

Losing weight over the phone

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An intensive lifestyle intervention, proven to help people lose weight to prevent diabetes, also works in primary care when delivered over the telephone to obese patients with metabolic syndrome. Group telephone sessions appear to be particularly effective for greater weight loss, according to a new study by Drs. Paula Trief and Ruth Weinstock from SUNY Upstate Medical University in Syracuse, New York, and colleagues. Their work¹ appears online in the *Journal of General Internal Medicine*², published by Springer.

Metabolic syndrome affects a third of US adults and is associated with increased morbidity and premature death, from cardiovascular disease in particular. People with metabolic syndrome suffer from central obesity, high blood fats, high blood pressure and abnormal blood sugar levels. Lifestyle changes – such as those tested in the Diabetes Prevention Program (DPP) – that lead to weight loss can prevent or slow the development of diabetes. For a greater impact on public health, it is key to find ways to apply the principles of the DPP lifestyle change program in primary care provider practices, for example, which are ideal settings for weight loss interventions. In addition, telephone interventions are attractive as they can reach a large number of patients, at a time and in a place that best suits them.

Weinstock and Trief's team compared the effectiveness of two primary care provider telephone adaptations of DPP in their Support, Health Information, Nutrition and Exercise (SHINE) study. A total of 257 obese patients with metabolic syndrome, but not diabetes, were recruited from five practices in New York. They were randomly assigned to one



of two groups – they received either individual calls or participated in conference calls with up to eight patients per call, for a period of two years. The authors measured changes in weight after 6, 12 and 24 months of calls.

The researchers found that participants in both groups lost weight after one and two years. The individual and conference call versions of the lifestyle intervention were equally effective after a year; however, after two years, conference call participants had lost more weight and continued to lose weight compared to those receiving individual calls who began to regain. The conference call educators were trained to promote discussion among the group and group members shared weight loss strategies within a supportive environment.

The authors conclude: "SHINE, a real-world, widely deployable, telephone adaptation of the DPP intensive lifestyle program, delivered by primary care provider staff, was effective in achieving weight loss at one and two years, in obese people with metabolic syndrome. These individuals are at high risk for type 2 diabetes and cardiovascular disease, and are important targets for weight loss. The SHINE model holds promise to stimulate lifestyle change and weight loss in primary care settings."

More information: Weinstock RS et al. (2013). Weight Loss Success in Metabolic Syndrome by Telephone Interventions: Results from the SHINE Study. *Journal of General Internal Medicine*. DOI 10.1007/s11606-013-2529-7

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