

Systematic reviews of and integrated report on the
quantitative, qualitative and economic evidence base
for the management of obesity in men

Clare Robertson, Daryll Archibald, Alison Avenell, Rona Douglas,
Pat Hoddinott, Edwin van Teijlingen, Dwayne Boyers,
Rona Stewart, Charles Boachie, Evie Floratou, David Wilkins,
Tim Street, Paula Carroll and Colin Fowler



National Institute for
Health Research

0011033107hta18350

Weight Management in Men

Prof. Edwin van Teijlingen

Bournemouth House

2nd July 2014 13.00 pm

The *ROMEO* project (Review Of MEn & Obesity)

Collaboration between Universities of Aberdeen, Stirling & Bournemouth, with advisory group including Men's Health Fora

Project grant holders

Alison Avenell (PI)

Flora Douglas

Pat Hoddinott

Edwin van Teijlingen

Representatives Men's Health Fora

David Wilkins (England & Wales)

Tim Street (Scotland)

Paula Carroll, Colin Fowler (Ireland)

Other team members

**Clare Robertson, Daryll Archibald, Dwayne Boyers, Fiona Stewart, Charles Boachie,
Evie Fioratou**

Acknowledgements

**Project funded by National Institute for Health Research
Health Technology Assessment (NIHR HTA) programme
(09/127/01)**

**Views and opinions expressed therein (and here) are those of
the authors and do not necessarily reflect those of the HTA
programme, NIHR, NHS or the Department of Health**

Final report available online (free):

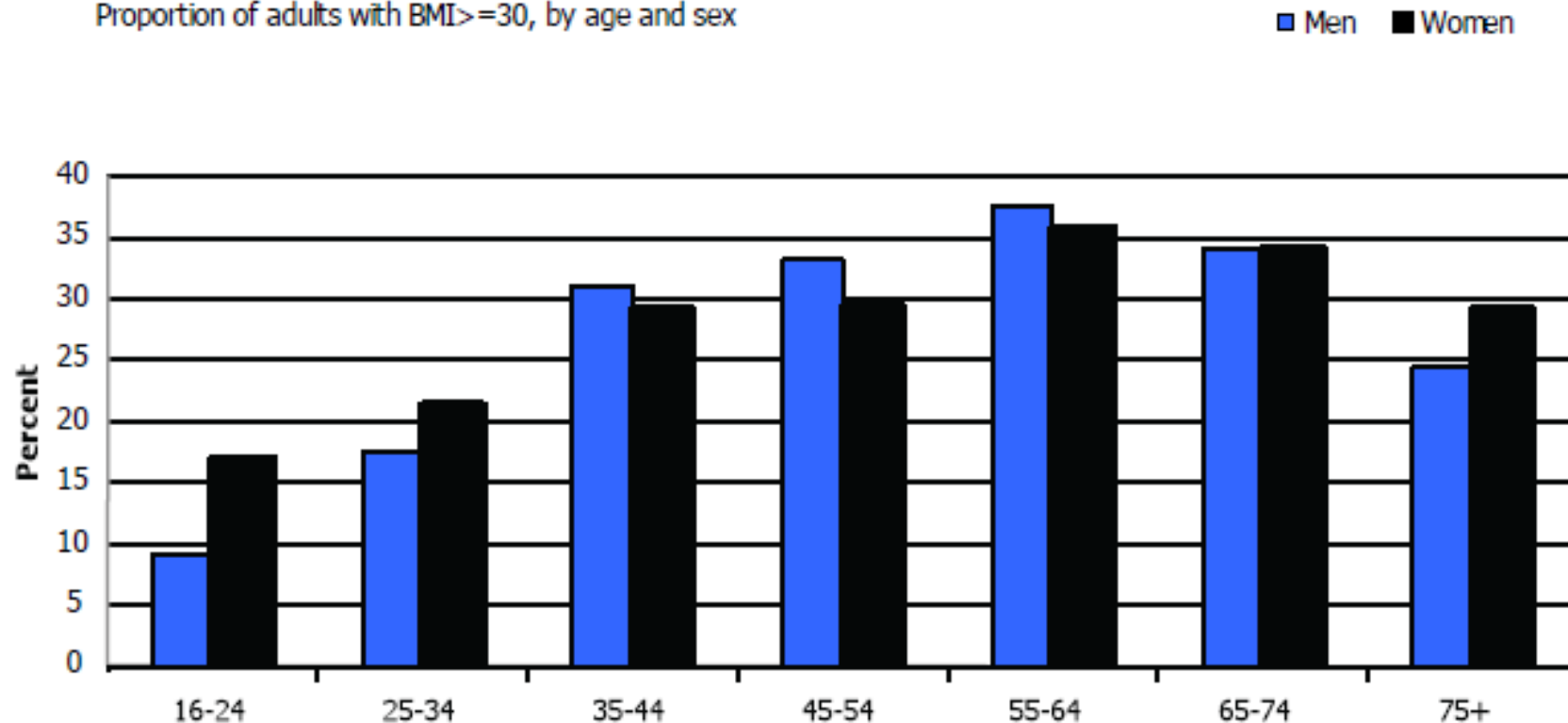
**[www.journalslibrary.nihr.ac.uk/ data/assets/pdf f
ile/0019/118180/FullReport-hta18350.pdf](http://www.journalslibrary.nihr.ac.uk/data/assets/pdf_file/0019/118180/FullReport-hta18350.pdf)**

