

PERFECT TIMING FOR MBS IN THE ERA OF THE NEW DEFINITIONS ON OBESITY

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OSWALDO CRUZ
CENTRO ESPECIALIZADO EM **OBESIDADE E DIABETES**

Disclosures

- Research Grant, Johnson & Johnson
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- SAB: GI Dynamics, Medtronic, Johnson & Johnson, Regeneron
- Commissioner, The Lancet Commission on the definition of clinical obesity

SIGNS THAT OBESITY IS NOT CONSIDERED A DISEASE



MBS/Pharmacotherapy underutilized



Inadequate use of prevention
X
treatment strategies



Widespread Bias and Stigma



Problems with insurance
coverage

OBESITY

AS A MODIFIABLE (LIFESTYLE-RELATED) RISK FACTOR

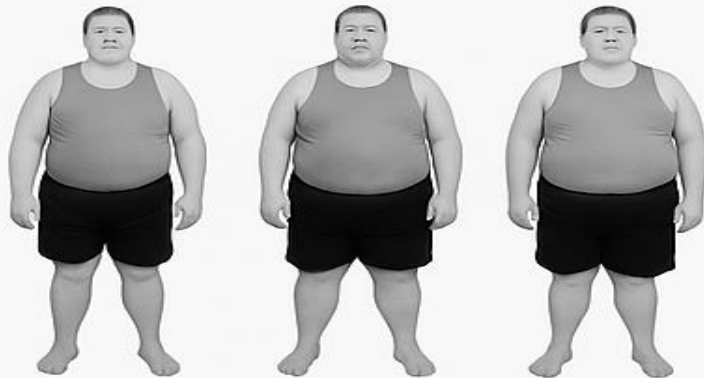


Current Definition: Obesity as a health risk

“A condition of excess adiposity ... that poses a risk to health



Physical phenotype



?

What?



When?

Obesity is a spectrum

RISK



MARIA

BMI 37

Symptoms:

- None

Medical Assessment:

- Normal Heart, Lung, Kidney function
- No Diabetes
- Slightly elevated cholesterol

Occupation and Social Life:

Teacher
Mother to 3 children
Enjoys running

Disease at the present

BMI 39

Symptoms:

- Fatigue
- Significant dyspnea on minimal exertion
- Lower limbs edema

Medical Assessment:

- Reduced heart function
- Restrictive pulmonary defect
- Severe sleep apnea (on CPAP)
- **No Diabetes**

Occupation & Social Life:

Currently unemployed
Regrets not being able to play football with his son anymore



JACK

RISK



DANGER



PROBLEM



DANGER



Patient's perspective

Risk



Risk Reduction
(Prophylactic Care)



“Let me think about it, I don’t feel ready...”

“Want to try diet one more time”

“Surgery is risky.....”



Policymaker and Payor's perspective



Risk Reduction
(Prophylactic Care)

Risk



“Surgery is costly” ...

“Medication is expensive”
“People don’t take it”

“Return of investment”

“Surgery is dangerous...(costs of complications)”

“Have other priorities right now...”

“We will cover/commission more procedures next year...”



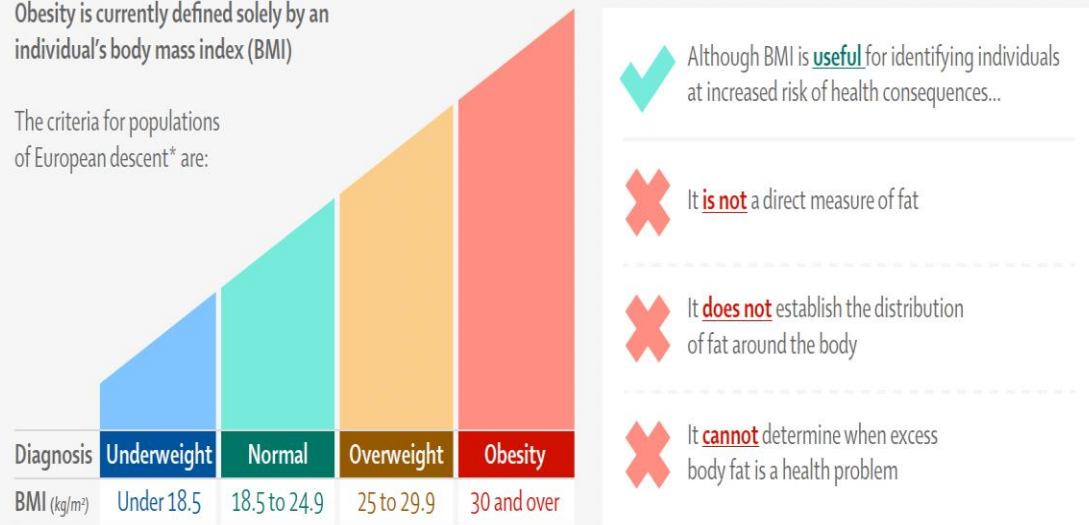
Mandatory pre-operative weight management.... multi-disciplinary preop assessment...”elective surgery”...

