

SCOPE

2014 / School

Course Guide

London
27-28 October



SPECIALIST CERTIFICATION OF OBESITY PROFESSIONAL EDUCATION (SCOPE)

SCOPE is the official education programme of World obesity developed by global obesity experts to educate health professionals. Registration is free and it provides:

- / Knowledge of obesity from leading obesity experts
- / The only internationally-recognised qualification in obesity management
- / CPD and CME points for continued professional development
- / Register today at www.worldobesity.org/scope

What's included?

- / 30 e-learning modules
- / Evidence-based education on obesity management across all disciplines
- / Recognition of obesity expertise through SCOPE Certification and Fellowship

Endorsements

- / 53 national obesity organisations representing 55 countries endorse SCOPE to their members
- / NHS commissioning guidelines on severe and complex obesity 2012/13 and 2013/14 endorse SCOPE
- / SCOPE is accredited by the Association for Nutrition
- / SCOPE is accredited by the CPD and CME service
- / SCOPE is mentioned in the Action on Obesity Report by the Royal College of Physicians
- / SCOPE is recommended for further study by the Royal College of GP's

CERTIFICATION

SCOPE Certification recognises an international standard of excellence in obesity prevention and management. To qualify:

- / Provide evidence of 6 months practical experience relating to obesity management within a healthcare profession
- / Earn a total of 12 SCOPE points through e-learning or live-training

SCOPE covers a wide range of topics including:

- | | |
|--------------------------------------|---------------------------------------|
| / Motivational Interviewing | / Obesity in Pregnancy |
| / Facilitating Behaviour Change | / Childhood and Adolescent Obesity |
| / Patient-Centered Physical Activity | / Bariatric Surgery |
| / Dietary Interventions | / Challenging Prejudices of the Obese |
| / Diabetes | / Obesity and Sleep Apnea |
| / Reducing Sedentary Behaviour | / Obesity and Hypertension |
| / Obesity and Mental Health | |

WELCOME

SCOPE School 2014: London



Nick Finan

Chair of Clinical Care

Dear Colleagues,

On behalf of the World Obesity Federation (formerly IASO), we are delighted to welcome you to the eighth SCOPE School. SCOPE (the Specialist Certification of Obesity Professional Education) is the internationally recognised standard of excellence in obesity prevention and management. SCOPE helps health professionals understand, treat, manage and prevent obesity.

This SCOPE School will offer techniques on: how to manage exercise and activity linked to Primary Care, integrating obesity care to diabetes, CVD prevention, sleep apnoea and much more.

Healthcare professionals and patients need to work together effectively, in order to manage excess weight and its associated conditions - this SCOPE School will equip you with the knowledge, skills and techniques to do so.

We have brought together a faculty of internationally recognised experts in different areas of obesity treatment. We create an environment in which you can engage with experts and colleagues and take home knowledge that will transform your patient outcomes.

To qualify for SCOPE Certification, you must earn 12 SCOPE Points by completing SCOPE e-learning modules and attending SCOPE courses. You also need to provide evidence of your practical experience of working with obese patients. Attending this SCOPE School will earn you four SCOPE Points. The SCOPE e-learning facility is a valuable resource featuring bite-sized modules developed by leading obesity experts, key articles and forums in which to network and share best practices. With SCOPE, you can create a customised learning programme to address your knowledge gaps and areas of interest. We hope that you enjoy the programme and the opportunity to network with your colleagues and the faculty.

Nick Finan, Chair of Clinical Care

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Useful Information

Wifi Details

Network: CDH
Password: time2work

Professional Development

Attendance provides 4 SCOPE points and 16 CPD points.



