

How people view their own weight influences bariatric surgery success

October 22 2014



Negative feelings about one's own weight, known as internalized weight bias, influence the success people have after undergoing weight loss surgery, according to research appearing in the journal *Obesity Surgery*, published by Springer. The study, from the Geisinger Health System in the US, is considered the first and only study to examine internalized weight bias in relation to post-surgical weight loss success in adults.

Internalized <u>weight</u> bias adversely affects many overweight people. Studies have shown that weight bias stems from personal perception or societal views that overweight people are personally accountable and at fault for their body weight. These overweight individuals feel - or think



others feel - they lack the willpower, discipline and treatment needed to lose weight. In addition, people who are highly vulnerable to <u>negative</u> <u>feelings</u> about their own weight are more likely to experience low self-esteem and depression.

In this study, the researchers measured the degree to which participants internalized weight bias by developing negative self-attributions as a result of these biases. They leveraged Geisinger's electronic health record and its existing bariatric surgery database along with psychological surveys. The result: As ratings of internalized weight bias before surgery increased, weight loss success twelve months after surgery decreased.

The researchers found no differences in ratings of bias between participants' race or geographic location (urban or rural) but identified high levels of internal negative thoughts and feelings in about 40 percent of preoperative participants. In addition, greater weight bias was associated with greater depression. On average, most participants were white females with a preoperative mean BMI of 47.8 kg/m² and a postoperative BMI of 32.5±6.1 kg/m² twelve months after surgery.

Clinically, the study suggests a potential benefit to pre-operative weight bias screening. Identifying an opportunity to provide coping strategies, including counseling and peer support group participation, may help to foster long-term <u>weight loss surgery</u> success.

"How an individual internalizes weight bias relates to depression before surgery as well as overall <u>weight loss success</u> twelve months following <u>bariatric surgery</u>," says Michelle R. Lent, Ph.D., Investigator and Clinical Psychologist at Geisinger's Obesity Institute. "Future studies should assess the impact of early weight bias screening and intervention to promote better psychological health and <u>weight loss</u> results."



More information: Lent M.R. et al. (2014): Internalized Weight Bias in Weight-Loss Surgery Patients: Psychosocial Correlates and Weight Loss Outcomes. *Obesity Surgery*, DOI: 10.1007/s11695-014-1455-z

Provided by Springer

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