Editor’s Letter-Fall 2013

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When I first heard that the American Medical Association voted to classify obesity as a disease, I wasn’t sure what to think. Given that the U.S. medical community has tended in recent years to medicalize conditions and traits previously considered commonplace, this latest ruling wasn’t surprising.

In America, obesity is a widespread problem. According to data from the 2009–2010 National Health and Nutrition Examination Survey, more than two-thirds, or 68.8 percent, of adults 20 or older are considered to be overweight or obese. Other statistics are equally as grim. The consequences of obesity are staggering because the condition can result in serious health problems, such as type 2 diabetes, coronary heart disease, stroke and high blood pressure, just to name a few.

This year, when my younger brother died just three days before his 50th birthday, he was obese. I am sure my brother had type 2 diabetes and, more likely than not, a host of other health problems. He had been hospitalized because he had difficulty breathing, and when my sister and I visited him, the skin on his lower legs was blackened and fluid had pooled in his lower body. The hospital put him on oxygen so he could get a good night’s sleep. When we saw my brother in that sad, dreary hospital room, it would be the last time we’d see him alive. Several weeks later, we received his death certificate from the coroner. He’d written that the cause of my brother’s death was “complications of obesity.”

Previously, obesity was regarded as a cosmetic issue resulting, at worse, from a lack of self-control around food. But now that doctors have labeled obesity as a disease, perhaps people will be forced to look at the condition in a whole new way.

Some feel that the new classification will help those suffering from the condition and that it will prompt doctors to push harder to treat obesity, which, in turn, will stimulate more research to find newer, more effective treatments. Others, however, feel that identifying obesity as a disease will lead to the proliferation of new prescription drugs to feed the masses. Many believe the effort is misguided, an overreaction to a simple problem better solved with personal behavior modifications and a greater community commitment to creating public spaces that invite and support the pursuit of active lifestyles by its residents.

I think there’s a real danger with expecting doctors to fix the obesity problem, especially given the pharmaceutical industry’s fixation on profitmaking. It’s disturbing to think that there’s a ready-made market of millions who would qualify for treatment—especially if you consider the pills and potions in the research pipeline.

Realistically, the results of the AMA’s decision won’t be known for years. But even at my most optimistic, I can only hope that the good will outweigh the bad.

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http://beta.docker.realhealthmag.com/article/obesity-disease-24422-9702