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# Adult Weight Management

## AWM: Guideline Overview (2022)

### Guideline Overview

#### Guideline Title

Adult Weight Management Evidence-Based Nutrition Practice Guideline (2022)

#### Guideline Narrative Overview

#### Introduction

Overweight and obesity affect most adults living in the United States (U.S.).<sup>1</sup> Excess adiposity, typically assessed with body mass index (BMI),<sup>2</sup> is causally linked to the development of many adverse health outcomes, including but not limited to mortality, risk of cardiovascular disease (CVD), pre-diabetes, and type 2 diabetes mellitus (T2DM).<sup>3-7</sup> There are large healthcare and societal costs to the high prevalence of overweight and obesity.<sup>8</sup> Weight management interventions are prospectively associated with beneficial health outcomes in adults with obesity, including improved quality of life (QoL) and all-cause mortality.<sup>9, 10</sup> Research has demonstrated that weight loss interventions can decrease mortality risk for  $\geq 4$  years.<sup>10</sup> The factors contributing to widespread prevalence of overweight and obesity are complex. Lifestyle behaviors and their consequent outcomes are affected by many factors outside of individual control, including but not limited to genetics, social determinants of health (SDoH) and health inequities, food and physical activity environment, food access, and weight bias and stigma.<sup>7, 11</sup> Thus, addressing high rates of overweight and obesity requires creating compassionate solutions that can be tailored to a wide variety of adults who each face unique motivations for and barriers to reaching health goals.

Registered dietitian/nutritionists (RDNs) or international equivalents (collectively referred to as 'dietitians' in the text of this guideline) collaborate with each patient and client (referred to as 'client' in this guideline) and other healthcare professionals to meet client-centered goals. This is achieved by individualizing interventions based on shared decision-making informed by the best available evidence, and translated through a lens of clinical expertise and client circumstances and preferences.<sup>12, 13</sup> Dietitians provide medical nutrition therapy (MNT) interventions under the framework of the nutrition care process (NCP), which ensures interventions are tailored to the needs of each individual client based on nutrition assessment.<sup>13, 14</sup> The NCP can elucidate client goals and barriers and facilitators to reaching those goals. Shared decision-making between the client and the dietitian helps to prioritize feasible and realistic actions that each client can incorporate to improve health and well-being. Most evidence available on the efficacy of interventions provided by dietitians for adults with overweight and obesity has focused on improving intake of nutrient-dense foods and reducing caloric intake, often in combination with increased physical activity, to facilitate weight loss and associated outcomes.<sup>15</sup> Translation of this evidence into effective practice requires that dietitians consider clients and circumstances beyond those described in research studies to provide compassionate, equitable care that is applicable to a diverse clientele with a wide range of goals and values.

In 2014, the Academy of Nutrition and Dietetics (Academy) authored an evidence-based practice guideline (EBPG) for adult weight management (AWM) on the Evidence Analysis Library website.<sup>16</sup> The 2014 AWM EBPG was based on systematic reviews conducted from 2008 to 2013.<sup>16</sup> Since that time, considerable research has been conducted in the field of adult overweight and obesity management. Additionally, circumstances and issues confronting dietitians have evolved, including, but not limited to, increased recognition of the role of weight bias in healthcare, the need for individualization of interventions to deliver effective care, and improved technology to deliver care via telehealth. Thus, updated guidance for MNT interventions provided by dietitians for adults with overweight and obesity is needed.

The objective of this EBPG is to provide evidence-based recommendations for dietitians providing behavior change-based nutrition interventions for adults ( $\geq 18$  years of age) with overweight and obesity to improve cardiometabolic outcomes, QoL, and weight outcomes, when appropriate for and desired by the client. While this EBPG is aimed at dietitians, other practitioners working with adults with overweight or obesity, such as primary care physicians, endocrinologists, cardiologists, bariatricians, nurses, nurse practitioners, and psychologists may find recommendations and implementation considerations in this guideline useful to inform practice. Recommendations are meant to serve as a guide for practitioners but do not replace clinical judgements which are made within specific contexts. Recommendations are not meant to represent the exclusive course of action in the management of overweight, obesity, or cardiometabolic disease. Practitioners using these recommendations are responsible for evaluating the appropriateness of each recommendation for each of their clients.

