Uptake of obesity treatments: what do patients think

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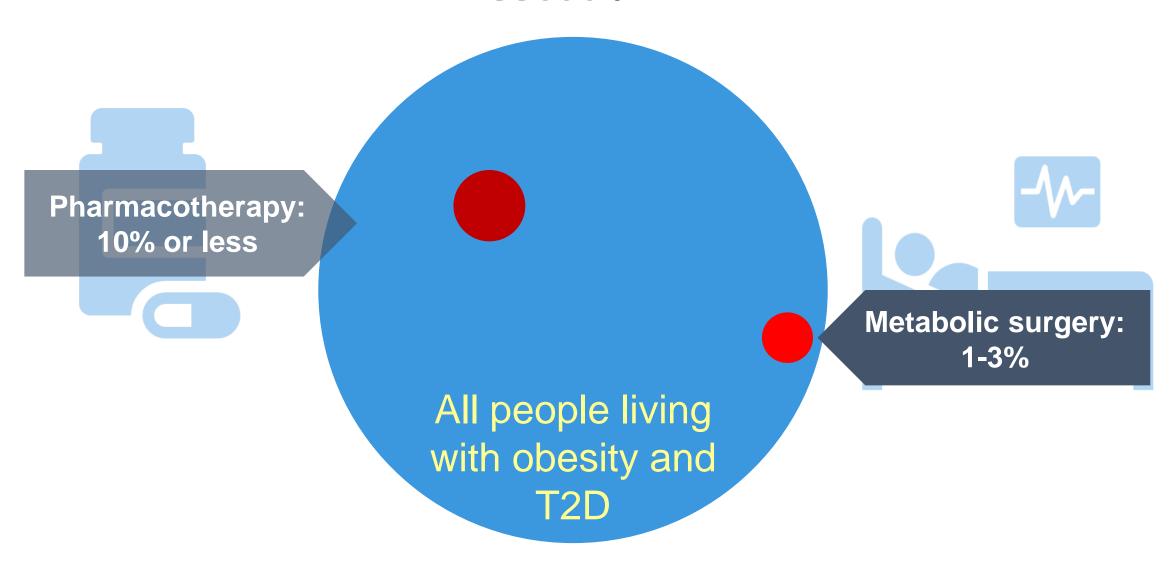


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- Speaker, Johnson & Johnson, Medtronic, Gl Dynamics, NovoNordisk

• SAB: GI Dynamics, Keyron, Medronic

WHY?



