Nearly 10 Percent of Health Care Dollars Spent on Obesity, Researchers Say

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Obesity-related illnesses now cost $147 billion each year, according to research from the U.S. Centers for Disease Control and Prevention, which is hosting its first ever "Weight of the Nation" conference here.

Medical costs associated with obesity increased from 6.5 percent of all medical spending in 1998 to about 9 percent in 2006, according to the study released here and published today in the journal Health Affairs.

Overall, medical care for obese patients is about 43 percent more expensive than for normal weight patients -- about $4,870 a year compared with $3,400, said Eric Finkelstein, lead author of the new study, which was conducted by the research group RTI.

The main driver of the increased economic burden of obesity is that more people are obese than ever before, not that medical care is more expensive, Finkelstein said.

One person in four in the United States is obese, up from one in five in 1998, according to the CDC data.

For the Health Affairs study, researchers examined Medicare, Medicaid, and private insurance company data on annual medical spending for 10,597 people in 1998 and 21,877 people in 2006. They used self-reported data on height and weight to determine body mass index (BMI).

Costs for obese patients enrolled in Medicare or Medicaid hit $7 billion a year for the non-institutionalized population and are largely attributable to the spending for prescription drugs and hospitalizations.

"Obesity is costly," Finkelstein said. "The only way to show real savings in cost is to reduce the prevalence of obesity and related illnesses."

Government Urges Measures to Curb Obesity

Coinciding with the new data, the CDC released a list of strategies to curb growing obesity rates that focus on public health initiatives such as

increasing physical education in schools, improving community infrastructures to promote walking and bicycling, and initiatives to encourage grocery stores to build in poor areas.

Other recommendations include adopting smaller portion sizes in schools, discouraging communities from promoting sugar-sweetened beverages, and backing community-based initiatives to combat obesity.

The consensus on the first day of the three-day summit was that stopping the obesity epidemic will require sweeping societal changes, not medical interventions.

"This is a social issue," former president Bill Clinton told the crowd of anti-obesity advocates during a morning session, as he accepted an award for the work of his group, the Alliance for a Healthier Generation.

"We are trying to turn the Titanic around before it hits the iceberg," he said.

Although societal changes are necessary, physicians can play a role in curbing the obesity epidemic by talking to their patients about weight loss in a clear manner so the patient really understands their health risks, Finkelstein said.

He cited a study that found that about half of patients diagnosed with hypertension or diabetes in the previous year didn't know their diagnoses a year later. That, he said, suggested a huge gap in what the physician is saying and what the patient comprehends.