

# ACTION Switzerland: survey study assessing awareness, care and treatment in obesity management among people with obesity and healthcare professionals in Switzerland

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# Presenter disclosure

**Philipp A. Gerber** discloses:

- Consultancy fees from Amgen, Boehringer Ingelheim, Lilly, Novo Nordisk and Sanofi

# Introduction

- Obesity is a chronic, complex, progressive and relapsing disease that requires long-term management<sup>1,2</sup>
- To **improve obesity management**, it is important to **understand** the **perceptions, attitudes and behaviours** of **PwO** and the **HCPs** who treat them



The **ACTION-IO** study previously explored this in **11 countries**<sup>3</sup>

However, there are no equivalent data for Swiss PwO and HCPs. Additionally, dietitians were not surveyed in ACTION-IO

The **ACTION Switzerland** study aimed to identify perceptions, attitudes, behaviours and barriers to effective obesity care among PwO and HCPs in **Switzerland**

Here, we present data for the PwO and physicians surveyed; data for dietitians will be reported separately

# Methods

## Study design

- ACTION Switzerland (NCT05232786) was a **cross-sectional**, quantitative **survey-based study** conducted in **Switzerland** in March/April 2022
- PwO and HCPs were recruited via online panels and asked to complete **online surveys** in English, French, German or Italian
- PwO and HCPs completed **separate surveys** that covered **similar themes**
  - Surveys were specifically developed for the ACTION Switzerland study, with input from the study steering committee
  - They were **modified versions** of the surveys from the **ACTION-IO study**<sup>1</sup>



### Primary outcomes

- Weight loss motivators, barriers and management
- Proportion of PwO who made a serious weight loss effort
- Attitudes towards obesity and weight management
- Interactions between PwO and HCPs

*ACTION, Awareness, Care and Treatment In Obesity maNagement; HCP, healthcare professional; IO, International Observation; PwO, people with obesity.  
1. Caterson ID, et al. Diabetes Obes Metab 2019;21:1914–1924.*

# Methods

## Key eligibility criteria



### **PwO inclusion criteria**

Adults aged  $\geq 18$  years

BMI  $\geq 30$  kg/m<sup>2</sup> based on self-reported height and weight



### **HCP inclusion criteria**

Physician (PCP or had a relevant specialty) or certified dietitian

In clinical practice for  $\geq 2$  years

$\geq 50\%$  of time spent in direct patient care

Physicians seen  $\geq 100$  patients in the past month,<sup>\*</sup>  $\geq 10$  of whom were PwO requiring weight management<sup>\*†</sup>

\*Not applicable for psychiatrists and dietitians. †Psychiatrists and dietitians seen  $\geq 5$  patients with obesity requiring weight management in the past month. BMI, body mass index; HCP, healthcare professional; PCP, primary care provider; PwO, people with obesity.

# Results

## Characteristics of PwO, physicians and PwO treated by physicians

	PwO (N=1,002)	Physicians (N=125)
Age, mean years	44.9	50.2
Gender, %		
Male	49	60
Female	50	39
Other	<1	1
BMI classification,* %		
Obesity class I (BMI 30–34.9)	59	19
Obesity class II (BMI 35–39.9)	23	12
Obesity class III (BMI ≥40)	18	6
Non-obesity (BMI <30)	Not applicable	63

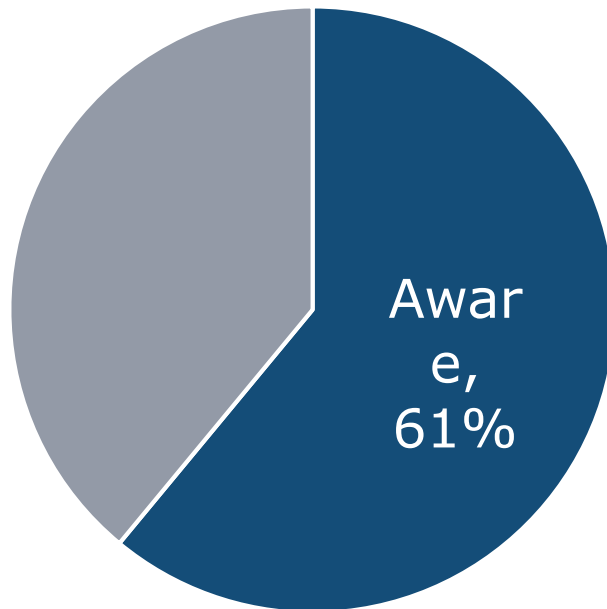
On average, **physicians** had been **practising** for **15.6** years, had **provided obesity care** to patients for **9.7 years** and had **seen 62 PwO** in the past month; **20%** of their adult patients were **primarily seen for obesity**

\*BMI classification for the PwO surveyed and the PwO treated by the physicians surveyed.  
BMI, body mass index; PwO, people with obesity.

