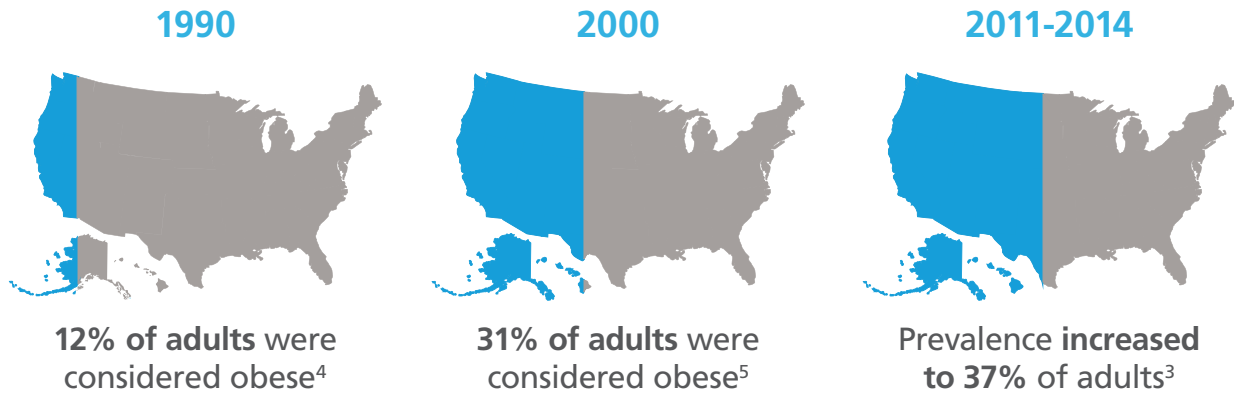


The burden of obesity on employers

A quick look at prevalence, causes, cost, and more

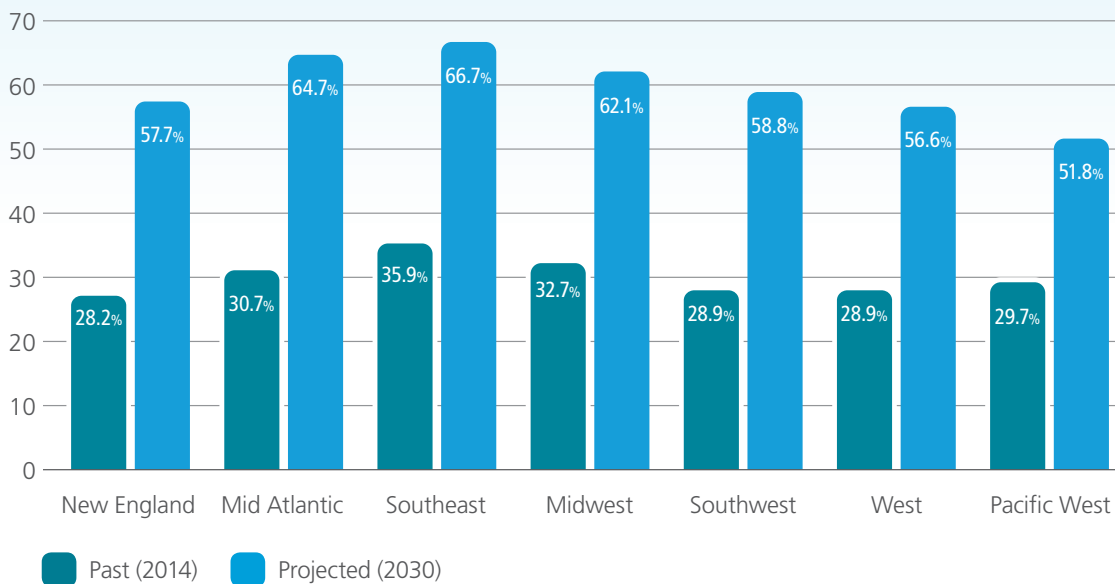
PREVALENCE

The prevalence of obesity has doubled in the United States from 1990 to 2014 and continues to increase^{1,2,3}



If current linear trends continue, 51% of the US population will be obese by 2030⁶

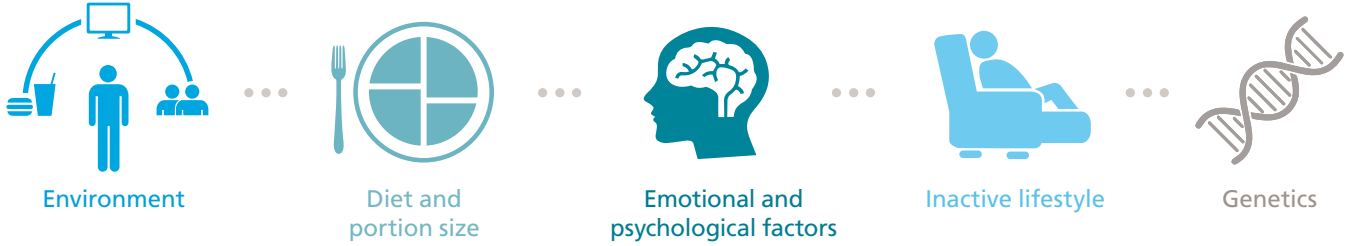
Highest past and projected prevalence of obesity by US region^{7,8,a}



^aThe data reported is from the state with the the highest prevalence percentage in each region.

DISEASE ORIGINS



Obesity is the result of a complex interplay between many factors⁹



COMORBIDITIES

Obesity increases the risk of developing certain comorbidities^{10,a}

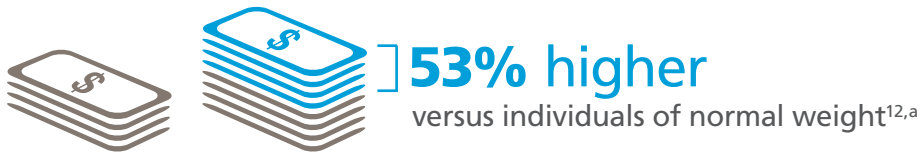
Relative risk of developing costly comorbid conditions in adults with BMI ≥ 30 kg/m² ^{11,a}

	Type 2 Diabetes	Hypertension	Coronary Artery Disease
	6.7 x	1.8 x	1.7 x
	12.4 x	2.4 x	3.1 x

^aCompared with members of normal weight.

COST

Health care costs among employees with severe obesity (BMI ≥ 40 kg/m²)



The direct and indirect costs of obesity-related comorbidities were estimated at **\$1.42 trillion** in 2014 ^{10,b}

^aCost based on 2006-2008 cost-analysis study of medical claims from a US employee database and was adjusted for inflation to reflect 2014 US dollars.¹⁵

^bObesity-related comorbidities included, but not limited to, hypertension, type 2 diabetes, chronic back pain, and osteoarthritis.

TREATING OBESITY

Sustained 5%-10% weight loss can have a positive impact on health²

Employees who lose 5% of their body weight may experience^{13,a}:



HDL=high-density lipoprotein; LDL=low-density lipoprotein; SBP=systolic blood pressure.

Weight loss substantially reduces medical expenditures associated with obesity-related complications²

Consider working with your internal team to see how obesity affects your organization. Interested in learning more? Visit **NovoNordiskWorks.com**

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