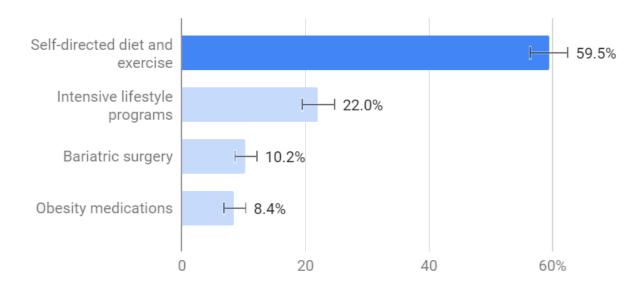
2019 Research

Unrealistic Expectations for Obesity Self-Help

Obesity Treatments - <u>U.K.</u>

1. Which of the following treatments for obesity is most effective?

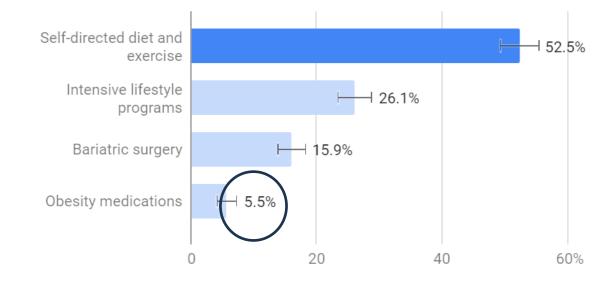
766 respondents



Obesity Treatments - <u>U.S.</u>

1. Which of the following treatments for obesity is most effective?

776 respondents



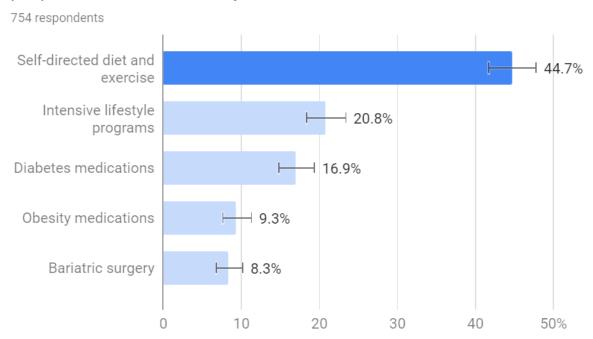


2019 Research:

Similarly Unrealistic Expectations for Diabetes

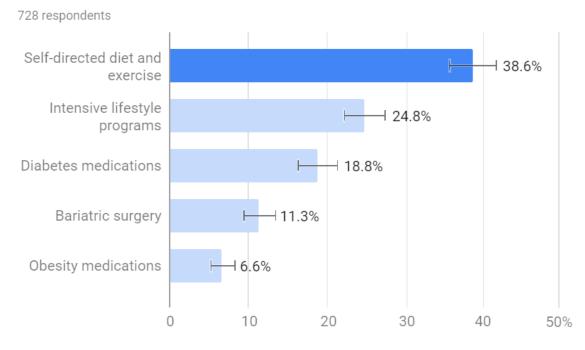
Diabetes Treatments - U.K.

1. Which of the following treatments for type 2 diabetes is most effective in people who also have obesity?



Diabetes Treatments - U.S.

1. Which of the following treatments for type 2 diabetes is most effective in people who also have obesity?





2014:

Metabolic Surgery Seen as Too Risky

- Only 32% with class III obesity would even consider surgery
- Most often because they considered it too risky
- Minimization of their own health risks seems to be a factor, too

Brief Cutting Edge ReportCLINICAL TRIALS: BEHAVIOR, PHARMACOTHERAPY, DEVICES, SURGERY



The Influence of an Individual's Weight Perception on the Acceptance of Bariatric Surgery

Fatima Cody Stanford¹, Theodore K. Kyle^{2,3}, Mechelle D. Claridy⁴, Joseph F. Nadglowski³, and Caroline M. Apovian⁵

Objective: This study assessed the proportion of US adults with excess weight and obesity who consider bariatric surgery to be appropriate for themselves and how their own weight perception influences this consideration.

Methods: A stratified sample of 920 US adults in June 2014 was obtained through an online survey. The respondents were queried about bariatric surgery acceptability and personal weight perception. Average body mass index (BMI) was determined for each demographic variable, and responses were characterized according to BMI and concordance with perceived weight status. Chi-square analyses served to assess perceived weight concordance in relation to bariatric acceptance.

Results: Only 32% of respondents with Class III obesity indicated that bariatric surgery would be an acceptable option for them, most often because they considered it to be too risky. Respondents with Class III obesity and concordant perception of weight status were more likely (P < 0.03) than discordant Class III respondents to accept bariatric surgery. Likewise, concordant respondents with excess weight, but not obesity, were more likely (P < 0.001) to correctly consider bariatric surgery to be inappropriate for them.

Conclusions: Despite good safety and efficacy, many persons still believe bariatric surgery is too risky. Weight perception concordance or discordance influences one's decision to consider this treatment option.

Obesity (2014) 00, 1-5. doi:10.1002/oby.20968



Progress Underway Is Quite Unsettling

The New York Times

Opinion | Why the New Obesity Guidelines for Kids Terrify Me

The paper, co-written by 21 prominent doctors, health researchers and obesity experts, advises health care providers that they may refer...



2023



Obesity

Nicola Davis Science correspondent

y@NicolaKSDavisSun 5 Feb 2023

New diabetes drugs do not tackle root causes of obesity, experts warn

Doctors say preventing obesity by avoiding unhealthy food is better than trying to reverse its effects



= Q Food Business News.



Nestle products may complement GLP-1 weight-loss drugs



Please note that while these drugs offer new therapy options for obese patients and for patients with type 2 diabetes, they are not a permanent solution and are no replacement for an appropriate diet coupled with the right amount of exercise.

Other chronic diseases and the treatments that control the diseases would not be talked about in this manner.

But Change Is Indisputably Here



BACKCHANNEL BUSINESS CULTURE GEAR IDEAS SCIENCE SECURITY



IDEAS FEB 3, 2023 9:00 AM

A New Drug Switched Off My Appetite. What's Left?

Mounjaro did what decades of struggle with managing weight couldn't. Welcome to the post-hunger age.



Founders and Directors

The Founding Team and Directors

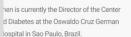


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Co-Founder

Carel le Roux is a Professor of Experimental Pathology at Conway Institute, Diabetes Complications Research Centre, University College Dublin, Ireland.



