

U.s. underestimates long-term costs of obesity, experts say

March 21 2012, By Amanda Gardner, HealthDay Reporter



Because complications take years to develop, they may escape documentation.

(HealthDay) -- The costs of the obesity epidemic to the United States and the economic value of curbing it are not captured fully by current methods, according to a new report.

The problem is that estimates used by Congress when it looks at these issues project out only 10 years, while it may take much longer than that for [complications of obesity](#), such as diabetes and heart disease, to manifest, the report authors say.

For example, "a person with diabetes is not going to go on dialysis right away. They're going to go on dialysis 10 to 12 years after their diagnosis," said Michael O'Grady, co-author of the report, released Wednesday by the Campaign to End Obesity.

A 25-year window for making [policy decisions](#) would be more appropriate when drafting policies aimed at curbing disease, he said at a Wednesday morning press conference.

By the same token, measures to prevent obesity can take 20 or more years, perhaps even generations, to show their promise, the report said. A wider [time window](#) would enable policy makers to assess the cost-effectiveness of preventive programs, the report noted.

"Interventions aimed at children will not have their full payoff until those children are adults," said Dr. James Marks, [senior vice president](#) and director of the Health Group at the Robert Wood Johnson Foundation, which funded the study.

Nor will the success of interventions aimed at pregnant women be seen for many years, noted the study's authors, speaking at the briefing.

O'Grady, citing current CDC figures, said more than one-third of U.S. adults are overweight, another one-third are obese and 6 percent are extremely obese.

"That's right around three-quarters of the population," said O'Grady, a senior fellow for health care research at the National Opinion Research Center at the University of Chicago and a principal with O'Grady [Health Policy](#), LLC.

One estimate puts the annual cost of obesity at \$147 billion, representing almost 10 percent of all medical expenses, the report said. But the Society of Actuaries -- which adds in lost productivity, employees on full disability and absenteeism -- puts the costs closer to \$300 billion a year.

And at a minimum, the Congressional Budget Office predicts that per-person, obesity-related spending will increase an average of 3.6 percent a

year, the report said.

The authors are asking those who make up budgets, including the Congressional Budget Office, to take into account a growing body of scientific literature on the toll of diabetes as well as hopeful interventions when they tally the price of obesity.

A window of 25 years will help policy makers arrive at more accurate long-term estimates, they said.

"Ten years is adequate for food stamps and aircraft carriers, but there are certain policy areas where we know the disease has a 20- to 25-year progression. You need the flexibility to go beyond 10 years," O'Grady said. "We probably want to modify the status quo of how we measure these things in order to capture the full value of that."

Marks said two of the greatest challenges the nation faces are restoring global economic competitiveness and the skyrocketing costs of medical care, which has become perhaps the biggest obstacle to long-term economic strength.

"Obesity lies right at the center of those challenges," he said. "The way Congress acts to score legislation, using only a 10-year horizon, misses a huge part of the value of preventive efforts."

The authors served in the George W. Bush administration. O'Grady was assistant secretary of Health and Human Services, and co-author James Capretta served as an associate director of the Office of Management and Budget.

More information: Visit the [Campaign to End Obesity](#) for more on the new report and the issue.

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