Misperceptions towards obesity management in people with obesity and healthcare professionals



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Background

- The cornerstone of obesity management is multicomponent lifestyle interventions consisting of exercise and diet supported by changes in behaviour. 1-4
- Many people with obesity (PwO) are unsuccessful in their attempts to reach clinically significant weight loss solely by these approaches.^{5,6}
- Treatment guidelines recommend the use of pharmacotherapy if the response to lifestyle interventions is insufficient to reach or maintain a 5–10% loss in body weight. 1–4
- Bariatric surgery is an effective treatment recommended for severe obesity and for PwO with poorly controlled type 2 diabetes. 1-4
- It is currently unclear how PwO and healthcare professionals (HCPs) across the world view the use of prescription weight loss medications and bariatric surgery for the treatment of obesity

Objective

• The data from the ACTION-IO study were used to identify the attitudes, perceptions and concerns of PwO and HCPs towards the use of medications and surgery to manage obesity.⁷

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 2018.⁷
- 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.⁷
- Eligible PwO:
- » Were ≥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.
- Eligible HCPs:
- » Were medical practitioners with ≥2 years of clinical experience
- » Had ≥70% of their time involved in direct patient care
- » Had seen ≥100 patients during the past month, with ≥10 of whom having a BMI ≥30 kg/m², or 25 kg/m² in Japan and South Korea.
- HCPs specialising in general, plastic or bariatric surgery were excluded.
- Analyses are descriptive and no statistical testing has been applied.

Results

Participant demographics and characteristics

- The survey was completed by 14,502 PwO and 2,785 HCPs.
- Baseline characteristics for the two groups are presented in Table 1.
- » HCPs from both primary care and specialities were equally represented in this study (51% vs 49%).
- » 13% of PwO reported having tried prescription weight loss medication and 3% had weight loss surgery/bariatric surgery.

Table 1: Participant demographics and characteristics

	PwO (N=14,502)	HCPs (N=2,785)
Male	51%	70%
Mean age (range), years	43 (18–88)	48 (26–74)
Mean BMI, kg/m ² * Japan and South Korea [†] Other countries [‡]	27.6 34.1	23.1 25.4
Participants with obesity Japan and South Korea [†] Other countries [‡]	100% 100%	22% 8%
PwO who have ever tried weight loss/bariatic surgery	3%	NA
PwO who have ever tried any prescription weight loss medication	13%	NA
HCP category Primary care physician Specialist	NA NA	51% 49%

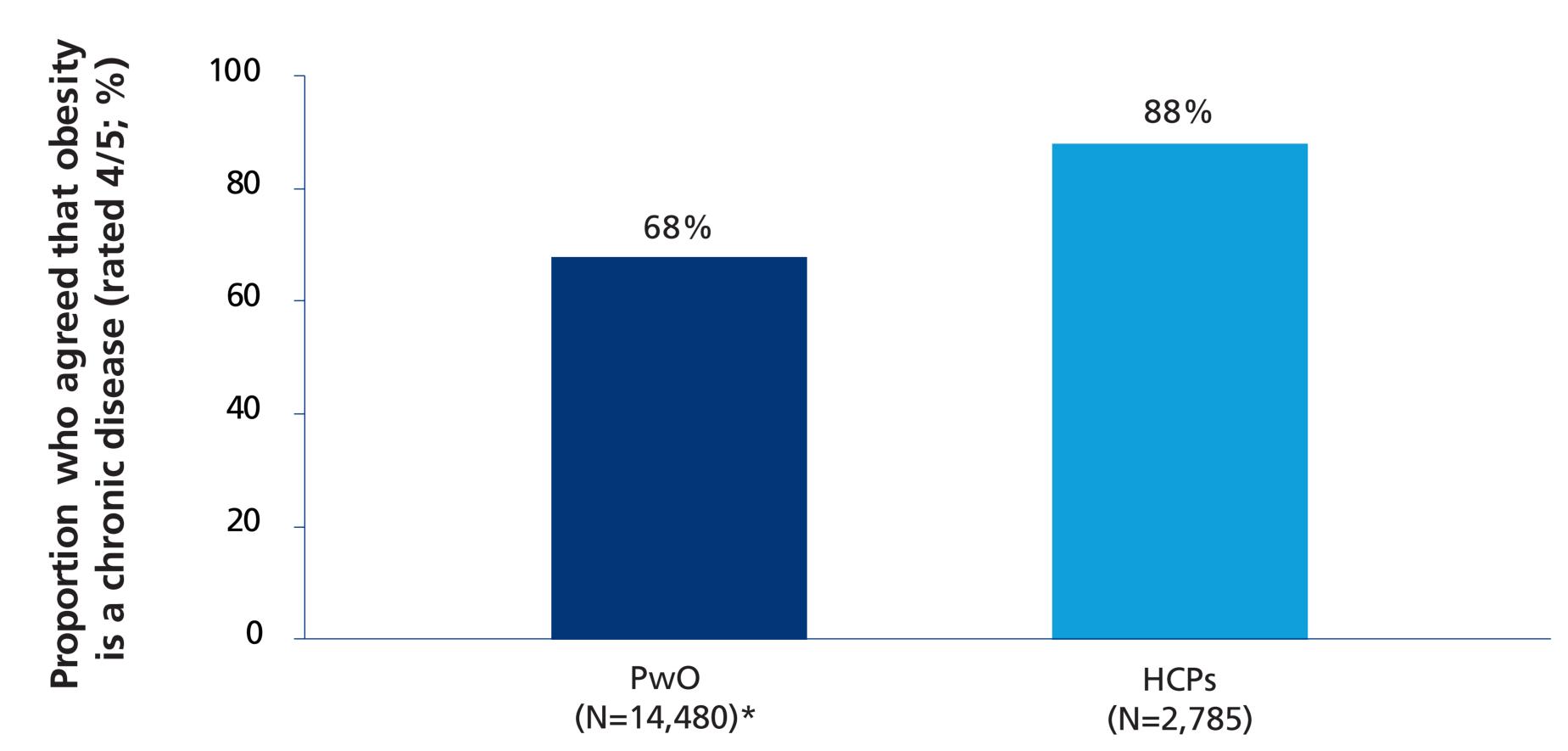
*Extreme outliers (values > 1.5 interguartile ranges above the third quartile) were removed for the mean BMI calculation. [†]For participants in Japan and South Korea, obesity was defined as a BMI of ≥25 kg/m². [‡]For participants in Australia, Chile, Israel, Italy, Mexico, Saudi Arabia, Spain, UK and UAE, obesity was defined as a BMI of ≥30 kg/m². BMI, body mass index; HCP, healthcare professional; NA, not applicable; PwO, people with obesity.