Monday 27th October

AM

	Start Time
Registration	08:45
Welcome	09:30
Role of Primary care providers in obesity management: <i>David Haslam</i>	10:00
Refreshment Break	11:00
Who needs specialist management? <i>Carel le Roux</i>	11:30

PM

Lunch	12:30
Role of commercial providers: <i>David Heber</i>	14:00
Integrating obesity care to diabetes, CVD prevention, sleep apnoea: <i>Alex Miras</i>	15:00
Refreshment Break	16:00
How to start the conversation: <i>Carly Hughes</i>	16:30 - 17:30
Drinks Reception	17:30 - 18:30
Group Dinner (Sade Restaurant)	19:00 (Group will walk from CDH together)

Tuesday 28th October

AM

	Start Time
Welcome	09:30
Key parameters to measure and record: <i>Carel le Roux</i>	10:00
Refreshment Break	11:00
Spotting the bariatric surgery candidate: <i>Francesco Rubino</i>	11:30

PM

Lunch	12:30
Shared care of post-op patient: <i>Dimitri Pournaras</i>	14:00
How to develop seamless care for obesity: <i>John Wilding</i>	15:00
Refreshment Break	16:00
Exercise & activity linked to Primary Care: <i>William Bird</i>	16:30 - 17:30

WORLD OBESITY

WHAT WE DO

- / MEMBERSHIP
- / INTERNATIONAL CONGRESSES & MEETINGS
- / AWARDS FOR EXCELLENCE
- / JOURNALS & PUBLICATIONS
- / CLINICAL CARE
- / POLICY & PREVENTION
- / SPECIALIST CERTIFICATION OF OBESITY PROFESSIONAL EDUCATION (SCOPE)
- / RESEARCH

OUR MISSION IS TO LEAD AND DRIVE GLOBAL EFFORTS TO REDUCE, PREVENT AND TREAT OBESITY.

Through our membership we create a global community of organisations dedicated to solving the problems of obesity.

SPONSOR PROFILES

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Denmark

Novo Nordisk is a global healthcare company with more than 90 years of innovation and leadership in diabetes care. The company also has leading positions within haemophilia care, growth hormone therapy and hormone replacement therapy. Headquartered in Denmark, Novo Nordisk employs approximately 40,700 employees in 75 countries, and markets its products in more than 180 countries.

www.novonordisk.com



SPONSOR

SECC

Address:

Scottish Exhibition + Conference
Centre, Glasgow, G3 8YW, UK

Contact:

info@secc.co.uk

The Scottish Exhibition and Conference Centre is one of Europe's leading conference venues. Every year we stage over 50 conferences, both national and international, and many are medical and scientific in content. Glasgow is a city with a history steeped in medical and scientific innovation, and remains at the forefront of research and development in life sciences. We are firm supporters of the work of World Obesity and are pleased to have offered financial assistance to some of the attendees of the Scope meeting.

www.secc.co.uk



SPONSOR

Cambridge Weight Plan

Address:

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Corby, NN17 5JE, UK

Contact:

shunter@cwpl-uk.com

Cambridge Weight Plan provide flexible weight management programme for both men and women.

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Our Cambridge Consultants will motivate and encourage clients throughout their weight loss journey and once they reach their target, they will be there to help them maintain their fantastic new look!

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EXHIBITOR PROFILES

EXHIBITOR

CamNtech Ltd

Address:

Upper Pendrill Court, Papworth
Everard, CB23 3UY, UK

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Howard Smith
howardsmith@camntech.co.uk

CamNtech provide wearable technology solutions for objective monitoring of, Energy Expenditure, Physical Activity, HRV, EEG, EMG, Sleep and Patient Reported Outcome.



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We pride ourselves in offering first class support to researchers and clinicians backed up by our worldwide network of distributors and supported from our manufacturing base near Cambridge, UK and our offices in Boerne TX, USA. www.camntech.com

EXHIBITOR

KasTech Ltd

Address:

Sheraton House, Castle park,
Cambridge, CB3 0AX, UK

Contact:

Sandy Evans
sandy.evans@kastech.co.uk

ProHealthClinical is a comprehensive computer toolbox co-developed by a primary care dietitian. It provides powerful evidence-based resources highly effective in weight management. Practitioners in tier 2, 3 and 4 weight management report it's easy to use, increases the delivery of personalised care to patients and produces cost-effective reports for commissioners.



