



Helps weight loss



Aava is a calorie-free source of minerals which prevent underhydration that causes obesity and helps you lose weight.

1. Evidence-based Complementary and Alternative Medicine 2019: *Long-Term Potable Effects of Alkaescent Mineral Water on Intestinal Microbiota Shift and Physical Conditioning*

An alkaline (pH 8.3) mineral water (AMW) of Hita basin, located in the northwestern part of Kyushu island in Japan, has been recognized for the unique quality of ingredients including highly concentrated silicic acid, sodium, potassium, and hydrogen carbonate. The biological effects of AMW intake were evaluated with a particular focus on its "anti obesity" properties through its modulation of the gut microbiota population.

Among all antiobesity testing items, even though a weekly dietary consumption was increased ($p=0.012$), both ratios of weight gain ($p=1.21E-10$) and visceral fat accumulation ($p=0.029$) were significantly reduced in the AMW group. Other criteria including water intake ($p=0.727$), the amounts of total ($p=0.1602$), and subcutaneous fat accumulation ($p=0.052$) were within the margin of error and UCP-1 gene expression level ($p=0.171$) in the AMW group was 3.89-fold higher than that of TWC. Among 8 major gut bacteria families, Lactobacillaceae (increased, $p=0.029$) and Clostridiaceae (decreased, $p=0.029$) showed significant shift in the whole population.

Conclusion:

We observed significantly reduced (1) weight gaining ratio (average -1.86% , up to -3.3%), (2) visceral fat accumulation ratio (average -4.30% , up to -9.1%), and (3) changes in gut microbiota population. All these consequences could support the "health benefit" functionality of AMW.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6885775/>

2. Obesity (Silver Spring, Md.) : *Water Consumption Increases Weight Loss During a Hypocaloric Diet Intervention in Middle-aged and Older Adults, 2010*

Water consumption acutely reduces meal energy intake (EI) among middle-aged and older adults. Our objectives were to determine if premeal water consumption facilitates weight loss among overweight/obese middle-aged and older adults, and to determine if the ability of premeal water consumption to reduce meal EI is sustained after a 12-week period of increased water consumption.

Adults ($n = 48$; 55-75 years, BMI 25-40 kg/m²) were assigned to one of two groups: (i) hypocaloric diet + 500 ml water prior to each daily meal (water group), or (ii) hypocaloric diet alone (non water group).



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At baseline and week 12, each participant underwent two ad libitum test meals: (i) no preload (NP), and (ii) 500 ml water preload (WP). Meal EI was assessed at each test meal and body weight was assessed weekly for 12 weeks. **Weight loss was ~2 kg greater in the water group than in the non water group, and the water group ($\beta = -0.87$, $P < 0.001$) showed a 44% greater decline in weight over the 12 weeks than the non water group ($\beta = -0.60$, $P < 0.001$).** Test meal EI was lower in the WP than NP condition at baseline, but not at week 12 (baseline: WP 498 \pm 25 kcal, NP 541 \pm 27 kcal, $P = 0.009$; 12-week: WP 480 \pm 25 kcal, NP 506 \pm 25 kcal, $P = 0.069$).

Thus, when combined with a hypocaloric diet, consuming 500 ml water prior to each main meal leads to greater weight loss than a hypocaloric diet alone in middle-aged and older adults. This may be due in part to an acute reduction in meal EI following water ingestion.

<https://pubmed.ncbi.nlm.nih.gov/19661958/>

3. Journal of Diabetes, Obesity and Metabolism 2017: Beneficial Effects of Replacing Diet Beverages with Water on Type 2 Diabetic Obese Women following a Hypo-energetic Diet: A Randomized, 24-week Clinical Trial

Aims: To compare the effect of replacing diet beverages (DBs) with water or continuing to drink DBs in patients with type 2 diabetes during a 24-week weight loss program. The primary endpoint was the effect of intervention on weight over a 24-week period. The main secondary endpoints included anthropometric measurement and glucose and fat metabolism during the 24-week period.

