



**THE MEANING OF OBESITY: THE PERCEPTION OF OBESE PATIENTS
O SIGNIFICADO DA OBESIDADE: A PERCEPÇÃO DO PACIENTE OBESO
EL SIGNIFICADO DE LA OBESIDAD: LA PERCEPCIÓN DE LOS PACIENTES
OBESOS**

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ABSTRACT

Objective: to understand the significance of obesity for the obese patient and the difficulties faced in everyday life. **Method:** A qualitative study, developed with 19 patients enrolled in Study Project for Reducing Weight (PEPE) in Salvador/BA/Northeast Brazil. There were recorded semi-structured interviews, conducted from the question << *What does mean obesity in your life?* >>. To interpret the findings, we used the technique of content analysis in thematic modality. The project was approved by the Research Ethics Committee, Protocol n. 193/2011. **Results:** there were built three thematic categories: **1. Perceptions and feelings about having obesity; 2. Limitation due to excessive weight; 3. Obesity as a cause of health problem.** **Conclusion:** the meaning of obesity to the patient was related to several negative factors, such as dissatisfaction with the body image and the presence of problems affecting the individual under physical and psychological scope. **Descriptors:** Obesity; Meaning; Limitation; Comorbidity; Nursing.

RESUMO

Objetivo: compreender o significado da obesidade para o paciente obeso e as dificuldades enfrentadas no cotidiano. **Método:** estudo qualitativo, desenvolvido com 19 pacientes inscritos no Projeto de Estudo para a Redução do Peso (PEPE), em Salvador/BA/Nordeste do Brasil. Foram realizadas entrevistas semiestruturadas gravadas a partir da questão << *O que significa obesidade na sua vida?* >>. Para interpretação dos achados, foi utilizada a Técnica de Análise de Conteúdo na modalidade temática. O projeto foi aprovado pelo Comitê de Ética em Pesquisa, Protocolo nº 193/2011. **Resultados:** foram construídas três categorias temáticas: **1. Percepções e sentimentos em relação a ter obesidade; 2. Limitação decorrente do excesso de peso; 3. A obesidade como causa de problema de saúde.** **Conclusão:** o significado da obesidade para o paciente esteve relacionado a vários fatores negativos, como o descontentamento com a imagem corporal e presença de problemas que afetam o indivíduo no âmbito físico e psicológico. **Descritores:** Obesidade; Significado; Limitação; Comorbidade; Enfermagem.

RESUMEN

Objetivo: comprender la importancia de la obesidad para los pacientes obesos y las dificultades que enfrentan en la vida diaria. **Método:** estudio cualitativo, desarrollado con 19 pacientes que participaron en el Proyecto de Estudio de Reducción de Peso (PEPE), en Salvador/BA/Noreste de Brasil. Entrevistas semiestruturadas fueron grabadas a partir de la pregunta << *¿Qué es la obesidad en su vida?* >>. Para interpretar los resultados, se utilizó la técnica de análisis de contenido en la modalidad temática. El proyecto

fue aprobado por el Comité de Ética de la Investigación, el Protocolo N ° 193/ 2011. **Resultados:** se construyeron tres categorías temáticas: 1. **Percepciones y sentimientos acerca de tener obesidad;** 2. **Limitación debido al exceso de peso;** 3. **La obesidad como una causa de problemas de salud.** **Conclusión:** la importancia de la obesidad en el paciente estaba relacionada con varios factores negativos como la insatisfacción con la imagen corporal y la presencia de problemas que afectan a la persona en virtud física y psicológica. **Descriptor:** Obesidad; Significado; Limitación; Comorbilidad; Enfermería.

INTRODUCTION

Obesity is becoming a global concern for the increased prevalence in several countries, meaning growing threat to the health of populations, which contributes to the global burden of other chronic non-communicable diseases (NCDs), premature death and disabilities.¹ In 2008 more than 1,4 billion adults, 20 years or older, were overweight. Of these over 200 million men and about 300 million women were obese.²

A study conducted by Surveillance of Chronic Diseases by Telephone Survey (VIGITEL) in 26 Brazilian states it was found that the frequency of obese adults ranged from 9,5% in the Federal District and 18,7% in Cuiabá. The highest frequency of obesity were found in Fortaleza (21,7%) for men and among women was in Rio Branco (21,3%). In Salvador the prevalence of obesity among adults was of 11,1%.³

