# Fact or Fiction?



Jack W. Dini 1537 Desoto Way Livermore, CA 94550 E-mail: jdini@comcast.net

# Overweight, But Healthy

I became overweight in one day in 1998. Perhaps the same thing happened to you. It wasn't because I had gone on a binge of eating and drinking. Rather it was because a committee convened by the National Heart Institute redefined overweight to be a body mass index (BMI) of 25 or more for both men and women. (Body mass index equals your weight in kilos divided by the square of your height in meters. If you prefer to use English units, its your weight in pounds divided by the square of your height in inches, then multiplied by 703). I had a BMI of 25.8, so I was now overweight. Before 1998, a man was officially overweight with a body mass index of 27.8 and a woman at 27.3, but now the rules had changed.1 Surgeon General C. Everett Koop helped start this in 1995 when he called obesity a major public health threat that had become the nations number two cause of death behind smoking. He claimed that fat was killing one thousand Americans per day.2

The BMI is solely a function of height and weight. It does not distinguish between men and women, between 20 year olds and 80 year olds, or between people of radically different bone structures or musculature types. Wide National Football League (NFL) receiver Jerry Rice is 6'2" and weighs 200 pounds. His 25.7 BMI puts him in the 'overweight' category.3 (At a BMI of 25.8 you can see I'm in good company). Paul Campos calculates that "97% of the players in the NFL are either overweight or obese. Even 66 of the league's 75 kickers-traditionally the position reserved for pencil necked soccer players—are 'overweight'."4 I doubt you would think of Hollywood stars such as Richard Gere, Pierce Brosnan and Kevin Costner as being overweight or borderline obese, yet with their respective BMI's of 26.1, 27.1, and 29.2, Gere and Brosnan are overweight and Costner is borderline obese.3 Others in the overweight category

include Brad Pitt, Michael Jordan, and Mel Gibson, while Russell Crowe, George Clooney and baseball star Sammy Sosa are all obese.<sup>5</sup> George W. Bush, known for his good health is "overweight," since his BMI is 26.3.<sup>1</sup> One could go on and on with these kinds of examples, but I think by now you get the point.

Paul Campos observes that proponents of the BMI tables acknowledge that some very muscular people may fall into the overweight category when they are actually healthy and fit. He adds, "The public health establishment's manipulation of the BMI tables in this regard is essentially a verbal shell game. When confronted with the fact that many people who by every objective measure are in superb physical condition are also 'overweight' and 'obese' according to the BMI charts, public health officials admit that the charts are meaningless in such situations. Yet this admission is instantly forgotten when these same officials declare that, according to the same charts, nearly two-thirds of adult Americans are overweight and obese."6

Over the years the number of deaths attributed to overweight or obesity has ranged from 300,000 to 400,000, depending on which group was discussing (or promoting) the topic. Radley Balco reports that a Lexis search found more than 1.500 mentions of 'obesity' and '400,000,' in the last two years. The Centers for Disease Control (CDC) used the 400,000 number and in December of 2004 they confessed that these numbers were based on a study that was plagued by methodological errors. The CDC said their number may be off by 20%, but many critics say it may actually be closer to four times the number of early deaths attributable to obesity.<sup>7</sup>

Here are some interesting calculations. University of Virginia professor Glenn Gaesser points out that "studies have consistently failed to find any correlation between increasing BMI and higher mortality in people 65 and over and 78% of the approximately 2.3 million annual deaths in the United States occur among people who are at least sixty-five. Thus, 78% of all deaths lack even the beginning of a statistical link with BMI." This leaves about five hundred thousand deaths for the remaining persons under sixty-five. Gaesser concludes, "To think that 60% (*i.e.*, 300,000) of these deaths are due to body fat is absolutely preposterous." If you use the 400,000 figure you are beyond absolutely preposterous.

