# Obesity and Severe Obesity Forecasts Through 2030

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# **Background and Motivation**

- Dramatic increases in obesity rates since the 1970s, especially for severe obesity
  - -Obesity rate = 34% in 2007-2008 (NHANES)
    - •>100% ↑ from 1976-80
    - 50% ↑ from 1988-1994

# **Background and Motivation**

- Evidence of leveling off of obesity prevalence for some adult subpopulations since 2003-2004
- Obesity costs are ~ 9% of annual medical expenditures (Finkelstein et al, 2009)
  - -\$147 billion per year

# **Study Goal**

- Goal: forecast future obesity and severe obesity prevalence for 2010-2030
  - With improvements over prior estimates
- Forecasts were used to simulate the savings that could be achieved through modestly successful obesity prevention efforts

## **Data and Methods**

#### Data

 Individual-level variables from 1990-2008 Behavioral Risk Factor Surveillance System (BRFSS)

#### Data

- State-level variables from:
  - -Bureau of Labor Statistics (BLS)
  - -American Chamber of Commerce
  - -Research Association (ACCRA)
  - -Census of Retail Trade

## **Methods**

- Logistic regression analysis predicting the probability of:
  - -Obesity (BMI> = 30)
  - -Severe obesity (BMI> = 40)

## **Methods**

- Includes individual-level demographics and state-level variables expected to influence obesity
  - Prices: alcohol, gas, fast food, groceries (relative to non-grocery), healthier foods (relative to lesshealthy foods)

### **Methods**

- Number of fast-food and full-service restaurants per capita
- -Unemployment rate
- -Internet access

## **Methods**

- Forecasting of future obesity and severe obesity:
  - Constructed a synthetic cohort using 2008 BRFSS data and the U.S. Census population projections
  - -Forecasted state-level variables through 2030

## **Methods**

 Multiplied coefficients from the two logit models by the data for each year of the synthetic cohort

## **Methods**

- Reductions in obesity-attributable medical expenditures were estimated as resulting from:
  - One percentage point reduction in future forecasted obesity prevalence
  - -No growth in obesity rates after 2010
  - -Healthy People 2010 goal obesity prevalence of 15%

# **Results**

# Projected Prevalence of Obesity (BMI> = 30)

	Year			
	2015	2020	2025	2030
Linear trend	36%	41%	46%	51%
Preferred model	35%	37%	40%	42%

# Projected Prevalence of Severe Obesity (BMI> = 40)

	Year			
	2015	2020	2025	2030
Linear trend	6%	7%	8%	9%
Preferred model	6%	8%	10%	11%

# Potential Savings in Medical Expenditures: 2030

Scenario	Forecasted Obesity Rate	Reduced Obesity Rate	Averted Cases of Obesity	Cumulative savings (billions \$)
One Percentage Point Decrease in Obesity Rates	42%	41%	3M	\$85
No Growth in Obesity Rates after 2010	42%	31%	32M	\$550
Healthy People Goal of 15% Obesity Rates	42%	15%	78M	\$1,902

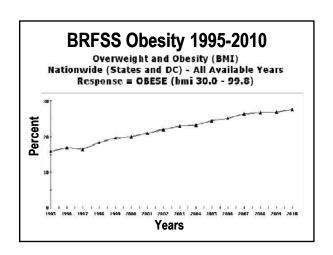
## **Discussion**

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- Our forecasts of future obesity rates are lower than prior estimates
  - -Still, we projected a 33% increase in prevalence of obesity by 2030

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- Depending on the data, some estimates show flattening of obesity rates in the recent years
  - -BRFSS vs. NHANES estimates



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### Discussion

- Depending on the data, some estimates show flattening of obesity rates in the recent years
  - -BRFSS vs. NHANES estimates
  - -BRFSS allowed us to incorporate state-level contextual variables

## **Discussion**

- Our forecasts of future severe obesity rates are higher than those from a linear trend
  - -Results are alarming given that those with BMI> = 40 are:
    - At much greater risk for diabetes and other medical conditions

## **Discussion**

- Have shorter life expectancy, and
- Generate greater lifetime medical costs

### **Discussion**

- Study limitations:
  - -Projections assume that logistic regression parameters and costs from past data will continue in the future
  - BRFSS excludes people without phone land-lines
  - BRFSS collects self-reported height and weight

#### Discussion

- Other factors are likely to slow obesity growth even further:
  - -Increased access to recreational facilities
  - -Improvements in urban design
  - Anti-obesity social marketing programs

## **Discussion**

- -Worksite health promotion programs
- -New drugs and technologies
- Future trends in childhood obesity rates will have a major impact on adult obesity and related healthcare costs

## **Conclusions**

- Our study forecasts a 33% increase in the prevalence of obesity and a 130% increase in severe obesity in the next two decades
  - -Based on extrapolating prior available data
  - -Assuming trends will continue

## **Conclusions**

- Growing obesity will further hinder efforts for healthcare cost containment
- Successful interventions will result in substantial savings
  - No growth in obesity rates after 2010 could save \$550 billion over 20 years

## What Works?

- Institute of Medicine report
   "Accelerating Progress in Obesity Prevention"
  - -Released May 8, 2012
- Will recommend strategies necessary to reverse the obesity epidemic

## **More Information**

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