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CMS Council for Medical Schemes

Obesity and its consequences

Obesity is not as simple as having too much body fat. It is a chronic condition affecting both adults and children, and it is influenced by multiple factors. These include genetics, lifestyle factors such as eating habits and activity levels, access to healthy food, environmental factors and neurobiology (how the brain and nervous system control someone's appetite, food intake and energy usage). The impact of obesity can lead to many health problems, negatively affecting a person's quality of life.

Definition of overweight and obesity

A formula called the Body Mass Index (BMI) is used to determine whether one is overweight or obese.

In adults, overweight is defined as a BMI of 25 or higher, and obesity as a BMI of 30 or higher. However, because BMI is not a direct measure of body fat, using BMI alone can result in muscular people being classified as overweight or obese; thus, other measures, such as waist circumference or muscle-to-fat ratio, should also be included in weight-related assessments.

The definition and determination of weight and growth standards in children is quite technical and requires specific standards, charts, and tables. It is, therefore, always best to have it done by someone who is trained in the specific tools and knows how to interpret them correctly.

Signs and symptoms of obesity

Other than weight gain, there are no specific symptoms or signs unique to being overweight or obese. Many people may not notice any symptoms until health problems related to obesity start to develop.

Causes and Risk factors of obesity

In simple terms, obesity is caused by a person continuously taking in more calories than they use during their daily life. It takes time for it to develop. Calories are a measure of the energy in food and drinks. However, there are multiple factors that influence the amount of energy taken in and the amount of energy used by a person, and these all play a role in the development of obesity and can be risk factors:

- **Lifestyle factors**
  - Lack of sleep or poor sleep patterns (not enough sleep can affect appetite and weight);
  - Increased levels of stress (stress can make you eat more or store fat);
  - Lack of physical activity (not moving enough can lead to weight gain);
  - Poor eating habits (what and how much you eat affects weight);
  - Smoking (can affect metabolism and appetite in ways that influence weight).

- **Medical factors**
  - Metabolic syndrome (a cluster of conditions like high blood pressure, high sugar, and belly fat);
  - Polycystic ovarian syndrome (PCOS) (hormone imbalance affecting periods, fertility, and weight);
  - Anxiety (feeling very worried or nervous constantly);
  - Depression (persistent sadness and low energy);
  - Hypothyroidism (underactive thyroid causing tiredness and weight gain);
  - Cushing syndrome (too much cortisol, causing weight gain and weak muscles);
  - Prader-Willi syndrome (a genetic condition causing constant hunger and weight gain);
  - Medications – antidepressants, steroids, anti-seizure medications, diabetes medications, and beta-blockers (some medicines can cause weight gain).

- **Other factors**
  - Genetics and family influences (family traits can make weight gain more likely);
  - Age – as people get older, it is easier to put on more weight due to hormonal changes, less physical activity, and lower muscle mass.
  - Social factors – lack of access to safe areas for exercise can make being active harder
  - Pregnancy (weight gain during pregnancy can sometimes be hard to lose afterwards)
  - Microbiome – bacteria in the gut can affect how food is digested and absorbed (gut bacteria can affect how food is digested and stored).
  - Disability – both physical and learning disabilities (may make exercise or healthy eating harder).

Consequences or Complications of obesity

Obesity can lead to many health problems, such as:

- Heart disease and stroke (problems with the heart or brain blood flow that can be life-threatening)
- High blood pressure (blood pressure that is higher than normal, making the heart work harder)
- High cholesterol levels (too much fat in the blood, increasing heart disease risk)
- Gallstones (hard lumps in the gallbladder that can cause pain and digestive problems)
- Type 2 diabetes (high blood sugar that affects how the body uses energy)
- Kidney disease (kidneys not working properly, affecting waste removal and fluids)
- Cancers: uterine, cervical, endometrial, ovarian, breast, colon, rectal, oesophageal, liver, kidney, gallbladder (uncontrolled growth of cells in different organs)
- Digestive conditions (problems with the stomach or intestines, like reflux or bloating)
- Sleep apnoea (breathing stops and starts during sleep, causing tiredness)
- Chronic respiratory diseases (long-term lung problems like asthma or COPD)
- Osteoarthritis and other joint problems (pain and stiffness in joints from wear and tear)
- Steatotic liver disease (formerly called Fatty liver disease) (fat build-up in the liver that can affect its function)
- Mental health issues: depression, social isolation, poor work achievements, disability due to physical discomfort, and social anxiety
- Female infertility and complications in pregnancy (difficulty getting pregnant or health issues during pregnancy)
- Issues with memory and cognition – increased risk

of Alzheimer's disease and dementia (problems with thinking, memory, and daily functioning)

Prevention of obesity

Obesity is one of the conditions where the saying "*prevention is better than cure*" is proven true. A more intentional approach should be taken to eat healthier, incorporate physical activity and lower stress levels as one gets older and to manage one's weight.