Attitudes of PwO and HCPs towards obesity as a chronic disease

• A smaller proportion of PwO (68%) compared with HCPs (88%) agreed with the statement that obesity is a chronic disease (Figure 1).

Figure 1: Perception of obesity as a disease

Please indicate how much you agree with the statement 'obesity is a chronic disease' (rated on a scale where 1 = do not agree at all, 5 = completely agree)



*n-size is less than total due to respondents selecting 'not sure' for attributes. HCP, healthcare professional; PwO, people with obesity.

Attitudes of PwO and HCPs towards weight loss medications

 More PwO (72%) preferred to lose weight by themselves than to use prescription weight loss medications (Figure 2).

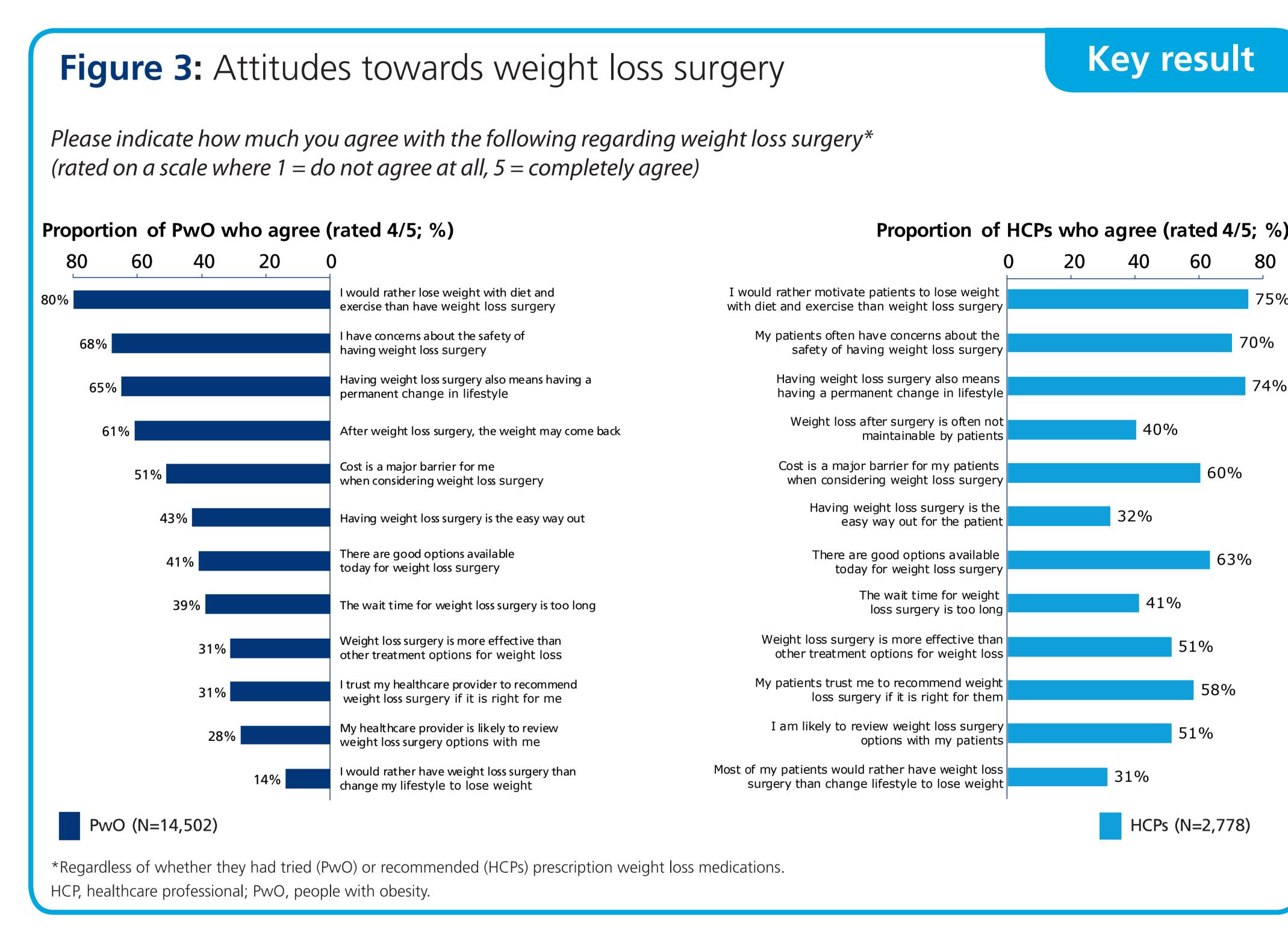
- However, only 40% of HCPs reported that PwO preferred to lose weight by themselves vs using prescription weight loss medications.
- » On average, HCPs recommended the use of prescription weight loss medication for 19% of their patients with obesity (data not shown).
- 60% of PwO would rather take prescription weight loss medication than undergo bariatric
- A similar proportion of PwO and HCPs were concerned about the side effects of prescription weight loss medications (68% and 65%, respectively) and the long-term safety of such therapies (65% and 66%, respectively).
- Cost was reported as a barrier for prescription weight loss medication usage by 47% of PwO and 55% of HCPs.
- PwO were less likely to trust the prescription choice of HCPs (45%), while more HCPs perceived that patients trust them to select the right prescription medication (67%).
- About one third of HCPs (29%) said they do not know enough about prescription weight loss medications to feel comfortable prescribing them (data not shown).

