



Weight Loss in a Fast-Food Medicine World

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Disclosures

- ▶ No financial disclosures to any commercial or private entities.



Objectives

- 1. Learners will be able to identify barriers to weight loss
- 2. Will be able to educate patient on lifestyle changes for weight loss
- 3. Will be able to discuss patient who may benefit from medication management for weight loss



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Patient example

- ▶ Helen is a 35-year-old female who presents with chief complaint of weight gain. She recently had her second child and is desiring weight loss after pregnancy. Her BMI prior to pregnancy was 32 and is now 37. Employed at the local law firm as a paralegal, she currently is working 8 am-6 pm and has a 20 minute commute. She states that she has tried everything and can't seem to lose any weight. Since college her weight has been increasing and only lost weight for short periods of times as she has been on restrictive diets. Today she is requesting, "One of the medications I saw on TV," as they have been helping her friends lose weight. This is her only request for the appointment today.

What are barriers to weight loss?

Nobody has responded yet.

Hang tight! Responses are coming in.



Barriers

- Insufficient self-control
- Lack of motivation
- Physical pain/ discomfort
- Time constraints
- Unpleasant food taste
- Challenges in achieving satiety
- Insufficiency of social support
- Limited understanding of obesity related complications
- Financial constraints
 - Food, gym memberships, equipment
- Relationships
- Mental health
- Stigma
- Access to safe recreational spaces
- Cooking abilities
- Living environment
- Age
- Safety concerns
- Lack of social support
- Jobs



Physician Barriers



Time



Lack of knowledge



Bias



Lack of resources



Concern for patient
experience

Online feedback,
concern for disapproval
ratings




Helen

- ▶ What are barriers that you can see in this patient?
 - ▶ Time
 - ▶ Children
 - ▶ Relationships?
- ▶ What are motivators for this patient?



What are motivators for weight loss?

- Health
 - Self-esteem
 - Appearance
 - Well-being: losing weight, stamina
 - Avoid bullying
 - Enjoyable
 - Avoid medications
 - Desire for pregnancy
 - Others
- 



How to address barriers

- ▶ Active listening
 - ▶ Reflect back on the main parts of conversation
- ▶ Ask open ended questions
 - ▶ Discuss problem behaviors
- ▶ Elicit-provide-elicited by asking consent
- ▶ Affirmation of patient's thoughts
- ▶ Ask the patient's view
 - ▶ Remember conflicts arise when interventions are not suited
- ▶ Include praise/ recognition and understanding
- ▶ Summarize