BMI Buckets ≠ Clinical Diagnosis.

Limitations of the current definition of obesity

Obesity is currently defined solely by an individual's body mass index (BMI)

The criteria for populations of European descent* are:



*Criteria for other ethnic groups are different

Body size



? Organ/Tissue Dysfunction
⚙️ Functional Limitation

What Defines a Disease?

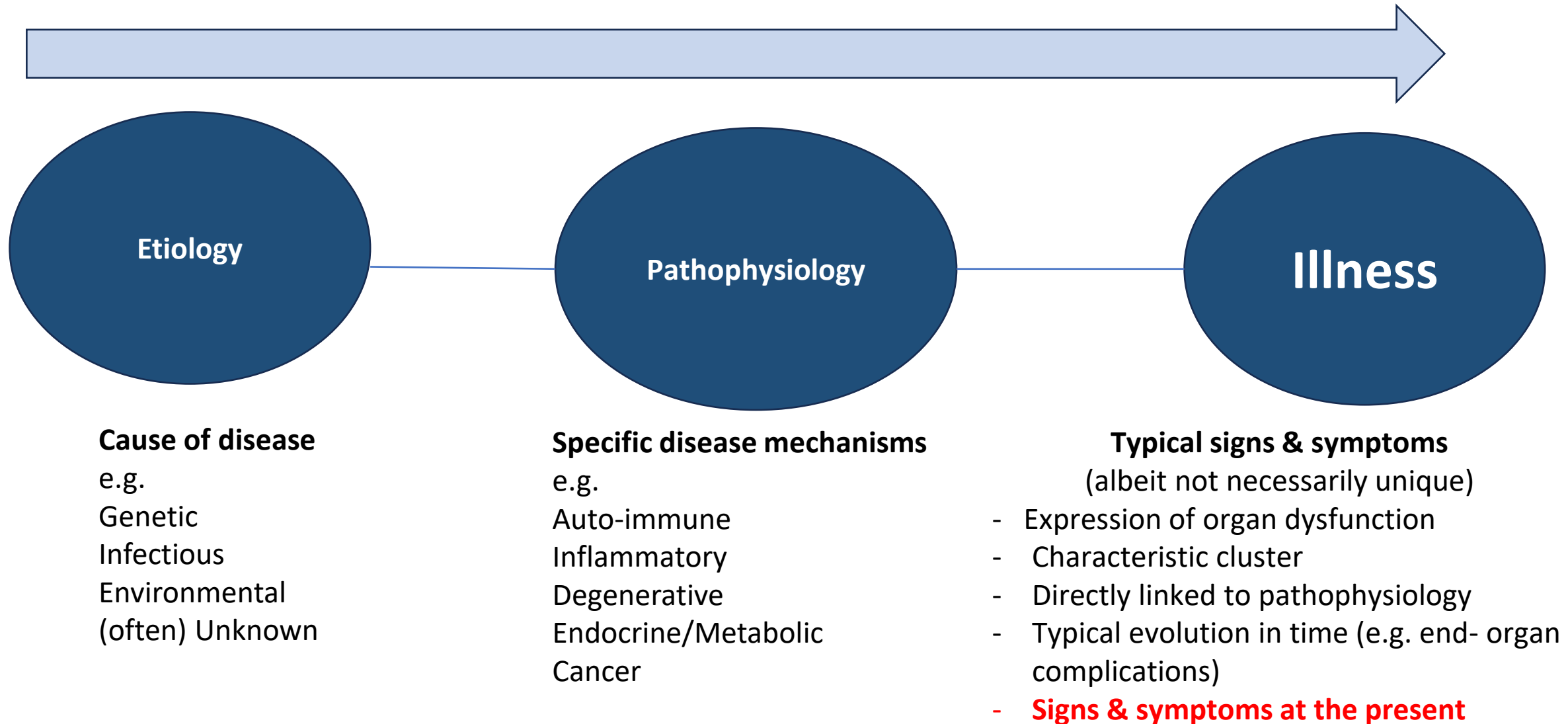
A disease is a harmful change in the body that causes **signs, symptoms,** or **limits daily life.**

