

SURVEY OF EUROPEAN GPs

GPs' Perceptions, Knowledge and
Treatment of Obesity

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ABOUT THIS SURVEY

This survey was commissioned by the European Association for the Study of Obesity (EASO) to better determine the perceptions of GPs, and their knowledge and treatment of obesity.

A total of 712 GPs from seven European countries – France, Germany, Italy, the Netherlands, Poland, Spain and the UK – took part in the survey, which was conducted by Opinium Research between February 21 and March 18, 2018.

At least 100 GPs from each country participated and the online interviews were conducted in the respective national languages.

The GPs interviewed were representatively split 77% urban and 23% rural. Most of them (254) have been in practice between 15 and 25 years; 247 of them have been in practice for more than 25 years; and 211 less than 15 years.

ABOUT EASO



The European Association for the Study of Obesity (EASO) is the voice of the European obesity community, representing scientists, healthcare practitioners, physicians, public health experts and patients. EASO is in official relations with the World Health Organisation (WHO) Regional Office for Europe and is a founding member of the EU Platform on Diet, Physical Activity and Health.

Established in 1986, EASO is a federation of professional membership associations from 32 European countries and promotes action through collaboration in advocacy, communication, education and research.

www.easo.org

enquiries@easo.org

+44 (0) 20 3751 7967

ABOUT OPINIUM



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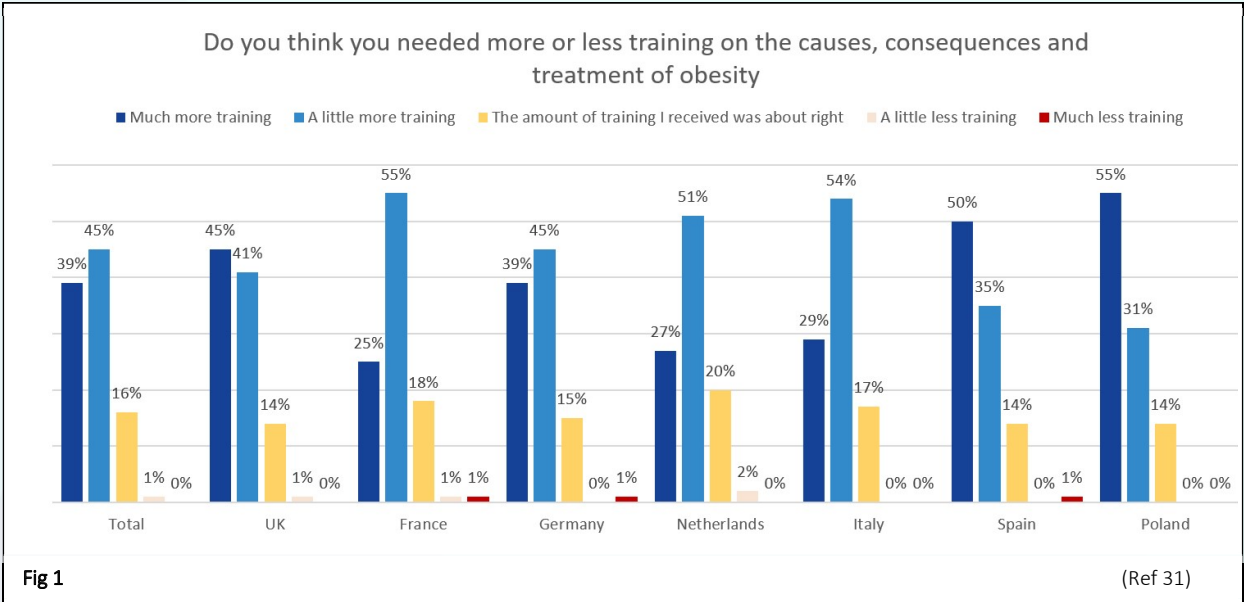
research@opinium.co.uk

+44 (0) 207 566 3190

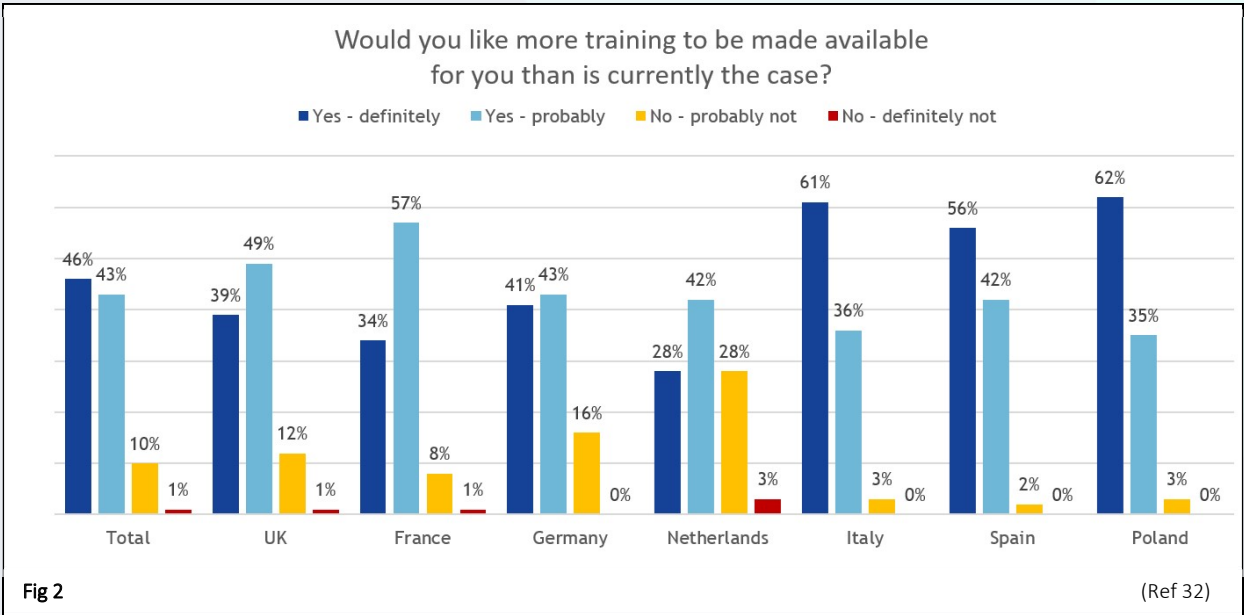
THE FINDINGS

GPs are overwhelmingly calling for more training on obesity

83% of doctors said they should have had more training on the causes, consequences and treatment of obesity. The greatest number were from the UK and Poland (86%). Only 16% of GPs who participated in the survey said the amount of training they received was about right (Fig 1).

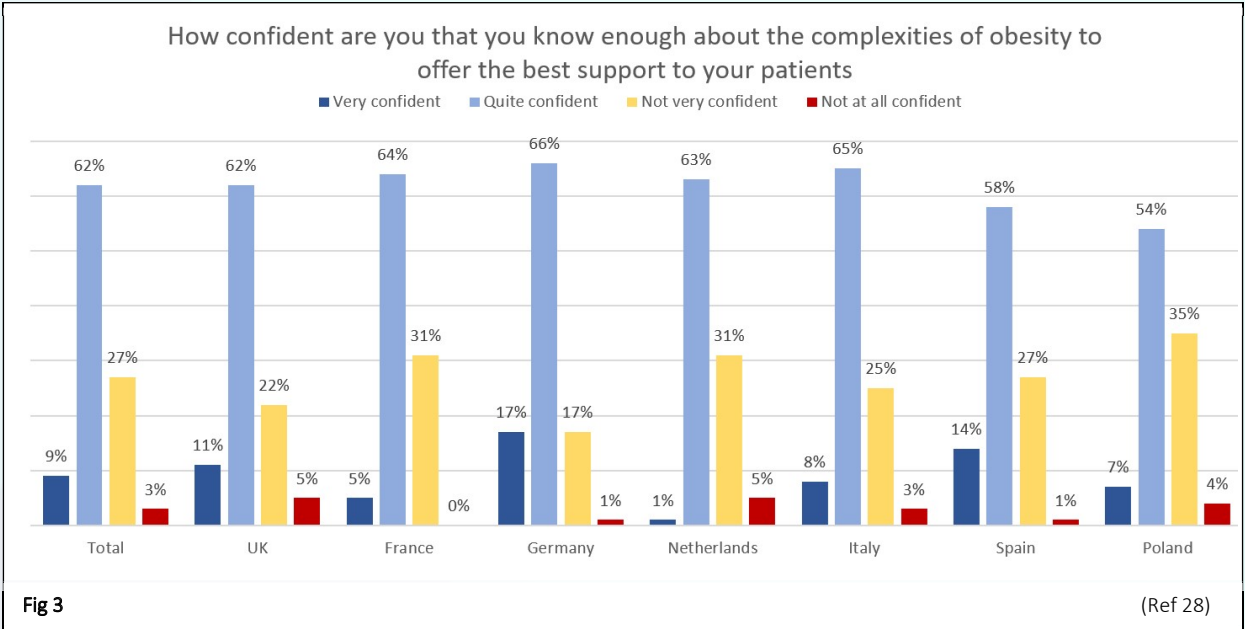


Overall, 89% of GPs would like more training to be made available. In Spain, 98% would like more training, and in Italy and in Poland 97% said they would like more (Fig 2).



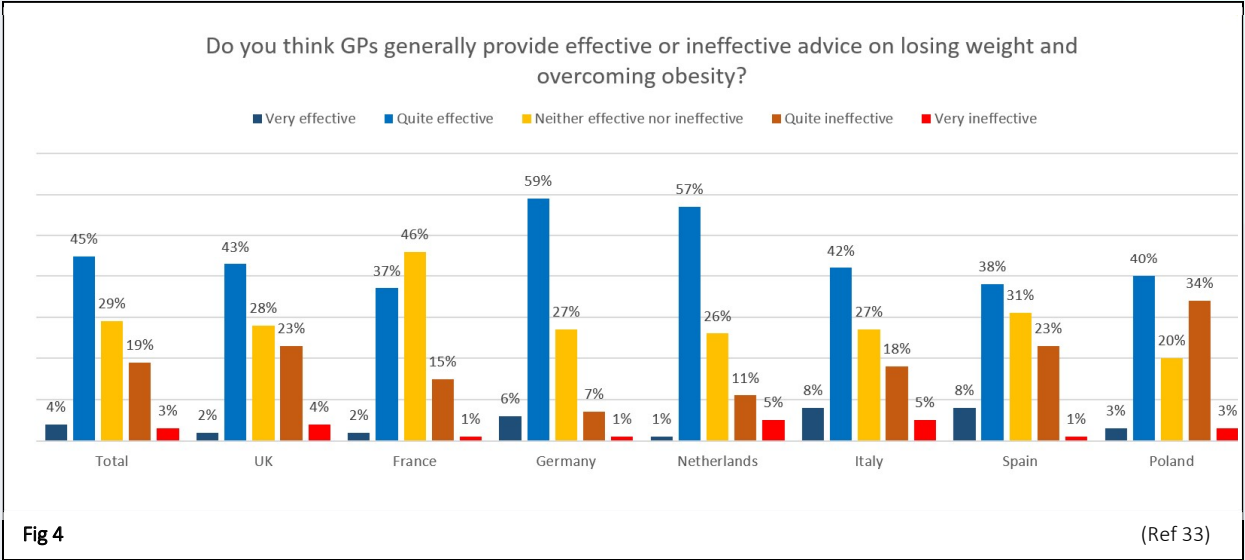
Almost one third of GPs are not confident that they know enough about the complexities of obesity to offer the best support to patients

The need for further training is highlighted by the low confidence levels of GPs that they know enough about the complexities of obesity to offer the best support to their patients. The lowest confidence levels are in Poland and in the Netherlands where 39% and 36% respectively of GPs said they are not confident. The highest confidence levels appear in Germany (Fig 3).



