

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

PUBLIC HEALTH GUIDANCE

FINAL SCOPE

1 Guidance title

Maintaining a healthy weight and preventing excess weight gain among children and adults

2 Background

For adults, a healthy weight is considered to be a body mass index (BMI) of 18.5 to 24.9 kg/m². Overweight is 25 to 29.9 kg/m² and obese is 30 kg/m² or more. However, lower thresholds as a trigger to prevent conditions such as type 2 diabetes have been recommended for some black and minority ethnic groups (see [BMI and waist circumference - black, Asian and minority ethnic groups](#)).

Several classification systems are used in the UK to define children as obese or overweight. The 'National child measurement programme' (NCMP) and 'Health survey for England' use a gender-specific BMI chart (UK 1990 chart for children older than 4 years). Children over the 85th centile, and on or below the 95th centile, are 'overweight'. Children over the 95th centile are 'obese'. But in clinical practice the 91st and 98th centiles may be used to define 'overweight' and 'obese' respectively.

- a) This is a partial update of [Obesity](#) (NICE clinical guideline 43, 2006). It is the result of a formal consultation in 2011. This update will focus on [section 1.1.1](#) of NICE clinical guideline 43. This section covers strategies that may help people maintain a healthy weight. The update will also reflect structural changes within the NHS and incorporate recommendations from NICE public health

guidance post-2006. The recommendations on self-help, commercial or community programmes ([section 1.1.7](#) of NICE clinical guideline 43), will be updated in forthcoming guidance on: 'Overweight and obese children and young people: lifestyle weight management services' and 'Overweight and obese adults: lifestyle weight management services'. Any identified gaps not covered may inform development of future public health guidance on obesity.

- b) The clinical recommendations on very low calorie diets (in [section 1.2.4](#) of NICE clinical guideline 43) and bariatric surgery ([section 1.2.6](#) of NICE clinical guideline 43) will be updated separately. For further details, see section 6 of this scope.
- c) This guidance will support a number of related policy documents including:
- [Change4Life](#) (DH 2010a)
 - [Equity and excellence: liberating the NHS](#) (DH 2010b)
 - [Fair society, healthy lives: a strategic review of health inequalities in England post-2010](#) (The Marmot Review 2010)
 - [Healthy lives, healthy people: a call to action on obesity in England](#) (DH 2011)
 - [Healthy lives, healthy people: our strategy for public health in England](#) (DH 2010c)
 - [Public Health England: our priorities for 2013/14](#) (PHE 2013)
 - [Public health outcomes framework for England 2013–2016](#) (DH 2012)
 - [Putting prevention first. NHS health check: vascular risk assessment and management](#) (DH 2009).
- d) This guidance will provide recommendations for good practice, based on the best available evidence of effectiveness, including cost effectiveness. It is aimed at practitioners with public health as part of their remit working within local authorities, the NHS, and the wider public, private, voluntary and community sectors. It is also

aimed at those who commission, design, deliver, implement or evaluate interventions to help maintain a healthy weight or prevent excess weight gain among different groups. In addition, it will be of interest to people who are trying to maintain or manage their weight and other members of the public.

- e) This guidance focuses on the maintenance of a healthy weight ([section 1.1.1](#) of NICE clinical guideline 43) but the recommendations may also help children and adults who are already overweight or obese to avoid further weight gain.
- f) The guidance will complement existing NICE guidance on: working with local communities to prevent obesity; walking and cycling; prevention of cardiovascular disease and type 2 diabetes; weight management before, during and after pregnancy; maternal and child nutrition; and BMI and waist circumference in adults from black, Asian and other minority ethnic groups.

This guidance will be developed using the NICE [public health guidance process and methods guides](#).

3 The need for guidance

- a) In 2010, the mean body mass index (BMI) of adults in England was approximately 27 kg/m². Adults with a healthy BMI were in the minority (35% of men and 42% of women had a BMI less than 25 kg/m²). The majority were either overweight (BMI 25 to 30) or obese (BMI over 30) (The NHS Information Centre 2012). Among children aged 2 to 15, 31% of boys and 28% of girls were classified as either overweight or obese in 2010 (The NHS Information Centre 2012). Population trends suggest that average weight increases gradually throughout life (for example, 1 UK-based cohort study found adults gained about 0.2 kg per year) (Golubic et al. 2013).

