CLINICAL ADVANTAGE BOOTCAMP: OBESITY MANAGEMENT FUNDAMENTALS

AANP American Association of NURSE PRACTITIONERS®

Introduction & Gaps

Introduction: A survey of PCPs and NPs identified practice barriers, including knowledge gaps on obesity care, lack of confidence in managing patients with obesity, time constraints, and a reluctance to discuss weight during routine visits. In a recent survey of physicians and NPs, 59% of PCPs waited for patients to bring up the subject of weight. The step-wise 5A's behavior-change counseling framework (Assess, Advise, Agree, Assist, and Arrange) led to a 2-fold increase in diagnosis and follow-up of patients with obesity in a primary care setting, which also improved NPs' confidence levels in obesity management and increased interdisciplinary collaboration.

Knowledge Gaps

➢ Knowledge gaps exist regarding the underlying etiology and pathophysiology of obesity.
➢ Risk factors contributing to adiposity-related comorbidities are not well recognized.
➢ The diagnosis, staging, and evaluation of patients with obesity remain lacking and inadequate.
➢ Significant knowledge gaps exist regarding guidelines and best practices for obesity treatment
➢ NPs may not be aware of the most recent evidence-based strategies for patient communication

Program Information

Formats: Eight module on-demand course *and* four podcasts hosted *on NP Pulse: The Voice of the Nurse Practitioner®*.

Data Collected: Changes in knowledge, competence, self-reported changes in confidence and practice habits, and identification of remaining gaps.