Key result Figure 2: Attitudes towards prescription weight loss medications Please indicate how much you agree with the following regarding prescription medications for weight loss* (rated on a scale where 1 = do not agree at all, 5 = completely agree) Proportion of PwO who agree (rated 4/5; %) Proportion of HCPs who agree (rated 4/5; %) n concerned about the long-term safety associated with prescription weight loss medications weight loss medication that is right for them prescription weight loss medication to help with weight loss efforts rescription weight loss medications are more effective than other treatment options There are good options available today for prescription weight loss medications I am likely to prescribe new prescription PwO (N=14,502) *Regardless of whether they had tried (PwO) or recommended (HCPs) prescription weight loss medications. HCP, healthcare professional; PwO, people with obesity.

Attitudes of PwO and HCPs towards bariatric (weight loss) surgery

- Both PwO (80%) and HCPs (75%) preferred diet and exercise over bariatric surgery (Figure 3).
- » On average, HCPs recommend the use of bariatric surgery for 13% of their patients with obesity (data not shown).

- 68% of PwO were concerned by the safety of bariatric surgery, and 70% of HCPs said their patients often had concerns about the safety of bariatric surgery.
- 31% of PwO trusted their HCPs to recommend bariatric surgery if appropriate.
- » 58% of HCPs reported that their patients trust them to recommend bariatric surgery if appropriate.
- Cost was reported as a barrier for bariatric surgery by 51% of PwO and 60% of HCPs.



Conclusions

- While 68% of PwO and 88% of HCPs agreed that obesity is a chronic disease, they both favoured lifestyle changes alone as the preferred management strategy.
- » This suggests that education is required on the science of obesity.
- PwO and HCPs shared concerns of efficacy, safety and cost of prescription weight loss medication and bariatric surgery, which may affect treatment decisions.
- While attitudes towards the use of prescription weight loss medications and bariatric surgery may differ by obesity class, these results indicate a lack of knowledge from both PwO and HCPs of the evidence-based effective treatments, which could be a barrier to effective obesity management.
- » Unlike other chronic diseases,^{8,9} PwO expressed a low level of trust in their HCPs to prescribe the appropriate treatment such as prescription weight loss medications and bariatric surgery if required.
- Further efforts are needed to increase the knowledge about evidence-based effective obesity treatment options.

This trial was sponsored by Novo Nordisk and is registered with ClinicalTrials.gov (NCT03584191). Presenter A Cuevas reports personal fees from Abbott, Novo Nordisk, Teva Pharmaceutical Industries and Saval Pharmaceuticals during the conduct of the study; she is a member of the Strategic Centre for Obesity Professional Education (SCOPE) of the World Obesity Federation and a SCOPE International Fellow. Editorial assistance was provided by ArticulateScience Ltd. and was funded by Novo Nordisk. Presented at Obesity Week 2019, 4–8 November 2019, Las Vegas, NV, USA.

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