

Obesity is not a character flaw, expert says

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Is obesity the result of a poor self-control? Most people in the United States believe it is, according to a survey by the National Opinions Research Center: Three-quarters of the people surveyed attributed obesity to a lack of willpower.



In the same survey, more than 80 percent of Americans believed obesity is the most serious health problem facing the nation. That response tied obesity with cancer and ranked it an even more a serious health problem than diabetes, heart <u>disease</u>, mental illness, and HIV/AIDS. But while those surveyed classified these other health threats as diseases, three-quarters said obesity was not one.

Alfonso Torquati, MD, MSCI, strongly disagrees with these views. Torquati understands that obesity isn't a character flaw, but a chronic disease caused by an array of genetic, biologic, metabolic, behavioral, social and economic factors.

"Obesity is absolutely a disease that requires a range of interventions and medical management," says Torquati, chairperson of the Rush University Medical Center Department of Surgery and director of the Rush University Center for Obesity. "People may say 'just eat less, have will power' but they just don't understand that simply does not work for many people."

While the public misconception of obesity as a character flaw persists, Torquati says that <u>health care providers</u> have made progress in defining—and thus treating—obesity as a chronic disease. The importance of this label, he says, is not in how obesity is defined, but how it is measured.

"Successfully treating obesity shouldn't just be measured in lost pounds, but in not escalating to other diseases. Obesity is a base condition that then leads to or worsens so many others diseases like diabetes, high blood pressure, <u>cardiovascular disease</u>, sleep apnea, arthritis, and even cancer," he says.

Fighting attitudes, and evolution



While widespread public perceptions of obesity need to be corrected, perhaps the "audience" most resistant to change is our own cells and metabolic systems. For hundreds of thousands of years, weight loss was a signal that humans were starving. In response, the human body has evolved complex, self-protection systems.

Weight loss triggers a drop in leptin a hormone that tells the body when it's fully fed, and increases ghrelin a hormone that tells the body it's time to eat. The brain also reacts to weight loss by intensifying the feeling of reward from food, causing muscles to burn fewer calories. Those extra calories are stored as fat, so the body can return to its previous weight.

Indeed, keeping lost weight off is the fundamental challenge for those struggling with obesity. "Most of my patients have lost hundreds of pounds, but then steadily put that weight back on," Torquati says. "It's not just a matter of how disciplined they are."

Bariatric surgery is often most effective treatment for obesity

When someone is 20 or 30 pounds overweight, diet and exercise are prescribed and can work extremely well. Under a doctor's supervision, a multidisciplinary team of experts in endocrinology, cardiovascular disease, behavioral health, nutrition and fitness can help patients make lasting lifestyle changes.

But for people with a body mass index of 35—about 60 pounds overweight for their height –the most effective strategy to beating obesity is likely <u>bariatric surgery</u>, a range of surgical procedures that limit how much food someone eats by making the stomach smaller or changing the small intestine. Several research studies have shown that bariatric <u>surgery</u> is the most effective method to achieve sustained



weight loss, and thus better health.

The American Diabetes Association now recommends bariatric surgery as a first-line treatment for people considered severely obese. (For more information, please see these Bariatric Surgery FAQs.)

Don't call it cosmetic surgery

Bariatric surgery doesn't result in substantial weight loss simply by limiting how much food a person eats. Needing less food to feel full results in a series of changes in how people convert food into energy. Research by Torquati and colleagues, for example, documented how patients with type 2 diabetes can achieve long term remission after bariatric surgery.

"In China, <u>obesity</u> is not widespread but diabetes is. So bariatric surgery there is called 'diabetes" surgery," Torquati points out.

While the body fights steady weight loss through appetite-enhancing hormones, bariatric surgery's very quick weight loss seems to re-set the body's metabolic systems, so people no longer crave the foods that added excessive pounds.

Torquati's patients tell him they don't care if it's called diabetic, bariatric or metabolic surgery. "When we talk to the patients that finally seek medical solution, they never say it is for cosmetic reasons, or to look better," Torquati says.

"It is because they want to live longer, live better, play with their children, etc. They just want to be healthy."

Provided by Rush University Medical Center



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