Although the causes of the rise in obesity in the world are not yet sufficiently clarified, it is known that may result from the combination of genetic, physical, psychological, environmental, behavioral and family, who contribute so much to its appearance as for their maintenance.⁴ obesity is a chronic complex, also due to the adaptation to this modern globalized world. Social changes are constant and can be seen in various industries like: relations with work, family life and leisure, in addition to the values and customs. Thus, obesity can be regarded as a consequence of all these changes.⁵

The current epidemiology of obesity might be related, in part, due to the modernity of the increased consumption of processed foods, fast food rich in fat and carbohydrates, and also by reducing the time spent on physical activities.⁶

Psychological disorders often associated with obesity, yet have no relation of cause or effect is well established. It is known, however, that surrounds and acts mainly on the body and that is not separate from the mind. Thus, the obese person usually has feelings that are linked not only to poor dietary habits, as well as the consequences that being overweight brings to your body image.⁷

The trend to increasing obesity in all socioeconomic groups, have different consequences with respect to measures of weight control. The most economically privileged groups have demonstrated a greater awareness of the numerous disorders brought about by obesity and behavioral changes necessary for weight control. In the context of poverty, losses related to obesity have shown more severe limitations due to information, access to adequate nutrition and the material conditions they are subjected to in their daily lives that hinder change in lifestyle.⁸

In obesity, fat accumulation in the body due to improper diet with excess of hypersodic substances, rich in fats and hyperglycemic, associated with an irregular practice of physical activity, is the perfect combination to get a cardiovascular disease.⁹

Obesity, despite reaching all social classes, has been increasingly associated with poverty. This correlation is thought, rather than a lower income causes consumption of cheaper food, usually more caloric, like sodas, chips and candy, which hinders access to considerable healthy products, such as foods, vegetables and fruits, considered more expensive. Aside from improper diet and lack of habit to perform physical activities, people with economic limitations are primarily leisure option to watch television, which encourages the consumption of foods through advertisements.¹⁰

Damages posed by obesity are extensive because being overweight is a complex condition that is associated not only with chronic illnesses, but a number of serious repercussions in the social and psychological dimensions. Obese people may face discrimination and social prejudice in their personal relationships with the general public, and the professional.⁸

The circumstances described demonstrate clearly that obesity population constitutes a worrisome evidence, and that this reality deserves a different look for studies aimed not only to the consequences of the health of this population, but also to the feelings inter-related situation psychosocial this individual.

Given these considerations, this study aims to:

- Understand the significance of obesity for obese patient and the difficulties faced in everyday life.
- Show which thought the patient before his obese body.

- Identify the damage caused by having this body with obesity and its relationship with health care.

METHODOLOGY

This is a study from the monograph of conclusion of the Graduate Nursing in Bahiana School of Medicine and Public Health / EBMS, 2012. Salvador (Bahia), Brazil.

It is a descriptive study with a qualitative approach. The choice of qualitative research was based on the understanding that this type of study provides data very significant and dense, but also much richer for the analyzes.¹¹

The study was conducted with 19 patients in the Project Study on Overweight (PEPE), developed in the Ambulatory Care Faculty of Bahia (ADAB), in the city of Salvador, Bahia, northeastern Brazil. The sample was selected for inclusion criteria: be registered and accompanied by PEPE, having a diagnosis of obesity, age greater than 20 years, presenting mental integrity and agree to participate.

Prior to data collection were explained carefully to research subjects of the study objectives and their voluntary participation. The number of respondents was defined during the data collection, the data saturation, one criterion adopted by the researcher. Thereafter, the identification of recurrence in testimonials about the visions of obesity reached the "saturation point"; giving up finalized for field work.

The construction of data was by conducting semi-structured interviews, following a guideline consists of two parts: the first relating to the characterization of the subject and the second consists of the following question: What does obesity in your life'.

The interviews were recorded, after signing an informed consent form, being assured anonymity in relation to the identity of the subjects. Therefore, the study met the Resolution 196/96 of the National Health Council Standards regarding Research involving Humans in all its stages.

To interpret the findings, we used the technique of content analysis in thematic.¹² After transcription of speech, reading and rereading, themes emerged that represent the understanding of how people with obesity, think, feel, perceive themselves, behave and express the experience of obesity in everyday life. To protect the identity of the participants were assigned code names formed by Constellation star in excerpts of reports described.

This study was the research project approved by the Ethics Committee in Research of Bahia School of Medicine and Public Health, Bahia Foundation for Science Development, Protocol nº 193/2011.

