



The
**Obesity
Collective**
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Response to The Conversation article titled "Should GPs bring up a patient's weight in consultations about other matters? We asked 5 experts"

14 July 2023

Dear Fron Jackson-Webb and The Conversation Editorial Team,

We are writing in response to your article in The Conversation today, titled "Should GPs bring up a patient's weight in consultations about other matters? We asked 5 experts".

This response is made on behalf of The Obesity Collective's stigma expert group: a group encompassing researchers and practitioners from the disciplines of psychology, medicine, dentistry, and dietetics, and people with lived experience of obesity and weight stigma. We work with The Obesity Collective to reduce weight stigma and promote evidence-based equitable care for people with obesity.

We recognise that today's article was an expert opinion piece. However, we are concerned that the way in which the article has been written creates the misperception that the topic discussed is a simple issue and that the majority of experts interviewed agreed that GPs should bring up a patient's weight during consultations where the patient is seeking care for other health concerns.

As per the article, the question to experts did not emphasise whether or not weight should be discussed in patient consultations, but rather whether or not it is the GP who should initiate these conversations. The article then indicates that three of the five experts agreed with this approach, including Associate Professor and GP Dr Brett Montgomery. We believe the presentation of these opinions is misleading in several ways.

First, the experts' opinions are depicted as binary – Yes, I agree with this statement versus No, I do not agree with this statement. It is clear, however, that the opinions of all five experts are in fact more nuanced than this, and their collective opinions do not point to a binary answer. While opinions vary, all five experts recognise that obesity is highly stigmatised and emphasise the need for sensitivity in approaching conversations about weight. Some also highlighted the need for further resources and training to support healthcare professionals in providing effective and non-stigmatising care. There is ample evidence in the literature to support these views (e.g., [Lawrence et al., 2021](#); [Puhl et al., 2021](#); [Puhl, 2023](#))

Second, the summary of Dr Montgomery's interview indicates that he largely *disagrees* with the question "should GPs bring up a patient's weight in consultations about other matters?" He says "GPs should be ready to help people with their weight when they want help". That is, the conversation should be had only when the patient brings it up. Further, Dr Montgomery notes that, in his own practice, he does not initiate these conversations but "focus[es] instead on

health rather than weight, discussing physical activity and healthy diet – these are good things for people of any size." This is a patient-centred approach that has been shown to be well received by patients and can reduce weight stigma and improve engagement with healthcare ([Salvia et al., 2022](#); [Talumaa et al., 2022](#)). This is why many health experts, organisations like The Obesity Collective, and activists like Taryn Brumfitt promote this approach to care ([Cardel et al., 2022](#); [Lawrence et al., 2022](#)).

We hope that Dr Montgomery approved the way his interview has been presented. Nevertheless, as readers and people with expertise and lived experience in this area, we strongly believe that Dr Montgomery's core message, and the core message of all five experts interviewed, is being misrepresented. We believe the core message here is not whether weight should or should not be brought up by GPs, but that:

(a) any discussions of weight should be had with empathy and compassion, and should not stigmatise; and

(b) when approaching those discussions (or deciding whether or not a discussion should be had), greater recognition should be given to the fact that obesity is a complex issue and there are many barriers to effective weight management, including weight stigma and limited access to evidence-based weight-loss strategies.

Weight stigma is pervasive. It causes serious harm to health and undermines efforts to engage in healthy behaviours ([Puhl et al., 2020](#)). Over-simplifying and misrepresenting these issues can also severely undermine efforts to reduce weight stigma. This is especially the case when health experts are incorrectly depicted by trusted sources, like The Conversation, as disagreeing with those advocating for practices that eliminate weight stigma and promote equitable care for people of all body sizes.

We value the role that The Conversation has in setting a higher bar for media outlets and providing trusted sources of information pertaining to current events and issues in Australia, New Zealand, and globally. We hope that, in bringing these concerns to your attention, we might collectively improve the way in which issues of obesity and weight stigma are discussed and represented in the media.

Yours sincerely,

Dr Joanne Rathbone, Dr Briony Hill, Dr Xochitl de la Piedad Garcia, Dr James Kite, Dr Blake Lawrence, Professor John Dixon, Dr Elizabeth Holmes-Truscott, Dr Zanab Malik, and Dr Timothy Broady