

Management of the obese patient

IDENTIFICATION AND ENGAGEMENT BY PRIMARY HEALTH CARE PROVIDER

Assess risk factors:

- Blood pressure
- Fasting lipids and glucose
- Smoking status
- Relevant family history

Assess motivation to lose weight

NOT MOTIVATED

- Offer review with Practice Nurse in 3-6 months
- Manage risk factors as appropriate

NOT MOTIVATED BUT AT RISK

- (i.e. BMI >35 with co-morbidities, or BMI > 40)
- Arrange review with Practice Nurse in 6 weeks
 - Consider Care Plus
 - Manage risk factors as appropriate

MOTIVATED

- Arrange appointment with PN
- Manage risk factors as appropriate

FIRST APPOINTMENT WITH PRACTICE NURSE

- Explain FAB programme (**F**ood/**A**ctivity/**B**ehaviour)
- Provide 1/52 food and activity diary
- Offer smoking cessation support if appropriate
- Arrange follow-up appointment in 1/52

SECOND APPOINTMENT WITH PRACTICE NURSE

- Review compliance with diary and reassess motivation to continue with programme

REMAINS MOTIVATED

- Refer to PHO FAB programme *[final pathway will include link to information and referral form]*
- Arrange follow-up appointment with PN for monitoring and support at interval agreed by patient
- Recall at 6/12 for PN review and renewal of GRx

FOLLOW-UP APPOINTMENT WITH PRACTICE NURSE

- Chart progress with weight reduction
- Review communication from FAB providers
- Consider suitability for drug treatment
 - BMI >30
 - compliant with FAB programme
 - patient request

⇒ Arrange appointment with GP
- Arrange further follow-up appointment with PN for monitoring and support at interval agreed by patient

DRUG TREATMENT

The decision to prescribe remains with the individual clinician but it is recommended that patients are engaged with the FAB programme.

[final pathway will include link to NZ guidelines advice on drug Rx]

BARIATRIC SURGERY

The surgical treatment of obesity is a last resort reserved for the most severe cases who must meet strict access criteria.

[final pathway will include link to surgical referral form]

In addition, the patient must be psychologically capable of adhering to lifelong dietary restrictions following the surgical procedure.

[final pathway will include link to guidelines on post-surgical care]

Potential candidates for bariatric surgery should be reviewed by the GP 9-12 months after commencing the FAB programme and assessed against the current surgical access criteria.

NZ GUIDELINES

<http://www.moh.govt.nz/moh.nsf/indexmh/clinical-guidelines-for-weight-management-in-nz-adults>