



Objectives: Obesity

1. Identify the burden of disease related to obesity.
2. In patients who appear to be obese, make the diagnosis of obesity using a clear definition (e.g. currently body mass index) and inform them of the diagnosis.
3. In all obese patients, assess for treatable co-morbidities such as hypertension, diabetes, coronary artery disease, sleep apnea, osteoarthritis, as these are more likely to be present.
4. In patients diagnosed with obesity who have confirmed normal thyroid function, avoid repeated thyroid-stimulating hormone testing.
5. In obese patients, inquire about the effect of obesity on the patient's personal and social life to better understand its impact on the patient.
6. In a patient diagnosed with obesity, establish the patient's readiness to make changes needed to lose weight, as advice will differ, and reassess this readiness periodically.
7. Advise the obese patient seeking treatment that effective management will require appropriate diet, adequate exercise and support (independent of any medical or surgical treatment) and facilitate the patient's access to these as needed and as possible.
8. In patients with severe obesity where behavioural intervention has been inadequate in achieving healthy weight loss goals, consider referral for bariatric surgery.
9. As part of preventing childhood obesity, advise parents of healthy activity levels for their children.
10. In managing childhood obesity, challenge parents to make appropriate family-wide changes in diet and exercise and to avoid counterproductive interventions (e.g. berating or singling out the obese child).

** Mapped to the CFPC's 105 priority topics: #70-Obesity