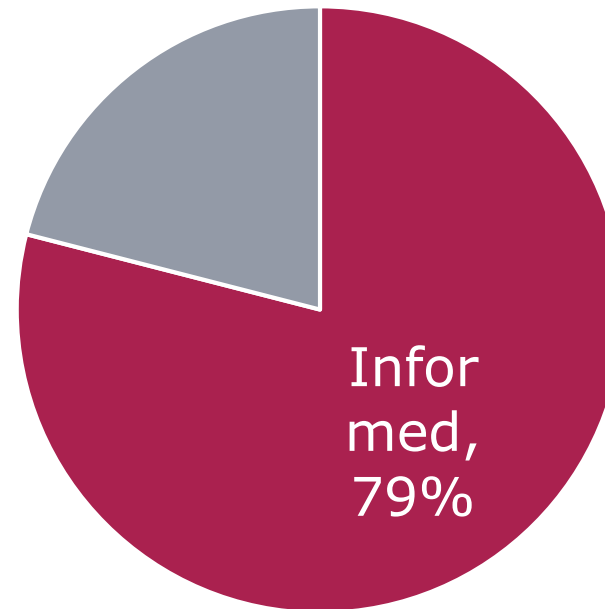
# Results

## Obesity diagnosis

**A) PwO responses:**  
Proportion aware of diagnosis



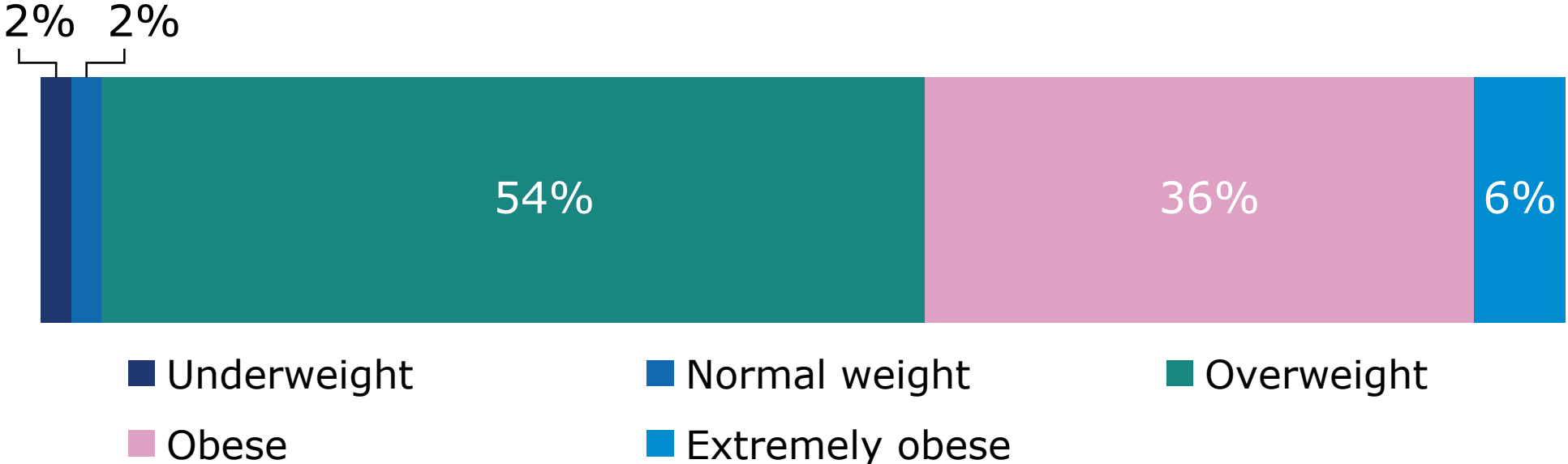
**B) Physician responses:**  
Mean proportion of patients with obesity informed of diagnosis



