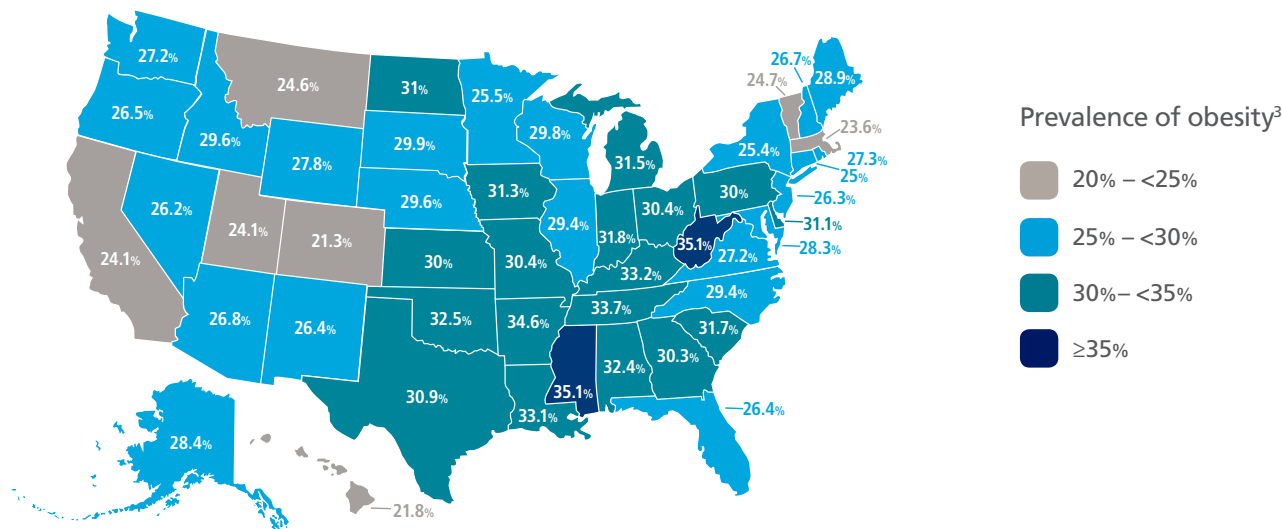


The burden of obesity on employers

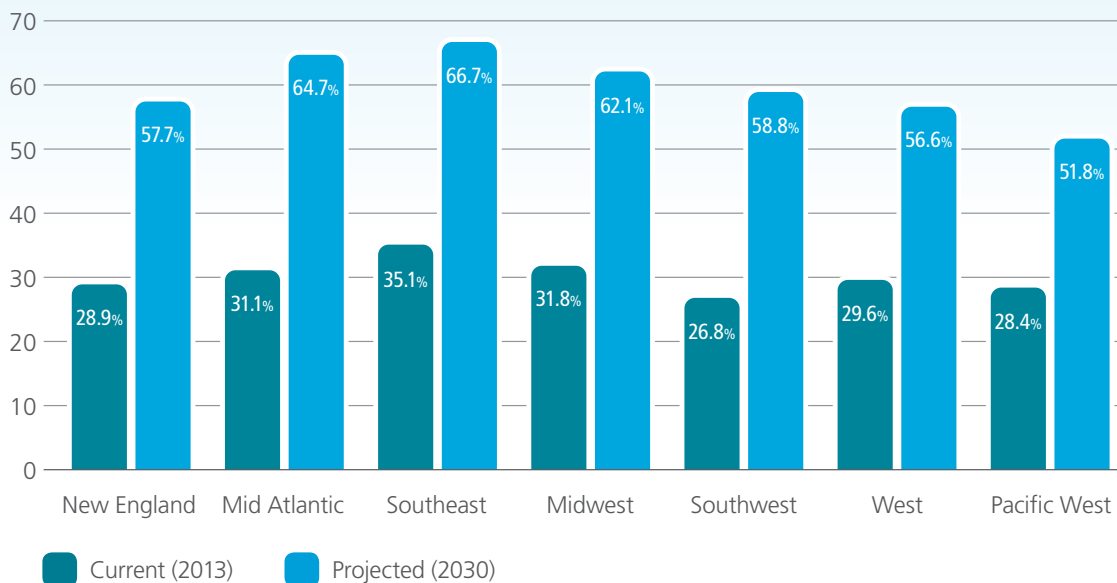
A quick look at prevalence, causes, cost, and more

PREVALENCE

78.6 million adults in the United States have obesity, and that number is expected to continue growing^{1,2}



