Chapter 8
A Stepped Care mHealth-Based Approach for Promoting Patient Engagement in Chronic Care Management of Obesity with Type 2 Diabetes

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Diabesity could be defined as a new global epidemic of obesity and being overweight with many complications and chronic conditions. The financial direct and indirect burden of diabesity is a real challenge in many Western health-care systems. Even if multidisciplinary protocols have been implemented, significant limitations in the chronic care management of obesity with type 2 diabetes concern costs and long-term adherence and efficacy. mHealth approach could overcome limitations linked with the traditional, restricted and highly expensive in-patient treatment of diabesity. The mHealth approach could help clinicians by motivating patients in remote settings to develop healthier lifestyles and could be implemented in the Chronic Care Model. A practical stepped-care model for diabesity, including mhealth approach and psychological treatments with different intensity, is discussed.

Francine Kaufman coined the term “diabesity” (diabetes + obesity) to describe the dangerous combination of obesity, insulin resistance, metabolic syndrome and type 2 diabetes (Jones, 2006; Kresser, 2014a, 2014b; Leiter et al., 2013).

Diabesity could be defined as a new global epidemic of obesity and being overweight with many complications and chronic conditions. Such conditions include not only type 2 diabetes, but also cardiovascular diseases, hypertension, dyslipidemia, hypercholesterolemia, cancer, and various psychosocial and psychopathological disorders (Byrne, Cooper, & Fairburn, 2004; Castelnuovo et al., 2014; Flegal, Graubard, Williamson, & Gail, 2005; Wadden, Brownell, & Foster, 2002; Whitlock et al., 2009).

The etiology of diabesity is universally recognized as multifactorial with a complex interaction between genetic, individual, and environmental factors (Marcus & Wildes, 2009). Genetics plays an important role, but behavioral factors, such as a dysfunctional diet and low physical activity, are among the main modifiable and proximal causes strictly connected to obesity and obesity-related complications (Dombrowski et al., 2012).

Diabetes is emerging as a relevant chronic disease in the USA, particularly among children. The financial direct and indirect burden (considering also the clinical resources involved and the loss of productivity) is a real challenge in many Western health-care systems (Malvey & Slovensky, 2014). The total costs of diagnosed diabetes grew from US$ 174 billion in 2007 to US$ 245 billion in 2012 with an increasing of 41 (American Diabetes Association [ADA], 2013).
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