*Data from PwO who had discussed weight with an HCP in the past five years (n=559) (A) and physicians who had ever informed patients about the obesity diagnosis (n=120) (B). HCP, healthcare professional; PwO, people with obesity.*

# Results

## Self-perception of current weight among PwO



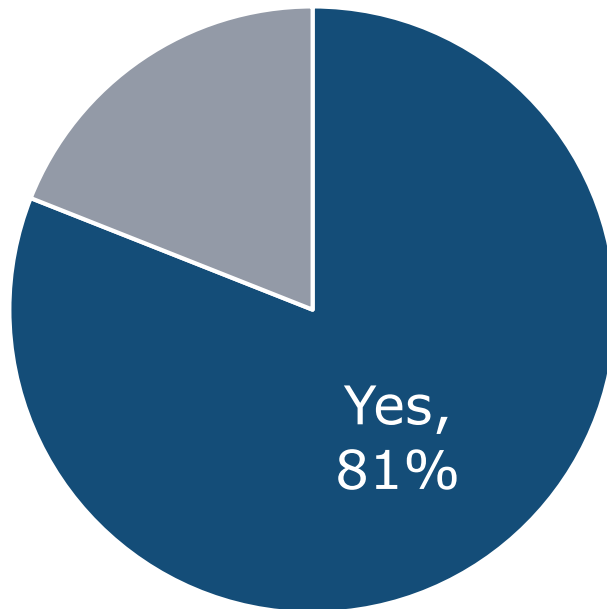
Percentages of PwO (N=1,002) who selected each prespecified response option.  
PwO, people with obesity.



