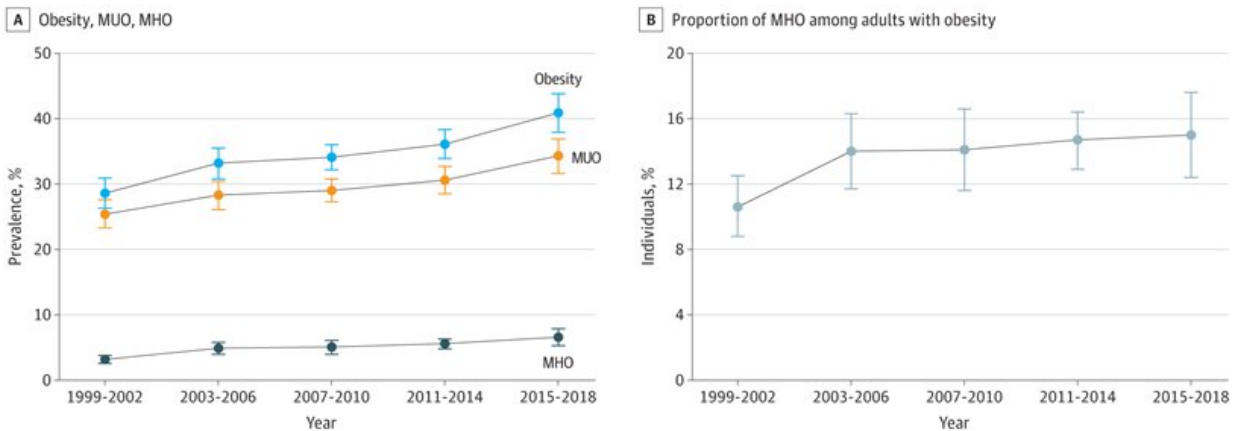


Survey shows share of people in US with 'metabolically healthy obesity' has risen

March 10 2023, by Bob Yirka



Trends in the Prevalence of Obesity, Metabolically Unhealthy Obesity (MUO), and Metabolically Healthy Obesity (MHO) Among US Adults, 1999-2018. A, Trends in the prevalence of obesity, MUO, and MHO among US adults. From 1999-2002 to 2015-2018, $P = .02$ for trend in MHO prevalence. B, Trends in the proportion of MHO among US adults with obesity. From 1999-2002 to 2015-2018, $P = .02$ for trend. From 2003-2006 to 2015-2018, $P = .51$ for trend. Obesity was defined as a body mass index of 30.0 or greater (calculated as weight in kilograms divided by height in meters squared). Among participants with obesity, MUO was defined as having any component of the metabolic syndrome (waist circumference excluded) and MHO was defined as meeting none of the metabolic syndrome criteria. In A, prevalence estimates were age standardized to the 2000 US Census population, using 3 age groups (20-39, 40-59, and ≥ 60 years). In B, proportion estimates were age standardized to the nonpregnant adult population with obesity in the 2015-2018 National Health and Nutrition Examination Survey cycles, using the same 3 age groups. All estimates were weighted, and error bars indicate 95% CIs. Credit: *JAMA Network Open*

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A combined team of medical scientists from Huazhong University of Science and Technology and Hubei University of Medicine, both in China, has found that the ratio of people living in the U.S. with "metabolically healthy obesity" (MHO) has risen over the past 20 years. In their study, published on the *JAMA Network Open* site, the group analyzed data in the NHANES survey.

Prior research has shown that a small number of people diagnosed with obesity have none of the disorders generally associated with being overweight—they are classified as having MHO—and thus need not worry about losing the weight. In this new effort, the research team in China found that the proportion of such people in the U.S. compared to the [general population](#) rose over the years 1999 to 2018.

The work involved analyzing data from the NHANES—a research effort conducted by the U.S. National Center for Health Statistics. In looking at almost two decades of survey responses, the group found that the ratio of people with MHO had nearly doubled—though they note that such people still make up a small percentage of people with obesity.

The researchers also noted that using the standard body mass index (BMI) is not always an accurate way to gauge obesity due to some individuals scoring high due to larger-than-average bone structure and/or more muscle. They suggest that clinicians begin using other methods for diagnosing obesity, such as measuring both waist and hip circumference, in addition to measuring height and weight, to avoid misdiagnosis. They note that the WHO already recommends such methods be used as an aid in diagnosing obesity.

In their analysis, the researchers defined MHO as having a BMI of at least 30 kg/m² and no evidence of high blood pressure, high fasting glucose levels or changes in lipids. Their work involved analysis of data regarding 20,430 people who had filled out a survey, which included 7,386 people diagnosed as being obese. They noted that over the period studied, the prevalence of [obesity](#) increased from 28.6% to 40.9%, while the rate of increase of people with MHO rose from 3.2% to 6.6%.

More information: Jiang-Shui Wang et al, Trends in the Prevalence of Metabolically Healthy Obesity Among US Adults, 1999-2018, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.2145](https://doi.org/10.1001/jamanetworkopen.2023.2145)

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