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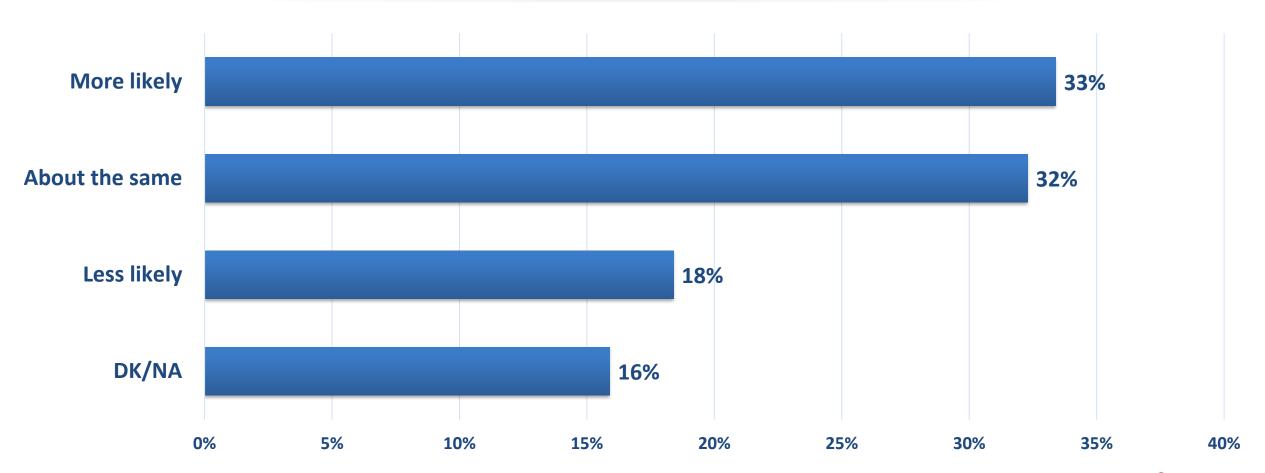
New Research August 2023

- 1,017 adults
- Self-reported BMI ≥ 30
- Convenience sample from Qualtrics
- Women over-represented





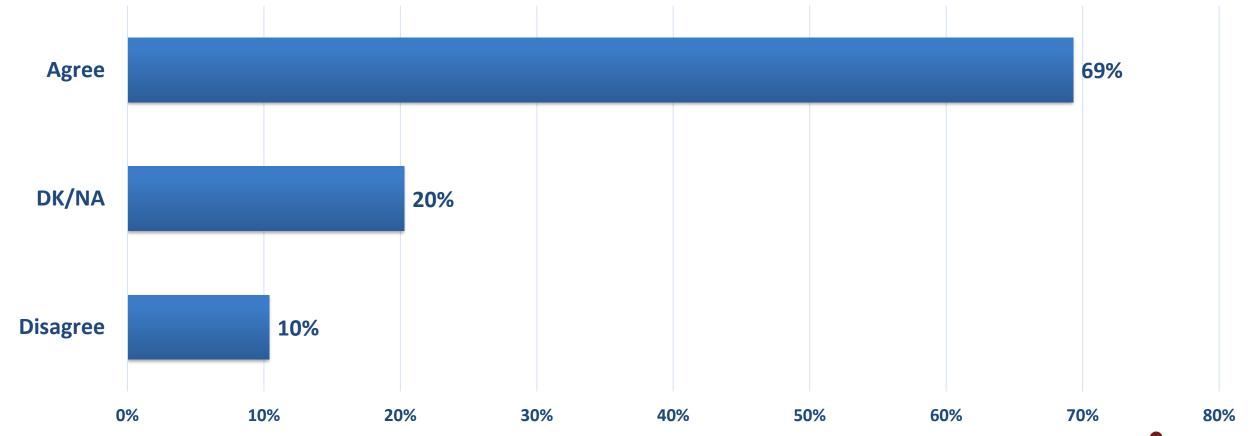
People Say They're More Likely to Consult a Doctor Now vs Five Years Ago