#### Guideline Development

This EBPG is meant to inform clinical decisions for dietitians providing MNT interventions for adults ( $\geq 18$  years of age) managing overweight or obesity (body mass index (BMI)  $\geq 25$  kg/m<sup>2</sup> or as defined for specific adult populations), including those with cardiometabolic disease such as T2DM or CVD. This EBPG is not intended for clients with eating disorders or diagnoses such as cancer, chronic kidney disease and other conditions for which weight loss may be contraindicated.

This guideline is based on a systematic review conducted by the project team, consisting of RDNs who are practitioners and/or researchers, systematic review and guideline methodologists and evidence analysts. Recommendations were written based on an evidence-to-decision framework that incorporates evidence as well as clinical experience and client values. When there was no evidence available for specific research questions, recommendations were based on expert experience and other supporting evidence.

Click to view the specific [methods](#) for the development of this guideline,

Topics addressed in this Evidence-based Nutrition Practice Guideline include:

- MNT Approach for Adults with Overweight or Obesity
  - Utilize the Nutrition Care Process
  - Provide Medical Nutrition Therapy
  - Adapt Goals and Interventions
  - Minimize Weight Bias and Stigma
- Coordination of Care
  - Collaborate with Interprofessional Healthcare Team
  - Coordinate Care in a Variety of Settings
- MNT Amount
  - Number and Frequency of Interactive Contacts
  - Intervention Duration
  - Follow-Up Contacts
- Delivery of MNT
  - Telehealth and In-Person Care
  - Group and Individual Contacts
- Payment for Services
- Dietary and Lifestyle Intervention Approaches
  - Dietary Patterns
  - Components of a Comprehensive Intervention
- Special Populations
  - Co-Morbidities
  - Pharmacotherapy and Metabolic and Bariatric Surgery
  - Members of Groups Disproportionately Affected by Overweight or Obesity and Under-Resourced Communities

The number of supporting documents for these topics is:

- Recommendations: 17
- Conclusion Statements: 81
- Evidence Summaries: 71
- Article Worksheets: 87

To learn about the Academy's systematic review methodology and guideline development process, visit the [Policy and Procedures](#) section of the Evidence Analysis Library (EAL).

## Contributors

Expand the section titled *Project Team and Disclosures* to see the list of individuals who developed this guideline.

## Revision

Academy guidelines are revisited every five years. An expert workgroup will be convened by the Workgroup Selection subcommittee of the Council of Research (COR) to determine the need for new and revised recommendations based on the available science. The process includes:

- Conduct a scoping review to identify new research published since the previous searches were completed. Updated inclusion/exclusion criteria and search terms may be warranted.
- Review to determine if the update will include modifications to recommendations and compare them to the earlier version of the guidelines, or development of new recommendations.

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## AWM: Scope of Guideline (2022)

### Guideline Scope Characteristics

#### Disease/Condition(s)

This EBPg is meant to inform clinical decisions for dietitians by providing MNT interventions for adults ( $\geq 18$  years of age) with overweight or obesity (body mass index (BMI)  $\geq 25$  kg/m<sup>2</sup> or as defined for specific adult populations), including those with cardiometabolic disease such as T2DM or CVD. This EBPg does not address overweight and obesity management for pediatric clients ( $< 18$  years of age). This EBPg is not intended for clients with eating disorders or diagnoses such as cancer, chronic kidney disease and other conditions for which weight loss may be contraindicated. This EBPg does not describe nutrition screening or assessment methods or monitoring and evaluation in depth, and more detailed recommendations for these stages of the Nutrition Care Process can be found in the Academy's 2014 AWM EBPg.<sup>1</sup> Comparisons of the topics addressed in 2014 and current EBPgs are described in the [Recommendation Comparison Table](#).

