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Impact of Early Weight Loss Achievement on Year-Long Program Adherence in a University-Based Weight Management Clinic Setting

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Introduction:
Weight management is resource-intensive, requiring regular follow-ups to monitor progress and provide the motivation necessary for sustained behaviour change. Because adherence is a primary predictor of long-term success, this study assesses the adherence rates of patients attending a multidisciplinary weight management clinic within a university-based hospital setting.

Methods:
Patients participated in a 12-month program involving seven core teams consisting of primary care, endocrinology, surgery, dietetics, rehabilitation, and psychology. The program consisted of seven scheduled visits. Following the baseline, visits occurred at months 1, 2, 4, 7, 9, and 12. Participants attended monthly visits for the first three months, with the frequency decreasing to four-month intervals toward the study's end. We defined adherence as completing at least five visits, inclusive of the baseline and first month visit.

Results:
Of the 128 patients included (mean age 39.4 ± 12.8 years; 51.6% male), 80.4% demonstrated readiness to change (Preparation/Action/Maintenance/Relapse). The cohort's mean weight decreased from 119.1 ± 28.2 kg at baseline to 117.6 ± 28.0 kg at the one-month follow-up. Clinic adherence was 46.8% overall. While attendance was 100% at baseline (visit 1) and visit 2, it declined steadily thereafter to 84.4% (visit 3), 78.9% (visit 4), 61.7% (visit 5), 43.8% (visit 6) and 33.6% (visit 7). A Spearman's rank-order correlation revealed a statistically significant positive correlation between the percentage of weight lost in the first month and overall clinic attendance ($R_s = 0.200$, $p < 0.023$).

Conclusion:
Early weight loss is a critical driver of program adherence. Clinical interventions should prioritize achieving measurable results within the first month to maximize patient engagement and potentially long-term retention.