More People Agree the Biology of Obesity Is Important

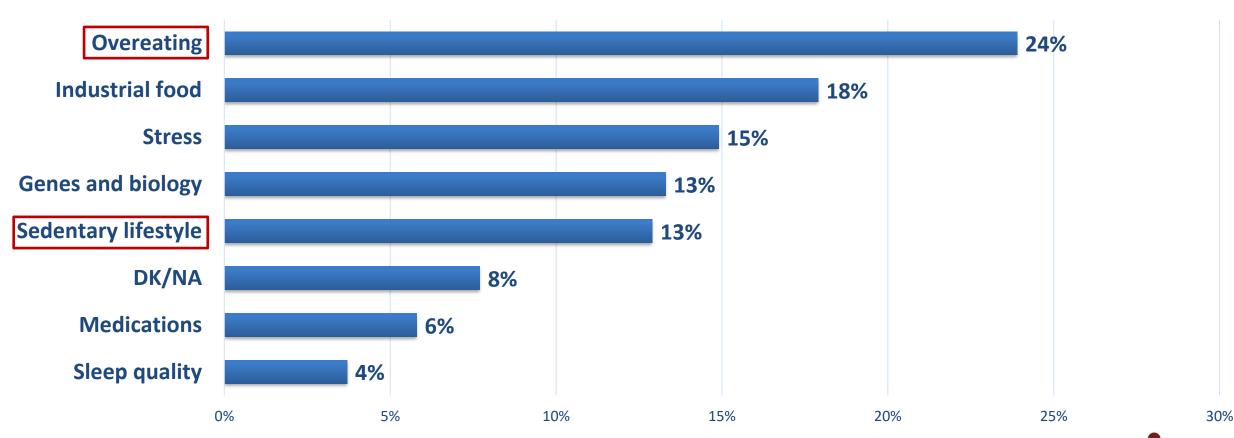
"There is strong evidence that body weight is regulated by a biological mechanism, not just by willpower"





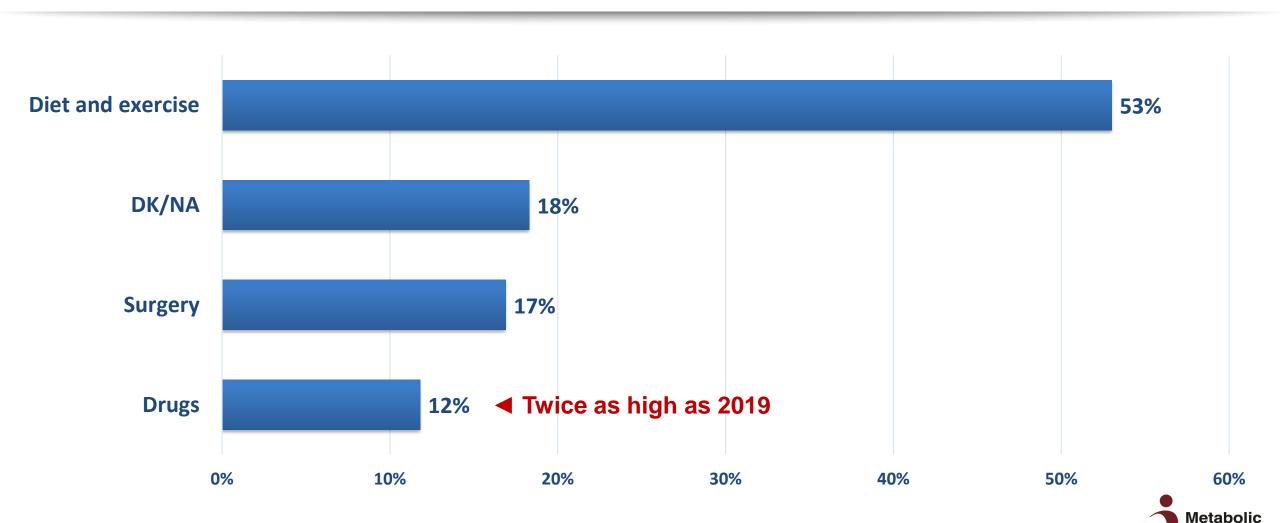
But Most Still Point to Behavioral Factors as Primary Drivers

"What is the main cause of obesity?"



