

Obesity symposium

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It may have been a cold Edinburgh day, but for those who gathered at the RCPE, or tapped into the global web-links, the College's latest Hot Topic symposium on Obesity were in for some heated debate. As benefits such a complex problem, the audience was eclectic; drawn from the NHS, academia, the local government and third sectors, and beyond. The symposium stretched from basic science, through patient-focused initiatives, to population legislation and policy. There was much discussion and debate in trying to define the problem and the solution, but there was unanimous support for raising the priority beyond strategy to taking action.

SESSION 1 – 21ST CENTURY EPIDEMIC?

Dr Harry Rutter (London School of Hygiene and Tropical Medicine,) introduced us to the mammoth subject of obesity and started the day by arguing that 'we have not become stupider, lazier or greedier over the last 30 years... We are the same people that we were. What's changed is the world around us.' He raised the philosophy of obesity as a puzzle, and questioned why people are surprised when a single intervention doesn't solve the problem on its own, when we know that there are a lot of pieces to find to complete the picture. We need to build foundations – which may have little impact on their own, but are essential to building a concrete solution.

This talk was followed by Professor Susan Jebb (University of Oxford) reminding and updating us on the Foresight Report.¹ She again emphasised the need to be realistic about the timescales of change (the Foresight Report 40 years) and our expectations of interventions. If, for example, an intervention targets food provision in schools, the question should not be 'does this cure obesity?' but 'are children eating better in schools?'

To close the session, Professor Annie Anderson (University of Dundee) highlighted the need to get communication right in the obesity fight. That 'we need to win hearts and minds, [as] we are not engaging on obesity'. She reminded us that giving advice, prompts and direction does work in realising change, but that any programmes introduced to combat obesity are competing with the communication strategies and mass marketing of the food, drink and retail industries.

SESSION 2 – HEALTH EFFECTS

Professor Naveed Sattar (University of Glasgow) joined the symposium by video link from Boston, Massachusetts, to discuss the health effects of obesity. He revised some of the basic science of excess subcutaneous fat and the consequences of ectopic fat deposition. Obesity is not just about being fat, but the multi-organ/body systems consequences: cardiovascular disease, type 2 diabetes, non-alcoholic fatty liver disease, polycystic ovarian disease.

Professor Simon Capewell (University of Liverpool) reiterated that good intentions were not enough – we need to take action. He reminded us that there have been numerous high level publications over past years highlighting the effectiveness of legislative action and food tax, yet we are still to take action. He cited examples from Europe and Mexico of the successful implementation of sugar based taxes.

SESSION 3 – FOOD AND OBESITY

Dr Geoff Rayner (City University, London) explored how health consequences are linked to long-term changes in the food and farming systems with 'food central to human existence'.

Professor Mike Lean (University of Glasgow) initiated discussion on where responsibilities to tackle obesity lie, with a strong belief that patients can take responsibility for weight loss if supported to do so. Studies have shown people can lose weight and keep it off.²

SESSION 4 – APPROACHES TO PREVENTION

The final session of the day saw discussions turn to how to reduce future obesity. Dr Jason Gill (University of Glasgow) revised the evidence on diet vs exercise, concluding that exercise in addition to diet is more effective than diet alone.³ Dr Steve Wiggins (Overseas Development Institute, London) spoke about the globalisation of diets and highlighted societal pockets that have retained local traditions and shunned the influx of westernised foods (e.g. Korea) and have not seen a rise in obesity.

Professor Charlotte Wright (University of Glasgow) concluded the lectures by challenging the idea that childhood is the optimal point to try and break the cycle of obesity. There are fewer obese children than adults and 80–95% of adults were not obese children.

CONCLUSION

The causes of obesity are multi-factorial and, as a result, the solution is a multi-piece puzzle. We need to reassess our expectations of isolated interventions and step back to look at the bigger picture.

So what now? I would advocate that we all have a part to play, however small: from brief interventions through large scale educational programmes to public policy. Through our collective actions we can prove Professor Capewell right in his statement: 'It's not about if [there is a sugar tax], it is about when' and we can tackle the jigsaw that is obesity.

REFERENCES

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