

Blind Weighing

Blind weighing can take a few different variations, where the patient might step backward on the scale and then off again to not see the weight, or the weight display on the scale might be screened from view. The benefit of blind weighing is that it can reduce anxiety around weighing and hopefully improve outcomes. However, some patients do not prefer it because not knowing the number on the scale could actually cause them more anxiety, where they will overestimate what they weigh. Some clinicians also are hesitant to use this method because they believe sharing the weight results in better outcomes so that the patients can learn to adjust to the weight changes.

“On Track”

A way to provide a little context for weight while still not sharing or knowing an exact weight is to identify whether the weight is “on track” or not. For a pregnant woman, this would indicate whether she is gaining weight as expected based on her pre-pregnancy weight and the average expected weight gain per trimester (First trimester: 1-4.5 pounds; Second trimester: 1-2 pounds per week; Third trimester: 1-2 pounds per week).

Direction of Weight Change

The direction of the weight change can also be shared, whether it is an increase, decrease, or if it stayed the same. This can provide some context of the weight without exact numbers.

Magnitude of Weight Change

The magnitude of the weight change allows for a little more information to be shared so that the patient can understand a sense of how much weight they gained or lost. This is actually probably more meaningful than exact numbers and be expressed as a percentage.

Share Exact Weight

A little over half of clinicians in eating disorder clinics in a recent study used open weighing or sharing the exact weight with patients. This strategy can be helpful so that patients are able to adjust to weight changes as a form of exposure therapy, especially those associated with pregnancy. However, for clinicians outside of the eating disorders field, open weighing may be challenging because patients may be uncomfortable with the weight gain and need additional support during weighing-ins. Please view our sensitivity training to learn a little more about how to help women during those times.