

Re: Addressing the Obesity Epidemic: A Women's Health Perspective

September 9, 2024

The Honorable Cathy McMorris Rodgers, Chair Committee on Energy and Commerce 2125 Rayburn House Office Building Washington, DC 20515

The Honorable Frank Pallone, Jr., Ranking Member Committee on Energy and Commerce 2322A Rayburn House Office Building Washington, DC 20515

Dear Chair Rodgers, Ranking Member Pallone, and Committee Members,

On behalf of the American Medical Women's Association (AMWA) and the undersigned women's organizations and women-led organizations, we are writing to express our concern about the growing epidemic of obesity and its profound implications on women's health through the lifespan. We must address obesity as a critical challenge in advancing the health of the nation.

The rising rates of obesity are cause for alarm. One decade ago, no state had an adult obesity prevalence at or above 35%, yet now at least 22 states report a rate of 35% or higher. (CDC, CDC) Nationally, the overall obesity rate stands at 42.4%, although women of color bear a disproportionately higher burden, with non-Hispanic Black women experiencing the highest prevalence at 56.9%. (CDC) In addition, women have a higher prevalence of severe obesity (11.5% women vs. 6.9% men). (CDC) Recognizing and treating obesity as a chronic disease is paramount to reversing this epidemic.

The **Treat and Reduce Obesity Act** (**TROA**, <u>H.R.4818</u>) will do just that. This bill is aimed to help improve access to care by expanding Medicare coverage of intensive behavioral therapy for obesity and allowing coverage under Medicare's prescription drug benefit of drugs used for the treatment of obesity for identified populations. We applaud the House Ways and Means Committee for supporting this bill and urge your House Energy and Commerce Committee to continue to support passage of this bill.

Here's why this issue deserves your attention and action:

• **Obesity and Cardiovascular Disease:** Cardiovascular disease (CVD) is the leading cause of death in women in the U.S. and is responsible for about 1 in every 5 female deaths. (CDC)



Obesity is an independent risk factor for CVD, but it also impacts other cardiac risk factors, including diabetes, hypertension, and hyperlipidemia.

- **Obesity and Cancer:** Obesity is linked to a higher risk for 13 types of cancers. These cancers represent 40% of all cancers diagnosed in the United States each year. (CDC)
- **Obesity and Infertility:** Roughly 1 in 6 people experience infertility worldwide, and obesity is a risk factor for infertility. (FIGO, WHO)
- **Obesity and Maternal Mortality:** The U.S. already has the highest rate of maternal mortality among developed nations. We know that the risk of maternal death increases with body mass index (BMI) (Nature).
- Obesity and Mental Health: The relationship between obesity and mental health is intricate and bidirectional and of significance given the current mental health crisis in the U.S. Individuals who have obesity may face a range of psychological challenges, such as depression, anxiety, and low self-esteem. Conversely, mental health disorders can contribute to obesity through behaviors like emotional eating, sedentary lifestyles, or medication side effects. (PCD)
- Obesity and Chronic Disease: Obesity can increase the risk of numerous health issues such as stroke, osteoarthritis, sleep apnea, Alzheimer's disease, liver disease, and respiratory problems. (CDC)
- Economic Burden of Obesity. Obesity is estimated to contribute \$173 billion in excess medical costs annually. (CDC) Medical costs for adults who have obesity are on average \$1,861 higher than medical costs for people with healthy weight. (CDC) And forecasting models have shown us that an investment now in addressing obesity will lead to future healthcare savings for the treatment of obesity related chronic conditions. (USC Schaeffer, Milliman Report Medicaid, Milliman Report Medicare)

We urge you to take the necessary steps to address barriers to obesity care by supporting the **Treat** and **Reduce Obesity Act** (**TROA**, <u>H.R.4818</u>). By prioritizing access to comprehensive obesity care, we can combat this significant health challenge with the same rigor we apply to other chronic conditions like diabetes and hypertension. And together, through action and innovation, we can improve the health and medical care for countless women.

We hope that we can count on your support.

Sincerely,

American Medical Women's Association Alliance for Women's Health and Prevention American College of Nurse-Midwives American College of Physicians American Gastroenterological Association American Liver Foundation American Nurses Association



American Medical Women's Association

The Vision and Voice of Women in Medicine since 1915

American Society for Preventive Cardiology

American Society for Reproductive Medicine

Asian and Pacific Islander American Health Forum

Asian Health Coalition

Association of Black Women Physicians

Association of Women Surgeons

Black Women's Health Imperative

Bone Health and Osteoporosis Foundation

Choose Healthy Life

Color of Gastrointestinal Illnesses

Community Liver Alliance

DiabetesSisters

Global Initiative Against HPV and Cervical Cancer

Global Liver Institute

HealthyWomen

MANA, A National Latina Organization

National Association of Hispanic Nurses

National Association of Nurse Practitioners in Women's Health

National Black Nurses Association, Inc

National Consumers League

National Council of Negro Women, Inc

National Council on Aging

National Hispanic Council on Aging

National Hispanic Health Foundation

National Hispanic Medical Association

National Medical Association

National Menopause Foundation

National Women's Health Network

Nurses Obesity Network

Preventive Cardiovascular Nurses Association

Society for Women's Health Research

The Mended Hearts, Inc.

WomenHeart

CC: Full House Energy and Commerce Committee Membership