Abstract Form		
Program Affiliation:		UCLA Internal Medicine
Presenter Name		Cheung, Kelly
(Last, First):		Bouri, Natalie
Co-Aut	thors:	Jiang, Josh
Project Title:		Obesity Medicine Utilization in a County Hospital: Analysis and Interventions to Increase Provider Education
Research Category (please check one):		
□ 0	riginal Research	☐ Clinical Vignette ☐ Quality Improvement ☐ Medical Education Innovation

Introduction:

While weight-related comorbidities such as hypertension and hyperlipidemia are often treated in primary care, obesity itself continues to be undertreated despite being recognized as a chronic disease by the World Health Organization (WHO). Counseling, therapy, and resources are often underutilized. Only 40% of adults with overweight or obesity reported receiving counseling to lose weight. (Greaney 2020) One study found that 96% of adults with obesity in the US were not accessing adequate obesity care. (Stokes 2018).

One barrier could be limited confidence and knowledge in treating obesity amongst providers, as well as unawareness of available community resources to target nutrition and physical activity. Multiple studies have demonstrated that formal obesity education is still lacking among providers from all education levels, including both medical students and physicians. (USPSTF 2018, Goff, 2006) This has significant long-term implications on patients' access to multi-modal interventions for weight loss.

Our aim was to assess the state of obesity at a large county hospital, identify utilization of treatments and resources, assess provider knowledge, and improve education on obesity medicine with the ultimate goal of improving patient outcomes.

Methods:

We collected data from our Electronic Health Record on the percentage of patients with elevated BMIs in our primary care clinic at a county hospital who received nutrition consults, weight loss medications, and/or referrals to bariatric surgery. We surveyed sixty-six Internal Medicine residents and attendings to assess confidence in treating obesity, using motivational interviewing, counseling on nutrition, using weight loss medications, and referring to bariatric surgery. We also assessed how helpful it would be to learn more about nutrition, prescribing weight loss medications, and referring to bariatric surgery. We created a one-page educational handout to distribute and educate providers (both resident physicians and attending physicians) on motivational interviewing and multimodal approaches to addressing obesity, such as nutrition consults, pharmacologic therapy, and bariatric surgery.

Results:

Of approximately 4600 patients at our primary care clinic, 48% of them had class 1 obesity (BMI greater than 30). Of this population, only 12.3% had been referred to see a nutritionist 9.3% had received a prescription for weight loss medication. Of the 66 providers surveyed, 40% were attending physicians and 32.3% were first-year resident physicians. The majority did not agree that they received sufficient training to help patients achieve sustainable weight loss (over 60%). Most did not feel confident in using motivational interviewing for weight loss or counseling on nutrition (over 70%). About half of physicians felt confident in referring patients to bariatric surgery. About half felt confident in referring patients to social workers, nutritionists, and community resources. Still, respondents felt it would be very helpful to learn more about community resources and bariatric surgery (over 50%) and weight loss medications (over 60%).

Conclusion:

Many trainees and physicians do not feel confident about treating obesity, which is one contributor to obesity being undertreated. Multimodal are also often underutilized. As the area of obesity medicine develops further, formal education for medical trainees is essential. Future directions of this project include distributing a second survey to assess providers for retention of educational materials and analyzing its translation to clinical practice and utilization of targeted interventions to treat obesity.