



## RESEARCH NEWS

# A 12 month weight loss programme would be cost effective for NHS, study finds

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GPs should refer overweight or obese adults to weight loss programmes for 12 months rather than the standard three months, researchers have recommended.<sup>1</sup>

A study published in the *Lancet* reported that people referred to 52 week weight loss programmes lost more weight and experienced more clinical benefits than people who followed a 12 week programme or used self help materials.

Although a 52 week behavioural programme would be more expensive than the standard three months offered through the NHS, the study found that improvements in quality of life would be cost effective in the long term.

The randomised control trial, conducted by researchers from several institutions around the UK, assigned 1267 overweight or obese participants to one of three groups: a brief intervention through advice and self help materials (n=211), a 12 week weight management programme (n=528), or the same weight management programme for 52 weeks (n=528).

Some 823 participants (65%) completed an assessment at one year, and 856 participants (68%) completed an assessment at two years. Participants were aged 18 or older with a body mass index of 28 or higher. They were recruited from 23 primary care practices in England from 18 October 2012 to 10 February 2014 and were followed up for two years.

At one year the mean weight changes in the groups were: -3.26 kg in the brief advice and self help group, -4.75 kg in those who completed the 12 week programme, and -6.76 kg in the 52 week group.

Researchers found that participants in the behavioural programme lost more weight than those in the brief intervention group (adjusted difference -2.71 kg (95% confidence interval -3.86 kg to -1.55 kg); P<0.001) and that the 52 week programme was more effective than the 12 week programme (-2.14 kg (-3.05 kg to -1.22 kg); P<0.001). The study reported that the differences between the groups were significant at two years.

Using microsimulation modelling the researchers estimated that, after 24 months, the incremental cost effectiveness ratio (ICER;

compared with brief intervention) was £159 (€188; \$205) per kg lost with the 52 week programme and £91 per kg lost with the 12 week programme.

Employing the same modelling to predict the cost effectiveness of each approach over a 25 year period, the 52 week programme was cost effective when compared with the brief intervention (ICER £2493 per quality adjusted life year (QALY)) and the 12 week programme (£3804 per QALY).

When compared with the brief intervention, researchers estimated that the 12 week programme would result in 623 fewer incident cases of weight related disease (including hypertension, diabetes, and heart disease), 643 additional QALYs, and a saving of around £2.68 a person over 25 years.

When compared with the 12 week programme, the 52 week programme would result in 1786 fewer incident cases of weight related disease and would generate 1282 additional QALYs, at a cost of around £49 a person over 25 years.



1 Ahem AL, Wheeler GM, Aveyard P, et al. Extended and standard duration weight-loss programme referrals for adults in primary care (WRAP): a randomised controlled trial. *Lancet* 2017. doi:10.1016/S0140-6736(17)30647-5.

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