

Letter to the Editor: The Pundit Speaks

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“Healthy Obesity – Is There Such a Thing ?”

Metabolically healthy obesity (also known as "healthy obesity") describes obesity not accompanied by metabolic health complications, such as diabetes, hypertension, or high cholesterol. There are heated debates about what "healthy" metabolically healthy obesity actually is, and whether it renders people more vulnerable to other health problems. In 2004, the Centers for Disease Control and Prevention scientists published a study suggesting obesity was responsible for 400,000 deaths a year, making it almost as deadly as smoking. But, it turned out to be a false alarm. The authors made methodological errors that skewed their number too high. Being “overweight,” but not obese, was not associated with an increased risk of death at all. Shockingly, in 2013, a meta-analysis study found that even when adjusting for smoking, age, and sex, overweight people—those with a body mass index of between 25 and 30—had a 6 percent lower risk of dying than normal-weight individuals. To the contrary, a 2018 study suggested that healthy obesity does, in fact, put certain people at a higher risk of cardiovascular disease. But, what about the risk of premature death? The researchers found that obesity alone, in the absence of hypertension, dyslipidemia (high cholesterol), and diabetes, is not associated with a heightened mortality risk. These results, described in a paper published in the journal *Clinical Obesity*, counter previous assumptions and may pose important questions about current guidelines regarding the care of people diagnosed with obesity. Obesity is technically defined as having a BMI greater than 30 kg/m² or more. In short, many studies have shown that being obese decreases life span; whereas, other studies have shown an increased life span associated with “healthy obesity.” Still, new studies show that obesity, on its own, did not increase the risk of premature death. This was in contrast with other metabolic risk factors—including diabetes, dyslipidemia, and hypertension—all of which do increase mortality independently. Actually, one out of 20 people with obesity do not have any other metabolic problems. Dr. Jennifer Kuk, an associate professor at the School of Kinesiology and Health Science at York University, said, “This means that hundreds of thousands of people in America alone, with metabolically healthy obesity, will be told to lose weight when it’s questionable how much benefit they will actually receive.” Dr. Kuk found that a person of normal weight with no other metabolic risk factors is just as likely to die as the person with obesity and no other risk factors.

In the America that I love, being obese, with a BMI over 30, suggests that weight loss is recommended but it is not known if losing weight will actually bring benefits to these people or increase their life span. Stay tuned.

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