Weight management for the whole practice



Being overweight can lead to pets becoming uncomfortable and less able to play and exercise. It may also cause or exacerbate other diseases such as osteoarthritis, diabetes mellitus and neoplasia. If not addressed, obesity can lead to a shortened lifespan and also affect an animal's quality of life, writes Shelley Holden RVN CertSAN, Royal Canin weight management specialist



As in human populations, obesity is increasingly prevalent in our pet animals. In the UK alone, at least 59% of dogs and 39% of cats are overweight or obese. Even though veterinarians are aware of the health consequences, it has been shown that they may not communicate enough about the pet's weight status with its owner.

In order to successfully recommend a weight reduction programme it is important that a practice protocol is designed for every staff member in the practice to understand and follow. This includes how to recognise and discuss obesity with owners, how to make a referral from the veterinarian to the nurse clinic, how to make the appointment and how the nurse clinic is conducted.

RECOGNISING OBESITY

According to the Pet Food Manufacturers' Association (PFMA) Obesity Report 2014, 93% of owners say they would be concerned if they were told their pet was overweight. It is essential that the veterinarian and owner recognises when the animal is overweight. Body weight and ninepoint body condition scores (BCS; see Figure 1) are simple to perform and constitute a useful tool to raise owner awareness about what is a healthy shape for their pet. During the consultation, and as part of the animal's health assessment, a BCS should be performed. Having the charts on display for owners to view and encouraging them to get 'hands on', asking them questions such as "how easily can you feel the pet's ribs?" and "how obvious can you feel the tuck under the abdomen?", can help an owner to understand and accept if their pet is ideal weight, overweight or obese. Once a BCS has been agreed on and the owner accepts that their pet is overweight, a referral to the nurse clinic can be made. This can be done by walking an owner to reception and advising on making an appointment, and may consist of a code on computer that the receptionist recognises to make the appointment. Support and understanding from the entire practice team is vital to help an owner understand about the upcoming appointment with the nurse, and support materials may be offered at this point. Making such a positive intervention brings strong client loyalty and trust, and encourages a bond that leads to more frequent and regular visits to the practice.

Weight management strategies usually require the owner to make fundamental changes to their pet's lifestyle, including controlling feeding practices, requiring support from the nurse. It is important that nurses are given the time



Figure 1: Body condition score chart. Source: Royal Canin.

and space to offer this gold standard advice and support and this usually requires an initial appointment time of 30 minutes (see Figure 2).

Pedigree® DentaStix® reduce the build up of calculus by up to 80%

Reduces tartar build-up

80%

What about the fat content?

Even though dogs love them, Pedigree® DentaStix™ contains only 2.6% fat*.

The daily dental chew that's great for dogs' teeth AND is low in fat



*2.6% Typical analysis: for a 15kg dog this constitutes 3.5% of the daily fat requirement,

STAGE 1

• Gathering current dietary and exercise history (using questionnaires).

STAGE 2

- Weighing, BCS and taking morphometric measurements;
- Taking photographs.

STAGE 3

- Discussing the health implications of being overweight;
- Explaining the health benefits of losing weight;
- Calculating ideal body weight;
- Choosing the most appropriate weight loss diet and calculation feeding amounts.

STAGE 4

- Setting a dietary and exercise plan;
- Dispensing food and slow-down bowls;
- Arranging next appointment.

Figure 2: Outline of the 30-minute weight consultation.

NUTRITION CHANGES

In order to successfully recommend a weight reduction programme it is important to understand that calorierestricted diets are necessary as part of the treatment. Owner compliance can be improved by recommending a weight-management diet that is specifically formulated to induce safe weight loss by decreasing calories while containing all the nutrients a patient needs. Simply reducing the amount of food that a pet is currently fed can lead to an imbalance of nutrients and hunger, which could result in deficiencies, health issues and non-compliance. Weight loss in obese dogs generally involves feeding a purpose-formulated diet over a long period of time, but the cost of starting a purpose-formulated diet may deter some owners from starting a weight-management programme. One study looked at the average daily cost of the diet fed prior to weight loss, including the main meal and extras (treats, table scraps, etc.) compared with feeding Royal Canin's 'Satiety'. This study demonstrated that, on average, this weight-management diet is cost neutral. This information should help veterinarians to reassure owners before starting a weight-loss programme.

