

A Practical Approach to Weight Management

Weight Management Plans Should Be Person-Centric

- 1 Discuss weight management without bias or judgment.
- 2 Review the history of obesity-focused care.
- 3 Use Motivational Interviewing to develop SMART goals for weight loss discussions.



Conduct an Obesity-Focused Assessment

LEARN ABOUT

- **Weight struggle:** Onset of weight gain, previous attempts, barriers preventing weight loss, and family history.
- **Eating habits:** Hunger and satiation levels, frequency and time of meals, presence of cravings, and emotional eating.
- **Activity:** Current physical activity.
- **Concerns and goals:** Top concerns with current weight and personal goals related to weight loss.

SCREEN FOR COMPLICATIONS SUCH AS:

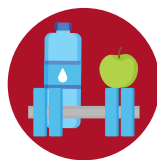
Diabetes/prediabetes	Musculoskeletal disorders
Hyperlipidemia	Sleep apnea
Cardiovascular	Obesity-related cancer risk
Metabolic-associated liver disease	Polycystic ovarian syndrome (PCOS)/infertility
Depression/low self-esteem	Chronic kidney disease
Impaired quality of life	

Consider Combination Therapy (if Applicable)

LIFESTYLE CHANGES

LIFESTYLE FOUNDATIONS:

- **Nutrition:** Dietitian referral, assess nutrition literacy, and food preferences. Provide resources.
- **Physical activity:** Explain benefits, set realistic goals, community resources.
- **Sleep:** Emphasize quality sleep, assess presence of sleep apnea, insomnia, refer to specialists if needed.
- **Stress management:** Behavioral health referral for support.
- **Tobacco cessation:** Counseling and pharmacotherapy if needed.
- **Medication adjustment:** Consider using weight loss promotion or weight-neutral medication when possible.



WEIGHT MANAGEMENT MEDICATIONS

PHARMACOTHERAPY:

- Indicated for BMI >27 kg/m² with comorbidity, or BMI >30 kg/m².
- Consider medication impacts, availability, administration, contraindications, costs, and personal preferences.



METABOLIC (BARIATRIC) SURGERY

SURGICAL WEIGHT MANAGEMENT:

Indicated for:

- BMI ≥40 kg/m² without medical problems
- BMI ≥35 kg/m² with severe comorbidities
- BMI 30–34.9 kg/m² with type 2 diabetes



FOLLOW-UP:

- Frequent touchpoints with the health care team improve outcomes.

