Obesity Services

Information about Obesity

What is obesity?

Obesity is the medical term for having too much fat stored in your body for good health. People gain weight through a ‘positive energy balance’, that is more energy (food and drink) coming into the body than is being spent through activity and exercise. The surplus energy is stored mainly in fat cells that are present throughout the body.

As the stored fat increases, your weight increases too. Where fat is stored varies somewhat between men and women and even between individuals. Some people store most fat under their skin and around their hips and thighs, while others (especially men) store it around their middle or in fat stores within their belly.

While the term ‘obesity’ has become a slightly negative term in the media and to many people who suffer from it, it is a medical term and that is why we use it in this clinic.

How is it measured?

Health professionals measure your body mass index (BMI) to see if your weight is in proportion to your height. We calculate your BMI in the following way, which then gives us a total number:

Weight in kilograms (kgs) ÷ by height in metres squared (m²). This tells us if your health is at risk, due to your being either underweight or overweight.

What do the numbers mean?

- A BMI of 18.5 or below is considered underweight
- A BMI of 18.5 to 24.9 is considered an ideal weight
- A BMI of 25 to 29.9 is considered overweight
- A BMI of 30 or above is considered obese
- A BMI above 40 is often called severe or morbid obesity. The term morbid means it is likely to be causing disease or illness. We prefer the term ‘severe obesity’.

In adults of Asian origin, a BMI over 23 may be classed as overweight and a BMI over 27.5 may be classed as obese as people of differing Asian ethnicities have a higher risk of developing diabetes and coronary heart disease at a lower BMI.
Increasingly, doctors are using waist circumference (that is a tape measure around your middle) as a way of evaluating how much fat you have. This measures the important and harmful fat and is also a measurement that changes quite rapidly with weight loss or gain.

**What does being obese mean?**

Obesity creates a serious risk for ill health. Carrying too much weight makes you sweat easily, get out of breath and can make it difficult for you to care for yourself in performing simple tasks such as putting your shoes on, washing and dressing or even personal care.

Medically, obesity is most strongly associated with developing diabetes along with heart disease, cancers, breathing problems such as sleep apnoea, fertility problems and joint pains. Many people with obesity also report low mood and depression, although whether this is actually more common in obesity compared to healthy weight individuals is controversial.

**What causes weight gain?**

As mentioned above, you can only store fat if there is a ‘surplus’ of energy coming into your body above what it needs. Each kilo of fat gained, represents about 7,000 kcals stored (1 lb = 3,500 kcals). Although there is increasing evidence of the importance of genetic factors in making people more or less likely to gain weight and become obese, the mechanism is still essentially one of energy balance.

Even when ‘obesity genes’ are present, they do not make obesity inevitable and probably each gene accounts for no more than 1-2kg of the variation of weight between individuals. In the past, genes associated with fat storage have been considered an advantage to survival. It is only in the past 50 years with the changes in our society and eating habits that these genes have become harmful. There are some very rare gene exceptions which present usually in the first months after birth. Please ask your health care professional at your next appointment if you feel this identifies with your weight management history.

Food has never been easier to obtain and eat. and manufacturers spend much time and effort trying to make food desirable so we buy and eat more. At the same time, it has never been harder to spend energy in daily activities. We all use labour-saving devices, take cars and buses rather than walking and use elevators and lifts. Our jobs too have become much more sedentary. Some people gain weight because of medications they are prescribed for example steroids, some anti-depressants and anti-epileptic drugs. Other people have psychological or psychiatric disorders that alter their eating habits.
There is no evidence that people with obesity have slow metabolisms or low energy expenditure. Just as a lorry uses more fuel (energy) than a car, it is true that bigger people spend more energy than smaller people. This has the advantage that it is easier for people who are obese to lose weight than smaller people.

**Do I really need to lose weight?**

The fact that your doctor(s) have referred you to this clinic would suggest that they certainly think you do. When we have completed our initial assessment with you, we too will be able to give you an idea of the risks that your weight poses and the likely benefits of weight loss. There are many studies that show even a 10% weight loss more than halves the risk of future diabetes, cancer or heart attacks. If you already have diabetes, even modest weight loss will have a big impact on your diabetes control; the same is true for most obesity-related diseases.

How much weight you should lose, and how much you realistically can lose are not simple questions to answer – largely because there are not that many studies of long-term weight loss and weight loss maintenance. These are issues that you will almost certainly discuss with the obesity team and we will help guide you as to what treatments may be appropriate in your case.

We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

**Other formats:**

If you would like this information in another language, large print or audio, please ask the department where you are being treated, to contact the patient information team: patient.information@addenbrookes.nhs.uk.

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

**Document history**

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