

Assembling the Care Team: ...but what is the evidence that it is effective?

Comparative Effectiveness of Weight Loss Interventions in Clinical Practice

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March 1, 2012



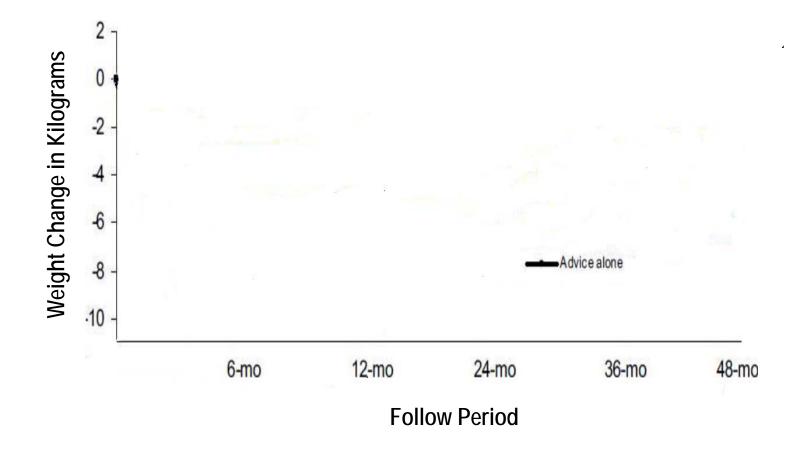


- Obesity is an extremely common problem with ~ 2/3 of adult Americans overweight or obese
- Obesity is associated with a multitude of adverse health outcomes
- Patients commonly ask physicians for advice on weight loss, yet evidence is sparse about what will achieve sustained weight loss in the setting of routine clinical practice



Meta Analysis of 80 Weight Loss Trials

Average Weight Loss of Individuals Completing a Minimum 1-Year Intervention



Adapted from Franz et al., Weight-loss outcomes: a systematic review and meta-analysis of weight-loss clinical trials with a minimum 1-year follow-up; J Am Diet Assoc. 2007 Oct;107(10):1755-67.

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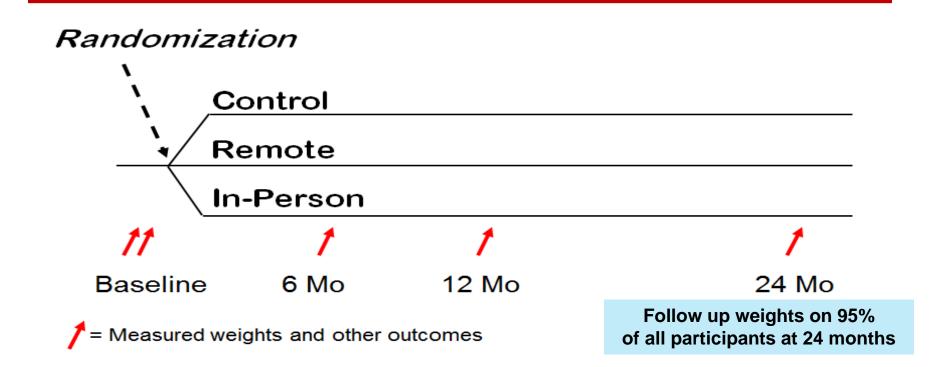
POWER: <u>Practice Based</u> <u>Opportunities for <u>We</u>ight <u>R</u>eduction</u>

Comparative Effectiveness of Weight Loss Interventions in Clinical Practice

- NHLBI funded effectiveness trials of weight loss interventions
 - Each study was conducted as an independent trial at a separate institution
 - Aspects of the trials were coordinated and standardized to improve comparability.
- POWER Hopkins and POWER-UP (University of Pennsylvania)
 - Results recently published in the New England Journal of Medicine*.

