

BEST PRACTICE MANAGEMENT OF INTENDED WEIGHT LOSS

Assessment

- Identification of risk factors that contribute to weight gain (medications: Insulin, tricyclic antidepressants, antipsychotics, anticonvulsants; functional impairment, edema, excessive caloric intake, etc.)
- Identification of severity of weight status (> 30 BMI = obesity)
- Identification of risks and benefits of weight loss

Risks	Benefits
1. Decrease in nutritional intake	1. Improve weight range to desirable level (< 30 BMI)
2. Decrease in muscle mass and bone density	2. Improve medical complications if < 75 years old (Quantity of life)
3. Decrease in pleasure of eating	3. Improve functioning and mobility for all ages (Quality of life)

- Assess person's readiness/consent to change
- Registered Dietitian's (RD) annual assessment of nutrition and fluid needs
- RD's planned person-specific nutrition related goal(s)

Care Plan

- Person-centered measurable goals
- Individualized interventions
- Utilization of the RD's assessments, nutrition goals, and recommendations
- Utilization of an interdisciplinary approach

Care

Dietary Recommendations

- Reduce calories by 500 kcals/day
- Increase protein to 1.0 g/kg of body weight
- Provide a multiple vitamin-mineral supplement

Exercise Recommendations

- Provide 10-20 minutes of person-appropriate exercise at least every other day.

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Weight Monitoring

- Establish a baseline--weigh weekly until goal is reached
- Weigh the same time of day
- Weigh using the same scale
- Record weights to easily assess trends
- Notify MD and RD of significant weight changes to plan

Resources

- (1) www.texasqualitymatters.org
- (2) Kushner RF, Blatner DJ. Risk Assessment of the Overweight and Obese Patient. *Journal of the American Dietetic Association* 2005; 105 (5): S53-S62.
- (3) Houston DK, Nicklas BJ, Zizza CA. Weighty Concerns: The Growing Prevalence of Obesity among Older Adults. *Journal of the American Dietetic Association* 2009; 109 (11): 1886-1895.
- (4) American Dietetic Association. Position of the American Dietetic Association: Weight Management. *Journal of the American Dietetic Association* 2009; 109 (2): 330-346.
- (5) American Dietetic Association. Position of the American Dietetic Association: Individualized Nutrition Approaches for Older Adults in Health Care Communities. *Journal of the American Dietetic Association* 2010; 110 (10): 1549-1553.
- (6) Flood M, Newman AM. Obesity in Older Adults. *Journal of Gerontological Nursing* 2007: 19-34.
- (7) Villareal DT, Apovian, CM, Kushner, RF, Klein S. Obesity in older adults: technical review and position statement of the American Society for Nutrition and NAASO, The Obesity Society. *American Journal of Clinical Nutrition* 2005; 82: 923-934.
- (8) National Heart, Lung, and Blood Institute National Institutes of Health. *The Practical Guide: Identification, Evaluation, and Treatment of Overweight and Obesity in Adults*. NIH Publication 00-4084; October 2000.

