

TRANSCRIPT

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Transcript: AMA Queensland President, Dr Nick Yim, ABC Sunshine Coast, Mornings with Sarah Howells, Thursday 15 August 2024

Subject: Obesity treatments

SARAH HOWELLS: Did you know that almost two thirds of Australian adults are overweight or obese? A national health survey done by the Bureau of Statistics in 2022 found 34 per cent of us are overweight, and 31.7 per cent are obese. Now, at that time, there were actually slightly fewer Australians in a healthy weight range than have tipped over all the way into obesity. Sobering isn't it, especially when you consider the range of diseases excess weight can make you vulnerable to? And that has prompted some to call for obesity to be treated more like a chronic disease than a simple matter of behaviour and diet. Now, pharmaceutical company Eli Lilly has released a white paper on the subject, calling among other things, for public funding for anti-obesity medications. Dr Nick Yim is the President of the Australian Medical Association Queensland. Dr Yim, is obesity a chronic disease?

DR NICK YIM: There is no doubt that obesity is a chronic condition. And as you've mentioned, we already have 8 million Australians living with obesity and a further 7 million who are overweight, which is really concerning for our country.

SARAH HOWELLS: Sometimes obesity isn't simply caused by, you know, poor diet or an unwillingness to get off the couch, but sometimes it is. How do you tell the difference?

DR NICK YIM: It's really challenging. Like many health issues, obesity is what we call multifaceted. There's many reasons why people might be struggling to lose weight or people might be putting on weight, which is the reason why it's so important to have that discussion with their general practitioner, because there could be many reasons to help treat it as well. There's obviously psychological factors - that might be diet, lifestyle, medications and even surgeries as well. So it's really important to commence that discussion with your GP.

SARAH HOWELLS: Yeah, it sounds like a lot of different reasons why people could be obese.

DR NICK YIM: Absolutely. And I guess the consequence of being obese and having difficulty losing weight can be a plethora of other issues such as type 2 diabetes, maybe heart disease, extra wear on the joints so you can have osteoarthritis and joint pain, so it's really important to have those discussions early and try and manage early as well.

SARAH HOWELLS: Now Eli Lilly says it wants public funding for anti-obesity medications. However, they also manufacture Tirzepatide, a diabetes drug that was found late last year to have similar weight loss benefits to Ozempic, in a study that Eli Lilly partly funded, staffed and designed. Given that, how wary should we be of that call?

DR NICK YIM: The key thing is there is no one quick fix. Unfortunately for the treatment of obesity, there are other elements that we need to be aware of - having those discussions with their general practitioner, increased funding into the primary healthcare network, ensure there are longer

consultations so you can have those conversations with GPs at the same time as with allied health, such as dietitians, exercise physiology. Those are the key issues that we need to start the conversation about, because it's not just a single drug that will fix things. Yes, there might be benefits, but it's actually a multifaceted solution.

SARAH HOWELLS: Of course, the drug is an option for some people, and the availability of Ozempic for diabetes has been a problem ever since it became used as a weight loss drug a couple of years ago. Supply still hasn't caught up with demand even without it being listed on the PBS. Are you concerned that we could see a similar phenomenon with Tirzepatide, particularly if it's listed on the PBS?

DR NICK YIM: Those are the discussions that we need to have because we have seen drug shortages across not just Australia, across the world. At the same time, we do need to still focus on that primary care aspect so we don't push everyone to a drug, for example, because we're not actually fixing the issue.

SARAH HOWELLS: So how do we deal with obesity while not cutting off medications that people with diabetes need to stay alive?

DR NICK YIM: There are some encouraging solutions and signs that we are seeing. Active transport plays a big role, and we've seen the introduction of the 50-cent trial in South-East Queensland for public transport. When people are going to catch a bus or a train, we've got to walk to the train station. It's all those incidental activities, like walking up stairs. It's trying to add that into your lifestyle. At the same time, it's having that discussion with their GP. So having a look at what the diet is like. Are there some areas where we could reduce calories? For example, when I speak to my patients, they don't realise that every morning when they have a flat white that's also 250 ml of milk. When you multiply that up by seven, that's almost a litre and a half of milk a week. So that's a lot of calories there. Those are simple solutions that I have the conversation with my patients about.

SARAH HOWELLS: Maybe switch to the black coffee in the mornings, Nick?

DR NICK YIM: I switched to black coffees a long time ago, and I've recently convinced my partner to switch to black coffees too. So I find that it's a little bit better for me.

SARAH HOWELLS: There you go, the simple things you can do. Certainly worth having a chat with your GP about that. Now, the Royal Australian College of GPs has this morning said it's concerned the federal government will cut funding for chronic disease management in general practice under reforms announced in the last budget. Is that something that you're worried about?

DR NICK YIM: Absolutely. This is not the time to cut funding to chronic disease management. We are seeing an increase in our population of chronic illnesses and that will increase presentations down the track to hospitals and stretch our hospitals further. So we need to ensure that all the funding is put back into primary care, into general practice, so we can see the patients and we can ensure that they are accessing the right care outside of hospitals.

SARAH HOWELLS: That's Dr Nick Yim, the President of the Australian Medical Association Queensland.

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