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SCALE INTERVENTION

The weighing game

Some women weigh themselves every day—or even twice a day! Others do it, like, never. But experts say there's a better way to track your number, depending on your goal. We help five women conquer the scale.

By Nicole Yorio Jurick

THE DAILY DEVOTED

I weigh myself every morning. If I go up 2 pounds, I'll opt for a salad and chicken. But if the number drops, I'll order a cheesesteak and get Dairy Queen for dessert! —Lisa DiBello, 30; Havertown, Pennsylvania

If you're dieting, it's smart to weigh yourself daily. People who did lost twice as much as those who weighed in less often, a study from the University of Minnesota, Twin Cities finds. Regular checks keep you focused, Dawn Jackson Blatner, R.D., of Chicago says. But using the number to pick the day's food won't help your frame (or psyche): Daily ups and downs are usually due to water weight, not lasting loss or gain. **"To get the real picture, write down your weight daily and average it weekly,"** says Irene Rubaum-Keller, a psychotherapist in Los Angeles. "Use the trend to inform your diet."

THE DIEHARD

I step on the scale in the morning and again at night. I'm heavier at night, so when I wake up and weigh less, I feel as if I'm on the right track. —Laura Berger, 40; Fort Lauderdale, Florida

You may weigh less in the morning, but that doesn't mean you've truly shed pounds. (Sorry!) Post-slumber dehydration is the cause of the lower A.M. read. "Taken to an extreme, frequent weigh-ins every day could lead to an unhealthy obsession or even an eating disorder," says clinical psychologist Lavinia Rodriguez, Ph.D., of Tampa Bay, Florida. **If you're hooked on hopping on, cut back to once a day and stash the scale** in your closet to hide temptation. And rather than motivating yourself with phony results, focus on actual triumphs, like finishing an ass-kicking workout.

FROM TOP: STEPHANIE RAUSSER. COURTESY OF SUBJECT (2).

COURTESY OF SUBJECT (2)

THE SCALE-PHOBE

I refuse to step on the scale—it gives me anxiety. Whatever the number is, I'm never satisfied. I begin obsessing about being too heavy.
—Terri Huggins, 23; Sayreville, New Jersey

"It's common for women of all sizes to avoid the digital beast," Rubaum-Keller says. In fact, 21 percent of you view it as the enemy, according to a Self.com poll. "Some women tie their self-esteem to their weight. Others would rather not know because they're not ready to change their diet," Rubaum-Keller says. But avoidance sets you up for a rude awakening when you do get the guts to step on—which could lead to a blues-induced binge or a too-drastic diet. "To make peace with the scale, confront it," Rubaum-Keller says. **Start by weighing yourself once a month, then work up to weekly.** If the digits make you cringe, consider this: Now that you have the facts, you can make healthy changes.

THE WEEKLY WEIGHER

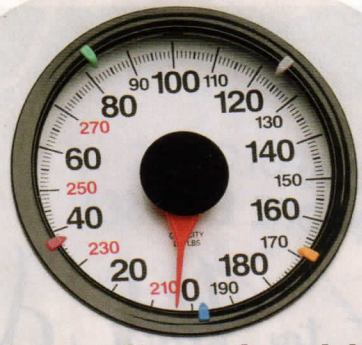
I weigh myself on Friday mornings. It encourages me to continue eating healthfully and exercising on weekends.
—Danielle La Casse, 28; St. Petersburg, Florida

To maintain your weight, weekly weigh-ins are your best bet. Seventy-five percent of people in the National Weight Control Registry (a study of dieters who have lost at least 30 pounds and kept it off for a year or more) weigh themselves once a week. **Friday is a good day for it because that number stays on your mind all weekend,** when you're prone to chowing down, Blatner says. Getting on the scale first thing is also wise (81 percent of you do it!); exercising and eating can sway results. Don't freak if the number creeps up one week. Consistency is key, so average a month of numbers before making any overhauls.