Less than half of GPs think their peers provide effective advice on losing weight and overcoming obesity

Less than half of the GPs who took the survey (49%) think that GPs generally provide effective advice on losing weight or overcoming obesity. In France, only 39% believe GPs provide effective advice. By contrast, the number of GPs who thought GPs generally provide effective advice was highest in Germany (65%) (Fig 4).



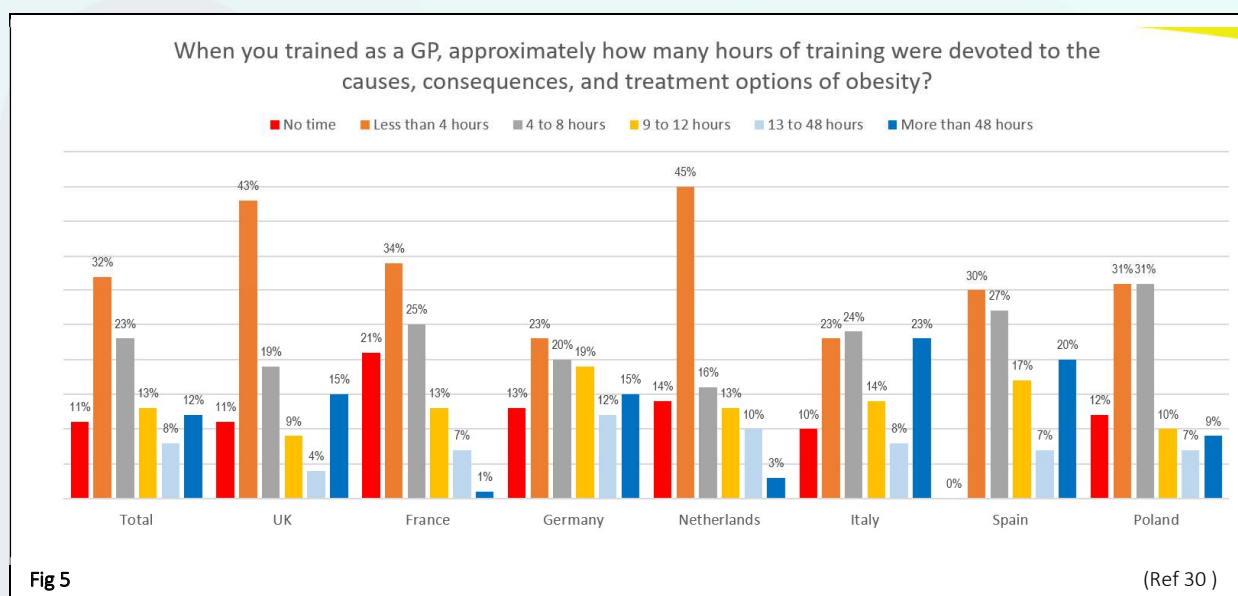
GPs blame a lack of training, time pressure and the complexities of obesity for their lack of confidence to provide the best support to patients

Some GPs cited the complexities of obesity, others the lack of time, as the reason for insufficient confidence to provide the best support for patients. However, overwhelmingly it was the lack of training and information that was given as the main explanation by GPs.

The figures are probably not surprising when considering that GPs receive little training devoted to the causes, consequences and treatment options of obesity. In fact, 43% of all interviewed GPs received none or less than four hours of training during their entire training as a GP, which typically takes around ten years. In the UK, the figure was 54%, in France 55%, and in the Netherlands 59%.

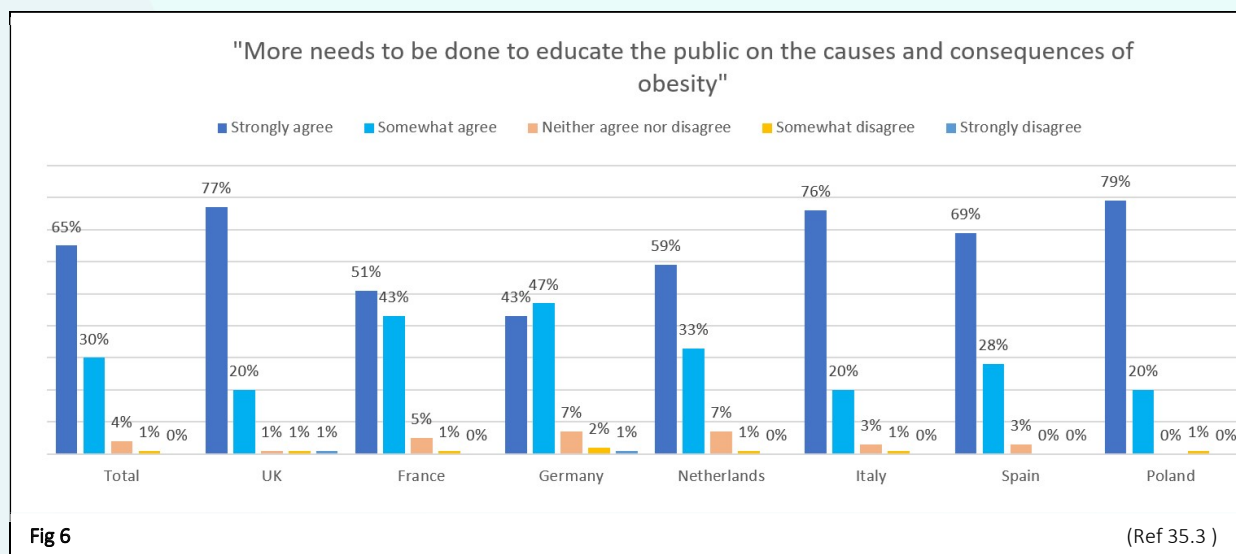
In France 21% of doctors said they received no training at all.

Spain was the only country where all GPs had received at least some training. Indeed, Spain and Italy were the two countries where the most GPs reported having received more than 48 hours training – 20% and 23% of GPs respectively (fig 5).



GP s feel that more needs to be done to educate the public on the causes and consequences of obesity

95% of all GPs agreed that more needs to be done to educate the public about obesity. In Poland it was the view of 99% of GPs and in the UK and Spain, of 97% (Fig 6).

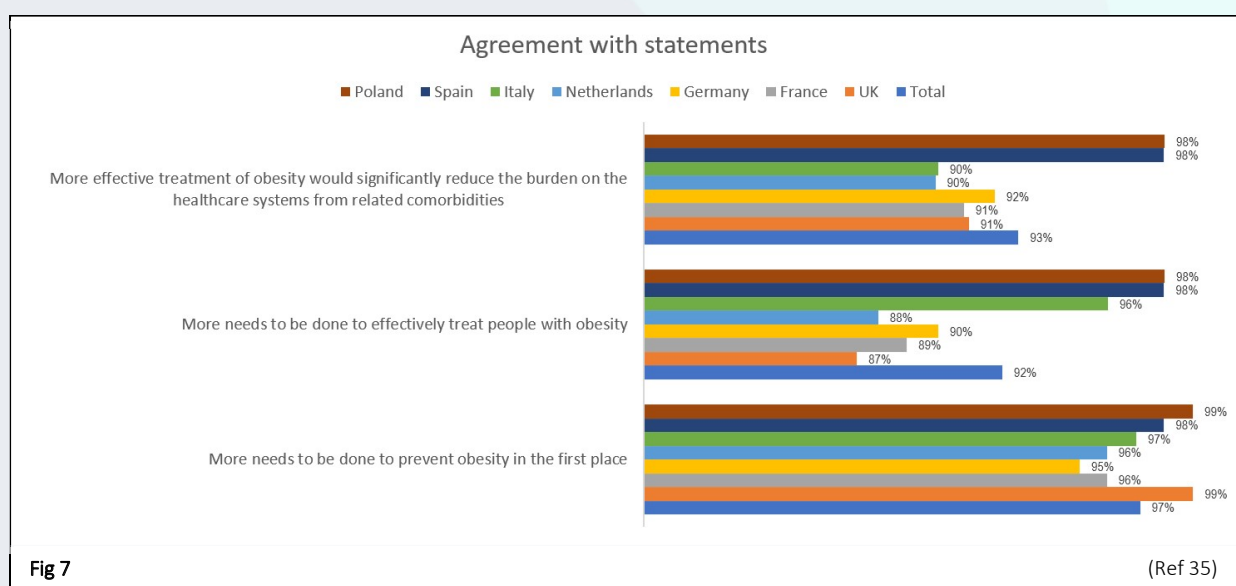


More effective treatment of obesity would significantly reduce the burden on healthcare systems say GPs

97% of GPs thought that more action is required to prevent obesity in the first place.

However, 92% also said that more needs to be done to effectively treat people with obesity and the vast majority agreed that more effective treatment of obesity would significantly reduce the burden on the healthcare systems from related comorbidities.

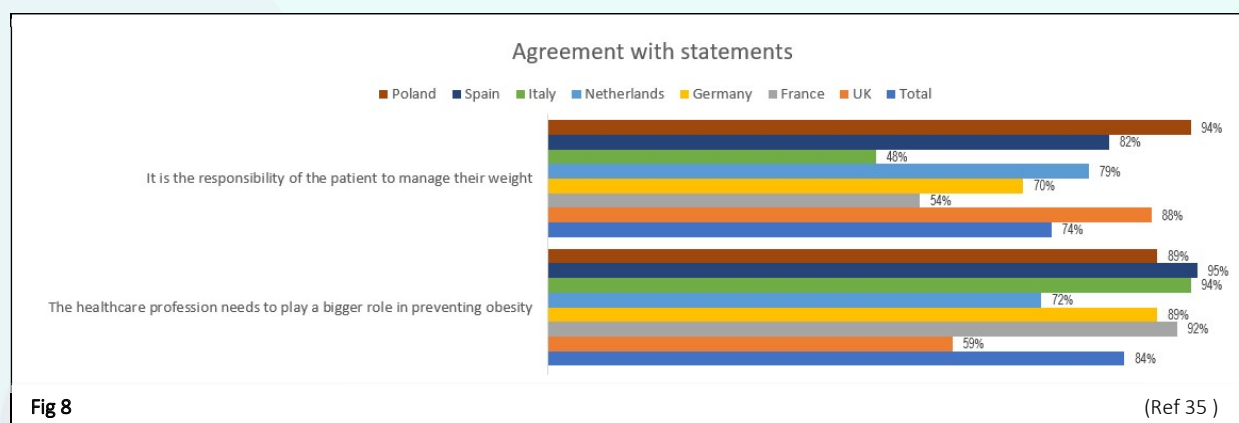
In every country that figure was higher than 90% (Fig 7).



