

The new health 'desert'? Reliable weight loss programs hard to find

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This is an image of a weight scale. Credit: CDC/Debora Cartagena

A new study led by Johns Hopkins researchers concludes that people with medically serious weight problems can rarely find or have access to proven, reliable programs to help them shed pounds.

"The nutrition and weight loss industry is like the Wild West," says Kimberly Gudzone, M.D., M.P.H., an assistant professor of medicine

and a weight loss specialist at the Johns Hopkins University School of Medicine. "There is very little oversight, and it's hard for consumers and medical professionals alike to tell what is effective, reliable and meets guidelines' standards."

Summarizing their study in the Feb. 10 edition of the journal *Obesity*, investigators report finding that consumers and primary care physicians who rely on Internet information may have a hard time identifying weight loss programs that align with widely accepted guidelines set forth by the American Heart Association (AHA), American College of Cardiology (ACC) and The Obesity Society (TOS). The results, they say, underscore the need for some [regulatory oversight](#) of information provided by community-based weight loss programs that claim to be successful.

For the study, investigators evaluated close to 200 programs within 10-mile radiuses of 17 different primary care clinics within a large practice network in Maryland, Washington, D.C., and Virginia. Some programs were supervised by physicians, some were affiliates of national commercial weight loss programs, such as Weight Watchers and Jenny Craig, some were associated with a [bariatric surgery program](#) and others operated independently.

When reviewing their websites, they found that only 9 percent of programs actually adhered in some way to expert medical guidelines for weight loss issued by the AHA, ACC and TOS. While 59 percent of programs described online the specifics of their "intensity," only 17 percent overall could qualify as a high-intensity program, a program that advises more than 14 sessions in six months.

The majority of programs (75 percent) described dietary change as a part of their weight loss regimen, but the type of dietary change was often not specified, leaving consumers unclear about this important

aspect that could affect their continued participation and success in the program. Most programs (57 percent) described increased [physical activity](#) as a part of their weight loss program, but only 3 percent included the recommended goal of 150 minutes or more of moderate physical activity per week.

In addition, the team reported, just over one-half of the programs described used any behavioral strategies—self-monitoring of weight and tracking of food intake and/or exercise—which other research has demonstrated to be important components of any weight loss program. Few programs (15 percent) reported prescribing Food and Drug Administration-approved medications, yet 34 percent endorsed the use of supplements. Gudzone emphasizes that most vitamin, mineral and herbal supplements lack any scientific proof that they help with weight loss, and some that do may cause significant side effects, such as cardiovascular damage.

Gudzone and her colleagues evaluated the claims of the programs on their websites using five criteria:

- Inclusion of high-intensity interventions greater than or equal to 14 sessions in six months
- Inclusion of a moderate, calorie-lowering diet that is evidence-based, e.g., the higher-protein Zone diet, the Mediterranean-style diet and the lacto-ovo vegetarian-style diet
- Encouragement of increased physical activity
- Inclusion of regular self-monitoring tools to track weight, meal planning, food tracking and exercise
- Exclusion of dispensing or recommending supplements

A subgroup of the original 191 programs evaluated by the researchers was randomly selected for a follow-up self-report phone survey to provide a closer review of the same criteria. Just over 50 of the 80

programs randomly selected responded. Data from the phone interviews and website analysis were compared.

In the subgroup, less than 60 percent of the programs' websites adequately described the use of key weight loss elements, such as program intensity, physical activity and use of behavioral strategies. Yet over the phone, interviewees endorsed and provided detailed descriptions of these activities occurring at their location.

Gudzune cautions that the study had its limitations, relying on self-reported claims on websites and phone surveys of people working for the [weight loss program](#). But she says the findings should prompt both further study and regulatory oversight.

She cautions that these programs can be costly to consumers. "Most programs can cost anywhere between \$40 to \$600 per month and are not often covered by insurance," says Gudzune. "And for many consumers, they could lose more weight from their wallets than their waists."

Gudzune emphasized that the research team only reviewed what are categorized as in-person programs in Maryland, Washington, D.C., and Virginia, but she believes the data suggest it is difficult to find reliable programs in any urban setting. "It will be important to look at rural settings, other regions and additional forms of programs, such as phone- and Internet-based programs, in future research," she says. "We also need to look more closely at program cost and insurance coverage in future studies, as this information will be helpful for patients and referring doctors."

Consumer protection laws, regulated by the Federal Trade Commission, provide guidelines designed to check advertising claims by the weight loss and supplement industries. Now it may be time, Gudzune says, to expand this consumer protection by requiring community-based [weight](#)

loss programs to disclose their practices and their alignment with criteria established by valid medical organizations.

Federal health officials estimate that nearly two-thirds of Americans are obese, and prior research has reported that 29 to 49 percent of Americans are seeking to lose weight, often for medical reasons. Obesity and its related conditions have been estimated to cost \$147 billion annually in health care costs and lost productivity. "It is therefore pertinent that we provide the type of oversight consumers deserve," adds Gudzone.

Provided by Johns Hopkins University School of Medicine

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