



شركة الصحة القابضة
Health Holding Company
North Business Unit

Model of Care
Chronic Care



Obesity in Adults

This clinical sub-pathway is part of the system level Obesity pathway and it provides guidance on how to identify if an adult patient is a healthy weight and what to do if they are overweight or obese.

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Background

About weight management in adults

The [World Health Organization Data](#) indicates that the overall prevalence of obesity in KSA was estimated to be 35.4% in adults.


Obese people are at increased risk of:

- High blood pressure
- High LDL cholesterol, low HDL cholesterol, or high levels of triglycerides
- Type 2 diabetes
- Coronary heart disease
- Stroke
- Gallbladder disease
- Osteoarthritis
- Sleep apnoea and breathing problems
- Most cancers, except oesophageal and prostate cancer
- Low quality of life
- Mental illness, e.g. clinical depression and anxiety
- Body pain and difficulty with physical functioning

Rapid weight loss diets:

- Not associated with increase risk of rapid weight regain
- May be associated with an increased risk of cholecystitis
- Patients may notice symptoms such as fatigue, headaches, irritability
- Patients are at risk of electrolyte imbalance and malnutrition if limiting intake of certain food groups (especially protein)

Tools for screening:

- Body mass index (BMI) is useful as an initial screening tool to identify people who may have health problems associated with being under or overweight. It can be used for most people aged over 18 years, but it does have some limits. It may cause the following:
- Waist circumference is another method to help determine risk by assessing for central adiposity, and it provides useful complementary information to BMI. Excess abdominal fat is more metabolically active and more strongly linked to disease risk than total fat mass. Please refer to this image  to measure waist circumference



Assessment

- 1 Ask the patient whether they are willing to speak about their body weight before weighing them and discussing weight management, especially if the patient did not come to see you for this specific issue. Refer to the Obesity Education Clinics Guidelines [and](#) Diabetes Educational Information [for](#) more information on speaking about and educating patients on obesity.
- 2 Measure height and weight (with shoes and heavy clothing removed) and calculate BMI as per the following:
 - Be aware of cultural sensitivities around body parts and body image. Consider checking with the patient first, as some people might feel distressed if they are weighed
 - If a patient is obviously overweight, consider whether or not it is useful to weigh them (e.g. to establish a baseline)
- 3 Consider measuring waist circumference especially if the patient is unable to stand on scales:
- 4 Check for unintentional weight gain:
- 5 Find out if the patient:
 - Is taking any medications:
 - Has any physical injuries or disabilities that may have contributed to weight change
 - Is pregnant with BMI greater than 40
- 6 Assess the patient's diet and lifestyle. Ask about:
 - Usual food, drink, and eating habits:
 - Physical activity – type, duration, and frequency. Consider work, recreational, transport, home, and incidental activities
 - Sleep patterns
 - Mental wellbeing
 - Smoking patterns
- 7 Consider screening obesity patients for diabetes. Refer to the diabetes screening pathway [for](#) more information.
- 8 Assess the patient's readiness and motivation to make dietary and lifestyle changes, taking account of their previous behaviours, beliefs, and values.
- 9 For further information, refer to and complete the obesity early diagnosis chart for adults. [for](#)



Management

- 1 If unintentional weight gain consider an underlying medical condition, e.g. thyroid issues, COPD, eating disorders, malignancy, polycystic ovarian syndrome (PCOS), sleep apnoea, Cushing syndrome.
- 2 Manage according to BMI result, and diet and lifestyle assessment:
 - If BMI is 25 or more (or the patient's BMI is not known but they are visibly overweight):
 - Initiate a discussion with the patient in a supportive way, without any negative judgment or bias. Consider using motivational interviewing techniques:
 - Set goals with the patient using a 3-pronged approach and provide patient information:
 - Encourage self-management:
 - Consider using calorie counting guideline [link](#) to help answer any questions about specific diets. Note that the Ministry of Health recommends an overall healthy eating pattern rather than any specific diet



Management

3 Consider requesting:

- Community nutrition support
- Physical activity support
- Private dietitian
- Health coach services
- Weight loss programmes

Refer to table below for contact information of available health coaches and dietitians

Cluster	Name	Role	Facility	Email	Contact Number
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Tabouk	Eman Qaisi	Health Coach and Diabetes Educator			556663846
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4 Address any contributing lifestyle factors, e.g. alcohol, smoking, sleep, mental wellbeing, social support.

5 Provide tips to help maintain a healthy weight  or the healthy eating habits information sheets.


6 Refer to this [KSA MoH webpage](#) for guidelines and information on maintaining a healthy weight.



Management

Follow-up

If the patient's BMI is 25 or more, or there has been unintentional weight gain, follow up in 1 month:

- If at the first appointment the patient had a BMI of 25 or more and has:
 - Lost weight:
 - ◆ Consider offering continued support as long as needed
 - ◆ Review the need for ongoing medication, especially antihypertensives and antidiabetic medication
 - Not lost weight:
 - ◆ Review goals and consider requesting obesity clinic assessment and/or assessment from an allied health professional, e.g. clinical psychologist, dietician, occupational therapist, physiotherapist for physical activity support
 - ◆ Consider if there may be indication for:
 - Anti-obesity medication:
 - Bariatric surgery  :



Request

If the patient has a BMI of 25 or more and has not lost weight after 6 months of lifestyle management request obesity clinic assessment, or/and assessment from allied health professional, e.g.:

- Clinical psychologist
- Dietician
- Occupational therapist
- Physiotherapist for physical activity support



Information

For healthcare professionals

- Ministry of Health - [MOH Formulary](#)
- BPACNZ:
 - [Motivational Interviewing in Primary Care](#)
 - [Weight Loss: The Options and the Evidence](#)
- [Clinical Practice Guideline on Obesity](#)
- [The Saudi Guideline for the Prevention and Management of Obesity](#)
- [Health Coach Interventions](#)
- [Obesity early diagnosis chart for adults](#)
- [Waist circumference measurement guideline](#)
- [Healthy Food Guide](#) for health practitioners
- [Healthy Physical Activity Guide](#) for health practitioners

For patients

- [Tips to maintain a healthy weight](#)
- [Calorie counting guideline for weight loss](#)
- [Table for counting calories](#)
- [Healthy Plate Guide](#)
- [Healthy Nutrition Guide](#)
- [Video on obesity and nutrition from King Fahad Medical City](#)
- Ministry of Health information on:
 - [Obesity](#)
 - [Losing and gaining weight](#)
 - [Balanced sleep](#)
 - [Healthy eating habits](#)
 - [Healthy physical activity](#)



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