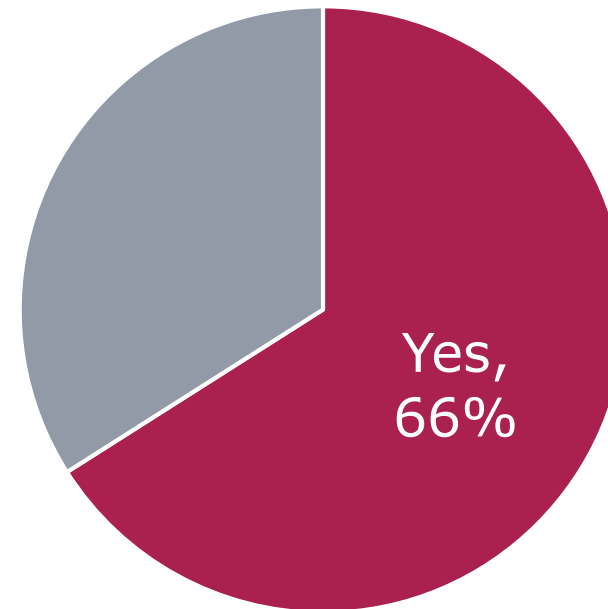
# Results

Belief that obesity has an extreme impact on a person's overall health

**A) PwO responses**



**B) Physician responses**

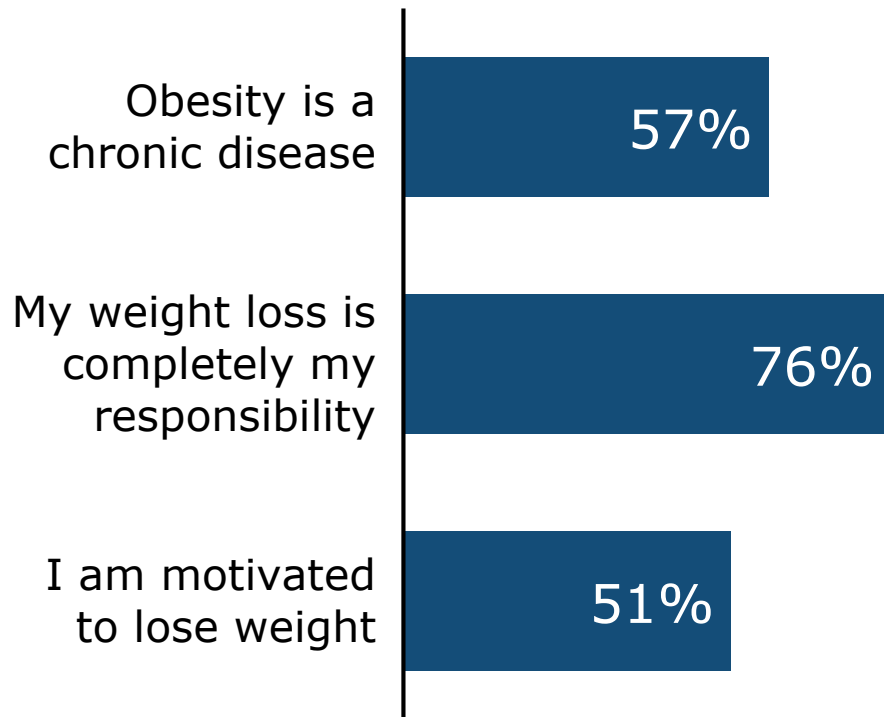


*Percentages of participants who indicated that obesity has an extreme impact on a person's overall health (top two response options on a five-point Likert scale). Data from PwO who indicated that they were familiar with the condition 'obesity' (n=955) (A) and all surveyed physicians (N=125) (B). PwO, people with obesity.*

