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THE GEORGE WASHINGTON UNIVERSITY SCHOOL OF PUBLIC HEALTH AND
HEALTH SERVICES ALIGNS PATIENT, PROVIDER, BUSINESS, LABOR, HEALTH
INSURANCE AND QUALITY ORGANIZATIONS TO CHANGE THE WAY AMERICA
UNDERSTANDS AND FIGHTS OBESITY

WASHINGTON, D.C. – The George Washington University School of Public Health and Health Services (GW) announced today a powerful collaboration of patient, provider, business, labor, health insurance and quality organizations to change society’s perceptions of, and approaches to, treating obesity. These groups have joined forces to create the Strategies to Overcome and Prevent Obesity Alliance (STOP Obesity Alliance) to reverse America’s rise in preventable, weight-related chronic diseases, such as diabetes and heart disease.

The Alliance will operate out of the GW School of Public Health and Health Services Department of Health Policy, under the direction of Christine Ferguson, JD, a former public health commissioner for the state of Massachusetts who is now on faculty at the University.

“America is in a race against obesity and we're tripping over hurdles we don't even see,” said Ferguson. “We can and must win the race or risk having a population that overwhelms our current systems. And that starts with inspiring people—whether they are overweight or not—to engage in building hope and creating lasting change.”

The initial charge of the STOP Obesity Alliance is to form consensus on the different barriers—some systemic, some cultural—that prevent effective weight management. The goal is to break down those barriers, seek out and build on current promising efforts, and develop new approaches and actions. Groups that have signed on to form the STOP Obesity Alliance’s steering committee reflect the key systems that this initiative will target for change. They include the American Academy of Pediatrics, American Diabetes Association, American Heart Association, America’s Health Insurance Plans, American Medical Group Association, Disease Management Association of America, National Business Group on Health, National Committee for Quality Assurance, National Quality Forum and the Service Employees International Union. Together, they will provide guidance, communications and research support to the Alliance.

Affecting nearly two-thirds of adults, the overweight and obese population is one of the fastest growing segments in American society. Excess weight, specifically abdominal obesity, increases the incidence of insulin resistance, dyslipidemia, hypertension and other health problems. In fact, obesity is the country’s second highest cause of preventable death behind smoking.

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“There is no lack of science proving the seriousness of overweight and obesity and its link to deadly conditions such as diabetes and heart disease,” said Ferguson. “The Alliance will drive home the broader impact of weight and identify practical solutions that both improve health and have a clear return on investment. The good news is that great work is already being done and the structure and diverse nature of the Alliance will allow us to amplify and expand the impact of those efforts.”

Specifically, the Alliance leaders and steering committee will work on a tiered action plan to: 1) conduct and assemble research that identifies any cultural and systemic biases in combating obesity; 2) consider research-based initiatives to improve patient care and prevention; and 3) make recommendations for and promote needed systems changes.

According to Ferguson, the Alliance will examine the disconnect between the scientific data demonstrating the harmful health and economic effects of overweight and obesity, and the insufficient action to change the systems that form barriers against effective weight management. The initiative will find paths to overcome these barriers to help break the cycle of failure most adults face in achieving and maintaining weight loss. It also will explore what has been effective and why, in order to map out steps for real change.

The Alliance is sponsored by sanofi-aventis U.S. LLC, a world leader in the pharmaceutical industry with a commitment to improving public health and a heritage to therapeutic areas, including cardiovascular and metabolic diseases. The idea for this initiative was born from the company’s recognition that making a meaningful difference demands support that extends far beyond a portfolio of products. Sanofi-aventis will serve as a non-voting member of the STOP Obesity Alliance so the group can easily tap into the knowledge amassed by the company through its work in obesity, metabolic disorders and cardiovascular disease.

“We’re excited about the possibilities of this unique partnership and its ability to foster and change behaviors and the public dialogue about overweight, obesity and what we can do about this serious medical condition,” said Tim Rothwell, chairman, sanofi-aventis U.S. Pharmaceutical Activities. “We have great confidence in this all-star public health team in changing the status quo so that more people have a chance to live healthier lives.”
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About Overweight and Obesity

Considerable evidence suggests that overweight and obesity are associated with significantly increased risk of diabetes, hypertension, dyslipidemia, certain forms of cancer, sleep apnea and osteoarthritis. Previously, obesity experts concentrated on total body fat as the main predictor of weight-related disease. Now, location of fatty tissue is thought to be equally if not more important than total body fat. Specifically, excessive body fat stored around the stomach and abdomen is a key risk factor for weight-related disease.¹ The risks of many medical complications grow with increasing body mass index and abdominal obesity:

- Almost 90 percent of people with type 2 diabetes are overweight.² In addition, in one large study of more than 27,000 people, those in the highest 10 percent of waist circumference were 20 times more likely to get type 2 diabetes than those in the lowest 10 percent of waist circumference³
  - Research shows that even small amounts of weight loss in the range of 5-10 percent can prevent or delay the development of type 2 diabetes among high-risk adults⁴
- In the Framingham Offspring Study, obesity was responsible for 78 percent of cases of hypertension in men and 64 percent in women⁵
- High waist circumference has been shown to increase risk of death by 35 percent compared to normal waist circumference⁶
- The well-known Nurses Health Study of more than 44,000 women found high waist circumference resulted in a two-fold increase in coronary heart disease⁷
- Overweight and obesity are clearly associated with increased risks for certain types of cancer, including kidney, endometrial, colorectal and postmenopausal breast cancer⁸
- The prevalence of obesity and overweight has dramatically increased over the past 25 years, moving from 46 percent of the population during 1976-80 to 64 percent in 1999-2000, according to the Centers for Disease Control and Prevention’s National Health and Nutrition Survey⁹¹⁰
- A study in the journal Health Affairs, noted that per person healthcare spending for obese adults is 56 percent higher than for normal-weight adults. Over 15 years, the additional costs incurred by obese adults with private health insurance versus normal-weight adults increased from $272 to $1,244 per person per year¹¹
- A study published in the Archives of Internal Medicine suggests that obese employees file twice as many workers' compensation claims, have seven times higher medical costs, and 13 times more lost work days than their non-obese counterparts¹²
- Obesity is also the prime culprit behind the recent sharp increases in Medicare spending. The number of obese Medicare recipients nearly doubled between 1987 and 2002 and the cost of treating them almost tripled.¹³

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About The George Washington University School of Public Health and Health Services

The GW School of Public Health and Health Services was established in July 1997, bringing together three longstanding university programs in the Schools of Medicine, Business and Education. Today, more than 900 students from nearly every U.S. state and more than 35 nations pursue undergraduate, graduate and doctoral-level degrees in public health. The George Washington University Medical Center is an internationally recognized interdisciplinary academic health center that has consistently provided high-quality medical care in the Washington, D.C. metropolitan area for 176 years. The Medical Center comprises the School of Medicine and Health Sciences, the 11th oldest medical school in the country; the School of Public Health and Health Services, the only such school in the nation’s capital; GW Hospital, jointly owned and operated by a partnership between The George Washington University and Universal Health Services, Inc.; and the GW Medical Faculty Associates, an independent faculty practice plan. For more information on GWUMC, visit www.gwumc.edu.

References


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