The Perceptions and Practices of King Chulalongkorn Memorial Hospital (KCMH)’s Internal Medicine Residents on Obesity and Gastrointestinal Diseases

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Background: Obesity associated gastrointestinal (GI) disorders have been concerned among physicians around the world. However, the practice and perception among Thai medical residents have not been explored.

Objective: To understand the perceptions and practices of King Chulalongkorn Memorial Hospital (KCMH)’s internal medicine residents towards obesity and GI diseases.

Methods: According to the Gut and Obesity in Asia (GOASIA) Workgroup, a questionnaire composed of 52 questions with 10-point Likert responses (strongly disagree 0, neutral 5, and strongly agree 10) was applied to KCMH’s internal medicine residents. Scores were reported in mean ± standard deviation and were compared by Student’s t test. Multivariate logistic regression was performed to determine the association between items.

Results: One hundred and one internal medicine residents were included. Of these, 44.6% were males. KCMH residents concerned that GI diseases in obese patients affect their quality of life (8.10±1.69); however, there was less concern about obesity-related cancers (4.55±2.40). They practiced more advice on behavioral changes (8.96±1.15) than advice for surgery (2.85±2.68) and medication, including orlistat (1.04±2.09), lorcaserin (0.89±1.98), and phentermine-topiramate (0.98±2.30). Comparing between the groups based on number of consultations per week, there were significant difference in mean scores of advice for reducing caloric intake (7.68 vs 8.64, p=0.052) and referral to dietitian (5.91 vs 7.21, p=0.039) between the less and more experienced practices, respectively. The referral to nutritionists was more in experienced residents (OR 4.88, p=0.046) and those who concerned the need of more follow-up visits in obese patients (OR 1.056, p=0.027).

Conclusion: KCMH internal medicine residents show their concerns about the effect of obesity in GI diseases, but with little concerns about obesity-related cancer. Some common practices include advice for behavioral changes and referral to dieticians, especially in more experienced ones. The bariatric interventions are less considered which could result from the limited number of patients. Nevertheless, the knowledge of management and appropriate surgical referral must be ascertained.

Keywords: Obesity, Gastrointestinal disorders, Perception, Practice