

Helping Adults With Obesity (BMI ≥ 30 kg/m²) Who Have Functional Concerns: Tips on Identifying When Physiotherapy Can Help

Physiotherapists can be instrumental in helping people with obesity manage functional challenges. Although people of all sizes can potentially have issues in the areas listed below and can benefit from physiotherapy, it is recognized that some functional challenges can worsen with an increase in weight. This may affect the quality of life of these individuals including how they participate in their daily lives and in weight and health management activities such as physical activity. Use this guide to determine when you may refer a person with obesity to a physiotherapist. Depending on the person's needs and the complement of professionals available in your clinical setting, physiotherapy may be accessed in a specialty clinic, home care, primary care setting, outpatient services, private practice, or other settings.* Physiotherapy referral may be indicated for an individual with obesity presenting with any of the following challenges. Skills that physiotherapists may employ are listed under each category.

Challenges With Movement, Pain or Daily Function

- Assess, diagnose and manage musculoskeletal issues (e.g. pain, injury, limitations in range of motion, endurance, strength)
- Analyze and manage problems with functional mobility (e.g. walking, moving in bed, getting out of a chair, reaching)
- Assess physical ability to participate in physical activity or exercise
- Assess for and prescribe assistive devices needed for walking or daily activities (e.g. bathing, getting out of bed)
- Address functional problems following significant weight changes (e.g. loss of muscle mass, excess skin creating movement problems)
- Assess balance and address balance concerns (e.g. falls)
- Prevent further or future health issues (e.g. assess efficiency of movement, mobility to minimize stress on joints)

Obesity Related Co-morbidities that Affect Daily Function

- Manage and educate on associated conditions (e.g. osteoarthritis, diabetic neuropathy, *urinary incontinence, cardiovascular disease, *lymphoedema)
- (*PT needs specialized training)

Energy Management

- Provide education on maximizing limited energy for activities of daily living (e.g. getting ready in morning, shopping, working)
- Promote managing energy for physical activity or exercise where indicated (e.g. playing with children, walking the dog, home exercise program, aquacize class)
- Evaluate recent changes in functional capacity or daily abilities related to energy management

Posture and Positioning Issues

- Assess posture and provide posture education/correction
- Evaluate concerns with positioning (e.g. pain issues, sleep apnea issues)

Activity Counselling Needs

- Counsel on functional mobility limitations and activity barriers, beliefs around activity and root causes of inactivity
- Address fear regarding movement and being active (e.g. pain with movement, fear of falling)
- Prescribe therapeutic exercise and physical activity
- Provide education on health benefits of activity and risks associated with sedentary lifestyle - myth debunking

Equipment Issues

- Provide education about equipment at home and/or correct use of home equipment
- Assess and analyze gait and footwear and provide education on appropriate footwear or need for orthotics
- Assess for and prescribe assistive devices needed (e.g. mobility aids, abdominal binder)

Access to Community Resources

- Consult with and determine need to refer to other health care providers or specialists to address physical and functional concerns
- Identify physical home environment concerns
- Identify physical barriers to accessing community resources (e.g. accessibility of equipment, finding appropriate facility or programming)

*When referring please contact the site to which you are referring to ensure appropriate weight capacity equipment is available.