

Medical Nutrition Therapy for the Treatment of Obesity in WV- Changes and Challenges

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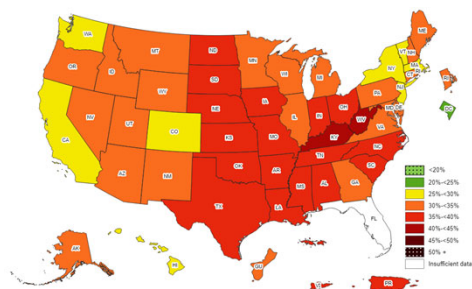


CME Disclosures

No disclosures.



Obesity By State- 2021 CDC



Highest:

1. West Virginia- 40.6%
2. Kentucky- 40.3%
3. Alabama- 39.9%
4. Oklahoma- 39.4%
5. Mississippi- 39.1%

Lowest:

1. Washington, DC- 24.7%
2. Hawaii- 25%
3. Colorado- 25.1%
4. Massachusetts- 27.4 %
5. California- 27.6 %

**Virginia- 34.2% **

Bariatric Surgery Centers by State



Bariatric Surgery Center

3 results found

BARIATRIC SURGERY CENTER Cabell Huntington Hospital 1340 Hal Green Blvd., Huntington, WV 25701 Comprehensive Center	BARIATRIC SURGERY CENTER Charleston Area Medical Center 501 Morris Street, Charleston, WV 25301 Comprehensive Center with Adolescent and Obesity Medicine Qualifications	BARIATRIC SURGERY CENTER Preston Memorial Hospital 150 Memorial Drive, Kingswood, WV 26037 Comprehensive Center
BARIATRIC SURGERY CENTER West Virginia University Hospital - J.W. Raub Memorial Hospital Bariatric Surgery - WVU Department of Surgery 1 Medical Center Drive		

Bariatric Surgery Center

21 results found

BARIATRIC SURGERY CENTER Bon Secours Mary Immaculate Hospital 2 Bon Secours Drive, Newport News, VA 23602 Comprehensive Center	BARIATRIC SURGERY CENTER Bon Secours St. Mary's Hospital 1001 Bon Secours Road, Richmond, VA 23228 Comprehensive Center	BARIATRIC SURGERY CENTER Bon Secours Surgical Weight Loss - Maryview Med.Ctr 3026 High Street, Portsmouth, VA 23707 Comprehensive Center
BARIATRIC SURGERY CENTER Cabell Huntington Hospital 1340 Hal Green Blvd., Huntington, WV 25701 Comprehensive Center	BARIATRIC SURGERY CENTER Carilion Roanoke Memorial Hospital 1906 Bellevue Ave., Roanoke, VA 24014 Comprehensive Center with Adolescent	BARIATRIC SURGERY CENTER Centra - Lynchburg General Hospital 1901 Tate Springs Road, Lynchburg, VA 24507 Comprehensive Center

ACS

Registered Dietitians Nutritionists by State

West Virginia- (392) 1:1,827
Kentucky- (1,354) 1:1,344
Alabama- (1,508) 1:1,349
Oklahoma- (1,175) 1:1,347
Mississippi- (814) 1:1,407

Washington, DC- (234) 1:712
Hawaii- (441) 1:812
Colorado- (2,794) 1:526
Massachusetts- (3,093) 1:617
California- (11,554) 1:961

*Virginia- (2,569) 1:1,159

CDR

West Virginia

- Highest rate of Obesity in the US at 40.6% in 2021
- Relatively few options for surgical intervention within the state
- Limited access to nutrition care

Changes that Impact RDN Practice in WV

- RDN shortages
- Increased volume of cases
- Increased need for follow up
- COVID
- New medications

RDN Shortage ?

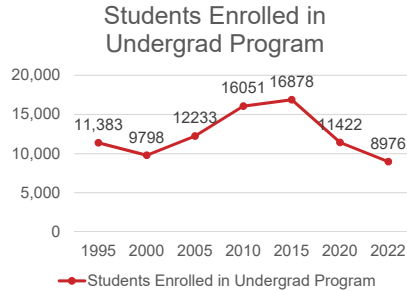
- Degree in dietetics from accredited University or College
- Complete an accredited supervised practice program with 1000+ hours clinical, community & other rotations
- Pass a national examination administered by CDR

Changes:

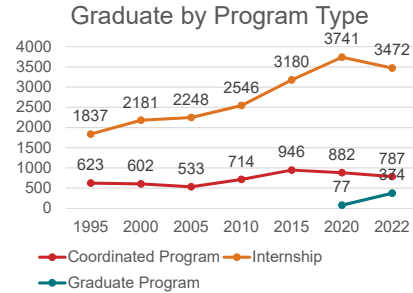
- **Effective January of 2024, must have a minimum of Master's degree to sit for exam**
- **General shortage of Health Care workers after COVID**

Dietetic Student Enrollment

**DPD Program
(bachelor's degree)**



Internships & Coordinated Programs



ACEND



What Does the Future Hold?