An independent randomised controlled pilot demonstrated ProHealthClinical patients lost 3 times the weight of those receiving usual care and 34% achieved a 5% or more weight loss. Audits in over 50 GP practices using ProHealthClinical shows patients find the resources significantly helpful for achieving their lifestyle and weight loss goals. www.kastech.co.uk

EXHIBITOR

Tanita Europe

Address:

Hoogoorddreef 56e, Amsterdam,
1101 BE, The Netherlands

Contact:

David Hutchinson
info@tanita.eu

TANITA BIA Body Composition Analysers are essential tools for monitoring patients with weight related illnesses. Using the latest patented BIA technology, our products provide accurate weight measurements together with personalised readings including body fat, abdominal fat hydration, FFM, BMR and much more. The readings allow researchers and professionals working within the field of weight management to instantly assess and advise patients on their progress. For more information visit www.tanita.eu



EXHIBITOR

Ethicon

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Johnson & Johnson Medical Ltd,
Pinewood Campus, Nine mile
ride, Wokingham, Berkshire,
RG40 3EW, UK

Contact:

Katie Vaughan
Kvaugha3@its.jnj.com

At Ethicon we put one goal ahead of all others – transforming patients' lives by resolving weight-related health conditions.

To reach that goal, as well as providing quality medical devices, we focus on providing health care professionals with a deeper understanding of how to deliver the best care across the patient continuum, pre and post-surgery.

Consequently, at the SCOPE school are available to discuss and provide educational materials around: raising the topic of weight management; the effectiveness of weight management interventions, including Tier 3 medical weight management services and bariatric surgery; and post bariatric surgery care.

www.ethicon.com/healthcare-professionals/specialties/bariatric



EXHIBITOR

World Obesity

Address:

World Obesity Federation,
Charles Darwin House, 12 Roger
Street, WC1N 2JU, London, UK

Contact:

Natasha Joyner
enquiries@worldobesity.org

World Obesity Federation represents professional members of the scientific, medical and research communities from over 50 regional and national obesity associations. Through our membership we create a global community of organisations dedicated to solving the problems of obesity.

Our mission is to lead and drive global efforts to reduce, prevent and treat obesity. We collate, conduct and disseminate world-leading research into obesity, its impact, causes, treatment and prevention. We influence policy of academics, government and business at global, regional and national levels. We bring rigour, consistency and credibility to the field through educational programmes, practical training, publications, conferences and accreditation.

World Obesity offers an internationally recognised online obesity education programme for health professionals, providing evidence-based content developed by leading obesity experts.

www.worldobesity.org



ABSTRACTS

Role of primary care providers in obesity management

David Haslam, Luton & Dunstable Hospital, UK

Primary Care shouldn't need 'integrating' into the obesity management algorithm, as it is the means by which it is recognised, identified, and where patients are engaged, screened and managed for obesity and its complications from birth to death. An occasional intervention by a surgeon or cardiologist doesn't detract from the fact that obesity is a primary care problem and that primary care mostly attempts to provide the solution. The most crucial moment of a person's obesity programme is the moment they are engaged by the primary care professional. Primary Care encompasses the whole range of obesity management, from diet, activity and behavioural change, through drug therapy and knowledge of the surgical programme. The full integration of obesity services is challenging; commercial 'slimming' organisations tend to be overlooked by clinicians, and bariatric surgery is often a mystery, especially post-operative follow-up. Private clinics are a dilemma; once spurned for their unique pharmaceutical practices, they now offer a network of services to augment the efforts and ease the workload of primary care

Who needs specialist management?

Carel le Roux, University College Dublin, UK

Many patients think they can never be too thin and the constant pressures to reduce body weight to conform to an idealised body image can be detrimental to many. Healthcare systems vary across the world and patients can arrive in specialist weight management services for various reasons and at different points in their lives. Given the current treatment options at our disposal, the healthcare practitioner should always try to "first do no harm". This places a responsibility on the healthcare professional to thoroughly assess all patients and to use clinical acumen to determine which treatment option is best for the individual. We don't yet have the technological tools to practice personalised medicine in specialist weight management clinics. Moreover our services are often fragmented or favour one treatment approach above another. This can be confusing for patients, as they frequently received mixed messages from

different clinics. Subsequently, patients often go from one clinical service to another in search of the approach that suits them best. The risk of this behaviour is that to keep patients at a clinic, a healthcare professional may promise "non-typical" results. The end product is often a patient who has yo-yo dieted for most of their lives and feels a failure because they have not succeeded time after time. Thus identifying patients who need specialist managements and trying to personalise specialist treatment for the individual remains a challenge. In this lecture we will explore "who needs specialist management" and practical approaches that can be used.