Measurements and analysis: Questions were asked before and immediately after the activity. A 60-day follow-up survey was sent to those who completed the activity to identify any practice changes made. McNemar test for each multiple-choice knowledge/case question and frequency of use. Wilcoxon test for % correct knowledge/case questions and confidence rating scale questions.
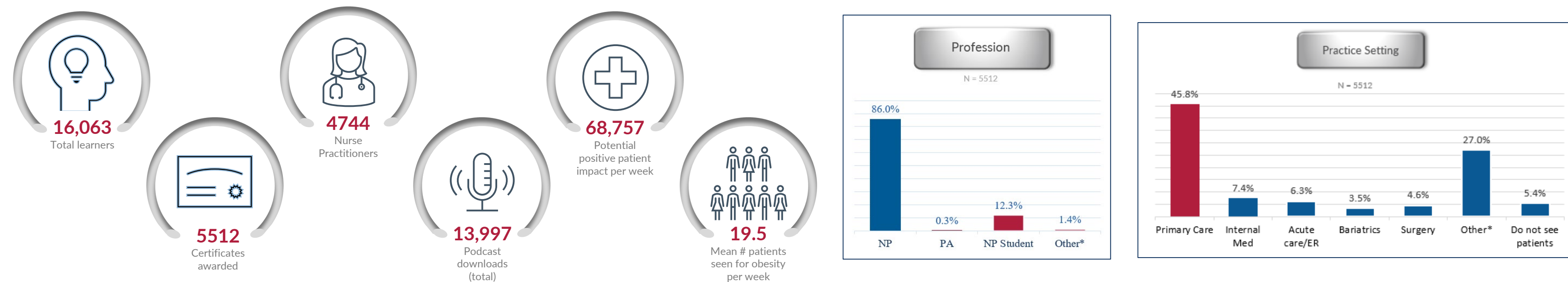
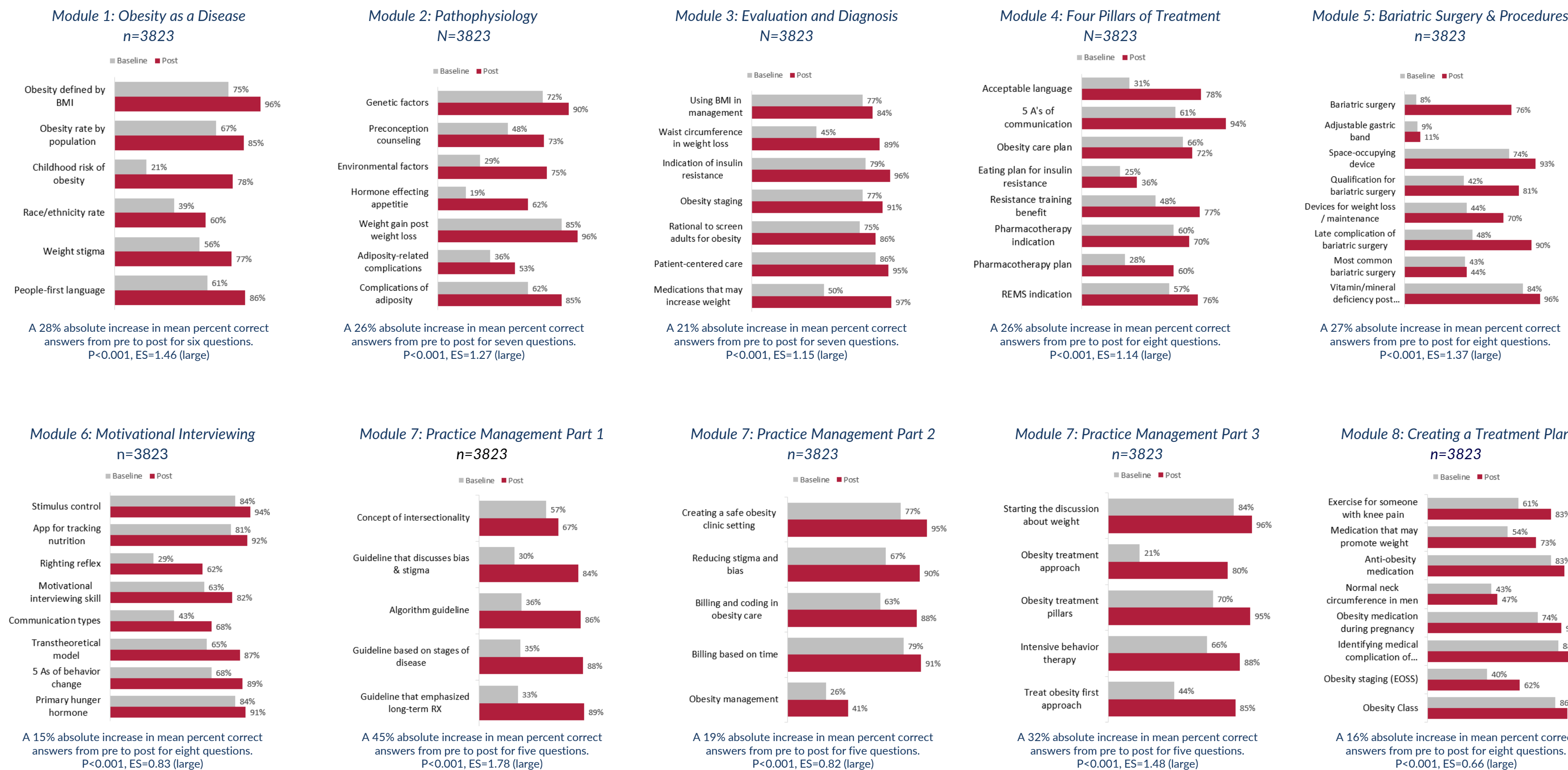| Modules	Credit	Learners
Obesity as a Disease	1.3 CE	8817
Pathophysiology	1.42 CE	6945
Evaluation and Diagnosis	1.3 CE	6636
Four Pillars of Treatment	1.92 CE	6245
Bariatric Surgery and Procedures	1.72 CE	5995
Motivational Interviewing	1.72 CE	5850
Practice Management Pt. 1 Practice Management Pt. 2 Practice Management Pt. 3	0.9 CE 1.13 CE 1.72 CE	5785 5745 5684
Creating a Treatment Plan	2.62 CE	5598

Faculty

Angie Golden DNP, FNP-C, FAANP
Christina Funk, DNP, FNP-C, APNP
Joy Pape, MSN, RN, FNP-C, CDCES, CFCN, FADCES
Karli Burridge, PA-C, MMS, FOMA
Sandra Christensen, MSN, APRN, FNP-BC, FOMA
Sharon Fruh, Ph.D., RN, FNP-BC, FAANP

Learner Demographics

- **16,063** Total learners
- **4744** Nurse Practitioners
- **68,757** Potential positive patient impact per week
- **5512** Certificates awarded
- **13,997** Podcast downloads (total)
- **19.5** Mean # patients seen for obesity per week

