

Psychological Contributions to the Management of Obesity

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3 Things



This presentation will present these three things you can do to assist patients in addressing their obesity.

1. Analyze with the patient the factors that are contributing to obesity.
2. Do a brief motivational interview to induce change
3. Set up a schedule of reinforcements to support both immediate and long term change



Motivate

How important is it?
What makes it that important?

How able are you to do it?
What makes you that able?



Reward

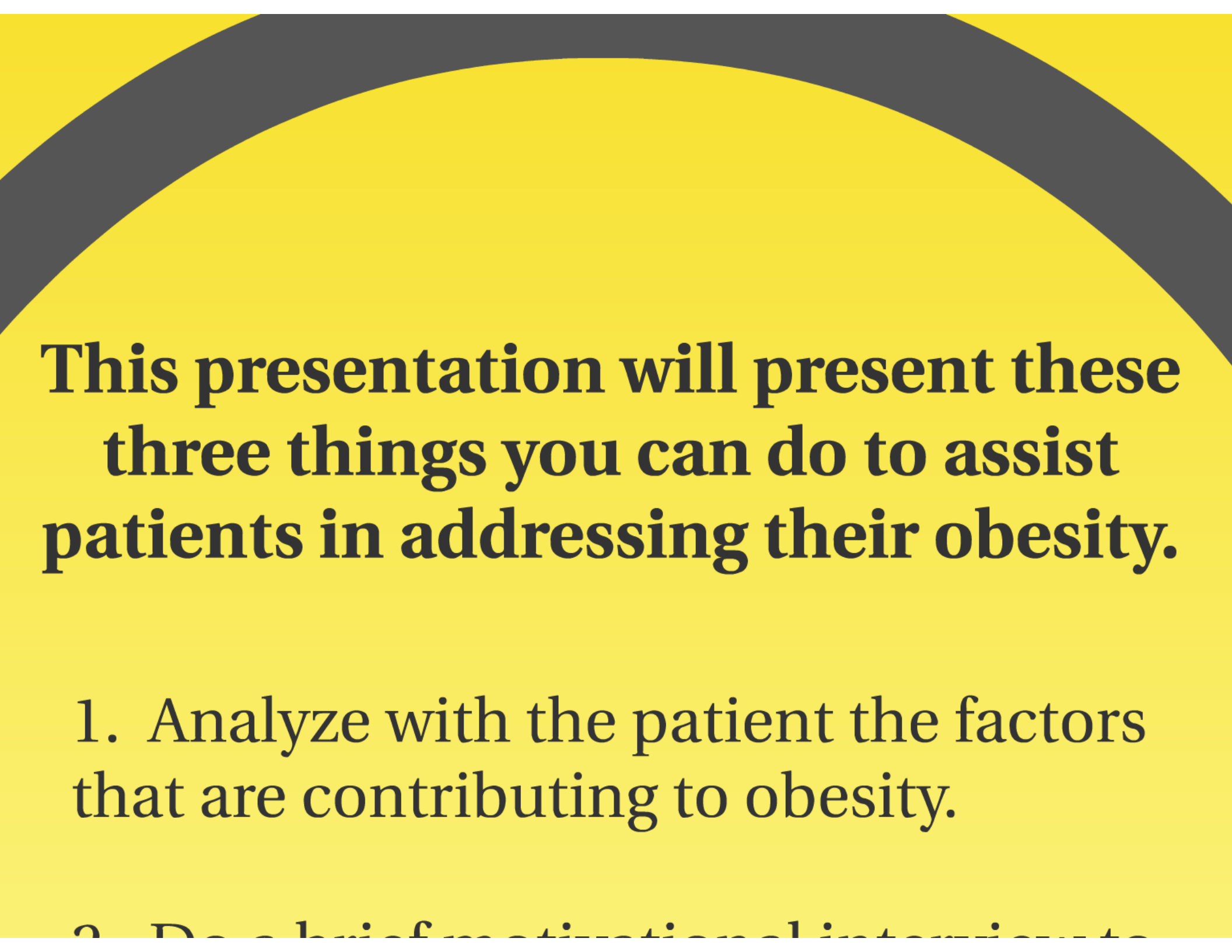
"Great! Excellent! Good!"

