



Weight Inclusive Care for Osteoarthritis

It is not clear what causes osteoarthritis or why there is a higher prevalence in people with larger bodies. However, there is no evidence that weight loss improves long term outcomes, but there is evidence that it causes harm.

Osteoarthritis is a degenerative joint disease that affects more than 25% of the adult population. Its etiology is unknown, but it does have a genetic predisposition. There is no evidence that the so-called "extra force" exerted by larger bodies impacts joints, and whilst chronic inflammation has been linked to poorer outcomes in people with OA, this is just as likely to be caused by weight stigma and oppression.



A weight-centered approach to osteoarthritis is based on outdated beliefs that are not supported by good quality evidence. In fact, weight loss and consequent loss of muscle mass may worsen the condition. Management should therefore focus on muscle strengthening and addressing underlying psychological and social factors. Patients should all be treated equally, irrespective of body size.

Weight stigma is the manifestation of weight bias through harmful social stereotypes that we associate with people with larger bodies. Most people with larger bodies living with osteoarthritis feel stigmatized by their health professionals and this is an independent risk factor for poor health outcomes. It may also explain low adherence, reluctance to engage with services and medical avoidance.



Weight management programs have little to no long term benefits since up to 95% of dieters regain the weight. Yet they are often offered as a treatment for osteoarthritis. They predispose people to eating disorders and long term weight cycling (which is another independent risk factor for poor health outcomes), and perpetuate weight stigma.



Visit www.noweigh.org for more information

