



FAST FACTS



Mental Health and Obesity

OBESITY is a complex chronic disease in which abnormal or excessive accumulation of body fat impairs health. Adult obesity rates have more than doubled since the 1980s — in the U.S. today, obesity affects over 42% of adults and 19% of youth.^{1,2} Obesity and its related complications are major drivers of rising healthcare costs, diminished health-related quality of life, and the recent decline in U.S. life expectancy. This fact sheet is part of a series designed to provide basic information about the science of obesity and current strategies to address it.

KEY TAKEAWAYS

- Mental illness and obesity often co-occur and certain factors like adverse childhood experiences may contribute to both.
- When severe mental illness and obesity co-occur, it is important for providers to treat both diseases as chronic and interacting.
- Weight bias and discrimination can contribute to poor mental health, independent of weight.

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[*National Alliance on Mental Illness*](#)

Mental Health and Obesity

Mental health and obesity are related in complex ways and have been shown to affect each other. For example, people with depression are more likely to experience obesity and people with obesity are more likely to experience depression.³

- High rates of obesity have been studied in populations with mood disorders, schizophrenia, attention-deficit hyperactivity disorder (ADHD), and trauma. Factors that affect both mental illness and obesity are:⁴
 - Inflammation
 - Coping behaviors
 - Neurotransmitter levels
 - Sociodemographic factors like poverty
- Obesity has also been associated with anxiety disorders and eating disorders, specifically bulimia and binge-eating disorder.^{5,6}

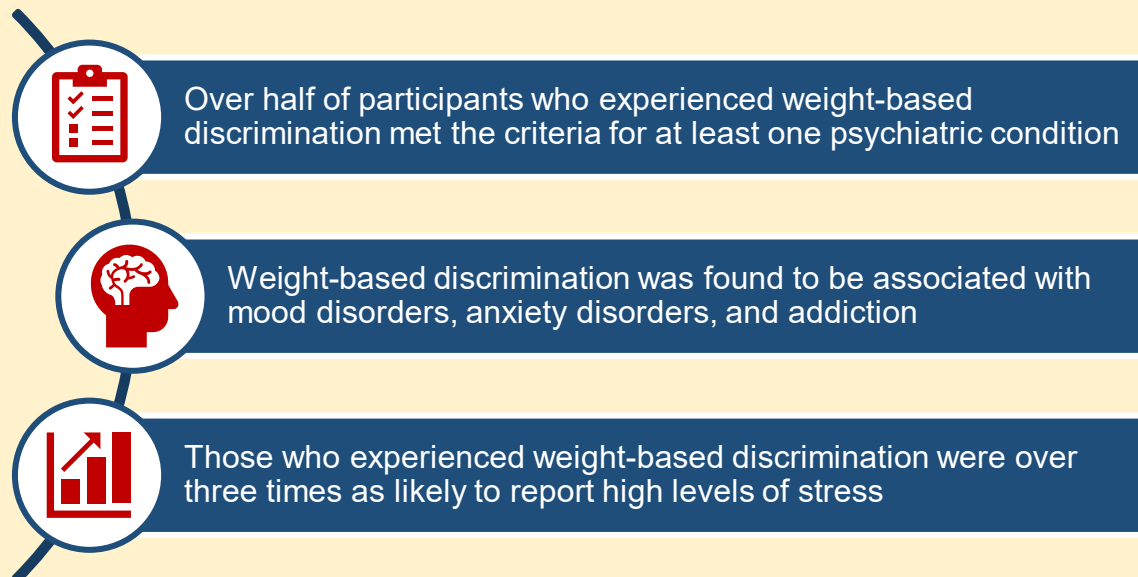
Obesity and Psychiatric Treatment

When a patient has both severe mental illness and obesity, their conditions must be treated as unique, interacting chronic diseases.⁷

- A number of psychiatric medications have weight gain as a side effect, including some anti-depressants, mood stabilizers, and anti-psychotics.⁷
- It is recommended that patients with both severe mental illness and obesity be treated with weight-neutral psychiatric medication or psychiatric medication with a side effect of weight loss.⁷
- If psychiatric patients with obesity gain weight or do not lose weight after a change in medication, behavioral weight loss programs have been shown to be appropriate for this population.⁷
- If patients continue to experience difficulty losing or maintaining a healthy weight, pharmacotherapy for weight loss can be considered and, in some patients, bariatric surgery may be appropriate.⁷

Weight Bias and Mental Health

In addition to the links between obesity and mental illness, experiences of weight-based discrimination have also been found to be associated with poor mental health. Research shows that weight bias is related to mental health independently; the relationship is not mediated by obesity.⁸



STOP
STRATEGIES TO
OVERCOME & PREVENT
OBESITY
ALLIANCE

Adverse Childhood Experiences

Obesity and mental health are affected by many of the same contributing factors. One of these is adverse childhood experiences (ACEs).

- The odds of adolescents having overweight, obesity, or severe obesity increase if they have experienced adverse childhood experiences such as abuse, domestic violence, or parental incarceration.⁹
- Young adults who experience adverse childhood experiences have also been found to experience higher prevalences of depression, antisocial behavior, and drug use.¹⁰

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