Review: little evidence supports the efficacy of major commercial and organised self help weight loss programmes


What is the efficacy of major commercial or organised self help weight loss programmes that provide structured in-person or online counselling?

CONCLUSIONS

1 of 5 randomised controlled trials showed that a non-medical commercial weight loss programme (Weight Watchers) was modestly effective in achieving long term weight loss. Little evidence supports the efficacy of commercial and self help weight loss programmes.

A modified version of this abstract appears in ACP Journal Club.

METHODS

Data sources: Medline (1966 to October 1, 2003), bibliographies of relevant studies, and the publication lists of 2 companies.

Study selection and assessment: randomised controlled trials (RCTs) or prospective case series of major commercial or organised self help weight loss programmes in the US that provided regular in-person or online counselling for >12 weeks, included only adults, reported number of trial participants assessed >10 participants, evaluated the programme under the same conditions in which it was offered to the public, and had >1 year of follow up after treatment. Exclusion criteria were studies of self help weight loss approaches based on books, meal replacement plans, or similar products. Assessment of the quality of individual studies was based on study design and attrition.

Outcome: weight loss.

MAIN RESULTS

10 studies (n = 1879) met the selection criteria. 3 RCTs (n = 551) assessed a non-medical programme (Weight Watchers). Of these, 1 RCT (n = 423) reported that participants attending Weight Watchers meetings had a mean loss of 3.2% of initial weight at 2 years compared with no participants assigned to a self help intervention that included 2 dietitian visits (p < 0.001).

5 studies (n = 1048) assessed physician supervised weight loss programmes, 3 of Health Management Resources (Boston, Massachusetts) and 2 of OPTIFAST (Novartis Nutrition, Minneapolis, Minnesota). Both programmes offered meal replacement products as part of a low calorie diet or very low calorie diet (VLCD) with a curriculum of lifestyle modification. 1 of these 5 studies was an RCT. The RCT (n = 40) compared meal replacement products alone with meal replacement products plus usual table foods in participants with type 2 diabetes and obesity but did not report between-group differences in weight loss at 1 year.

1 RCT (n = 46) assessed a commercial, internet based, weight loss programme (eDiets.com). At 1 year, participants in the internet based programme lost 1.1% of their initial weight compared with 4.0% in participants who used a behavioural weight loss manual (p = 0.04).

1 RCT (n = 234) assessed an organised self help programme (Take Off Pounds Sensibly [TOPS]). At 1 year, the TOPS programme was less effective than a therapist led behavioural modification programme for achieving weight loss (p value for difference between groups not provided).

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Source of funding: National Institutes of Health.