

# Weight Management Scheme



# Weight Management Scheme

- Structured weight management programme
- Delivered in community pharmacies

# Background

- Gap identified in care pathways
  - Morbidly obese
  - Anti-obesity drugs
- Consider after dietary, exercise and behavioural changes have been started and evaluated.
- Limited current services

# Services available

- Successful stop smoking scheme delivered by advisors in community pharmacy
- Adapt for weight management service.

# Multi-disciplinary Team

- Public Health
- Dietitians
- Medicines Management
- Health Promotion
- Community Pharmacists
- Pharmaceutical industry

- Effective programme
  - Evidence based
  - Support long term weight loss
  - Targeted to areas of deprivation
- Convenient for patients
  - Location, frequency of appointments, flexible appointment times and cost
- Cost effective by efficient use of relevant skills

# Inclusion criteria

- BMI  $\geq$  25 with co-morbidities
- BMI  $\geq$  30
- BMI  $\geq$  40 with no additional co-morbidities
  
- Aged over 18 and under 75

# Exclusion criteria

- Weight  $\geq$  150 kg
- Currently prescribed orlistat, sibutramine or rimonabant
- Uncontrolled symptoms of other illnesses that area cause for concern, eg orthopaedic problems
- Pregnant, breastfeeding
- Previous diagnosed eating disorder
- Type 1 diabetes
- Referral criteria for Department of Nutrition and Dietetics

- Healthcare staff working in community pharmacies
- Training provided by PCT
  - Motivational interview techniques to support behaviour change
  - Healthy eating
  - Increasing activity.

# Scheme structure

- 12 appointments over a 6 month period with advisor in their pharmacy
- Appointments longer and more frequent at the beginning of the scheme
  - Weeks 1 & 2 30 mins
  - Weeks 3 & 4 15 mins
  - Weeks 6, 8, 10, 12 & 16 15 mins
  - Weeks 20 & 24 15 mins

# Additional services

- Week 4                      1:1 dietitian appointment
- Week 12                    Group dietitian appointment
- Week 8                      Orlistat under PGD if appropriate
- Access to exercise referral scheme (however emphasis is on building activity into daily routine)
- Food preparation classes.

# Benefits of community pharmacist

- Extended opening hours
- Flexibility around appointment times
- Convenient and multi-site locations
- Reduces hidden costs to accessing services, such as travel costs and taking time off work
- Established, familiar business and staff
  - Raise awareness of scheme, identify suitable patients
  - Informational contact to re-check information
- Literacy issues
- Using the skill-mix model allows frequent convenient appointments to be combined with specialist advice, giving a cost effective service

## Results so far

- During the first 6 months of 2007, 80 patients enrolled in the scheme
- 16 males and 64 females with an average BMI of 34.8
- As of July 2007, 31 patients had reached week 12 with an overall weight loss achieved in 28 (90%) of patients
- Mean weight loss for patients reaching week 12 was  $3.4\text{kg} \pm 8.6$  (3.5% of initial weight)
- Three patients had completed the 6 month course with a mean weight loss of  $4.1\text{kg} \pm 1.6$  (4% of initial weight)

# Next steps

- Evaluation
- Bid for funding to roll out to PCT