

### Obesity Scrutiny Report- 15 December 2009

#### Adult obesity – NHS Leeds

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#### Prevalence in Leeds

The scale of the problem in Leeds is difficult to quantify with great accuracy, especially for adults. The QOF recording BMI in GP practice as well as the data being collected from school children through the National Child Measurement Programme will give a more accurate indication in the future, although existing data appears to be in line with regional estimates.

Estimates are currently based on Health Survey for England 2003 data with the estimated prevalence for obesity in Leeds being 23.8% in women and 22.7% of men. Based on this prevalence data we can conservatively estimate that for the population Leeds approximately 154,000 people would be expected to be obese (BMI of 30kg/m<sup>2</sup> or more). This figure is not weighted for deprivation but it should be noted men and women from unskilled manual groups are 4 times more likely to be obese than professional groups. Significant additional numbers are overweight.

The Yorkshire and Humber region has the highest prevalence of obese men and young men. Obesity in women (at 23.8%) is higher than the England average and the second highest across all regions. According to the recent Foresight report, the region has the highest predicted growth rate of obesity prevalence, if current trends continue, it is predicted that 36% of men and 28% of women will be obese by 2015 (Foresight 2007) with 70% of the population obese by 2050, which would make Yorkshire and Humber the fattest region in the country.

#### Costs

Estimated costs to the NHS in Leeds of diseases related to overweight and obesity were 197.4 million in 2007 and predicted to be 204.9 million by 2010 (Healthy weight, Healthy Lives toolkit 2008). National costs by 2050 are predicted to be 6.5 billion and pose the single biggest threat to the NHS. Obesity is the second most important preventable cause of ill health and death after smoking.

#### National Direction / Approach

The National strategy "Healthy Weight, Healthy Lives, HMSO 2008" aims:

***"To reverse the rising tide of obesity and overweight in the population by ensuring that all individuals are able to maintain and healthy weight. Our initial focus is on children: by 2020 we will have reduced the proportions of overweight and obese children to 2000 levels."***

Although initial focus of the strategy is children; however there are there are key challenges to tackle adult obesity.

#### Contribution of NHS Leeds

NHS Leeds is tasked with delivering Healthy Ambitions Staying Healthy in Yorkshire and Humber Pathway. Staying Healthy has 5 recommendations directly relating to obesity. Delivering on these pathways is a priority for NHS Leeds. An update on progress against each recommendation related to obesity is provided below:

Progress against Healthy Ambitions recommendation 6 & 7

***Every PCT should commission localised weight management services for their local population including obesity surgery. To meet life expectancy targets these should focus on adults at mid life following a smoking cessation model of implementation.***

<p>Local weight management services are commissioned from Leeds Community Care Trust. The service provides tier 1 and 2 services as well as assessment for tier 3 specialist obesity surgery services. Level 1 consists of a structured multifaceted weight management programme with ongoing physical activity opportunities delivered in partnership with both leisure services and VCFS organisations in local venues. Services are currently available to people registered in 38 of the 42 targeted GP practices in deprived Leeds and 21 in the previous North West PCT area (where the service was originally established). Self referral to group programmes is available.</p>
<p>Take up of services is consistent with that of smoking cessation services. Weight loss results are comparable to equivalent interventions in other parts of the Region.</p>
<p>Tier 2 services are weight management clinics targeting high risk individuals (higher BMI's, complex co-morbidities, using prescribed anti obesity medications to little effect). This offers tailored advice, and more intensive motivational interviewing, cognitive behavioural therapy and solution based approaches to behaviour change. This also is the level providing bariatric surgery assessment and work up for those meeting regionally agreed criteria.</p>
<p>NHS Leeds and LTHT have contributed heavily to the Regional Specialist Commissioning Group work to develop a commissioning policy and designation process for obesity surgery across the Region. The pathway, triage model and referral proforma adopted regionally are based on service development work undertaken between NHS Leeds and LTHT.</p>
<p>An assessment and triage system is in place through the community weight management service, which is working to restricted criteria B as defined by SCG. (B= BMI 50 or 45 with co-morbidities). Patients are able to choose from a range of designated providers including LTHT, Spire, Bradford, and York.</p>
<p><b>Progress against Healthy Ambitions recommendation 8: <i>NICE guidance on brief interventions should be implemented consistently by a wide range of staff; ideally this would include primary and secondary care staff, community services, locally authority and voluntary settings.</i></b></p>
<p>NHS Leeds is committed to a delivering a healthy living services project which aims to implement a whole system approach to brief interventions in primary care, followed by systematic referral and signposting to healthy living services and opportunities. This will include interventions around smoking, weight management, alcohol and physical activity. The initial focus will be individuals identified through NHS Health Check performed in the 42 target practices in the most deprived wards in Leeds.</p>
<p><b>Progress against Healthy Ambitions recommendation 10: <i>There should be a systematic programme of local work to reduce levels of obesity through the development of:</i></b></p> <ul style="list-style-type: none"> <li>- <b><i>Food policy and better food skills for adults</i></b></li> <li>- <b><i>Transport and the built environment making activity easier and safer</i></b></li> <li>- <b><i>More opportunities for active leisure</i></b></li> </ul>
<p>Leeds has a city wide food strategy "Leeds Food Matters" which includes actions around increasing access to programmes which support the development of food skills. NHS Leeds commissions 56 cooking skills courses from VCFS. Planned work for 2010 is the development of a Ministry of Food "Food centre" and health point in Kirkgate Market and the promotion of the "Cook 4 life" aspect of the change 4 life campaign.</p>
<p>Transport and health are both signed up to the delivery of "Active Leeds a Healthy City". There is a workshop planned for February 2010 to look at closer working between health and planning. This is an area which has the potential to make the biggest impact on reducing the rate of increase in obesity and increase the effectiveness of weight management "treatments" by developing an environment conducive to being a healthy weight. This is the least developed area concerning tackling obesity and needs considerable strengthening.</p>

NHS Leeds and Leeds City Council are jointly committed to Active Leeds and the strategic priority to increase activity for all. Please see report from Leeds Leisure Services. Beyond leisure services, the PCT commissions a number of activity opportunities from local agencies. For example Leeds has an active network of walking programmes being delivered targeting at risk populations.

### **Conclusion**

Good progress is being made to address obesity and provide interventions to those struggling with overweight and obesity. However there needs to be considerable strengthening and focus of action to address how the environment in Leeds supports achieving and maintaining a healthy weight. This is required to reduce the rate of increase in obesity and to enable treatment interventions to be effective in the long term.