Obesity experts weigh in


By Todd Neff

Maybe that extra jiggle around the middle is a good thing.

A January report in the Journal of the American Medical Association (JAMA) found that those classified as overweight or in the lowest of three classifications of obese have a 5 percent to 6 percent lower – not higher – mortality risk than those in the healthy range.

Paul Campos, a University of Colorado law professor, followed up with a New York Times op-ed titled “Our Absurd Fear of Fat.” Vincent Carroll piled on with his own Denver Post op-ed declaring “vindication” for Campos, who has long been a skeptic of “those who have made their careers on fomenting panic” with respect to obesity.

But not so fast, say two CU School of Medicine researchers who have published peer-reviewed articles related to weight, diet, exercise and health.

“First of all, there aren’t very many people out there touting that obesity makes your life shorter. It’s that you live with all sorts of chronic conditions,” said James O. Hill, PhD, executive director of the Anschutz Health and Wellness Center and director of the University of Colorado’s Center for Human Nutrition.

“Obesity is still a problem. We need to prevent it, and we need to prevent the add-on risk that comes with extra body fat with respect to heart disease, stroke, and diabetes,” added Robert Eckel, MD, who studies the relationships between nutrition, insulin action, energy, balance and body weight regulation. He is past president of the American Heart Association as well as the North American Association for the Study of Obesity.

Eckel is familiar with the JAMA paper and the work of its lead author, Katherine M. Flegal, a senior research scientist at the Centers for Disease Control and Prevention.

Devil in details. In their review, Flegal and colleagues considered 97 studies with a combined sample size of 2.88 million people and about 270,000 deaths. They found that those with a body mass index (BMI) of between 25 and 30 (overweight) had lower risk for all-cause mortality than those with BMIs from 18.5 to 25 – the “healthy” band of BMIs.

As Campos put it in his opinion piece, “If the government were to redefine normal weight as one that doesn’t increase the risk of death, then about 130 million of the 165 million American adults currently categorized as overweight and obese would be re-categorized as normal weight instead.”

But after a certain point, pounds start to shorten lives, Flegal’s data showed. Those with BMIs of 35 to 39 (grade 2 obese) and those with BMIs over 40 (grade 3 obese) had a 29 percent higher risk of dying than someone in the “healthy” range.

That higher risk at the top end is important, Hill said. People tend to gain weight slowly over time. Those who are overweight are more likely to become obese, and those who are obese are more likely to become more obese still. Mortality risk aside, the risk of...
diseases such as diabetes is higher for those who are overweight, he added. But in general, he views being overweight as a "caution area" and not a huge concern in itself.

"We’re not saying being overweight is terrible," Hill said. "We’re saying don’t become obese."

Eckel said Flegal and colleagues’ work provided valuable insights, but that the data they worked with lacked details such as what medications people were taking to combat health problems associated with weight gain, such as diabetes, cardiovascular disease and high blood pressure. Moreover, it’s not just these obesity-related maladies that are of concern, but also how they affect the overall quality of life, he added.

One can live a long time with weight-related disease such as type 2 diabetes, Hill pointed out, but it’s still a serious illness.

"Medical science is so good at keeping people alive," he said.