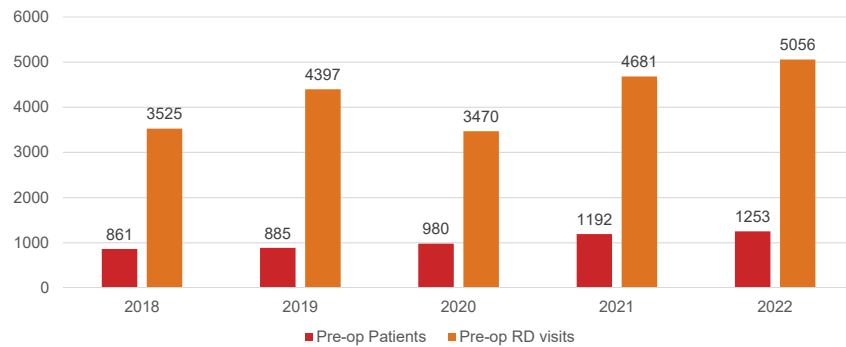
April Match	2015	2020	2021	2022	2023
Openings	2864	3667	3723	3736	3587
Applicants	5192	3848	3676	3482	1984
Matched 1 st round(%)	2608 (50%)	2713 (71%)	2675 (73%)	2575 (74%)	1695 (85%)
Unfilled	256	954	1048	1161	1892

- 61% reduction in internship applicants since 2015
- 43% reduction in internship applicants since 2022
- Staffing Issues

ACEND



Increase in Patient Volume- RD visits



Higher Volume of Follow Ups

- Scheduled to see RD before post-op d/c & at 3 mo post-op
 - 300 scheduled for 3-mo post-op visits in 2017-2018
 - 464 in 2022-2023
- Increase in revisions / 2nd procedures
- Weight recurrence
 - Behavioral Therapy using MI as treatment?
 - goal setting, self monitoring, and stimulus control
 - Frequent, long-term patient-provider contact, following initial weight loss, is possibly the most successful method of preventing weight regain *Wing RR, Hill JO. Successful weight loss maintenance. Annu Rev Nutr. 2001;21:323-341.*

COVID- Virtual Visits

- **Transition to virtual platforms for group nutrition classes vs. in-person sessions**

- | | |
|--|---|
| <ul style="list-style-type: none"> + Able to see higher volume of patients + More patient friendly in rural state + Reduced cost of time & travel expenses on patient end | <ul style="list-style-type: none"> -Less patient centered care -Less patient engagement -Multitasking? |
|--|---|

COVID- Weight Gain

- 2022 Study- 48% of subjects gained weight, 34% neutral, 18% lost.
 - Gain higher in those who reported depression/anxiety
 - Those who were very overweight prior to pandemic were more likely to gain

WVU Medicine July	Average BMI of patients	Median BMI of patients
2017-2018	47.57	46.49
2022-2023	48.78	47.95

Khubchandani J, et al COVID-19 pandemic and weight gain in American adults: A nationwide population-based study Diabetes Metab Syndr. 2022 Jan;16(1):102392

COVID- Food Insecurity

West Virginia
Supplemental Nutrition Assistance Program
February 13, 2023



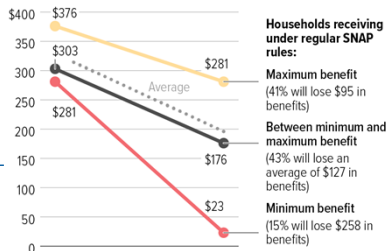
The Supplemental Nutrition Assistance Program (SNAP) is the nation's most important and effective anti-hunger program. Congress made many temporary improvements to SNAP during the COVID-19 pandemic to take advantage of the program's ability to deliver benefits quickly in response to job and income losses, including by authorizing emergency allotments and certain eligibility and administrative changes. These changes have either already ended or will expire when the public health emergency ends on May 11, 2023. Emergency allotments are set to expire nationwide at the end of February 2023.

Whom Does SNAP Reach?

In fiscal year 2022, it helped:

- **310,900** West Virginia residents, or **18%** of the state population (**1 in 6**)
- **41,206,900** participants in the United States, or **12%** of the total population (**1 in 8**)

Losses Will Vary Across Households, But Average 1-Person Household Will Lose \$132 When SNAP Emergency Allotments End



Note: Figures may not add up to 100 percent due to rounding.
Source: Estimates based on CBPP analysis of fiscal year 2019 SNAP Household Characteristics data with income and expenses inflated to fiscal year 2023 values

CENTER ON BUDGET AND POLICY PRIORITIES | CBPP.ORG

- Average regular SNAP benefit when EAs ended: \$9.00 per person per day to about \$6.10



Medications- GLP-1 Agonists

Benefits:

- Create a referral to the Medical Weight Management Group
 - Weight loss prior to surgery for high BMIs
 - New route for weight recurrence
 - Allows WLS RD visits to have a surgery focus

Challenges:

- Long wait list to see Med Weight Group
- Drug Shortages
- Insurance limitations
 - No coverage for Medicaid pts unless hx DM
 - Public Employee Insurance only cover if rx'ed by designated providers
 - Commercial Insurances carve out obesity treatment as a covered benefit



Challenges & Changes in WV

- Are we unique?
 - Increased need with fewer options for surgical treatment
 - Challenges with staffing RDNs
 - COVID
- Adapting to challenges is a work in progress
 - Virtual class visits- interactive homework??
 - Telephone follow-ups
 - Expansion of Med Weight Management Program
 - Future collaborations with other programs