WEIGHING FOOD

Even for trained people, measuring out food portions accurately using measuring cups is almost impossible. It was shown in a study at the Royal Canin Weight Management Clinic that the amount of kibbles measured in a cup was almost always overestimated, up to 80% more than the expected amount. This inaccuracy (overestimation) was greater for small size portions, typically the amounts that would be fed to cats or small dogs. For pets on a weight-loss programme, this inaccuracy can lead to failure so it is advised to use digital scales for precise feeding (see Figure 3).



Figure 3. Source: Shelley Holden.

POST-WEIGHT-LOSS FEEDING

Switching dogs to a standard maintenance diet postweight-loss can increase the chances of weight rebound. After weight loss, the maintenance energy requirement (MER) is less than the current recommended MER that is designed for inactive adult dogs. Therefore, ideally cats and dogs should be maintained long-term on their weight-loss diet fed at a maintenance rate, and monitoring continued.

PREVENTION

From the day they are enrolled at the clinic, veterinary staff play a crucial role in monitoring a puppy's and kitten's weight to prevent obesity. It is important to weigh a kitten and puppy monthly during the growth period, and advise on a good-quality life-stage diet that is suitable for the size, sex and breed of the animal. Unfortunately, we know that cats' and dogs' weight are not monitored and recorded as well as they should be and so often they are allowed to gain weight over a period of time without it being discussed. In one study that reviewed data from approximately 2,000 consultations involving 148 dogs, body-weight assessment was made only in one out of four consults. There was no evidence of any body-weight assessments in 30% of the dogs. Therefore, it is essential to include young and adult cats and dogs in all 'wellbeing' clinics so that weight and BCS can be monitored on a regular basis and alterations made to diet as required. It is important to advise owners to weigh out food daily (using digital scales) and avoid measuring cups and other similar items.

By regularly monitoring kittens and puppies, this gives the practice a chance to build a relationship with the client and their pet and discuss other appropriate products such as flea control, worming, dental care and insurance. This also provides socialisation for the animal by visiting lots of times without actually incurring any 'procedures', thereby reducing stress when treatment or surgery may be required.

Pedigree® DentaStix is scientifically proven

What about the calories?

tartar build-u by up to 80%

Pedigree® DentaStix™ is scientifically proven* to help reduce the accumulation of plaque & tartar, and with only 82 Kcal[†], you can recommend it with confidence.

The daily dental chew that's great for dogs' teeth AND won't tip the scales



* Independently tested in canine dental efficacy studies at the University of New England, Australia, 2002 & 2003 () Vet Dent, 2005, 22:35-39 1 Typical analysis, based on the UK top selling line: Pedigree® Dentastic Medium alick = 82 Kral (Small stick =52 kral, large stick = 128 Kral)

NEUTERING

Neutering is associated with changes in metabolic rate and or feeding patterns that lead to over-consumption of calories and weight gain. While the exact physiological mechanisms responsible for post-neutering weight gain are still under investigation, hormonal alterations are thought to modulate food intake via lack of suppression of appetite. Therefore, providing cats and dogs with a balanced caloriecontrolled diet and a good routine exercise plan should help reduce the chances of obesity post-neutering. This provides another opportunity to encourage owners back to the practice by offering a monthly follow-up, postneutering, where the animal can be regularly weighed and body condition scored until maturity is reached. It is essential the practice maintains a consistent approach to weight management with everybody working as a team to achieve success. You can make a real difference to your patients by reducing the incidence of obesity and improving the quality and longevity of life for cats and dogs. Effectively, you are giving back to owners the companionship that comes from a healthy and active pet.