Role of commercial providers

David Heber, University of California, USA

Commercial programs include, but are not limited to: weight-loss chains, health coaches and diet books. Websites, (OTC) medications, dietary supplements, meal replacement items, meal replacement programs and support groups. Among the methods employed, the greatest base of evidence exists for meal replacement products and programs. There is evidence that protein-enriched meal replacements combined with nutritional education can lead to significant weight loss that can be maintained over the long-term. The European Food Safety Association has approved meal replacements for weight loss and weight management. Adequate dietary protein, based on estimates of lean body mass, are important in both controlling hunger and maintaining lean body mass during weight loss. Combined aerobic and resistance exercise optimize the effects of protein on lean body mass. Extensive behavioural counselling and social support are needed to control overeating even when appetite is satiated by protein. The importance of community networks of support is emphasized by recent information on the social and psychological spread of obesity in communities. Combining individualized meal replacement programs, healthy active lifestyle and social support is a method being applied through community-based group programs which foster personalization. Commercial programs also feature a financial incentive for participants and owners which motivate behaviour change. The benefits of commercial programs are economy of scale and the scope to attack the obesity epidemic globally. Increased emphasis needs to be placed on adequate training of commercial weight counsellors in the basic principles of human nutrition and weight management.

Integrating obesity care to diabetes, CVD prevention and sleep apnoea

Alex Miras, Imperial College London, UK

There is a marked direct and indirect cost associated with obesity, both from the increased use of healthcare services and medicines and reduced productivity. Despite the broad impact of this condition on multiple facets of well-being and health, much of the clinical focus has been limited to weight loss. Whilst the assessment of weight may be important, it provides very little information on the health or health improvements of the individual patient. The King's Obesity Staging system was developed to address this shortfall in assessment. This approach forms a standardised, holistic scoring system that stratifies the individual in severity stages of physical, psychological and functional domains. These 9 domains are named to allow an alphabetic mnemonic; Airways, Body Mass Index, Cardiovascular, Diabetes, Economic, Functional, Gonadal, Health Status perceived and (body) Image.

These criteria are important, as they emphasise the multiple negative effects of obesity and the positive consequences of its treatments. They also provide a framework for standardised multi-disciplinary team decision-making, communication, audit and clinical research. The system has been validated in previous studies and has been shown to have low inter-operator variability. The use of weighing factors for each domain can improve patient selection for specific treatments based on local clinical priorities and evidence from randomised controlled clinical trials. The latter may also prevent or stop the selection of patient based purely on the BMI, which has a very low predictive value in terms of overall mortality.

How to start the conversation

Carly Hughes, NHS North Norfolk, UK

Why don't health professionals raise the topic of the health risks associated with Obesity? Is it related to the stigma associated with Obesity, or therapeutic nihilism? This presentation will explore this and then look at how it is possible to start the conversation. It will be illustrated by the personal experiences of a longstanding GP who also runs a multi-component medical weight management service.

A number of helpful educational resources and

frameworks will be discussed, including the '5 As' of Obesity management' from the Canadian Obesity Network: Ask, Assess, Advise, Agree, Assist; the RCGP Ten Top Tips 'Raising the topic of weight'; and Motivational interviewing. Modules exploring these topics in greater detail are available via World Obesity SCOPE e-learning.

Finally, the difference between raising the topic in primary care, and exploring it in a dedicated weight management clinic will be discussed, with case illustrations.

The key message is 'Normalise weighing people, and discuss the health benefits of maintaining a healthy weight at appropriate opportunities'. It is dangerous for the person to remain obese and inactive and the benefits of motivating them to change their lifestyle greatly outweigh the risk of offending them.

