

Obesity Common Among Veteran Patients: Studies Analyze Treatment Options

Obesity is an increasingly serious public health problem. It is a risk factor for many chronic diseases and is associated with increased morbidity as well as early mortality. The VA health care system is the largest in the country, and a recent study sought to determine the prevalence of overweight and obese veterans using VA outpatient care. Investigators from VA's National Center for Health Promotion and Disease Prevention conducted an analysis of nearly 2 million veterans who received outpatient care at 136 VA medical centers across the country. Findings show that obesity among veterans is highly prevalent. Among men using VA outpatient care, nearly three in four are overweight or obese, and among women, two in three are overweight or obese. The study also showed that among men, the combined prevalence of overweight and obesity was higher among Native Americans, Hispanics, and whites; and among women, it was higher among Native Americans and African Americans.¹

In response to the increase in obesity and associated health risks, pharmaceutical treatments have become numerous and more commonly used, and there also are a variety of surgical options. Two recent articles (one on medications for weight loss, and one on surgical options to reduce weight), discuss analyses that were conducted to: 1) assess the efficacy and safety of weight loss medications, and 2) assess the effectiveness and adverse events associated with the surgical treatment of obesity. In the drug analysis, investigators assessed clinical trials of drug therapies for weight loss that included appetite suppressants. Investigators in the surgical analysis reviewed studies that assessed surgery for weight loss, including gastric bypass and gastroplasty. Findings show that surgical treatment is more effective than non-surgical treatment for weight loss in severely obese patients; weight loss was maintained for up to 10 years and longer and was accompanied by significant improvements in several comorbid conditions, such as diabetes, hypertension, sleep apnea, and high cholesterol. Gastric bypass procedures (most common) resulted in more weight loss than gastroplasty, and there were no statistically significant differences in mortality among procedures. Most of the medications studied promoted modest weight loss when used along with recommended diet. Study investigators concluded that bariatric surgery is better than diet and medications for severely obese individuals (more than 100 pounds overweight) who are willing to undergo surgery.^{2,3}

1) Das SR, Kinsinger LS, Yancy WS Jr, Wang A, Ciesco E, Burdick M, Yevich SJ. Obesity prevalence among veterans at Veterans Affairs medical facilities. *American Journal of Preventive Medicine* 2005 Apr;28(3):291-294.

2) Li Z, Maglione M, Tu W, et al. Meta-Analysis: Pharmacologic Treatment of Obesity. *Annals of Internal Medicine* 2005 Apr 5;142(7):532-46.

3) Maggard MA, Shugarman LR, Suttorp M, et al. Meta-Analysis: Surgical Treatment of Obesity. *Annals of Internal Medicine* 2005 Apr 5;142(7):547-59.