

Economic Impact of Obesity to Surpass \$4 Trillion by 2035

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STORY AT-A-GLANCE

- > The growing obesity epidemic shows no sign of stopping and is predicted to cost over \$4.3 trillion by 2035, when experts estimate more than half of the global population will be overweight or obese, and nearly 2 million will be obese
- > The rising number of children with obesity not only increases a child's risk of health challenges during childhood, but also raises their risk for health concerns in adulthood including blood clots, overweight and obesity, cardiovascular disease and premature death
- According to the Pentagon, 77% of persons aged 17 to 24 do not qualify for military service for three critical reasons, one of which is being overweight or obese
- > Obesity is the leading cause of knee replacements, infertility, liver failure and severe COVID-19. Conflicts of interest obstruct truthful nutritional guidance, such as Coca-Cola's campaign to promote exercise and drink Coke and pushing seed oils high in linoleic acid, which increases inflammation and increases snacking

In 1954, obesity was called a common physical abnormality.¹ Today it's called an epidemic.² Many of the complications related to obesity are health conditions that negatively impact quality of life and increase health costs. These include lung, liver and heart diseases, arthritis and gout.³

The 2023 report⁴ from the World Obesity Federation estimates that the economic impact of overweight and obesity will surpass \$4.3 trillion annually by 2035. In the U.S., the CDC⁵ reports the prevalence of obesity in adults was 41.9% measured from 2017 to

March 2020. This represented an increase from 30.5% from 1999 to 2000. The estimated annual medical costs were roughly \$173 billion in 2019 dollars.

Using this estimate, medical costs for obese adults were \$1,861 higher than those who had a healthy weight. In children and adolescents aged 2 to 19 years from 2017 to 2020, the prevalence of obesity was 19.7%, which in raw numbers was approximately 14.7 million adolescents and children. The prevalence ranged from 12.7% in 2- to 5-year-olds to as high as 22.2% in 12- to 19-year-olds.

According to data collected by the CDC, obesity affects some groups more than others⁷ and some areas of the country more than others.⁸ Kentucky and West Virginia have the highest percentage of the population who are obese in the country, while Washington, D.C., has the lowest.

2035 Obesity Economic Impact Estimated to Surpass \$4 Trillion

The World Obesity Federation 2023 report⁹ predicts that more than half of the global population will be overweight or obese by 2035 and nearly 2 billion will be obese. The 2022 estimate¹⁰ was that 1 in 5 women and 1 in 7 men or roughly over 1 billion people will be obese by 2030. In other words, in just five years, from 2030 to 2035, they estimate the number of individuals who will be obese will nearly double.

According to the World Obesity Federation,¹¹ 1 in 7 people across the globe is living with obesity. They estimate this number will increase to 1 in 4 by 2035. The rising number of overweight and obese individuals has a significant impact on health care costs.

According to the report, the economic impact in 2035 will reach 3% of the global GDP which is comparable to the cost of COVID-19 in 2020.

Additionally, childhood obesity may double from 2020 levels in boys and is predicted to more than double in girls. Of the 10 countries with the greatest estimated increase, all are either in Asia or Africa and nine are from low or lower-middle-income countries.

They estimate that continued failure in prevention and treatment will lead to these 12year estimates, and they call for the development of national plans around the world to address this growing epidemic.

According to the Federation, the report emphasizes the need for action plans but acknowledges the impact of several external factors such as climate change, COVID-19 restrictions, chemical pollutants and new pandemics. The Federation's partners include pharmaceutical, technology and weight loss companies, including:12

Boehringer Ingelheim	IFA Celtics	Medtronics
Allurion	Vivus	Lilly
Pfizer		

The report is used to promote World Obesity Day, during which the Federation encourages conversations about obesity to correct misconceptions, "acknowledge its complexities, and take effective, collective action. Because when we all talk, debate and share, we can shift norms and transform health outcomes for everybody."¹³

Childhood Obesity Raises Risk for Adult Health Concerns

The rising number of children with obesity not only increases a child's risk of health challenges during childhood but also raises their risk for health concerns in adulthood. Obese children¹⁴ are more likely to have other serious physical and mental health conditions. Mental health challenges may include anxiety, depression, low self-esteem, a higher risk of being teased and bullied, and poor social skills.