● **Key Point:**
**Disease = Negative impact
on health happening now**

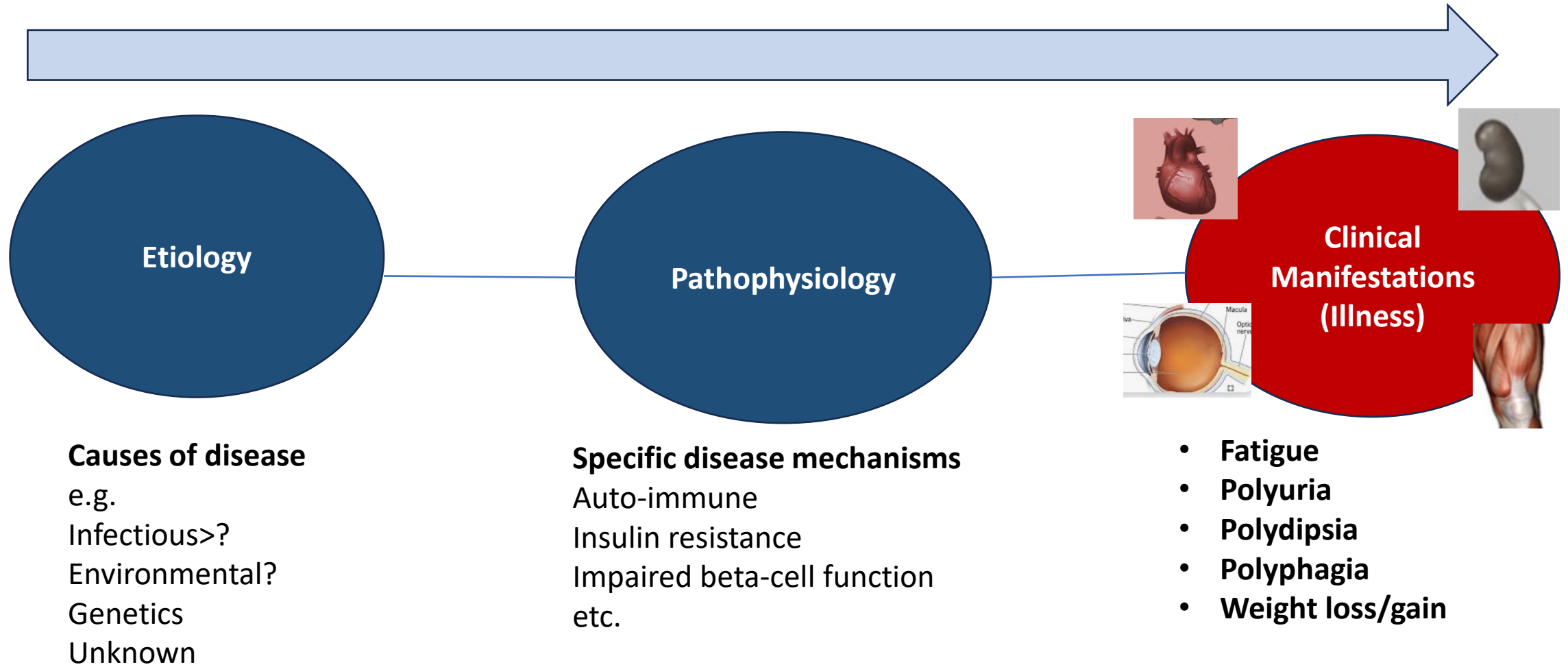


(Based on Merriam-Webster Dictionary)

