

Telephone counseling may be as effective as face-to-face counseling in weight loss maintenance

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Face-to-face and telephone follow-up sessions appear to be more effective in the maintenance of weight loss for women from rural communities compared with weight loss education alone, according to a report in the November 24 issue of *Archives of Internal Medicine*, one of the JAMA/Archives journals. In addition, telephone counseling appears to be just as effective as face-to-face counseling for weight loss management.

"Rural counties in the United States have higher rates of obesity, sedentary lifestyle and associated chronic diseases than nonrural areas, yet treatment of obesity in the rural population has received little research attention," according to background information in the article. Studies have shown that diet, exercise and behavior changes can produce significant weight loss and that extended care programs such as clinic-based follow-up sessions can improve weight loss maintenance. "However, in rural communities, distance to health care centers represents a significant barrier to ongoing care."

Michael G. Perri, Ph.D., of the University of Florida, Gainesville, and colleagues conducted a randomized trial involving 234 obese women (age 50 to 75) who completed a six-month weight loss program in six medically underserved rural communities. The women were randomly assigned to three different extended-care programs consisting of 26 biweekly sessions for one year; 72 participants received telephone

counseling, 83 received face-to-face counseling and 79 received biweekly newsletters containing weight loss maintenance tips. Estimated program costs were also assessed.

Average weight at the beginning of the study was 96.4 kilograms (212.5 pounds). The average weight lost during the six-month intervention was 10 kilograms (22 pounds). One year after the randomization of the women into the three different programs, "participants in the telephone and face-to-face extended-care programs regained less weight [an average of 1.2 kilograms (2.6 pounds) for each group] than those in the education control group [an average 3.7 kilograms (8.2 pounds)]," the authors write.

"The beneficial effects of extended-care counseling were mediated by greater adherence to behavioral weight management strategies, and cost analyses indicated that telephone counseling was less expensive than face-to-face intervention," the authors note.

Source: JAMA and Archives Journals

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