"I'll text you again soon!"



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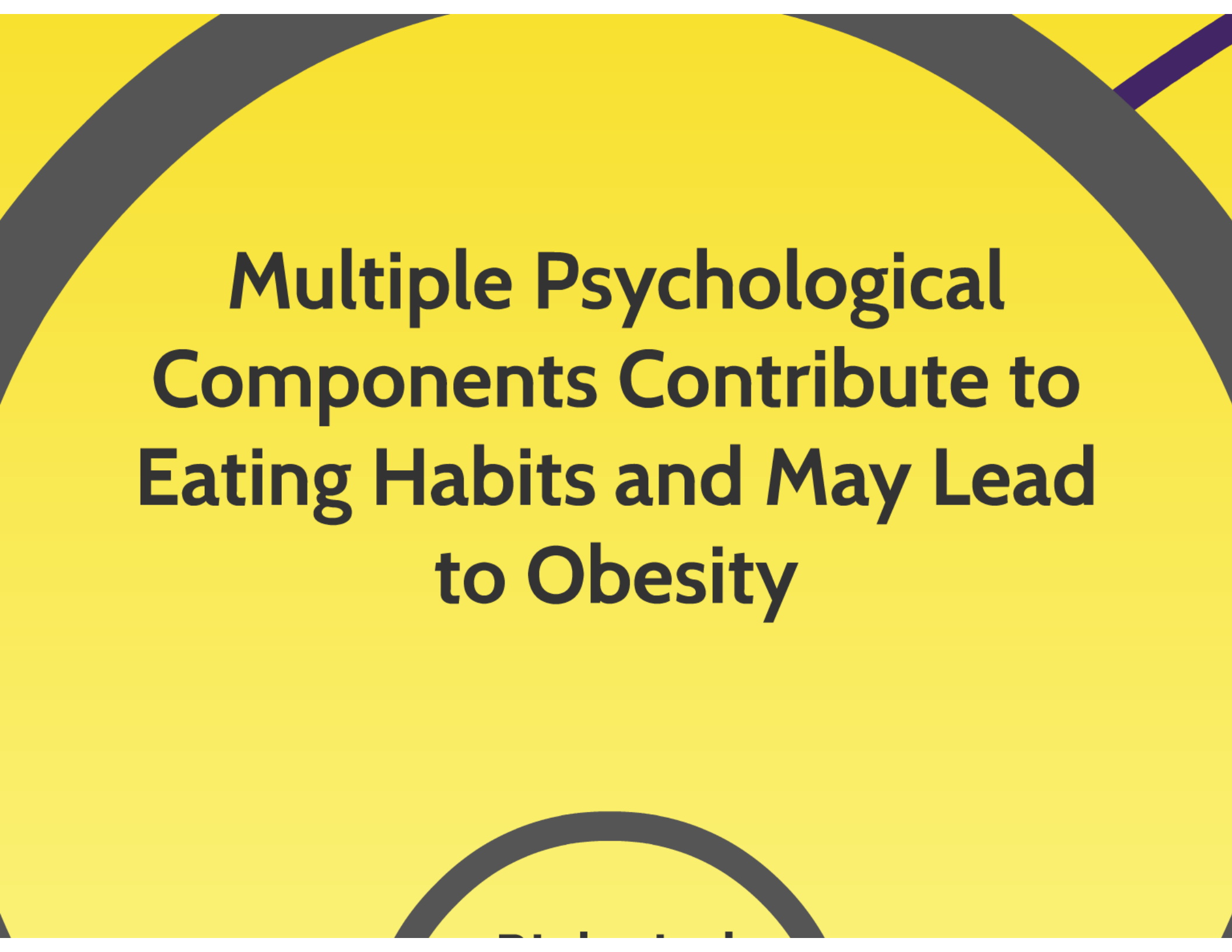
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**Multiple Psychological
Components Contribute to
Eating Habits and May Lead
to Obesity**



