

Table 3: Edmonton Obesity Staging System

Stage	Description	Management
0	No apparent obesity-related risk factors (e.g., blood pressure, serum lipids, fasting glucose, etc. within normal range), no physical symptoms, no psychopathology, no functional limitations and/or impairment of well-being	<p>Identification of factors contributing to increased body weight</p> <p>Counselling to prevent further weight gain through behavioural measures, including healthy eating and increased physical activity</p>
1	Presence of obesity-related subclinical risk factors (e.g., borderline hypertension, impaired fasting glucose, elevated liver enzymes, etc.), mild physical symptoms (e.g., dyspnea on moderate exertion, occasional aches and pains, fatigue, etc.), mild psychopathology, mild functional limitations and/or mild impairment of well-being	<p>Investigation for other (non-weight-related) risk factors</p> <p>More intense behavioural interventions, including nutrition therapy, exercise and psychological treatments to prevent further weight gain</p> <p>Monitoring of risk factors and health status</p>
2	Presence of established obesity-related chronic disease (e.g., hypertension, type 2 diabetes, sleep apnea, osteoarthritis, reflux disease, polycystic ovary syndrome, anxiety disorder, etc.), moderate limitations in activities of daily living and/or well-being	<p>Initiation of obesity treatment, including considerations of all psychological interventions, pharmacological and surgical treatment options</p> <p>Close monitoring and management of comorbidities as indicated</p>
3	Established end-organ damage such as myocardial infarction, heart failure, diabetic complications, incapacitating osteoarthritis, significant psychopathology, significant functional limitations and/or impairment of well-being	<p>More intensive obesity treatment including consideration of all psychological interventions, pharmacological and surgical treatment options</p> <p>Aggressive management of comorbidities as indicated</p>
4	Severe (potentially end-stage) disabilities from obesity-related chronic diseases, severe disabling psychopathology, severe functional limitations and/or severe impairment of well-being	<p>Aggressive obesity management as deemed feasible</p> <p>Palliative measures including pain management, occupational therapy and psychosocial support</p>