

Increased obesity hindering success at reducing heart disease risk

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The dramatic increase in overweight and obesity in adult Americans over the past 20 years has undermined public health success at reducing risk for heart disease, according to research presented at the American Heart Association's Scientific Sessions 2009.

In a new study, researchers analyzed data from the National Health and Nutrition Examination Survey (NHANES) from 1988-94, representing 8,264 adult men and women, 20 to 85 years old. All had complete risk factor profiles of their blood pressure, fasting glucose, [low density lipoprotein](#) (LDL or "bad" cholesterol) and smoking status.

Researchers found that during this time period, the average [body mass index](#) (BMI) increased from 26.5 to 28.8 kg/m², a significant change. BMI - a measure of body fatness - is calculated by dividing a person's weight in kilograms by height in meters squared. In the same period, the number of people with optimal blood pressure decreased from 48 percent in NHANES III, 1988-94, to 43 percent in NHANES in 2005-06, and the number of people with optimal fasting glucose decreased from 67 percent to 58 percent. Both blood pressure and blood glucose are closely linked to obesity and these adverse trends track with the change in body weight.

The study also found the decreasing prevalence of optimal [blood pressure](#) and fasting glucose appeared to undermine improved LDL cholesterol and smoking status. The number of people with optimal LDL increased from 22 percent to 28 percent over time, while the number of

lifetime nonsmokers improved from 45 percent to 50 percent, according to the study findings. There was no net change in the proportion of people with all optimal risk factors.

"Despite focused [public health](#) efforts, there is no net improvement in the overall [cardiovascular risk factor](#) profile over the past two decades in the U.S. population," said Kami Banks, M.D., M.P.H., lead investigator of the study and a cardiology research fellow in the Division of Cardiology at the University of Texas Southwestern Medical Center in Dallas.

Banks is calling on the medical community to put more emphasis on prevention to reverse the [obesity](#) trend.

"Lifestyle changes and physical activity are key," she said. "As physicians we need to prescribe prevention — writing exercise prescriptions and healthy dietary prescriptions just like we prescribe medication."

Researchers are expanding the study to analyze the data by gender and race, Banks said.

Source: American Heart Association ([news](#) : [web](#))

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