

Baropsychology

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Abstract

Baropsychology may be defined as the study of psychological or emotional causative, contributory and confounding factors, comorbid conditions, and complications of overweight/obesity, as well as the psychological and behavioural interventions used as part of corrective and curative therapy. This brief communication defines, describes and details the concept of baropsychology. It attempts to bring together the various psychosocial and person-centred aspects of obesity care under a single umbrella. This will help ensure focussed and fruitful application of these principles in clinical bariatric practice.

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Introduction

Though obesity is just a seven letter word, it is a heavyweight syndrome, which packs a powerful punch. Obesity is a multifactorial, multifaceted clinical conundrum, with not only neuroendocrine and other biomedical determinants, but psychosocial confounders as well.¹ The biopsychosocial model of health and disease applies to this syndrome in multiple ways.² Assessment, management and monitoring of this disease, therefore needs psychosocial sensitization and competence. This is addressed by the upcoming science of baropsychology.

Definition

Baropsychology is the study of psychological or emotional causative, contributory and confounding factors, comorbid conditions, and complications of overweight/obesity, as well as the psychological and behavioural interventions used as part of corrective and

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curative therapy.

Simply put, baropsychology studies the role of psychologic factors in the etiology, presentation, natural progression and treatment of obesity. It includes the possible impact of metabolic therapy on emotional well-being as well as psychotropic medication on metabolic health.

Diagnostic baropsychology

Regular mental health assessment is an essential aspect of obesity care. Validated scales are available to screen, diagnose and monitor general as well as eating-related ill health.³ These help identify emotional contributors to weight gain, and eating disorders.

Therapeutic baropsychology

Intensive behavioural therapy is the first line treatment for obesity.⁴ While offering intensive care may not be feasible in all health care settings, psychological first aid can be offered to all persons living with obesity.⁵ Motivational therapeutics⁶ and vocabular therapeutics, both methods of enhancing the quality of obesity care are part of therapeutic baropsychology. Other psychological interventions, including cognitive behavioural therapy which can be used as required.

Pharmacology and baropsychology

Psychotropic medication may be used at times for the management of comorbid conditions in obesity. Centrally acting anti-obesity medication, and glucagon-like peptide 1 receptor agonists (GLP1RA) may also lead to neuropsychological complaints. The need for pharmacovigilance,⁷ specifically psychovigilance, can be viewed as a part of baropsychology.

Social baropsychology

Baropsychology's role and relevance extends beyond the person-physician interaction. Getting barobuddies (or lay allies) on board, ensuring obesity-friendly delivery of health care services, encouraging obesity -friendly language, and addressing weight stigma/bias at a societal level:^{8,9} all these falls under the purview of baropsychology.

Summary

Table lists the spectrum of baropsychology. Considering the rise in prevalence of obesity, as well as mental health

Table: Spectrum Of Baropsychology

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- Diagnostic baropsychology
 - Psychotyping (emotional assessment)
 - Sapiotyping (assessment of health literacy, numeracy)
 - Screening and diagnosis of eating disorders, psychiatric illness
 - Therapeutic baropsychology
 - Behavioural therapy as first line care
 - Adjuvant therapy, e.g., motivational therapeutics, vocabular therapeutics
 - Person centred obesity support (PCOS)
 - Pharmacovigilance/Pharmacological baropsychology
 - Regular psychological assessment
 - Psychological effects of anti-obesity medication
 - Metabolic effects of psychotropic medication
 - Health care system approach/social baropsychology
 - Barobuddies
 - Obesity-friendly health care services
 - Social awareness and activation against stigma/bias
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dysfunction, baropsychology will soon emerge as a distinct multidisciplinary specialty.

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References

1. Kalra S, Lodhi S, Selim S, Shakya S, Mehta RJ, Jayawardena R, et al. The Colombo Declaration on Obesity Care (CDOC): Person-, Public-, and Planner-Friendly Obesity Management. *Asian J Obes.* 2024;1:7-9
 2. Shrestha D, Kalra S, Somasundaram N, Dhakal GP, Selim S, Naseri MW, et al. The Kathmandu Declaration—Obesity in the south Asian region: An exigency statement. *Clinical Epidemiology and Global Health.* 2023; 22:101315.
 3. Kesavayuth D, Zikos V. Mental health and obesity. *Applied Economic Analysis.* 2024;32:41-61.
 4. Madhu SV, Kapoor N, Das S, Raizada N, Kalra S. ESI Clinical Practice Guidelines for the Evaluation and Management of Obesity in India—An Update (2025). *Indian J Endocrinol Metabol.* 2025;29:355-65.
 5. Kalra S, Dhingra A, Abhisheka K, Kapoor N. Psychological First Aid. *J Pak Med Assoc.* 2024;74:1189-91.
 6. Kalra S, Chawla K, Kapoor N. Motivation and Obesity Care. *J Pak Med Assoc.* 2024;74:182-.
 7. Garcha SC, Kalra S. Person Centered Approach and Challenges in the Management of Obesity. *Drugs for Medical Management of Obesity: A Machine-Generated Literature Overview.* 2025:155-82.
 8. Kalra S, Arora S, Kapoor N. Baro-buddies: Supporting the fight against obesity. *J Pak Med Assoc.* 2022;72:183-4.
 9. Weghuber D, Khandpur N, Boyland E, Mazur A, Frelut ML, Forslund A, et al. Championing the use of people-first language in childhood overweight and obesity to address weight bias and stigma: A joint statement from the European-Childhood-Obesity-Group (ECOG), the European-Coalition-for-People-Living-with-Obesity (ECPO), the International-Paediatric-Association (IPA), Obesity-Canada, the European-Association-for-the-Study-of-Obesity Childhood-Obesity-Task-Force (EASO-COTF), Obesity Action Coalition (OAC), The Obesity Society (TOS) and the World-Obesity-Federation (WOF). *Pediatric Obesity.* 2023;18: e13024.
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