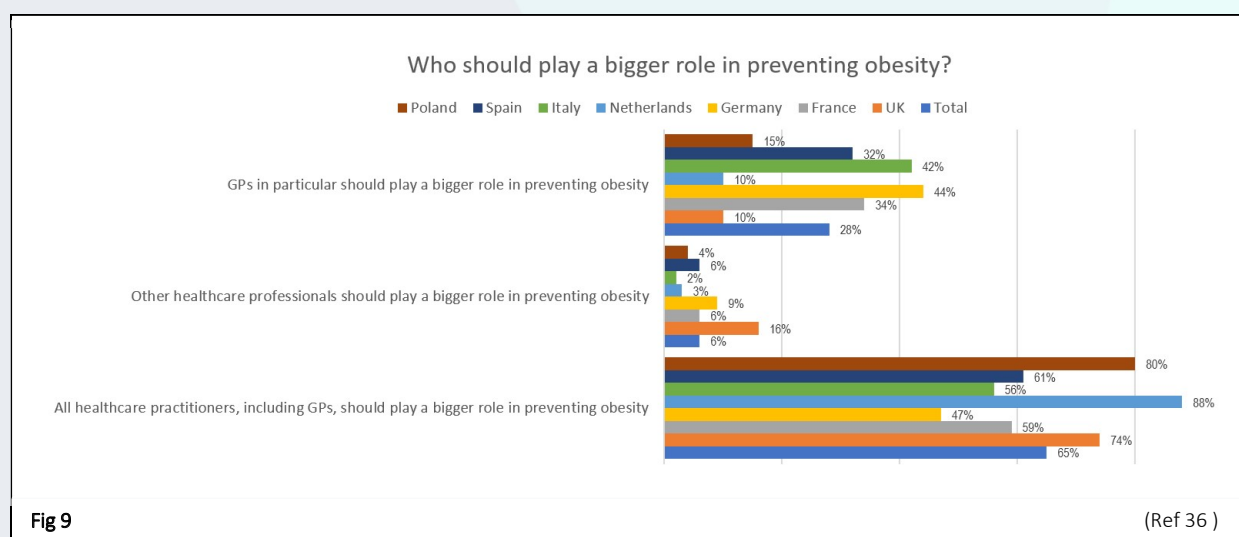
Most GPs say it is the responsibility of patients to manage their own weight – but also that the healthcare profession needs to play a bigger role in preventing obesity

74% of GPs expressed the view that it is the responsibility of patients to manage their own weight. Less so in Italy (48%) but more so in Poland (94%).

Nevertheless, 84% of GPs think that the healthcare profession needs to play a bigger role in preventing obesity. This was highest among GPs in Spain (95%) and Italy (94%). Those in the UK were less inclined to agree (59%) (Fig 8).



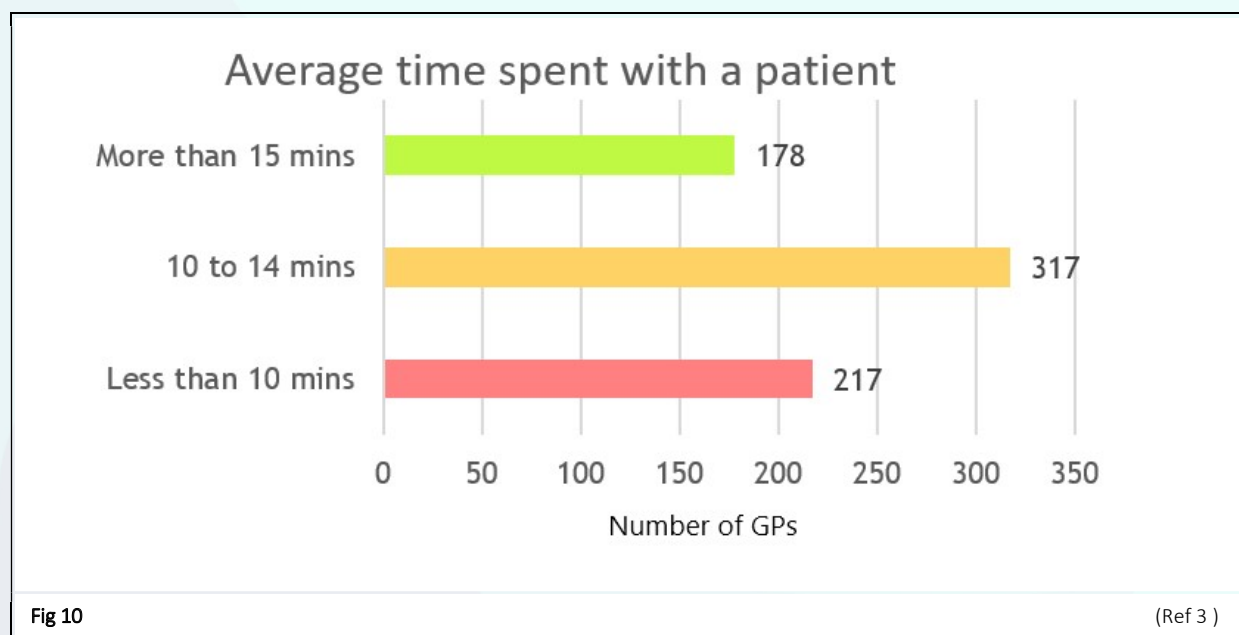
However, only 28% of those who think the healthcare profession needs to play a bigger role said that it should be GPs. In the UK and the Netherlands only 10% said they should (Fig 9). This is probably a reflection of their time available.



Almost a third of GPs say they spend less than ten minutes with each patient

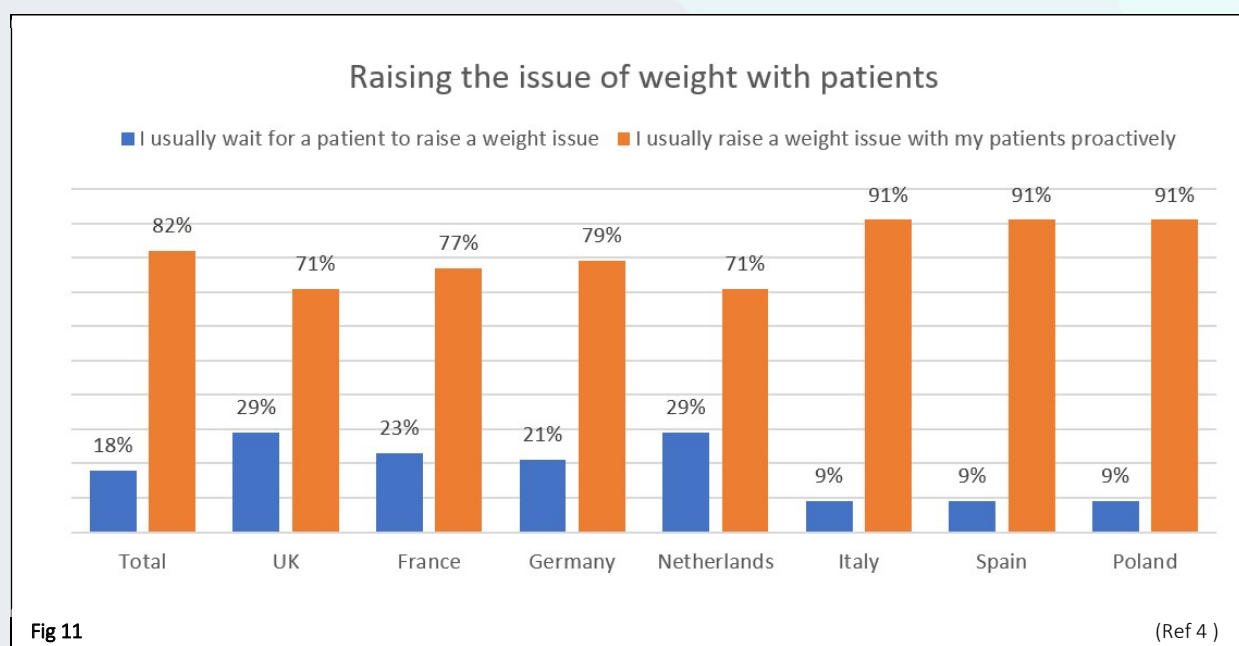
We asked the GPs how much time on average they spend with each patient. 217 of them (30%) said they spend less than 10 minutes with each patient. Another 317 of them (45%) spend 10 to 14 minutes with each one (Fig 10).

So the fact they have probably gone to the doctor for some other reason, there's not a lot of time for most doctors to strike up a conversation about weight.

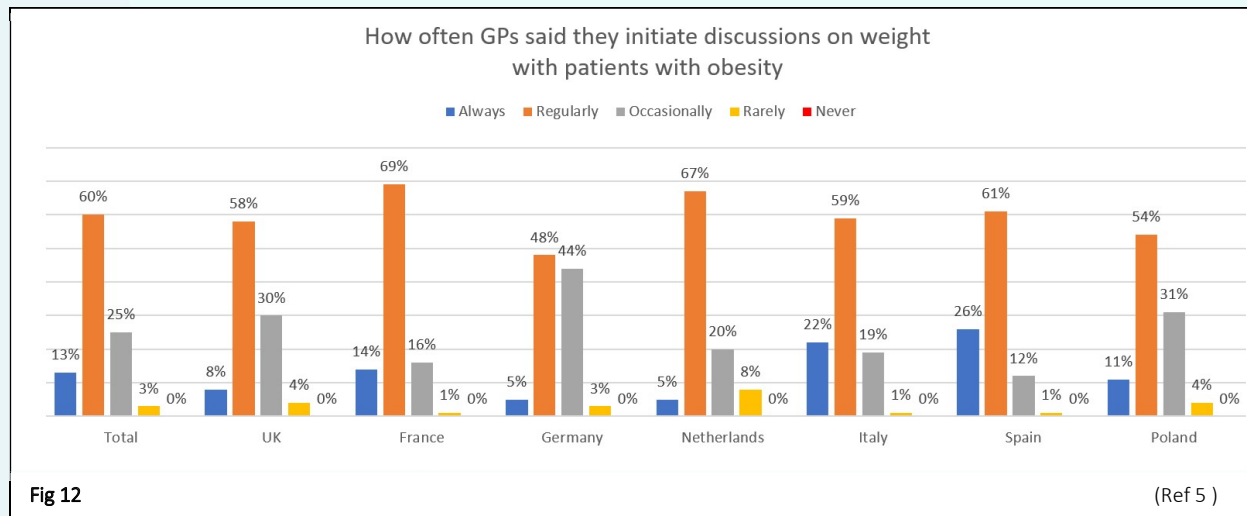


Not all GPs proactively discuss weight issues with their patients

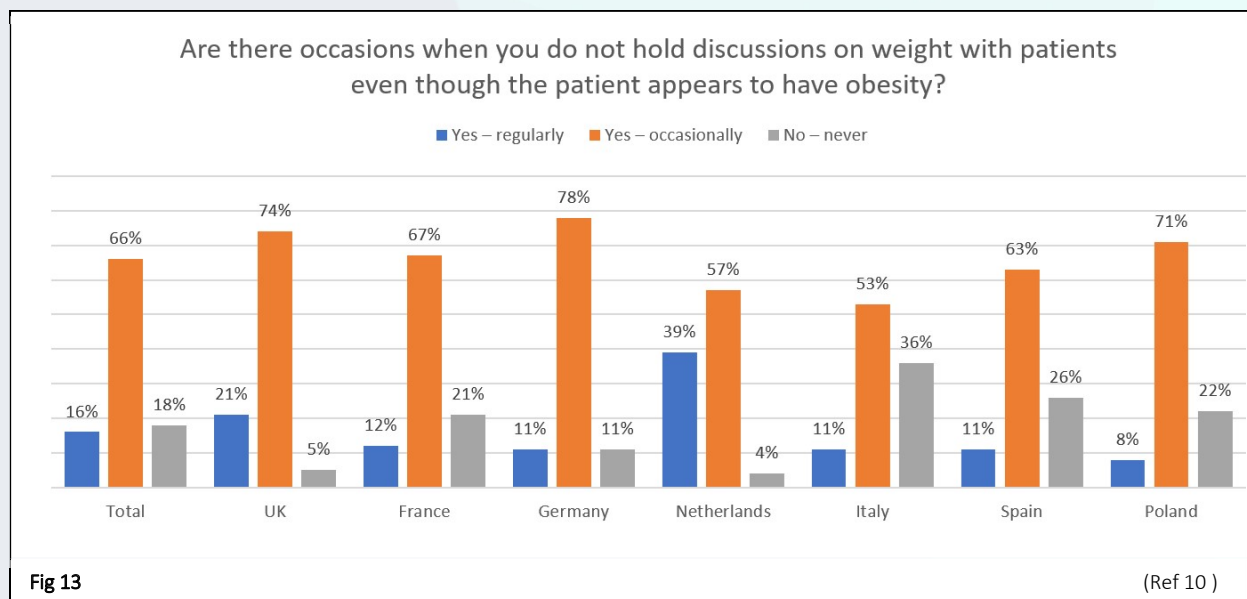
A high number of GPs proactively speak to their patients about weight. However, 18% of them usually wait for patients to raise a weight issue themselves. In the UK and the Netherlands the figure is much higher (29%) (Fig 11).