Scottish Health Survey 2012

BMI $\geq 40\text{kg/m}^2$ 3% women, 1% men

Figure 2.4

Proportion of adults with BMI ≥ 30 , by age and sex



theguardian

[News](#) | [Sport](#) | [Comment](#) | [Culture](#) | [Business](#) | [Money](#) | [Life & style](#) |

[News](#) > [Society](#) > [Obesity](#)

UK among worst in western Europe for level of overweight and obese people

Only Iceland and Malta have higher proportion of people who are overweight or obese, study finds

Sarah Boseley, health editor
The Guardian, Thursday 29 May 2014

Where are the men?

Men are less likely to join traditional weight management classes/programmes:

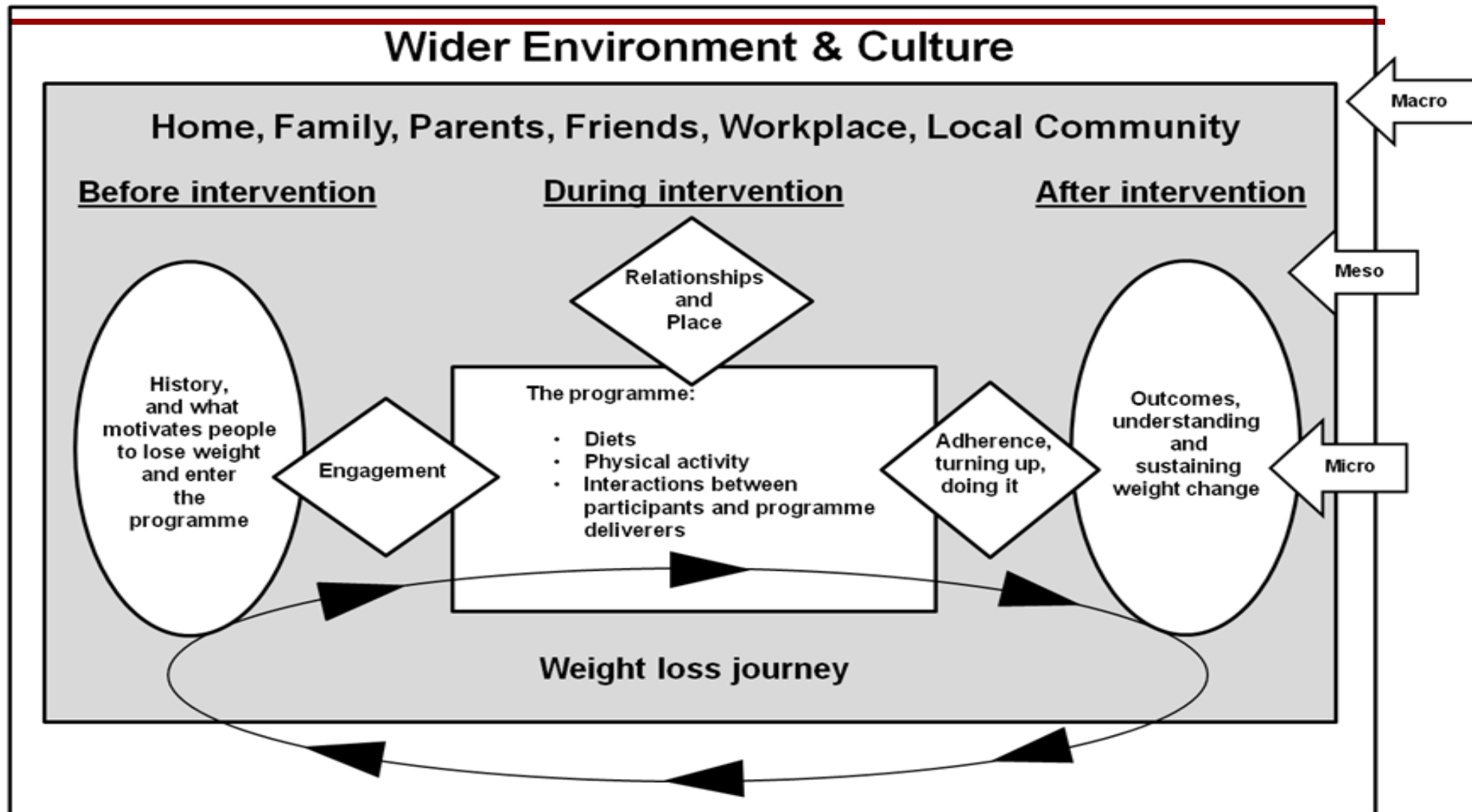
- **Counterweight programme – 23% men**
- **NHS Glasgow weight management – 28% of referrals**
- **UK Weight Watchers – 10%**
- **Slimming World in the UK – 10%**

