

Obesity: Health Risk

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After smoking, the single biggest risk to our health is obesity. With the rates of smoking falling to an all time low, obesity now ranks as the single biggest risk factor for heart disease. Obesity rates in the United States are at an all time high.

According to the latest Centers for Disease Control data, 79% of adults are overweight and 36.5% are obese. Those numbers are staggering. Further, at least 17% of children ages 6-11 are obese. The number is even higher for youth ages 12-19 where over 20% of them are considered clinically obese.¹

So how do you know if you are obese?

Obesity is defined as having a body mass index (BMI) over 30. For the average 5 foot 6 inch male a weight of 190 pounds classifies you as obese. For the average 5 foot 2 inch female a weight of 165 pounds qualifies as obesity.

Obesity related health care costs are estimated to be \$147 billion dollars in 2008 U.S. dollars. The medical costs for obese individuals were \$1429 dollars higher than their normal weight counterparts.¹

Obesity also imparts cancer risk. Obesity has been associated and or directly the cause of many cancers.² Obesity has been directly linked to colon, endometrium, post-menopausal breast, kidney, esophagus, pancreas, gallbladder, liver, and hematological cancers.

Obesity also worsens the treatment and prognosis of most of these cancers.

Obesity affects every organ system in the body. The diagram below shows the most of obvious, but not all medical complications of obesity.

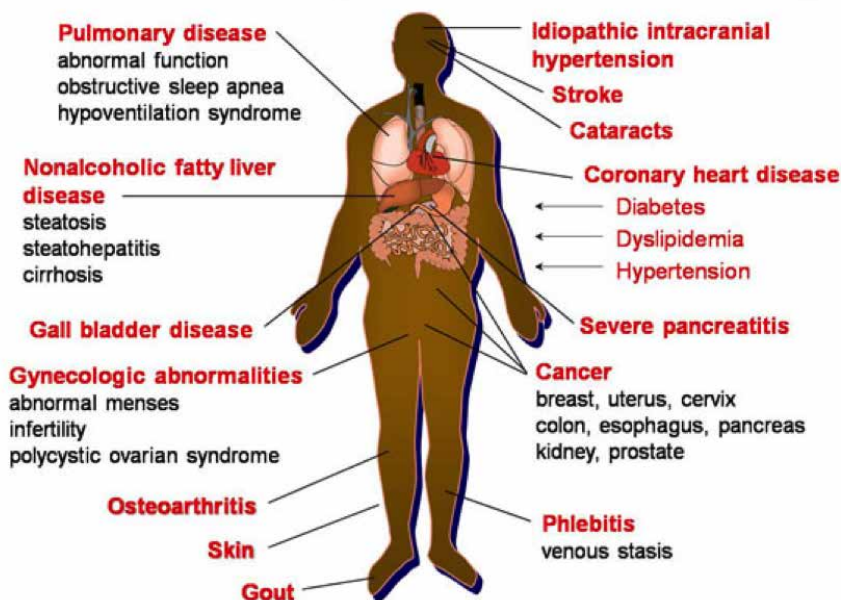
The most important thing you can do, after quitting smoking, is to lose weight. You must try to get as close to your ideal body weight as possible. But it's not that easy to lose weight. It's incredibly hard.

Americans have been trying to lose weight since the 1920s, yet we have continued to gain weight. More Americans today have gym memberships than in any time in history. More Americans today do fitness classes than in any time in history. More Americans today are on a diet than in any time in history. Yet, we are still overweight.

Losing weight is one of the hardest things to do. We have all tried losing weight and it's not easy. You are fighting your genetics, your metabolism, your age, your hormones, your appetite and other factors that contribute to weight gain.

Different solutions have been tried for weight loss. Scientists and researchers have tried calorie restriction diets, low fat diets, severe calorie restriction, starvation, liquid diets, increasing exercise, and almost always Americans have gotten fatter. Why?

Medical Complications of Obesity



Your body fights you back and manages to maintain your weight and or make you gain weight. Dr. George Blackburn, M.D. of Harvard Medical School has spent nearly 40 years of his life studying obesity and weight loss. In his book, **"Break Through Your Set Point"**, he describes humans as having a set point for their weight. At age 18, your body "sets" your weight. So if you weigh 180 pound at age 18, your body will try to keep you at 180 pounds indefinitely. If you lose or gain weight, your body will make changes and bring you back to your set weight. The only way to change the set point is to achieve a new weight and maintain that new weight for at least 6-9 months. In his book he goes through a multitude of studies showing the research behind why our weight loss efforts have been misdirected and why they don't work. Eating severely restricted calorie diets and exercising did not cause weight loss. However, exercise has been shown to prevent you from gaining weight back. In essence, it helps you keep weight that you have already lost off.

Dr. Gary Taubes has written a series of books on weight loss and he has become an authority on weight loss. He is the author of *Good Calories, Bad Calories*, a book that is nearly 1000 pages long detailing every study that has ever been done on weight loss. The book is very long and exhaustive. He later wrote the condensed version at the request of his patients and friends called, *Why We*

Get Fat and What to do About It.

In his book, *Why We Get Fat*, he details the obesity problem in the United States from 1900 to today. German researchers were shocked when they came to the US in the early 1900 to see so many obese children and adults and they started researching weight loss right away. They were trying to crack the code. He said that scientists were able to crack the code in the 1920s and 1930s, but ultimately the science would be lost and placed on the back burner because of the two world wars.

It didn't help that the Food and Drug Administration had adopted recommendations and guidelines that ultimately made Americans fatter.

Dr. Taubes recommends a ketogenic style diet and argues that this is the only way to lose weight. All other diets have failed miserably or leave you feeling hungry. Research has shown that these diets will also lower your bad cholesterol, lower your triglycerides, increase your good cholesterol, lower your blood sugar, lower your systolic blood pressure, lower inflammatory markers in your blood stream, and increase your functional capacity.

There are also several medications that have been shown to help with weight loss. Some of them have been around for over 30 years, while others have just been discovered. Talk to your physician about these medications. They are supposed to be used in

conjunction with diet and exercise therapy.

While exercise may not induce significant weight loss, it still has incredible beneficial metabolic effects and has been shown to reduce cardiovascular mortality (reduces death from heart attacks and strokes). You can see between a 30 and 45% reduction in mortality depending on how much running you do.³ So please make sure you are still exercising and lifting weights. Exercise lowers systolic blood pressure, lowers blood sugar levels, improves insulin resistance and improves the compliance of the muscles in your heart improving diastolic and systolic heart failure.⁴

Another vital, life saving option for obese patients, is gastric bypass surgery. For many of our patients, they have tried everything else and this is the only option left. Gastric bypass does offer considerable benefits almost immediately, even before all the weight comes off. Gastric bypass should be considered by patients that have struggled with weight loss and still are overweight.

It's important to talk to your doctor and health care professional to see if you are healthy enough for diet and exercise and to create a program that is right for you. For some patients, you may just need a new diet program, for others you may need help with medications, for others you may need surgery. Be sure to research all options thoroughly.

References.

1. <https://www.cdc.gov/obesity/data/adult.html>
2. <http://onlinelibrary.wiley.com/doi/10.1111/j.1749-6632.2012.06750.x/full>
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