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What obese and non-insulin dependent diabetes mellitus patients experience and expect from their primary care doctors concerning weight-loss management

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WHAT OBESE AND NON-INSULIN DEPENDENT DIABETES MELLITUS PATIENTS EXPERIENCE AND EXPECT FROM THEIR PRIMARY CARE DOCTORS CONCERNING WEIGHT-LOSS MANAGEMENT.

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A research report submitted to the Faculty of Health Sciences, University of Witwatersrand, Johannesburg, in partial fulfilment of the requirements for the degree of Masters of Family Medicine.

Johannesburg 2008

DECLARATION

I, Zuneid Ahmed Bham declare that this research report is my own work. It is being submitted for the degree of Master of Family Medicine in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at this or any other University.

…… Signature

……. Day of …….. 200…..

Dedicated with love and gratitude
to my parents Ahmed and Fatima Bham,
my wife Aasiya, and
my two children Ahmad and Ayesha

Abstract

Worldwide, obesity prevalence is rapidly rising. Doctors have poor understanding of what patients experience and expect from them regarding weight-loss management. This qualitative study explored what obese patients with Non-insulin Dependent Diabetes Mellitus experience and expect from their primary care doctors concerning weight-loss management. Free attitude interviews were conducted with eight participating patients.

The findings showed that doctors encouraged and counselled patients regarding weight-loss, mainly giving dietary advice, but did not routinely weigh them.

Patients accepted responsibility for losing weight, trusted their doctors, valued their advice highly and did not want referrals to gymnasiums or dieticians. They expected doctors to advise them practically about exercise, diet and weight-loss goals, weigh them regularly and communicate effectively. They believed that doctor-patient relationships and interaction are important in weight-loss management, patients should be treated on an individual basis and the process should be empowering. Medical intervention costs were not problematic for this group.

Generally patients were satisfied with their doctors but there were areas concerning patients' expectations that primary care doctors should take cognisance of.

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