“Anatomy” of a disease

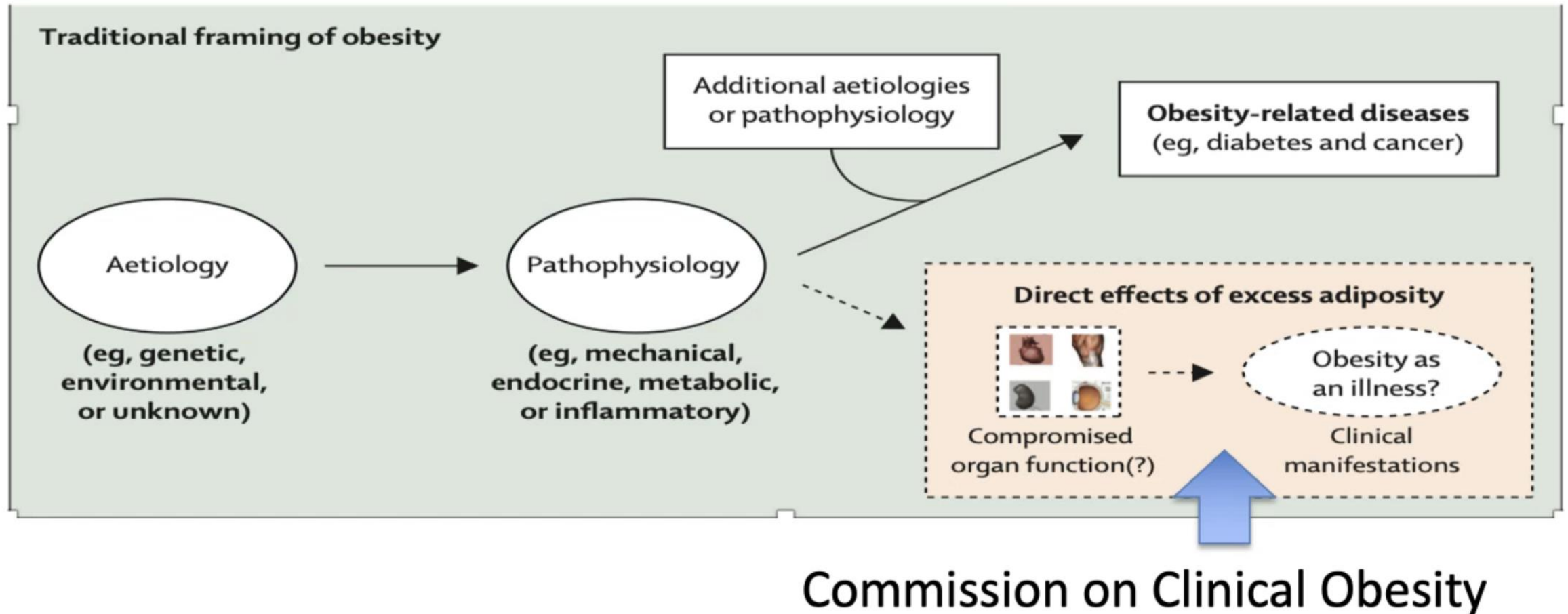


Diabetes

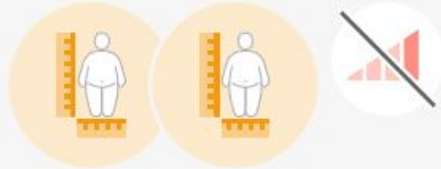


- >> **Retinopathy/blindness**
- >> **Kidney disease**
- >> **CVD/MI, etc.**

The (crucial) missing piece in the current framing of obesity



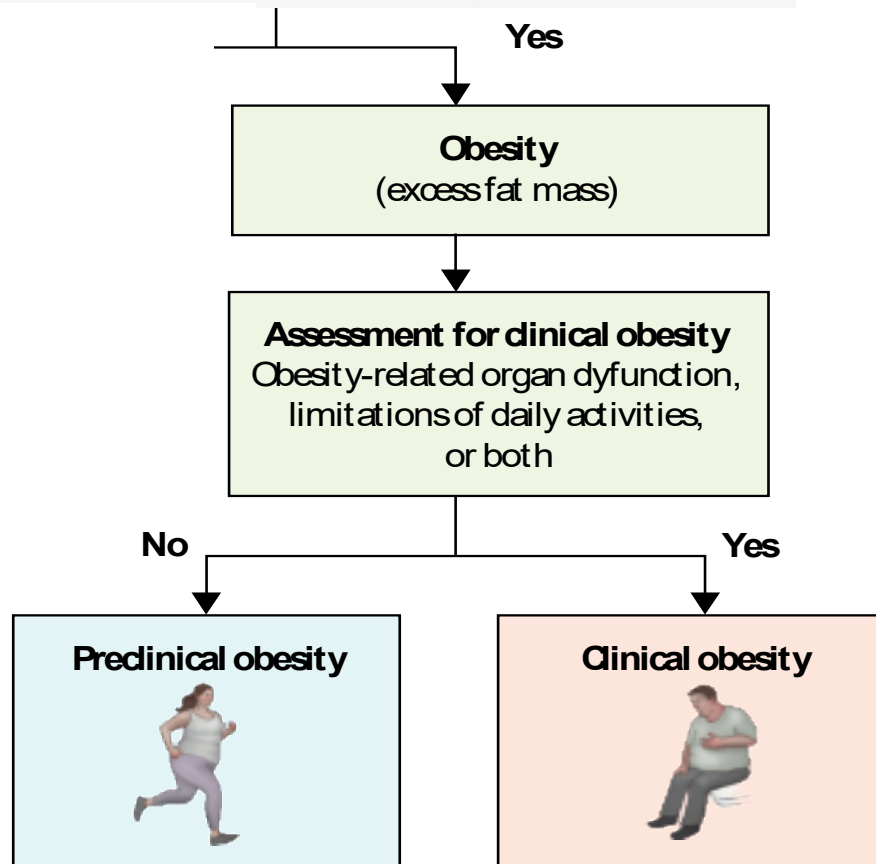
Confirmation of excess adiposity



At least two measurements of body size, regardless of BMI

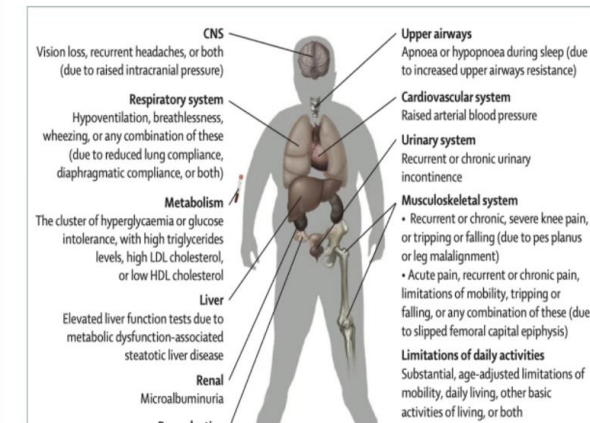
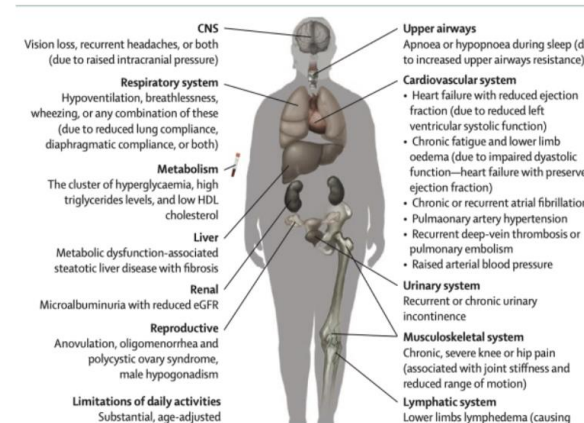


At least one measurement of body size and BMI



Criteria for Diagnosis of Clinical Obesity in Adults and in Children & Adolescents

With clinical, pathophysiological and health impact rational



NO OTHER DISEASE IS NEEDED TO DIAGNOSE CLINICAL OBESITY

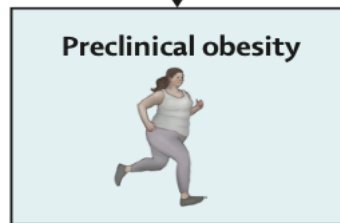
SCOPES OF CARE



Therapeutic Intent



Aims for remission of clinical manifestations of obesity



Risk Reduction



Preventative/Prophylactic Intent

Individual







Low risk: screening and monitoring over time

High risk: may require therapeutic intervention

The concept of Pre-Clinical Obesity is well understood in Medicine.

