Gender differences in attitudes towards the management of obesity

R Nawar¹, AA Alfadda², P Auerbach³, ID Caterson⁴, A Cuevas⁵, D Dicker⁶, JCG Halford⁷, M Iwabu⁸, J-H Kang⁹, R Reynoso¹⁰, G Rigas¹¹, J Salvador¹², P Sbraccia¹³, V Vázquez-Velázquez¹⁴

¹The Weight Care Clinic, Dubai Healthcare City, Dubai, UAE; ²Obesity Research Center and the Department of Medicine, College of Med Las Condes, Santiago, Chile; ⁶Internal Medicine D, Hasharon Hospital Rabin Medical Center, Petah Tikva, Israel; Sackler School of Medicine, Tel Aviv, Israel; S ⁹Department of Family Medicine, Kangbuk Samsung Hospital, Sungkyunkwan University of New South Wales, Sydney, Australia; ¹²Department of Endocrinology & Nutrition, Clínica Universidad de Navarra, Pamplona, Spain; CIBER Fisiopatología de la Obesidad y Trastornos de la Conducta Alimentaria, Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán, México City, México

Background

- Weight-related attitudes and behaviour among people who have overweight or obesity have been shown to vary based on gender, race/ethnicity, education and income.^{1–3}
- As more females than males attend weight loss programmes⁴ and are more likely to seek medical attention,⁵ we hypothesised that there would be differences in approaches to healthcare in females and males with obesity.

Objective

• To investigate the gender differences in attitudes towards the management of obesity using data from the ACTION-IO study.⁶

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 people with obesity (PwO) and healthcare professionals (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 2018.⁶
- 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.⁶
- Here we present data from PwO sample; eligible PwO:
- » Were \geq 18 years old
- » Had a current body mass index (BMI) of ≥30 kg/m² (≥25 kg/m² in Japan and South Korea), calculated from self-reported height and weight.
- A stratified sampling approach for PwO was used, whereby recruitment into the study was according to pre-determined demographic targets based on gender, age, income, race/ethnicity (in select countries) and region.
- To reduce PwO sampling bias and ensure that the group was largely representative of the general population, the final PwO sample was also weighted to the representative demographic targets within each country.
- » In the results, percentages were derived from the final weighted sample; the numbers of respondents were unweighted.
- A successful weight loss outcome (WLO) was defined as $\geq 5\%$ body weight loss in the past 3 years that was maintained for at least 1 year. Inability to either achieve or maintain weight loss was categorised as a not successful WLO.
- Analyses are descriptive and no statistical testing has been applied.

Results

Participant demographics and characteristics

 A total of 14,502 PwO completed the survey; of these, 51% (n=7,438) were male and 49% (n=7,050) were female (**Table 1**), due to the stratified sampling used in the study.

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

Table 1: Participant demographics and characteristics

	Male PwO (n=7,438)	Female PwO (n=7,050)
Mean age (range), years	51 (18–88)	45 (18–88)
Current mean BMI, kg/m ² * Japan and South Korea [†] Other countries [‡]	28.6 35.7	30.3 36.7
Mean number of comorbidities	1.8	1.8
Ever had bariatric surgery, % yes	2%	3%
Ever tried prescription weight loss medication, % yes	9%	17%

Participant demographics data (age and BMI) are reported for the final unweighted sample; only those who identified as male or female are included Extreme outliers (values >1.5 interguartile ranges above the third guartile) were removed for the mean BMI calculatior

