Three "Ds" – elements for successful weight loss outcomes: role of healthcare professionals

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Background

- Obesity is a highly prevalent, chronic and relapsing disease.¹
- In people with obesity (PwO), body weight loss of $\geq 5\%$ is generally considered to be clinically meaningful. Maintenance of weight loss is also one of the important treatment goals in PwO.^{2,3}
- Long-term comprehensive weight loss programmes with regular follow-ups have been shown to improve successful maintenance of weight loss.^{2,4}
- Although some PwO do receive treatment and guidance from healthcare professionals (HCPs), there is substantial unmet medical need for advocating the importance of weight loss maintenance, and prevention of weight regain.
- The 3D approach, including Discussion, Diagnosis and Direction, for the management of PwO is presented.

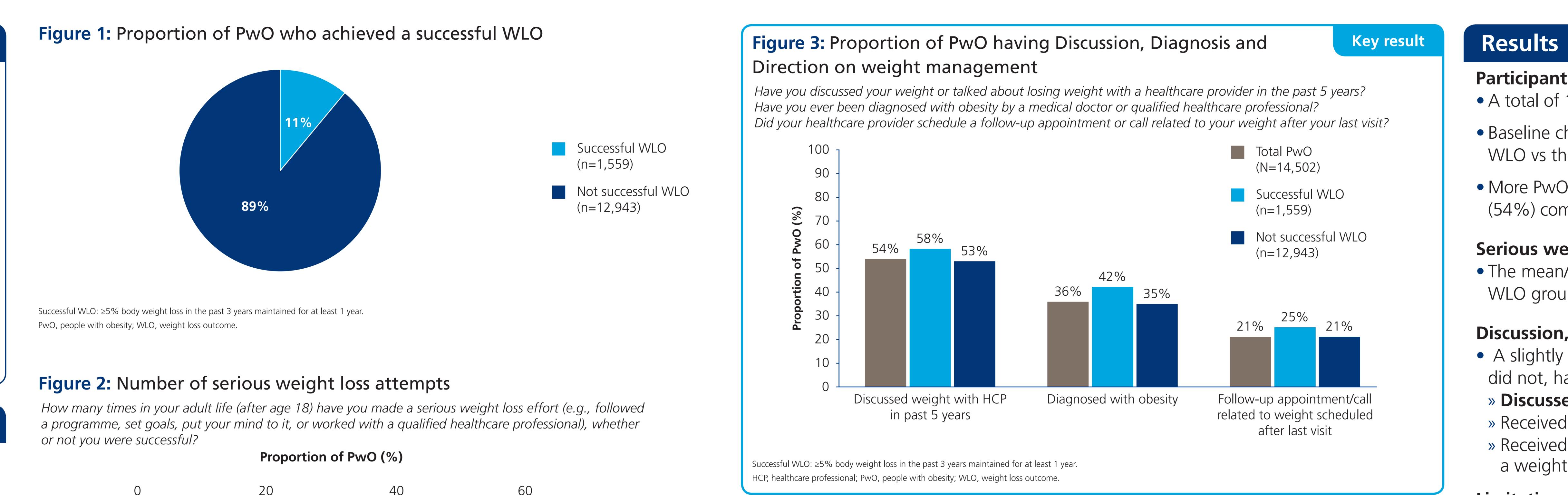
Objective

• To identify factors that may contribute to a successful weight loss outcome (WLO; $\geq 5\%$ body weight loss maintained for ≥ 1 year), the characteristics and experience of PwO with and without successful WLOs were examined using data from the ACTION-IO study.⁵

Methods

- The Awareness, Care, and Treatment In Obesity maNagement International Observation (ACTION-IO) study (NCT03584191) was a cross-sectional, non-interventional, descriptive study that collected data via an online survey among PwO and HCPs across 11 countries: Australia, Chile, Israel, Italy, Japan, Mexico, Saudi Arabia, South Korea, Spain, the UAE and the UK between 4 June 2018 and 15 October 2018.⁵
- The objective of the ACTION-IO study was to identify the perceptions, attitudes and behaviours of PwO and HCPs and to assess the potential barriers to effective obesity care.⁵
- Here we present data from the PwO sample; eligible PwO:
- » Were \geq 18 years old
- » Had a body mass index (BMI) of \geq 30 kg/m² (\geq 25 kg/m² in Japan and South Korea), calculated from self-reported height and weight.
- A successful WLO was defined as $\geq 5\%$ body weight loss in the past 3 years that was maintained for at least 1 year. Failure to either achieve or maintain weight loss was categorised as a not successful WLO.
- Analyses are descriptive and no statistical testing has been applied.

This trial was sponsored by Novo Nordisk and is registered with ClinicalTrials.gov (NCT03584191).



