

Obesity is a rising global epidemic that puts a strain on healthcare services, government and individuals worldwide.<sup>1,2,3,4</sup> Urgent change is needed to ensure wider recognition of obesity as a complex chronic condition which requires a whole-systems approach to care.

Overweight and obesity are defined as abnormal or excessive fat accumulation that presents a risk to health.<sup>5</sup>

## PREVALENCE

Approximately

**650 Million**  
people have obesity.<sup>5</sup>

**1.9 Billion**  
people worldwide are overweight.<sup>5</sup>

### Global obesity prevalence

(adults aged 18+ years with Body Mass Index [BMI]  $\geq 30$  kg/m<sup>2</sup>)<sup>6</sup>

Women = 14.9%

Men = 10.8%

The overall proportion of overweight adults (BMI  $\geq 25$  kg/m<sup>2</sup>) has surpassed the proportion in the low BMI category (<20kg/m<sup>2</sup>)<sup>6</sup>



### One quarter

of people in OECD countries live with obesity; half of people in OECD countries are overweight.<sup>7</sup>



- The prevalence of obesity has tripled since 1975.<sup>5</sup>
- 70-80% of BMI is due to hereditary factors.<sup>8</sup>

### Obesity is exacerbated by factors such as:<sup>9</sup>

- Increasing urbanization.
- Easy availability / increased intake of cheap, energy-dense processed foods.
- A decrease in physical activity levels due to the sedentary nature of work.

## COMPLICATIONS



- **200+** complications are associated with obesity, including type 2 diabetes, heart or cardiovascular disease, cancer, arthritis, infertility, urinary incontinence, depression and anxiety.<sup>10</sup>
- **92M** lives will be claimed in OECD countries in the next three decades due to the complications of being overweight.<sup>8</sup>
- **3 years:** estimated reduction in life expectancy by 2050 due to diseases related to obesity and being overweight.<sup>8</sup>

## COST



Up to \$2 Trillion /  
2.8% Global GDP:

estimated global impact of obesity.  
Similar to the global impact of smoking  
or armed violence, war and terrorism.<sup>11</sup>

## PRODUCTIVITY

3.1 days:



average additional days of  
absenteeism for people living with obesity  
(compared to those with a normal weight).<sup>12</sup>

## WEIGHT LOSS

Feedback mechanisms  
within the body

prevent people with obesity  
losing and maintaining  
weight loss.<sup>13</sup>



## TREATMENT

Pharmacotherapy and  
/or bariatric surgery,



in combination with diet and exercise  
can help patients achieve clinically relevant  
weight loss and prevent weight regain.<sup>14,15,16,17</sup>

## STIGMA

55% of HCPs say biases and misconceptions  
impede how patients with obesity are  
diagnosed and cared for.<sup>18</sup>

Students with obesity are subject to judgement by teachers which  
negatively impacts their education and education opportunities:



of teachers felt children  
with obesity lacked  
self-control.<sup>19</sup>



were reluctant  
to care for or  
teach them.<sup>19</sup>

## EDUCATION



Most GPs

receive none or less than  
48 hours of training on  
obesity during their entire  
medical education.<sup>20</sup>

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