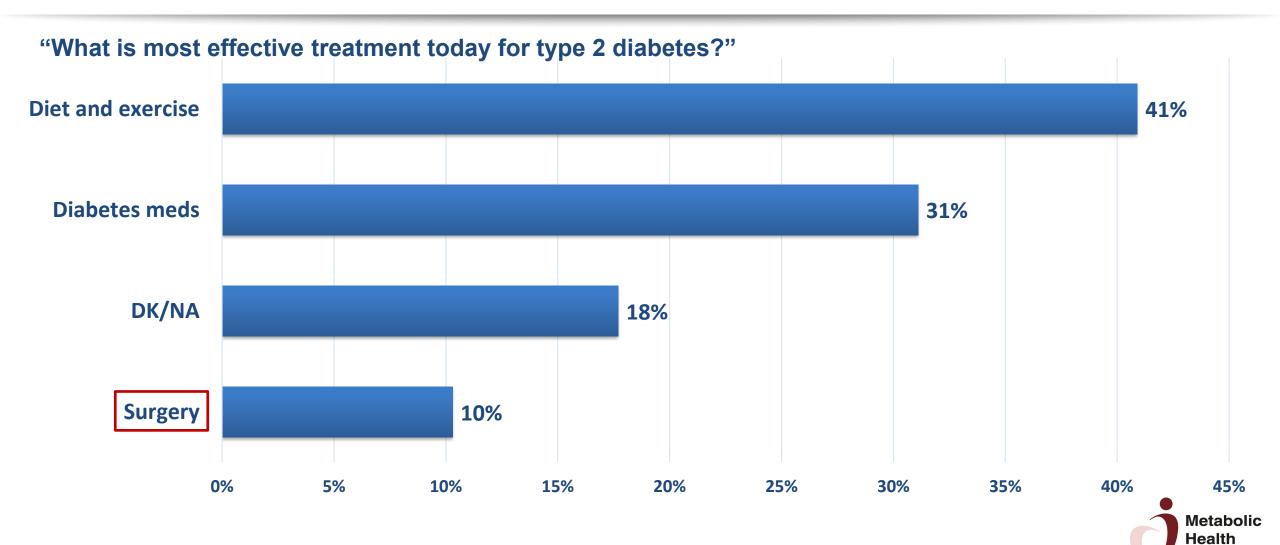


Views of Obesity Meds Seem to Be Shifting Favorably



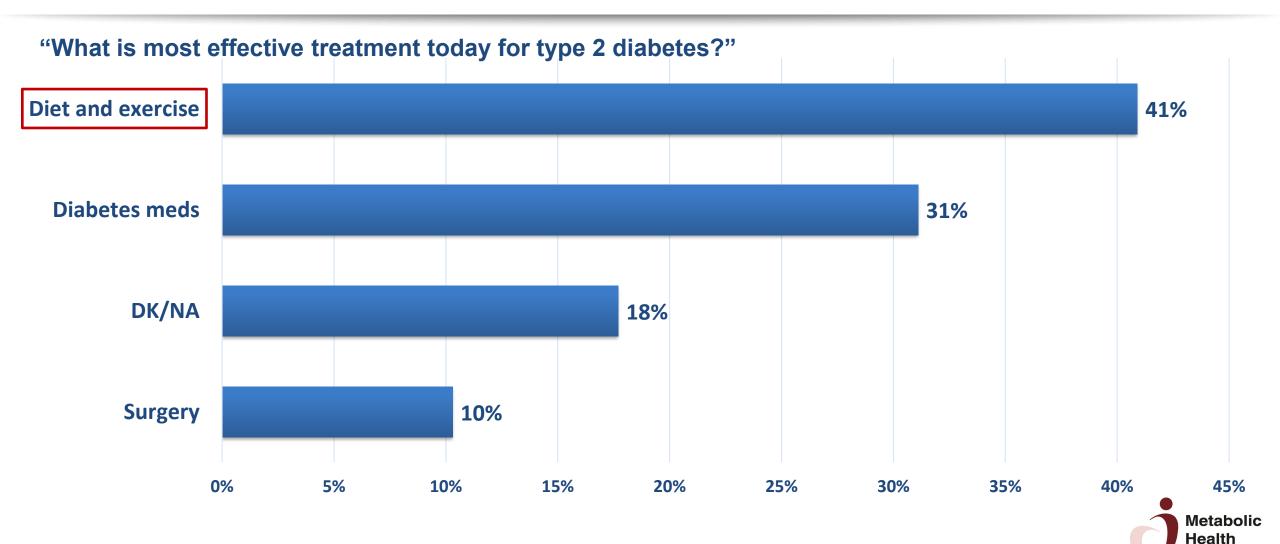
Health Institute

Poor Understanding of Evidence Favoring Surgery



Institute

But People Still Have High Expectations for Diet and Exercise



Institute

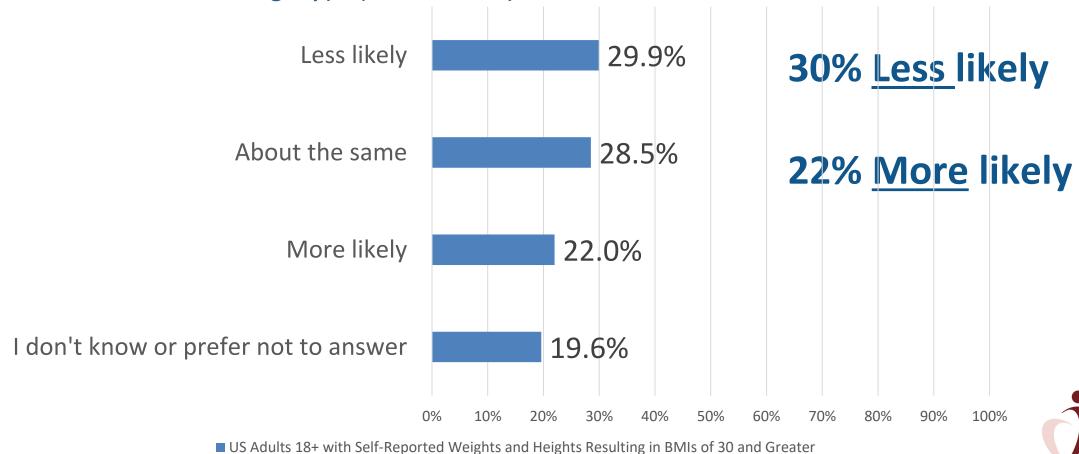
Part 2 Public Beliefs About Seeking Metabolic Surgery

Attitudes About New Obesity Drugs and Metabolic Surgery



Consideration of Surgery vs Five Years Ago

Compared to 5 years ago, how likely are you to consider weight loss surgery (also called bariatric or metabolic surgery)? (Select one.)



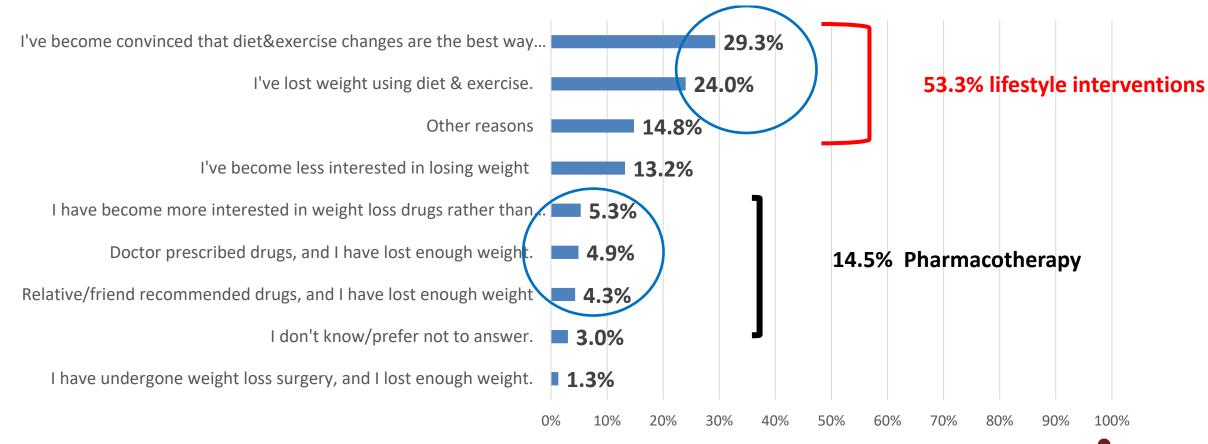
Metabolic

Health

Institute

Question Asked to the 302 responders who said they were <u>less likely</u> to consider surgery compared to 5 years ago]:

What is the most important reason you are less likely now versus five years ago to consider bariatric/metabolic surgery? (Select one.)







Question asked to the 224 responders who said they were more likely to consider surgery compared to 5 years ago]:

What is the most important reason you are more likely now versus five years ago to consider bariatric/metabolic surgery)? (Select one.)

I've tried losing weight with diet & exercise, but it didn't work.

I've gained weight over the last five years.

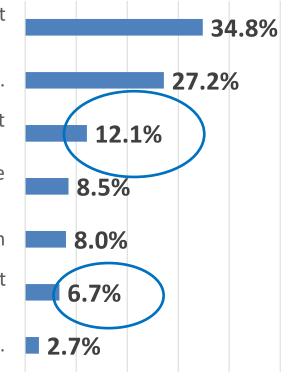
I've tried losing weight with weight loss drugs, but it didn't work.

