

# Wisconsin Medical Society Obesity Task Force Summary

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The Wisconsin Medical Society recognizes the tremendous burden obesity places on patients, their families, and our health care system, and that physicians play an essential role in the prevention and management of this problem. Therefore, the Society's Board of Directors created the Obesity Task Force in April, 2004.

The Task Force conducted nine monthly, hour-long teleconferences between July, 2004 and March, 2005. This effort led to the development of a policy statement on the Society's general intention to bring focus to the role its members play in the obesity pandemic.

The Body Mass Index (BMI) is the most commonly used measure to screen for obesity. However, Wildes and Anderson<sup>1</sup> reported only 4% of Wisconsin physicians always do a BMI, while 53% never did. After reviewing the literature,<sup>1-6</sup> the Task Force recommends using the Body Mass Index (BMI) as the screening tool to assess overweight and obesity. Since the BMI does not account for body fat distribution, waist circumference should also be measured to capture the increased risk for central obesity. To better organize physicians' nutritional and activity interventions with their patients, implementation of the 5-A framework (Assess, Advise, Agree, Assist, and Arrange) can be

## Policy Statement

The Wisconsin Medical Society urges all Wisconsin physicians to inspire and support a patient's lifestyle to maintain or achieve a healthy body weight through the following measures:

Utilization of the body mass index (BMI) for adults or body mass index-for-age for children (ages 2-20) as a screening tool to assess overweight and obesity. Adult assessment should also include tape measurement of waist circumference for those with BMI less than 35.

Implementing a systems approach for the behaviors and interventions required for the prevention or treatment of overweight and obesity.

a system-wide change for guiding behavioral counseling.

Implementation of a systems approach to the prevention or treatment of obesity reflects the recognition of the need for change, but not only within the clinical setting. The Task Force affirmed the concept of the new Public Health System model from the Institute of Medicine's *The Future of the Public's Health in the 21st Century*.<sup>3</sup> As stakeholders in the Public Health System working to assure the conditions for a healthy population, the Task Force encourages physicians to integrate the work of nutritional and activity behavioral interventions for their obese patients with the work of other stakeholder systems (school, community, businesses, academia, media, and Public Health).

These activities align with two of the Healthiest Wisconsin 2010

State Health Plan objectives that are being developed by the Wisconsin Nutrition and Physical Activity Workgroup (WINPAW).<sup>2</sup> Obesity Task Force member Michael Kretz, MD, served as the Society's representative to the WINPAW health care subcommittee.

Other topics the Task Force discussed included:

- Impact of the metabolic syndrome on the obesity epidemic
- Having schools monitor the rates of overweight and obesity in Wisconsin students
- IOM's Immediate Steps for Confronting the Epidemic from the "Preventing Childhood Obesity" report.

## References

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