ROMEO PROJECT

Systematically reviewed:

- **11 RCTs long-term (≥ 1 y) lifestyle/orlistat interventions in men**
 - **20 long-term RCTs with data for men and women;**
 - **26 (un)published reports of UK studies with men, or UK studies with data for men and women separately;**
 - **Systematically reviewed qualitative research:**
 - **Men with obesity in weight loss programmes (13 studies)**
 - **Men's views on obesity (9 UK studies)**
-

Mixed methods synthesis model



Motivation (1)

*My size just seemed normal. When the girl (assessing nurse) showed me the chart I was really shocked to see that I was **clinically obese**. If it had showed me as being fat it wouldn't have got to me as much and I probably wouldn't have done anything about it.*

Motivation (2)

Having a heart attack really scared me. I just wanted to feel better, see my kids grow up, and be more in control. I had tried so many things, but being in hospital really brought me to my senses.

Motivation (3)

anxiety or apprehension about consulting a health professional in a building that is very clearly a health oriented building so I think that the opportunity to be able to access some form of health service in an environment that I would imagine feels far less threatening.

Motivation (4)

I realized for some time that I was overweight, and I wasn't as fit as I should be, and the jolt was my wife saying she's not going on holiday sitting on a coach with a fat man on half a seat you know.

Motivation (5)

- **'Teachable moments' in primary care**
- **Offers of health screening**
- **Word of mouth recommendation**
- **Health benefits specific to men – improve erectile function**
- **Improve physical fitness**

Motivation (6)

- **Waist circumference in men perhaps easier measure to raise awareness than BMI.**
 - **High risk $\geq 94\text{cm}$ (37 in)**
 - **Very high risk $\geq 102\text{cm}$ (40 in)**
- **Community/workplace settings**
- **Humour**

What effects does weight loss have in men?

- **Prevent type 2 diabetes**
- **Improve cardiovascular risk factors**
- **Improve erectile dysfunction**
- **Improve self-esteem**
- **Improve quality of life**
- **Decreased pain, improved sleep, feeling younger, greater mobility**

What makes programme more effective for men? (1)

- **Men more likely than women to like exercise programme/pedometers**
- **Exercise programme enhances weight loss from reducing diet, but less effective on its own**
- **Behaviour change training enhances effectiveness and weight loss maintenance – e.g. self-monitoring, goal setting, providing feedback – by up to 3kg after two years**
- **Type of reducing diet not found to be an influence, low fat reducing diets recommended**

What makes programme more effective for men? (2)

- **Avoid strict or extreme diets or dieting terms**
- **Provide factual information about energy balance**
- **Provide some individual tailoring**
- **Use self-monitoring but also feedback (computers not always helpful)**
- **Follow-up after end of programme**
- **Technology, props**

