

Improved health care systems needed to combat obesity crisis

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Policy and environmental changes are very important in preventing unhealthy weight gain but may not help people with severe obesity achieve substantial weight loss, according to a report published online February 18 in *The Lancet*. Instead, innovative new treatments, health delivery strategies and initiatives aimed at improving the care of people suffering from obesity must be deployed to fight what has now become a worldwide epidemic, says the lead author of the study.

"An estimated 600 million people worldwide now suffer from obesity, and that represents an enormous burden both for individuals and for society at large," says William H. Dietz, MD, PhD, director of the Sumner M. Redstone Global Center for Prevention and Wellness at Milken Institute School of Public Health at the George Washington University. "Our findings suggest that we must take steps now to transform the way obesity is treated, with more emphasis on partnerships, better training for [health professionals](#), and initiatives aimed at erasing the stigma surrounding this serious health condition."

The paper by Dietz and his colleagues is one of a series on obesity published online in *The Lancet* and presented at the Healthy Eating Research Conference held in Baltimore, MD.

Dietz and his colleagues conducted one of the most comprehensive reviews of the literature published between 2000 and December 2013 on [obesity management](#). They concluded that the current clinical delivery systems are poorly suited for the prevention and management of obesity.

In addition, they found that health professionals do not have the training and tools they need to treat this condition.

The report says that many health professionals express biased opinions toward people with obesity and that such attitudes can impair the quality of [health care delivery](#). "Many health professionals view people with obesity as lazy or lacking in willpower," Dietz says. "The disrespect shown by some providers may discourage future visits or delay essential care that could lead to weight loss or the detection of diseases associated with obesity."

The study suggests that training for health professionals should emphasize the complex biological factors that contribute to the development of obesity, factors that have nothing to do with willpower. The authors also urge health professionals to examine their own attitudes towards obesity and rely on new evidence-based tools that can help them care for people who suffer from obesity.

Health care providers must also stay informed on the latest therapeutic advances, including behavioral therapy to change diet and exercise; new drugs or devices that can dampen the appetite; and bariatric surgery, which can reduce the size of the stomach to help facilitate weight loss.

"Even a 5 to 10 percent weight loss can lead to a reduced risk of stroke, heart disease, and diabetes," Dietz points out. "Health professionals should stress the benefits of modest weight loss—and work with their patients to decide on the most appropriate therapy."

Dietz and his colleagues suggest that future efforts to improve care for obesity should integrate clinical and community initiatives. Dietz points out that few examples on integrated systems exist, but that obesity will not be solved by clinical efforts alone. Complementary improvements in the nutrition and physical activity environments will be required to

prevent [obesity](#), and to augment and sustain [weight loss](#).

Provided by George Washington University

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