Some of the serious medical problems that can arise from childhood obesity during childhood are liver disease, high blood pressure, Type 2 diabetes, sleep disorders, respiratory problems and premature puberty. Each of these conditions also raises health care costs.

Yet, as data have demonstrated, the psychological, physical and financial challenges associated with childhood obesity follow an individual into adulthood. One study¹⁵

published in March 2023 from the University of Gothenburg demonstrated that overweight children had an increased risk of blood clots as they moved into adulthood.¹⁶

The researchers sought to evaluate the contribution that childhood obesity may play in the one-third of thromboembolic events that are known to be related to obesity. They gathered data from 37,672 men for whom they had data on height and weight during childhood, puberty and young adulthood.

They concluded that being overweight as a young adult was a strong determinant in the risk of adult venous and arterial thromboembolic events in men and that being overweight as a child was a moderate determinant.¹⁷ A 2016 meta-analysis of 15 studies and 200,777 participants demonstrated that obese children and adolescents had a five times higher risk of being obese in adulthood than those who were not obese.¹⁸

Although childhood obesity can increase the risk of certain cardiovascular health challenges in childhood, a 2017 systematic review with meta-analysis¹⁹ also demonstrated that childhood obesity could be a risk factor for adult cardiovascular disease.

A 2020 literature review²⁰ acknowledged that the rise in body mass index in children triggers a variety of cardiovascular and metabolic diseases that increase the risk of early onset disease in young adults that ultimately reduces their productive years and may lead to early disability.

Childhood obesity also increases the risk of premature death beginning in middle age. A 2020 study²¹ published in PLOS Medicine sought to evaluate whether that risk also occurred in young adulthood. The researchers collected data from 41,359 individuals and determined that the risk of mortality in early adulthood could be higher for individuals who were obese as a child.

77% of Potential U.S. Military Recruits Considered Unfit

A 2009 military fitness report from the Pentagon entitled "Ready, Willing, and Unable to Serve," revealed that 75% of Americans aged 17 to 24 were ineligible for the military based on three crucial reasons — lacking a high school diploma, having at least one prior criminal conviction or being physically unfit.

The report revealed 27% of potential recruits are too overweight to join the military and many of them are turned away by recruiters. Roughly 15,000 potential recruits failed their entrance physicals because they were overweight or obese. These numbers rose further in the 2022 Pentagon report.²³

The 2022 study showed 77% of individuals aged 17 to 24 would not qualify for military service due to being overweight, using drugs or having physical or mental health challenges. Most of the applicants were disqualified for multiple reasons. Major Charlie Dietz, a spokesperson for the Department of Defense, noted that other factors are also involved including a declining veteran population and youth who are more disconnected and disinterested than previous generations.

"The retired admirals and generals of Mission: Readiness recognize that the underlying causes of obesity cannot be solved by the efforts of the military alone," the Council for a Strong America said in a statement.²⁴

"With an increase in youth being ineligible for military service, it is more important than ever for policymakers, including state and local school boards, to promote healthy eating, increased access to fresh and nutritious foods, and physical activity for children from an early age."

Adult Obesity Raises Risk for More Health Challenges

Obesity increases the risk of several multiple health conditions in adults,²⁵ including but not limited to high blood pressure, Type 2 diabetes, respiratory problems, gallstones and gallbladder disease and joint problems.

Obesity is also a leading cause of knee replacements, infertility, liver failure and severe COVID-19. One Australian study²⁶ of 56,217 patients showed that obesity increased the

risk of knee replacement surgery. Of the patients who received a knee replacement due to osteoarthritis, 31.9% were overweight and 57.7% were obese.

Obesity also affects male fertility. Research presented at the Endocrine Society's 2022 annual meeting in Atlanta, Georgia,²⁷ revealed that maintaining healthy body weight in childhood could help prevent male infertility later in life.

Children and adolescents who were overweight or obese, or who had high levels of insulin or insulin resistance, tended to have smaller testicles compared to their normal-weight peers with normal insulin levels. According to the study's lead researcher, "More careful control of body weight in childhood and adolescence may help to maintain testicular function later in life."

