

Country's leading obesity care organizations develop consensus statement on obesity

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Credit: AND, ASMBS, OAC, OMA, TOS and STOP Obesity Alliance

Six U.S. organizations dedicated to the prevention and treatment of

obesity collaborated to develop a consensus statement on obesity, a complex, chronic disease that impacts nearly 42% of adults and 19% of children and adolescents. This unified effort aims to address the various roadblocks that the organizations face when addressing efforts to improve access to obesity treatment and reduce weight stigma and bias surrounding the disease.

"Our discussions led us to develop the consensus statement to give us a shared starting point for how we talk about obesity," said Anthony G. Comuzzie, CEO of The Obesity Society, one of the organizations involved in developing the statement.

The statement reads as follows:

- Obesity is a highly prevalent chronic disease characterized by excessive fat accumulation or distribution that presents a risk to health and requires life-long care. Virtually every system in the body is affected by obesity. Major chronic diseases associated with obesity include diabetes, heart disease and cancer.
- The [body mass index](#) (weight in kilograms/height in meters ²) (BMI) is used to screen for obesity but it does not displace clinical judgment. BMI is not a measure of body fat. Social determinants, race, ethnicity and age may modify the risk associated with a given BMI.
- Bias and stigmatization directed at people with obesity contributes to [poor health](#) and impairs treatment.
- Every person with obesity should have access to evidence-based treatment.

Organizations joining The Obesity Society in this effort include the Academy of Nutrition and Dietetics (the Academy), American Society of Metabolic and Bariatric Surgery (ASMBS), Obesity Action Coalition (OAC), Obesity Medicine Association (OMA), and the Strategies to

Overcome and Prevent (STOP) Obesity Alliance.

"Obesity is not the same in every person. There is a variability in response to all treatments for the disease. Similar to treating cancer, we need to approach the disease using multi-modal therapy to achieve the best long-term treatment of obesity. This includes medication, surgery, endoscopy, lifestyle changes and behavioral health interventions," said ASMBS President Teresa LaMasters, MD, FACS, FASMBS, DABOM.

OMA President Angela Fitch, MD, FACP, FOMA, further explains that there is a great deal of discussion surrounding the use of BMI to diagnose obesity. "Excess adipose tissue (body fat), particularly in certain locations of the body, is what contributes to the disease of obesity and its complications, and BMI alone should not be used to diagnose obesity," Fitch explains.

The organizations are hopeful that the consensus statement proves valuable in correcting any misconceptions –such as societal blame placed upon the individual about this disease.

"No statement or discussion about obesity is complete without recognizing the impacts bias and stigma about obesity and body weight have on both the health and quality of life of people living with obesity. Blame and shame are not solutions to the obesity epidemic. I'm encouraged by the unified effort to address obesity, recognizing that we must eliminate weight bias and stigma," said OAC President/CEO Joseph Nadglowski.

In addition to its ability to reduce bias and stigma, the recognition of obesity as a disease by the nation's leading organizations dedicated to the prevention and treatment of obesity is a critical step forward in the effort to expand access to evidence-based treatments for patients living with this disease.

"Access to care for people with chronic diseases such as obesity is one of our top priorities," said registered dietitian nutritionist Ellen R. Shanley, MBA, RDN, CDN, FAND, the 2022-2023 president of the Academy of Nutrition and Dietetics. "Of particular importance to the Academy is access to intensive behavioral therapy from RDNs—the food experts. We individualize treatment strategies as part of an interdisciplinary care team of qualified providers to help patients meet their health goals."

Any care plan for obesity begins with patients being treated with dignity and respect by [health care providers](#) who are knowledgeable in evidence-based treatment options. According to STOP, in a health care system with increasing stratification between the haves and have-nots, access to care must include adequate treatment coverage for all patients by insurance providers.

To date, insurers have taken widely different approaches in determining which treatment services are covered for their members, resulting in great inequities in care, which is why STOP's proposed Comprehensive Care Benefit should guide insurers through the development of coverage plans moving forward.

The six organizations are unified in their call to invite other health care organizations, medical institutions, practitioners, and advocates to join this effort by formally adopting the [consensus statement](#) and publicly acknowledging [obesity](#) as a disease. The six organizations plan to continue meeting to focus on building advocacy capabilities and resources; educating patients and policymakers; and conducting research.

More information: Statement: stop.publichealth.gwu.edu/obesity-statement#

Provided by The Obesity Society

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