Outline: Epidemiologic Analysis of Obesity in Children and Adults in America

Name

Institutional Analysis

**Introduction**

* Obesity is one of the serious health problems in the United States.
* Studies have shown that nearly 35 percent of Americans are considered obese.
* Obesity is not only considered as a problem of “girth control”, but is currently considered a chronic disease by the Obesity Society.
* The aim of this analysis is to describe the epidemiological characteristics of obesity in children and adults including risk factors, causes, global prevalence, and economic impacts of illness related to obesity.

**Obesity and Overweight Defined**

* An individual is considered to be overweight if he or she has a BMI of 25 to 29.9 kg/m2.
* Someone is considered obese if he or she has a BMI of 30 kg/m2 (CDC, 2016).
* An individual with a BMI of more than 40 kg/m2 is considered to have morbid obesity.

**Methods and Analyses**

* To analyze Obesity in Children and Adults in America, a meta-analysis and a comprehensive systematic review of published studies are used to conduct the study.
* The paper combines both institutional-base and community-based studies.
* STATA Version 12 and Epi-data Version 3.1 software are used for data entry and data analysis respectively.

**Prevalence of Obesity**

* According to CDC, obesity is widespread.
* CDC reported that more than 34.9% of the US adults are obese.
* The middle-aged adults of age 40 to 59 years have a high prevalence of 39.5% as compared to women of age 20 t0 39 years with a prevalence of 30.3%.
* Women with lower incomes are at higher risk to have obesity as compared to women with higher incomes.
* Trends in Obesity and Overweight among Children and Adults in the U.S
* According to statistics NCHS, the prevalence of obesity have increased massively among women and men between 1980 and 2000 (Fryar et al, 2016).

**Changes over Time: Adolescents and Children**

* The adolescents and children of age 2 to 19 years registered an increase rate of prevalence between 2003-2004 and 1988-1994.
* Since this period there have been no significant changes in prevalence.
* Among children of ages 2 to 5 years, the rate of prevalence rose between 1988 and 1994 and it declines 2003-2004 (Ogden et al, 2015).
* Among children ages between 6 and 11, there were a significant increased between 1988 and 1994 and there was no significant change in 2007-2008.
* There were a rise in prevalence of obesity between 2013-2014 and 1988-1994 among adolescents ages 12 to 19.

**Impacts of Obesity on Society**

* As of 2010, it estimated that between $147 billion and 210 billion in both indirect and direct health care costs have been spent.
* It was estimated that obese people spent $1429 higher in 2006 as compared to people with normal weight (Jensen et al, 2013).
* Life medical cost for a 10-year child with obesity stands at $19000 as compared to a child with normal weight.
* **Possible Causes of the Obesity**
* Lack of physical activity, genetic predisposition, medical reasons, and too much time watching TVs and social media are major causes of obesity.
* It was reported that single gene mutations contributes to monogenic obesity (Ogden et al, 2015).
* Studies have also established that single-nucleotide polymorphisms (SNP) or genetic variants contribute to obesity.
* Medical reasons such as underactive thyroid gland and crushing’s syndrome causes to obesity.
* Poor diet such as eating large amounts of fast food or excessive drinking of alcohol causes obesity.

**Summary and Conclusions**

* Obesity prevalence in the United States has increased significantly since 1980 in both children and adults.
* According to data collected, women with less education, low income earners, and children are at risk of having obesity.
* Obesity is mainly contributed by the interactions between genetic predisposition, environmental factors, and human behavior.

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