What makes programme more effective for men? (3)

Groups

- **Some men wanted men-only groups**
- **Peer social support appreciated, even for men who did not initially want to take part in a group**
- **Competition**
- **Humour**
- **Banter**

What makes programme more effective for men? (4)

- **Do less well with orlistat than women**
- **Far less likely to attend mixed-sex group sessions from commercial provider, but improved take-up if referred by GP**
- **However, more likely to raise weight problems with primary care nurses than GPs**
- **Favour health service delivered services, but not in health settings**
- **Family and friends very important influences, and they may change their behaviour too**

What makes programme more effective for men? (5)

- **Social norms and environmental influences**

After one year absolute drop out rate from trials much less than for women 11% (95% CI 8 to 14%)

What makes programme more effective for men? (6)

*the most enjoyable aspect was the fact that it allows for those days where you know, if you have a **** day at work you can just go and have a few beers afterwards and not feel ****house for it.*

What makes programme more effective for men? (7)

What really helped me was having somebody go over the food log every day. That was the big thing; just having staff talk about things I was eating, choices I was making, maybe making a few little suggestions—that was really very helpful.

What makes programme more effective for men? (8)

I want to be around 16 stone, my GP [general practitioner] wants me to be 12.5 stone, if I was 12.5 stone, I'd look like I'd been incinerated, something out of Jason and the Argonauts, like the skeletons walking around.

FFIT trial

A gender-sensitised weight loss and healthy living programme for overweight and obese men delivered by Scottish Premier League football clubs (FFIT): a pragmatic randomised controlled trial

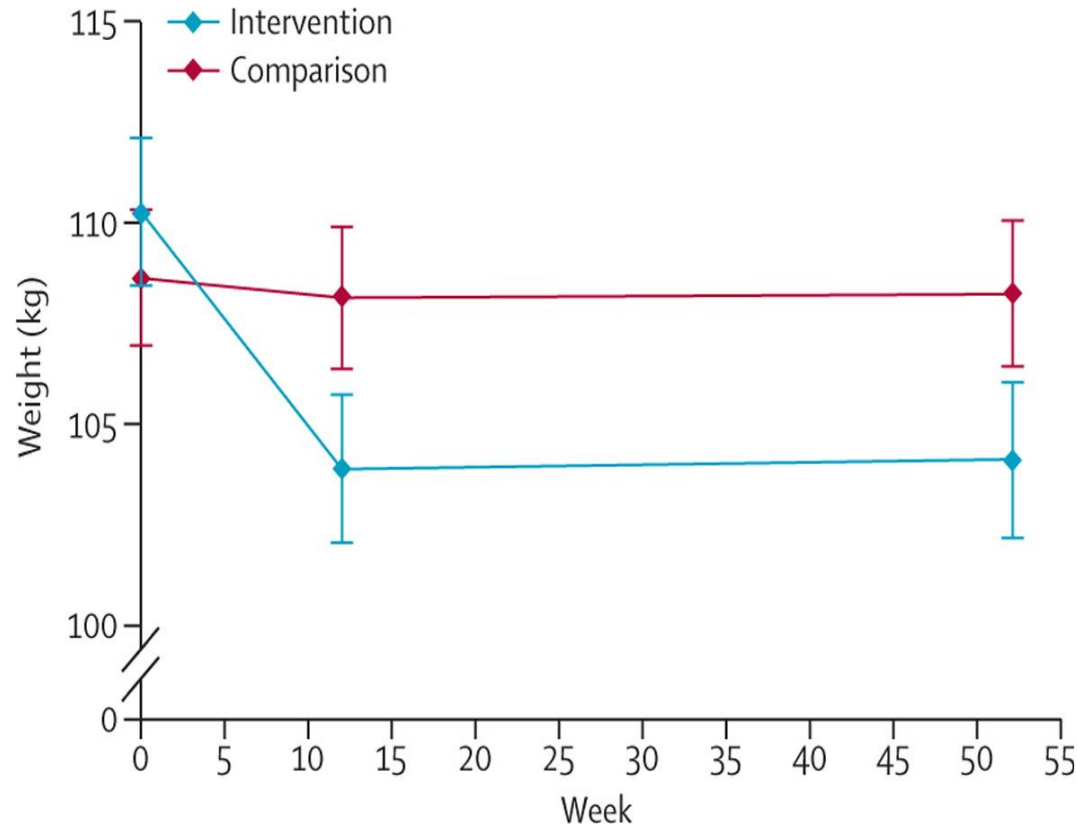
Kate Hunt, Sally Wyke, Cindy M Gray, Annie S Anderson, Adrian Brady, Christopher Bunn, Peter T Donnan, Elisabeth Fenwick, Eleanor Grieve, Jim Leishman, Evan Miller, Nanette Mutrie, Petra Rauchhaus, Alan White, Shaun Treweek



