

Behavioral intervention in physician offices linked with modest reductions in waist circumference

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A physical activity and diet program implemented by health educators in physician offices appears to be associated with modest reductions in waist circumference among obese patients, according to a report published Online First by *Archives of Internal Medicine*.

Despite awareness about the importance of reducing obesity and promoting healthy lifestyles, most [primary care physicians](#) do not adequately counsel [obese patients](#), researchers write in their study background. And, the time and expense to provide high-intensity behavioral counseling is unlikely because of the absence of adequate reimbursement and the routine demands of office practice, they note.

Robert Ross, Ph.D., of Queen's University, Kingston, Ontario, Canada, and colleagues assessed the effectiveness of a two-year behaviorally based physical activity and diet program that relied on health educators to counsel patients.

A total of 490 sedentary, [obese adults](#) were divided into two groups: 241 received usual care, which included advice from their physician about losing weight, and 249 were part of the behavior intervention, which included individually tailored counseling delivered by health educators at family medicine clinics. The mean (average) age of the patients was 52.4 in the usual care group and 51.3 in the intervention. A total of 396 patients (80.8 percent) returned for follow-up testing at 24 months.

"A significant main effect was observed for change in WC ([waist circumference](#)) in response to the intervention compared with usual care. The mean reduction in WC was greater in the intervention group than in the usual care group at each follow-up visit and remained statistically different at 24 months," (mean -0.9 cm vs 0.2 cm), the researchers note.

In men, the WC reduction was greater in the intervention group than usual care groups at each follow-up visit and remained statistically different at 24 months. In women, the WC reduction was greater in the [intervention group](#) compared with the usual care group at six and 12 months but was not sustained at 24 months.

"The primary finding of this trial is that a lifestyle-based intervention delivered by a trained health educator within the primary care setting was associated with significant reductions in abdominal obesity compared with usual care," the researchers conclude. "However, the magnitude of the reduction in WC was modest and the effectiveness of the intervention was restricted to men, suggesting that behavioral interventions designed to reduce obesity may be sex dependent."

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