

National Guidelines for Obesity Care

The Guidelines in Brief 2023



The National Board of Health and Welfare's national guidelines for obesity care

Obesity is a complex, chronic disease that is becoming increasingly common. It has a detrimental impact on quality of life and increases the risk of other serious diseases.

In these guidelines the National Board of Health and Welfare provide recommendations concerning:

- a structured care process from diagnosis to follow-up,
- continuing professional development,
- combined lifestyle intervention,
- drug therapy,
- surgery.

The recommendations cover issues of particular importance for those making decisions about the services being offered and the allocation of resources, when it comes to assessment and interventions for patients with obesity. The national guidelines also include indicators that can be used for various types of follow-up and evaluation.

→ You can read the guidelines in full at the National Board of Health and Welfare website, socialstyrelsen.se/nationellariktlinjer/obesitas

Recommendations in brief

Make an early diagnosis and collaborate throughout the care continuum

It is important that people with obesity have their disease identified by the healthcare system. This is because it is a complex disease with major health risks. Consequently, healthcare personnel should offer weighing and measurement in a respectful way. This allows patients to be given a diagnosis at an early stage, as well as information about the disease and its treatment.

The whole care continuum for people with obesity needs be cohesive from diagnosis to follow-up. This requires collaboration involving, for example, child health services, primary healthcare, and specialist care. For people who require specific support because of, for example, severe disability or mental illness, collaboration is also needed between e.g. healthcare and social services.

Prejudice and stigmatisation are common – provide continuing professional development to personnel

Many people with obesity experience prejudice, discrimination and stigmatisation – including in the healthcare system. An unsympathetic approach has a detrimental impact on both quality of life and the care provided. For example, chairs and treatment tables that are unable to bear the patient's weight are stigmatising. This is why the regions and municipalities need to educate their healthcare personnel and adapt their premises for people with obesity.

Offer more patients different types of treatment

There are various ways to treat obesity that are more or less effective for different people. It is therefore important that all the regions are able to offer several types of treatment. What is needed is the offer of both more combined lifestyle intervention and more use of drugs and surgery than at present. Early treatment is important to prevent further weight gain and long-term follow-up is essential to keep the weight loss after treatment.

Care needs to be more equal

The obesity care provided varies widely in different parts of Sweden. For example, some regions have specialist care units for children or adults with obesity, while others do not. In addition, patients are themselves responsible for covering high costs and many are not able to access the treatment they need. There are many more patients who need obesity surgery than are currently receiving it, and none of the appetite-regulating obesity drugs are presently included in the national scheme for subsidising prescription drugs.

We follow up and evaluate the healthcare

With these guidelines, The National Board of Health and Welfare intends to contribute to more equal obesity healthcare. We will evaluate how the regions and municipalities adhere to these guidelines. For this purpose, we have developed indicators that reflect a selection of the recommendations. As a decision maker, you can also use the indicators to monitor and develop obesity healthcare in your own region.

Do you have any questions?

Email NR-obesitas@socialstyrelsen.se.

