Divergence of patient and clinician perceptions of obesity and weight management

Introduction

Obesity is a chronic disease associated with significant morbidity, for which two frequently addressed individual monotherapy has been the first line of treatment. However, with obesity and weight management, one-size-fits-all approaches may not be effective. This study aimed to identify barriers reported by people with obesity (PWO) and clinicians that hinder the delivery of health care.

Methods

Six 2-hour focus groups were conducted with PWO in three US cities: New York, Dallas, and San Francisco. Two groups were conducted for each obesity class (I, II, or III), and 68% were female. Participants were over 18 years of age and could identify for obesity diagnosis. The focus group leader invited participants to discuss their weight loss experiences and weight loss efforts. A purpose sampling strategy was used, and market research firms facilitated recruitment. The focus groups and interviews were audiotaped and transcribed. The transcripts were analyzed with NVivo qualitative software and a coding scheme was developed.

Results

Obesity definitions.

Clinicians (96%) define obesity by body mass index (BMI), adhering to diagnostic guidelines. Two-thirds of PWO (8 MDs; 2 nurse practitioners [NPs]; 2 physicians assistants [PAs]) and 12 PCPs (17) adhered to diagnostic guidelines. The focus groups and interviews were audiotaped and transcribed. The transcripts were analyzed with NVivo qualitative software and a coding scheme was developed.

Motivation barriers.

PWO and clinicians agreed on the top practical challenges related to weight loss in daily life (74% and 66%, respectively). A common challenge for PWO is the loss of support from family and friends (50%). Clinicians, in turn, emphasize the role of family, friends, or partner (80%), while PWO think that clinicians do not often discuss obesity with their family and friends. PWO think that they face more frequent barriers than their clinicians do. A common challenge for PWO is the loss of support from family and friends (50%). Clinicians, in turn, emphasize the role of family, friends, or partner (80%), while PWO think that clinicians do not often discuss obesity with their family and friends. PWO think that they face more frequent barriers than their clinicians do. Clinicians define obesity primarily as a lifestyle issue compared with their weight loss efforts. A purposive sampling strategy was used, and market research firms facilitated recruitment. The focus groups and interviews were audiotaped and transcribed. The transcripts were analyzed with NVivo qualitative software and a coding scheme was developed.

Social barriers: PWO (79%) emphasized social relationships with people who resisted their weight loss efforts more frequently than did clinicians (38%). Spouse or partner barriers.

Medical barriers.

What do you mean by weight loss as an example?

Clinicians consider obesity a chronic disease and behavioral changes (54%) and diet (51%). PWO think that they face more frequent barriers than their clinicians do. Clinicians define obesity primarily as a lifestyle issue compared with their weight loss efforts. A purposive sampling strategy was used, and market research firms facilitated recruitment. The focus groups and interviews were audiotaped and transcribed. The transcripts were analyzed with NVivo qualitative software and a coding scheme was developed.

Respondent quotes for barriers:

Obesity specialists, were conducted by telephone. Both groups included physicians and nurse practitioners: physician-physician specialty was American Board of Obesity Medicine (ABOM) certified. The interview leader asked clinicians perceptions of obesity. In their interviews, with patients, and observations of patients’ weight loss experiences.

Practical barriers, costs:

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Conclusions

This qualitative association provides the basis for quantitative examination of these perceptions and their causes, the understanding of the role of stakeholders and patient–clinician collaborations in the treatment of obesity.