# Setting up an obesity clinic – The SMART approach

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## Abstract

Management of obesity is often complex and requires a multidisciplinary team approach. There is an emerging need for establishing more dedicated bariatric clinics in the south Asian region. These clinics help to provide an individualized patient centric management through different specialists involved in obesity therapy under one roof. Furthermore, these clinics help to facilitate obesity management like any other chronic disease which requires long term follow-up. This article details the essential components required in setting up an obesity clinic in the south Asian region. The SMART approach (S-Setting; M-Management team; A-Algorithmic approach; R-Research and referral; T-Technology) is an easy to grasp summary of the essential components required for setting a bariatric clinic.

**Keywords:** Bariatric clinic, Obesity clinic, Multidisciplinary approach, Obesity management, Barocrinology

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## Introduction

Obesity has reached pandemic proportions globally and the number of patients visiting health care professionals specifically seeking obesity management has increased exponentially in the last decade.[1] However, there are few centres that offer dedicated management of Obesity through a structured allopathic programme. Moreover, the treatment protocol for obesity like many other chronic non-communicable diseases often involves a long term follow up. In this brief article we describe the learnings from some of the bariatric clinics that have been successfully running over the past decade in the South Asian region.

There are several essential components for the successful operation of an obesity clinic. Though the multi-disciplinary team involved in patient care is the essential component. The structural facilities, the work flow, the protocol followed, use of technology and an appropriate referral plan is also required. These are briefly described in the following SMART framework (Figure-1).

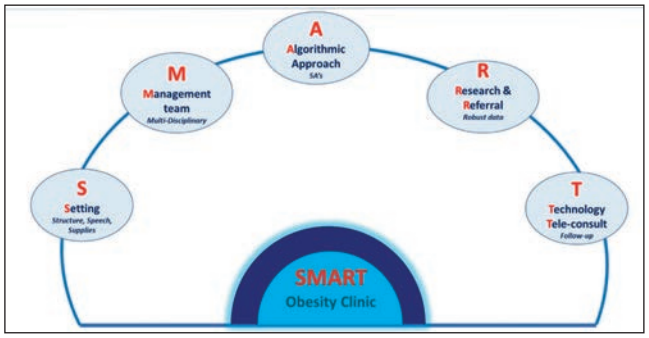


**Figure-1:** The Essential components of an Obesity Clinic.

### The SMART Approach

#### The Setting – Structure, Supplies and Speech

Management of patients with severe obesity requires a clinic infrastructure which is sturdy, convenient and comfortable. These include a weighing scale which can accommodate large body weights, a stadiometer, big blood pressure measuring cuff, a non-stretchable measuring tape and if possible, a body composition machine/other methods to assess body fat.[2] In addition to the infrastructure, it is also important to reduce stigma associated with patients with obesity. This can be done by using scientifically correct language and avoid using derogatory terms like fatness, large size, heavy weight. The aim should not be to demean the patient but empathize with them, to engage and encourage them in a way that they are energized to lose weight by the time they leave. In a recent study from an obesity centre in southern India it was found that a large majority of patients with obesity, have high stigma but also these patients tend to develop unhealthy lifestyle practices leading to obesity.[3] All clinic staff should be trained to manage obesity as a biological disease and not just as a result of poor lifestyle choices.

#### Management Team

The management team should comprise of a treating physician, nutritionist, physiotherapist/exercise specialist, psychiatrist, bariatric surgeon and a gastroenterologist.[4-7] There is also an upcoming role of a bariatric nurse. These roles are summarized briefly in the Table.

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**Table:** The Multidisciplinary management team for an Obesity Clinic.

| Managing Team | Role played |
|---|---|
| Treating Physician / Endocrinologist | The nodal person regulating the flow of the clinic patients. Addressing the cause of obesity, comorbidity assessment and management. Medical management of Obesity. |
| Nutritionist | To understand the current dietary practices of the patient, try and infuse weight management principles in feeding practices of the family, long term follow-up to prevent weight regain. |
| Physiotherapy | Gradually move the patient on the hierarchy of exercise. Encourage indigenous was of physical activity which may have better acceptability and compliance. |
| Psychiatrist | To assess and address the psychological aspects of obesity management. |
| Gastroenterologist | To evaluate & manage fatty liver disease. To counsel patients eligible for intragastric procedures and plan a patient centric weight loss intervention. |
| Bariatric Surgeon | Currently the most effective management of severe obesity is in the hands of a bariatric surgeon. |
| Bariatric Nurse | In addition to clinical management including teaching use of medical devices, injections and perioperative care for patients undergoing bariatric procedures, can also help in programme administration and outreach. |

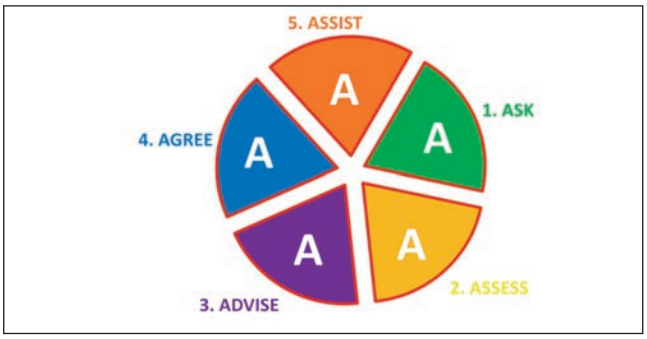


**Figure-2:** The 5A framework for the management of Obesity.

### Algorithmic Approach

It is essential to have a protocol set for the clinical management of patients visiting the obesity clinic. This will ensure a uniform management plan for all patients who visit the clinic. Several guidelines have been recently published to help decide on the management plan.[8] The 5A (Figure-2) approach as suggested by the Canadian obesity society and endorsed by the recent endocrine society of India clinical management guidelines for obesity.[9]

### Research and Referral

Robust data management system helps to facilitate research papers form routinely collected data from the clinic. These could not only provide relevant data for the scientific community but these research insights may also help to improve the existing protocols and systems in the clinic.[10] Referral may also be required for certain facilities that are not present in the current set up like a sleep laboratory, facilities for genetic testing or those requiring other specialties.

### Technology and Teleconsultation

It is imperative in today's world to use technology for easy handling and systematic flow of patients in any multidisciplinary clinic. This could include electronic medical record systems, teleconsultation facility but technology could also be used in therapeutics like prescribing app based dietary and physical activity management protocols. This has been especially relevant during the COVID-19 pandemic.[11]

## Summary

This SMART framework for establishing an obesity clinic is a simple, yet a comprehensive framework that provides the essential components of a multi-disciplinary obesity clinic in the south Asian setting. With the rapidly increasing prevalence of obesity more such clinics are definitely the need of the hour. Though the multi-disciplinary team involved in patient care is the most essential component of the SMART framework, the other components like structural facilities, the work flow, the protocol followed, use of technology and an appropriate referral plan help to offers more comprehensive care for people living with obesity.

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