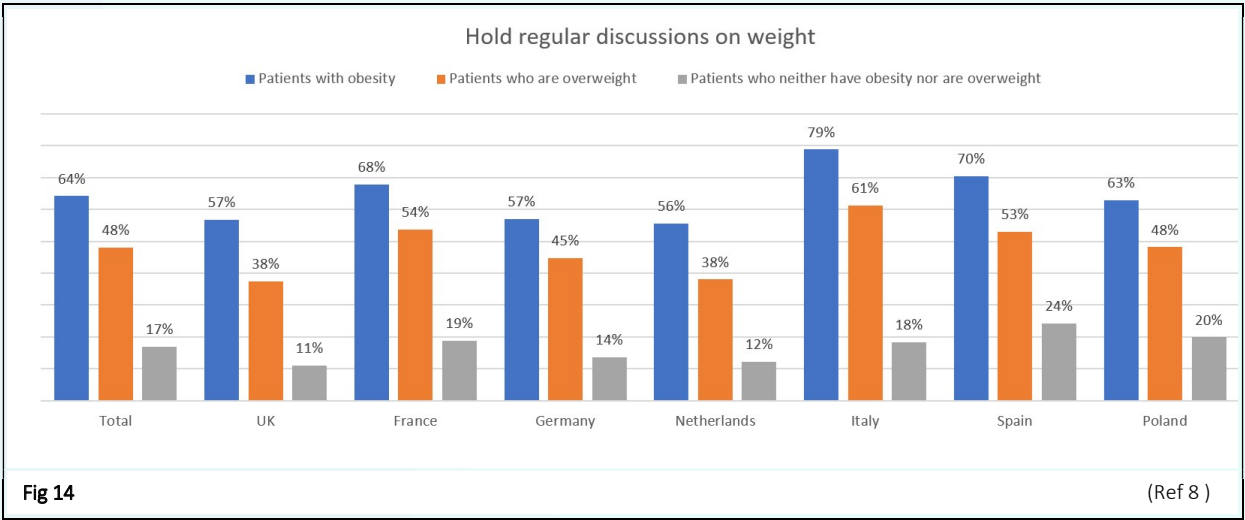
Overall, 28% of GPs told us they rarely or only occasionally initiate discussions on weight with patients with obesity. In the UK the figure is up to 34% (Fig 12).



82% of GPs told us there are regularly or occasionally times when they do not hold discussions on weight with patients, even though the patient appears to have obesity. Surprisingly, in the Netherlands, 39% of GPs said it is regularly the case (Fig13).

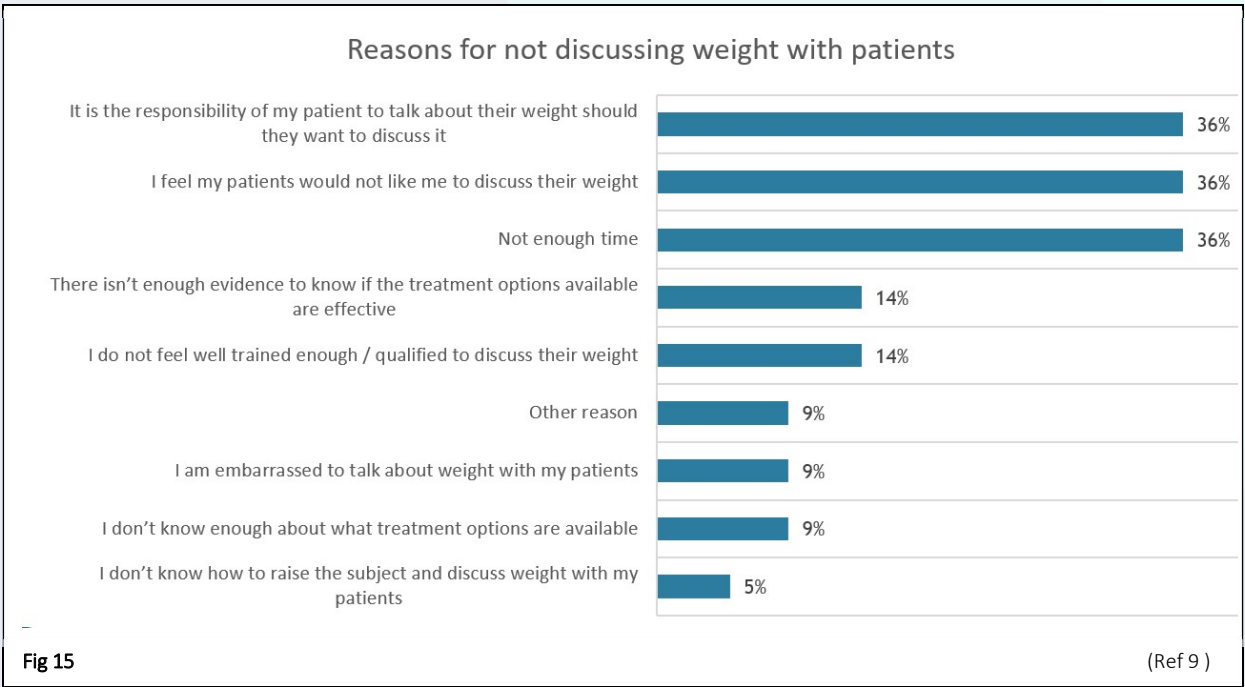


However, GPs are more likely to hold regular discussions on weight with those who have obesity than those who are simply overweight (Fig 14).



We asked GPs who rarely or never discuss weight with their patients, why they do not. The top three reasons scored equally: GPs feeling that they do not have enough time; GPs having the impression that their patients would not like to discuss their weight; and GPs believing it is the responsibility of the patient to talk about weight if they want to.

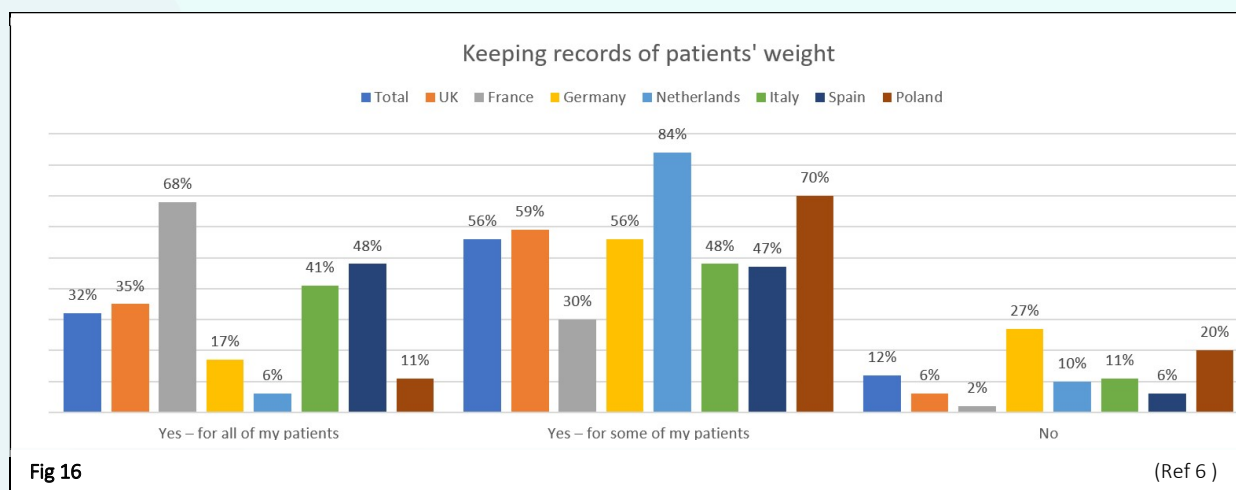
Please note: responses to this question were from a statistically small number of GPs. However, they are considered sufficient to be indicative (Fig 15).



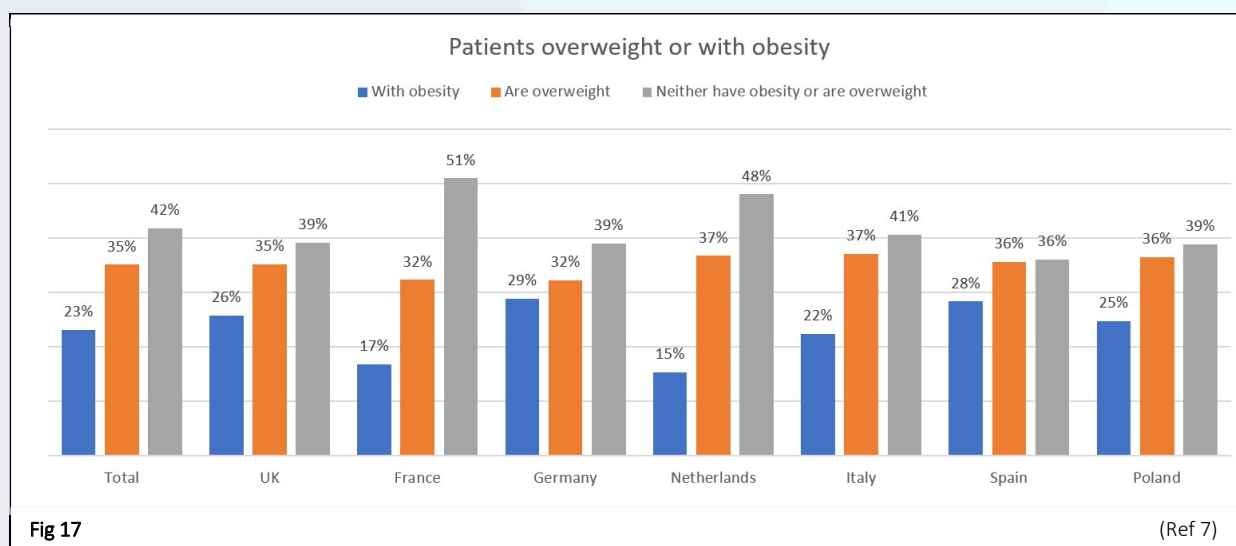
Not all GPs keep records of their patients' weight

Surprisingly, there are still a number of GPs (12%) who say they never keep a record of their patients' weight. In Germany, the figure amounts to 27%. The highest number of GPs who keep records of all patients can be found in France (68%).

56% of GPs keep records for at least 'some' of their patients (Fig 16).