THE SCALELESS

I never weigh myself. If my pants feel tight, I'll eat less chocolate and hit the treadmill more often.
—Allison Dwyer, 32; Jersey City, New Jersey

If you're happy with your shape and not concerned about the number on the scale, **it's fine to use clothes to hold yourself accountable to eating right and exercising regularly,** Blatner says. But make sure you're measuring with fitted jeans and not your "pigging out" yoga pants. That said, it's helpful to weigh yourself at least once a year. Gaining a few pounds a year can add up and put you at greater risk for disease, Blatner says. And the pounds could be creeping on without your realizing it—you know, even jeans stretch.



How often should *you* weigh in?

Assess your goals. What you want to accomplish should guide your habits:

- When you're trying to trim, daily checks are ideal. They offer proof that hard work pays off and remind you to keep it up.
- If you hope to maintain, weigh in weekly. This will alert you if the digits rise over time.
- Scale haters can use pants to see changes, but weigh yourself annually to keep it real.

HAVE YOUR OWN WEIGH-IN CONFESSION? Let's hear it! Tweet your #scalesecret to us @SELFmagazine.

FROM TOP: COURTESY OF SUBJECT; STEVE WISBAUER/GETTY IMAGES.

IMPORTANT SAFETY INFORMATION (Continued)

Do not take BOTOX® (onabotulinumtoxinA) if you: are allergic to any of the ingredients in BOTOX® (see Medication Guide for ingredients); had an allergic reaction to any other botulinum toxin product such as *Myobloc®* (rimabotulinumtoxinB), *Dysport®* (abobotulinumtoxinA), or *Xeomin®* (incobotulinumtoxinA); have a skin infection at the planned injection site.

The dose of BOTOX® is not the same as, or comparable to, another botulinum toxin product.

Serious and/or immediate allergic reactions have been reported. These reactions include itching, rash, red itchy welts, wheezing, asthma symptoms, or dizziness or feeling faint. Tell your doctor or get medical help right away if you experience any such symptoms; further injection of BOTOX® should be discontinued.

Tell your doctor about all your muscle or nerve conditions such as amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease), myasthenia gravis, or Lambert-Eaton syndrome, as you may be at increased risk of serious side effects including severe dysphagia (difficulty swallowing) and respiratory compromise (difficulty breathing) from typical doses of BOTOX®.

Human albumin and spread of viral diseases. BOTOX® contains albumin, a protein component of human blood. The potential risk of spreading viral diseases (eg, Creutzfeldt-Jakob disease [CJD]) via human serum albumin is extremely rare. No cases of viral diseases or CJD have ever been reported in association with human serum albumin.

Tell your doctor about all your medical conditions, including if you: have or have had bleeding problems; have plans to have surgery; had surgery on your face; weakness of forehead muscles, such as trouble raising your eyebrows; drooping eyelids; any other abnormal facial change; are pregnant or plan to become pregnant (it is not known if BOTOX® can harm your unborn baby); are breastfeeding or plan to breastfeed (it is not known if BOTOX® passes into breast milk).

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal products. Using BOTOX® with certain other medicines may cause serious side effects. **Do not start any new medicines until you have told your doctor that you have received BOTOX® in the past.**

Especially tell your doctor if you: have received any other botulinum toxin product in the last 4 months; have received injections of botulinum toxin such as *Myobloc®*, *Dysport®*, or *Xeomin®* in the past (be sure your doctor knows exactly which product you received); have recently received an antibiotic by injection; take muscle relaxants; take an allergy or cold medicine; take a sleep medicine; take anti-platelets (asprin-like products) or anti-coagulants (blood thinners).

Other side effects of BOTOX® include: dry mouth, discomfort or pain at the injection site, tiredness, headache, neck pain, and eye problems: double vision, blurred vision, decreased eyesight, drooping eyelids, swelling of your eyelids, and dry eyes.

For more information refer to the Medication Guide or talk with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please refer to full Medication Guide including Boxed Warning on the following page.