

## Maintaining Activity and Nutrition through Technology-Assisted Innovation in Primary Care

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<b>Organization:</b>	University of Pittsburgh at Pittsburgh
<b>Mechanism:</b>	PA: 09-07: AHRQ Health Services Research Demonstration and Dissemination Grants (R18)
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**Summary:** Most individuals who reduce body weight through lifestyle interventions, such as diet and physical activity, regain weight. Only about 20 percent of overweight or obese people are able to lose at least 10 percent of their body weight and keep it off for at least 1 year. Therefore, obesity tends to be a chronic, lifelong condition. Despite the fact that obesity is associated with a host of medical diseases, weight interventions are usually conducted in a vacuum, separate from participants’ usual medical care and without input from the primary care team.

Virtual Lifestyle Management (VLM) is an intervention previously developed by the research team that uses health information technology (IT) to promote weight loss among primary care patients. This project will extend the work of VLM to include evaluation of health IT tools designed to promote weight maintenance and prevent relapse in primary care patients who have lost weight. The research leverages technology such as online visits and electronic health records (EHRs) to enable primary care sites to contact patients and track their progress in ongoing weight maintenance efforts.

Building on previous work by the research team, this project is developing health IT tools to promote weight maintenance in the primary care setting. The project will conduct a randomized clinical trial to test whether online tracking tools, weight maintenance “coaching” visits for patients, and “real time” electronic progress reports for primary care physicians (PCPs) will support more successful weight maintenance than online tracking tools alone in a group of primary care patients who have lost greater or equal to 5 percent of their body weight. The online coaching visits for participants will be delivered through the primary care site’s electronic patient portal and the electronic progress reports for PCPs delivered through the EHR.

The project will assess multiple relevant outcomes across clinically meaningful treatment strategies. The team will recruit a sample that reflects the racial and ethnic mix of the region and is diverse in terms of gender, body mass index, and co-morbidity status. The team will include clinical practices with diverse characteristics and will have interventionists who reflect the level of training typically seen among primary care clinic staff. They will recruit 30-40 participants a month, with recruitment lasting 5-6 months, and each participant receiving a 3-year intervention. The last year of the study will focus on analyses, including a cost-effectiveness analysis.

### Specific Aims:

- Determine the efficacy of online coaching and electronic progress reports delivered through the primary care site’s electronic health portal to support weight management after initial weight loss

of greater or equal to 5 percent. **(Ongoing)**

- Evaluate whether online weight maintenance tools will be acceptable to patients and PCPs when integrated into routine clinical workflow, and assess barriers to patient and PCP uptake. **(Upcoming)**
- Determine the cost effectiveness of online coaching and electronic progress reports delivered through the primary care site's electronic health portal. **(Upcoming)**

**2012 Activities:** The project focused on start-up activities including hiring of staff, preparation of the institutional review board submission, and writing of the protocol and manual of procedures. The team held regular meetings with IT staff to develop online tracking and coaching tools, and with the intervention team to develop and refine the intervention content. As last self-reported in the AHRQ Research Reporting System, project progress and activities are on track in some respects but not others and budget funds are slightly underspent because of staff hire delays. However, Dr. Conroy is confident that all positions will be filled and the budget reconciled over time.

**Preliminary Impact and Findings:** The project has no findings to date.

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**Target Population:** Chronic Care\*, Low SES/Low Income\*, Obesity, Racial or Ethnic Minorities\*, Women\*

**Strategic Goal:** Develop and disseminate health IT evidence and evidence-based tools to improve health care decisionmaking through the use of integrated data and knowledge management.

**Business Goal:** Implementation and Use

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*\* This target population is one of AHRQ's priority populations.*