Profession N = 5512
- NP 86.0%
- PA 0.3%
- NP Student 12.3%
- Other* 1.4%

Practice Setting N = 5512
- Primary Care 45.8%
- Internal Med 7.4%
- Acute care/ER 6.3%
- Bariatrics 3.5%
- Surgery 4.6%
- Other* 27.0%
- Do not see patients 5.4%

Obesity Podcasts:
NP Pulse: *The Voice of the Nurse Practitioner®*

01 Losing the Stigma: How to Talk About Obesity — 2481 downloads
02 Obesity Care: Managing Patient Stress — 2071 downloads
03 Advocating for Patients with Obesity — 5242 downloads
04 Overcoming Racial Disparities in Obesity — 4203 downloads

Change in Knowledge/Competence Per Module

Module 1: Obesity as a Disease n=3823 (Baseline / Post)
- Obesity defined by BMI: 75% / 96%
- Obesity rate by population: 67% / 85%
- Childhood risk of obesity: 21% / 78%
- Race/ethnicity rate: 39% / 60%
- Weight stigma: 56% / 77%
- People-first language: 61% / 86%

A 28% absolute increase in mean percent correct answers from pre to post for six questions. P<0.001, ES=1.46 (large)

Module 2: Pathophysiology N=3823 (Baseline / Post)
- Genetic factors: 72% / 90%
- Preconception counseling: 48% / 73%
- Environmental factors: 29% / 75%
- Hormone effecting appetite: 19% / 62%
- Weight gain post weight loss: 85% / 96%
- Adiposity-related complications: 36% / 53%
- Complications of adiposity: 62% / 85%

A 26% absolute increase in mean percent correct answers from pre to post for seven questions. P<0.001, ES=1.27 (large)

Module 3: Evaluation and Diagnosis N=3823 (Baseline / Post)
- Using BMI in management: 77% / 84%
- Waist circumference in weight loss: 45% / 89%
- Indication of insulin resistance: 79% / 96%
- Obesity staging: 77% / 91%
- Rational to screen adults for obesity: 75% / 86%
- Patient-centered care: 86% / 95%
- Medications that may increase weight: 50% / 97%

A 21% absolute increase in mean percent correct answers from pre to post for seven questions. P<0.001, ES=1.15 (large)

Module 4: Four Pillars of Treatment N=3823 (Baseline / Post)
- Acceptable language: 31% / 78%
- 5 A's of communication: 61% / 94%
- Obesity care plan: 66% / 72%
- Eating plan for insulin resistance: 25% / 36%
- Resistance training benefit: 48% / 77%
- Pharmacotherapy indication: 60% / 70%
- Pharmacotherapy plan: 28% / 69%
- REMS indication: 57% / 76%

A 26% absolute increase in mean percent correct answers from pre to post for eight questions. P<0.001, ES=1.14 (large)

Module 5: Bariatric Surgery & Procedures n=3823 (Baseline / Post)
- Bariatric surgery: 8% / 76%
- Adjustable gastric band: 9% / 11%
- Space-occupying device: 74% / 93%
- Qualification for bariatric surgery: 42% / 81%
- Devices for weight loss / maintenance: 44% / 70%
- Late complication of bariatric surgery: 48% / 90%
- Most common bariatric surgery: 43% / 44%
- Vitamin/mineral deficiency post...: 84% / 96%

A 27% absolute increase in mean percent correct answers from pre to post for eight questions. P<0.001, ES=1.37 (large)

Module 6: Motivational Interviewing n=3823 (Baseline / Post)
- Stimulus control: 84% / 94%
- App for tracking nutrition: 81% / 92%
- Righting reflex: 29% / 62%
- Motivational interviewing skill: 63% / 82%
- Communication types: 43% / 68%
- Transtheoretical model: 65% / 87%
- 5 As of behavior change: 68% / 91%
- Primary hunger hormone: 84% / 91%

A 15% absolute increase in mean percent correct answers from pre to post for eight questions. P<0.001, ES=0.83 (large)

Module 7: Practice Management Part 1 n=3823 (Baseline / Post)
- Concept of intersectionality: 57% / 67%
- Guideline that discusses bias & stigma: 30% / 84%
- Algorithm guideline: 36% / 86%
- Guideline based on stages of disease: 35% / 88%
- Guideline that emphasized long-term RX: 33% / 89%