- b) Although obesity is common in all social groups, the rate increases with social disadvantage (The Marmot Review 2010). It is also linked to ethnicity: it is most prevalent among black African women (38%) and least prevalent among Chinese and Bangladeshi men (6%) (The NHS Information Centre 2006).
- c) Being overweight or obese can lead to both chronic and severe medical conditions (Foresight 2007). It is estimated that life expectancy is reduced by an average of 2 to 4 years for those with a BMI of 30 to 35 kg/m², and 8 to 10 years for those with a BMI of 40 to 50 kg/m² (National Obesity Observatory 2010). Around 85% of patients with hypertension have a BMI greater than 25 kg/m², and 90% of those with type 2 diabetes have a BMI greater than 23 kg/m² (Foresight 2007). People who are obese may also experience mental health problems as a result of stigma and bullying.
- d) The cost to society and the economy of people being overweight or obese was estimated at almost £16 billion in 2007 (more than 1% of gross domestic product). It could rise to just under £50 billion in 2050 if obesity rates continue to rise unchecked (Foresight 2007).
- e) 'Healthy lives: a call to action on obesity in England' (DH 2011) aimed to reduce 'the level of excess weight averaged across all adults by 2020'. It advocated a lifecourse approach. It also stressed the importance of striking a balance between treating those who are already obese and using a range of local interventions for sustained action on prevention (DH 2011).
- f) [NICE clinical guideline 43](#), on the prevention and management of obesity, was published in 2006. Since then, NICE has published a range of public health guidance that has drawn on recommendations in the guideline – or provided more specific advice in some areas (see section 6). However, NICE has not

made any further recommendations on how people can maintain a healthy weight or prevent excess weight gain.

- g) A [review](#) of NICE's guideline on obesity in 2011 noted that new evidence may be available on how children and adults can maintain a healthy weight or prevent excess weight gain. For example, it may be possible to provide more specific advice on weight monitoring, screen time or sugar-sweetened drinks. In addition, NICE public health guidance on [working with local communities](#) to prevent obesity also raised issues about the way messages and advice about weight are communicated, particularly the tone and language. So there is a need to reconsider the obesity guidance in this light.

4 The guidance

Public health guidance will be developed according to NICE processes and methods. For details see section 5.

This document defines exactly what this guidance will (and will not) examine, and what the guidance developers will consider.

4.1 *Who is the focus?*

4.1.1 **Groups that will be covered**

- a) All adults and children who are not undergoing management or treatment for being overweight or obese.

4.1.2 **Groups that will not be covered**

- a) Adults and children who are taking part in programmes or are receiving treatment for being overweight or obese (including lifestyle weight management programmes, pharmacological or surgical treatment).
- b) Adults and children who are taking part in programmes or receiving treatment for being underweight.

- c) Pregnant women.
- d) Infants who have not been weaned. (Weaning or 'complementary feeding' is the transition from an exclusively milk-based diet to a diet based on solid foods.)

4.2 Activities

4.2.1 Activities/measures that will be covered

- a) Modifiable behaviours that may help children and adults maintain a healthy weight or prevent weight gain ([section 1.1.1](#) of NICE clinical guideline 43).
- b) Provision of information about modifiable behaviours to maintain a healthy weight or prevent excess weight gain.

The Public Health Advisory Committee (PHAC) may also consider other measures or approaches that fall within the remit of this work. The Committee will take reasonable steps to identify ineffective measures and approaches.

4.2.2 Activities/measures that will not be covered

- a) Interventions to prevent obesity that are covered in other sections of NICE clinical guideline 43 (that is, sections 1.1.2 to 1.1.7, and section 1.2).
- b) Environmental factors beyond people's control (for example, the provision of cycle paths or content of school meals).
- c) Programmes, services or treatments for people who are overweight or obese. This includes lifestyle weight management services and pharmacological or surgical treatments.
- d) Management of medical conditions that may increase the risk of excess weight gain, being overweight or obese.
- e) Programmes, services or treatments for people who are underweight.

- f) Infant feeding (with breast milk or infant formula) and weaning.
- g) Complementary therapies to prevent someone from becoming overweight or obese or to manage these conditions (for example, acupuncture or hypnotherapy).
- h) Definitions of 'overweight' and 'obese'.
- i) Related activities to combat obesity that are covered by other NICE guidance (such as breastfeeding).

4.3 Key questions and outcomes

Below are the overarching questions that will be addressed along with some of the outcomes that would be considered as evidence of effectiveness:

Question 1: What individually modifiable behaviours may help children and young people to maintain a healthy weight or prevent excess weight gain?

Question 2: What individually modifiable behaviours may help adults to maintain a healthy weight or prevent excess weight gain?

Question 3: What are the most effective ways to communicate information to children, young people and adults about individually modifiable behaviours to help maintain a healthy weight or prevent excess weight gain?

All questions will address [section 1.1.1](#) of NICE clinical guideline 43 by considering a range of behaviours that may affect weight such as: diet, eating and drinking patterns, physical activity, sedentary behaviours, sleep and weight monitoring.

