

Queensland
Clinical Senate

Connecting clinicians to improve care

Every K over is not okay – putting the brakes on obesity

General practice perspective

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What is the general practice perspective?

Lifestyle risk factors are common among patients attending general practice.

Of adult patients attending general practice encounters in 2013–14:

- 62.7% were overweight (34.9%) or obese (27.8%)
- 23% drank 'at risk' levels of alcohol
- 13.5% were daily smokers.

Reference: Britt H, Miller GC, Henderson J, et al. General practice activity in Australia 2013-14.

General practice provides person centred, continuing, comprehensive and coordinated whole person health care to individuals and families in their communities.

Reference: RACGP Definition of General Practice



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More than 133 million general practice consultations take place annually in Australia

85% of the Australian population consult a GP at least once a year

Reference: Britt H, Miller GC, Henderson J, et al. General practice activity in Australia 2013-14.



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What are the opportunities?

The RACGP recommends that BP should be measured in all adults from age 18 years at least every 2 years.

The RACGP recommends that Body mass index (BMI) and waist circumference should be measured and noted in a patient's medical record every two years.

Reference: RACGP Red Book. Guidelines for preventive activities in general practice. 8th edition 2012

What can GPs offer?

- Professional, independent advice
- Continuity of care
- Regular measurement and recording over time
- Knows patients well
- Provide education
- Personalize intervention
- Range of treatment options
- Coordinate multidisciplinary approach
- Long term follow up

What are the challenges?

GPs do not meet the clinical practice guidelines.

270,426 patients' records reviewed over a 2 year period:

- 4.3% had their waist measurement recorded
- 25.8% had weight recorded
- 22.2% had their BMI calculated.

Reference: Mitchell, C. Obesity Measures Missing. MJA Insight 13 April 2015

What are the barriers?

- Time constraints
- Lack of infrastructure
- Episodic care
- Lack of prioritisation
- Lack of receptiveness
- Impact on relationship with patient
- GP inertia
- Unrealistic expectations

What are some potential strategies from a GP perspective?

- Weight as a 'vital' sign
- Start young
- Reasonable expectations
- Patient engagement “Know your BMI”
- Educating and supporting GPs



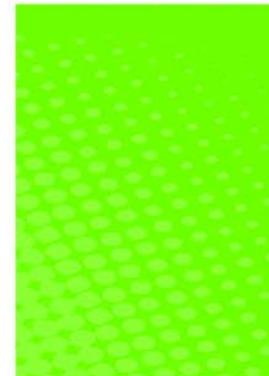
*Smoking, nutrition, alcohol,
physical activity (SNAP)*

A population health guide to behavioural risk factors in general practice

2nd edition



**SUMMARY GUIDE FOR
THE MANAGEMENT
OF OVERWEIGHT AND
OBESITY IN PRIMARY
CARE**



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