

April 18, 2015 - Grand Rapids, MI

Weight Loss:

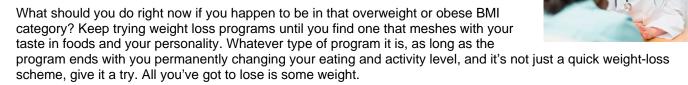
A Better Solution

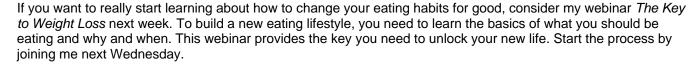
Wrapping up our look at the research paper that examined the effectiveness of commercial weight loss studies, I think the authors dropped the ball. Yes, they did what they intended to do: review the research on weight loss programs with the purpose of being able to point physicians to effective programs based on the evidence. But that ends up being lame. All they did was provide an outside source the physicians could recommend; they completely ignored the idea of physicians providing weight loss programs within the medical practice.

Although the authors were all physicians or physicians in training, they think like doctors. If patients have a problem that requires a specialist beyond the physicians' area of expertise, the algorithms dictate they refer the patient.

I don't think that's good enough any more. In an article on managing obesity in a primary care practice, the authors suggested that the "physician lacked the time, training, and incentive (i.e., insurance reimbursement for obesity management) required to deliver a comprehensive lifestyle intervention." (2) I can't disagree with the training part; in the article we've been examining, none of the researchers had any training in nutrition, exercise, or other components of weight loss lifestyles. They were physicians, that's all. They wouldn't consider providing the solution themselves, or they didn't feel it was a viable solution in most primary care practices.

Yet that's where the solution will have to come from. Why would I say that? The most important reason is related to three simple words I hear repeatedly: "My doctor said..." Primary care physicians hold a lot of power, and they aren't using it well enough. Sure it's complicated, takes time, and an entire practice would need to be trained, but it can be done. Two colleagues and I are working to that end and will be rolling out a turn-key program for primary care practices in several months.





What are you prepared to do today?

Dr. Chet

References:

- 1. Ann Intern Med. 2015;162(7):501-512. doi:10.7326/M14-2238.
- 2. Int J Obes (Lond). 2013 August; 37(0 1): S3-11. doi:10.1038/ijo.2013.90.



WGVU Straight Talk on Health

Hear Dr. Chet's take on the latest health news and research—listen to Straight Talk on Health Sunday at 7:30 a.m. and 6 p.m. in the Eastern Time Zone on WGVU-FM 88.5 or 95.3, or listen live via the Internet by going to www.wgvu.org/wgvunews and clicking on "Listen Live" at the top.

The health information in this message is designed for educational purposes only. It's not a substitute for medical advice from your healthcare provider, and you should not use it to diagnose or treat a health problem or disease. It's designed to motivate you to work toward better health, and that includes seeing your healthcare professional regularly. If what you've read raises any questions or concerns about health problems or possible diseases, talk to your healthcare

Subscribe to the Message from Dr. Chet at DrChet.com — © Chet Zelasko PhD LLC