Methods: A total of 81 overweight and obese women with type 2 diabetes, who usually consumed DBs in their diet, were asked to either substitute water for DBs or continue drinking DBs five times per week after lunch for 24 weeks (DBs group) during a weight loss program.

Results: Compared with the DBs group, the water group had a greater decrease in weight (water, -6.40 ± 2.42 kg; DBs, -5.25 ± 1.60 kg; $P = .006$), in BMI (water, -2.49 ± 0.92 kg/m²; DBs, -2.06 ± 0.62 kg/m²; $P = .006$), in FPG (water, -1.63 ± 0.54 mmol/L; DBs, -1.29 ± 0.48 mmol/L, $P = .005$), in fasting insulin (water, -5.71 ± 2.30 m IU/mL; DBs, -4.16 ± 1.74 m IU/mL, $P = .011$), in HOMA IR (water, -3.20 ± 1.17 ; DBs, -2.48 ± 0.99 , $P = .003$) and in 2 hour postprandial glucose (water, -1.67 ± 0.62 mmol/L; DBs, -1.35 ± 0.39 mmol/L; $P = 0.027$) over the 24-week period. However, there was no significant time \times group interaction for waist circumference, lipid profiles and HbA1c within both groups over the 24-week period.

Conclusion: Replacement of DBs with water after the main meal in obese adult women with type 2 diabetes may lead to more weight reduction during a weight loss program

<https://pubmed.ncbi.nlm.nih.gov/27748014/>



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4. ILSI Nutrition Reviews 2010: *The Impact of Water Intake on Energy Intake and Weight Status: A Systematic Review*

The effects of consuming water with meals rather than drinking no beverage or various other beverages remains under-studied. This systematic review of English language studies compared the effects of drinking water and various beverage alternatives on energy intake and/or weight status. We collected relevant clinical trials, epidemiologic, and intervention studies and summarized findings across the literature. Using clinical trials, average differences in total energy intake at test meals (Δ TEI) were calculated across studies for each of several beverage categories compared to water.

One of the most consistent sets of findings comes from comparing adults drinking sugar-sweetened beverages (SSB's) vs. water before a single meal. Total energy intakes were increased 7.8% (Δ TEI range -7.5 to 18.9) when SSBs were consumed.

These findings, along with epidemiologic and intervention studies suggested a potentially important role for water in reducing energy intakes, and by this means a role in obesity prevention. Obesity is clearly linked to a host of health problems, and this connection alone supports promotion of water drinking.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2929932/>

5. Obesity (Silver Spring, Md.) 2008: *Drinking Water is Associated with Weight Loss in Overweight Dieting Women Independent of Diet and Activity*

Background: Data from short-term experiments suggest that drinking water may promote weight loss by lowering total energy intake and/or altering metabolism. The long-term effects of drinking water on change in body weight and composition are unknown, however.

Objective: This study tested for associations between absolute and relative increases in drinking water and weight loss over 12 months.

Methods and procedures: Secondary analyses were conducted on data from the Stanford A TO Z weight loss intervention on 173 premenopausal overweight women (aged 25-50 years) who reported <1 l/day drinking water at baseline. Diet, physical activity, body weight, percent body fat (dual-energy X-ray absorptiometry), and waist circumference were assessed at baseline, 2, 6, and 12 months. At each time point, mean daily intakes of drinking water, noncaloric, unsweetened caloric (e.g., 100% fruit juice, milk) and sweetened caloric beverages, and food energy and nutrients were estimated using three unannounced 24-h diet recall.

Results: Absolute and relative increases in drinking water were associated with significant loss of body weight and fat over time, independent of covariates.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2929932/>



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6. *Frontiers in Nutrition 2016: Increased Hydration Can Be Associated with Weight Loss*

This brief review highlights the considerable evidence that an increase in water intake, i.e., **increased hydration, leads to loss of body weight. In rodent studies, the effect is clear and consistent.** At the least, this requires that measurement of water intake must be included in an experiment concerning rodents and all aspects of body weight regulation, from ingestive behavior to metabolic function. An increase in metabolism is one likely mechanism for the weight loss effect (125) because this can lead to increased mitochondrial function. In adipocytes, ramping up mitochondrial activity increases lipolysis.