**Biological
Psychological
Social
Cultural**



Primary Functions or Primary Gain

- Reduction of “hunger drive” – hypothalamic function
- Reward – activation of “reward circuitry” – dopaminergic system
- Anxiety reduction – calming – parasympathetic arousal

Secondary Functions or Secondary Gain

- Social Bonding – feeding, being fed, eating with
- Identity Formation
- Dietary habits form part of cultural identity
- Body habitus triggers social and interpersonal consequences
- Personal dietary habits form part of individual persona

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Psychological Principles Relevant to Obesity

1

Any change in lifestyle will have intended and unintended consequences

- e.g. – a change in eating habits may alienate or integrate the individual with others in social network
- e.g. – a change in body habitus may change the social status of the individual to a more or less desirable status

2

There are multiple factors which maintain an individual's current lifestyle and body habitus

- people and system(s) lose, and system(s) gain when there is a change in an individual's lifestyle
- the factors that maintain the lifestyle are stronger than the forces, thus far, that have induced change – otherwise the individual's lifestyle would already have changed

to Obesity

1

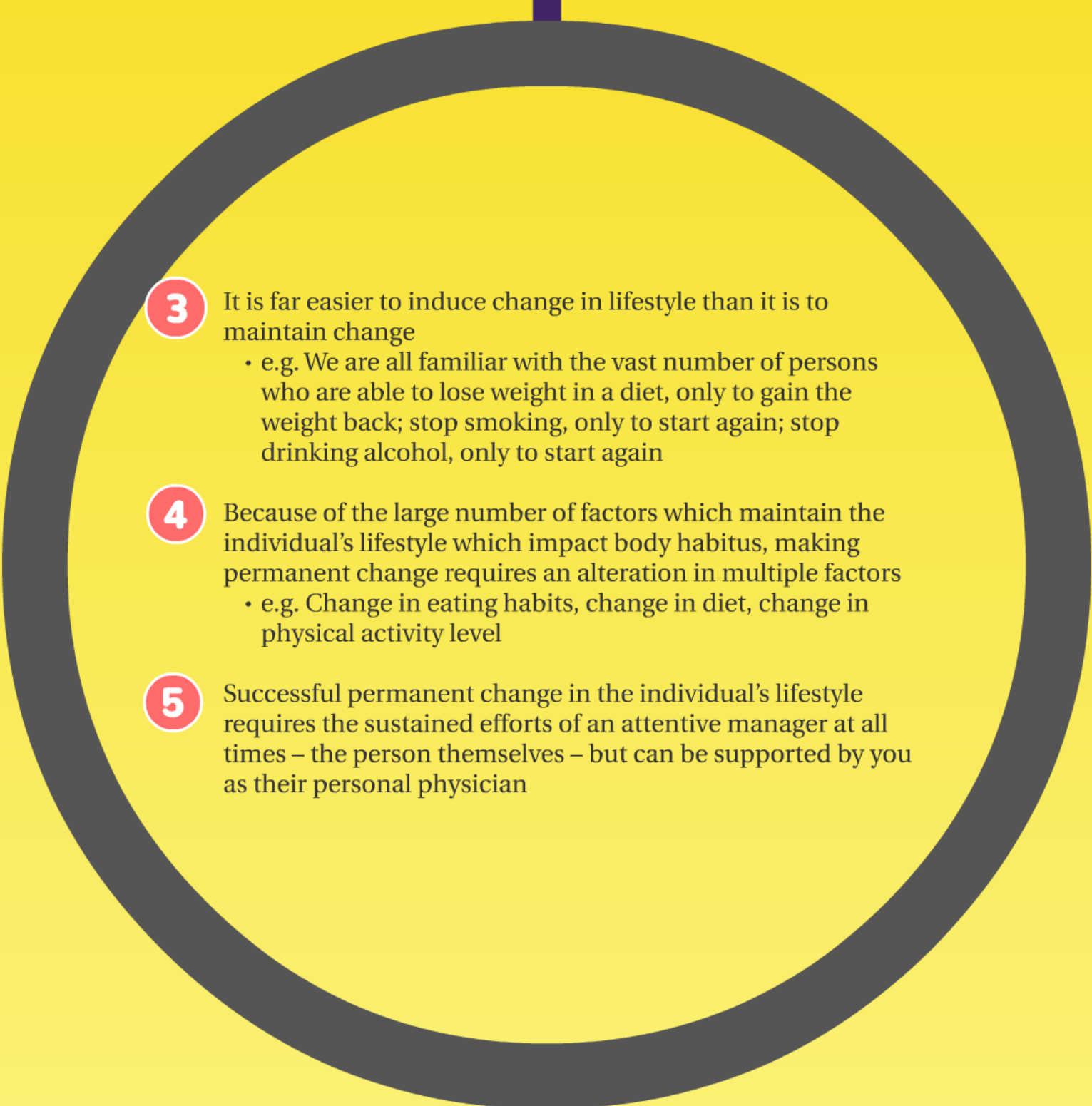
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3