FFIT trial

- **747 men 35-65y, BMI 35.3kg/m²**
- **12 weekly sessions run by community coaches from SPL**
- **90 minutes classroom and physical activity sessions**
- **Six email prompts and one class reunion over the year**
- **£40 club voucher for 12 month visit**

FFIT trial



Mean difference:
-5.1kg (95% CI -6.0 to -4.3)

92% attended at 12 months

Physical health related quality of life significant improved at 12 months, but not stat significant for mental health related quality of life

Recommendations for practice (1)

Weight reduction for men is best achieved and maintained with combination of a reducing diet, physical activity programme, and behaviour change techniques (e.g. self-monitoring, goal setting, providing feedback, review of goals).

These key components differ slightly from those for women, in that men prefer more factual info on how to lose weight and more emphasis on providing physical activity programmes.

Recommendations for practice (2)

For some men, but not all, the opportunity to attend men-only groups may enhance effectiveness.

Individual tailoring and feedback may also be features of more effective services.

Recommendations for practice (3)

Weight-loss programmes men may be better provided in social settings, such as sports clubs and workplaces, which may be more successful at engaging men than health service settings.

Innovative means of delivering services needed for hard-to-reach groups, e.g. men who do not see weight as a problem, young men, unemployed men and those living in remote and rural areas.

Recommendations for practice (4)

Health service staff can recognise 'teachable moments', when a health issue could become a motivator for a man to lose weight.

Health staff can provide opportunities for men to access weight-loss services

Recommendations for practice (5)

Policies and services to prevent and treat obesity should take account of sex and gender-related differences, and consult men in development and evaluation of services.

Media coverage I

Typical newspaper or online story:

- photo male belly;
- generally positive headlines of men being better at keeping up diet; needing support; etc.

Men 'more likely to keep up diet'

BY PRESS ASSOCIATION, 13 JUNE 2014, 1:07AM, UPDATED: 1:58PM

Like +1 Share Twitter Email



13 June 2014 Last updated at 00:30

Share f t

Men 'need humour and male support' to fight obesity

Fewer men join weight-loss programmes but are more likely to stick with them, international obesity studies have found.

The report found that middle-aged men are more likely to lose weight once they perceive they have a health problem.



Sunday Post

Fewer men join weight-loss programmes than women but are more likely to stick with them, say Scots boffins

Jun 13, 2014 09:54
By [Dailyrecord.co.uk](#)
0 Comments

THE report found that middle-aged men are motivated to lose weight once they perceive they have a health problem they want to tackle.

22 Shares
[f](#) Share
[t](#) Tweet
[g+](#) +1
[e](#) Email



[dailyrecord.co.uk](#) - June 13

[view article](#)

Diet battle of the sexes: Men are less likely to join weight loss programmes - but are more successful than women when they do

By Anna Hodgekiss

Published: 00:02, 13 June 2014 | Updated: 00:02, 13 June 2014

In the battle of a dieting couple, many a woman has cursed her man for losing more weight than her.

And now scientists say they may have discovered why.

While fewer men join weight-loss programmes than the fairer sex, chaps that do join are more likely to stick with it.

And health, rather than appearance, is the key motivator for them.

