



Obesity

What is the difference between obesity and being overweight?

The definitions of both are based on the BMI (Body Mass Index). You can calculate your BMI with the following formula: $BMI = (\text{Weight in Pounds}) / (\text{Height in inches})^2 \times 703$.

You can also go to the following websites to calculate your BMI:

<http://www.nhlbisupport.com/bmi/> or

http://www.cdc.gov/nccdphp/dnpa/bmi/adult_BMI/english_bmi_calculator/bmi_calculator.htm

Overweight refers to someone with a BMI = 25-29.9. Obesity is a BMI of 30 or greater and extreme obesity is a BMI of 40 or greater. Tables to calculate your BMI are available on the Los Olivos website.

Is the rate of obesity increasing?

Yes the rates are increasing dramatically. In 1964, 40.2% of women were overweight and 15.7% were obese. In 2002, 61.7% of women were overweight and 34% were obese.

I've heard the BMI is not the best measurement of obesity. Is that true?

The best measurement of obesity is to measure total body fat. Muscular individuals can have a high BMI but not be overly fat. However these people are not the norm, and as a rule, the BMI is significantly correlated with total body fat. Total body fat can be determined at Los Olivos using a DXA machine.

Besides overeating, what else causes obesity?

Generally body weight is determined by a person's genetic makeup and their environment. A person's genes for example determine the number and size of fat cells present, the distribution of body fat and the resting metabolic rate. A person's environment includes dietary intake, behavioral habits, and energy expenditure. Other factors that have been associated with obesity include stress, inadequate sleep, low active thyroid, Cushing's disease and taking certain medications including steroids (cortisone) and certain tranquilizers.

What is the hormone leptin?

Leptin is a protein produced in the body. It is regulated by the Ob gene. Mutation of this gene has led to obesity in mice. Current research does not support a major role of the Ob gene in human obesity.

Is the distribution of fat important?

Excess fat in the abdomen (apple shape) is a greater health hazard than excess fat in the hips (pear shape). The use of MRI and CT scans of the abdomen can accurately measure abdominal fat but it is expensive. Waist circumference is the most practical method of estimating abdominal fat. A waist circumference of 40 inches in men and 35 inches in women constitutes a high risk of

hypertension, heart disease and diabetes. These measurements are only valid with a BMI of less than 35.

Does being overweight shorten my life expectancy?

The data has been controversial and there appears to be a difference between white and black persons and their age. Overweight people with a BMI of 25-30 who are black and are older do not appear to have a higher mortality rate. Obesity increases the risk of many diseases including heart disease, diabetes, stroke, hypertension, gall bladder disease, arthritis with joint replacement, sleep apnea, certain cancers (breast, uterus, colon, kidney and gall bladder), and causes excessive body and facial hair, stress incontinence, and depression.

What is the best diet to lose weight?

In general, most diets work in the short term. Consuming fewer calories than required causes weight loss to occur. Unfortunately, many people diet without increasing their exercise levels and they lose metabolically active muscle tissue. When they go off their diet plan, they gain the weight back in the form of body fat. This is called yo-yo dieting.

For long-term weight loss, it is recommended that people make small, sustainable changes that increase dietary fiber (fruit, vegetables, whole grains, beans etc.), decrease extra fats and sugars in the diet, and increase their activity level at the same time. This leads to body fat loss, maintenance of muscle tissue, and improved eating habits. Exercising is important in a weight loss program but must be combined with diet.

A general rule of thumb is the following: walking, jogging, or running one mile burns approximately 100 calories. One tablespoon of salad dressing or butter is about 100 – 150 calories, and one 12-ounce soda or lemonade is also about 150 calories. To be successful at the weight loss game, one must understand these caloric equivalents. Successful weight loss must include changes in eating habits and exercise levels.

Food journaling appears to be very important. The simple act of writing down what you eat can help motivate you to make changes. A balanced, lower calorie, low-fat, low-sugar food plan with normal portion sizes is essential to lasting weight loss. Eating at least 5 servings per day of fruits and vegetables is recommended. The government has an excellent website at www.mypyramid.gov.

How do I maintain my weight after I lose it?

Unfortunately many people regain their weight back in one to two years after stopping their diets. Maintaining good habits and continuing to exercise are extremely important. Improvements in eating habits and behavioral changes can be aided by registered dietitians, nutritionists, hypnotherapists, and psychologists. Many diet clinics will teach, reinforce and monitor patients to maintain weight loss and encourage physical activity. Weight Watchers is one of the most highly respected weight loss centers in existence. It is important to remember that small gradual changes in behavior are more effective than large ones. It is recommended that

most people get at least 30 minutes of activity most days of the week to maintain weight. Those wanting to lose weight are advised to get at least 60 minutes daily.

How effective is drug therapy to lose weight?

By themselves weight loss drugs are not effective, and may have side-effects. "Diet pills" can be effective in reducing the appetite but will not cause weight loss unless combined with a diet and physical activity. Xenical (Orlistat) works by decreasing fat absorption but has the side effect of diarrhea, increased gas, and oily stools. The weight guidelines for drug therapy include a BMI of 27 or higher in addition to risk factors such as high blood pressure, heart disease, or diabetes.

How safe is bariatric surgery?

Bariatric surgery has been utilized for the very obese patient (BMI 40 or over) for the past 30-40 years. With the use of laparoscopy and newer banding techniques, the complication rate has significantly decreased. The procedures are performed worldwide. Patients must first undergo extensive counseling, and attend dietary and exercise classes prior to being accepted into a Bariatric program. The procedure should not be taken lightly. Surgery does not treat the underlying causes of over-eating. Root causes must be addressed for long-term weight loss success.