

Individual, societal changes needed to combat obesity

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Fighting the obesity epidemic in the U.S. will require changes at both the individual and societal level, according to a review paper published today in the *Journal of the American College of Cardiology*. This paper is part

of an eight-part health promotion series where each paper will focus on a different risk factor for cardiovascular disease.

Nearly three-quarters of U.S. adults are overweight or obese. Obesity can increase a person's risk for multiple health conditions, including heart disease, and is one of the largest health care costs in the U.S.

"While some individuals have a genetic predisposition to [obesity](#), the most common causes are poor diet choices and even more so a lack of physical activity," said Carl J. Lavie, MD, director of exercise laboratories at the John Ochsner Heart and Vascular Institute in New Orleans and the lead author of the paper. "Rising [obesity rates](#) have been shown to parallel the increasing consumption of refined carbohydrates and added sugars and probably more importantly an increase in sedentariness and a decrease in physical activity."

Recent dietary recommendations have shifted away from dietary restriction or elimination tactics and instead have moved to focusing on overall dietary composition and patterns, such as the Mediterranean diet. This method allows for greater flexibility and smaller changes, making diets more effective and easier to adhere to.

Community interventions are key to reaching broader and more vulnerable populations. Implementation of more policy-, system- and environmental-wide interventions can transform environments and remove barriers that may hinder healthy decision making. These changes include creating more walkable communities, increasing the affordability and availability of healthy foods, increasing access to health services and implementing wellness programs in schools.

"While there is debate over whether responsibility for curbing the current obesity trends should fall on individuals or policymakers and lobbyists, it is clear that stronger initiatives are needed," Lavie said.

"Ultimately, reconciling the [obesity crisis](#) will require a greater commitment from both sides to create a proactive culture of health and wellness that aspires to prevent chronic disease rather than treating it."

According to the review, another aspect is increasing physical activity and cardiorespiratory fitness, which is critical to preventing weight gain. Targeting excessive sedentary behavior, which is separate from [physical activity](#), is also an important focal point in obesity and chronic disease prevention. When lifestyle modifications alone are not enough, pharmacotherapy and bariatric surgery may be used to intensify therapy for obesity.

Other topics discussed by the authors include the controversial topics of metabolically healthy obesity and the obesity paradox, as well as the need to better train health care professionals in the delivery of healthy living medicine, or lifestyle counseling.

The authors concluded that while more long-term studies are needed to determine optimal weight and weight loss strategies in different groups, "a multimodality approach and intervention will be required to reduce the devastating consequences of progressive obesity in our society and, especially, for the prevention and treatment of [cardiovascular disease](#)."

More information: *Journal of the American College of Cardiology* (2018). [DOI: 10.1016/j.jacc.2018.08.1037](https://doi.org/10.1016/j.jacc.2018.08.1037)

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