

OBESITY

Evaluating Online Weight-Loss Advice

Should you recommend online weight-loss forums to patients who are trying to lose weight? Researchers from University of Texas and Baylor College of Medicine, both in Houston, TX sought to answer this question by evaluating a month's worth of advice posted (mostly by forum participants and occasionally by forum moderators) on 18 online weight-loss forums.

To identify the forums most likely to be found by patients, the investigators searched for "weight loss forum" using the most popular U.S. internet search engine. The investigators identified 654 messages containing weight-loss advice that could be evaluated for accuracy by consulting clinical guidelines. They next used National Heart, Lung, and Blood Institute and American College of Physicians guidelines to determine whether each piece of advice was accurate, whether it was potentially harmful, and—in the case of erroneous or potentially harmful advice—whether it was corrected in subsequent messages.

The results showed that participants in online weight-loss forums "generally receive accurate and nonharmful advice," according to the researchers. They found that 56 (9%) of the messages gave erroneous advice and 43 (7%) gave potentially harmful advice. Corrections were subsequently posted for 19 (34%) of the erroneous messages and 12 (28%) of the potentially harmful messages.

Examples of erroneous or potentially harmful advice included encouraging people who had not made adequate attempts at lifestyle changes to try over-the-counter weight-loss

medications and claiming that only the types of food one eats (and not the total caloric intake) are relevant to weight loss. Advice on the topic of weight-loss medication was the most likely to be erroneous. On average, corrections were posted 17.5 hours after the erroneous messages.

The researchers found that high-activity forums—those with 1,000 or more messages posted per month—offered better advice than did low-activity forums. Of all messages that offered advice on the high-activity forums, only 2% contained erroneous advice and 1% contained potentially harmful advice. Furthermore, 50% of the erroneous messages and 100% of the potentially harmful messages on the high-activity forums were subsequently corrected. The researchers suggest that having an abundance of contributors may help to prevent errors, "just as in the online encyclopedia Wikipedia."

They also point out that the qualifications of advice givers could not be evaluated, as the forums were designed for direct, anonymous interaction among participants. Moderators, who were available on some of the forums, only provided one correction to posted erroneous advice and no corrections to harmful advice.

Overall, the researchers recommend referring patients to high-activity forums, such as the "Diet and Nutrition" or "Fitness and Exercise" forums on SparkPeople.com. But first, they say, providers should educate patients about the proper role of medications and warn them about the potential inaccuracy of the forums' medication-related advice.

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EMERGENCY MEDICINE

Watch Out for Cocaine Use

Although beta-adrenergic receptor antagonist drugs can help patients with hypertension and other coronary problems, they also can have serious adverse effects (including coronary vasospasm and paradoxical increases in blood pressure) that may be precipitated by the presence of cocaine. And providers working in the emergency department (ED) should be aware that cocaine may be present in a sizable percentage of their patients, according to researchers from Madigan Army Medical Center, Tacoma, WA and University of Texas Southwestern Medical Center, Dallas.

The researchers looked for evidence of cocaine in the urine samples of adult patients who, after reporting to an urban hospital's ED during an eight-week period, were found to have diastolic blood pressure of 120 mm Hg or greater. The sample did not include patients who acknowledged or showed obvious signs of recent cocaine use.

Of the 99 patients, 13 tested positive for cocaine metabolites. Five (39%) of the positive patients presented with reports of chest pain or symptoms of congestive heart failure—which can be treated acutely with beta-adrenergic receptor antagonists.

In light of these findings, the researchers advise ED providers to take thorough medical histories of patients with severe hypertension and to consider objective testing for the presence of cocaine when making decisions about treatments that could be affected by the drug. ●

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