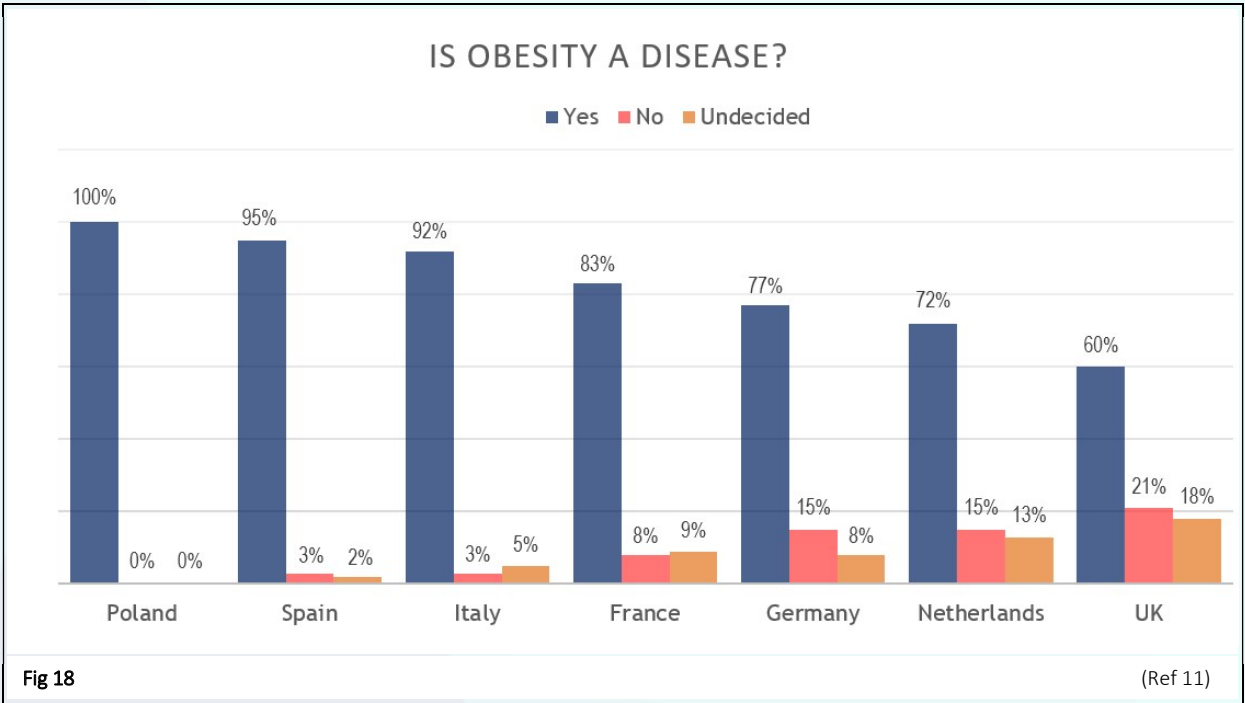
Despite some GPs not keeping records of their patients' weight, they were still able to provide us with an estimate of the number of patients who are considered overweight, or with obesity. Overall, more than half (58%) of all patients fall into the overweight and obesity categories. It is a shocking figure, but in line with other generally available statistics¹. The number with obesity was estimated to be highest in Germany (29%) (Fig 17).



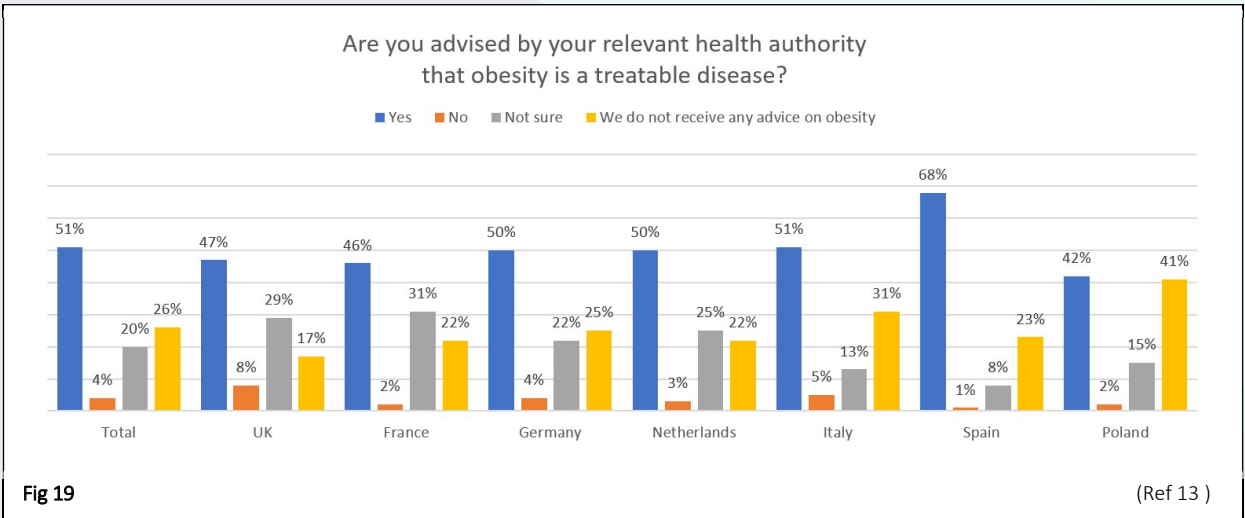
¹ Please see World Health Organisation statistics: <http://www.euro.who.int/en/health-topics/noncommunicable-diseases/obesity/data-and-statistics>

Most European GPs consider obesity to be a disease and say that wider recognition of this would improve patient care

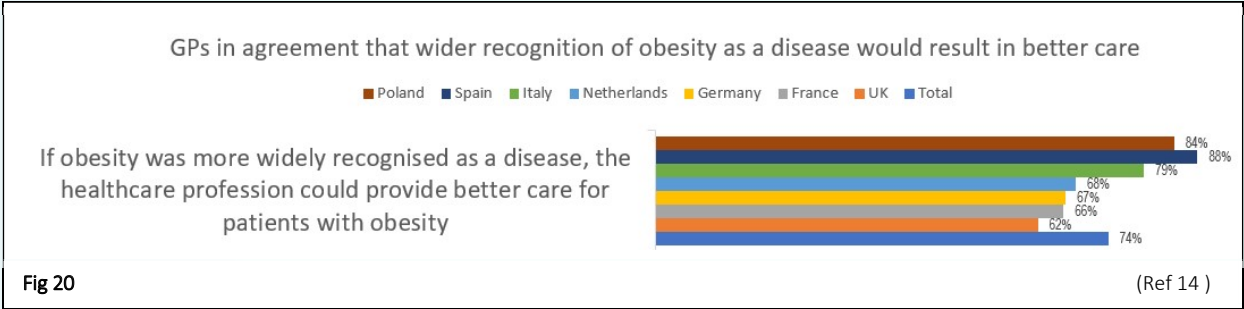
83% of the GPs interviewed consider obesity to be a disease. While a few were undecided, only 9% believe obesity does not fall in the category (Fig 18).



Furthermore, 98% of those who consider obesity to be a disease regard it as treatable. However, only just over half (51%) say they are advised by their relevant health authorities that it is (Fig 19).



There is a wide agreement among GPs that if obesity would be more widely recognised as a disease, it would result in better patient care (74% of GPs) (Fig 20).

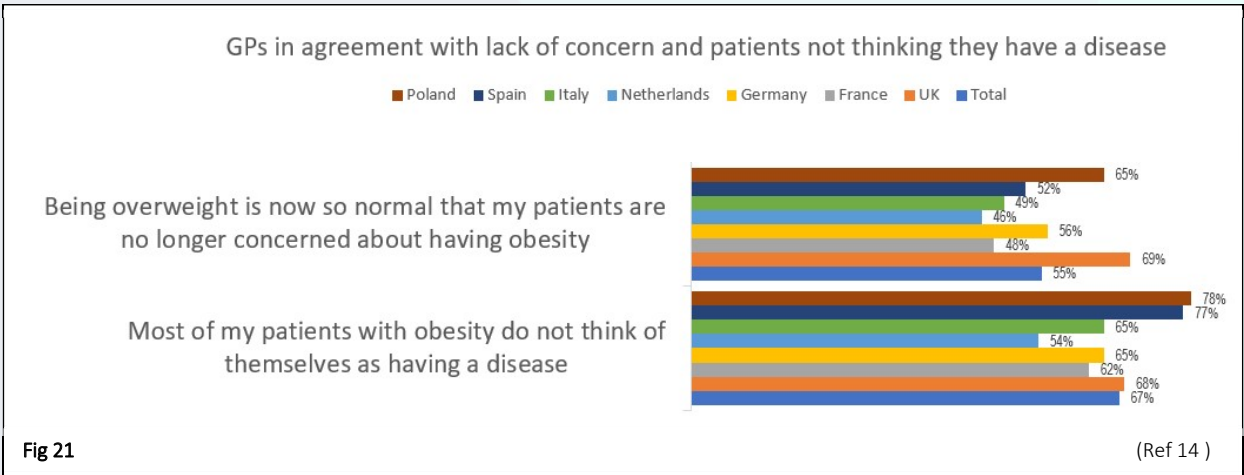


More than half of GPs say that being overweight is now so normal that patients are no longer concerned about obesity

One of the statistics that stood out of the survey, sadly echoes one the findings of a [public perception survey](#) EASO carried out among 14,000 members of the general public in Europe in 2015 showing that people generally underestimate their weight and have little understanding of the consequences.

In this survey, more than half of GPs (55%) confirmed that being overweight is now so common that their patients are no longer concerned about having obesity. The opinion is highest in the UK (69% of GPs), although fairly closely followed by Poland.

67% of the GPs said most of their patients with obesity do not consider themselves as having a disease (Fig 21).

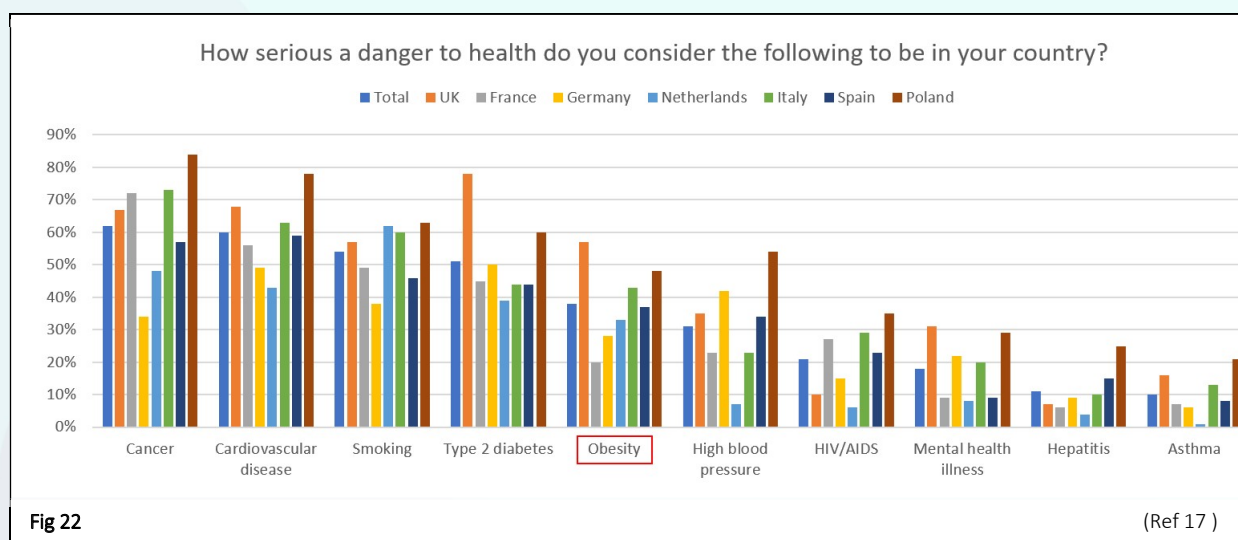


Obesity ranks in the top five most serious dangers to health, say GPs

Almost 95% of the GPs view obesity to be a serious danger to health in their country, to some degree. 38% say that it is very serious.

Overall, it is seen as the fifth most serious danger to health. UK GPs are the most likely to see obesity as a serious danger to health.

