

# Evaluating the benefit of Trim and Fit program: An obesity management program utilizing a group-based multidisciplinary approach

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## ABSTRACT

**Introduction:** Obesity is an intensifying global health issue, including among healthcare professionals, that demands a multidisciplinary approach. According to a local survey, 21.1% of healthcare professionals (HCPs) are overweight and 33.1% of HCPs are obese. Due to the increased risk of non-communicable illnesses that obesity is linked to, a multidisciplinary approach is necessary. The aim was to assess the effectiveness of the Trim & Fit Program in weight management among healthcare professionals with overweight/obesity and determine the changes in the BMI, percentage of body fat, blood pressure, fasting blood sugar and cholesterol levels after the Trim and Fit Program. **Materials and Methods:** This intervention program explores the potential involvement of a group of experts including family physician, nutritionist, physiotherapist, counsellor, and pharmacist in the management program implemented in Health Clinic Manek Urai, Kuala Krai, Kelantan. Fifteen individuals with overweight and obesity willingly participated in the program, engaging in group sessions over eight months. Baseline assessments captured vital data on demographics, weight, height, body mass index (BMI), waist circumference, waist-hip ratio (WHR), arm circumference, calorie intake, fat percentage, energy intake, total cholesterol, and fasting glucose. Through structured nutritional education, behavioural therapy, and exercise prescription, participants experienced continuous intervention and support. A WhatsApp group was created between participants to share experiences on the weight loss journey as well as a support group to encourage one another. Post-intervention evaluations measure the outcome across these dimensions. **Results:** Exciting findings emerged after 8 months of post-intervention. A Wilcoxon Signed Rank Test showed a statistically significant reduction in BMI ( $Z=-3.410, p=0.001$ ), weight ( $Z=-3.409, p=0.001$ ), waist circumference ( $Z=-3.412, p=0.001$ ), arm circumference ( $Z=-3.417, p=0.001$ ), body fat weight ( $Z=-3.411, p=0.001$ ), fat percentage ( $Z=-3.409, p=0.001$ ), systolic blood pressure ( $Z=-2.918, p=0.004$ ), fasting blood sugar ( $Z=-3.304, p<0.001$ ), and cholesterol ( $Z=-3.297, p=0.001$ ), but not in calorie intake ( $Z=-2.556, p=0.11$ ) or water percentage ( $Z=-625, p=0.532$ ). **Conclusion:** This intervention program highlights the importance of group management for obesity within a local clinic. The collaboration of a nutritionist, family doctor, physiotherapist, and counsellor manifest invaluable benefits such as reduced weight, BMI, blood pressure, fasting blood sugar, cholesterol levels and body fat percentage. While this intervention program's sample size is small, it reveals the potential impact of the group management program to deliver evidentiary outcomes for individuals struggling with obesity. Further research encompassing larger cohorts and extended follow-up periods is warranted to validate these findings, enlightening the program's effectiveness in tackling obesity.