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The Gravity of Weight

Healthy Obesity: An Oxymoron?

Are those who are healthy and obese really "patients-in-waiting"?



Posted Dec 22, 2013

Back in the 1950s, Jean Vague observed that central, also called abdominal or visceral obesity (i.e., the so-called "apple"-shaped body, as distinguished from the "pear"-shaped body of noncentral or subcutaneous obesity), is more likely associated with metabolic abnormalities. But even that observation, while generally true, has been called into question. Young and Gelskey, publishing in *JAMA* almost 20

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years ago, for example, concluded that "noncentral obesity," even in a cross-sectional sample of almost 2800 Canadian adults, was most definitely not benign compared to the non obese, even though their metabolic profiles were not as severe as those with central obesity.

For years, researchers and clinicians, though, have also documented the existence of a subgroup (some reports as high as 1/3 of obese people), as measured by elevated body mass index (BMI), including those with abdominal obesity, who have no metabolic abnormalities. In other words, these individuals have been considered metabolically healthy, with no evidence of hypertension, abnormal lipid or glucose levels, insulin resistance (or even overt type II diabetes), as well as other markers of inflammation (e.g. increased blood levels of C-reactive protein) that are typically found in obese people.

There are those, furthermore, who believe in "health at any size" and that cardiovascular fitness, as measured by exercise on a treadmill, for example, is far more important than percentage of body fat or even BMI in terms of mortality or even morbidity. This was the conclusion of a large 2013 study, published in the *European Heart Journal* by Ortega et al. The study population, though, was not a typical one: they were overwhelmingly

Bottom line: Whether benign obesity does exist, at least in a small percentage of people, may still be open to question, but these studies have significant clinical implications. Those who are overweight or obese, regardless of where their fat accumulates and regardless of being presently asymptomatic, should not be complacent and should not assume they will necessarily remain healthy, especially if their BMI increases over time. Their metabolic health may, in fact, be transient. Over time, they may likely develop the typical complications seen most commonly in those with central obesity. In other words, they should see themselves as potentially “patients-in-waiting” and consider the importance of lifestyle modifications such as exercise and diet.

About the Author



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In Print: *The Gravity of Weight: A Clinical Guide to Weight Loss and Maintenance*

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