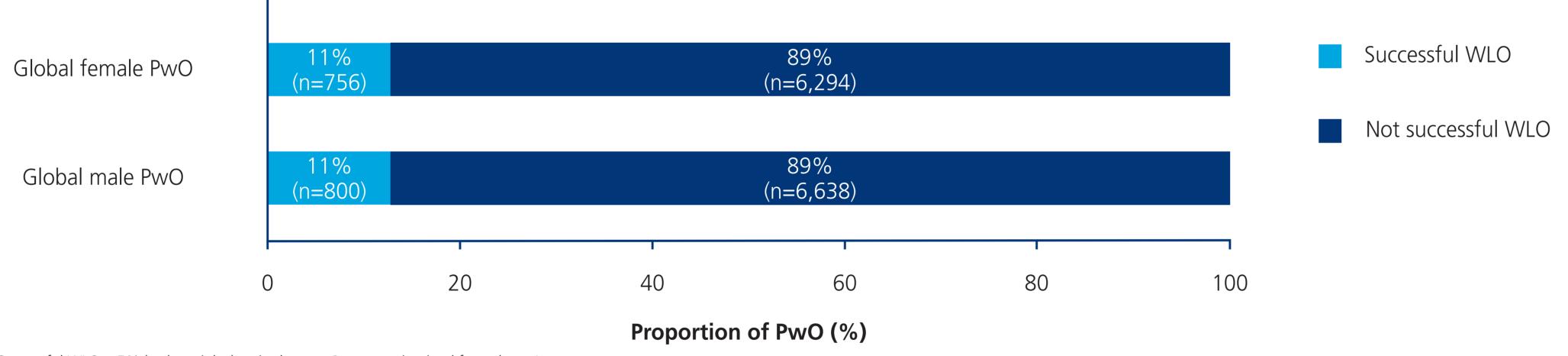
⁺For participants in Japan and South Korea, obesity was defined as a BMI of \geq 25 kg/m².

For participants in Australia, Chile, Israel, Italy, Mexico, Saudi Arabia, Spain, UK and UAE, obesity was defined as a BMI of ≥30 kg/m². BMI, body mass index; PwO, people with obesity; WLO, weight loss outcome.

Weight loss outcome by gender

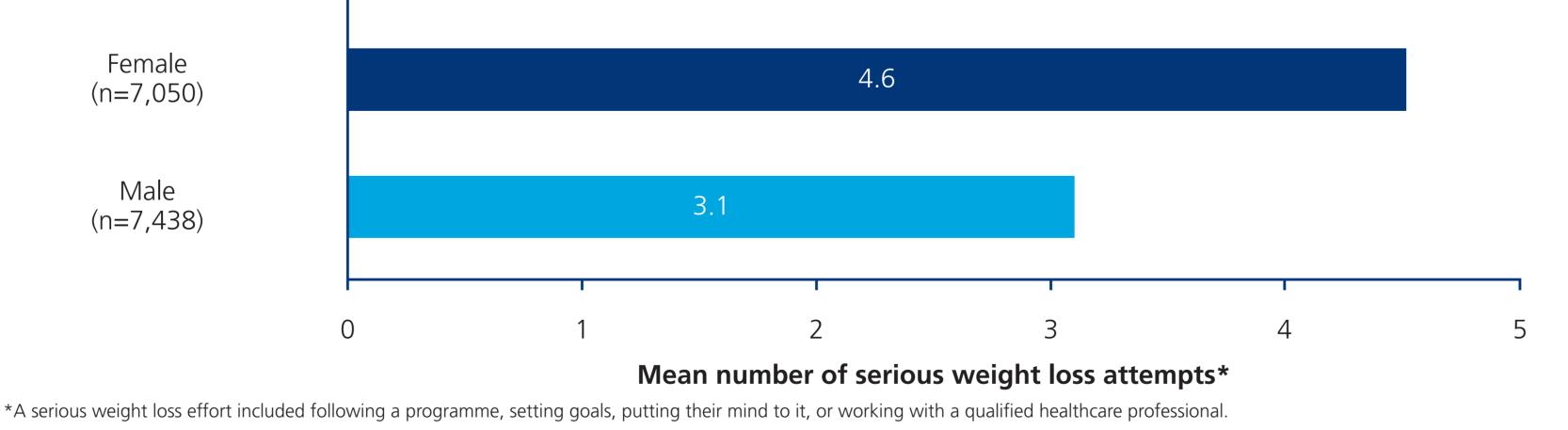
- A similar proportion of male and female PwO achieved a successful predetermined WLO of $\geq 5\%$ body weight loss in the past 3 years that was maintained for at least 1 year (11%; **Figure 1**).
- Mean number of serious weight loss attempts differed between males and females (**Figure 2**).

