

Invited Speaker Plenary 5: Obesity/Diabetes/Metabolic Syndrome

Trends in the long-term management of obesity

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Obesity is the number one public health problem in the world today. Its prevalence is increasing alarmingly in both developed and developing nations. Unchecked, it will continue to drain the health care resources of all countries. In the United States, for example, its prevalence has increased dramatically in recent years and now accounts for almost one-third of the adult population. Obesity is a complex multifactorial chronic disease that results from an interaction of one's genes and environment. It is a chronic, incurable condition, with significant health, economic, and personal costs. It requires long-term management similar to type 2 diabetes and hypertension. The purpose of this presentation is to evaluate the published evidence for new trends in the clinical and environmental long-term management of obesity. Currently, lifestyle and psychosocial treatments form the basis for clinical management of obesity. These approaches have their roots in behavior modification and include a multitude of techniques and strategies that focus on changing behaviours that are believed to contribute to or maintain obesity. Most of the various lifestyle approaches have several factors in common, including the use of self-monitoring and goal-setting, stimulus control and modification of eating styles and habits, use of reinforcement for healthy behaviours, nutritional education and counseling, physical activity, and cognitive-behaviour therapy interventions that focus on problem solving and improving coping skills. These interventions produce moderate weight losses and have minimal side effects. They are most helpful as a primary or adjunctive form of treatment for patients with BMIs less than 40. Newer trends in the clinical management of obesity include combining lifestyle intervention with portion-controlled meal replacements, prepackaged low-calorie products and meals, planned snacking and structured eating; the use of the Internet and related delivery systems; combining lifestyle changes with long-term use of pharmacotherapy; and the use of lifestyle approaches plus bariatric surgery. Earlier interventions with high-risk populations and an emphasis on prevention in our children are urgently needed. Because obesity is influenced by numerous biopsychosocial factors and is partially the result of a mismatch between our modern lifestyle and the environment in which humans evolved, simple solutions are inadequate to address this complicated issue. Despite the interest and progress in genetic research, major public health advances only will occur when we take the environment seriously. Research on the long-term management of obesity, including the environmental interactions that play a role in its development and maintenance, should have the highest priority. Only by addressing and modifying our obesogenic environment will we be able to stem the tide. Until we do this, we will not make substantial progress in addressing the public health epidemic of obesity.