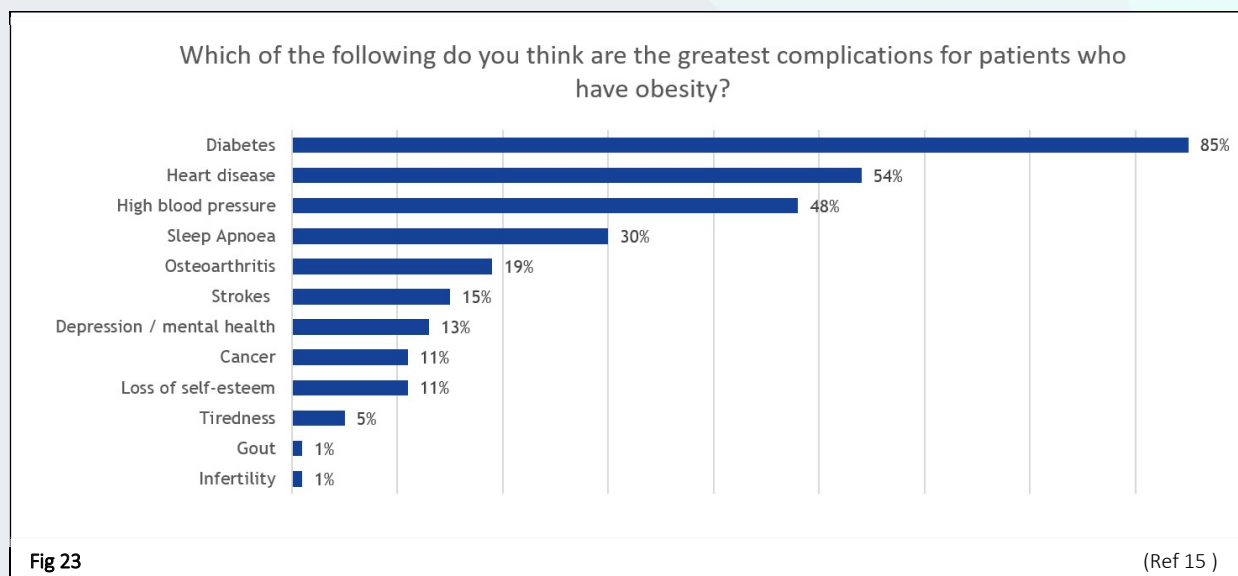
Interestingly, three diseases that commonly result from suffering from obesity – cancer, cardiovascular disease and type 2 diabetes – rank higher than obesity in terms of perceived seriousness (Fig 22).



The perceived seriousness of obesity is highlighted by the fact that 44% of GPs think that obesity shortens someone's life by up to ten years.

GPs see type 2 diabetes as the biggest complication for patients with obesity

85% of the GPs in the survey indicate type 2 diabetes as the biggest complication deriving from obesity, some way ahead of heart disease (54%) and high blood pressure (48%) (Fig 23).

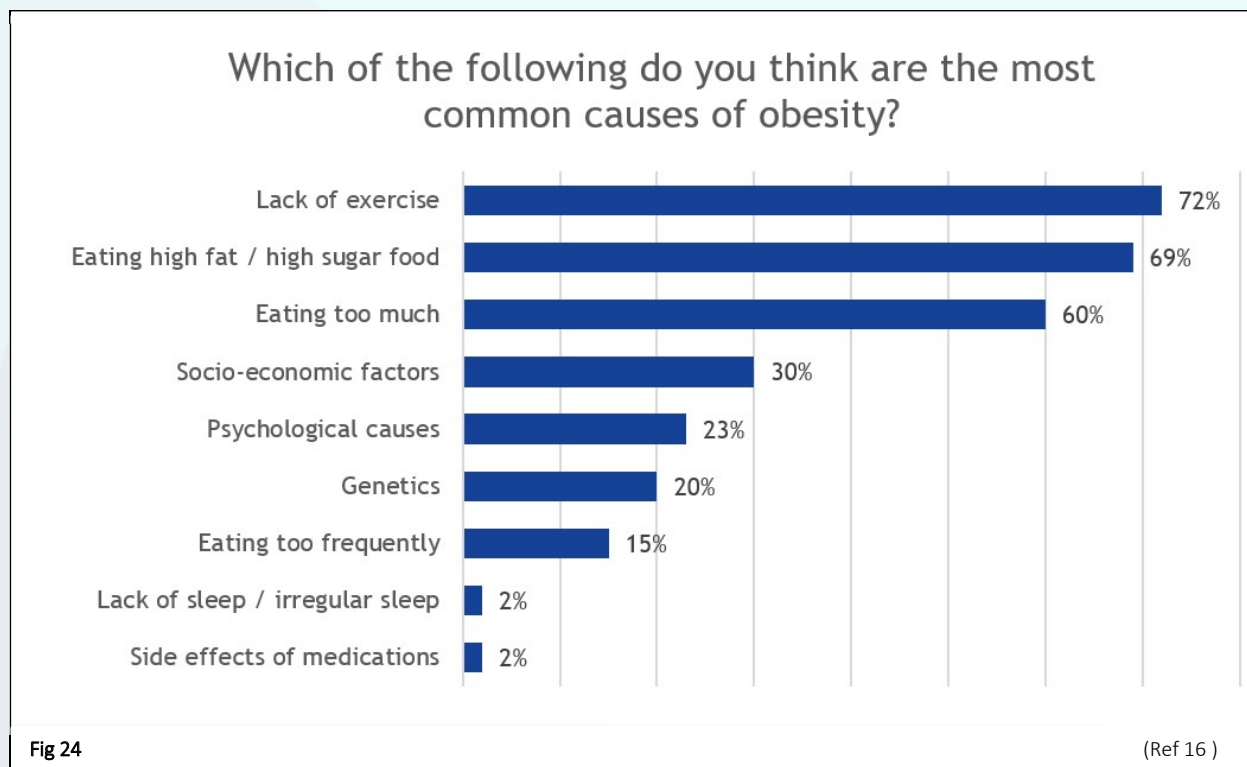


Lack of exercise is seen by GPs as the most common cause of obesity

Most of the GPs interviewed (72%) indicate lack of exercise as being the most common cause for obesity. However, there were national differences. For example, just over half (55%) of French GPs put lack of exercise as the main cause behind eating high-fat, high-sugar foods (58%), and eating too much (57%).

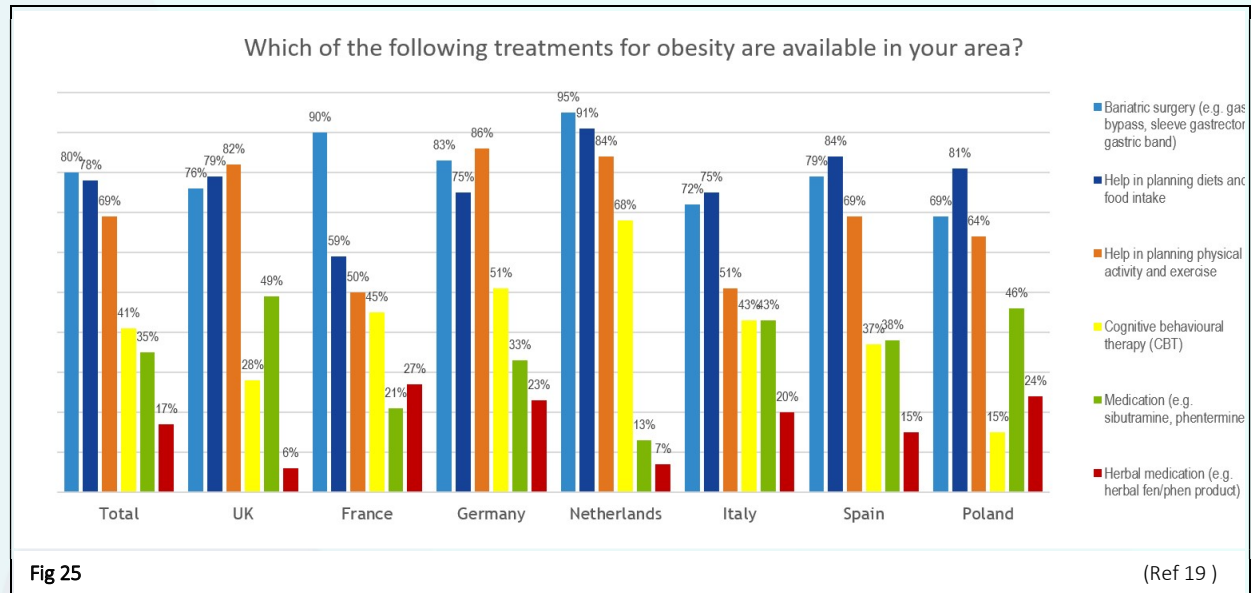
More GPs in Poland than in the rest of the countries consider lack of exercise as the main cause (88%) (Fig 24).

Those who think obesity is a disease are the ones more likely to believe genetics is a common cause of obesity (21% vs 6%).

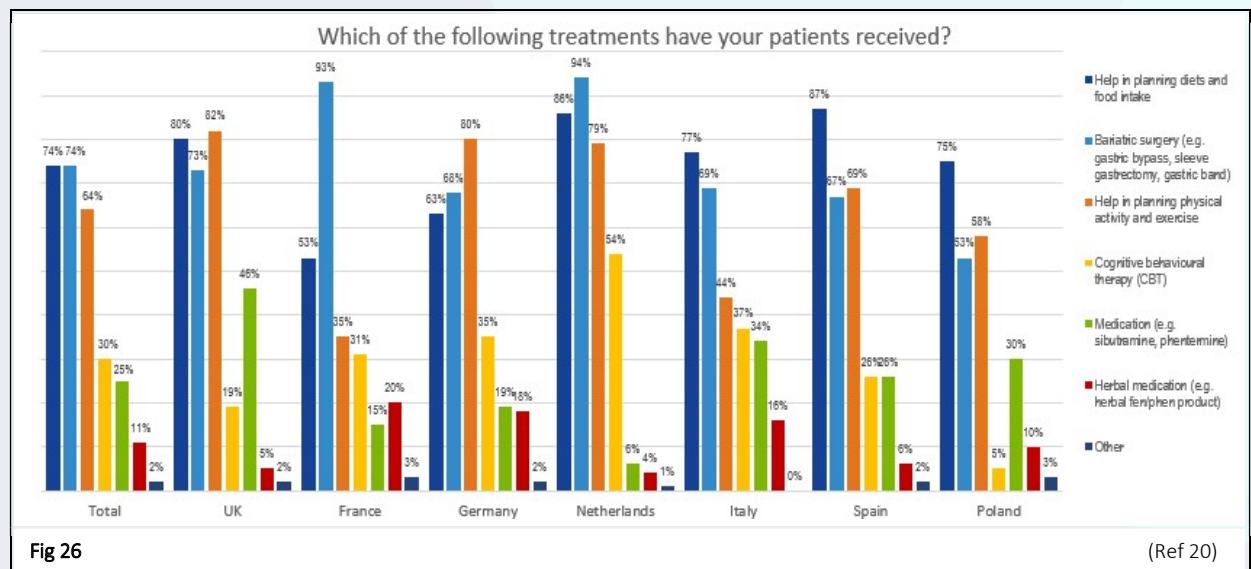


Bariatric surgery, diet planning and physical activity planning are the most commonly available treatments for obesity, according to GPs

Across Europe, GPs consider the most commonly available treatments for obesity to be bariatric surgery (80%) diet planning (78%) and physical activity planning (69%) (Fig 25).



