

Meal replacement plus financial incentives found to be beneficial for teens with obesity

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For adolescents with severe obesity, meal replacement therapy (MRT) plus financial incentives (FIs) yield a greater reduction in body mass index (BMI) and total body fat mass than MRT alone, according to a

study [published](#) online June 17 in *JAMA Pediatrics*.

Amy C. Gross, Ph.D., from the University of Minnesota Center for Pediatric Obesity Medicine in Minneapolis, and colleagues examined the effect of MRT plus FIs versus MRT alone on BMI, body fat, and [cardiometabolic risk factors](#) in adolescents with severe obesity in a randomized clinical trial conducted from 2018 to 2022. A total of 126 adolescents with [severe obesity](#) were included in the study: Half received MRT plus FIs and half received MRT alone.

The researchers found that the mean BMI reduction was –5.9 percentage points greater at 52 weeks in the MRT plus FIs group versus MRT-alone group. A greater reduction in mean total body fat mass by –4.8 kg was seen for the MRT plus FIs group, and it was cost-effective compared with MRT alone (incremental cost-effectiveness ratio, \$39,178 per quality-adjusted life year). No significant between-group differences were seen in cardiometabolic risk factors or unhealthy weight control behaviors.

"It is possible that incentives allowed participants to better adhere to the meal plan over the course of the year, resulting in meaningful BMI and body fat reduction," the authors write.

More information: Amy C. Gross et al, Financial Incentives and Treatment Outcomes in Adolescents With Severe Obesity, *JAMA Pediatrics* (2024). [DOI: 10.1001/jamapediatrics.2024.1701](https://doi.org/10.1001/jamapediatrics.2024.1701)

Aaron E. Carroll, Rethinking Behavioral Interventions for Adolescent Obesity, *JAMA Pediatrics* (2024). [DOI: 10.1001/jamapediatrics.2024.1710](https://doi.org/10.1001/jamapediatrics.2024.1710)

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