

Evidence Summary

Working age adults of a healthy weight



Public Health Outcomes Framework indicator 38a

Measure

The percentage of adults aged 16 to 64 who are of a healthy weight (BMI \geq 18.5 and $<$ 25).

Questions used to generate the evidence summary:

What actions are effective for working age adults to maintain their BMI \geq 18.5 and $<$ 25?

What actions are effective for overweight and obese working age adults to reduce their BMI?

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Readers interested in this summary may also be interested in the summary relating to indicator 23 *Adults eating five fruit or vegetable portions a day*, indicator 24 *Adults meeting physical activity guidelines*, indicator 32 *Children age 5 of a healthy weight* and indicator 33 *Adolescents of a healthy weight*. The majority of NICE guidelines concerning the prevention and management of excess weight gain are applicable to all age groups.

General recommendations

A community wide, coordinated, multi-agency approach, having visible strategic leadership should be in place to address obesity prevention and management [NICE].¹ Local residents should have their priorities in relation to weight issues identified and businesses and social enterprises should be involved in the implementation of the local obesity strategy [NICE].¹ Local authorities and the NHS should be exemplars of good practice to help staff, service users and the wider community achieve and maintain a healthy weight by promoting healthy food and drink choices, facilitating active travel and promoting physical activity [NICE].^{1,2} Workplaces should provide opportunities for staff to eat a healthy diet and be more physically active [NICE].² The benefits of

maintaining a healthy weight should be clearly communicated and messages should be tailored for specific groups [NICE].³

Preventing and managing unhealthy weight gain in adults

Recommendations for individuals with regard to maintaining a healthy weight and lifestyle interventions recommended to reduce excess weight are multi-component and include:

- increasing physical activity levels
- decreasing time spent being sedentary
- improving the quality of the diet, and
- reducing the energy density and intake of food and drinks [NICE].³

Extreme physical activity or dietary behaviours should be avoided as they are difficult to sustain and may not be accompanied by wider improvements in health [NICE].³ Perceptions, habits or situations that may undermine efforts to maintain a healthy weight or prevent excess weight gain in the long term should be identified [NICE].³ Activity should be built into daily life by developing routines and habits to gradually increase intensity of activity and reduce sedentary behaviour [NICE].³ Self-monitoring habits, such as regularly checking weight, food and drink intake, and amount of physical activity should be encouraged [NICE].³ Adults should be encouraged to limit the amount of alcohol they drink [NICE].³

Multi-component lifestyle interventions that address dietary intake, physical activity levels and behaviour change and also include core components to prevent weight regain, are the treatment of choice for adults who do not have a healthy weight [NICE].^{4,5} Tier 2 weight management programmes exemplifying supportive relationships between providers and the service users and between service users and their peers are associated with greater effectiveness. Programs that foster self-regulation and include provider set goals addressing both energy intake and energy expenditure are also effective.¹²

Health and social care professionals should be made aware of the range of local lifestyle weight management services available and offer referral for overweight and obese adults [NICE].⁵ Referral may be funded or unfunded, dependent upon local eligibility criteria. Group programmes tend to be more cost effective than individual programmes [NICE].⁵ Contracts for lifestyle weight management programmes should include specific outcomes and address local needs [NICE].⁵

Pharmacological treatments should only be considered after dietary, exercise and behavioural approaches [NICE].⁴ Bariatric surgery is a treatment option for adults at

specific BMI thresholds and where all appropriate non-surgical measures have been tried [NICE].⁴

There is moderate evidence that interactive computer based programmes are effective for weight loss and weight maintenance when compared to no intervention or minimal intervention (e.g. pamphlets, usual care), but result in smaller weight loss and lower levels of weight maintenance than in-person interventions.⁷ There is a lack of evidence to determine the optimal use of technology in weight loss interventions.¹³ Interventions using self-monitoring, counsellor feedback,¹⁴ group support, a structured programme and ability to tailor programmes to individuals have showed better results than interventions which did not.¹³ Mobile devices¹⁵ and apps¹⁶ have the potential to be utilised for weight loss, however further research is required across the variety of offerings in this area to understand if such interventions have sustained benefit. Studies of social media interventions relating to healthy diet and exercise tend to show low levels of participation and adherence and have not, to date, shown significant differences between groups in key outcomes.¹⁷

Context in Wales

The All Wales Obesity Pathway was launched in 2010 to help people achieve a healthy weight. The pathway involves health boards working with local authorities and other services to tackle obesity in Wales. The pathway sets out a four-level approach to manage and treat obesity in Wales:

Level 1 - Community-based prevention - ensure opportunities are available for people to achieve and help maintain a healthy body weight.

Level 2 - Early intervention services for people who wish to lose weight and have been identified at an increased risk by a doctor.

Level 3 - Specialist weight management services for people who are obese and have tried several methods of losing weight without success.

Level 4 - Bariatric surgery - specialist medical and surgical services for those people who have not managed to lose weight through conventional methods.

For further information go to: <http://gov.wales/topics/health/improvement/obesity/?lang=en>

The Public Health (Wales) Act 2017 requires Welsh Government to publish a national strategy on preventing and reducing obesity.

References and further detail from the sources on which this evidence summary is based are available in the [evidence map](#). The user guide is available [here](#).