

How to Initiate Nonbiased Conversations About Weight With Your Patients



When initiating a conversation about obesity, follow these important steps:

Assess readiness for change (eg, “How likely are you to consider a few small lifestyle changes—specifically ones that would lead to increasing physical activity and eating healthier—to improve your health?”)

Assess



Ask



Ask permission to discuss a patient’s weight (eg, “Would it be okay if we discussed your weight?”)

Advise



Help your patient explore and compare treatment options; explain each option clearly using plain language, point out where there are clear differences between options (eg, bariatric surgery vs medication), and offer positive and negative outcomes for each choice

Treat



Proceed with the treatment plan agreed on between you and the patient

Refer



Refer for additional care if needed (eg, obesity specialist, dietitian, behavioral therapy, bariatric surgeon)

Discussion about a patient’s weight should be:



- Patient centered
- Empathetic
- Unbiased—free of judgment, shame, and guilt
- Focused on health rather than weight
- Performed using appropriate terminology and people-first language
 - Use “person/patient with obesity” or “affected by obesity”
 - Avoid language that may be offensive, such as “obese patient” or “you are fat”
 - “Morbid obesity” is no longer an accepted term
- Focused on shared decision-making and providing practical options to assist with weight loss

Other discussion points:



- Risks of any comorbidities that may be improved with weight loss (eg, metabolic, cardiovascular, obstructive sleep apnea)
- Importance of staying on treatment
 - Stopping lifestyle changes and medication likely will lead to regain of weight due to metabolic adaptation
- Realistic goals and expectations
 - Help patients use the SMART (Specific, Measurable, Achievable, Relevant, Time Sensitive) method for setting goals (eg, “I plan to lose 20 lb in 6 months by using an app to log my daily calories and adhering to a 1500-calorie diet”)
 - Attaining their high school weight may not be realistic, but they may successfully achieve 5% to 10% weight loss in 3-6 months
- Follow-up on a regular basis—every 3-6 months, or more often if titrating antiobesity medications
- Titrate therapy based on manufacturer recommendations; for most agents, manufacturers recommend discontinuing therapy if at least 5% weight loss is not achieved after 3 months