

Tackling obesity in 2020—with a great resolution comes shared responsibility



For millions around the world, the New Year brings renewed energy and the will to change things for the better. The promise to adopt a healthier lifestyle is often at the top of the list of New Year's resolutions.

A recent NEJM report estimated that, by 2030, nearly half of adults in the USA will have obesity, with a prevalence not below 35% in any state, and nearly one in four will have severe obesity, with a prevalence higher than 25% in 25 states. In England, updated data from the National Child Measurement Programme are equally alarming—rates of severe obesity in children aged 10–11 years have increased for the fourth consecutive year, reaching a new high of 4.4% in 2018–19 (vs 3.7% in 2014–15). Furthermore, the prevalence of obesity has increased in children aged 4–5 years to approximately 10% and remained around 20% in those aged 10–11 years.

These obesity rates and projections also point to strong inequalities. In the USA, large disparities across states and demographic subgroups were reported, and in England the levels of childhood obesity in the poorest areas are more than double those in the richest areas. Healthy food and drinks are often much less affordable than unhealthy options, leading to excessive intake of sugar and fat in underprivileged areas. Improper nutrition can also be due to an optimistic bias about the quality of one's diet and the perception that certain types of foods, such as breakfast cereals, are healthy. On Jan 3, the discount retailer LIDL announced that it would remove cartoon characters from the packaging of several of its cereal products in the UK. This initiative is in line with the recommendation to "Allow children to grow up free from marketing, signals and incentives to consume unhealthy food and drinks", proposed in Professor Dame Sally Davies' final report as Chief Medical Officer for England. The recommendations, which aim to help the government achieve its current target to halve childhood obesity by 2030, also include fiscal measures to favour healthier dietary options, a central role for schools and nurseries in supporting a healthier environment, and a prohibition to eat or drink on urban public transport (with a few exceptions).

Eating behaviour has always been determined by biological, social, and cultural factors. But this complexity is now exacerbated by aggressive political economies of

food, pervasiveness of industry-funded nutrition research, and much lobbying and marketing. Instagram announced last autumn it would ban the advertisement of miracle weight loss products, which are often promoted by celebrities with millions of followers worldwide. Yet, absurd, and sometimes even dangerous, diets are still being widely promoted on other outlets, contributing to the belief that there is a magic, quick-fix diet to lose weight. While it is important to minimise everyone's exposure to such products and diets, it is equally important to equip individuals with the knowledge to make sensible choices. Education and information are powerful elements of change and schools provide an invaluable opportunity for delivering such tools and impact a large population of students, staff, and families.

To help guide nutrition choices, updated Nutrition Facts labels for packaged foods are now in circulation in the USA and in Europe. New labels include separate lines for sugars and fat, and nutritional facts for both the entire package as well as for one serving portion. However, interpreting this information effectively can be challenging. A recent systematic review and meta-analysis suggests that converting calories into the amount of exercise needed to burn them off seems to make people think more carefully about what they eat and results in consumption of fewer calories. Physical Activity Calorie Equivalent (PACE) labels/labelling has been well received by the Royal Society of Public Health in the UK, but needs additional validation in real-world settings.

According to WHO, global prevalence of obesity has nearly tripled since 1975. Addressing this burden is urgent, but meaningful changes will require strong actions from individuals, health-care task forces, policy makers, and politicians, and the implementation of clear and organised cross-sector strategies. However, basic and translational research must not be neglected. Elucidating the biological determinants of obesity could also help develop prevention strategies. Likewise, the importance of food and agricultural research to encourage production of high quality and sustainable products cannot be underestimated. The resolution and responsibility to halt the obesity epidemic must be shared across sectors and individuals. ■ [The Lancet Diabetes & Endocrinology](#)



Lancet Diabetes Endocrinol 2020

Published Online
January 9, 2020
[https://doi.org/10.1016/S2213-8587\(20\)30001-2](https://doi.org/10.1016/S2213-8587(20)30001-2)

For the **NEJM** article on obesity projections in the USA see *N Engl J Med* 2019; **381**: 2440–50

For data from the National Child Measurement Programme see <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2018-19-school-year>

For more on the LIDL announcement see <https://www.theguardian.com/business/2020/jan/03/childhood-obesity-lidl-remove-cartoon-characters-cereal>

For Professor Dame Sally Davies' report see <https://www.gov.uk/government/publications/time-to-solve-childhood-obesity-cmo-special-report>

For more on the Instagram announcement see <https://www.telegraph.co.uk/news/2019/09/18/instagram-bans-miracle-diet-product-promotions-celebrities-influencers/>

For the systematic review and meta-analysis on PACE see *J Epidemiol Community Health* 2019; published online Dec 10. <http://dx.doi.org/10.1136/jech-2019-213216>

For more on WHO obesity facts see <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>