

## Correspondence

### Re: Primary Care Patients' Willingness to Participate in Comprehensive Weight Loss Programs: From the WWAMI Region Practice and Research Network

*To the Editor:* The article by Cole et al<sup>1</sup> about primary care patients' willingness to participate in comprehensive weight loss programs is progressive in addressing a major health problem, yet some areas need improvement. One objective of this study was to determine patient characteristics associated with willingness to participate in these programs. The investigators failed to include 2 important factors in their survey: income and educational level. According to the Centers for Disease Control and Prevention, (1) among Mexican American and non-Hispanic black men, those with higher incomes are more likely to be obese than those with lower incomes, (2) women with higher incomes are less likely to be obese than women with lower incomes, and (3) women with college degrees are less likely to be obese than women with lower educational levels.<sup>2</sup>

Another issue is the single delivery method of the survey, that is, article format. Investigators may have lost a population of patients who may not be able to read or write well (eg, less educated people, older adults) as a result of the lack of assistance in reading the survey. They also may have lost those who are more technologically advanced. Also, clinical staff offered the surveys to patients, which may have made patients feel obliged to take the survey. Some patients may have felt that the quality of their clinical care would be affected by not participating in the clinic-offered survey.

Next, the investigators aimed to identify potential facilitators and barriers to participation in comprehensive weight loss programs, but identified only the facilitators. They asked patients to mark the top 3 of 8 listed potential factors, yet these factors were all positive and did not identify barriers to participation.

In the discussion, the investigators explained that the Patient Protection and Affordable Care Act requires insurance companies to provide coverage for obesity treatment. This study included participants who were overweight, obese, and extremely obese. Yet, the sample included participants who were considered "at risk" but not obese. Therefore, this group should be excluded from the analysis in order for the results to pertain to patients who qualify for obesity treatment.

While this article was an advancement in the understanding of primary care patients' willingness to participate in comprehensive weight loss programs, all associated factors in the health outcomes were not assessed. These factors are necessary to tailor parsimonious and

appropriate comprehensive weight loss programs for primary care patients.

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*To see this article online, please go to: <http://jabfm.org/content/30/2/264.full>.*

### References

1. Cole AM, Keppel GA, Andrilla HA, Cox CM, Baldwin LM; WWAMI (Washington, Wyoming, Alaska, Montana, and Idaho) Region Practice and Research Network (WPRN) Patient Preferences for Weight Loss in Primary Care Development Group; The WPRN Practice Champions. Primary care patients' willingness to participate in comprehensive weight loss programs: from the WWAMI Region Practice and Research Network. *J Am Board Fam Med* 2016;29:572–80.
2. Centers for Disease Control and Prevention. Adult obesity facts. Available from <https://www.cdc.gov/obesity/data/adult.html>. Updated September 1, 2016. Accessed October 27, 2016.

doi: 10.3122/jabfm.2017.02.160353

The above letter was referred to the author of the article in question, who offers the following reply.

### Response: Re: Primary Care Patients' Willingness to Participate in Comprehensive Weight Loss Programs: From the WWAMI Region Practice and Research Network

*To the Editor:* We appreciate the thoughtful comments from Fe Garcia Agana with regard to our recent article.<sup>1</sup> Fe Garcia Agana notes that our instrument did not assess patient income or education level as variables associated with reported willingness to participate in comprehensive weight loss programs. We agree that these patient factors are associated with risk of obesity within racial and ethnic groups, and may be important in predicting reported willingness to participate in comprehensive weight loss programs. We also acknowledge that offering the questionnaire only in written format may have limited or favored participation for certain groups.

In our project, we used a card study methodology, an established method for collecting observational data in