It is far easier to induce change in lifestyle than it is to maintain change

- e.g. We are all familiar with the vast number of persons who are able to lose weight in a diet, only to gain the weight back; stop smoking, only to start again; stop drinking alcohol, only to start again

4

Because of the large number of factors which maintain the individual's lifestyle which impact body habitus, making permanent change requires an alteration in multiple factors

- e.g. Change in eating habits, change in diet, change in physical activity level

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Successful permanent change in the individual's lifestyle requires the sustained efforts of an attentive manager at all times – the person themselves – but can be supported by you as their personal physician

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6 As the person's physician, your attention is the most potent external reinforcer of the patient's health related behaviors

- Showing approval of the patient's thoughts, feelings and actions is your most influential tool

7 Positive reinforcement works better than punishment or negative reinforcement (negative reinforcement and punishment are two different things).

- Morbidly obese people already know they are obese and have been punished for it by family, friends, strangers, themselves and their health care providers

Gallup Poll: June 11, 2014 – Half of people who are obese by medical standards don't know it!

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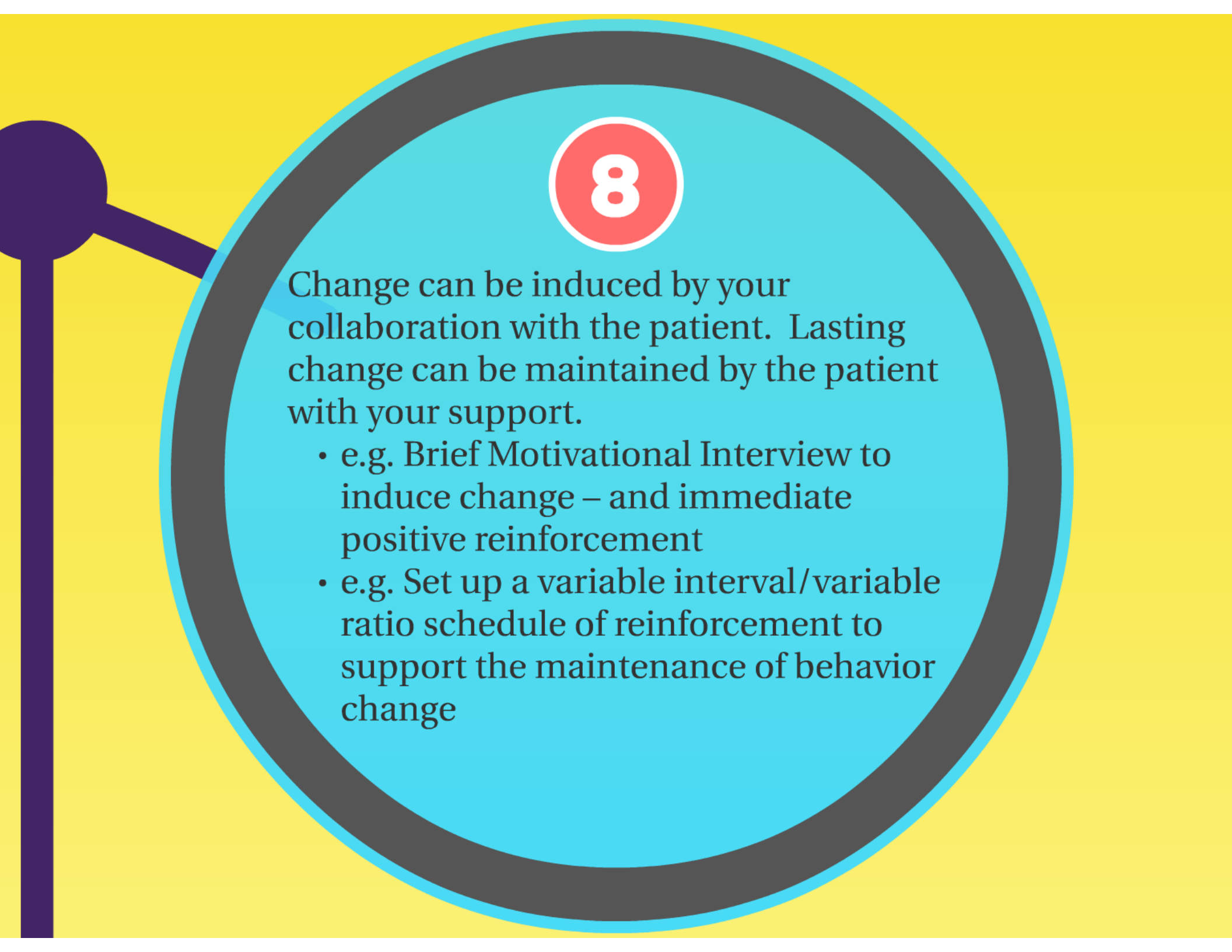
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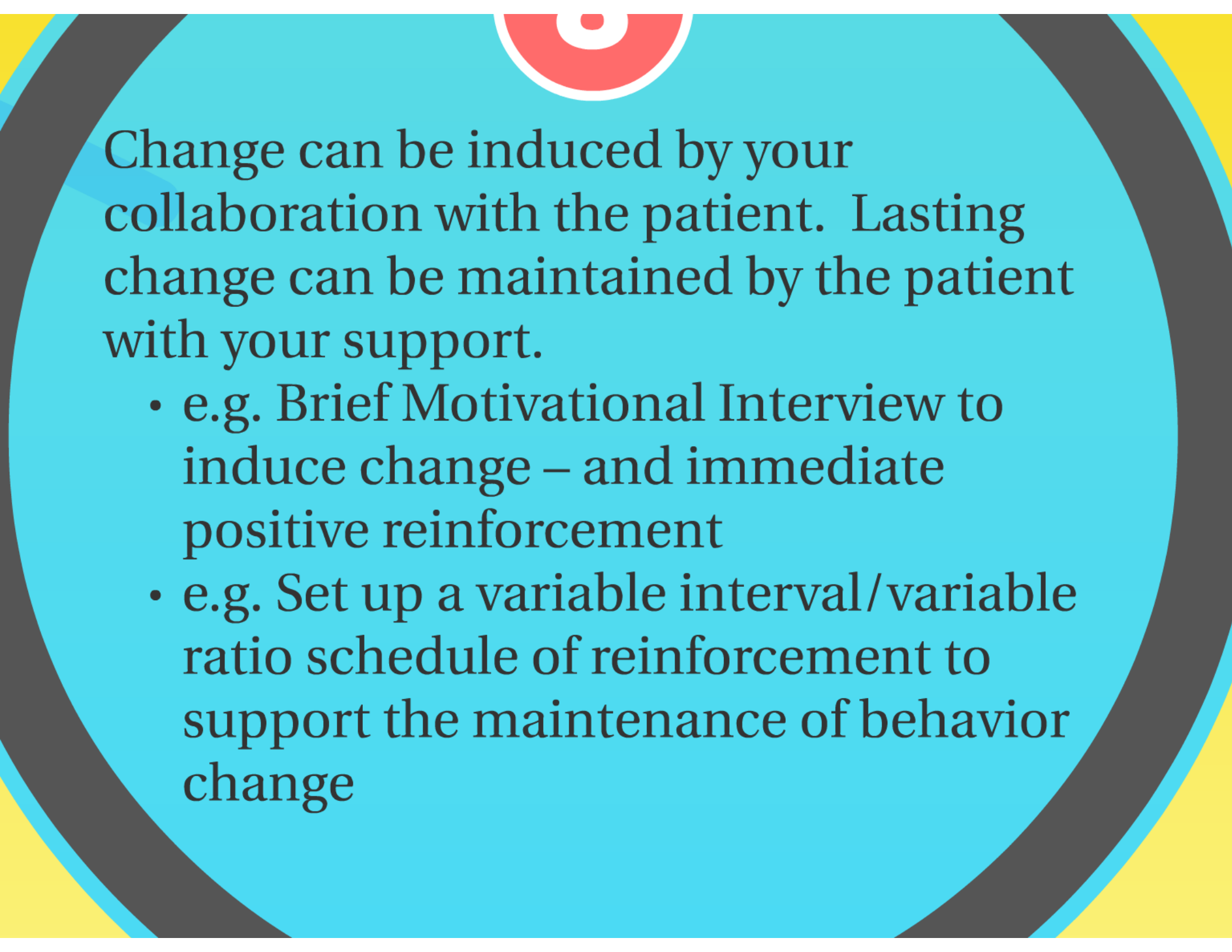
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Change can be induced by your collaboration with the patient. Lasting change can be maintained by the patient with your support.