RESULTS AND DISCUSSION

• Characterization of the subject

The study group was composed of 19 people: 14 female and 5 male. The age ranged 30-64 years, mean 43 years. As for education, 3 were higher, with 14 the average and 2 were unable to read or write. The mean BMI was 36,8 Kg/cm², with a maximum of 50 Kg/cm² and a minimum of 30 Kg/cm².

The analysis of discourse allowed the identification of three themes, which were called: Perceptions and feelings about having obesity limitation resulting from overweight and obesity as the cause of health problem.

What was observed in the course of this work is that all the meanings of obesity converge in producing feelings of restriction, of suffering and discrimination.

• Perceptions and feelings about having obesity

It is believed that patients who are obese show up unhappy, suffer social prejudices and see themselves as sick people having difficulties and limitations in their day-to-day. Obesity, in other periods of history, was considered synonymous with power and viewed positively by individuals. This view has been transformed over the years, and today is devalued by society.⁸

In the present study, we observed that for every obese person being overweight has a meaning, which is connected directly to this "weight" is the description of his life as reported:

It's a lot of weight.. I'm feeling very heavy.. (Aquarius)

A person who is overweight [...] I think fat is [...] a person who is outside the standard of beauty [...]
(Scorpius)

As seen in the above statements, we realized the existence of various feelings related to being obese, covering body image, self-esteem, translating into sadness, dissatisfaction and non-acceptance of self.

Obesity is sad for me, it's horrible [...] their self-esteem goes down there [...] is hard to live with obesity [...] I'm broken up about it! (Eridanus)

This is an ugly thing [...] I'm heavy, I'm fat [...] (Hydra)

You become a person brings with it heavy and disorder in the life [...] this weight we carry in the body [...] (Gemini)

Among the most frequently cited feelings during the research, "sadness" was the most reported by the obese. This feeling can be the starting point for the development of diseases such as depression, illness difficult treating.¹³

One of the meanings of obesity is represented by the relationship developed particular body, which affects the individual, generating feelings related to a disapproving look to your body. People from lower economic classes cannot afford to allocate body care, causing it to become with time and changing the image represented by him.¹⁴

The failure of self is related to the stigma that accompanies the obese. With body dissatisfaction, they seek tactics to hide or modify the differences in search of acceptance in social environments.⁷

In the analysis here develops, many respondents reported not like to leave home to avoid being subject to mockery by others:

I do not like to go to those places not so much happening, when I have no way! But I really like is to get between my family who are already accustomed [...] (Cetus)

The obese suffer prejudice, are targets of derogatory nicknames and respond to these constraints isolating themselves in an attempt to protect themselves from this situation. All this makes them feel rejected by their obese condition¹³.

Is identified in the interviews, that the perception of obesity may induce discontent for his own body. The existence of feelings of denial, rejection and frustration at the picture leads to the realization that to keep it beautiful there is a need to be thin, since this condition ensures the well being with yourself and others.

This fact can be observed in a study that aimed to examine the changes in the lives of individuals undergoing bariatric surgery. Patients showed that weight loss provides a new life, with respect to the expected social life, not to be ashamed of your body and buy clothes without embarrassment..¹⁵ Thus, the statements about being obese showed evidence that the word " weight " is not only associated to the meaning of a measure quantified on a scale, but also thinking about the difficulties, barriers and prejudices faced by having this body. The obese person has peculiarities related to the psychological aspects associated with the socio-cultural discrimination, the disorders of body image, low self-esteem and changes in eating behavior.¹⁶

From the analysis of the testimonies it became evident that there is an association between weight and negative feelings related to beauty standards, such as feeling "ugly" with deformed body due to excess fat in certain areas, especially in the area abdominal. An obese individual who has still feels less suitable owing to their weight:

In my life obesity is overweight [...] ô that ugly thing, all fat, lard is everywhere [...] (Pegasus)

For me obesity is a very bad thing, really bad [...] (Aquarius)

The person who eats too much and fattening, means getting fat [...] It is for us to move around is bad, we feel useless [...] I do not like, I think ugly, being obese is ugly [...] (Taurus)

Despite reports showing different views of each respondent about his relationship with obesity, all converge to negative perceptions. Issues related to image can influence the daily activities of a person being obese a group that suffers rejection, feeling at a disadvantage to others for its excess fat. That way the media influences the way the person sees, taking as reference the beautiful models on the magazines and presented in TV.¹⁴

Although abdominal fat have a meaning of increased risk for metabolic diseases, this concern does not appear in reports. It was observed only concern with the image, leading us to understand that the value of aesthetic prevails at the expense of health-related issues.