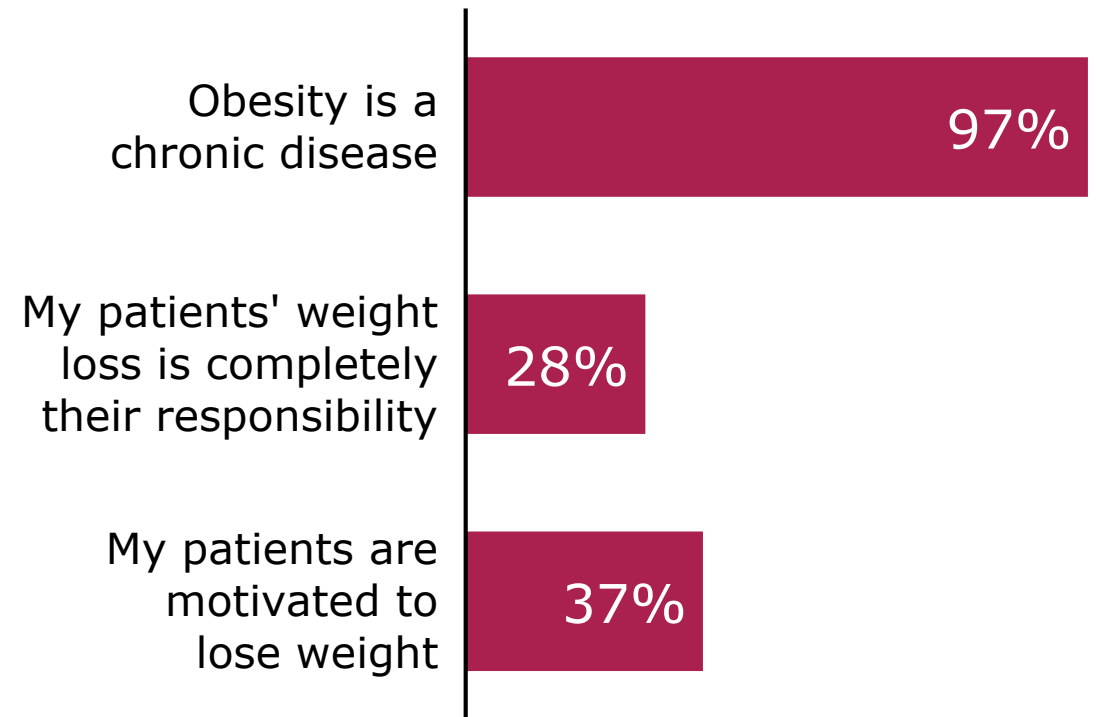
# Results

## Attitudes towards obesity and weight loss

### A) PwO attitudes



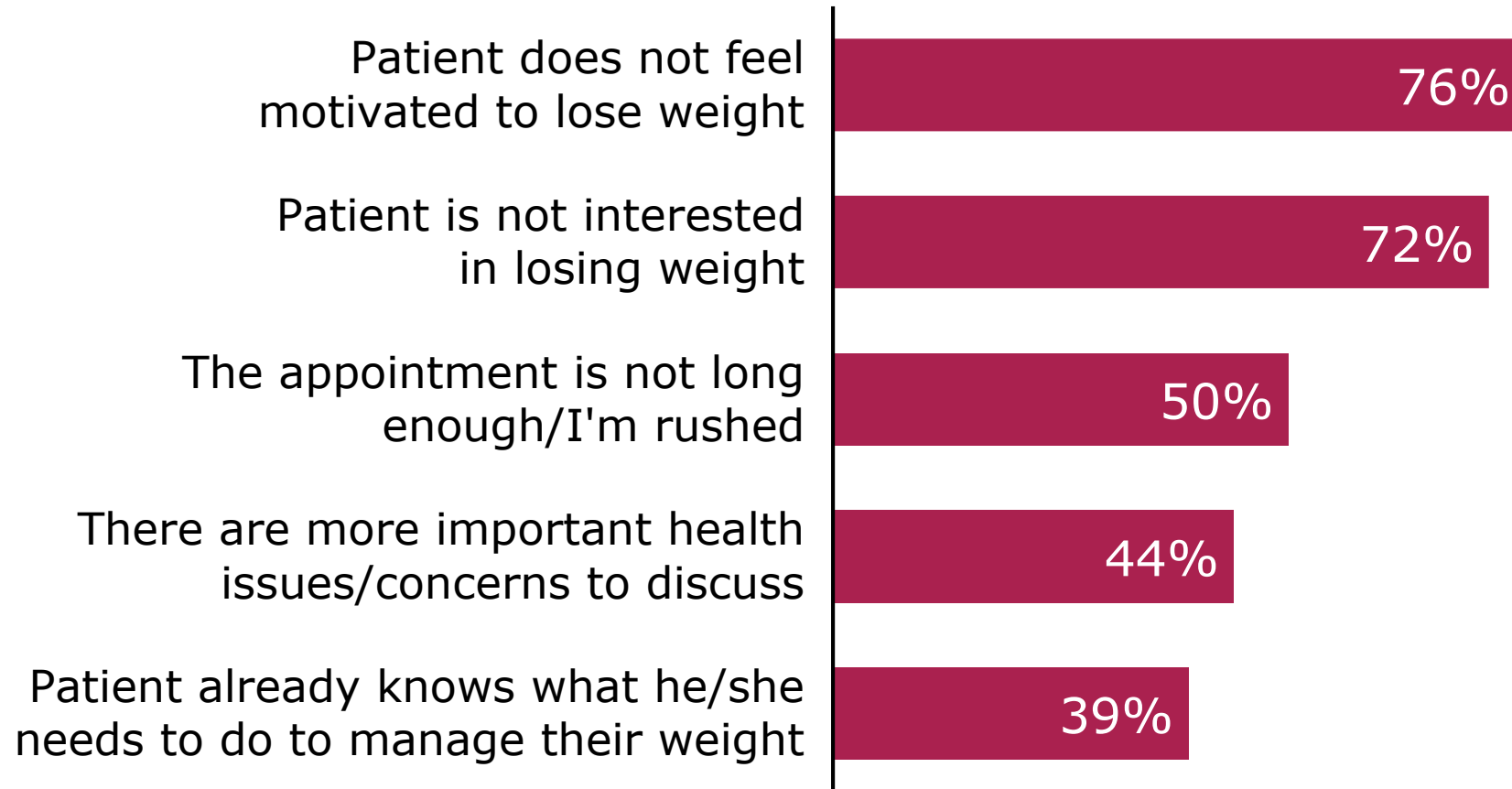
### B) Physician attitudes



*Percentages of PwO (N=1,002) and physicians (N=125) who completely agreed with each statement (top two response options on a five-point Likert scale).  
PwO, people with obesity.*

# Results

## Reasons why physicians may not discuss obesity with patients



*Percentages of physicians (N=125) who selected each prespecified response option. Only the top five responses are shown.*

Gerber PA, et al. Presented at the Swiss Society of Endocrinology and Diabetology (SGED-SSED) Annual Meeting, 17–18 November 2022, Bern, Switzerland