DIABETES MELLITUS

Diabetes mellitus (DM) is a common but serious condition in cats and dogs resulting from an absolute or relative insulin deficiency. The majority of diabetic dogs are suffering from an absolute insulin deficiency caused by destruction of the pancreatic beta cells. In contrast, cats are more likely to have a relative insulin deficiency, resulting from insulin resistance, usually caused by obesity. Obesity leads to profound changes in the metabolism of glucose and the secretion of insulin. This can lead to an insulin resistance and the onset of DM, and it has been shown that secretion of insulin and glucose intolerance increase proportionally to the degree of obesity. Type 2 DM is seen when the excess body fat reduces the effect of insulin in the body. If the pet can successfully diet, the diabetes can often resolve itself.

The strong link between obesity and DM means that weight management is an important part of managing the patient through the disease process and getting good glycaemic control.

READING LIST

Courcier EA, Thomson RM, Mellor DJ, Yam PS. An epidemiological study of environmental factors associated with canine obesity. Journal of Small Animal Practice 2010; 51(7): 362-367

Diez M, Nguyen P. Obesity: epidemiology, pathophysiology and management of the obese dog. In: Pibot P, Biourge V, Elliott D (eds). Encylopedia of Canine Clinical Nutrition (2006) pp2-57. Aniwa SAS on behalf of Royal Canin: Aimargues

German AJ, Holden SL, Bissot T et al. Dietary energy restriction and successful weight loss in obese client-owned dogs. Journal of Veterinary Internal Medicine 2007; 21:

1174-1180

German AJ, Holden SL, Bissot T et al. Dietary energy restriction and successful weight loss in obese client owned dogs. Journal of Veterinary Internal Medicine 2007; 21: 1174-1180

German AJ, Holden SL, Bissot T et al. A high protein, high fibre diet improves weight loss in obese dogs. Vet Journal 2010; 183: 294-297

German AJ, Holden SL, Mason SL et al. Imprecision when using measuring cups to weigh out extruded dry kibbled food. Journal of Animal Physiology and Animal Nutrition 2011; 95: 368-373

German AJ, Holden SL, Mather NJ et al. Low-maintenance energy requirements of obese dogs after weight loss. British Journal of Nutrition 2010; 106(1): 93-S96 German AJ, Morgan LE. How often do veterinarians assess the bodyweight and body condition of dogs? Veterinary

Record 2008; 163: 503-505

German AJ, Holden SL, Wiseman-Orr ML et al. Quality of life is reduced in obese dogs but improves after successful weight loss. Veterinary Journal 2012; 192: 428-434 German AJ, Luxmore J, Holden SL et al. Feeding obese dogs during weight loss is on average cost neutral. Journal of Small Animal Practice 2015 [doi: 10.1111/jsap.12338] Harper EJ, Stack DM, Watson TD, Moxham G. Effects of feeding regimens on bodyweight, composition and condition score in cats following ovariohysterectomy. Journal of Small Animal Practice 2001; 42(9): 433-438 Kealy RD, Lawler DF, Ballam JM et al. Five year longitudinal study on limited food consumption and development of osteoarthritis in coxofemoral joints of dogs. J Am Vet Med Assoc 1997; 210: 222-225

Kealy RD, Lawler DF, Ballam JM et al. Evaluation of the effect of limited food consumption on radiographic evidence of osteoarthritis in dogs. J Am Vet Med Assoc 2002; 217: 1678-1680

Kealey RD, Lawler DF, Ballam JM et al. Effects of diet restriction on life span and age-related changes in dogs. Journal of American Veterinary Medicine Association 2002; 220(9); 1315-1320

Mattheeuws D, Rottiers R, Kaneko JJ. Diabetes Mellitus in dogs: relationships of obesity to glucose tolerance and insulin response. Am J Vet Res 1984; 45: 98-103 Rolph NC, Noble PJM, German AJ. How often do primary care veterinarians record the overweight status of dogs? Journal of Nutritional Science 2014; 3: e58 [doi:10.1017/ jns.2014.42]

Wara AM, Bove K, Gutzmann L, Backus R. Estrogen replacement effects on insulin sensitivity and glucose tolerance in at-risk cats for feline diabetes. University of Missouri, Columbia, Missouri, USA. The WALTHAM International Nutritional Sciences Symposium 2013 Weber M, Bissot T, Serve E et al. A high protein, high-fibre diet designed for weight loss improves satiety in dogs. Journal of Veterinary Internal Medicine 2007; 21: 1203-1208