These conditions carry a risk identified through screening and treated to prevent progression to severe disease.

Strategies and intensity of care are are different

- HIV infection  AIDS
- Colonic polyps  Colon cancer
- Pre-diabetes  T2D
- MGUS  Myeloma



Obesity as currently defined BMI clusters

- Payers, policy makers
- Public health professionals



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ARTICLES · [Online first](#), March 03, 2025

Open Access

Global, regional, and national prevalence of adult overweight and obesity, 1990–2021, with forecasts to 2050: a forecasting study for the Global

60% of adults predicted to have overweight or obesity by 2050

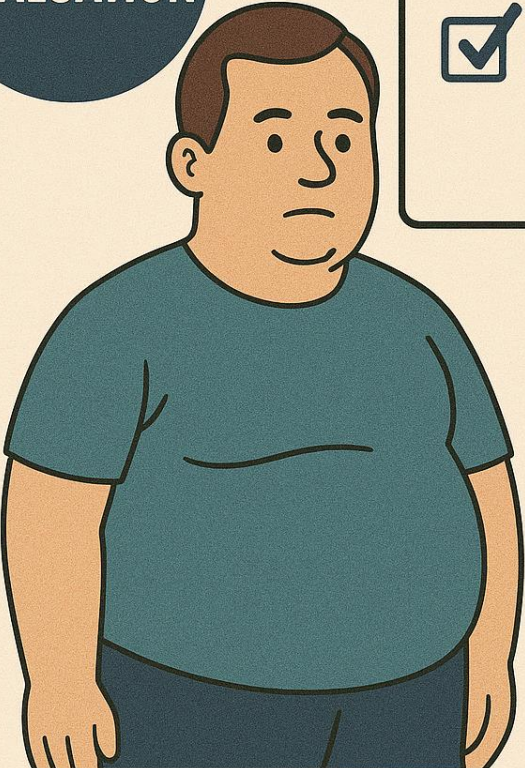
We need a triaging system!

Who should receive treatment first?



PRE CLINICAL OBESITY

RISK EVALUATION



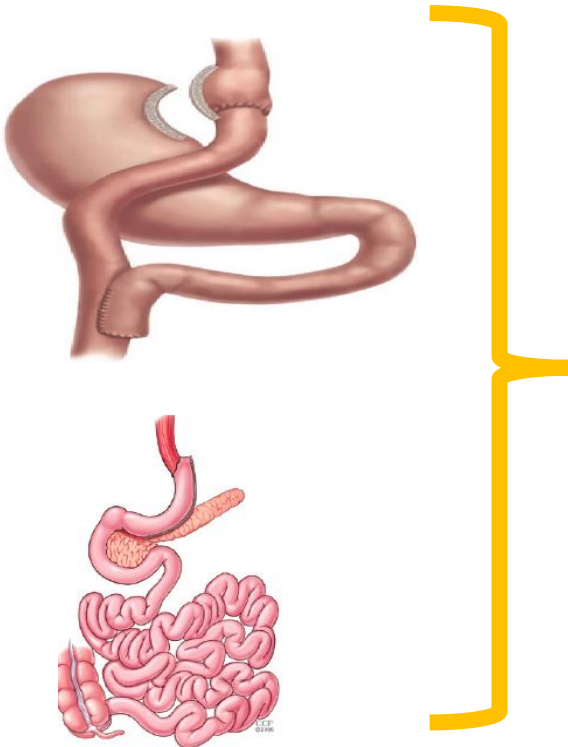
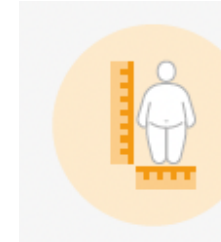
RISK-BASED PREVENTION AND TIMELY ACTION

DIAGNOSIS OF CLINICAL OBESITY SIGNS AND SYMPTOMS



How it changes surgical indications

Traditional BMI-based eligibility is no longer sufficient.
No **other diseases needed for MBS eligibility**



Organ dysfunction linked to excess adiposity (e.g., heart failure, fatty liver disease, respiratory issues).

