Bariatric patient management

Anna Young
Specialist Bariatric Physiotherapist

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Session plan

- Obesity - setting the scene
- Physiotherapy role in a managing obesity
- Assessment and management
Obesity Prevalence

• In England, 24.7% of adults (aged 16 years & over) are obese, and a further 37% are overweight. This means a total of 62% of adults have excess weight (HSE 2012)

• The prevalence of obesity among adults in England has increased from 15% to 25% between 1993 and 2012 (HSE 2012)

• By 2050 obesity is predicted to affect 60% of adult men, 50% of adult women and 25% of children (Foresight 2007)
Adult BMI status by Gender
Health Survey for England 2011-2013
Obesity harms health

Heart disease
Stroke
Depression and anxiety
Sleep apnoea
Asthma
Type 2 diabetes
Liver disease
Cancer
Reproductive complications
Osteoarthritis
Back pain
Raising the issue of weight

- Always assume that your patient knows they are overweight
- Linking weight to an existing medical concern is often an opportunity to raise issue of weight management
  - E.g. are you aware that losing weight could help you manage your back pain better
- Listening carefully to the response can provide some insight into their self recognition and motivation for any treatment suggestions.
How do we get our patients to move?
Assessing readiness to change

• Look for signs of ambivalence, is this person ready to make changes

• Motivation

• What can they manage

• What is the priority
Physical Activity Guidelines

• There are currently no specific guidelines for exercise prescription for bariatric patients

• Standards for adults to maintain weight:
  • 150 minutes of moderate intensity exercise over 7 days Or 75 minutes of vigorous exercise

• Exercise can be broken down into 10 minutes chunks

• 2 days per week must be working on strengthening muscle

• All adults should limit sedentary behaviour
  • Department of health guidelines
Physical Activity Counselling

- Addressing barriers - get your patient to work out how to make changes themselves, this will increase adherence.

- Look out for patients who appear over enthusiastic – they will likely set themselves unrealistic goals leading to failure.

- Telling your patient what they need to do only reduces adherence – people don’t really like being told what to do.

- Introduce the idea of pacing to reduce burnout or risk of injury.
Physiotherapy management in complex bariatric patients

- Medical & Dx history
- Social history & lifestyle
- Raising the issue of weight
- **4 key areas to focus on:**
  1. Activity levels – barriers to exercise
  2. MSK/Neuro health – red flags
  3. Bladder and bowel health
  4. Sleep health
Getting started with exercise

- **Realistic goals** agreed and set with the patient – solution focused. Patients must come up with the goal that is relevant and achievable.

- **Break it down:**
  - Long term goal
  - Physical activity goal – what you need to do to achieve the long term goal

- Write it down
- Avoid overdoing it
- Plan, plan, plan – increasing physical activity doesn't always happen spontaneously
- Make it fun
- Use mobile phone or fitness gadgets
MSK Management

- Pain management and education
- Pain control – meds/ice/heat/gels
- Posture retraining and improving postural bad habits
- Acupuncture
- Relaxation
- Mindful movements
- Regular exercise - strengthening
- Pacing

- Hands on - approach with caution! Joint mobilisation is it really effective in this population?
- Manual therapy involving lifting a heavy limb or trunk may pose a manual handling risk
Physio skills perfectly placed to work in weight management

Advanced knowledge in:

- Anatomical, physiological, and psychosocial mechanisms of health and disease
- Assessment and diagnosis
- Behaviour change
- Biomechanics
- Exercise prescription
- Management of long term conditions
Key points

• Patient centred approach

• Education - Making every contact count

• Multiple health factors associated with obesity effecting QOL

• Intervention should address mental health and physical health

• Sensitive non judgemental professional care

• Advocate supportive network from family, friends and colleagues

• Encourage patients self management strategies
Thank you for listening

Please feel free to contact me with questions or information sharing

Anna Young
Homerton Hospital
anna.young@homerton.nhs.uk
References and Resources


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• Zunker C and King W Physical activity pre and post bariatric surgery chapter 8