

Speaker: It takes more than meds in the battle of the bulge

Medication is not a quick fix for obesity, Dr. Samuel L. Wilcox said during a "Lunch & Learn" session at the Iola Public Library Wednesday.

By SARAH HANEY

LOCAL NEWS

June 26, 2025 - 2:29 PM



Photo by Dreamstime/TNS

A packed room at the Iola Public Library was all ears Wednesday as Dr. Samuel L. Wilcox led a one-hour “Lunch & Learn” session focused on the medical interventions available for weight loss.

Wilcox led participants on an in-depth look at treatment options that go beyond traditional diet and exercise. It is the second of Wilcox’s series on weight loss.

Wilcox practices at the Allen County Regional Hospital-Iola Clinic.

Board certified in both family and obesity medicine, Wilcox discussed the four pillars of obesity treatment: nutrition therapy, physical activity, behavioral modification, and medical interventions. Wednesday’s session focused on medical intervention.

Wilcox discussed several FDA-approved weight loss medications, including Phentermine, Orlistat, and the increasingly popular GLP-1 class of injectable medications such as Wegovy and Zepbound.

These medications work by suppressing appetite and improving how the body handles insulin and glucose, leading to significant weight loss in eligible patients.



Dr. Samuel L. Wilcox, MD, opens a Lunch & Learn session Wednesday at the Iola Public Library.

Photo by Sarah Haney / Iola Register

To qualify for medication treatment, an individual must have a Body Mass Index (BMI) of more than 30, or a BMI over 27 accompanied by a related health condition such as high blood pressure or pre-diabetes.

Wilcox cautioned against thinking of medication as a quick fix.

“Obesity is not a weight loss medication deficiency,” he stressed. “Lasting weight loss requires a change in lifestyle.”

One standout among current medications is tirzepatide, the active drug found in Zepbound and Mounjaro.

According to Wilcox, users of tirzepatide can expect an average weight loss of 20% of their total body weight, making it one of the most effective pharmacological options available today.

Surgical options, such as sleeve gastrectomy and Roux-en-Y gastric bypass, offer similar — and sometimes greater — results, with patients typically losing 20-25% of their total body weight. Outcomes vary from person to person.

Beyond the numbers on the scale, even modest weight loss can deliver significant health benefits.

A 5% reduction in body weight can lead to improved blood sugar levels, lower triglycerides, reduced knee pain, alleviated polycystic ovarian syndrome (PCOS) symptoms, and overall enhanced quality of life.

At 10% weight loss, patients may experience improved cholesterol, relief from sleep apnea, better mobility, and a reduction in fatty liver disease, incontinence, and healthcare costs.

The greatest benefit, he noted, comes at a 15% weight loss — which has been linked to increased life expectancy.

Wilcox reminded attendees of the long-term nature of weight management.

“Chronic disease requires chronic treatment,” he said, stressing the importance of sustained medical intervention and a commitment to a healthier lifestyle.

For those who missed the session, a repeat of the Lunch & Learn event is scheduled for July 10. To reserve a seat, call 620-365-1021.

How to take your BMI:

- Measure your height in inches.
- Measure your weight in pounds.
- Divide your weight (in pounds) by your height (in inches).
- Divide that result by your height (in inches) again.
- Multiply the final number by 703.