Obesity implies dissatisfaction towards the body, causing low self-esteem and commitments provided life.¹⁷ It was possible to realize this condition described in the literature in this study, in which the negative feelings and perceived ugliness of the body were present in several reports of research subjects.

Obesity produces a stigma that goes beyond social aspects of life of the obese. The obese has an inherent devaluation its image in society. Excess weight is seen as a physical deformity and aberration of behavior, the obese suffer discrimination, leading him to accept there as just and worthy of it.⁷

◆ Limitation due to excessive weight

Obesity increases the risks of morbidity and mortality, causes physical limitations due to excess weight, thus undermining the development of even simple activities of daily life that could be carried out without prior difficulties.¹⁸ Living a situation of obesity may require the person adapt to a world that has, in addition to values and standards; existing physical structures that often may be a limiting factor as exemplified in the testimonies:

The weight is hard for everything in life [...] the people who are fat is bad for buying clothes [...] it's hard for people to find clothes for chubby! (Cetus)

Individuals report that obesity brings a great difficulty for choosing the dress. The slim body as the beautiful, imposed by the contemporary society, makes the obese feel sad due to the size of clothing that can use. This causes them to move away from the aesthetic standard of modernity.¹⁶

Modern life brings consuming the verb as an imperative. The person to be within the considered normal and accepted by society must adopt the habit of consumption. The current fashion requires that individuals have an ideal image that is linked to a life of pleasure related to the physical and psychological aspects of each being. A search of the lost identity, to be out of the standards imposed by the current society, leads the person with obesity, especially among females, a situation of sadness, frustration and guilt for not having a desired body.¹⁴

Not being able to eat what they like is a major barrier faced by obese patients to continue the healthy diet, as shown in the following statements:

Are you not able to eat the food you like [...] and do not know why I'm getting fat, because hunger is too much. (Cetus)

I'm eager to eat fresh, I know I should not, I cannot eat sweet, but the will is tremendous, and sometimes I eat before I eat much more [...] (Mensa)

Faced with the interviews, you can analyze that power to the obese person is more than a necessity in the body. Foods constitute an important source of satisfaction. Changing habits and diet is a difficulty that can become a restriction causing suffering for not being able to eat the foods that once brought him pleasure. It is known that food is an element of great social value, because it is at the time the meals that affective relationships happen, creating stronger linkages as a celebration of a meeting between family and friends.

The body limited and restricted in their functions was often emphasized by the interviewees. They pointed out that excess weight impairs from conducting day- to-day, like getting up and down, even the simple choice of a garment. The feeling of powerlessness activities and the difficulty of the body to respond to situations that previously could be performed simply are a strong discourse of obese.

I had diabetes, always causes joint pain [...] so I'm not able to do my daily walks [...] also represents the lack of agility [...] I've learned to live with, learned to make things that allow the body [...] (Puppis)

You cannot get down [...] the body does not let you go [...] even to suspend arms, I have difficulty [...] (Aquarius)

The difficulty for physical activity due to excess weight was an important point stressed in patient responses. The decrease in daily activities and feel that the body no longer obeys the commands also bring harm to the mobility necessary to the everyday life of people. This commitment is a problem that will directly influence the difficulty of losing weight, considering that regular physical activity is a cornerstone of obesity treatment. Another consequence of the difficulty of handling refers to the development or worsening of complaints of joint pain, which also hinders the acting performance of routine activities.

The impairment of health caused by obesity and concern for issues concerning the limitations for performing simple daily activities occur frequently. The inability to perform activities as dressing, walking, bending down and get up, how to buy clothes too were lots of examples quoted by another study in obese.⁷

It is believed that the nursing staff can help in monitoring these patients, identifying the difficulties of physical activity, providing individualized guidance, adapting them to the reality of each patient. Given this scenario, it is observed that there is a large, open space for nursing interventions, requiring a health care more active in training for self-care.

The difficulty in finding appropriate clothes for their size, the image formed by the style of clothing and hence the feeling of dissatisfaction and exclusion are the main problems highlighted in this study. The frequency of these limitations in speeches led to a reflection on the growing impact around the physical and psychosocial damage caused by obesity. Patients reveal a search for their own identity, which enables him to create a new image of themselves. This search might cause emotional distress.

