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The Effect of an Obesity Management Tracking Tool on Following Best Practice
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Introduction

Purpose: implementation of a tracking tool that guides and monitors the application of adult obesity management practice guidelines.

Goal: promote clinician adherence to adult obesity management practice guidelines and improve the outcomes of patients' weight loss efforts.

Background and Significance

- Obesity is a condition consisting of excess body fat.

- Body mass index (BMI) is used to classify weight categories. Obesity consists of a BMI ≥30.

More than 6 out of 10 men are overweight or obese (66.2%)
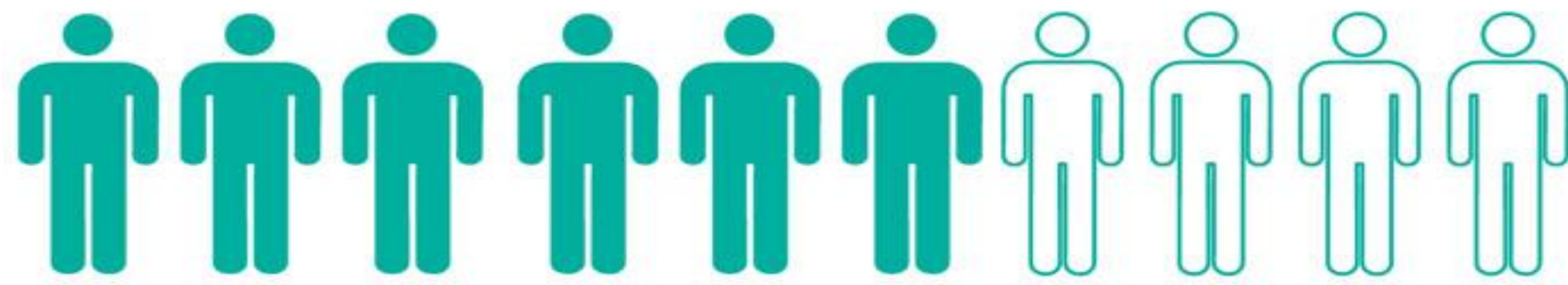
More than 5 out of 10 women are overweight or obese (57.6%)

- Obesity is linked with chronic diseases such as type 2 diabetes, cardiovascular disease, hypertension, hyperlipidemia, and some cancers (CDC, 2018).

- Globally, there were ~ 4 million deaths and 120 million disability-adjusted life years related to obesity in 2015 (Afshin et al., 2017).

- Worldwide financial cost of obesity: ~ US $2 trillion in 2014 (Dobbs et al., 2014).

- Indirect costs of obesity: lost economic growth from lost workdays, decreased worker productivity, mortality and permanent disability (Dee et al., 2014).

- Studies have found a practice gap related to primary care providers under diagnosing obesity and irregularly integrating obesity management clinical practice guidelines into practice (Mattar et al., 2017).

Methods

Design
- Quality improvement project with an analysis of workflow.

- Theoretical Framework: The Model for Improvement Plan-Do-Study-Act

Sample
- A physician was the targeted user of the obesity management form, but a component of the project required review of the practice's patient charts.

- Every patient that was seen for an obesity management follow up visit during the project implementation period had their chart reviewed for data recorded pre and post implementation of the weight management tool.

- 39 charts had data both pre and post intervention.

Setting
- Single Physician Private Practice

Measures
- The rate of completion of the obesity management tracking tool.

Analysis
- Data points analyzed: recorded weight, BMI, blood pressure, obesity pharmacotherapy start and end dates, obesity comorbidities, and clinical labs.

- Compliance with each data point was reported using descriptive statistics. The McNemar change test was used to compare each data point pre and post implementation of the tool.

Results

The McNemar change test showed statistically significant improvement in documentation of weight (McNemar 4.000, $N=39$, 1 df, $p=.039$) and BMI (McNemar 7.579, $N=39$, 1 df, $p=.004$).

Discussion

Implications to:

Practice: Improved documentation of BMI and weight have potential future implications of early intervention when weight is trending in an unhealthy direction.

Quality/Safety: Potential remaining implications of the obesity management tracking tool is that it can enhance the quality of weight management by standardizing data collection based on established clinical guidelines.

Healthcare Policy:
- Demonstrate the effectiveness of weight management on overall health
- Support the call for health insurance providers to cover care for obesity as a standard benefit.

Economics

Reduce or eliminate the complications of obesity thereby saving on healthcare dollars and the indirect costs of lost productivity

Education: support clinician education in weight management by providing them with an evidence based standardized form to track their obesity management assessment, diagnosis, and plan.

Tables, References, & Contact information