Key parameters to measure and record

Carel le Roux, University College Dublin, UK

The first thing patients coming to follow-up clinics want to know is "how much weight have I lost?" and the first thing that happens in weight management clinics is that patients get weighed. This makes the argument difficult to sustain when we tell patients that typical weight loss after lifestyle interventions is approximately 5%, but that our aim is to improve health, when in fact 5% weight loss is often viewed as insufficient by patients. Moreover, weighing patients doesn't give us any insight into how much the individual has benefited from the weight loss. In this lecture we will explore practical approaches of how to assess and record information from patients' pre and post interventions that could help us demonstrate the value of specific weight loss and can then be used as a tool to increase compliance with whatever treatment option we pursue together with the patient. We will also look in detail at the King's Obesity Staging Score and the Edmonton Obesity Staging Score.

ABSTRACTS

Spotting the bariatric surgery candidate

Francesco Rubino, Kings College
London, UK

No abstract submitted

Shared care of post-op patient

Dimitri Pournaras, Imperial College
London, UK

In this talk, weight loss surgery options are described and safety outcomes are reported, establishing that this type of intervention is safe. The term remission of type 2 diabetes will be explained and defined with the latest criteria. Data suggesting that remission is lower than previously thought will be presented. However, glycaemic control is excellent after weight loss surgery. It will be noted that we need to move away from remission, an outcome measure not currently used for any other treatment option for type 2 diabetes. Recent data on long term outcomes after weight loss surgery will be presented, demonstrating that recurrence of type 2 diabetes following initial remission is a challenge. The need for aggressive treatment of type 2 diabetes postoperatively with reduction in cardiovascular risk will be highlighted. The paradigm of cancer treatment with combination treatment, surgical and medical will be discussed. Comparative data of best medical therapy compared to best medical therapy combined with weight loss surgery will be described. The need to focus on hard end-points such as micro-vascular complications as an outcome measure after weight loss surgery will be suggested, as with all other treatment modalities used for type 2 diabetes. Data on nephropathy from retrospective and prospective studies will be presented.

To conclude, the need for more level 1 data establishing the timing of surgical intervention, identifying who will benefit most and finding the most effective methods of combinational therapy will be highlighted.

How to develop seamless care for obesity

John Wilding

Obesity is recognised to have complex causes and there is no simple solution. Preventative

approaches are essential at a population level and will underpin and support attempts at treatment; if effective they will also help reduce the possibility of relapse and weight regain after successful weight loss. Providing seamless care for people with obesity seeking help with weight loss is a major challenge for both the NHS and local authorities, and current levels of provision are woefully inadequate given the scale of the problem and the costs to individuals and society. The current model of care recommended by the NHS in England describes tiers of care ranging from preventative strategies (tier 1) through progressively more intensive lifestyle and medical interventions (tiers 2 & 3), through to complex care including bariatric surgery (tier 4). Provision of these services is from a mixture of NHS and commercial providers and is often fragmented, however there are some excellent examples of good practice, where the professionals concerned have been able to work successfully together to support patients to lose and maintain weight loss, including partnerships between primary and secondary care, NHS and private providers, and integration of medical and surgical services. Examples include the Counterweight Programme, the Rotherham obesity services, Aintree LOSS and the Wigan 'Lose weight feel great' pathway. These successful examples show that high quality, seamless care for obesity is possible within the NHS, but significant investment will be needed to ensure equity of access in the future.

Exercise & activity linked to primary care:

William Bird

No abstract submitted

SPEAKER BIOGRAPHIES



David Haslam

Professor David Haslam is a full time GP with a special interest in obesity and cardiometabolic disease, Physician in Obesity Management, Luton & Dunstable Hospital, and Chair of the National Obesity Forum (NOF). The NOF is a charity whose aim is to increase awareness of obesity, diabetes and weight related illness and improve their management. It provides educational material for clinicians and sits on the Department of Health Obesity Strategy Review Group. He is visiting Professor at Robert Gordon University, Aberdeen, Visiting Professor at Chester University and is the Obesity Specialist at 76 Harley St. He is a Board Member of ESCO (Experts on Severe and Complex Obesity) and the charity Foundations. He is a Director of PCOS UK, a member of the Counterweight Board and a Visiting Lecturer at Beds & Herts Postgraduate Medical School. He has written a dozen books and has had over 200 articles published in journals and papers and speaks internationally on obesity and related diseases. His books include 'Fat Gluttony and Sloth, obesity in Art, Literature and Medicine', and 'The Obesity Epidemic, and its Management', both 2010, and 'Controversies in obesity' and 'Fast Facts; obesity' both 2014.



