

IDENTIFICATION

1. Opportunistic
2. Existing Disease
3. Health Screening
4. Seeking Advice

Health Professional

GP, Practice Nurse, Dietitian,
Health Visitor, Pharmacist,
Health Care Assistant

Consider using electronic
obesity template

ASSESSMENT

1. Height & Weight - BMI
BMI= weight (kg) / height (m²)
For Asian adults, risk factors may be of concern at lower BMI.
2. Waist Circumference
3. Patient History
4. Raise the issue of weight (DH)
5. Assess readiness and motivation to change

| Classification | BMI (kg/m ²) | Waist Circumference | | Co-morbidities present |
|----------------|--------------------------|-----------------------------------|------------------------------------|------------------------|
| | | Low Men < 94cm Women < 80cm | High Men > 94cm Women > 80cm | |
| Healthy weight | 18.5-24.9 | | | |
| Overweight | 25.0-29.9 | | | |
| Obesity I | 30.0-34.9 | | | |
| Obesity II | 35.0-39.9 | | | |
| Obesity III | > 40.0 | | | |

General Advice on losing weight, healthy eating and physical activity (DH - *Why Weight Matters* card). Offer follow-up appointment.

Diet and physical activity

Diet and physical activity; consider drugs

Diet and physical activity; consider drugs; consider surgery

1ST LINE ADVICE

Lifestyle Assessment by health professional to increase physical activity and healthy eating using behavioural change techniques.

ASSESS

Discuss current lifestyle, diet and levels of physical activity.

ADVISE

Advise on dietary, physical activity and lifestyle modifications
Your Weight, Your Health booklet (DH)

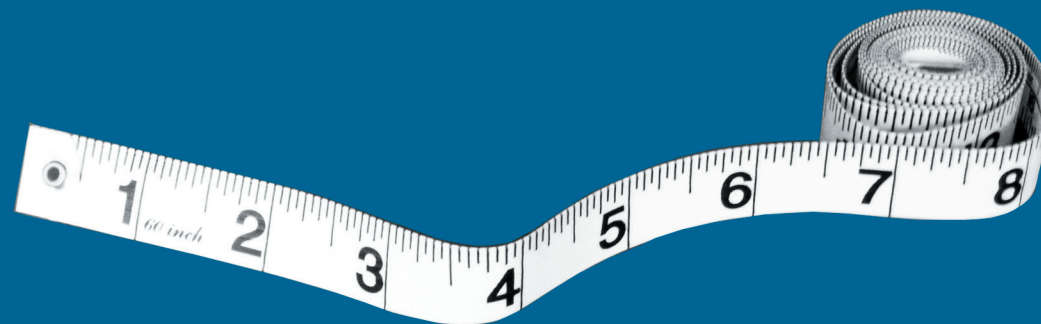
AGREE

Establish individual goals and a realistic weight management plan (5-10% weight loss)

Negotiate the most effective method of managing weight loss/maintenance.

ASSIST/ARRANGE

Signpost to local physical activity and healthy eating initiatives. Refer to other health professionals and any relevant programmes.



FOLLOW UP

Monitor weight loss: suggested minimum is 3 and 6 months, or more often if is patient wanting active support.

Unsuccessful weight loss
< 5% at 3 months

Repeat 1st Line Advice and reassess at 6 months

Successful weight loss
> 5% at 3 months
> 10% at 6 months

Maintenance phase with 3/12 monthly reassessments

Haringey **NHS**
Teaching Primary Care Trust

PATHWAY
Adult Obesity Care

2ND LINE ADVICE

Unsuccessful weight loss after 6 months but motivated to change.

Dietitian Assessment

- Provide a comprehensive assessment.
- Monitor weight loss
- Use referral forms if unsuccessful weight loss and recommending pharmacotherapy.

3RD LINE ADVICE

GP Assessment

Pharmacotherapy

Orlistat

- >30kg/m²
>28kg/m²
plus co-morbidity
- Continue treatment if 5% weight loss at 3 months.
- Advise patient to register with the Motivation Advice, Proactive Support (MAP) programme.

Sibutramine

- >30kg/m²
>27kg/m²
plus co-morbidity
- Continue treatment if 5% weight loss at 3 months.
- All patients should have controlled blood pressure (145/95 or below) and have no history of coronary artery disease, arrhythmias, congestive heart failure or stroke.
- Advise patient to register with the online support programme 'Change for Life'.

Rimonabant

(not assessed by NICE)

- A newer drug and much less is known about its effectiveness.
- Problems with adherence due to side effects.

4TH LINE ADVICE

Bariatric Surgery

(main provider - Whittington Hospital)

- For patients:
> 40kg/m²
35-40 kg/m²
plus co-morbidity
- Further assessment in hospital including a psychology assessment.

MAINTENANCE

Ongoing monitoring of weight should take place to ensure that patients are supported and referred back into the pathway should they have a relapse in weight management.

