

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

Development of a Multidisciplinary Clinic for the Treatment of Obesity in a Canadian University Family Medicine Group (U-FMG)

Priority 1 (Research Category)

Obesity, exercise and nutrition

Presenters

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Abstract

Context: In 2018, 63.1% of Canadians were at greater risk of chronic diseases due to their BMI, including type 2 diabetes, atherosclerosis, and hypertension. The prevalence of obesity (BMI > 30) among adults was 26.8%, and the prevalence of overweight adults (BMI > 25) was 36.3%. Pathways offered by Quebec's public system are heterogeneous, often providing limited services, especially in a preventive setting.

Objective : To implement and evaluate a novel multidisciplinary trajectory aimed at improving the treatment of obesity thus preventing multiple health-related complications.

Population Studied : Patients with obesity enrolled in the Méta-Santé clinic.

Setting : The North of Lanaudière University Family Medicine Group (U-FMG)

Intervention: Upon referral from their family doctor, patients attend a group course on nutrition and metabolic health. They complete a commitment form and questionnaire before meeting with a nurse practitioner, clinical nurse, nutritionist, and doctor. Follow-up frequency, ranging from weekly to monthly for up to 12 months, is tailored to individual needs. Patients may also be referred to social workers, psychologists, physiotherapists, kinesiologists, and pharmacists based on individual needs.

Study Design and analysis: The clinic was developed with the collaboration of patient partners and clinicians, using a patient-centered and evidence-based approach. Quantitative analysis was conducted using the notes from healthcare professionals for each visit at the Méta-Santé clinic.

Outcome Measures: Data includes the number of patients, duration of participation, number of visits, distribution of patients per professional, and BMI at entry.

Results: The clinic has 41 current patients, and 59 have completed their participation. Average participation duration is 235 days, with a mean BMI of 41 at entry. Of 158 participants, 98% met with the nutritionist, 93% with the clinical nurse, 63% with the nurse practitioner, 25% with the doctor or resident, and 6% with the social worker.

Conclusion: Implementing a multidisciplinary pathway within Family Medicine Groups in Quebec is feasible for improving obesity treatment. The next step is to expand this trajectory to other family medicine practices across Quebec, facilitating program scaling. Future evaluations will include bioelectrical impedance analysis (BIA) to monitor changes in body composition and a longitudinal survey to assess the maintenance of healthy lifestyle habits.

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