Type 2 diabetes (T2D) is a leading cause of cardiovascular disorders, blindness, renal failure, and amputations, and is associated with an increased risk of numerous other medical problems. Weight control is a cornerstone of T2D management, and is included in the joint treatment guidelines from the American Diabetes Association and European Association for the Study of Diabetes. Patients who have achieved weight loss benefits to glycemic control such as the percent of weight loss on patient-reported outcomes among patients with T2D is widely reported. The current study was conducted to describe the relationship between weight loss and health-related quality of life (HRQoL), work productivity and activity impairment, and health care use in European adults with T2D who are taking steps to lose weight.

**METHODS**

- Data came from the 2013-2014 National Health and Wellness Survey (NHWS). The sample was selected primarily through stratified random sampling within a general Internet survey panel, with additional offline recruitment of elderly respondents in continental Europe (France, Germany, Italy, and Spain).
- The sample represented eligible adults (aged ≥18 years) in France, Germany, Italy, Spain, and the United Kingdom in terms of age and gender.
- Health-related quality of life (HRQoL) was measured and approved by an independent ethical committee (KGS, MI, NL, US), and all respondents provided informed consent to participate.
- All data were self-reported by the respondents.

**Inclusion criteria**

- Reported physician diagnosis of T2D
- Weight control is a cornerstone of T2D management, and is included in the joint treatment guidelines from the American Diabetes Association and European Association for the Study of Diabetes.

**Results**

- Those respondents who maintained weight or lost >5 kg tended to have outcomes between the extremes of those who gained weight or lost ≤5 kg.
- Work productivity and activity impairment outcomes are presented in Figure 2.
- Health-related quality of life (HRQoL) outcomes are presented in Figure 1.

**DISCUSSION**

- Patients with T2D who lost moderate amounts of weight during a 6-month period tended to have better health-related quality of life and work productivity outcomes compared with those who gained weight or lost ≤5 kg.
- Those who maintained weight or lost >5 kg tended to have better outcomes than the extremes of those who gained weight and those who lost ≤5 kg.

**CONCLUSIONS**

- Patients with T2D who lost moderate amounts of weight during a 6-month period tended to have better health-related quality of life and work productivity outcomes compared with those who gained weight or lost ≤5 kg.

**REFERENCES**


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**Figure 1**

HRQoL by change in weight in prior 6 months.

**Figure 2**

Work productivity and activity impairment by change in weight in prior 4 months.