I've become more convinced that diet&exercise aren't the best way to lose weight.

Other reason

I've become convinced that even weight loss drugs are not as good as surgery.

I don't know/ prefer not to answer.

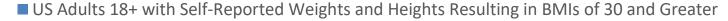


The biggest reason cited by 34.8% is having failed at losing weight using lifestyle and exercise changes.

19% of responders cite reasons linked to weight loss drugs

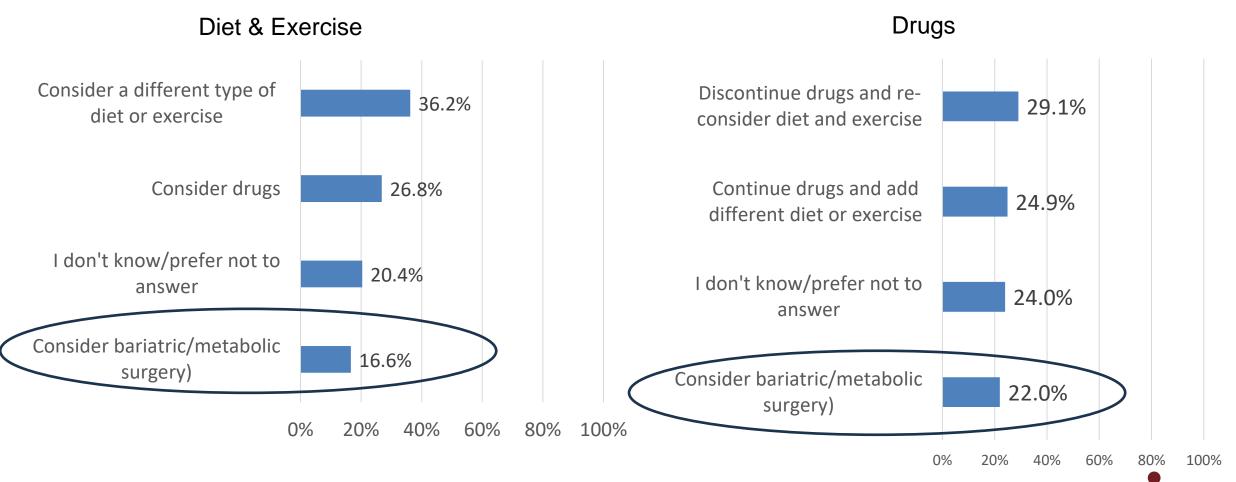
- inadequate weight loss (12.1%)
- Consider drugs not as good as surgery (6.7%)

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%





For someone like you, what is the best course of action if an attempt to lose weight through diet and exercise / weight loss drugs does not produce enough weight loss? (Select one.)



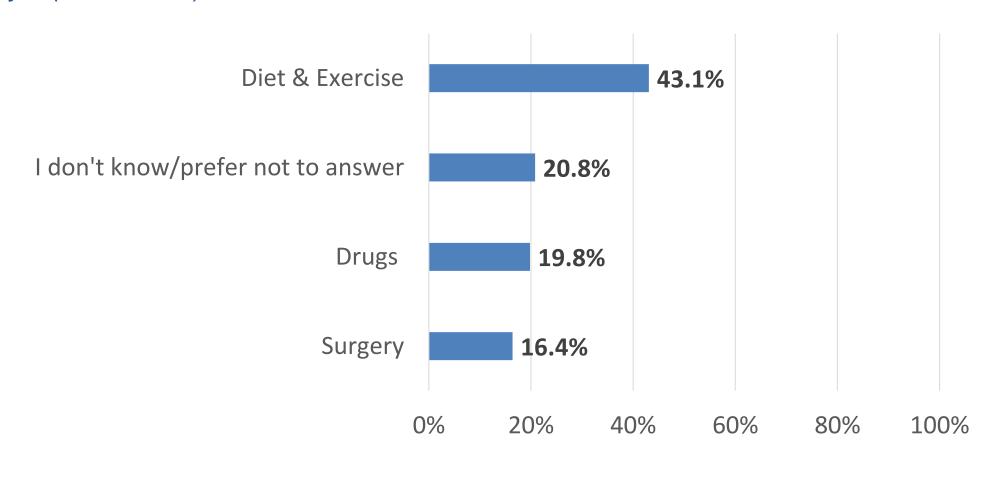
Metabolic Health Institute

Beliefs About Surgery and Other Treatments of Obesity and Type 2 Diabetes



Most People Prefer Diet & Exercise as a Treatment of Severe Obesity

Which one of the following interventions would be best for someone like you as a treatment for severe obesity? (Select one.)





