

Slimming on referral

Tackling Obesity in Primary Care

A feasibility study to assess the practicalities of working in partnership with the commercial slimming sector

Slimming on Referral working group

Amanda Avery, Senior Community Dietitian, Greater Derby PCT

Dr Jacque Lavin, Nutritionist, Slimming World

Dr Stephen Whitehead, former Director of Public Health, Southern Derbyshire Health Authority

Elen Rees, former Public Health Trainee, Southern Derbyshire Health Authority

Background

Obesity has to be regarded as one of the most important preventable challenges to health in the UK. It is a risk factor for a range of significant medical consequences.¹ Risk of coronary heart disease, respiratory disease and diabetes increases with increasing body weight. In addition, there are clear inequalities in health with the burden of obesity falling on people in lower socio-economic groups.² The National Audit Office estimates that the costs of obesity to the NHS are in the region of £0.5bn per year, while the costs to the wider economy are in excess of £2bn per year.³ It is imperative that innovative approaches are sought to establish both cost effective

and sustainable weight management programmes in a manner which closes the health gap between different population groups. In response to the National Service Framework for Coronary Heart Disease which included early milestones for the development of local programmes to reduce overweight and obesity, promote healthy eating and increase physical activity, a strategic framework for tackling obesity was developed in Southern Derbyshire.⁴ Among a number of approaches for local action, the framework proposed working in partnership with the commercial slimming sector as an opportunity for weight management.

Slimming World's head office is based in South Derbyshire, providing an ideal collaborative opportunity to test a referral scheme locally. Following wider discussions with health professionals and Slimming World personnel, a feasibility study was set up to establish how best to manage such a partnership.

Why the need to be innovative?

- South Derbyshire has a population of over 500,000
- Hence at least 250,000 will be overweight and 100,000 people will be obese
- There are few dietitians, and nursing staff are in increasingly short supply
- Evidence suggests that outcomes are improved if people are offered frequent support
- Obesity pharmacotherapy is placing a burden on the prescribing budget of most PCTs
- The commercial sector has an already established infrastructure and a product that is clearly acceptable to local people
- Collaboration could provide a highly cost effective and sustainable approach

A powerful, practical partnership



Greater Derby
Primary Care Trust



Central Derby
Primary Care Trust



Aims

- To monitor enrolment and attendance of patients referred from primary care to a Slimming World group.
- To identify factors associated with successful participation, including NHS subsidies to help with the cost of scheme membership.
- To gather baseline data to help plan future interventions comparing referral schemes with other forms of intervention.

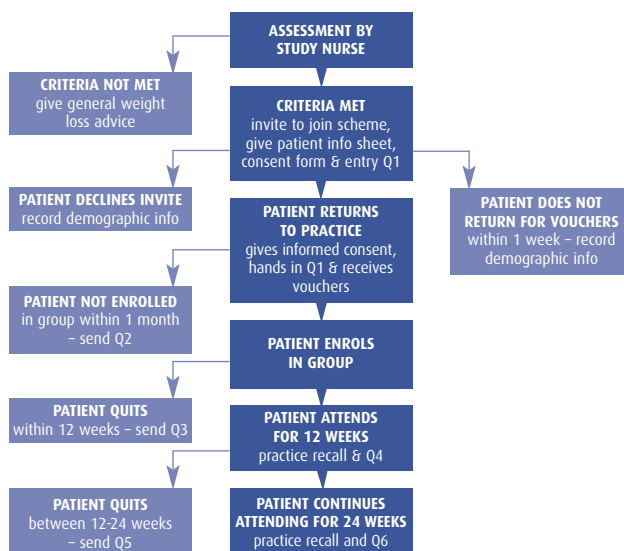
Method

Two large inner city practices took part in the study with 107 patients recruited between Sept 2001 and Feb 2002. Referral criteria were: BMI > 30kg/m², aged 18-75yrs, not pregnant and no attendance of a slimming group in the previous 3 months. Ethical approval was obtained.

Patients were given vouchers for free membership and 12 consecutive weeks' attendance at a local Slimming World group of their choice. It was imperative that people attending through the Slimming on Referral scheme would not be made to feel different in any way. Patients were encouraged to attend for a minimum of 12 weeks, after which time they became responsible for paying their own weekly fees. Patients were reviewed by the primary care team at 12 and 24 weeks.

Protocol

Weight change was monitored weekly and a series of questionnaires (Q1 – Q6) was designed to evaluate the study. The questionnaires collected socio-economic data as well as information relating to general health, lifestyle, motivation to lose weight and experience of the group. Barriers to patients continuing to attend the group, within the initial 12 week free period and the subsequent 12 weeks, were identified.