Because the body that I had for today .. totally different because I was too fat [...] I wore what? 38 and today is what? 42, 46 [...] (Aquarius)

Many patients say they do not recognize the image which present today due to the weight, finding herself "fat", "ugly", reflecting a very strong devaluation before her image. The externalization of feelings like anger and disgust can help the nurse to identify these subjective aspects and thus to act early in the care of health.¹⁹

A study with obese patients was associated with the loss of agility, fatigue, joint pain, back pain, beyond the physical limitation and dissatisfaction with self-image. The patients reported suffering discrimination by neighbors and family and also a lot of pressure to lose weight by doctors, family and friends, as one of the negative aspects of obesity.²⁰

In the present study, in many non-verbal expressions, we observed the anguish on the face of the subject on the display of impotence that body. Many wept during the interview, demonstrating how that obesity bothers them, and how hard it is to live with that body, which brings feelings which contribute to an unhappy life.

The difficulties posed by obesity in performing activities of day-to-day practice of interfering in activities with the children and sexual performance with partner⁷. Problems relating sexuality and obesity were present in one of the patient testimonials:

Sometimes hinders sexuality [...] (Mensa)

This perspective in a study of patients with obesity who have had bariatric surgery showed that there were significant changes in the marital relationship after surgery, improving issues related to sexuality and body image. The study also found that the surgical procedure helped to improve self-esteem and consequently the quality of life.¹⁵

Obesity affecting the world has consequences that lead to the detriment of the quality of life of obese. Facing a life with limited food and physical appearance of comorbidities related to increased energy overload causes a rather complex situation.²¹

In these circumstances it can still reflect on other barriers faced by obese, as the lack of adaptation to the modern world and the new profile of the population. These need to shape and adapt the physical structures that hinder and exclude people with excess weight such as accents in public places and transport.

◆ Obesity as a cause of health problems

Overweight and obesity, as well as contributing significantly to the development of chronic degenerative joint diseases, bone, such as orthopedic problems, poor posture, difficulty in walking, also cooperate for the onset of breathing difficulties and kidney problems skin. All these consequences of overweight are conditions that reduce quality of life¹. Analysis by the World Health Organization (WHO) published in the 2002 report, 58% of cases of diabetes, 21% of ischemic heart disease and 8% to 42% for some cancers can be broadly attributable to a BMI above 21 kg/cm².⁵

Demonstrations about the consequences of obesity on health were found in some lines. Respondents were association between "being obese" and have other health problems, showing to be aware of the comorbidities caused by excess weight:

To my disease that I have high cholesterol, have diabetes [...] and my body hurts, tocinho body hurts, so that's what gets to most people who are obese [...] (Aquarius)

Because I am over this problem of high blood pressure because of that, because this weight [...] (Columba)

I have high blood pressure, I have high blood pressure, have high sugar, he hobbles sim [...] (Hydra)

The reports of this research are in studies that claim that group of obese people report being more aware of the many consequences entailed by obesity. It is possible to verify behavioral changes around their style life.⁸

Obese individuals, particularly those with excess fat in the abdomen, are susceptible to a greater risk of cardiovascular problems involved in the metabolic syndrome, such as hypertension, DM and dyslipidemia.²²

The association between mortality from circulatory diseases, especially cerebrovascular accident and acute myocardial infarction is well established in the literature. Obese have relatively higher mortality than those with normal weight.⁶With regard to morbidity, it has been observed that hypertension and diabetes mellitus occur 2,9 times more often in obese individuals than in those with normal weight. That weight loss in hypertensive patients is usually accompanied by a reduction in pressure arterial.⁶

A study conducted in outpatient cardiology service at the University of Rio de Janeiro with patients in clinical treatment for coronary artery disease, showed that obesity was prevalent in 80% of cases.⁹

Excess weight also influences the individual's psychological area. This corroborates to demystify the prevalent idea that the problems arising from obesity does not just happen within cardiovascular, as shown in the excerpt below:

Disrupts psychologically [...] things of the universe psychological self-esteem [...] my obesity causes high blood pressure [...] (Mensa)

The speech makes clear sense that the patient presents with regard to owning obesity. Thus, this chronic multifactorial have to be taken seriously, not only by its comorbidities, but also for its psychological and existential dimension of each being. There is a psychological imbalance before feelings real image formed by the body and the portrait to be illustrated by the mind of obese, making him feel different from others, leading to having negative thoughts of themselves as inferiority, inadequacy and depreciation.²³