* Appel, LJ., et al, NEJM. Nov 23, 2011; Wadden, TA., et al, NEJM Nov 23, 2011









POWER Hopkins

Patients referred by PCP and randomized

	Control	Remote	In-Person
Mode of counseling	At PCP office	Telephone only	Group meetings Individual meetings Telephone
Coach	PCP	Healthways	Hopkins
Website/Internet	Static web site with weight loss information	Healthways Web site •Educational modules •Self monitoring tools •Tailored emails	
Physician Roles	Primary coach	Supportive Review weight progress reports	



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Intervention Goals and Behaviors

- Weight loss goal
 - 5% weight loss

Behaviors

- Reduce caloric intake
- Consume healthy dietary pattern, DASH diet
- Exercise > 180 min/week
- Self-monitor weight, calorie intake and exercise
- Log-in study website at least weekly





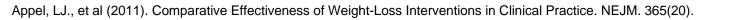


- Obese individuals with hypertension, hypercholesterolemia, or diabetes
- Major Inclusion Criteria
 - Internet access at least 4 days per week
 - Ability to use internet and email
 - Patient at one of six primary care practices

Goal was to minimize barriers and exclusion criteria to increase generalizability

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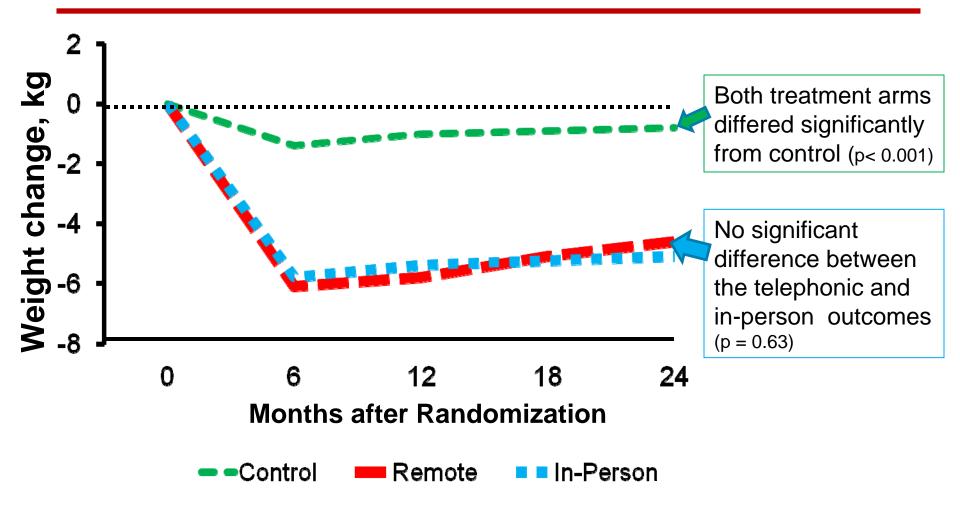
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Study Population Characteristics

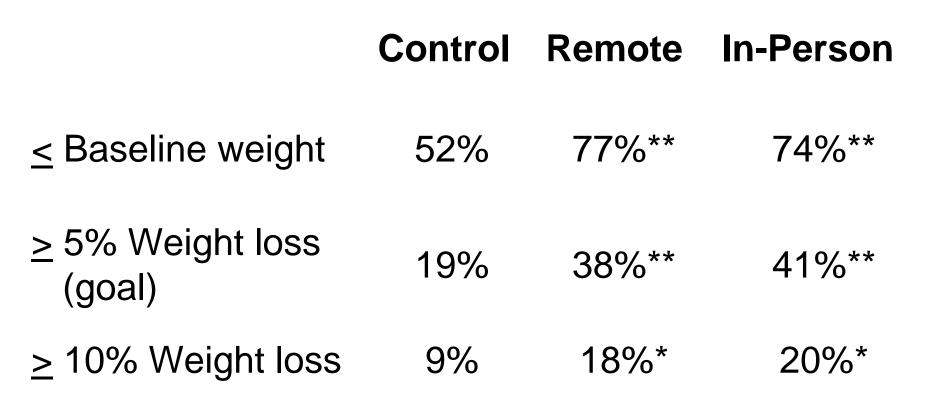
Age	54 yrs	Hypertension	76%
Women	64%		
White	56%	Hypercholesterolemia	68%
Black	41%	Diabetes	23%
Weight	103 kg		
BMI	37 kg/m²	Metabolic Syndrome	33%







Extent of Weight Loss Results at 24 Months Percent of Participants at Various Weight Thresholds



*P <0.05 (vs control), **P <0.001 (vs control)

Appel, LJ., et al (2011). Comparative Effectiveness of Weight-Loss Interventions in Clinical Practice. NEJM. 365(20).