SUMMARY OF THE RESULTS

Characteristics of study population

- The average age of the participants was 49.5 years (range 22.5 to 77.5yrs)
- 88% were female
- Average BMI was 36 kg/m² (range 30 - 47kg/m²), with 50% having a BMI above 35kg/m²
- 11% of the study population were known to have diabetes
- 43.5% reported their household income to be below £10,000, 28.3% between £10,000-£20,000 and 28.3% above £20,000

Slimming World group attendance

- Following recruitment, 91 (85%) participants enrolled with a Slimming World group
- Of these, 62 (58% of the total study population, 68% of the enrolled population) completed the 12 week free attendance at the group of their choice

Patient feedback after the initial 12 weeks

'It has made me realise how much I needed the support of a group.'

'Absolutely fantastic, I feel healthier, do more activities, look slimmer. My diet has changed dramatically, and my confidence has increased. Taking part and being involved with the surgery has inspired me to carry on, thank you.'

'The group Consultant was excellent and very supportive. An excellent scheme which should have been done years ago.' (male)

'I was grateful to go slimming through your scheme as being on a low income it is something difficult to budget for.'

'I am pleased my surgery became involved with Slimming World. It gave myself, and others, an opportunity to learn good eating habits and achieve some weight loss, whilst sharing other people's problems of weight.'

'Now having seen the benefits of the commitment, I am going to try and budget for the weekly fee!'

'I was helped at a time when I had very low self-esteem and financial problems.'

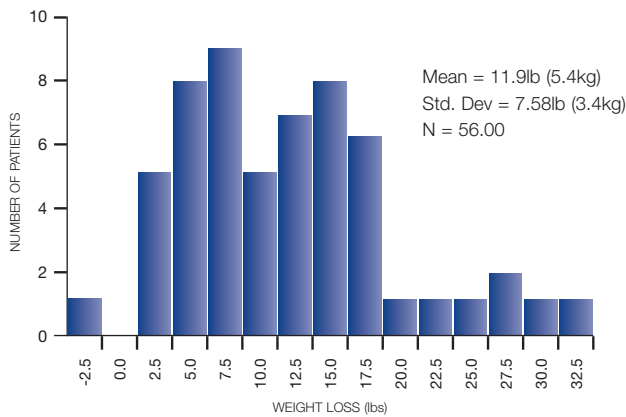
'Had I not had the information from the surgery I would not have gone despite being overweight.'

Results after the initial 12 week free attendance

In the 62 participants completing the subsidised 12 weeks:

- Average weight loss was 5.4kg (11.9lb)
- Average percentage loss of body weight was 6.4%
- 35 participants (56%) lost at least 5% of their body weight
- Significant improvements in mental well-being were found

WEIGHT LOSS IN PATIENTS COMPLETING 12 WEEKS



Results of participants self-funding their attendance beyond 12 weeks

- 47 (76%) of completing participants decided to fund themselves to carry on attending the group
- 10 (16%) indicated the weekly fee was a barrier to continued attendance
- 34 participants (37% of those initially enrolled) self-funded their attendance for the full 24 weeks of the study
- Average weight loss over 24 weeks was 11.1kg (24.4lb)
- Average percentage weight loss over 24 weeks was 11.3%. 25 (86%) achieved at least 5% weight loss
- Significant improvements in mental well-being were found after 24 weeks

Those who did not complete the 12 week free attendance (ie missed at least the final 2 sessions) were significantly more likely to:

- be under 50 years of age
- be worried about money
- live in the most deprived areas
- report no restriction in activity due to ill health

Patient feedback after 24 weeks

'Always made welcome, plenty of motivation, have made new friends which is a bonus.'

'Excellent, I have lost 12 inches off my waist and my overall health has improved immensely.'

'I have loads of energy and am able to do much more physical activity.'

'I probably would not have done any slimming without this offer, now I'm only too happy to pay.'

Qualitative data

Questionnaire data strongly supports the partnership between the health sector and Slimming World. Patients viewed the scheme very positively.

Costs of the trial

The cost per patient for Slimming World membership and 12 weeks' group attendance is £44.50. Compared with current obesity therapy options, for example drug treatment (the average cost of 12 week Orlistat or sibutramine treatment being around £120 depending on the dosage given), the partnership provides a highly cost effective approach.