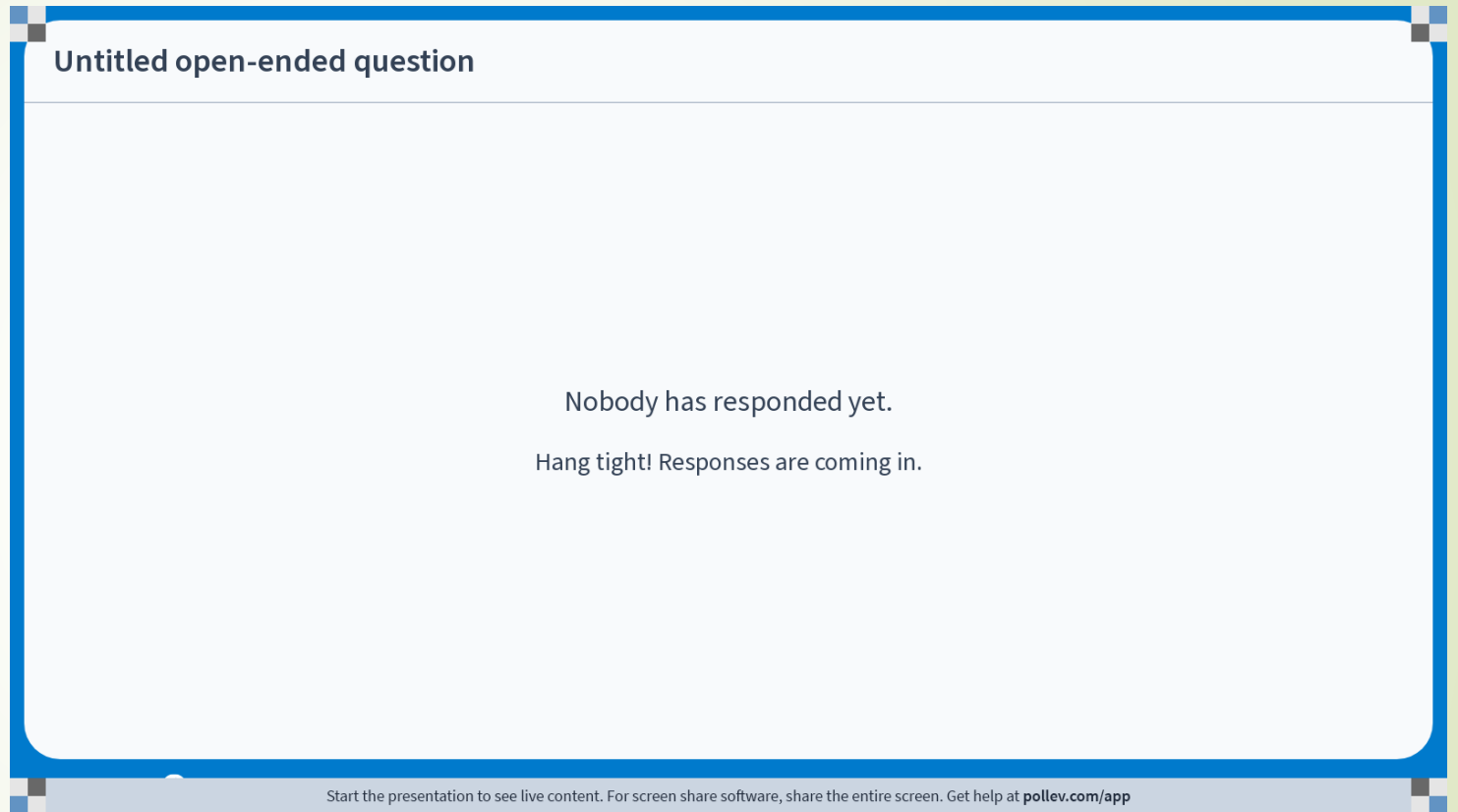
Coaching vs Counseling



- Self-directed changes
 - Positive regard
 - Future driven
 - Increases patient awareness
 - Increase patient responsibility
 - It can be timely
- Physician lead
 - Past focused
 - Onus placed on physician
 - Paternalistic
 - Saves time
 - Gives out good information

Both are needed to be successful. However, people often need a coach and advocate more than someone directing them.

How to start the conversation



Untitled open-ended question

Nobody has responded yet.
Hang tight! Responses are coming in.

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Counseling



- ▶ Use visual aides
- ▶ Check for understanding
- ▶ Listen
- ▶ Give opportunities to ask questions
- ▶ Close follow up and frequent follow up
- ▶ Use appropriate word choices
 - ▶ Words really matter

