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PATIENT EDUCATION: EXERCISE FOR WEIGHT LOSS

Alexa Arvidson

Family Medicine Clerkship, May – June 2018

Community Health Centers of Burlington

Project Mentor: Dr. Heather Stein

PROBLEM IDENTIFICATION

- Obesity is a serious health concern because it is associated with reduced quality of life and a myriad of health outcomes including diabetes, heart disease, stroke and some types of cancer¹
- In Chittenden County, the 3-year adult obesity prevalence increased from 14% in 1999 to 20% in 2009²
- 40% of adults in the Burlington Health Service Area do not achieve the minimum recommended levels of physical activity²
- In the 2016 Community Health Needs Assessment for Chittenden and Grand Isle Counties, obesity prevention was seen as a high need for survey respondents. Specifically, respondents stated that programs to combat obesity were the second-highest need³
- Common barriers to participation in physical activity for middle-age and elderly adults are 'not enough time,' 'no one to exercise with,' 'lack of facilities' and 'do not know how to do it'⁴

PUBLIC HEALTH COST

- In 2008, among adults, the medical costs associated with obesity are estimated to have \$147 billion, which is 9.1% of annual medical spending⁵
- If obesity prevalence continues to rise following current trends total health care costs attributable to obesity and overweight will more than double every decade by 2030. This could lead to health care costs from \$860 to \$956 billion, which would account for 15.8-17.6% of total health care costs⁶
- A sustained 10% weight loss will reduce an overweight person's lifetime medical costs by \$2,200-\$5,300 by lowering costs associated with hypertension, type 2 diabetes, heart disease, stroke and high cholesterol⁷

COMMUNITY PERSPECTIVE

Emily Heaslip, MS, RD, CD, Community Health Centers of Burlington

“One of the biggest barriers for our patients is getting started. Many of them have multiple barriers, including social and financial stress, complex medical issues, and unstable housing at times. This makes it challenging to focus on exercise. A lot of people also have the misconception that you need a gym to exercise. Many people don’t realize that walking is a great option. I try to emphasize that purposeful exercise is important. It’s great to walk to the store, take the stairs, etc. but a purposeful walk for exercise is makes a big difference... Many people overestimate how much they exercise and underestimate how much they eat.”

Ryan Gray, Fitness Coordinator, Greater Burlington YMCA

“For people who are just beginning their journey for weight loss, I have found that there is an expectation that the results will come in a rapid amount of time. In addition to having the wrong expectation of a time frame needed to meet their weight loss goals, individuals often believe they can spot reduce fat and target specific portions of their body such as their stomach or under arms. For most people, there is usually a general concept of needing to evaluate their diet and to incorporate physical activity/exercise, but I would argue most people do not know specifically where to begin.”

INTERVENTION AND METHODOLOGY

- Discussed barriers to exercise and common misbeliefs patients have when starting to exercise with providers at the Community Health Center and the fitness director at the Burlington YMCA, as well as their approach to such patients
- Reviewed the current exercise recommendations for adults and suggested ways patients begin incorporating exercise into their everyday life
- Created an informational handout providing information on the exercise recommendations for adults, tips for getting started and information about common misbeliefs

INTERVENTION: HANDOUT

EXERCISE FOR WEIGHT LOSS



Recommendations

- The Center for Disease Control recommends adults get at least 2 hours and 30 minutes of moderate-intensity aerobic activity (i.e., brisk walking) every week and muscle-strengthening activities on 2 or more days a week
- Remember: A healthy diet with lots of fruits, vegetables, lean proteins and healthy fats is an important part of weight loss
- Use MyPlate Checklist Calculator at www.choosemyplate.gov to develop a plan for food intake and physical activity to lose weight

How to get started

- Start Walking! It is ok to start with something doable for you, such as 10 min/day and then work your way up from there
- Break it up! Exercise for 10 or 15 minutes a few times a day to reach a total of 30-60 minutes of exercise per day
- Use YouTube to find low intensity workouts that you can do at home. For example: HASFit 20 minute chair workout
- Everyday try to take the stairs, park your car at the far end of the parking lot and walk or ride your bike to nearby places
- Aim for 10,000 steps per day (~ 5 miles) – you can use apps on your phone, e.g. Health or Google Fit, to track your steps
- Make specific, realistic goals. Start slow and increase intensity and/or time of exercise over time

“Walking is man’s best medicine”
-Hippocrates

DID YOU KNOW?