Carel le Roux

Professor Carel le Roux graduated from medical school in Pretoria, South Africa and completed his PhD at Imperial College, London. He was appointed Head of Pathology at University College Dublin in 2011. He has focussed on translational research and the understanding of the physiological role and pathological changes in appetite control using the model of bariatric surgery.



David Heber

David Heber, MD, PhD, is a Fellow of the American Society for Nutrition and Professor Emeritus of Medicine and Public Health and the Founding Director of the UCLA Center for Human Nutrition at University of California, Los Angeles. He has been the Director of the UCLA Risk Factor Obesity Program since 2001. Dr Heber is board certified in Internal Medicine and Endocrinology and Metabolism by the American Board of Internal Medicine and is a certified Physician Nutrition Specialist. He has written over 240 peer-reviewed scientific articles and is currently the Chairman of the Herbalife Nutrition Institute and Nutrition Advisory Board.



Alex Miras

Dr Alexander Miras graduated from medical school at Imperial College London, UK, and trained as a junior doctor and Specialist Registrar in Diabetes and Endocrinology in the London deanery rotations between 2002 and 2010. In 2010, he was awarded a Medical Research Council (MRC) Clinical Research Training PhD fellowship, which enabled him to investigate the effects of bariatric surgery on food reward using functional neuroimaging and behavioural methodologies both in humans and rodents. He is currently a Clinical Lecturer in Endocrinology at Imperial College London and interested in the mechanisms through which bariatric surgery and medical devices improve weight, metabolic control and diabetes-related microvascular complications.



Carly Hughes

Dr Hughes undertook her BA at Cambridge where she studied at the Dunn Nutrition unit. She qualified with an MBBS from the Royal London hospital, and later undertook an MSc in Health Science at the University of East Anglia (UEA). She has been a GP partner in Norfolk for 21 years and over the last 10 years

SPEAKER BIOGRAPHIES

has developed her interest and skills in managing Obesity.

Her team developed an in-house weight management programme based on the NICE guidelines which won the overall NoF excellence award in weight management 2010. In conjunction with Norfolk public health and North Norfolk CCG they were awarded an NHS Innovation fund grant and developed a Tier 3 multidisciplinary weight management programme for North Norfolk. This programme offers multi-component interventions with 2 GPs with bariatric training, obesity specialist nurses, dietician, psychologist, exercise professional, health trainer and onsite gym.

She is a member of the RCGP nutrition group; co-authored the RCGP 10 top tips for GPs on post-bariatric surgery care, was involved in the obesity e-learning modules and has represented the RCGP on national level committees addressing nutritional issues such as recommended sugar intake 'Action on Sugar' meeting 2014.

Dr Hughes is a member of the 2014 NICE Obesity GDG reviewing the current guidelines.

She co-founded the Norfolk Obesity network. She is an active member of the eastern region ASO and presents regularly at both groups. She is an honorary lecturer at the UEA and teaches undergraduates and GP registrars on obesity related topics.



Francesco Rubino

Professor Francesco Rubino is Chair of Bariatric and Metabolic surgery at King's College London and Honorary Consultant Bariatric Surgeon at King's College Hospital.

His research showed that the anti-diabetes effect of certain bariatric procedures, particularly gastric bypass surgery, results from factors beyond weight loss. This evidence provided a rationale for a surgical treatment of type 2 diabetes. His research-finding and theories also point to a role of the gastrointestinal tract in the pathophysiology of diabetes and obesity.

Professor Rubino's clinical expertise includes laparoscopic, bariatric, metabolic and upper digestive surgery. He is internationally recognized as one of the world's leaders in the research, teaching and practice of metabolic and weight-loss surgery.