Hypohydration has been shown to lead to hyperglycemia (56), which is linked with the major problems of obesity and type 2 diabetes. The effects of **chronic mild hypohydration extend beyond fostering obesity.** Extracellular dehydration-induced AngII, and the attendant possible mitochondrial dysfunction, may contribute not **only to obesity and diabetes but also to cardiovascular disease, cancer, and Alzheimer's disease.** Furthermore, there could be other "symptoms" linking these major health problems to hypohydration such as a decrease in brain volume that is also associated with Alzheimer's disease, obesity, and diabetes and could be (127). **A simple solution for reducing these modern chronic diseases would be to increase water intake across the general population.**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4901052/>

7. *Annals of Family Medicine 2016: Inadequate Hydration, BMI, and Obesity Among US Adults: NHANES 2009–2012*

PURPOSE:

Improving hydration is a strategy commonly used by clinicians to prevent overeating with the goal of promoting a healthy weight among patients. The relationship between weight status and hydration, however, is unclear. Our objective was to assess the relationship between inadequate hydration and BMI and inadequate hydration and obesity among adults in the United States.

RESULTS

In this nationally representative sample (n = 9,528; weighted n = 193.7 million), 50.8% were women, 64.5% were non-Hispanic white, and the mean age was 41 years. Mean urine osmolality was 631.4 mOsm/kg (SD = 236.2 mOsm/kg); 32.6% of the sample was inadequately hydrated. **In adjusted models, adults who were inadequately hydrated had higher BMIs (1.32 kg/m²; 95% CI, 0.85–1.79; P <.001) and higher odds of being obese (OR = 1.59; 95% CI, 1.35–1.88; P <.001) compared with hydrated adults.**

CONCLUSION

We found a significant association between inadequate hydration and elevated BMI and inadequate hydration and obesity, even after controlling for confounders. This relationship has not previously been shown on a population level and suggests that water, an essential nutrient, may deserve greater focus in weight management research and clinical strategies.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4940461/>



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8. International Association for the Study of Obesity: *Changes in Water and Beverage Intake and Long-term Weight Changes: Results From Three Prospective Cohort Studies*

Subjects:

Prospective cohort studies of 50 013 women aged 40-64 in the Nurses' Health Study (NHS, 1986-2006), 52 987 women aged 27-44 in the NHS II (1991-2007), and 21 988 men aged 40-64 in the Health Professionals Follow-up Study (1986-2006) without obesity and chronic diseases at baseline.

Results:

Participants gained an average of 1.45 kg (5th to 95th percentile, -1.87 to 5.46) within each 4-year period. After controlling for age, baseline body mass index, and changes in other lifestyle behaviors (diet, smoking habits, exercise, alcohol, sleep duration, TV watching), each 1-cup/d increment of water intake was inversely associated with weight gain within each 4-year period (-0.13 kg; 95% CI: -0.17, -0.08). The associations for other beverages were: SSBs (0.36 kg; 0.24, 0.48), fruit juice (0.22 kg; 0.15, 0.28), coffee (-0.14 kg; -0.19, -0.09), tea (-0.03 kg; -0.05, -0.01), diet beverages (-0.10 kg; -0.14, -0.06), low-fat milk (0.02 kg; -0.04, 0.09), and whole milk (0.02 kg; -0.06, 0.10). **We estimated that replacement of 1 serving/d of SSBs by 1 cup/d of water was associated with 0.49 kg (95% CI: 0.32, 0.65) less weight gain over each 4-year period, and the replacement estimate of fruit juices by water was 0.35 kg (95% CI: 0.23, 0.46).** Substitution of SSBs or fruit juices by other beverages (coffee, tea, diet beverages, low-fat and whole milk) were all significantly and inversely associated with weight gain.

Conclusion:

Our results suggest that increasing water intake in place of SSBs or fruit juices is associated with lower long-term weight gain.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3628978/>