

OBESITY'S CONTRIBUTION TO HEART DISEASE OFTEN OVERLOOKED

DALLAS -- Researchers at The University of Texas Southwestern Medical Center at Dallas say obesity may be one of the most overlooked factors in assessing a person's cholesterol as a risk factor for coronary heart disease.

The researchers found that obesity increases the risk for heart disease because it has three negative effects on a person's cholesterol profile: It is associated with increased total cholesterol; it decreases HDL (the good cholesterol); and it stimulates overproduction of triglycerides.

Dr. Margo Denke is lead author on a paper reporting their findings in the May 10 issue of the *Archives of Internal Medicine*. She is an assistant professor of internal medicine and a nutrition scholar in the Center for Human Nutrition at UT Southwestern.

Denke said, "Most people know that being overweight and having high cholesterol levels are two risk factors for developing coronary heart disease, but few have a clear understanding of how obesity is associated with cholesterol problems." She defined obesity as being more than 25 percent over ideal body weight.

"Studies confirm that obese individuals produce higher than normal levels of very-low-density-lipoproteins (VLDL), which are the precursors to low-density-lipoproteins, and we know that high levels of LDL are associated with heart disease. In addition, obesity lowers the level of high-density-lipoproteins (HDL) -- the good cholesterol," Denke said.

The UT Southwestern study considered the weight, height and blood lipid (fat) profiles of 4,834 randomly chosen U.S. Caucasian men who participated in the Second National Health and Nutrition Survey, 1976-1980. The men were divided into six categories based on body mass, an indicator of obesity that takes into account both a person's height and weight. These individuals were further divided into three age groups: 20-44, 45-59 and 60-74 for the study.

(More)

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Denke said that, surprisingly, obesity had less effect on cholesterol levels in the oldest group. But increasing body mass did correlate with an increased total cholesterol level in all groups.

"Recent studies show that as much as 40 percent of the adult population is overweight or obese, so our study has significant implications for many Americans," Denke said.

She said obesity relates more to inactivity than simply to what one eats.

Denke pointed out that her study addressed how obesity and weight gain -- not weight loss -- impact cholesterol levels. However, she said other studies have clearly shown that significant weight reduction correlates to decreases in LDL-cholesterol and increases in HDL-cholesterol. In people who both changed their diet and lost weight, the observed cholesterol reduction was nearly twice the amount experienced by people who made dietary changes only, Denke noted.

Based on her study, Denke believes that more emphasis should be placed on weight loss and avoiding weight gain. Maintaining ideal body weight will reduce one's risk for coronary heart disease.

Another research study released late last month in the *New England Journal of Medicine* said that drug therapy combined with diet therapy seemed to work best for reducing cholesterol. Denke said that for certain population groups, diet therapy in combination with weight loss will work just as well as drug therapy to reduce cholesterol.

Participating in the UT Southwestern study with Denke were Dr. Scott M. Grundy, director of the Center for Human Nutrition, and Dr. Christopher T. Sempos, National Center for Health Statistics of the Centers for Disease Control. The Study was funded by a National Institutes of Health/National Heart, Lung and Blood Institute Clinical Investigator Award to Dr. Denke.

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NOTE: The University of Texas Southwestern Medical Center at Dallas comprises Southwestern Medical School, Southwestern Graduate School of Biomedical Sciences, Southwestern Allied Health Sciences School, affiliated teaching hospitals and outpatient clinics.