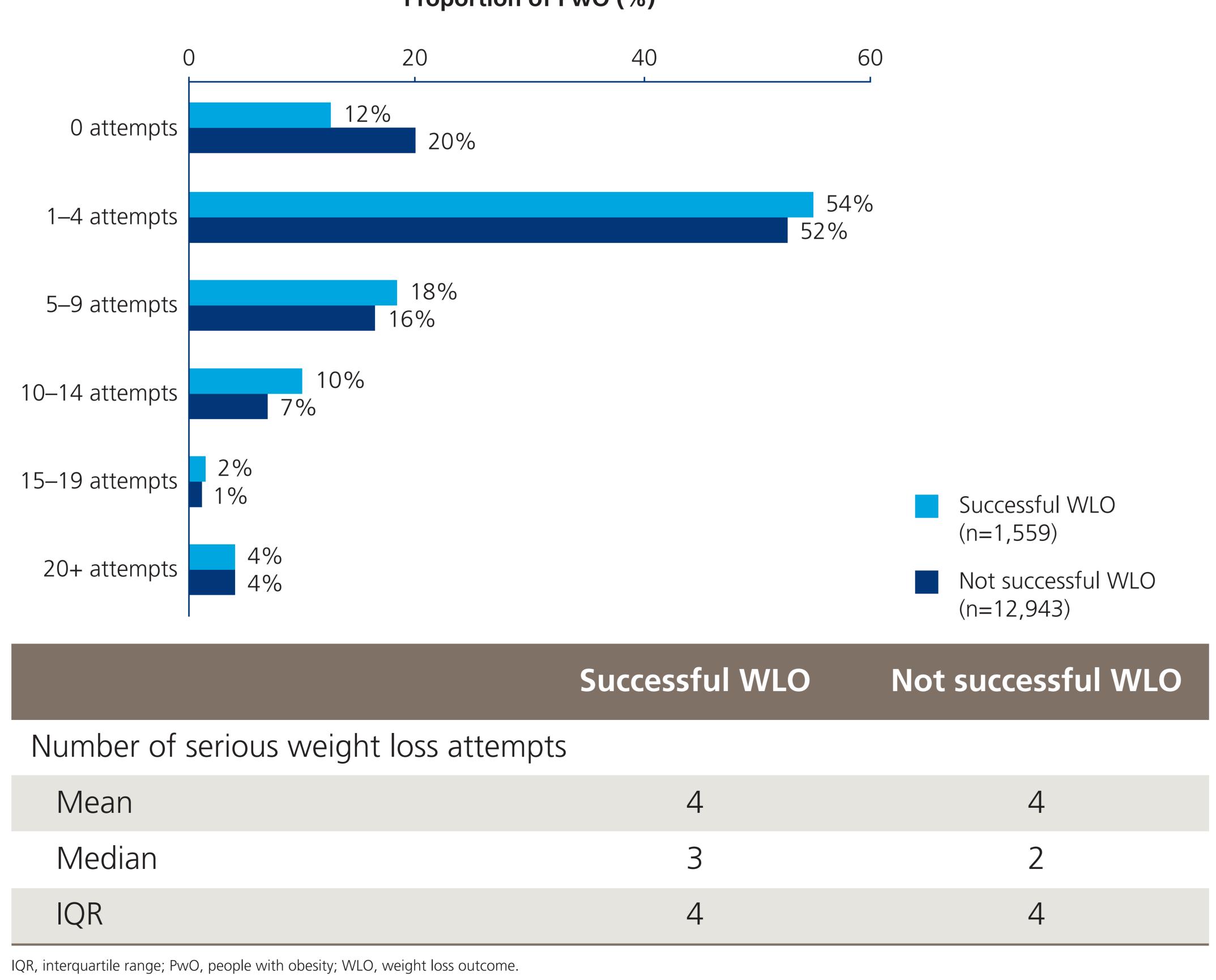


Table 1: Participant demographics and characteristics

	Successful WLO (n=1,559)	Not successful WLO (n=12,943)
Proportion of total	11%	89%
Male	53%	52%
Mean age, years	49	48
Current mean BMI, kg/m ² *		
Japan and South Korea ⁺	27.4	27.6
Other countries [‡]	33.9	34.1
Mean number of comorbidities	2.0	1.8
Frequency of self-weighing		
≥1 time in a week	54%	39%
Ever had bariatric surgery, % yes	5%	2%

⁺For participants in Japan and South Korea, obesity was defined as a BMI of \geq 25 kg/m².

^{$+}For participants in Australia, Chile, Israel, Italy, Mexico, Saudi Arabia, Spain, UK and UAE, obesity was defined as a BMI of <math>\geq$ 30 kg/m².</sup>

BMI, body mass index; WLO, weight loss outcome.

Participant demographics and characteristics

- A total of 14,502 PwO completed the survey; 11% had a successful WLO (**Figure 1**).
- Baseline characteristics were generally similar between those who had a successful WLO vs those who did not (**Table 1**).
- More PwO who had a successful WLO weighed themselves at least once every week (54%) compared with those who did not have a successful WLO (39%; **Table 1**).

Serious weight loss attempts

• The mean/median number of serious weight loss attempts was similar between WLO groups (Figure 2).

Discussion, Diagnosis and Direction

- A slightly greater proportion of PwO who had a successful WLO, vs those who did not, had:
- » **Discussed** their weight with an HCP within the past 5 years
- » Received a **Diagnosis** of obesity
- » Received **Direction**; specifically, had a follow-up appointment with an HCP or had a weight-related call scheduled (**Figure 3**).

Limitations and strengths

- Limitations of the study include reliance on self-reported height and weight measurements for BMI, respondent recall as well as the descriptive and cross-sectional nature.⁵
- Strengths of the study include the large number of respondents, the international nature of the study and the stratified sampling technique used to provide a representative cohort of the general population.⁵

Conclusions

- A large majority (89%) of PwO did not achieve a successful WLO despite multiple serious weight loss attempts.
- Neither gender, nor age, nor number of weight loss attempts was associated with a successful WLO.
- Weekly self-weighing was more prevalent among PwO who had a successful WLO compared with those who did not.
- PwO who had a successful WLO were more likely to have discussed excess weight/losing weight with an HCP, received a diagnosis of obesity and had a follow-up visit scheduled.
- Thus, use of a **3D** approach from HCPs including **D**iscussion, **D**iagnosis and **D**irection has been associated with successful WLO in PwO.
- Increased HCP education on the clinical management of obesity is also required to improve WLOs.



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