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Steps to Reach Individual Diet and Exercise Solutions

Urban and Suburban Weight Loss: Evaluation of STRIDES, a Weight Loss Program at Primary Care Clinics

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May 17, 2019

Disclosure

The following planners, speakers, moderators, and/or panelists of the CME activity have no financial relationships with commercial interests to disclose:

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STRIDES

Steps to Reach Individual Diet and Exercise Solutions

- Developed/piloted in 2006-2014 with local support, **STRIDES is an intensive behavioral weight loss program** that culturally flexible and literacy accessible. Since 2015 the program was expanded now reaching >six times as many patients as in the pilot. It is still free to participants.
- In the last 3 years, the format was adapted and is now a **certified Diabetes Prevention Program Translation**. This adaptation expanded STRIDES from 15 classes over a 16 week period to 22 classes over a 6 month period.
- Classes have group learning and individual coaching
- Classes are cyclical allowing enrollment when participants are ready
- All classes are written at 4th-6th grade reading level
- In 2015, the program expanded from one urban site with mostly African American women, to a second site in a suburban location
- Both sites continue to have high enrollment

Objective



To compare the effectiveness of STRIDES, a multi-component behavioral intervention for weight loss that was effective in pilot work for participants from a clinic serving largely African American patients with lower income, to:

- 1) similar participants attending an expanded offering of the program at the same location
- 2) participants in a clinic serving more affluent patients

Methods



- Review of STRIDES participant data from June 1, 2015-March 31, 2018
- Participants enrolled through September 30, 2017 were included to insure that up to six months of data was available for analysis.
- Between location group comparisons of continuous variables were conducted using the Kruskal-Wallis Test. Comparing observed frequencies of categorical variables with what we would expect for the location groups were conducted using the chi-square test

Table 1: STRIDES Program Participant Demographics

| | All Participants (n=491) | Urban Location (n=283) | Suburban Location (n=208) | p-value (Urban vs. Suburban) |
|---|--------------------------|------------------------|---------------------------|------------------------------|
| Age (mean years) | 53.6 | 52 | 56 | 0.04 |
| Female (%) | 90 | 95 | 82 | <0.0001 |
| African American (%) | 53 | 80 | 14 | <0.0001 |
| Baseline Body Mass Index (kg/m ²) | 43 | 44 | 42 | 0.25 |
| Baseline Weight (pounds) | 246 | 261 | 212 | 0.60 |

Table 2: STRIDES Program Participant Attendance

| | Total | Drop Out (1 session) | Short Attendance (2-3 sessions) | Intermediate Attendance (4-8 sessions) | High Attendance (9+ sessions) |
|-----------------------------|-------|-------------------------|---------------------------------------|--|-------------------------------------|
| Overall | 491 | 114 (23%) | 86 (18%) | 103 (21%) | 184 (38%) |
| Urban | 283 | 84 (30%) | 48 (17%) | 63 (22%) | 86 (31%) |
| Suburban | 208 | 30 (15%) | 38 (18%) | 40 (19%) | 98 (48%) |
| African American | 258 | 75 (29%) | 46 (18%) | 58 (23%) | 78 (30%) |
| Caucasian | 208 | 30 (15%) | 32 (16%) | 40(19%) | 103 (50%) |

Table 3: STRIDES Program Participant Weight Loss (pounds,%)

| | Total n* | 45 days | p-value % loss | 90 days | p-value % loss | 180 Days | p-value % loss |
|-----------------------------|-------------|-------------------------|-------------------|---------------------------|-------------------|-------------------------|-------------------|
| Overall | 491 | 6.6# (2.7%) n=314 | | 10.0# (4.1%) n= 257 | | 16# (6.5%) n=147 | |
| Urban | 283 | 5.4# (2.0%) n=155 | 0.0007 | 7.8# (3.2%) n=123 | 0.0010 | 14.6# (5.9%) n=69 | 0.0600 |
| Suburban | 208 | 7.4# (3.1%) n=159 | | 12.0# (4.8#) n=134 | | 17.5# (7.1%) n=78 | |
| African American | 258 | 5.2# (2.0%) n=131 | <0.0001 | 8.0# (3.2%) n=108 | 0.0004 | 14.4# (5.7%) n=61 | 0.0130 |
| Caucasian | 208 | 8.3# (3.5%) n=148 | | 12.5# (5.2%) n=123 | | 18.2# (7.7%) n=70 | |

Conclusions



- STRIDES is a well-attended and effective weight loss program in participants who are primarily patients from a large safety-net healthcare system.
- Weight loss and attendance were better in suburban location participants. Dropout was higher and high attendance lower among urban location participants.
- Significant number of urban and suburban location participants had medically meaningful weight loss of >5%.
- This evaluation is limited to a primary care setting, but given the low levels of availability of these programs, this is a feasible and acceptable model.

Acknowledgements



- MetroHealth Weight Loss Surgery Weight Management Center, in The MetroHealth System Surgery Service Line.
- The Saint Luke's Foundation, the Fox Northrup Foundation, and an anonymous donor for supporting the STRIDES program, its development and evaluation.
- The many contributors to the STRIDES program, in particular, now retired program co-author James Yokley, Ph.D.