High fructose intake and obesity are also driving factors in nonalcoholic fatty liver disease (NAFLD). This is the most common chronic liver disease in developed countries²⁸ that results from lifestyle factors, such as diet, exercise, weight management and smoking, and is not related to heavy alcohol use.

In the U.S., 24% of adults have NAFLD, and another study²⁹ presented at the Endocrine Society's 2022 annual meeting suggested that high fructose consumption was associated with an increased risk of NAFLD. Foods high in fructose, including soda and candy, are associated with obesity and diabetes, which are also associated with NAFLD.

Data has also shown that obesity increases your risk of severe consequences from COVID-19. A July 25, 2021, article³⁰ by Joel Hirschhorn on Trial Site News highlights what he refers to as a "missed public health opportunity."

Hirschhorn is a full professor at the University of Wisconsin, Madison, a senior official at the Congressional Office of Technology Assessment and the National Governors Association, and a member of the Association of American Physicians and Surgeons and America's Frontline Doctors.

Even though we've known for well over a year that obesity is one of the most common and most significant risk factors for COVID-19 (aside from age, which you have no

control over), public health authorities have ignored the issue and failed to provide guidance on how to reduce excess weight.

"Would not fighting obesity qualify as a valid prevention approach to curbing the ill effects of the COVID pandemic?" Hirschhorn asks. "Could the reason for the government's lack of aggressively pursuing an anti-obesity campaign be a bias for promoting vaccines? It seems a likely explanation."

Conflicts of Interest Obstruct Truthful Nutrition Guidance

Many factors contribute to overweight and obesity challenges, but the primary focus must be on the food and beverages you consume. However, instead of producing healthier products, the food industry develops campaigns designed to increase their profits without regard to your life.

For example, to improve the perception of their product, Coca-Cola created a public relations campaign promoting exercise to fight obesity and argued that their beverages are part of a healthy lifestyle.³¹ The campaign blamed the growing obesity problem on a lack of exercise in children and adults. Yet, as research has demonstrated, this was a lie since you can never out-exercise a bad diet.

Other factors that contribute to the growing obesity problem is chronic inflammation³² and the endocannabinoid receptors in your brain. One food substance you eat that is related to both factors is linoleic acid (LA). As I have written before, LA is a significant contributor to the inflammatory domino effect that eventually kills.

LA also stimulates the endocannabinoid receptors in your brain that cause an effect similar to the "munchies" people experience after consuming cannabis. Blocking these endocannabinoid receptors was the mechanism the obesity drug Rimonabant used to cause people to lose weight. However, it also caused a significant increase in suicidal depression and was removed from the market, which was a strong illustration of the law of unintended consequences.

Collectively, consuming too much LA is a primary factor driving the overweight and obesity epidemics. The obvious solution? Radically limit PUFA and LA so as not to stimulate the endocannabinoid receptors in the first place. PUFA also impairs mitochondrial function to decrease energy production, along with impairing thyroid function, so there are additional reasons to cut way down on your intake, even if you're not overweight.

Examples of seed oils high in omega-6 PUFAs include soybean, cottonseed, sunflower, rapeseed (canola), corn and safflower.³³ These processed seed oils and vegetable oils get integrated into your cell and mitochondrial membranes, damaging the structures³⁴ and setting the stage for health problems. With a half-life of 680 days,^{35,36} it can take years to clear them out of your body.

They also get incorporated into tissues such as your heart and brain. One result of this could be memory impairment and an increased risk of Alzheimer's disease. Canola oil, in particular, has been linked to further damage in people with Alzheimer's disease.³⁷

One thing standing in the way of proper **nutrition guidance** from the government is also a conflict of interest. In her book, "The Obesity Epidemic: What Caused It? How Can We Stop It?" Zoe Harcombe exposes the fallacy that a calorie isn't a calorie and explains:

"The UK has something that it calls the Responsibility Deal. We call it the Irresponsibility Deal. It's actually the stated intent of the government to work with the fake food industry, to try to do something about obesity.

There's a professor in the UK who said, "You may as well put Dracula in charge of the blood bank." It really is as crazy as that. I have a little chart [showing] these conflicts of interest. Those are the organizations behind public health dietary advice."

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