Individuals have particular ways of feeling, thinking and acting that are influenced by significant changes in daily life of societies and, therefore, cause changes in these psychological construct that ultimately the way in health care and social representations of different diseases.⁶

Obesity leads to many health implications of the obese individual, including the respiratory system. People with obesity syndrome have obstructive sleep apnea, hypoventilation syndrome due to accumulation of fat in the face and chest. These problems hinder the gas exchange abnormalities resulting in lung volume, which results in inefficient respiratory muscles.²⁴

Many of the interviewed patients complain of fatigue and shortness of breath due to exertion, which prints an increased work of breathing, as shown by the reports:

I get short of breath [...] it feels stuffy inside [...] (Hydra)

I'm finding in my health, fatigue is [...] represents so tired, I feel myself very tired, I feel it is because of the body, there is the weight [...] (Virgo)

Gimme tiredness, difficulty of doing things, to climb a hill you feel tired [...] Obesity is so difficult in your life [...] to me the difficulty of obesity is fatigue [...] (Orion)

If you are climbing a ladder, if you cannot light up because fatigue [...] (Aquarius)

Patients bring reports of difficulty moving around due to decreased respiratory function caused by excess weight. This effect of fat accumulation in the abdominal and chest wall in obese patients is a factor to cause abnormalities in both the reduction of lung capacity as increased workload.²⁴

Weight gain, both in small and in large proportions, is considered also an independent risk factor for other health problems such as, heart disease, sleep apnea, hernia and arthritis. The morbidity related to obesity may be as large as poverty, smoking, or drinking problem.²⁵

As can be observed, both in literature, as in this study, obesity is related to a series of limitations and suffering, significant health problems, ways to feel and live, and also to cope with the actual conditions of life and demands inherent in weight control. Thus it is essential that the strategies used in the obese patient, consider all the problems that affect the person with obesity.

Look obese person, from your perspective, allows directed to a caring person's uniqueness and particularity of experience which he lived. Nursing needs to wake up to what goes beyond the biological dimension, since the goal of the profession is the care that must be done so that the amplitude gain experience by providing yourself a complete make and humanitarian.

FINAL REMARKS

This study allowed to expand knowledge about obesity, which is growing every day in Brazil and in the world and reflects on the need to rethink a new approach for nursing care focused on patients with this condition.

Obesity presents itself as a large illness of biopsychosocial repercussions. Obese patients suffer from being overweight; experience difficulties imposed by this weight and still deal with the image formed because of excess of fat. The significance of obesity in these patients is closely linked to feelings, limitations and health problems affected by excess weight.

The significance of obesity for patients, in most cases, was related to their body image. Thus obesity affects the individual in the physical and psychological. Linked to perceptions, the restrictions are frequently related to the act move, besides the difficulty and frustration to find clothing for your size. The reports of the subjects showed that obese patients have a good understanding of the consequences that obesity can cause your health, arising from the guidelines and requirements of health professionals who participate in their treatment.

We found that despite the understanding of obesity-related comorbidities, the reports make it clear that the being that has obesity does not feel comfortable with your body, your appearance and also your health, making it clear that all this negatively influences treatment. Thus, treatment must be directed not only to the physiological consequences, but also for disorders of the social and psychological this individual.

This study made it possible to realize the significance of obesity to the patient may influence the way that the obese care of your health, given that low self-esteem can be an agent demotivating for care themselves. Many are self-discriminated, treating their body as an instrument of dissatisfaction. Such considerations require a new approach to nursing this patient profile, which is of utmost importance to enable a positive outlook on life of these patients. The feelings involved obese patients are also an important point to be observed by the nursing staff, as helping to overcome fears and uncertainties, the team runs directly on the quality of life of these patients.

Reflect on obesity not only leads us to inquire about causes, consequences and treatment of this condition, but also the other aspects involved that influence directly or indirectly on health issues, in which the staff, especially nurses, can have specific actions with better results.

Through activities in health education, practice inherent in the nursing professionals, it is possible to help the patient confronting and overcoming the difficulties encountered in their treatment. Through careful listening during patient care, whether in the office or in group activities, the guidelines may be more appropriate to the reality experienced by people with obesity.

Working Obesity is a starting point to achieve much greater advances in the quality of health care of the individual. Because education is caring, nursing and holds instruments to treat the patient as a whole being. Believed to be able to see the positive results of their practices is a major stimulus to continue the walk to work in health promotion.

It is hoped that the results of this study can contribute to the implementation of nursing care; a more enlarged and humanized centered holistic care of the obese patient.

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