4:56AM, FRI 13 JUN 2014

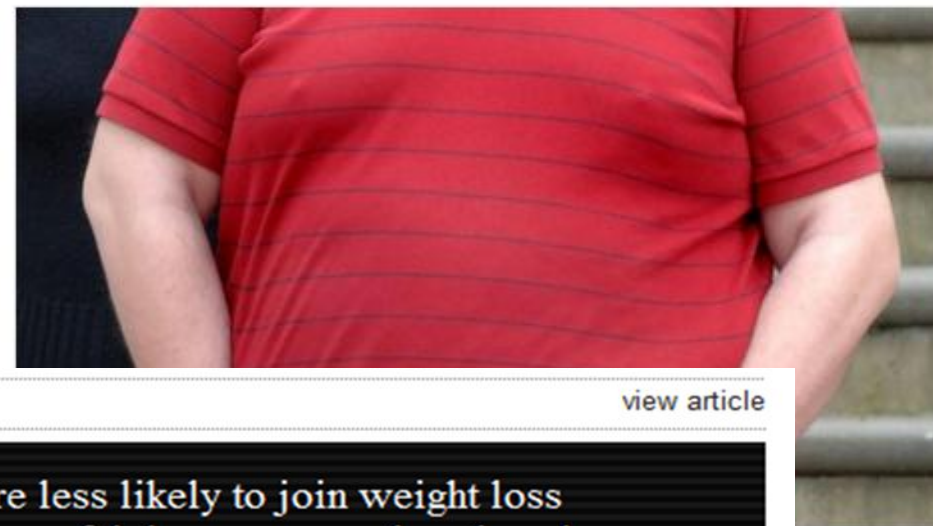
Men 'more likely to stick to diets'

Last updated Fri 13 Jun 2014

Health • Obesity

Men are more likely to stick to a weight loss regime, despite fewer of them trying to lose pounds in the first place, an analysis of international obesity studies has found.

Watch: Tonight: The Diabetes Epidemic



are specifically

ished,
1d prefer

Media coverage III

International coverage:

- Rep. of Ireland
- Australia
- New Zealand

thejournal.ie
READ, SHARE AND SHAPE THE NEWS

BUSINESS ETC THE SCORE THE DAILY

Irish Politics International Opinion Science Living Culture

Tags # BROTHERS IN ARMS # MAN UP # OBESITY # OVERWEIGHT # WEIGHT

How to tackle male obesity? Laughter, diet and being around other men

The research found that changing diet alone can lose more weight than doing more exercise.

Jun 13 6:45 AM 10,152 Views 33 Comments Share 10 Tweet 12 Email 21

MEN ARE LESS likely to join weight loss programmes but are more likely than women to stick with them.

That is according to analysis of international obesity studies led by University of Aberdeen researchers, supported, locally, by the Men's Health Forum in Ireland.

The study also found that men



Media Commercial organisations

Lloydspharmacy
Online **doctor** blog

Home Online clinics & services Information Our Story Blog

Blog Home Sexual Health Diabetes Asthma General Health Men's Health Women's Health

Posted on June 17, 2014 by Fraser Wood

← Previous Next →



Weight loss for men – It's harder than it seems

Men prefer burning off calories to cutting down on goodies, but what makes a successful weight loss program for men? That is the problem UK experts have recently been

wrestling with.



Diet Battle Of The Sexes: Men More Successful At Losing Weight

June 18, 2014

[Share on Facebook](#)

[Tweet](#)



Photo credit: Bigstock

In the battle of a dieting couple, many a woman has cursed her man for losing more weight than her. And now scientists say they may have discovered why. While fewer men join weight-loss programmes than the fairer sex, chaps that do join are more likely to stick with it.

And health, rather than appearance, is the key motivator for them. Researchers from the universities of Aberdeen, Bournemouth and Stirling analysed evidence from around the world involving more than 15,000 men gathered from weight loss trials and studies.

HTA

Systematic reviews of and integrated report on the quantitative, qualitative and economic evidence base for the management of obesity in men

Authors: Robertson C, Archibald D, Avenell A, Douglas F, Hoddinott P, van Teijlingen E, Boyers D, Stewart F, Boachie C, Fioratou E, Wilkins D, Street T, Carroll P, Fowler C

Journal: Health Technology Assessment **Volume:** 18 **Issue:** 35

Publication date: May 2014

DOI: 10.3310/hta18350

Citation: Robertson C, Archibald D, Avenell A, Douglas F, Hoddinott P, van Teijlingen E, *et al.* Systematic reviews of and integrated report on the quantitative, qualitative and economic evidence base for the management of obesity in men. *Health Technol Assess* 2014;18(35)

NHS
**National Institute for
Health Research**

Thank you!

Any questions?

Edwin van Teijlingen
