

Curbing the obesity epidemic

Excess bodyweight is one of the most blatantly visible, yet most neglected, risk factors contributing to the overall burden of disease worldwide. At least 1.1 billion adults and 10% of children are now overweight or obese, leading to decreased life expectancy due to cardiovascular disease, type 2 diabetes, or some types of cancer. The only world region in which obesity is not common is sub-Saharan Africa; elsewhere, though, obesity is linked to poverty and to being female.

The main causes of the obesity epidemic are clear: overeating, especially of foods rich in fats, extracted sugars, or refined starches; and a progressive decline in physical activity. Management depends on successful motivation of people to eat less, eat healthier foods, and to exercise more, all of which are difficult to achieve in societies where fatness is revered, where fruit and vegetables are more expensive and less available than high-fat processed foods, or where exercise plays no regular part in people's lives. Food labelling, too, is unlikely to help those who need it most—those on the lowest incomes—for whom the only relevant label is the price.

But there are signs of progress. Across Europe, tackling obesity is being taken to a new political level. The prevalence of obesity, particularly in children, has risen three-fold or more in many European countries since the 1980s. More than half of adults in most countries in Europe are overweight. Two meetings this month organised by the WHO Regional Office for Europe allow senior policymakers from different sectors of European governments (health, sport, transport, urban planning, education, leisure, agriculture, and trade) to discuss their roles in counteracting obesity by promoting physical activity for health and by identifying trade and agricultural policy options. The aim is to formulate recommendations for debate at the WHO European Ministerial Conference on Counteracting Obesity to be held in Istanbul on Nov 15–17, 2006, where it is hoped that WHO member states will adopt a European charter that will give political guidance and provide a strategic framework for strengthening action on obesity.

A voluntary deal brokered by former US President, Bill Clinton, has the goal in the USA of removing sweetened fizzy drinks from 75% of schools by 2008

and from all schools by 2009. That might prove a start towards the USA shedding its label as the fattest nation on earth. Meanwhile, New Zealand's Health Minister, Pete Hodgson, is setting the agenda for fighting obesity not just in his country but worldwide. By announcing that work to combat chronic diseases and, in particular, obesity would be his first priority for the coming financial year, Hodgson has taken an important step to halt his country's problem. 35% of adult New Zealanders are overweight and another 21% are obese; one in five children aged 5–14 years is overweight and a further 10% are obese. Removing fizzy drinks from schools, which will now also happen in New Zealand, needs to become standard practice in all countries.

In the UK, doctors have been issued with new guidelines on how to advise patients to lose weight and take more exercise. And in Austria, subsidised gym or sports club membership for those covered by the state health insurance system is proposed. This might help affluent societies a little, but town planning to provide safe green spaces for walking, cycling, or play would achieve more in the longer term.

Prevention of obesity is only likely with fundamental changes to societies that involve, for example, production and availability of cheap healthy foods; urban planning to ensure that people exercise more; education about eating beginning in schools; and a global code to promote only healthy food and drink to children. 2 years ago, the World Health Assembly adopted the Global Strategy on Diet, Physical Activity and Health, with its recommendations to combat the rise in non-communicable diseases through a healthier diet and increased physical activity. But no health system is yet meeting the challenges of managing obesity, and no society has developed an effective strategy to prevent it.

The challenge is clear. Strong governmental leadership is essential to drive the necessary policy changes forwards—with legislation introduced within 2 years of voluntary codes failing—in partnerships that cross government departments, the media, the food industry, and retail and leisure sectors. Only then can we expect visible progress to reduce obesity and to curb the epidemic. ■ [The Lancet](#)

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See [World Report](#) page 1563

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For more on **the economics of obesity** see [Lancet](#) 2004; **364**: 2169–70 and [Lancet](#) 2004; **363**: 339.

For more on **designing cities to fight obesity** see [Lancet](#) 2003; 1046–47.