# Results

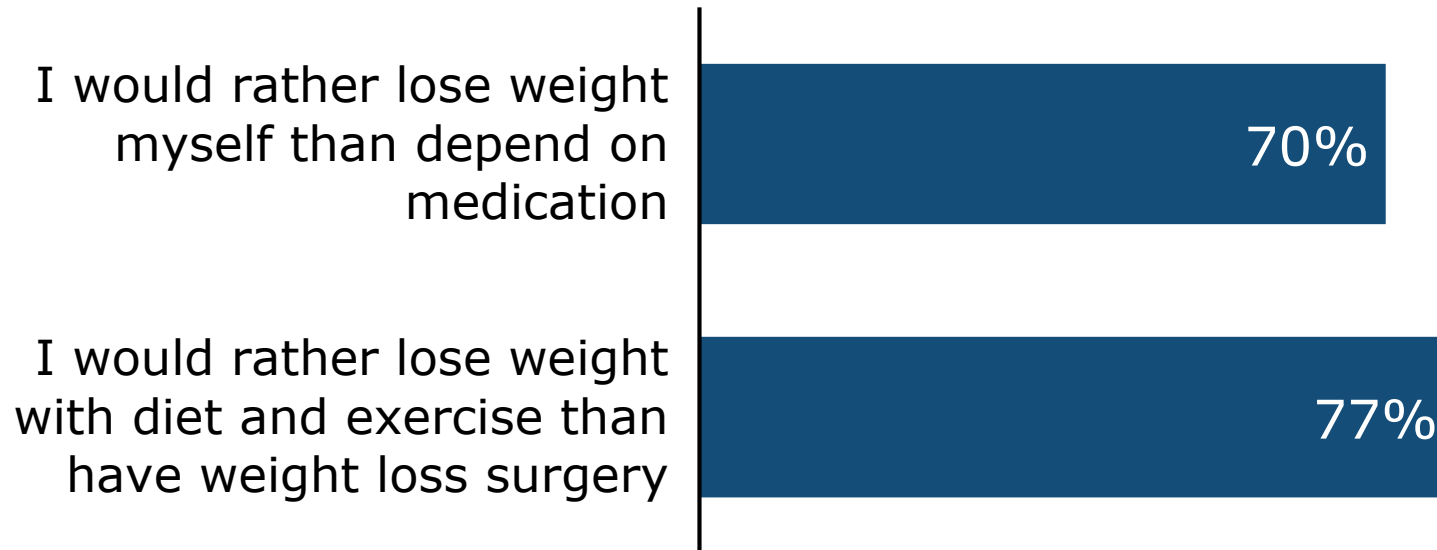
## Reasons why PwO may not discuss weight with HCPs



*Percentages of PwO (N=1,002) who selected each prespecified response option. Only the top two responses are shown.  
HCP, healthcare professional; PwO, people with obesity.*

# Results

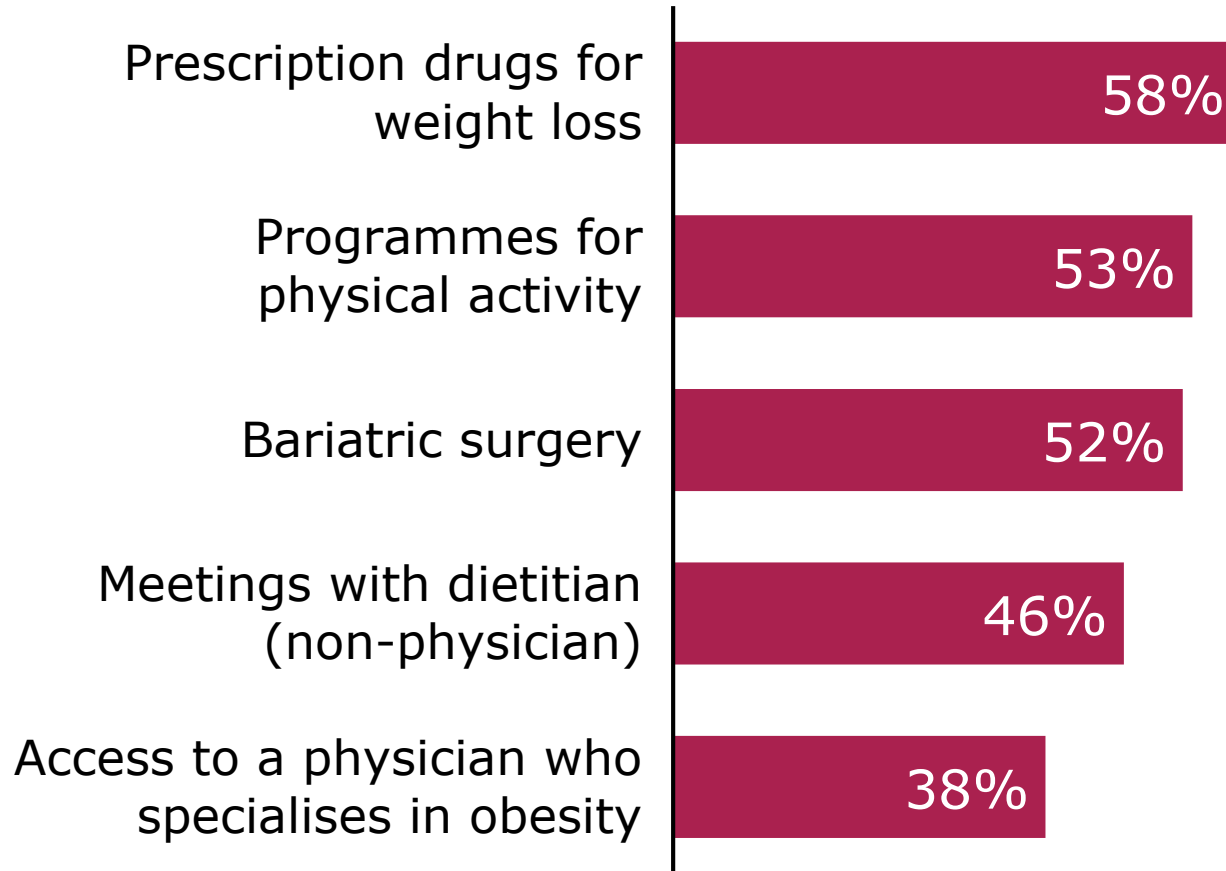
## PwO attitudes towards weight loss medication and surgery