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- Two behavioral interventions achieved and sustained clinically significant weight loss over 24 months in obese medical patients
- The *Remote* and *In-Person* interventions were similarly effective

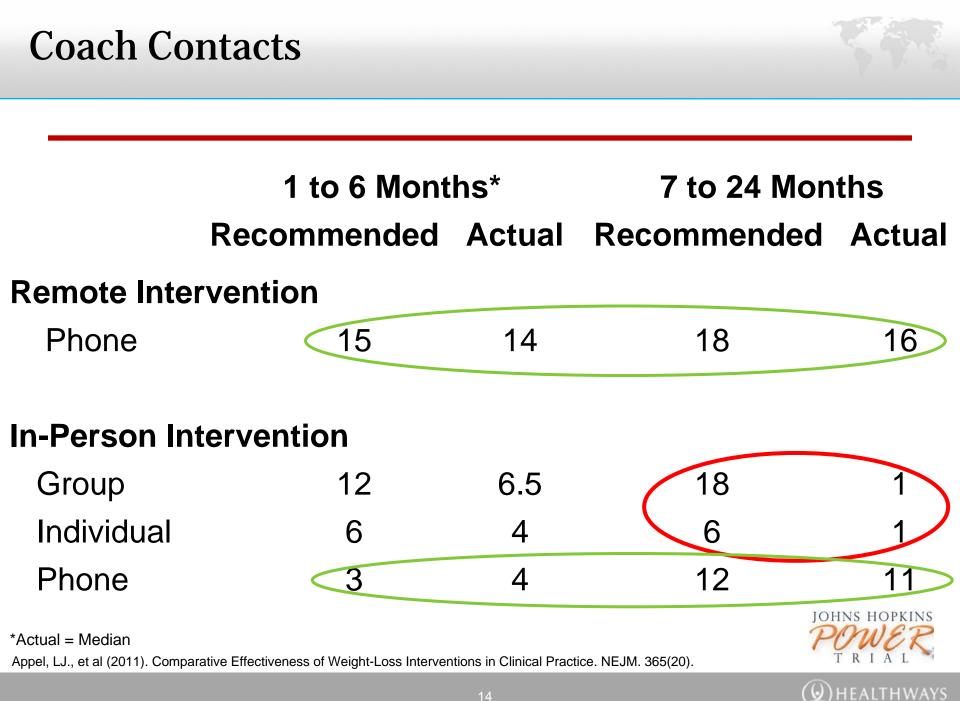


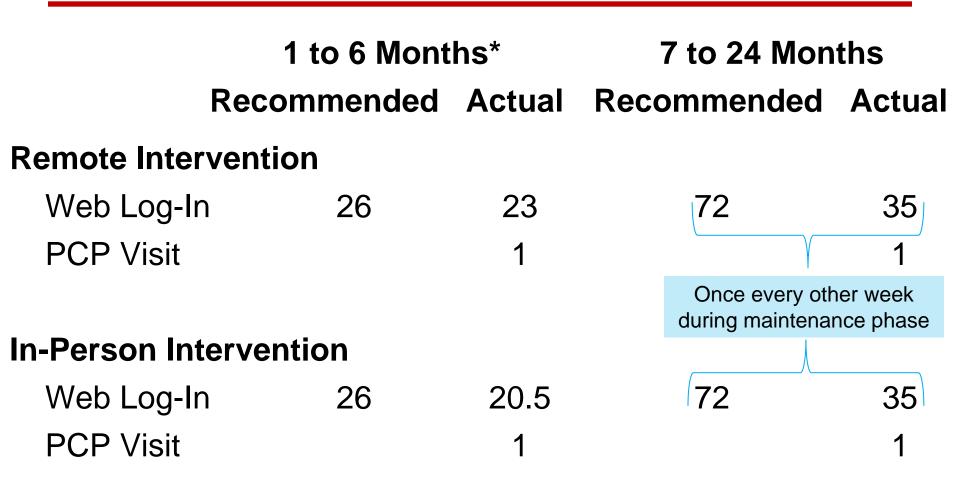


Diabetes Prevention Program (DPP)

