Clinical Capsules

Obesity-Related Mortality

Obesity was associated with an estimated 111,909 excess deaths in the United States in the year 2000, reported Katherine M. Flegal, Ph.D., of the National Center for Health Statistics, Hyattsville, Md., and her associates.

A study by the Centers for Disease Control and Prevention published last year in the Journal of the American Medical Association erroneously reported that obesity-related deaths reached 400,000 per year between 1990 and 2000.

Dr. Flegal and her associates estimated relative risks of mortality using National Health and Nutrition Examination Survey (NHANES) data (JAMA 2005;293:1861-7).

Most of the excess deaths (82,066) occurred in people with a body mass index (BMI) of at least 35 kg/m^2, compared with normal-weight people. Among overweight people, the estimated number of deaths was 86,094 fewer than among normal-weight people. When mortality was calculated for overweight people combined with obese people, the estimated number of excess deaths was 25,814, compared with people of normal weight.

Predicting Postmenopausal CV Risk

Screening for an enlarged waist in combination with elevated triglycerides appears to be a simple, effective tool to flag postmenopausal women at increased risk for accelerated atherogenesis and related adverse outcomes, reported Laszlo B. Tanko, M.D., and his associates at the Center for Clinical and Basic Research, Ballerup, Denmark.

In a study of 557 Copenhagen-area women aged 48-76 years followed for an average of 8.5 years, 16% of the women had enlarged waist (at least 88 cm) with elevated triglyceride levels (EWET), and 18% had metabolic syndrome, defined as having at least three of five criteria: enlarged waist, elevated triglycerides, elevated blood pressure, low HDL cholesterol, and impaired fasting glucose (Circulation 2005;111:1883-90).

EWET was linked to a nearly fivefold increased risk for fatal cardiovascular events, while metabolic syndrome was linked to a more than threefold increased risk. Excluding women with diabetes at baseline did not change the pattern. EWET also was better than metabolic syndrome for predicting annual progression of aortic calcification, Dr. Tanko and his associates said.

Middle-Aged Obesity and Dementia

People who are obese or overweight at middle age are at significantly greater risk for dementia in later life than normal-weight people, reported Rachel A. Whitmer, Ph.D., of the division of research, Kaiser Permanente, Oakland, Calif.

The investigators prospectively followed 10,276 people enrolled in the Kaiser Permanente medical program of northern California who were 40-45 years old between 1964 and 1973. At midlife, 10% were obese (BMI of 30 kg/m^2 or greater), 36% overweight (BMI 25-29.9 kg/m^2), and 53% normal weight (BMI 18.6-24.9 kg/m^2).

From January 1994 to April 2003, people who were obese at midlife had a 74% greater risk of dementia, compared with people who had been of normal weight, while overweight people had a 35% greater risk.

In women, the corresponding increases were 107% for obesity and 55% for overweight; no significant differences were found in men.

People in the highest quintile of subscapular skinfold at midlife had a 72% increased risk of dementia, while people in the highest quintile of tricep skinfold had a 59% increased risk of dementia, compared with people in the lowest fifth of the two measures, Dr. Whitmer reported in the April 29 online edition of the British Medical Journal.

Obesity Rising for All Income Levels

Obesity has largely been considered a problem for people with lower income levels, but new data suggest that the waistlines of people with higher income levels are catching up, reported Nidhi Maheshwari, M.B., of the University of Iowa College of Public Health, Iowa City.

For Americans making more than $60,000 a year (adjusted to 2000 dollars), the prevalence of obesity was 9.7% in 1971-1974 and rose significantly to 26.8% in 2001-2002, based on data on people 20 years old or older who were interviewed for NHANES between 1971 and 2002, according to the study, presented at a conference on cardiovascular disease epidemiology and prevention sponsored by the American Heart Association.

The prevalence of obesity among Americans making less than $25,000 a year was 22.5% in 1971-1974 and 32.5% in 2001-2002. Among Americans making $25,000 to $39,999 a year, the prevalence was 16.1% in 1971-1974 and 31.3% in 2001-2002. The prevalence among those making $40,000-$60,000 a year was 14.5% in 1971-1974 and 30.3% in 2001-2002.

—Kevin Foley