Prevention can include:

- Changes to diet that involve incorporating healthier foods to replace processed foods such as sweets, cold drinks, and takeaways.
- Increasing physical activity by doing exercises at home, joining an exercise group such as a running club, and taking up hobbies that require one to move.
- Actively managing stress levels by minimising screen time, making sure to get enough sleep each night, spending time outdoors and seeking out activities that support and boost relaxation.
- Intentional shopping (planning and choosing healthier foods when buying food).

Diagnosis of obesity

Diagnosis of obesity involves:

- **Medical history** – including review of weight history, past weight loss efforts or concerns, physical activity, exercise habits, eating habits and appetite control, past and current medications, past and current medical conditions, along with stress levels.

- **Physical examination** – including weight and height measurement to calculate BMI, as well as measure other vital signs such as blood pressure, heart rate, blood sugar levels, listening to the heart and lungs and examining the abdomen and measuring the waist circumference.
  i. **Investigations** – include blood tests to assess glucose (sugar) control, cholesterol, as well as evaluate the liver, kidneys and thyroid, may be done. An electrocardiogram (ECG) may be performed to assess cardiac function, as well as an ultrasound of the liver to check for fatty deposits in the liver. More investigations may be performed at the discretion of the treating healthcare professional, based on the patient's presenting complaints and clinical concerns.

Treatment and Management of obesity

The treatment and management of obesity have grown over the years as more is understood about it and the contributing factors. A weight loss of 5-10% over a 6-month period can significantly reduce the risk of the complications of obesity.

Obesity is no longer seen as just a result of a weak will or laziness, but as the complex condition it truly is. Thus, its treatment and management are holistic, and many options exist:

- **Lifestyle changes** – these are the foundation of weight management. They include reducing calorie intake, choosing healthier foods over processed options, and increasing physical activity to a safe, appropriate level. Behavioural support, such as counselling and support groups, is also important. Crash diets are harmful and not effective for long-term weight management.

- **Medications** – weight-management medications are not a replacement for healthy lifestyle changes; instead, they are used alongside them. Any medication used for weight management should be used under the guidance of a qualified medical practitioner. Some medications may suppress appetite; some decrease fat absorption from the intestines, and some slow down digestion. Not all medications are suitable for everyone, and consideration of other medical conditions and side effects must be done before one is selected.

- **Surgery** – Bariatric surgery involves procedures on the stomach and small intestine to help with weight loss. These procedures either limit how much food a person can eat or reduce the number of calories and nutrients the body absorbs. The different types include:
  - Sleeve gastrectomy - part of the stomach is removed, which means there is less space for food in the stomach.
  - Gastric bypass surgery - a small pouch is created at the top of the stomach, and the small intestine is connected to the new pouch. Food and liquids then bypass most of the stomach, flowing straight from the pouch to the small intestine.
  - Adjustable gastric band – an adjustable gastric band is placed around the upper portion of the stomach, thus dividing the stomach into two pouches. The band is tightened to create a narrow opening between the upper and lower pouches of the stomach. This limits the amount and size of food that can pass.

- **Endoscopic procedures** – are less invasive than surgery as no cuts are made on the skin. Instead, the tools used for the procedures are inserted through the mouth while the person is under anaesthesia:
  - Endoscopic sleeve gastroplasty – the stomach is stitched from the inside to reduce how much food and liquid the stomach can hold.
  - Intragastric balloon for weight loss – a small water-filled balloon is placed in the stomach to reduce the amount of space, so a person feels full after eating less food. Balloons can stay in place for up to 6 months and then are removed or replaced depending on the follow-up plan.

- **Other treatments**
  - Hydrogels (edible capsules that absorb water once taken and get bigger in the stomach),
  - Vagal nerve blocking (a device is put under the skin in the stomach area and reduces hunger signals to the brain) and
  - Gastric aspirate (a tube is placed into the stomach through the abdomen, and the stomach contents are drained).

What is covered under PMB level of care?

Obesity is currently not a Prescribed Minimum Benefit (PMB) condition as it is not listed in the 271 Diagnostic Treatment Pairs (DTPs), is not part of the Chronic Disease List and is not an emergency condition.

Therefore, there is no legal obligation on medical schemes to cover the diagnosis, treatment, and care of obesity. Access to treatments, investigations and care for obesity will be according to the rules of the medical schemes.

However, some of the complications that can arise because of obesity are PMB conditions and the diagnosis, treatment and care costs related to the complications that are PMB complications should be covered by medical schemes as per the PMB regulations.

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