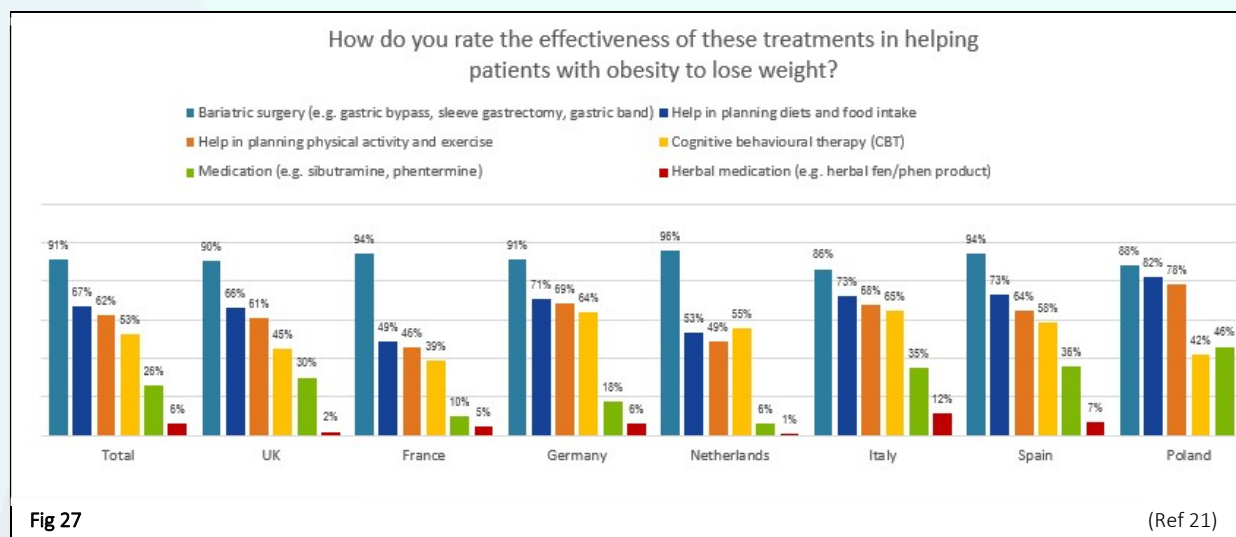
Three quarters (74%) of all the GPs questioned, report that their patients with obesity had received bariatric surgery (Fig 26).



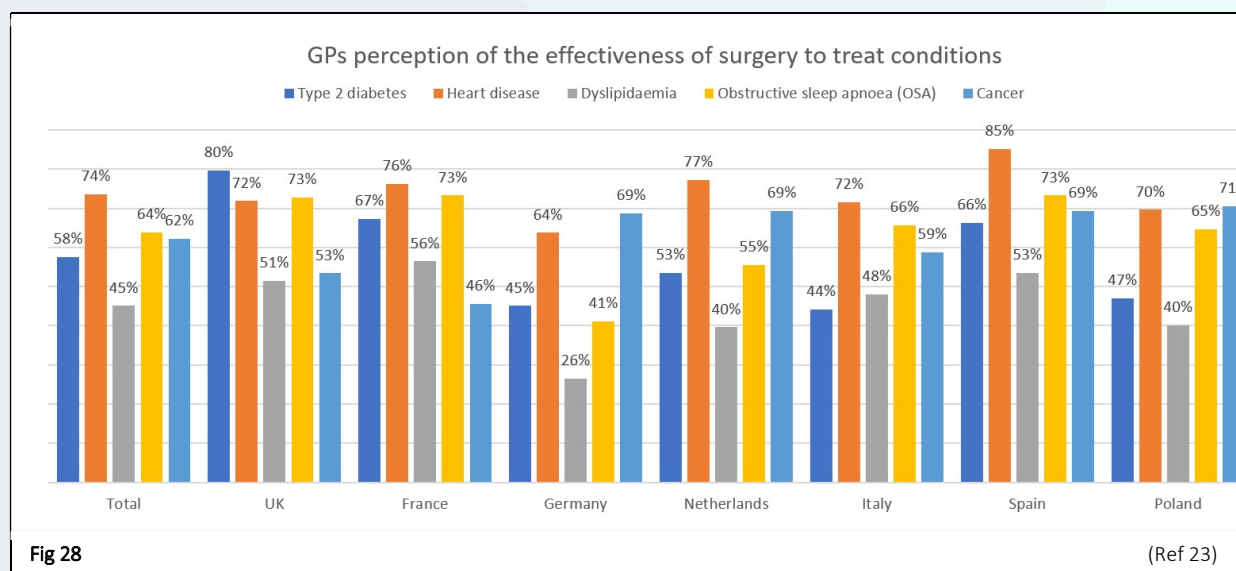
Bariatric surgery seen by GPs as an effective treatment for obesity

91% of GPs reported that bariatric surgery is an effective treatment in helping patients with obesity to lose weight (Fig 26).

Bariatric surgery is seen as being particularly effective by GPs in France and the Netherlands, reflecting the fact that GPs in both countries report the highest availability of bariatric surgery and number of patients having received it (Figs 25, 26 and 27).



Surgery is considered a positive way of treating other diseases and conditions caused by obesity. There are significant variances by country, but overall it is regarded as an effective treatment for heart disease (74% of GPs), type 2 Diabetes (58%) and obstructive sleep apnoea (64%) (Fig 28).

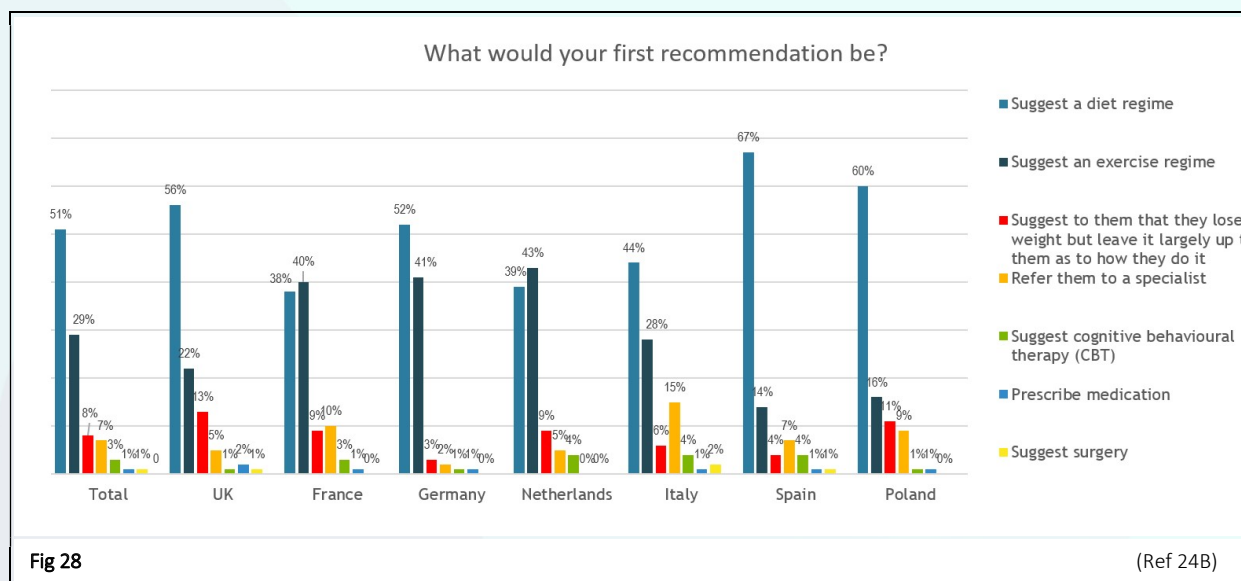


Diet and exercise are the first recommended treatments that GPs suggest

Despite bariatric surgery being seen by GPs as the most effective treatment for obesity, it is almost never the first recommended treatment.

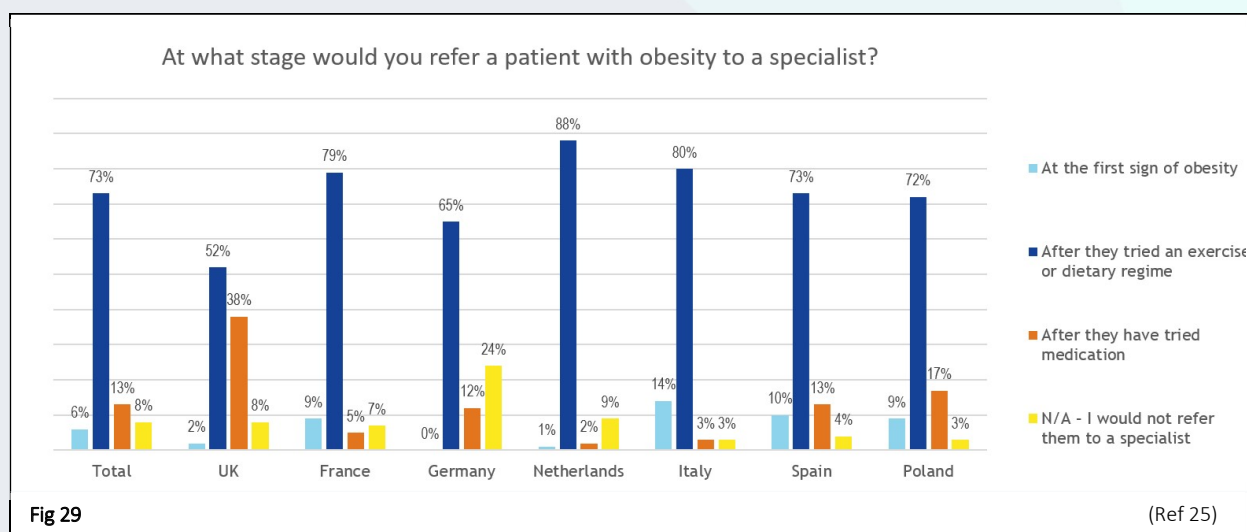
Just over half of GPs (51%) initially suggest a diet regime. This is particularly high in Spain (67%), Poland (60%), and the UK (56%).

Exercise appears as a frequent recommendation of 29% of GPs overall. In the Netherlands and France it is the first recommendation (by 43% and 40% of GPs respectively) (Fig 28).

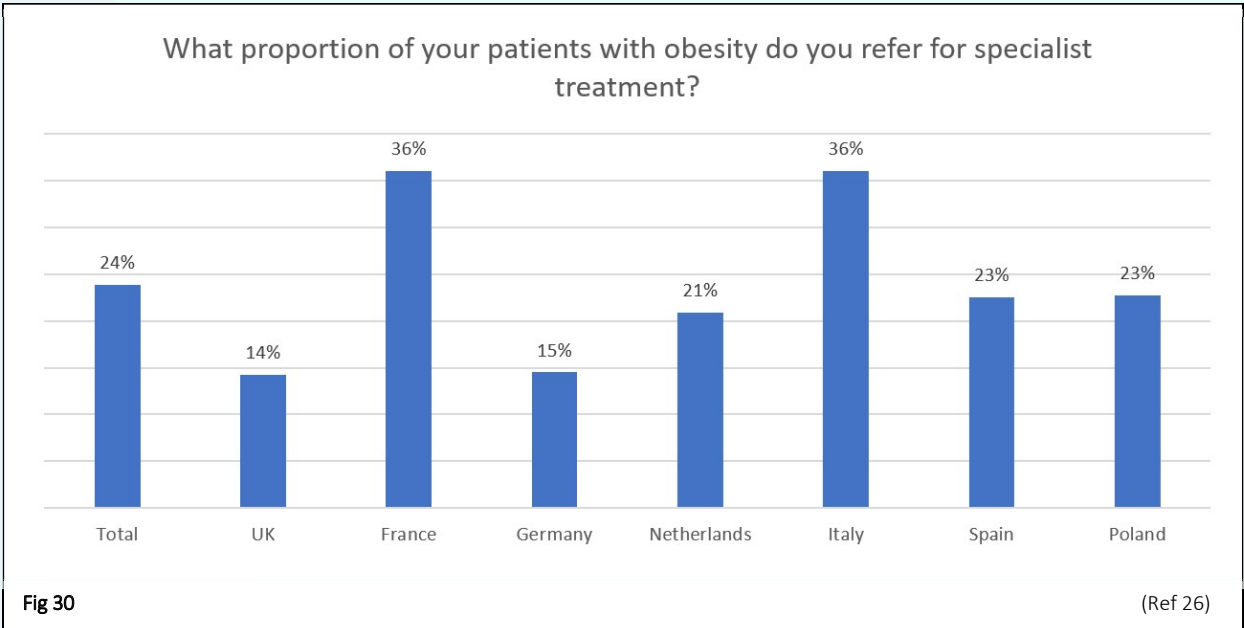


Referrals to specialists

73% of all the GPs say they only refer patients with obesity to a specialist after they have first tried an exercise or dietary regime. However, in Germany almost a quarter of GPs (24%) would not refer them to a specialist at all (Fig 29).