Most People Prefer Lifestyle Interventions or Medications as a Treatment of Type 2 Diabetes

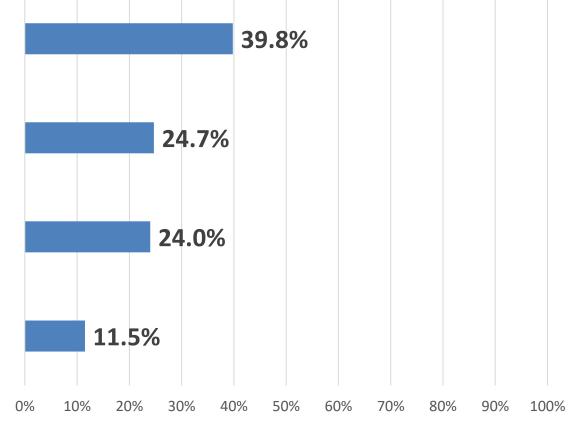
Which one of the following interventions would be best for someone like you as a treatment for Type 2 diabetes? (Select one.)

Lifestyle interventions like diet and exercise

I don't know or prefer not to answer

Drug treatments like pills, insulin, or other injectable medications

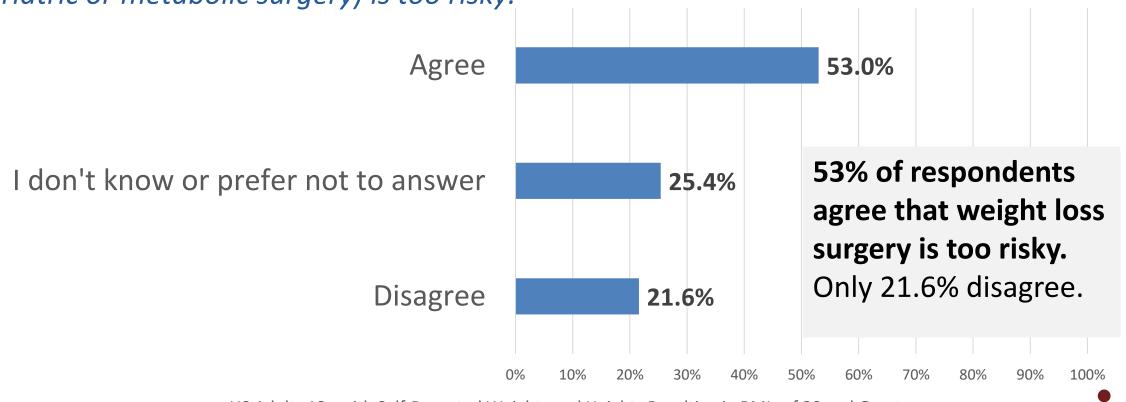
Weight loss surgery (also called bariatric or metabolic surgery)





Bariatric/Metabolic Surgery Continues to be Seen as "Too Risky"

Do you agree or disagree with the following statement? "Weight loss surgery (also known as bariatric or metabolic surgery) is too risky."



■ US Adults 18+ with Self-Reported Weights and Heights Resulting in BMIs of 30 and Greater



Summary - 1

 New Obesity Management Medications (OMMs) are bringing more people to consider care for obesity

 However, most people unrealistically believe that diet & exercise are the most effective treatment for severe obesity



Summary - 2

OMMs appear to influence consideration for bariatric/metabolic surgery both negatively and positively ("both, friend and foe")

However, given the increased overall interest for medical care of obesity, these findings support the hypothesis that OMMs may increase uptake of surgery in the long-term



Summary - 3

Surgery remains an unpopular choice for most patients

- Reasons for poor consideration of bariatric/metabolic surgery:
 - Efficacy for severe obesity is largely <u>under-appreciated</u>
 - Surgery still considered <u>"too risky"</u> by many people
 - There is <u>lack of knowledge</u> among the public that surgery is an effective treatment for <u>type 2 diabetes</u>



Conclusions 2

Patients & Public education about evidence-based treatments of Obesity and Type 2 Diabetes is a major priority

Improved communication about benefits and safety of surgery is required to increase its uptake