## Then Guess What Happened?

Recently, the Centers for Disease Control and Prevention released results of a new study that said obesity and physical inactivity account for only 26,000 deaths a year, not the 400,000 estimated in previous studies!<sup>9</sup>

Radley Balko adds this support, "Dig a little more into America's health statistics and you'll find that despite our expanding waistlines and the devastation that's supposed to mean for our well-being, we've actually never been healthier. Heart disease, stroke, and cardiovascular disease are all down dramatically in the last 20 years. Mortality rates in nine of the ten types of cancer most associated with obesity have all dropped in the last 15 years. Overall cancer rates and deaths from cancer have dropped every year in the last ten years. We're living longer, too. In fact, while black men and black women have seen greater increases in obesity rates than their white counterparts over the last 15 years, they've also seen greater increases in life expectancy. The only ailment that's up in the last twenty years is diabetes and that could be as attributable to an aging population, changes in the definition and collection methods of diabetes statistics."7 With diabetes, aggressive educational programs designed to encourage more testing, and mass screenings of million of Americans have contributed to the increase, and importantly, the definition of diabetes has been changed from a fasting blood sugar of 140 to a blood sugar of 126. To So, just like with the overweight issue where millions of Americans became overweight overnight, millions became diabetic overnight.

### **What About Research Studies?**

A study conducted in Norway in the mid-1980s followed 1.8 million people for 10 years. "The highest life expectancy (79.7 years) was found among people with BMI figures between 26 and 28, all of whom were overweight according to current U.S. government guidelines. The lowest life expectancy (74.2 years) was found among those with BMI figures below 18 (a woman of average height who is 5 pounds below what the government claims is her 'optimal' BMI will fall into this risk category). Those with BMI figures between 18 and 20-most of whom were at what our public health authorities claim is an optimal weight-had a lower life expectancy than those with BMI figures between 34 and 36; people who according to those same authorities were roughly 60 to 75 pounds overweight, and therefore seriously obese."11

A 1996 project undertaken by the National Center for Health Statistics and Cornell University analyzed the data from dozens of previous studies with up to a 30 year follow-up. "Among non-smoking white men the lowest mortality rate was found among those with a BMI between 23 and 29, which means that a large majority of the men who lived the longest were 'overweight' according to government guidelines. The mortality rate for white men in the supposedly ideal range of 19 to 21 was the same as that for those in the 29 to 31 range (most of whom would be defined currently as obese)." 12

Paul Campos reports, "Over the past 20 years, scientists have gathered a wealth of evidence indicating that cardiovascular and metabolic fitness, and the activity levels that promote such fitness, are far more important predictors of both overall health and mortality risk than weight." <sup>13</sup>

A Cooper Institute study published in 1989 involving 13,000 subjects revealed that the highest death rates were found among sedentary individuals without regards to weight. Also showing the importance of physical activity, a Harvard Alumni Study found the lowest mortality rates among men who had gained the most weight since college, while also expending at least 2,000 calories per week in vigorous physical exercise. 15

Lastly, but very important, the potential damage of weight cycling can't be overlooked. Long term human studies show that almost all of the excess risk associated with obesity can be accounted for by the higher incidence of weight cycling in obese people, and that obese people with stable weights have very little excess risk.<sup>16</sup>

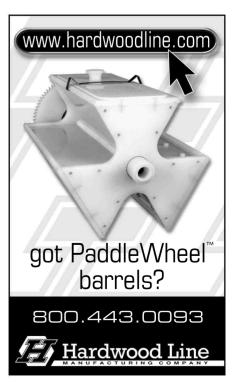
#### **Summary**

Contrary to almost everything you have heard, weight is not as good a predictor of health we've been led to believe. In fact a moderately active larger person is likely to be far healthier than someone who is svelte but sedentary. Paul Campos emphasizes that the two most important factors are, "that subject to a few exceptions at the statistical extremes, there is no way to tell whether a person is at a healthy weight merely by determining that person's body mass, and that body weight in and of itself is almost never relevant to good health. People who engage in healthful eating and who are at least moderately physically active will have better health, on average, than those who don't, and, thus the question of whether a person is thin. fat, or somewhere in between is largely irrelevant to evaluating his or her health."17 David Brooks sums it up quite well, "The chief moral lesson I take away from the recent Centers for Disease Control Report [26,000 annual deaths from obesity, not 400,000] is that Mother Nature is happy to tolerate marginally irresponsible behavior. She doesn't want you to go completely to seed. If you're truly obese and arouse hippos when you visit the zoo, you could still punch your ticket at any moment. But she does want you to eat the occasional Cinnabon, so long as it isn't bigger than Delaware."18

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