

Obesity as a Disease, and the 800-Pound Gorilla in the Room

At its annual meeting in June 2013, the House of Delegates of the American Medical Association (AMA) voted to define obesity as a disease (1). In doing so, it overrode the recommendation of its own Council on Science and Public Health not to do so (2). For those interested in the subjects both of obesity and how one goes about defining a disease, this document makes for fascinating reading. I will not go into it in detail but just review the contents briefly, so as to set the stage.

After pointing out that the AMA had more than 20 policies relating to obesity (the principal ones are reviewed in an appendix), the document goes into quite some detail on the definition of "obesity." It then goes on to discuss the definition of "disease" (six major ones are presented in an appendix) and notes that "[t]his seemingly straightforward question lacks a single, clear, authoritative, and widely-accepted definition." For those of you who have wrestled with this concept, I'm sure you would agree.

Next, the document poses the question, "Would classifying obesity as a disease improve health outcomes?" To this question it provides two answers:

- 1) maybe yes: doing so might bring more focused attention to dealing with what is a serious health and public health problem
- 2) maybe no: defining obesity as a disease could increase work on pharmaceutical and surgical interventions which may not be broadly

applicable and could end up decreasing attention to public health measures.

The Council then concluded that without clear, generally accepted definitions of both "obesity" and "disease" that it would not recommend endorsing the obesity-is-a-disease proposal. Which, as noted, the House of Delegates then overrode.

You might ask, "Why did the House of Delegates do this?" One reason given is that doing so would help physicians focus more on the problem, although in most parts of the country it is becoming increasingly more difficult to ignore this problem. The second reason given is that it would provide a route through which obesity treatment and management by physicians could become more reimbursable, whether it is to prescribe drugs, recommend surgery, or provide counseling. In any of these cases, however, questions immediately arise as to which physicians would be eligible for what kinds of reimbursement. Demonstrating qualifications to do bariatric surgery is one thing but counseling for weight loss may end up in a "gray area." Few physicians are actually trained for counseling, much less for the complex psychological problems that often accompany obesity and the management of it.

In my opinion, the biggest problem with the recommendation is that few authorities acknowledge one of the major causes of obesity in our society: the food supply, promotion, and sale of it. In 2002, Dr. Marion Nestle, then Chair of the Department of Nutrition and Food Studies at New York University, published a book entitled *Food Politics* (3). She opens the introduction with the

words, "This book is about how the food industry influences what we eat, and therefore our health." In the preface, she notes that while she has access to a wide variety of sources and persons, none of the latter, in government, academia, or the industry would speak to her on the record about this subject. In other words, the food industry is very powerful in both government and academia. It can make or break careers.

One of Dr. Nestle's principal findings was that number of daily calories created for the American food supply rose from 3,300 per person in 1970 to 3,800 in the late 1990s, and I'm sure this number has continued to grow. Any reader of this missive knows that this far exceeds the recommended daily caloric intake for both men and women.

Obesity in any given individual has multiple causes. But surely the 800-pound gorilla in this room is the food industry. Surprisingly, it is not mentioned in the "Report of the Council on Science and Public Health." Gee. I wonder why.

Go well, Dr. Steve Jonas

REFERENCES

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- 3. Nestle M. (2002) Food Politics. Berkeley/Los Angeles, CA; University of California Press.

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