

Transforming obesity care: Evidence-based guideline for South Africa

The South African (SA) healthcare landscape enters a new era today with the publication of the country's first comprehensive obesity treatment guideline – a watershed moment that promises to transform care for millions of patients across all healthcare settings. Although the conversation is in its infancy, it is a starting point for all healthcare practitioners, together with policymakers and patient representatives, to take hands and improve the health of our nation.

Obesity is defined as a complex chronic disease in which abnormal or excess body fat (adiposity) impairs health, increases the risk of long-term medical complications, and reduces life expectancy.^[1,2] This definition has been accepted by societies worldwide and has informed recent developments locally, for example the founding of the South African Metabolic Medicine and Surgery Society,^[3] a multidisciplinary organisation affiliated to the World Obesity Federation.

The burden of obesity locally is particularly significant, despite the fact that we also face the burden of undernutrition.^[4] SA has one of the highest obesity prevalence rates in sub-Saharan Africa.^[5] Women are disproportionately affected, with an estimated 41% of adult women living with obesity compared with 11% of men.^[6] This situation has profound economic implications.^[7,8] A further challenge is that only a minority of the population has access to privately funded healthcare.^[9,10]

Yet, despite these statistics, and a pandemic likened to the one we faced with HIV,^[11] there has been no national clinical practice guideline available for managing obesity in SA to date.

Traditionally, obesity has been defined using the body mass index (BMI), calculated as weight in kilograms divided by the square of height in metres (kg/m^2).^[12] Epidemiological and population studies make use of the BMI as a criterion to assess obesity-related health risks at a population level. However, at the individual level, the BMI has significant limitations; it may either underestimate or overestimate body fat, and often fails to provide a comprehensive picture of metabolic health. Recent developments have moved beyond this classification, suggesting incorporation of the assessment of excess body fat, with estimates of adipose-related disease.^[13] There is much work to be done to define the concepts further, especially in the local population.

National strategies such as the Strategy for the Prevention and Management of Obesity are centred around a comprehensive approach to addressing the rising prevalence of obesity and its associated health complications.^[14,15] This includes promoting healthier lifestyles through public awareness campaigns, improving access to nutritious food, encouraging physical activity, and implementation of regulatory measures such as the taxation of sugar-sweetened beverages to reduce consumption. The aim remains to combat stigma and ensure equitable access to obesity prevention and treatment services for all South Africans.^[16]

A widespread misconception is that obesity is solely the result of personal failure – that it is a matter of choice and can simply be resolved by eating less and moving more. This is an oversimplification, and the misconception also contributes to weight bias and stigma.^[17] However, science has clearly refuted it.^[18,19]

Recent advances in the management of obesity go beyond preventive measures and involve a multimodal treatment approach to address root causes of the disease.^[20] Strategies utilising pharmacological

treatment options or metabolic and bariatric surgery, combined with comprehensive lifestyle intervention (medical nutrition therapy, physical activity and psychological support to maintain optimal health), are the mainstay of treatment. Since treatment options have recently been expanded in SA with the registration of new pharmacological agents, the need for a treatment guideline and a strong, unified approach has been emphasised.^[21]

Obesity Canada, viewed as a leader in the field of obesity, published a comprehensive clinical practice guideline for the management of obesity in adults in 2020 following an extensive consultation and review process.^[20] The guideline has been adapted in other countries.^[22,23] This process, deemed most feasible, was initiated by a group of local leaders in the field to tailor the Canadian guidelines for SA, bearing in mind our unique epidemiological and socioeconomic characteristics and healthcare system (manuscript in preparation).

Although significant challenges remain – including cultural acceptance of obesity and the prevalence of comorbid conditions such as HIV^[24] – the stage is set for enhanced obesity care across SA.

The publication of the *Clinical Practice Guideline for the Management of Obesity in Adults in South Africa* in this issue of the SAMJ marks the dawn of a new era in the management of this complex and far-reaching disease.

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