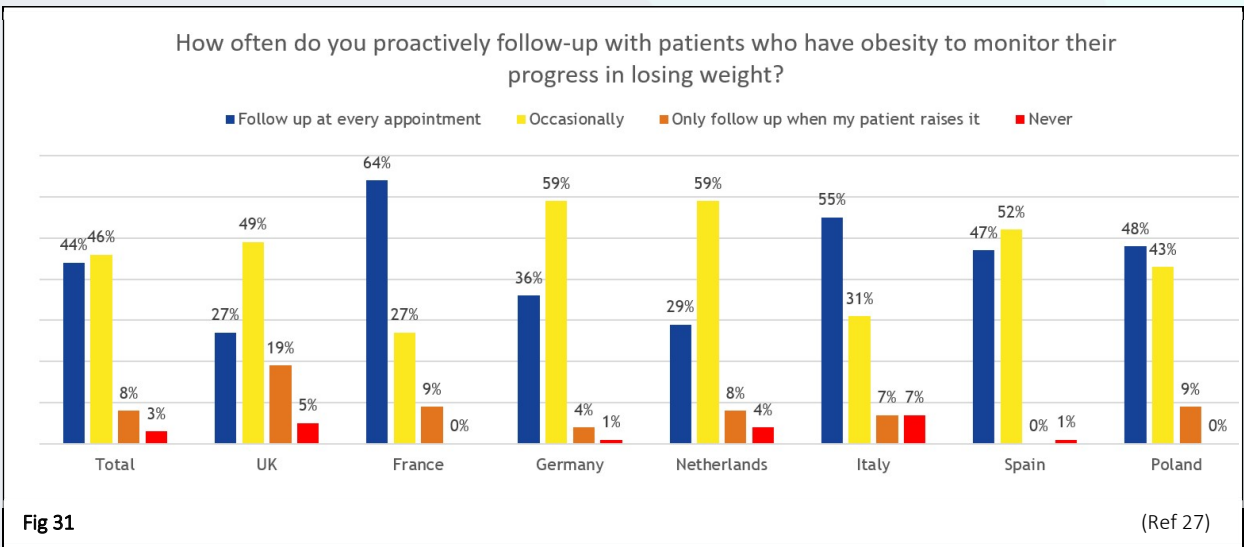


The highest number of referrals to specialists occurs in France and Italy, where GPs refer 36% of their patients compared to the European average of 24%. The lowest number of referrals is found in the UK (14%) (Fig 30).



Some doctors do not follow-up with patients with obesity to monitor their progress in losing weight

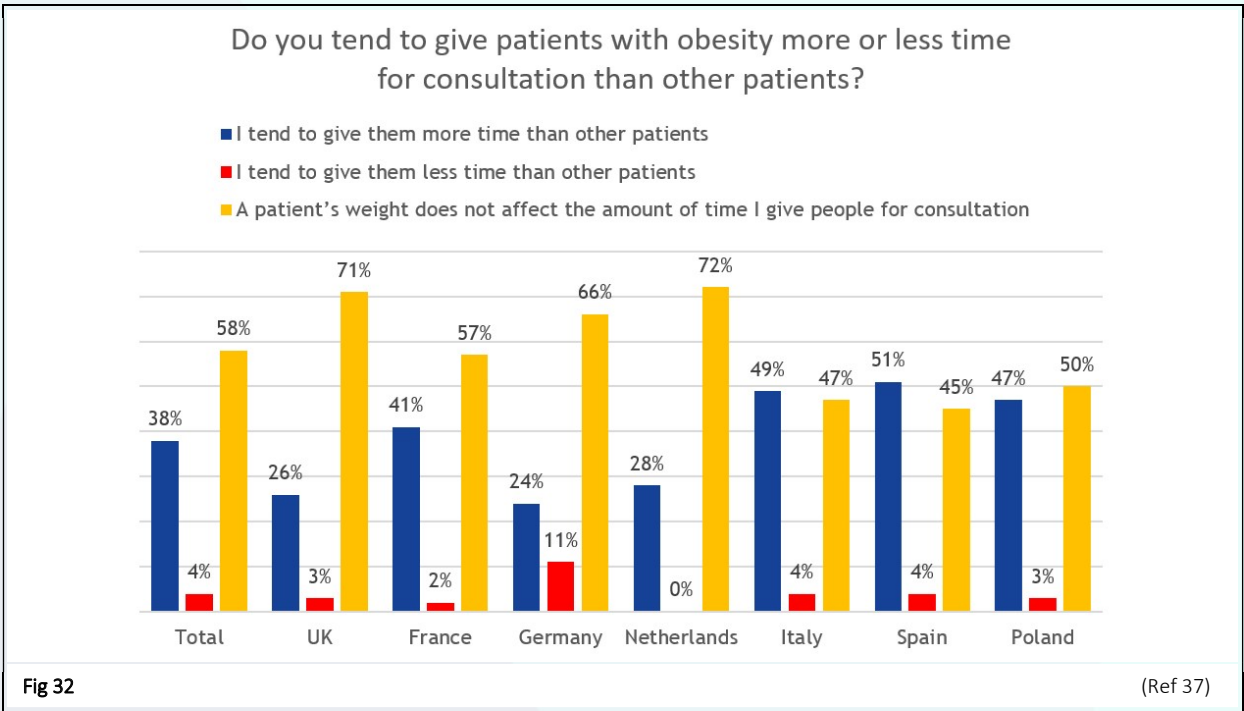
Across the seven countries, a high proportion of GP’s proactively follow up with their patients who suffer from obesity to monitor their progress in losing weight. However, in Italy 7% of GPs say they never follow up, and in the UK 5% never follow up. Follow-up is the highest in France, where 64% of GPs follow up at every appointment. Overall, 90% of GPs follow up at either every appointment or occasionally. (Fig 31).



Are GPs biased when it comes to treating patients with obesity?

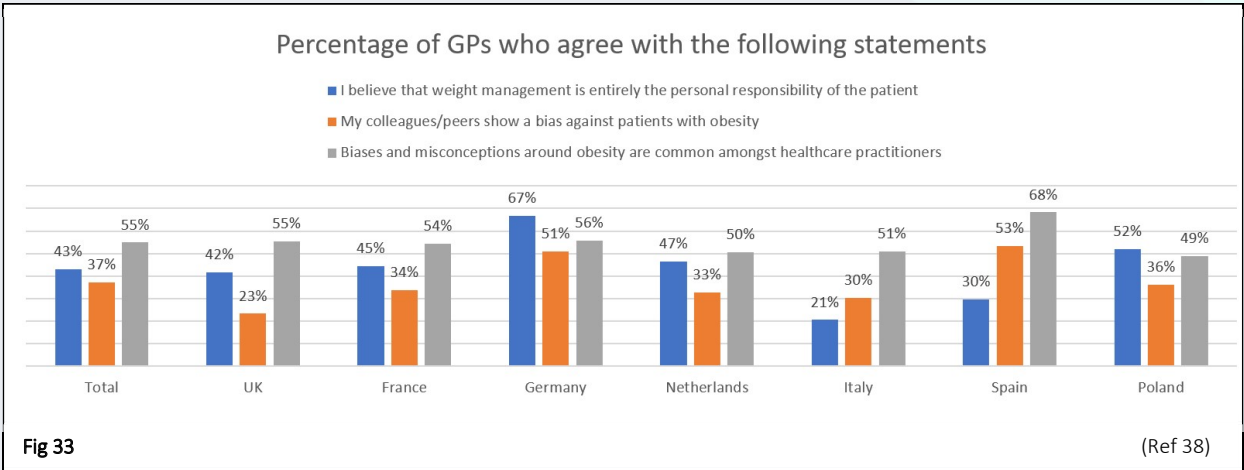
Speaking for themselves, 38% of the GPs say they give patients with obesity more time for consultations compared with other patients. The majority (58%) say that a patient’s weight does not affect the amount of time they give people for a consultation.

There are a percentage – as high as 11% in Germany – who say they dedicate less time to patients with obesity.



However, GPs suggest that more of their colleagues may be showing bias than what they are self-reporting in this survey (Fig 32). Well over a third of GPs (37%) say that their colleagues and peers show a bias against patients with obesity and 55% believe that biases and misconceptions around obesity are common amongst healthcare practitioners (Fig 33).

Large numbers of GPs – particularly in Germany (67%) – believe that weight management is entirely the responsibility of the patient (Fig 33).

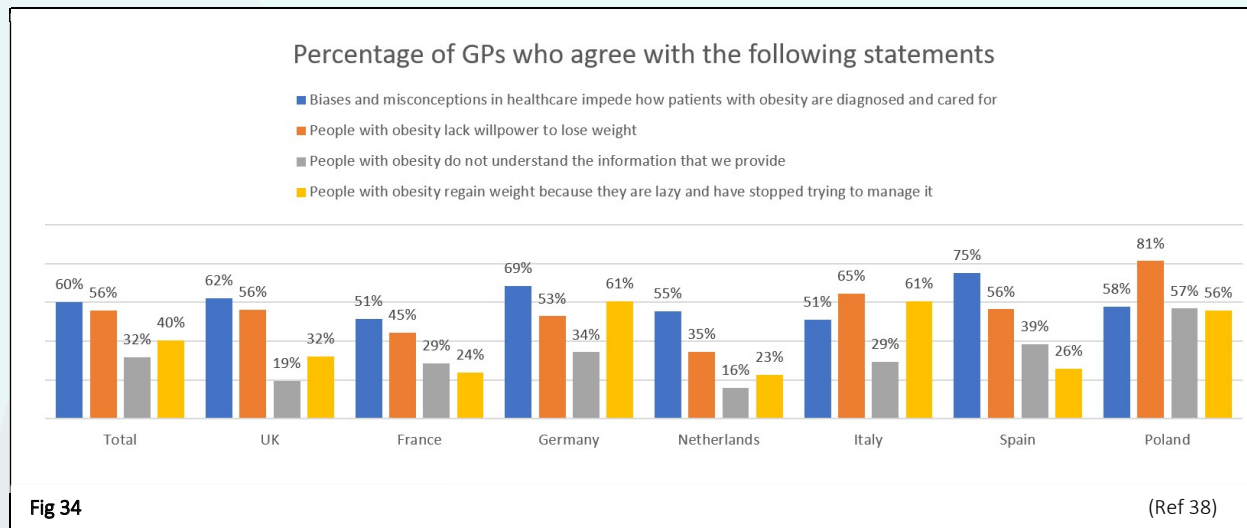


60% of GPs (up to 75% in Spain) say that biases and misconceptions in healthcare impede how patients with obesity are diagnosed and cared for (Fig 34).

56% of GPs (as high as 81% in Poland) say that people with obesity lack the willpower to lose weight.

40% (but as high as 61% in Germany and Italy) say that people with obesity regain weight because they are lazy and have stopped trying to manage it.

32% say that people with obesity don't understand the information that GPs provide to them (Fig 34).





European Association for the Study of Obesity

EASO Secretariat
Level 2
8 Waldegrave Road
Teddington
Middlesex TW11 8GT
UK
www.easo.org
+44 (0) 20 3751 7967
Twitter: @EASOobesity

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