Solving the Puzzle: Utilizing Research and Experience to Better Understand and Address Patient Retention

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Outline

- **Background**
  - Prevalence of pediatric obesity
  - Co-morbidities & associated chronic diseases
- **Multi-disciplinary pediatric weight management clinics**
  - Pediatric weight management clinics in Virginia
  - Children’s Fitness Clinic at UVA Health System
- **Research on challenges**
  - Challenges to retention
- **Practical approaches**
Prevalence

• Children ages 2-19 in the US\textsuperscript{1}
  – 17% have a BMI at or above the 95\textsuperscript{th} percentile
  – 32% have a BMI at or above the 85\textsuperscript{th} percentile

• 17\% of children & adolescents ages 2-19 were obese between 2011-2014\textsuperscript{2}
  – 2-5 year olds: 8.9\%
  – 6-11 year olds: 17.5\%
  – 12-19 year olds: 20.5\%

• In 2014 childhood obesity in Virginia reached 28.5\%\textsuperscript{3}
  – 20\textsuperscript{th} in the country
Figure 5. Trends in obesity prevalence among adults aged 20 and over (age-adjusted) and youth aged 2–19 years: United States, 1999–2000 through 2013–2014

\[\text{Graph showing trends in obesity prevalence among adults and youth}\]


$^2$Test for linear trend for 2003–2004 through 2013–2014 not significant ($p > 0.05$).

NOTE: All adult estimates are age-adjusted by the direct method to the 2000 U.S. census population using the age groups 20–39, 40–59, and 60 and over.

SOURCE: CDC/NCHS, National Health and Nutrition Examination Survey.
Demographics

- Higher rates of obesity and overweight
  - Race
  - Parents degree of education

Figure 4. Prevalence of obesity among youth aged 2-19 years, by sex and race and Hispanic origin: United States, 2011-2014.

- Significantly different from non-Hispanic Asian persons.
- Significantly different from non-Hispanic white persons.
- Significantly different from females of the same race and Hispanic origin.
- Significantly different from non-Hispanic black persons.

Co-morbidities & Associated Chronic Diseases

- Type II Diabetes
- Hypertension
- Dyslipidemia
- Steatohepatitis
- Sleep apnea
- Gallstones
- Orthopedic problems\(^{5-7}\)

![Diagram](https://www.nationalbariatriclink.org/bariatric-blog/obesity/)
Multi-Disciplinary Pediatric Weight Management Clinics

- Comprehensive team\textsuperscript{6}
- Identify specific dietary and lifestyle behaviors\textsuperscript{13}
- Addresses the multi-factorial etiology of pediatric overweight and obesity\textsuperscript{11-12}
- Duration and frequency of visits\textsuperscript{14}
- Individualized interventions
Pediatric Weight Management Clinics in Virginia

- The Children’s Fitness Clinic at The University of Virginia Health System
- The Obesity Institute IDEAL Clinic at Children’s National Health System
- Healthy Lifestyle Clinic at Children’s Hospital of Richmond at VCU
- Children’s Hospital of the King’s Daughters Healthy You for Life Program
Children’s Fitness Clinic at UVA Health System

- Gender
- Mean age
- Mean BMI
- Number of visits
- Race
Research on Challenges

- Scheduling\textsuperscript{15}
- Lack of awareness of severity of health condition\textsuperscript{16}
- Distance from clinic\textsuperscript{16-17}
- Age\textsuperscript{6}
- Mismatched expectations between clinic and patient/family\textsuperscript{6,15}
A Clinician’s Perspective

• Retention rate at the CFC
• Reasons for attrition
  – Life stressors
  – Holidays/vacation
  – Change in insurance/job
  – Scheduling
  – Unpleasant experience
  – Busy schedules
  – School
  – Parents’ work schedules
  – Cost of gas/transportation
  – Lacking variety
Brainstorming Activity

• What are some specific ways to increase retention in the following scenarios?
  – As a clinician
  – Your facility
  – Your community
Conclusion

• Childhood obesity continues to be a complex issue experienced on both the national and state level
• Dietary and lifestyle interventions are necessary for preventing negative health outcomes for children as they grow into adults
• A multi-disciplinary approach offers the most comprehensive care for preventing these potential health conditions
• Maximizing patient retention and overcoming barriers is essential to a successful weight management program
Questions?

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References


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