- Lifestyle changes demonstrated similar 2 year weight loss as observed in POWER - Hopkins.
- Lifestyle intervention reduced the development of diabetes by 58% in at-risk individuals
- Lifestyle intervention was
 - beneficial regardless of ethnicity, age, BMI, or sex
 - effective in all age groups, including those > 60 years of age







*Actual = Median

Appel, LJ., et al (2011). Comparative Effectiveness of Weight-Loss Interventions in Clinical Practice. NEJM. 365(20).

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How would focused weight loss

counseling by the patient's PCP

compare?



POWER-UP – University of Pennsylvania

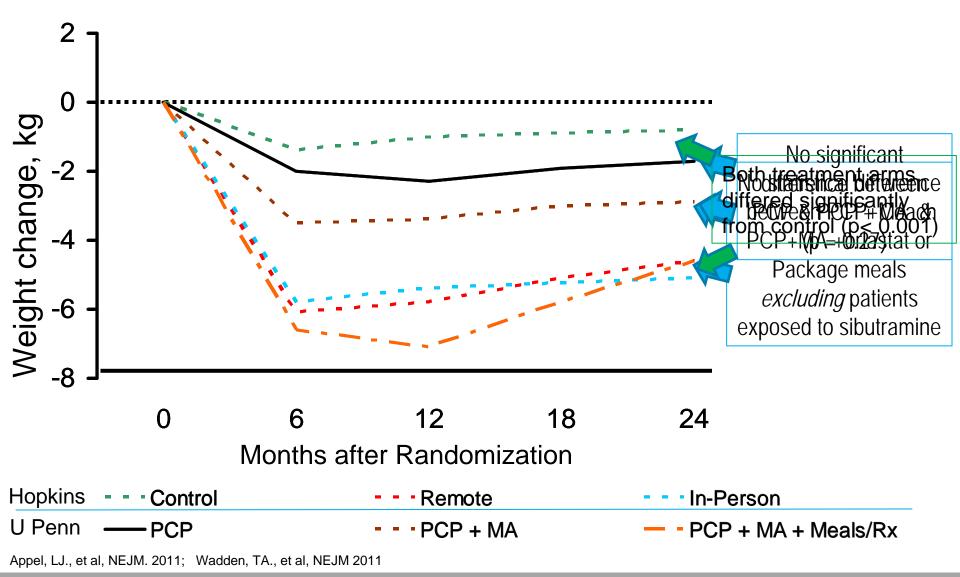
A Two-Year Randomized Trial of Obesity Treatment in Primary Care Practice

- **PCP Instructed** (Usual Care):
 - Quarterly PCP visits that included education about weight management;
- In-Office Coach (Brief Lifestyle Counseling):
 - PCP Instructed as above
 - ...plus brief monthly sessions with in-office lifestyle coaches who instructed participants about behavioral weight control;
- Coach + Packaged Meals or Medications (Enhanced Lifestyle Counseling):
 - In-Office Coaching as above
 - ...plus meal replacements or weight-loss medication (orlistat or sibutramine), chosen by the participants in consultation with the PCPs and provided at no cost to participants,



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Comparing the Telephonic to In-Person and PCP Hopkins Clinic - Healthways - PCP Instructed - PCP + Medical Assistant



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• The *Remote* intervention that consists of:

- phone counseling
- interactive website
- physician support

has the potential for widespread implementation and should be applicable to management of other chronic conditions

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For more information visit **POWER Trials Collaborative Research Group** website at <u>www.powertrials.org</u>

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