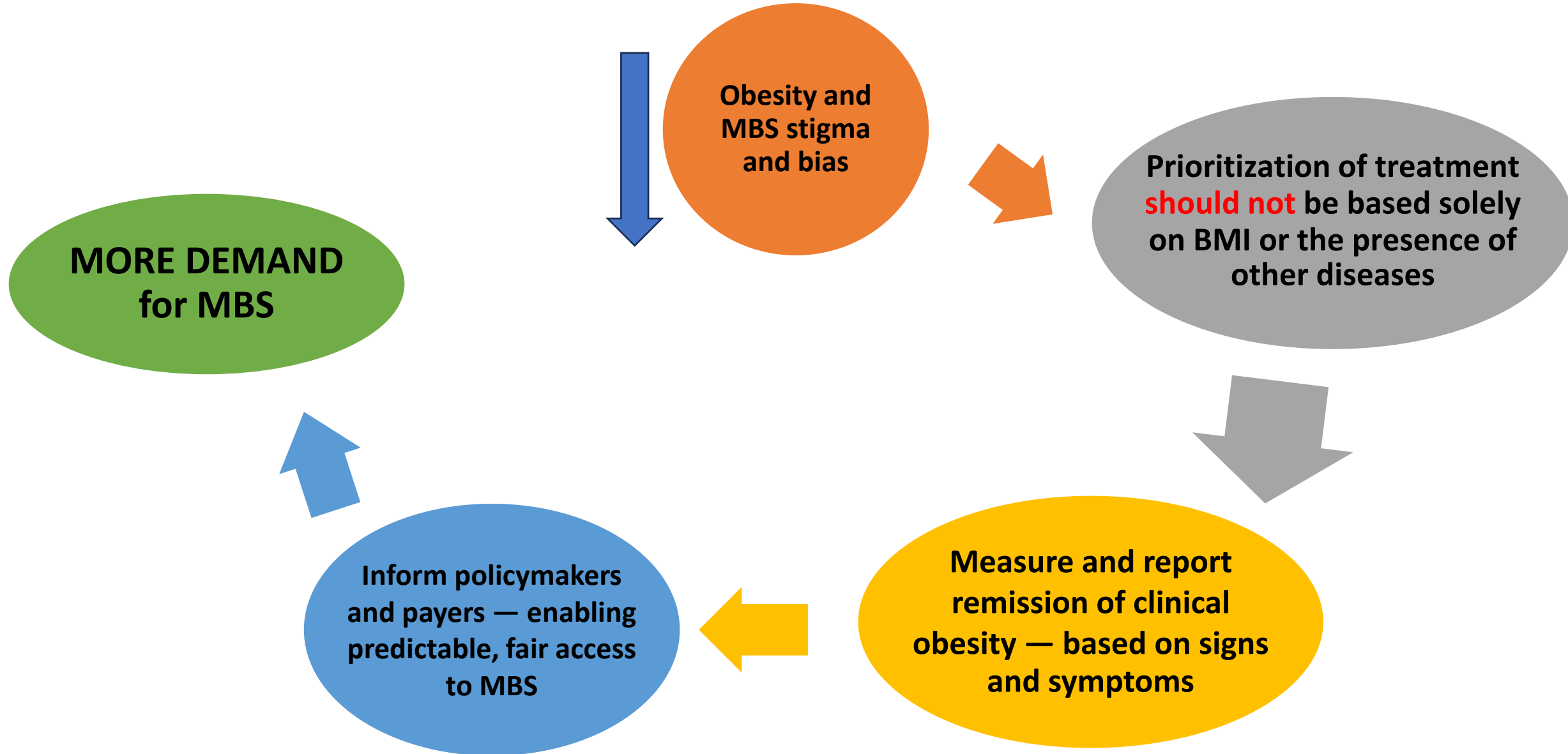
Functional limitations in daily activities (mobility restrictions, chronic joint pain).

Severe quality-of-life impairment due to obesity

Early intervention is recommended to prevent irreversible damage.

Lancet Commission Report:

What changes for MBS practice?



Definition and diagnostic criteria of clinical obesity



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Obesity Surgery

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EDITORIAL



From BMI to Disease Diagnosis: What Clinical and Pre-clinical Obesity Mean for Surgeons

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Thank you



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