

Pet Obesity Management Beyond Nutrition

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KEYWORDS

- Obesity • Nutrition • Weight management • Client communication
- Human-animal interaction • Human-animal bond

KEY POINTS

- Obesity is a complex and multifactorial condition that is easier to prevent than treat.
- Successful weight management plans for pets incorporate diet, exercise, and an understanding of human-animal interaction.
- Compliance increases when plans are tailored to meet the needs of each individual pet, owner, and environment.
- Understanding the complex and unique connection between owners and their pets allows successful weight management and long-term client trust.



Video of successful weight management strategy in an 8-year-old dog accompanies this article at <http://www.vetsmall.theclinics.com/>

INTRODUCTION

Obesity is a multifactorial condition that needs to be treated as a complex nutritional disorder requiring comprehensive management. Despite initiating standard diet and exercise, many weight management plans in the authors' experience fail because of veterinarians and pet owners not acknowledging and addressing the complex nature of obesity. Successful weight management programs extend beyond standard nutritional management and incorporate an understanding of human-animal interaction. This understanding is developed with effective client communication that helps the veterinary team better appreciate each family's unique relationship with its pet and how diet and exercise can be incorporated into their environment. Thus, obesity

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treatment requires management from both medical and social science perspectives to achieve success. Obesity is a condition requiring lifelong management; however, when veterinarians go beyond standard treatment to incorporate each pet owner's unique relationship with their pet into the plan, it is also in the authors' opinion one of the few diseases in veterinary medicine that can be completely preventable and curable.

The Status of Pet Obesity

Obesity is one of the most common health problems affecting dogs and cats, with an estimated 34% to 59% of dogs¹⁻³ and 25% to 63% of cats⁴⁻⁸ being overweight or obese. The most common and clinically applicable method of diagnosing obesity is assessing a body condition score (BCS). A 9-point, 5-point, or lettering system can be used, as long as the same system is used consistently and explained to staff and pet owners. BCS is only used to assess body fat, whereas muscle condition scoring (MCS) is used to quantify muscle wasting.⁹ MCS is a monitoring technique to help veterinarians monitor for muscle wasting during weight management. Each BCS on a 9-point scale is generally associated with a 10% to 15% increase or decrease from ideal body weight and can help determine ideal weight for that pet.¹⁰⁻¹² Although definitions of obesity vary, overweight is generally considered to be 10% to 20% more than optimal body weight (BCS of 6-7 out of 9) and obese as 20% or greater more than optimal body weight (BCS of 7-9 out of 9). Pets with a BCS 7 out of 9 could be considered either overweight or obese. Body weight, BCS, and MCS should be a standard part of every physical examination and should be documented at every veterinary visit.

Risk Factors for Obesity

Risk factors for pet obesity vary in studies conducted worldwide on dogs and cats (Table 1). One epidemiologic study found that the risk factors for obesity in dogs were almost exclusively owner related, such as owner age, frequency of treats, amount of exercise, and owner income, which was also associated with lower awareness of obesity-related health risks.³ Many owner-related and husbandry risk factors for obesity highlight the need for veterinarians to fully understand the environment of the pet, as well as how the family dynamics and the pet-owner relationship may affect weight status and effectiveness of interventions.

| Cat | Dog |
|--|---|
| Neutering | Neutering |
| Cat breed | Dog breed |
| Cat age | Dog age |
| Male sex | Frequency and type of treats (table scraps) |
| Owner age | Owner age |
| Food type (premium, therapeutic, high fat) | Food type (noncommercial, canned) |
| Frequency of feeding | Frequency of feeding |
| Sedentary or inactive lifestyle/exercise | Sedentary or inactive lifestyle/exercise |
| Indoor housing | Owner income |
| Owner underestimation of cat's BCS | — |

Data from Refs. ^{1-8,13-15,75}

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