes affect the response of energy expenditure to weight-loss diets: the POUNDS LOST Trial.**

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Proc Nutr Soc. 2014 Feb;73(1):47-56. doi: 10.1017/S0029665113003613. Epub 2013 Oct 17.

**MTHFR 677TT genotype and disease risk: is there a modulating role for B-vitamins?**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24131523>

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Am J Hum Genet. 2009 Apr;84(4):477-82. doi: 10.1016/j.ajhg.2009.02.011. Epub 2009 Mar 19.

**Genome-wide association study of vitamin B6, vitamin B12, folate, and homocysteine blood concentrations.**

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Am J Hum Genet. 2009 Apr;84(4):477-82. doi: 10.1016/j.ajhg.2009.02.011. Epub 2009 Mar 19.

**Genome-wide association study of vitamin B6, vitamin B12, folate, and homocysteine blood concentrations.**

<http://www.ncbi.nlm.nih.gov/pubmed/?term=19303062>

Tanaka T, Scheet P, Giusti B, Bandinelli S, Piras MG, Usala G, Lai S, Mulas A, Corsi AM, Vestriini A, So i F, Gori AM, Abbate R, Guralnik J, Singleton A, Abecasis GR, Schlessinger D, Uda M, Ferrucci L.

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Wang TJ, Zhang F, Richards JB, Kestenbaum B, van Meurs JB, Berry D, Kiel DP, Streeten EA, Ohlsson C, Koller DL, Peltonen L, Cooper JD, O'Reilly PF, Houston DK, Glazer NL, Vandenput L, Peacock M, Shi J, Rivadeneira F, McCarthy MI, Anneli P, de Boer IH, Mangino M, Kato B, Smyth DJ, Booth SL, Jacques PF, Burke GL, Goodarzi M, Cheung CL, Wolf M, Rice K, Goltzman D, Hidioglou N, Ladouceur M, Wareham NJ, Hocking LJ, Hart D, Arden NK, Cooper C, Malik S, Fraser WD, Hartikainen AL, Zhai G, Macdonald HM, Forouhi NG, Loos RJ, Reid DM, Hakim A, Dennison E, Liu Y, Power C, Stevens HE, Jaana L, Vasani RS, Soranzo N, Bojunga J, Psaty BM, Lorentzon M, Froude T, Harris TB, Hofman A, Jansson JO, Cauley JA, Uitterlinden AG, Gibson Q, Jarvelin MR, Karasik D, Siscovick DS, Econs MJ, Kritchevsky SB, Florez JC, Todd JA, Dupuis J, Hyppönen E, Spector TD.

### EXERCISE – FAT LOSS RESPONSE TO CARDIO

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## EXERCISE – BODY COMPOSITION RESPONSE TO STRENGTH TRAINING

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