Expected outcomes:

- Maintenance of weight or avoidance of weight gain in the short, medium and long term.
- Anthropometric measures such as BMI, waist circumference or percentage of healthy weight.

- Intermediate measures such as changes in diet or physical activity levels, and frequency of weight monitoring.
- Psychological outcomes such as self-efficacy or motivation.
- Process measures such as acceptability of information (method or content) that aims to help people maintain a healthy weight.

Cost effectiveness

Considerations of cost effectiveness will draw on previous analyses undertaken by NICE (particularly in relation to lifestyle weight management among children and adults and preventing type 2 diabetes).

4.4 Status of this document

This is the final scope, incorporating comments from a 4-week consultation in July 2013.

5 Further information

The public health guidance development process and methods are described in [Methods for development of NICE public health guidance](#) (2012) and [The NICE public health guidance development process](#) (2012).

6 Related NICE guidance

Published

- [BMI and waist circumference - black, Asian and minority ethnic groups](#). NICE public health guidance 46 (2013).
- [Physical activity: brief advice in primary care](#). NICE public health guidance 44 (2013).
- [Obesity: working with local communities](#). NICE public health guidance 42 (2012).
- [Walking and cycling](#). NICE public health guidance 41 (2012)
- [Preventing type 2 diabetes: risk identification and interventions for individuals at high risk](#). NICE public health guidance 38 (2012).

- [Preventing type 2 diabetes: population and community interventions](#). NICE public health guidance 35 (2011).
- [Weight management before, during and after pregnancy](#). NICE public health guidance 27 (2010).
- [Prevention of cardiovascular disease](#). NICE public health guidance 25 (2010).
- [Promoting physical activity in children and young people](#). NICE public health guidance 17 (2009).
- [Physical activity and the environment](#). NICE public health guidance 9 (2008).
- [Behaviour change](#). NICE public health guidance 6 (2007).
- [Obesity](#). NICE clinical guideline 43 (2006).

Under development

- [Overweight and obese children and young people: lifestyle weight management services](#). NICE public health guidance. Publication expected October 2013.
- [Behaviour change](#) (partial update of NICE public health guidance 6). NICE public health guidance. Publication expected December 2013.
- [Overweight and obese adults: lifestyle weight management services](#). NICE public health guidance. Publication expected May 2014.
- [Exercise referral schemes](#). NICE public health guidance. Publication expected September 2014.

Appendix A Potential considerations

It is anticipated that the Public Health Advisory Committee (PHAC) will consider the following issues:

- The target audience, actions taken and by whom, context, frequency and duration.
- Whether the intervention is based on an underlying theory or conceptual model.
- Whether it is effective and cost effective.
- Critical elements. For example, whether effectiveness and cost effectiveness varies according to:
 - the diversity of the population (for example, in terms of the user's age, gender or ethnicity)
 - the status of the person delivering it and the way it is delivered
 - its frequency, length and duration, where it takes place
 - its intensity.
- Whether it is transferable to other settings.
- Any trade-offs between equity and efficiency.
- Any factors that prevent – or support – effective implementation.
- Any adverse or unintended effects.
- Current practice.
- Availability and accessibility for different groups.

Appendix B References

Department of Health (2009) Putting prevention first. NHS health check: vascular risk assessment and management. Best practice guidance. London: Department of Health

Department of Health (2010a) Change4Life [online].

Department of Health (2010b) Equity and excellence: liberating the NHS. London: The Stationery Office

Department of Health (2010c) Healthy lives, healthy people: our strategy for public health in England. London: Department of Health

Department of Health (2011) Healthy lives, healthy people: a call to action on obesity in England. London: Department of Health

Department of Health (2012) Public health outcomes framework for England 2013–2016. London: Department of Health

Foresight (2007) Tackling obesity: future choices – project report. London: Government Office for Science

Golubic R, Ekelund U, Winjindaele K, et al. (2013). Rate of weight gain predicts change in physical activity levels: a longitudinal analysis of the EPIC-Norfolk cohort. *International Journal of Obesity* 37: 4040–409

National Obesity Observatory (2010) Briefing note: obesity and life expectancy. Oxford: National Obesity Observatory

The Marmot Review (2010) Fair society, healthy lives: a strategic review of health inequalities in England post-2010. London: The Marmot Review

The NHS Information Centre (2012) Statistics on obesity, physical activity and diet: England, 2012. Leeds: The Health and Social Care Information Centre

The NHS Information Centre (2006) Health Survey for England 2004: the health of minority ethnic groups – headline tables. Leeds: The Health and Social Care Information Centre