Though dietitians may help to address barriers based on Social Determinants of Health (SDoH), such as by providing resources for food assistance to address food insecurity, this EBPg specifically focuses on behavioral lifestyle interventions for individual clients. This EBPg does not address post-metabolic and bariatric surgery nutrition care in detail, but this topic has been examined in a prior Academy systematic review.<sup>2</sup> Recommendations related to weight loss and calorie reduction are intended for clients for whom weight loss is "appropriate for and desired by" the client based upon shared decision-making. In this context, the term "appropriate for" indicates that the client is overweight or obese and does not have a condition for which weight loss is contraindicated. In this EBPg, cardiometabolic outcomes refer to blood pressure (BP), fasting blood glucose (FBG) and waist circumference (WC). All recommendations should be interpreted through the lens of clinical judgement and client values and all recommendations should be individualized to each client's needs and preferences.<sup>3</sup>

The health questions this EBPg addresses are: In adults  $\geq 18$  years of age with overweight or obesity (BMI  $\geq 25$  kg/m<sup>2</sup> or as defined for specific adult populations), what is the effect of MNT interventions, including specific components of interventions, provided by dietitians on cardiometabolic outcomes, quality of life and body weight outcomes?

#### Guideline Category

#### Clinical Specialty

Nutrition

#### Intended Users

This guideline is primarily intended for RDNs working with individuals with CF and their families in the United States.

#### Guideline Objective(s)

#### Target Population

Adults ( $\geq 18$  years of age) with overweight or obesity (body mass index (BMI)  $\geq 25$  kg/m<sup>2</sup> or as defined for specific adult populations), including those with cardiometabolic disease such as type 2 diabetes or cardiovascular disease.

#### Target Population Description

Adults ( $\geq 18$  years of age) with overweight and obesity to improve cardiometabolic outcomes, quality of life, and weight outcomes, when appropriate for and desired by the client.

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# Adult Weight Management

## AWM: Statement of Intent (2022)

### Statement of Intent

Evidence-based nutrition practice guidelines are developed to help dietetic practitioners, healthcare teams and affected individuals make shared decisions about health care choices in specific clinical circumstances. If properly developed, communicated, and implemented, guidelines can improve care and health outcomes.

While recommendations represent statements of best practice based on the latest available evidence at the time of publishing, they are not intended to overrule professional judgment. Rather, they may be viewed as a relative constraint on individual clinician discretion in clinical circumstances. The independent skill and judgment of the health care provider must always dictate treatment decisions. These nutrition practice guidelines are provided with the express understanding that they do not establish or specify standards of care, whether legal, medical or other.

### The Role of Client Preference

This guideline recognizes the role of client preferences and values for possible outcomes of care when the appropriateness of a clinical intervention involves a substantial element of personal choice or values. Regarding types of evidence that are associated with particular outcomes, Shaughnessy and Slawson<sup>1-3</sup> describe two major classes. Patient-oriented evidence that matters (POEM) deals with outcomes of importance to patients, such as changes in morbidity, mortality or quality of life. Disease-oriented evidence (DOE) deals with surrogate endpoints, such as changes in laboratory values or other measures of response. Although the results of DOE sometimes parallel the results of POEM, they do not always correspond. When possible, the Academy recommends using POEM-type evidence rather than DOE. When DOE is the only guidance available, the guideline indicates that key clinical recommendations lack the support of outcomes evidence.

### References:

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## AWM: Guideline Identifying Information (2022)

### Identifying Information and Availability

Expand the Project Team and Disclosures tab on the project landing page for a listing of individuals who contributed to the development of this guideline and disclosures.

### Bibliographic Source

Academy of Nutrition and Dietetics. Academy of Nutrition and Adult Weight Management (2022) Evidence-Based Nutrition Practice Guideline, Chicago (IL).

### Adaption

This guideline was not adapted from another source. Development of this guideline was conducted in accordance with the Appraisal of Guidelines Research and Evaluation (AGREE II) critical appraisal instrument.

### Date Released

2022

### Guideline Developer

Academy of Nutrition and Dietetics

### Guideline Status

This is the third publication of the Adult Weight Management (2022) Evidence-Based Nutrition Practice Guideline

### Guideline Availability

The Adult Weight Management (2022) Evidence-Based Nutrition Practice Guideline in its entirety is available online on the Evidence Analysis Library website ([www.andeal.org](http://www.andeal.org)). It is a free resource for members of the Academy of Nutrition and Dietetics and subscribers. The Guideline Introduction and Executive Summary of Recommendations on the EAL is available to the general public. A manuscript is being submitted to the Journal of the Academy of Nutrition and Dietetics. Publication date to be determined.

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When modifying the guideline for local circumstances, significant departures from these comprehensive guidelines should be fully documented and the reasons for the differences explicitly detailed.

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