References

- 1 Brownell KD, Wadden TA. Journal of Clinical and Consulting Psychology, 60: 505-517, 1992
- 2 Southern Derbyshire Health Survey. Southern Derbyshire Health Authority, 1999
- 3 National Audit Office. Tackling Obesity in England. HMSO, London, 2001
- 4 Avery A. Tackling Obesity in Southern Derbyshire: A Framework for Action, 2000

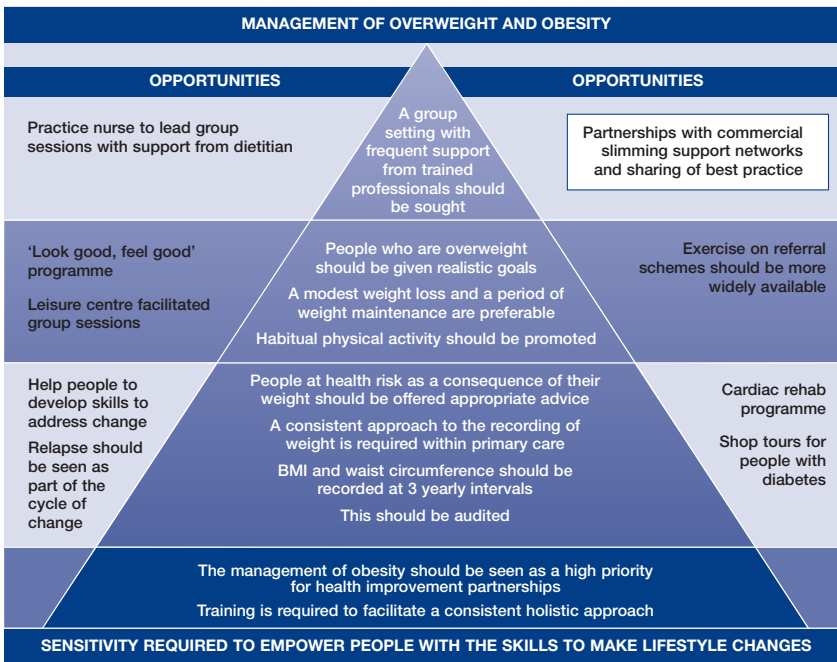
Conclusions

- It is feasible to set up referral schemes from primary care into Slimming World groups with minimal extra resources for administration.
- The required target of 5-10% weight loss for health improvement can be achieved in a significant percentage of patients referred to Slimming World.
- Collaboration between the health and commercial sectors can provide realistic, cost effective and sustainable support to people in losing weight and maintaining weight loss.

The study was funded jointly by Southern Derbyshire Health Authority and Slimming World

Slimming on Referral – part of a local obesity strategy

An effective local obesity strategy will employ a co-ordinated, multi-agency approach ensuring best use of available resources. Slimming on Referral can be an important component of a local action plan. The Slimming on Referral scheme is easily replicated and adapts to suit local requirements in different settings, for example, general practice, secondary care and Sure Start.



Adapted from Tackling Obesity in Southern Derbyshire: A framework for action (Avery 2000)

GP views

“Research shows that, with any kind of weight loss programme, people need support and regular contact. This scheme provides that and has been a huge success”

GP Dr Ruth Lenehan at Park Farm Medical Centre, Derby

“We were very pleased with the scheme. We referred 51 patients to a Slimming World group. Not everyone went along, but those that did all lost weight. For patients, knowing that their GP and surgery is behind them gives them that extra motivation and support to complete the course”

GP Dr Judy Parsons of Charnwood Medical Centre, Derby

Support from Slimming World

To assist in running referral schemes Slimming World provide:

- **Special referral voucher packs** similar to those already used by Slimming World members to ensure that people attending through Slimming on Referral schemes are not made to feel different to any other members.
- **Appropriate training** of Slimming World Consultants and participating practices to ensure effective co-ordination of referral schemes, appropriate use of vouchers, commitment to the initiative, and that patients will feel comfortable in attending the group and be recognised as regular group members.
- **Information** about local Slimming World groups and contacts.
- **Referral scheme audit** to provide vital evidence about the scheme's effectiveness.

Patient Packages

- **Standard packages** For patients who are interested in attending a Slimming World group without participating in Slimming on Referral, Slimming World can provide contact details and information about local groups to display in your practice.
- **Supported packages** Slimming World offer NHS teams the opportunity to purchase discounted Slimming on Referral vouchers.

For further information on the study or about running local Slimming on Referral schemes please contact:

Jacquie Lavin MMedSci, PhD, RNutr
Partnerships Manager & Nutritionist
email: jacquie@slimming-on-referral.com

Amanda Avery B.Sc. (Hons), Ad. Dip. Diet., R.D.
Partnerships Co-ordinator
email: amanda@slimming-on-referral.com

Slimming World
Clover Nook Road, Somercotes, Alfreton, Derbyshire DE55 4RF
Telephone: 0870 330 7733 Fax: 0870 330 1801
www.slimming-world.com

the future of slimming