

High-Volume Patient-Caregiver Interactions in a Fully Digital Obesity Care Model

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Digital obesity care enables high levels of patient-caregiver interaction and sustained engagement in treatment, with higher retention than in other settings, potentially supporting long-term outcomes.


Across three years, messages exchanged, weight entries logged and retention in treatment was quantified for more than **50,000 patients** at Yazen Health, a Swedish digital healthcare provider of obesity treatment.

Study Design and Population

 Retrospective cohort study

 **50.414** patients from Sweden, Norway, Denmark, UK, The Netherlands, Germany & Spain

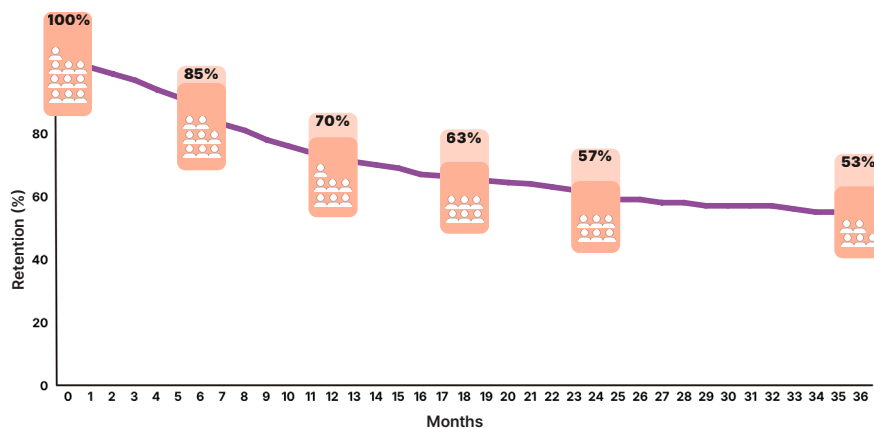
 76% women

 Mean BMI: 33.1 (SD 4.92)

 Mean age: 45.8 (SD 11.61)

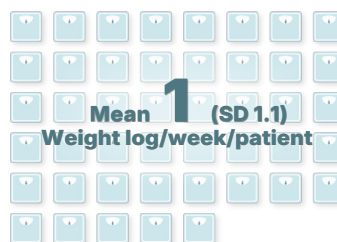
 BMI inclusion: 30 kg/m² or ≥ 27 kg/m² including comorbidity

70% of patients still in treatment after 12 months

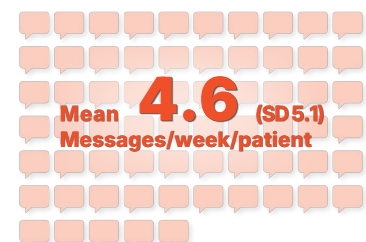


70% of patients remained in treatment after 12 months, in contrast to 25–32% reported in other real-world settings¹⁻³. Retention was **57% at 2 years** and **53% at 3 years**, indicating sustained engagement over time.

50.414 patients in treatment at Yazen during the study period or 3 years. Beyond messaging, sustained weight logging reflects continuous engagement difficult to achieve in traditional care



2.3 million weights logged



7.7 million messages exchanged

INTRODUCTION

In conventional healthcare settings, a substantial proportion of patients discontinue GLP-1 or GLP-1/GIP agonist therapy within the first year of treatment¹⁻³. Contributing factors may include limited access to caregivers, restricted appointment availability, and insufficient support for side-effect management. Digital obesity care models have the potential to overcome these limitations by enabling continuous patient engagement and on-demand support. We evaluated the scale of patient–caregiver interactions within a fully digital obesity care program offering unlimited follow-up.

METHODS

We quantified all messages exchanged between patients and multidisciplinary caregivers (physicians, health coaches, dietitians, psychologists, and physiotherapists) via Yazen’s digital platform. Data were collected weekly from January 1st, 2023, to December 31st, 2025 (157 weeks). Additionally, we assessed the frequency of patient-reported weight entries over the observation period and calculated the proportion of patients remaining in treatment at 12, 24, and 36 months.

RESULTS

Across **three full years, 7.7 million messages** were exchanged between **50.414 patients** and a multidisciplinary care team (mean 4.6 per patient per week). Patients logged their weight 2.3 million times, corresponding to a mean of 1 time per patient per week. The proportion of patients still in treatment remained high throughout the study period, with **70% of patients still in the service after 12 months** and **53% at 36 months**.

CONCLUSIONS

A fully digital obesity care model enables exceptionally high levels of patient–caregiver communication, far exceeding what is feasible in traditional in-person care. **When continuous access to professional support is available, patients engage frequently and proactively, highlighting the advantages of digital platforms for long-term obesity management and GLP-1-based therapy support.**

*Conflict of Interest: Martin Carlsson is a co-founder and employee of Yazen Health. All other authors are employees of Yazen Health.
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