*Percentages of PwO (N=1,002) who completely agreed with each statement (top two response options on a five-point Likert scale).  
PwO, people with obesity.*

# Results

## Most helpful forms of weight loss support, according to physicians

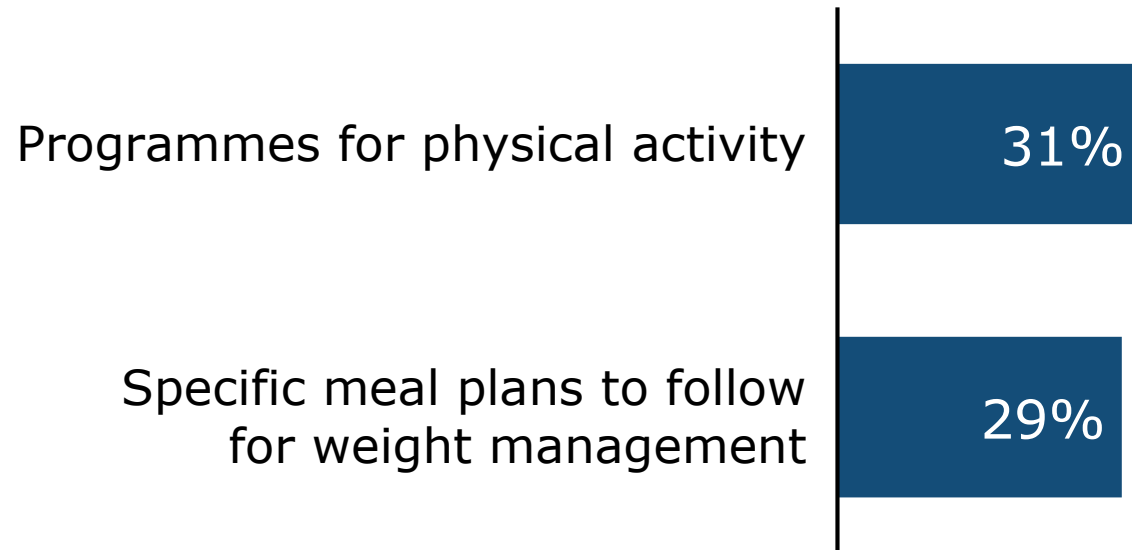


*Percentages of physicians (N=125) who selected each prespecified response option. Only the top five responses are shown.*

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# Results

## Most helpful forms of weight loss support, according to PwO



*Percentages of PwO (N=1,002) who selected each prespecified response option. Only the top two responses are shown.  
PwO, people with obesity.*

# Conclusions



A substantial proportion of PwO surveyed in Switzerland were **not informed** about their **obesity diagnosis**



Although over half of PwO surveyed viewed obesity as a **chronic disease**, most assumed **complete responsibility** for weight loss



This highlights a need to **reduce stigma** by **educating** physicians and **raising awareness** among PwO that obesity is a **disease** that requires a **collaborative treatment approach**



There is also a need for **better communication between physicians and PwO**, which could be achieved by motivational interviewing