Obese Mexican-Americans lack diet, exercise advice from doctors
1 July 2011, By Amy Sutton

Only half of obese Mexican-American adults receive diet and exercise advice from their physicians, although obesity is on the rise for this group.

"Among this obese population, not seeing 100 percent of people receiving advice is discouraging. There is a much higher risk of having negative health consequences," said Ha Nguyen, Ph.D., an assistant professor of family and community medicine at the Wake Forest School of Medicine.

In the study, which appears in the July/August issue of the American Journal of Health Promotion, lead author Nguyen and colleagues examined data from a survey conducted by the Agency for Healthcare Research and Quality. A group of 1,787 obese Mexican-American adults noted whether a doctor or health care professional ever advised them to exercise more or eat fewer high-fat and high-cholesterol foods.

Overall, 45 percent of participants reported their doctor never provided recommendations to increase exercise, and 52 percent said a health care professional never advised them to make dietary improvements.

"The rate of about 50 percent receiving advice is generally the same as previous reports in the general population," Nguyen said. "To the best of our knowledge, this is the first study to look at a specific Hispanic subgroup," she said.

The researchers also discovered that patients who had medical conditions in addition to obesity, such as diabetes or high blood pressure, proved much more likely to receive counseling on exercise and nutrition. For example, 79 percent of patients with obesity and diabetes said they received advice to exercise more, compared to 43 percent of patients whose only diagnosis was obesity.

"When someone's obese and has diabetes, physicians are much more clued in to the fact that they need to counsel people about lifestyle," said Matthew O'Brien, M.D., an assistant professor of medicine and public health at Temple University School of Medicine.

Why don't physicians provide counseling to obese patients? O'Brien cited several reasons, including lack of financial incentives, lack of adequate physician training in weight management and counseling and language barriers between English-speaking physicians and Spanish-speaking patients.

"Providers play an important role. Doctors are in a unique position to promote health behaviors ... their patients are more likely to engage in healthy behaviors," even if they receive simple, brief advice, Nguyen said.

Provided by Health Behavior News Service


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