

Weight-loss counseling most prevalent between male physicians and obese men

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A study published in the June 2011 issue of the *American Journal of Preventive Medicine* examined the association between patient–physician gender concordance and weight-related counseling in obese individuals. Investigators from the University of Pennsylvania and Johns Hopkins University found that obese male patients seeing male physicians had higher odds of receiving weight-related counseling than obese women seeing a female physician.

Commenting on the study, Octavia Pickett-Blakely, MD, MHS, Hospital of the University of Pennsylvania, observed that "Perhaps societal norms linking physical fitness to masculinity leads male physicians to view obese men as more receptive to weight-related counseling and contributes to open dialogue about weight in male gender-concordant relationships. The findings of this study should heighten clinicians' awareness of how the personal attributes of physicians and patients may influence obesity care. Future studies should objectively measure weight-related communication (e.g., direct observation, audio tapes) in gender-concordant and gender-discordant patient–physician encounters, and explore the potential role of physicians' explicit and implicit attitudes regarding obesity and gender, in weight-related counseling for obese patients."

The study revealed that male patients had about a 60% higher chance of receiving diet/nutrition advice and about a 76% higher chance of getting exercise counseling from male doctors compared to female patients receiving care from female doctors. In female patient/female physician

pairs and female/male pairs of both types, there were no significant differences in any form of weight-related counseling.

The finding that all patients had similar odds of receiving weight-related counseling when a female patient or female physician was part of the pair may result in part from the perception that women are more likely to be dissatisfied with their weight. Female physicians may choose to avoid weight-related discussions with their obese patients and male physicians may avoid weight-related discussions with their obese female patients.

Using data from the 2005-2007 National Ambulatory Medical Care Survey, researchers analyzed clinical data from 5,667 obese patients to determine association between patient-physician concordance and three types of counseling: diet/nutrition (30%), exercise (23%), and weight reduction (20%) counseling.

Although one-third of US adults are obese, less than 30% of these individuals receive weight-related counseling despite the fact that such counseling is associated with modest weight loss, which is in turn linked to lower blood pressure, cholesterol, and blood glucose.

More information: The article is "Patient–Physician Gender Concordance and Weight-Related Counseling of Obese Patients" by Octavia Pickett-Blakely, MD, MHS, Sara N. Bleich, PhD, and Lisa A. Cooper, MD, MPH ([doi: 10.1016/j.amepre.2011.02.020](https://doi.org/10.1016/j.amepre.2011.02.020)). It appears in the American Journal of Preventive Medicine, Volume 40, Issue 6 (June 2011)

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