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Implementing a Weight Loss Follow up Protocol: Abstract

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Abstract

Weight loss programs can significantly reduce obesity and associated chronic diseases. Few interventions focus on patients' ability to maintain weight loss after intensive weight loss program completion. In this quality improvement (QI) project, patients' maintenance of long-term weight loss was examined in individuals who successfully completed an intensive weight loss program. A Weight Loss Follow-Up protocol was developed in order to improve follow-up by primary care providers (PCPs) in order to increase patients' self-efficacy, measured by perceived autonomy support from PCPs and confidence in maintaining weight loss. Results: The correlation between Follow-Up and autonomous support was not statistically significant, but the effect size was moderate in size, $t(19) = -1.22$, $p = .24$, Cohen's $d = -0.54$ (95% confidence interval = -1.420, -0.340); concluding that patients who received follow-up from PCPs perceived increased support from their PCPs in their ability to maintain weight loss. The results for confidence were statistically and practically significant between patients who were in the Follow-Up group compared to those in the No Follow-Up group, $t(20) = -3.84$, $p = .001$, Cohen's $d = -1.650$ (95% confidence interval = -2.650, -0.650). Hence, patients' who received follow-up from their PCPs felt more confident in their ability to maintain weight loss. Conclusion: Clinically significant finding show that patients' reported higher perceived support from their primary care providers (PCPs) and confidence in maintaining their weight after receiving follow-up from their PCPs.

Keywords: obesity medicine, weight loss maintenance, weight reduction, perceived confidence, medical and obesity management, long term, physicians and obesity, clinical decision making and obesity, follow-up, intervention development.