Obesity Costs $49 Billion for Every 4 Million Born

BY TIMOTHY F. KIRN
Sacramento Bureau

SEATTLE — Obesity costs the United States $49 billion for each group of 4 million children born, according to findings presented by Dr. Matthew M. Davis at the annual research meeting of AcademyHealth.

That $49 billion figure reflects the present rate of obesity, not the expanding rate actually occurring, said Dr. Davis, of the department of pediatrics and internal medicine at the University of Michigan, Ann Arbor.

Dr. Davis' research involved constructing a model that calculated the longitudinal costs of being obese—from ages 3 to 65—for the percentage of individuals who are obese at every age. Currently, the average number of children born annually is 4 million.

Significant differences in health care costs for obese persons do not begin until age 40. But by age 50, excess costs average $2,000 per person per year.

The model suggests that the percentage of individuals who are overweight or obese does not really change much before age 16, because some individuals gain and lose weight as they grow and cycle from being overweight to normal weight. But that percentage begins to climb at age 16 years, as the likelihood of being overweight or becoming overweight at that age and then returning to a normal weight declines. The rate begins its steepest climb when individuals are about 25-35 years of age.

Significant differences in health care costs for persons who are obese do not begin to occur before age 40 years, Dr. Davis said. But then they continue to increase so that by age 50 each individual incurs excess costs averaging $2,000 a year.

The $49 billion extra spent for obese individuals between the ages of 3 and 65 is composed of $44 billion in direct health care costs and $5 billion in days of lost work.

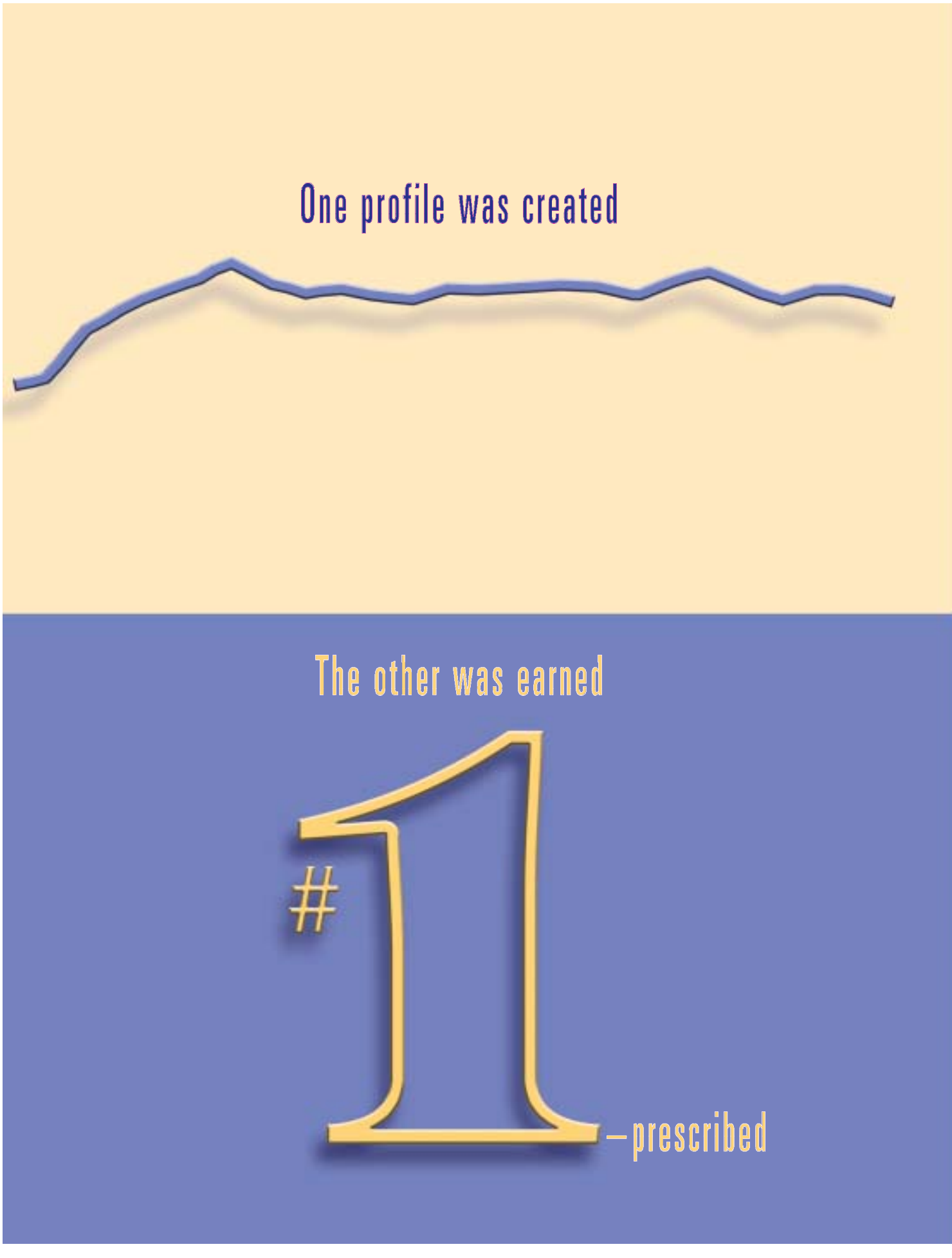
Dr. Davis also attempted to predict what impact various proven obesity interventions would have if they were implemented nationwide. However, he found he could not, because none of the studies about those interventions had any longitudinal information on the individuals once the intervention was stopped.

He said there are five public health interventions that most experts agree have been shown to work to reduce obesity rates. All five of those public health interventions involve targeting children, mostly those between 9 and 12 years of age. The public health intervention shown to have the biggest impact on reducing obesity rates is eliminating the sale of soda in schools, Dr. Davis said.

In his study, Dr. Davis had to assume the effect of the interventions stopped when the intervention ceased; in such a scenario, the interventions had minimal impact. Getting soft drinks out of schools would save only about $650 million. All of the other four interventions combined would result in savings of another $300 million.

Dr. Davis commented that the effective interventions are all programs that were implemented in schools. This is a problem, he pointed out, because the people needing the most intervention are in the 20- to 30-year age range.

Data for Dr. Davis' study were culled from a variety of sources, including the National Longitudinal Survey of Youth and the Medical Expenditure Panel Survey. ■



Diabetes Care for Older Hispanics

The National Institute on Aging offers a free fact sheet in Spanish with information on preventing, detecting, and treating diabetes. To order a copy of the publication, which is entitled, "La diabetes en las personas mayores: una enfermedad que usted puede controlar," call 800-222-2225 weekdays between 8:30 a.m. and 5 p.m. or visit the National Institute on Aging website at www.niapublications.org. ■