Figure 1: Weight loss outcome



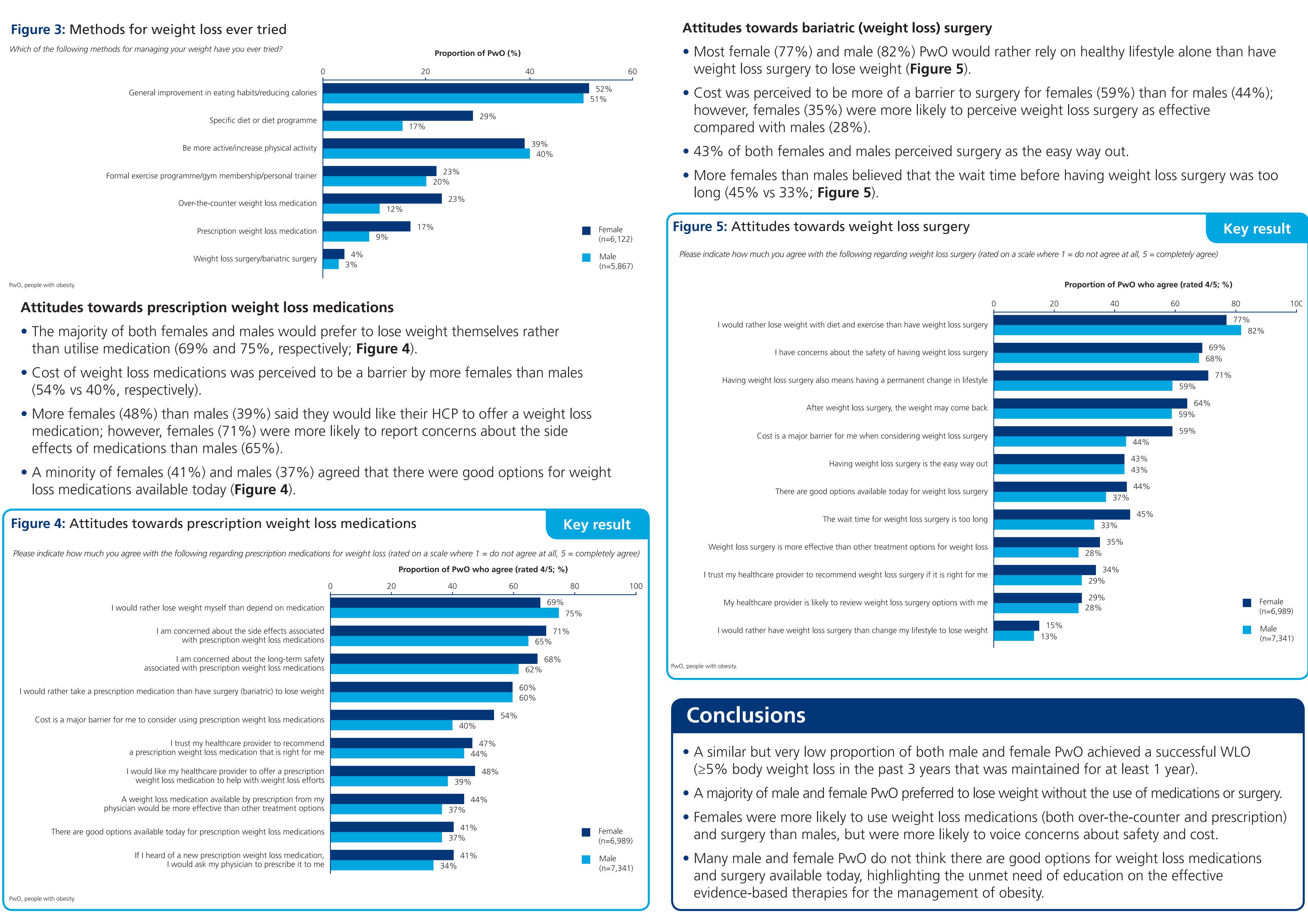
Successful WLO: \geq 5% body weight loss in the past 3 years maintained for at least 1 year PwO, people with obesity; WLO, weight loss outcome

Figure 2: Mean number of serious weight loss attempts



Methods of weight loss

- Diet/healthy eating and exercise were the most common methods of weight loss in both females and males (**Figure 3**).
- » Females were more likely to use a specific diet programme than males.
- Females were more likely to use over-the-counter or prescription weight loss medications than males, but in general, their use was not common.
- For both genders, the percentage of PwO who had undergone bariatric surgery was low (**Figure 3**).







<u>qrs.ly/wuand1i</u>

Presenter R Nawar reports financial support from Novo Nordisk to attend an obesity conference during the conduct of the study, and personal (consultancy and speaker) fees from Novo Nordisk outside the submitted work. Editorial assistance was provided by Articulate Science Ltd. and was funded by Novo Nordisk. Presented at Obesity Week 2019, 4–8 November 2019, Las Vegas, NV, USA.