

**A Telehealth Application of the  
MOVE! Program for Obesity  
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**BACKGROUND / RATIONALE:**

The VA recently developed the Managing Overweight and Obesity in Veterans Everywhere (MOVE!) program in response to the growing obesity epidemic. Because the prevalence of obesity in VA patients is even higher than the 65% national average, however, many VA facilities are struggling with enrolling the large number of veterans who are overweight or obese into MOVE!. Alternative strategies for delivering the key components of the MOVE! Program in a timely manner that do not solely rely on relatively time intensive counselor-patient interactions as urgently needed to control the many chronic conditions associated with obesity, many of which are the focus QUERI (e.g., diabetes, heart failure, ischemic heart disease).

**OBJECTIVE (S):**

The primary focus of this study is to develop feasible Telehealth dialogues for use with the MOVE! program. The long-term objective is to develop telehealth-based strategies that are evidence-based, patient-centered, and tailored to obese veterans' individual needs and that enable VHA to disseminate MOVE! to larger numbers of veterans. The two specific aims of the study are:

Aim 1: To translate dialogues in the MOVE! Quick Start Manual that are used by weight management counselors in Level 1 of the MOVE! program to Telehealth dialogues;

Aim2: To test the feasibility of this Telehealth adjunct to the MOVE! program in a sample of overweight and obese veterans.

**METHODS:**

Written dialogues developed for MOVE! that are used to motivate patients to modify eating and exercise activities and to provide education about nutrition and physical activity will be translated to a Viterion in-home device. This telehealth technology will transmit text messages to patients in their homes via telephone lines and allow patients to communicate answers to posed questions back to the healthcare providers. A feasibility trial of this process will be conducted of two groups each consisting

of ten MOVE! participants from the Iowa City VAMC. These patients will receive a Viterion device to receive messages at home during the first eight weeks of the MOVE! program. Patients also will be able to communicate to study coordinators and MOVE! staff using the Viterion device during the trial when asked to record their weight and how well they are complying with the diet and exercise portions of the MOVE! program. The messages delivered back to patients will be tailored to their individual situations, based on the transmitted information. At the end of the trial, patients will complete semi-structured interviews to determine satisfaction with the Viterion device and automated dialogues. The difference between pre and post trial weights for each patient on a standard scale, the percent compliance with the daily Viterion dialogues posed to patients, and self-reported weight changes queried every week by the Viterion device will be calculated. Preliminary analyses also will explore if compliance varies according to demographic or clinical characteristics or baseline body mass index.

**FINDINGS / RESULTS:**

No findings to report at this time.

**STATUS:**

Project work is ongoing.

**IMPACT:**

In addition to helping veterans lose weight and improve associated chronic conditions, using a telehealth approach may reduce the time burden and associated costs of implementing MOVE!