A 45% absolute increase in mean percent correct answers from pre to post for five questions. P<0.001, ES=1.78 (large)

Module 7: Practice Management Part 2 n=3823 (Baseline / Post)
- Creating a safe obesity clinic setting: 77% / 95%
- Reducing stigma and bias: 67% / 90%
- Billing and coding in obesity care: 63% / 88%
- Billing based on time: 79% / 91%
- Obesity management: 26% / 41%

A 19% absolute increase in mean percent correct answers from pre to post for five questions. P<0.001, ES=0.82 (large)

Module 7: Practice Management Part 3 n=3823 (Baseline / Post)
- Starting the discussion about weight: 84% / 96%
- Obesity treatment approach: 21% / 80%
- Obesity treatment pillars: 70% / 95%
- Intensive behavior therapy: 66% / 88%
- Treat obesity first approach: 44% / 85%

A 32% absolute increase in mean percent correct answers from pre to post for five questions. P<0.001, ES=1.48 (large)

Module 8: Creating a Treatment Plan n=3823 (Baseline / Post)
- Exercise for someone with knee pain: 61% / 83%
- Medication that may promote weight: 54% / 73%
- Anti-obesity medication: 83% / 92%
- Normal neck circumference in men: 43% / 47%
- Obesity medication during pregnancy: 74% / 90%
- Identifying medical complication of...: 68% / 96%
- Obesity staging (EOSS): 40% / 62%
- Obesity Class: 86% / 94%

A 16% absolute increase in mean percent correct answers from pre to post for eight questions. P<0.001, ES=0.66 (large)

Practice Changes Made

Over the past 60 days, did you implement other new techniques or skills you didn't use before?

- Began apprenticeship with obesity management certified physician
- Added obesity-specific labs, [reviewed] medications to identify obesogenic medications, [created] follow-up plans to discuss nutrition plan and RX for anti-obesity medications
- D/C meds [that] encourage weight gain, implementing meds that promote weight loss, discussing diet changes and exercise
- Documentation/billing people-first language, having patients set goals using the pillars of treatment as a guide
- Explaining that obesity is a chronic disease process
- Improved communication, [and] understanding of weight-negative drugs, especially as it relates to diabetes meds and management
- Practiced talking about diet changes and weight goals and used people-first language with my friends and family
- Application for provider number to commence management of Obesity Telehealth service provision pending.
- I am in the process of setting up my own lifestyle medicine education and coaching business. I also applied and had accepted a proposal for a 3-segment course on obesity through the Osher Lifelong Learning Institute.
- Provision of comfortable sitting arrangements, seeking patient's approval to discuss obesity, provision of adequate scale and privacy
- Specifically looking at all BMIs to discuss with the patient if they will allow

60-Day Follow-up

PRE: how often did you ask permission to discuss a patient's weight? N=5,512
- Always 13%
- Almost every time 14%
- Occasionally / sometimes 36%
- Never 31%
- N/A, no patients required it 6%

60-day follow-up: How often did you ask permission to discuss a patient's weight? N=241
- More often than before 58%
- About the same 22%
- Less often than before 1%
- N/A, no patients required it 9%
- N/A, I do not provide patient care 10%

PRE: Likelihood to use people-first language when talking about someone with overweight/obesity N=5,512
- Very likely 33%
- Likely 30%
- Neutral 21%
- Not very likely 14%
- Very unlikely 2%

60-day follow-up: How often did you use people-first language when talking to or about someone with overweight or obesity? N=241
- More often than before 74%
- About the same 10%
- Less often than before 1%
- I did not discuss with anyone or about any patients 5%
- N/A, I do not provide patient care 10%

PRE: Before this activity, how aware were you of weight bias within your practice? (Yours or a colleague's) N=5,512
- 1 = Not at all aware 4%
- 2=Slightly aware 10%
- 3=Somewhat aware 36%
- 4=Moderately aware 31%
- 5 = Very aware 19%

60-day follow-up: Since participating in this activity, have you recognized any weight bias within your practice? (Yours or a colleague's) N=241
- Yes, with my colleague(s) behavior/action 30%
- Yes, within my own behavior/action 30%
- I did not notice any weight bias 30%
- N/A, I am not currently in practice 10%