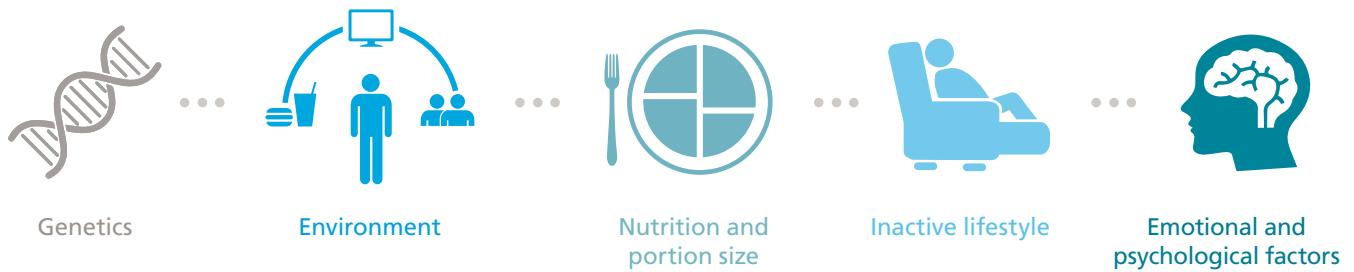
Highest current and projected prevalence of obesity by US region^{4,5,a}



^a Data represent the highest current and projected prevalence for each region, as percentages varied by state.

CAUSES



Obesity is a complex disease with multiple causes⁶



COMORBIDITIES

There are various issues and comorbidities associated with obesity⁷

Relative risk of developing type 2 diabetes and hypertension^{7,a}

	TYPE 2 DIABETES	HYPERTENSION
	6.7x	1.8x
	12.4x	2.4x

^aIn adults with BMI ≥ 30 kg/m² compared to individuals of normal weight.⁷

COST

Obesity-related illness costs have been estimated to account for ~21% of total US health care expenditures⁸

27% more physician visits and outpatient costs^{9,b}

46% increased inpatient costs^{9,b}

80% increased spending on prescription drugs^{9,b}

Moderate weight loss can have a positive impact on health and may even affect indirect costs^{10,11}

Employees who lose 5% of their body weight may see meaningful improvements^{10,a,b}:

↓ A decrease in triglycerides

↓ A decrease in bad cholesterol

↑ An increase in good cholesterol

Weight loss may lead to increased productivity in employees with obesity¹¹

^aBased on the average weight of 222 lb at baseline and an average weight loss of 5%.¹⁰

^bBased on changes associated with a 1-kg weight loss.¹⁰

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

References: **1.** Centers for Disease Control and Prevention. Adult obesity facts. <http://www.cdc.gov/obesity/data/adult.html>. Updated September 9, 2014. Accessed March 11, 2015. **2.** Wang Y, Beydoun MA, Liang L, Caballero B, Kumanyika SK. Will all Americans become overweight or obese? Estimating the progression and cost of the US obesity epidemic. *Obesity*. 2008;16(10):2323-2330. **3.** Trust for America's Health. The State of Obesity: Better Policies for a Healthier America. September 2014. <http://healthyamericans.org/assets/files/TFAH-2014-ObesityReport%20FINAL.pdf>. Accessed May 5, 2015. **4.** Centers for Disease Control and Prevention. Obesity prevalence maps. <http://www.cdc.gov/obesity/data/table-adults.html>. Accessed May 8, 2015. **5.** Trust for America's Health. F as in Fat: How Obesity Threatens America's Future. September 2012. <http://healthyamericans.org/assets/files/TFAH2012FasInFat18.pdf>. Accessed May 8, 2015. **6.** National Heart, Lung, and Blood Institute. What causes overweight and obesity? National Institutes of Health. <http://www.nhlbi.nih.gov/health/health-topics/topics/obe/causes.html>. Accessed July 16, 2014. **7.** Guh DP, Zhang W, Bansback N, Amarsi Z, Birmingham CL, Anis AH. The incidence of comorbidities related to obesity and overweight: a systematic review and meta-analysis. *BMC Public Health*. 2009;9(88):1-20. **8.** Cawley J, Meyerhoefer C. The medical care costs of obesity: an instrumental variables approach. *J Health Econ*. 2012;31:219-230. **9.** Finkelstein EA, Trogon JG, Cohen JW, Dietz W. Annual medical spending attributable to obesity: payer- and service-specific estimates. *Health Affairs*. 2009;28(5):w822-w831. **10.** Pasanisi F, Contaldo F, de Simone G, Mancini M. Benefits of sustained moderate weight loss in obesity. *Nutr Metab Cardiovasc Dis*. 2001;11(6):401-406. **11.** Bilger M, Finkelstein EA, Kruger E, Tate DF, Linnan LA. The effect of weight loss on health, productivity, and medical expenditures among overweight employees. *Med Care*. 2013;51(6):471-477.