Dimitri Pournaras

Dimitri Pournaras graduated from the Aristotle University of Thessaloniki, Greece and undertook all his postgraduate training in the UK, obtaining the membership examination for the Royal College of Surgeons of England. He was awarded a Royal College of Surgeons of England Research Fellowship to conduct research on obesity, diabetes and metabolic surgery.

He completed his PhD in the Department of Investigative Medicine, Hammersmith Hospital, Imperial College London and is currently a surgical registrar in the East of England rotation. He participated in the European Obesity Academy program. He is currently on the editorial board of Clinical Obesity.



John Wilding

John Wilding is Head of the Department of Obesity and Endocrinology at the University of Liverpool, UK. He trained in medicine in Southampton and at the Hammersmith Hospital, London where he also undertook three years laboratory-based research into the neurobiology of obesity and diabetes. He has worked at University Hospital Aintree, Liverpool since 1996 and as Professor of Medicine since 2005. He has published over two hundred papers, chapters and review articles related to his clinical and laboratory research interests in type 2 diabetes and obesity. His clinical research focuses on the pathophysiology of obesity and diabetes and evaluation of new treatments. He is Chair of the UK National Clinical Research Network Metabolic and Endocrine Speciality Group. He

leads specialist services for severe obesity at University Hospital Aintree - recently designated as a Centre for Obesity Management by the European Association for the Study of Obesity.



William Bird

Dr William Bird is a GP with a special interest in the promotion of physical activity. While a GP in Sonning Common in 1995

he developed Walking for Health and the Green Gym, both national programmes that have got over 1 million people more active.

From 2006-2011 he became Strategic Health Advisor to Natural England and developed the Natural Health Service together with the Department of Health. He currently sits on the Physical Activity Programme Board for Public Health England.

William is CEO of Intelligent Health, a Health IT Company he founded, which gets more people active using Smart card technology and behaviour change. It developed the award winning Beat the Street and delivered the NHS London Olympic Legacy by training London GPs in the benefits of physical activity.

Through Intelligent Health, William has been commissioned by Cities, EU as well as the WHO in the Middle East to help develop physical activity strategies. He regularly gives addresses at conferences throughout the world, including the Keynote address to the American College of Sports Medicine Annual conference in May 2014.

William has published papers in many journals and is currently co-editor of the Oxford Textbook of Nature and Public Health published by Oxford University Press.

In 2010 William was awarded the MBE for services to promote physical activity and health.

He continues to work half time as a salaried GP in Reading.

SCOPE School London 9th – 10th June 2015

Charles Darwin House, London, UK

The theme of the 2015 SCOPE School London is 'The principles of combining treatment modalities'. The course covers a wide range of topics, which will equip attendees with the tools to manage all aspects of treating a patient suffering from obesity and associated co-morbidities.

Our programme unites experts from across the world in addressing the assessment, treatment and prevention of obesity.

SCOPE School London 2015 will cover principles including: Lessons from cardiovascular disease management, combining calorie restriction with exercise, combining treatment modalities in children, combining surgery with exercise and much more.

Attendees will come away with a greater knowledge of how all of these principles can be combined to produce better patient outcomes.

Our intensive two day course covers the many features and varieties of obesity management that professionals encounter today. SCOPE School provides greater knowledge of effective patient management and of the vital role of professionals in tackling obesity.

Registration includes: scheduled lunches and coffee breaks, a networking dinner, attendance certificate and a limited number of FREE SCOPE packages worth £50!

Registration Fee: Members £275, Non Members £325

Day Rates are available. Please note that these do not include registration to the networking dinner:

Members £130, Non Members £150

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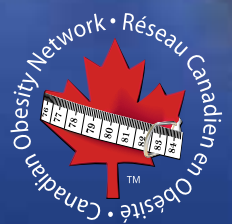
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FOR FURTHER INFORMATION PLEASE CONTACT: ICO2016@worldobesity.org • www.worldobesity.org

NOTES

NOTES



For further information about World Obesity activities please contact:

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