- You cannot do exercises to isolate fat loss in one area, you must reduce overall body fat

- There are plenty of workouts you can do at home or outside without an expensive gym membership. Use YouTube or apps on your phone to find workouts that are fun and appealing to you

- You don’t need to do high-intensity exercise to lose weight. Walking or other low-impact exercises such as swimming can help you meet your weight loss goals

- Find a fitness buddy who can exercise with you. It will help you both stick to your exercise plans

- Equivalents:

Eating a large cookie (275 cal)
= 47 minutes of riding a bike

Drinking a 16 oz coca-cola (201 cal) = 35 minutes of walking leisurely

RESULTS

- The informational handout was distributed to the providers at the Community Health Centers of Burlington
- The handout was made for providers to give to patients who are attempting to lose weight to provide written information about how much exercise they need and how to get started
- It was well received by the providers and they are optimistic that this intervention will help patients on their weight loss journey

EVALUATION OF EFFECTIVENESS AND LIMITATIONS

Evaluation of Effectiveness:

- The effectiveness of the handout could be assessed by giving a follow-up survey to the patients that received the handout. The survey could assess whether the patient found the handout helpful, if they implemented any of the suggestions listed on the handout, and if it changed their beliefs about exercise for weight loss

Limitations:

- Due to the time constraints of the Family Medicine Clerkship there was not enough time to collect data on the effectiveness of the intervention
- The handout is not personalized to the individual patient's specific barriers and misbeliefs about exercising for weight loss
- The Community Health Center has a large population of non-English speaking patients that may not find the handout accessible or culturally congruent

RECOMMENDATIONS FOR FUTURE

- Additional advising or information could be made available for specific patient populations trying to incorporate exercise into their weight loss regimen. For example, a specific intervention for those with chronic pain or reduced mobility
- The handout could be translated into other languages to provide access to more patients
- Adding the handout to the take-home patient plan of all patients who are trying to lose weight to maximize utilization of the handout

REFERENCES

1. "Adult Obesity Causes & Consequences." *Center for Disease Control and Prevention*. 5 Mar. 2018, <https://www.cdc.gov/obesity/adult/causes.html>. Accessed 4 June 2018.
2. "Final: Chittenden County Public Health and Community Design Data Analysis." *ECOS*. 24 Sept. 2012. http://www.healthvermont.gov/sites/default/files/documents/2016/12/Public%20Health%20Data%20Analysis%20ECOS_Report%20Summer%202012%20Updated%209.20.12%20FINAL%20FOR%20RPC.pdf
3. "2016 Community Health Needs Assessment, Chittenden and Grand Isle Counties, Vermont." *CHNA*. <https://www.uvmhealth.org/medcenter/Documents/About-Us/CHNA.pdf>
4. Justine, Maria, Azizan, Azliyana, et. al. (2013) "Barriers to participation in physical activity and exercise among middle-aged and elderly individuals." *Singapore Medical Journal*. 54(10): 581-586
5. Finkelstein E.A., Trogon J.G., Cohen J.W., Dietz W. (2009) "Annual medical spending attributable to obesity: payer- and service-specific estimates." *Health Affairs*. 28: w822-w831
6. Wang, Y., et al. (2008). "Will all Americans become overweight or obese? Estimating the progression and cost of the U.S. obesity epidemic." *Obesity*. 16: 2323–2330.
7. Oster, G., Edelsberg, J., O'Sullivan, A. K., & Thompson, D. (2000). "The clinical and economic burden of obesity in a managed care setting." *American Journal of Managed Care*. 6(6): 681-689.
8. "How much physical activity do adults need?" *Center for Disease Control and Prevention*. 4 Jun. 2015, <https://www.cdc.gov/physicalactivity/basics/adults/index.htm>. Accessed 5 June 2018.
9. "Helping Patients Set Fitness Goals." *American Academy of Family Physicians*. 2018. <https://www.aafp.org/patient-care/public-health/fitness-obesity/tips.html>. Accessed 5 June 2018.
10. "Portion Distortion." *United States Department of Agriculture ChooseMyPlate.gov*. 12 Oct. 2016, <https://www.choosemyplate.gov/tools-portion-distortion>. Accessed 5 June 2018.
11. Perry, Elena. "Targeted Fat Loss: Myth or Reality?" *Yale Scientific*. 3 Apr. 2011, <http://www.yalescientific.org/2011/04/targeted-fat-loss-myth-or-reality/>. Accessed 7 June 2018.
12. Diabetes Care. "Exercise for Seniors." 6 Jul. 2014. Online Image. Flickr. 11 June 2018. <https://www.flickr.com/photos/diabetescare/14589702095>.

INTERVIEW CONSENT FORMS

- Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview. Yes / No If not consenting as above: please add the interviewee names here for the department of Family Medicine information only. Name: _____ Emily Heaslip _____
- Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview. Yes / No If not consenting as above: please add the interviewee names here for the department of Family Medicine information only. Name: _____ Ryan Gray _____