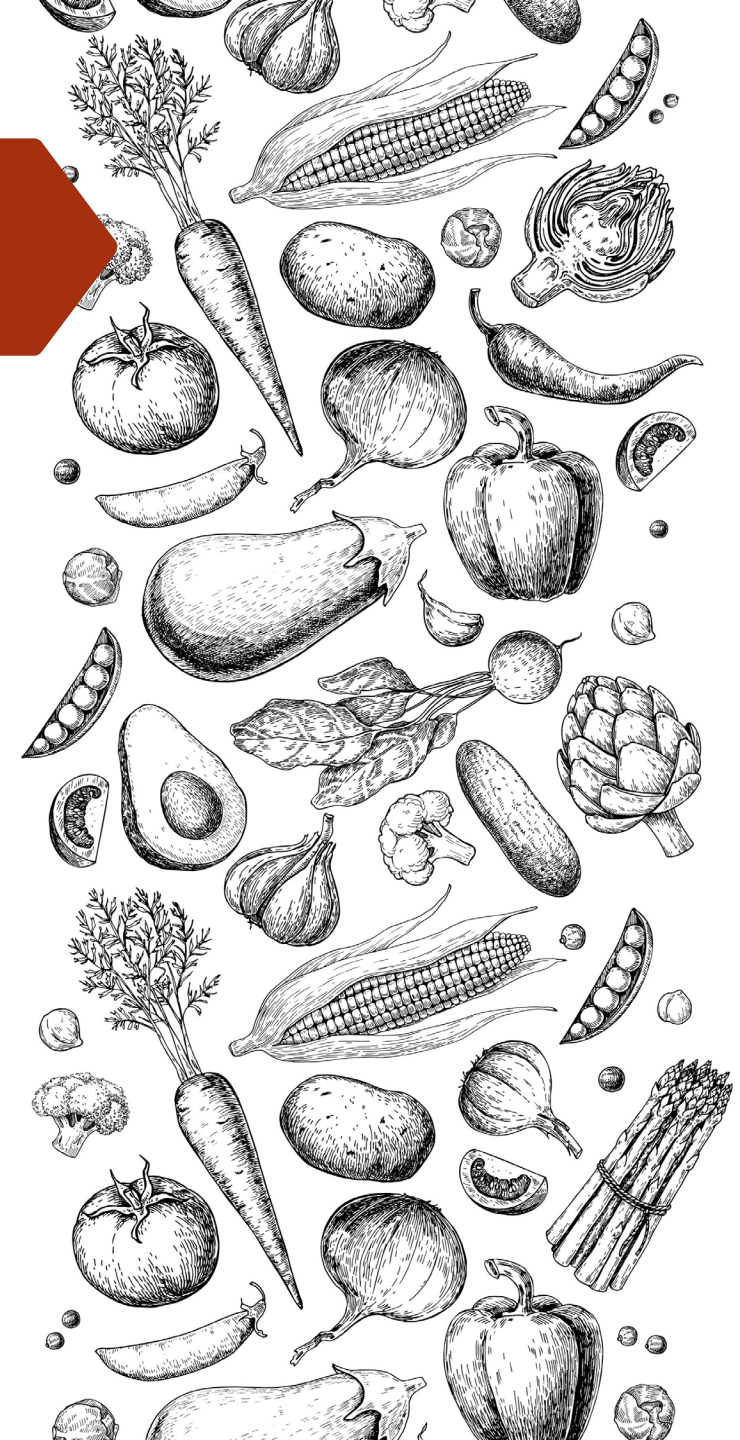


Setting realistic expectations

- ▶ Pick on thing to work on at a time
- ▶ Set a goal that is reachable
- ▶ Patient should pick these
- ▶ Offer multiple options
- ▶ Add before taking away
- ▶ Do not use food as a reward
- ▶ Rewards are important

What changes matter?

- ▶ Establishing patterns
- ▶ Incorporating routines and diet
- ▶ Organizing daily physical activities
- ▶ Physical exercise has been found to improve diet leading to consumption of more vegetables and legumes after 33 weeks of exercise
- ▶ Four parts
 - ▶ Triggers (emotional)
 - ▶ Eating
 - ▶ Setting goals
 - ▶ Exercise



Eating Ideas

- ▶ Use smaller plates
- ▶ Make efforts to eat consciously
- ▶ Add more colorful foods
- ▶ Keep healthy snacks
- ▶ Shopping when full
- ▶ Having plans for eating out
- ▶ Have food available that is nutrient dense and calorie light
- ▶ Calorie counting
 - ▶ Does not work for everyone



Exercise

- ▶ Walking is the favored mode of physical activity of those who maintain weight loss
- ▶ Encourage increasing steps (phone counters)
- ▶ Join a club/ group sport/ activity
- ▶ Set reminders
- ▶ Get family involved
- ▶ Find activities that they enjoy





Others



Buddy system

Learn to avoid temptations

Get support system- discuss
with others

Positive thinking

Reduce stress

Consider weight loss
programs



Mental Health

- Needs to be considered
- Behavioral health can be helpful with managing weight
- Cognitive behavioral therapy can help with stress management
- Can help patients be insightful to other underlying conditions
- Women have stigma different than men
- Children/adolescent have different mental health concerns



What is the role of medications?

- ▶ These should be used as an aid in weight loss.
- ▶ Medications can be a very powerful tool
- ▶ “With lifestyle measures alone, a weight loss of 5 to 7 percent of body weight is more typical but often difficult to maintain. In trials comparing pharmacologic therapy with placebo, weight loss of 5 to 10 percent using both drug and behavioral intervention is considered a very good response, and weight loss exceeding 10 percent is considered an excellent response. Hence, it is helpful to understand the expected magnitude of weight loss with any given intervention in order to align it with the patient's goal. Of note, in a randomized trial, treatment with [semaqlutide](#) resulted in an 14.9 percent average weight loss, with roughly one-third of patients achieving ≥ 20 percent weight loss at one year [26]. These results suggest that developments in pharmacotherapies may ultimately yield weight loss results approaching those seen in bariatric surgery.”



Who benefits from medications for weight?

- ▶ They are most useful when used in combination with diet, exercise, and lifestyle changes. They may be recommended for those who do not lose weight with diet and exercise alone
 - ▶ Body mass index of 30 or more
 - ▶ Body mass index of 27 and 29.9 who have other medical problems
- ▶ No data for pregnancy, lactation, or reproductive years
 - ▶ Age 12 and above have been studied
 - ▶ Further information is needed for safety in these groups

Things to Consider

- ▶ Medications are a long term game.
- ▶ Risks, benefits and limits of medications
- ▶ Side effects can be bothersome
- ▶ Insufficient data on stopping medications
- ▶ May not reach goal weight without other interventions
 - ▶ However, any loss reduces risks of cardiovascular disease





Key Points



- Recognize barriers will be
- Practicing motivational interviewing can be helpful in managing
- Focusing on motivators is beneficial over the barriers
- Set realistic expectations and boundaries
- Having an appropriate threshold to begin medications
- All medications have side affects and they may not be safe for everyone
- Remember even a small move in the right direction can have big impacts on health



Sources



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Thank you

