

Contemporary issues involving obesity and weight management

Chris Dickie

OVERWEIGHT AND OBESITY have now been identified as the risk factors contributing the most to total disease burden in Australia, exceeding smoking, alcohol and many other risk factors we discuss with our patients.¹ Most general practitioners (GPs) in Australia see patients every day who are living with obesity or who have overweight. These might be patients presenting directly because of weight management concerns, with pathology that has been impacted by excess adiposity, or patients who might not have raised or realised any potential problems.

The definition and criteria for measurement of obesity has been an area of ongoing discussion and research. The recent Lancet article from the Global Commission on Clinical Obesity² proposes definitions of obesity, pre-clinical obesity and clinical obesity. They define clinical obesity as 'a chronic, systemic illness characterised by alterations in the function of tissues, organs, the entire individual, or a combination thereof, due to excess adiposity'. The Commission recommend the use of body mass index (BMI) at a population level, with individual's measurements being more accurately assessed using anthropometric criteria such as waist circumference, waist-to-hip ratio or waist-to-height ratio alongside BMI.

As GPs, our role includes bridging the gap between guidelines and clinical practice, continuing our lifelong journey of education and bringing patients with us – often with limited appointment time to do so. In this issue of *AJGP*, Bi et al have explored some of the challenges of bridging this gap.³

This issue also includes up-to-date articles on pharmacological management⁴ and bariatric surgery⁵ for obesity, which our readers have been asking for.

Consults involving obesity and weight management can be complex, often requiring a biopsychosocial approach and consideration of the stigma surrounding obesity from both the general population and within healthcare.⁶ Applying all of this in general practice comes with challenges; however, so does management through public weight management clinics, as discussed by Munindradasa and Douglas.⁷

In general practice, we have a unique setting, fostering longitudinal relationships with our patients and creating opportunities to improve their mental and physical health. This can allow us to tackle this difficult but important area of healthcare to the benefit of our patients and the wider population.

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