- e.g. Brief Motivational Interview to induce change – and immediate positive reinforcement
- e.g. Set up a variable interval/variable ratio schedule of reinforcement to support the maintenance of behavior change



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Analyze

Analyze with the patient the factors that are contributing to obesity

- Eating when “mouth hungry” rather than “stomach hungry.”
- Stress and anxiety (needs stress reduction techniques, treatment for anxiety disorder, counseling addressing psychological disorders, participation in OA)

Personal dietary habits that are:

- Poorly informed (needs dietary education)
- Supported by cultural practice or economic status (needs ways to modify dietary options through dietary education and social support)
- Exacerbation by sedentary lifestyle (needs support to increase physical activity)

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Motivate

Guidelines for Using Your Most Potent Tools to Induce Change in Diet and Exercise

Do a brief motivational interview to induce change

Four Question Motivation Interview for Change in Diet

- How important is it for you to change your eating habits?
- Why is it that important? (Not “Why isn’t it more important?”)
- How able are you to change your eating habits?
- What makes you that able? (Not “Why aren’t you able?”)

You are getting the person to develop and rehearse their own reasons for why it is important to change and how they can make it happen.

Use the same “Four Question Technique” for a motivational interview to support increasing physical activity



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Reinforce

Guidelines for Using Your Most Potent Tools to Induce Change in Diet and Exercise

Set up a schedule of reinforcements for both immediate and long term change

Immediate Change Reinforcement:

- Ask person for a specific doable step they might take the next day to change dietary habits and increase physical activity
- Draw ideas from what they review in the motivational interview
- Provide a menu of possible options (resource sheet)
- Call or text the next evening and ask “what step have you been able to take today to change your diet and increase your physical activity?” and then, when any step is reported, text or say “great job”
- Call each evening for at least a week and repeat reinforcement

Remember that walking a few steps and cutting out sweetened soda are “steps” – reinforce them

A large, bright yellow shape resembling a sun or a spotlight beam, with a dark grey background at the top and bottom. The shape is centered and occupies most of the frame.

Reinforce

r Using Your *Most Potent Tool*

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Long-term Change Reinforcement

Switch from calling or texting daily to a weekly contact gradually over time

Begin to vary when during the subsequent weeks to contact and reinforce

A variable interval/variable ratio schedule of reinforcement will maintain behavior change longest

Schedule follow-up medical encounters to monitor BMI and related parameters at regular intervals for in-person reinforcement and additional motivational interviewing



Thank you!
Questions?