

## Introduction

Obesity is a condition where your weight affects your health. It is a long-term (chronic) condition with a wide range of causes. It usually develops over time. Our goal is to assist people in attaining a healthy weight, to improve their quality of life and reduce their risk of weight related conditions. Modest weight loss (5-10%) is associated with a profound effect on the risk of developing diabetes and improves cardiovascular disease risk, blood pressure, sexual dysfunction, mobility, fertility, mood, and quality of life.

## Assessment

Our assessment will include calculating your Body Mass Index (BMI), waist measurements, and assessing any health effects of your weight. This may include blood tests such as for cholesterol and diabetes. We will discuss lifestyle such as diet and exercise.

## Dietician Assessment

We will often refer patients to a dietician for an in-depth assessment. This is part of the multidisciplinary (team) approach to weight management and is associated with better outcomes. This is particularly necessary if we are considering medical interventions to assist with weight control.

## Body Mass Index (BMI)

Your Body Mass Index is calculated by dividing your weight in kilograms by your height in meters. A Body Mass Index higher than 30 is high risk for obesity.

See here for a BMI calculator; <https://www.safefood.net/bmi-calculator>

## Interventions

### Diet

Numerous diets have been promoted for weight loss, some of which have risks associated with them and many of them have poor evidence for long term sustainability. All dietary interventions work by reducing the dietary intake to create an energy deficit. It is common to aim for around 600 calories less than your usual daily intake. Low calorie diets (LCD 800-1600kcal/day) can be used for more rapid weight loss initially but it is important to keep them nutritionally complete. Very low-calorie diets (VLCD less than 800kcal/day) have significant health risks and should only be used under medical supervision. See here for more information; <https://www.indi.ie/all-food-facts-and-fact-sheets.html#Healthy>

One of the most studied diets with good evidence for sustainability is the Mediterranean diet. It has been shown to have positive cardiovascular (heart) health effects as well as metabolic benefits that

assist in long term weight control. This diet is based on pulses (beans, peas lentils etc), vegetables, healthy fats (olive and rapeseed oils), oily fish (mackerel, salmon, anchovies, sardines, herring etc), nuts and fruit, reduced red meat. See here for more information;

<https://www.bhf.org.uk/information-support/heart-matters-magazine/nutrition/mediterranean-diet>

### Physical Activity

Physical activity is an integral part of weight management with even moderate-intensity activity (about 150mins/week) having significant effects on visceral fat stores (dangerous belly fat surrounding organs) and cardiovascular risk. It takes high levels of exercise (>300mins/week) to significantly affect body weight, but more modest changes will help maintain weight loss and improve health and quality of life. Exercise should be increased gradually and can be incorporated into everyday life such as walking, gardening, taking the stairs or cycling. Structured or supervised exercise programmes can be particularly beneficial. Modern phones and watches can help by keeping a record of step-count and inactivity time such as watching TV.

### Behavioural Interventions

Strategies focusing on modifying behaviours that contributed to developing overweight and obesity have been shown to be an effective treatment and have more sustained outcomes when used either alone or in conjunction with other treatments. These include;

- Self-monitoring with once weekly weight check and use of diet and activity apps or devices.
- Group support such as Weight Watchers or Slimming World
- Goal setting and strategies for dealing with weight gain
- Identifying and eliminating cues for problem behaviour at home and work
- Cognitive behavioural therapy (CBT)

See here for further information;

<https://www.hse.ie/eng/about/who/cspd/ncps/obesity/programme-resources/hse-talking-about-weight-guide-final-6.pdf>

### Medical Interventions

Medication can be used to help with weight reduction and maintenance. This should only be started after medical assessment and in conjunction with dietary and lifestyle interventions. These include Orlistat (Xenical, Alli), Liraglutide (Saxenda, Victoza) and Semaglutide (Ozempic, Wegovy).

#### *Orlistat (Xenical, Alli)*

Orlistat is a tablet that inhibits fat digestion. It is taken with meals. Patients should take supplements of fat soluble vitamins (A,D,E,K). It can cause steatorrhoea (loose fatty stools) if fat is not restricted from the diet. It has been shown to double effective weight loss in clinical trials when compared to lifestyle interventions only.

#### *Liraglutide (Saxenda, Victoza)*

Liraglutide is a daily injection that mimics a hormone released after you eat and thus regulates hunger. Its effect will cease once discontinued so it may need to be used for prolonged periods or indefinitely to maintain weight loss.

Liraglutide is available on the HSE to patients who meet strict criteria under the GMS and Drugs Payments Scheme. An application must be made for approval including BMI>35, prediabetes and cardiovascular risk factors as well as evidence of significant lifestyle and behavioural modifications.

#### *Semaglutide (Ozempic, Wegovy)*

Semaglutide is a once weekly injection that mimics a hormone released after you eat and thus regulates hunger. Its effect will cease once discontinued so it may need to be used for prolonged periods or indefinitely to maintain weight loss. In trials it showed a greater effect than Liraglutide with a 12% weight reduction compared to placebo.

#### Bariatric Surgery

Surgery can help people to lose between 20 and 40% of their weight along with lifestyle modifications but it is normally reserved for people that have serious health problems caused by their weight and where other interventions have failed. People need long term follow-up after surgery as they can have digestive issues, gallstones, or vitamin deficiencies. Often blood tests are required to monitor, and lifestyle changes will need to be maintained to prevent weight gain. We can refer to appropriate clinics if you wish to consider this option.