

Diet Dogma Misguided, Study Reveals *Review of Data Uncovers 5 Medical Myths*

[February 28, 2011] Advising obese and overweight patients to lose weight does more harm than good, according to a [recent study in Nutrition Journal](#), an online scientific publication. Just weeks after publication, the article ranks as one of the publication's most "highly accessed" and has generated a storm of controversy among health professionals.

Linda Bacon, an associate nutritionist at University of California, Davis, and nutrition professor at City College of San Francisco, and Lucy Aphramor, a specialist dietitian with England's National Health Service and an honorary research fellow at Coventry University, conducted the survey of almost 200 scientific studies appearing in provisional form in the Journal's January 24th issue, just released in final version.

Rather than improving patient well-being, their review showed, weight-loss advice more often leads to weight gain, feelings of failure, and *diminished* health status. The authors advise health professionals to set aside weight as a marker and strive instead to help people improve health behaviors.

"The weight-focused approach does not, in the long run, produce thinner, healthier bodies," said Bacon. As a consequence, "many medical and policy measures are misdirected, costly and damaging. It is clear from our review of the data that body weight is a poor target for public health interventions."

Five Medical Myths

The Bacon-Aphramor study cites evidence that rebuts five major myths widely accepted by medical and nutrition practitioners. These include assumptions like:

- Weight loss prolongs life. *In fact*, mortality is higher for "successful" weight losers, and the Centers for Disease Control, echoed by many others, concluded that "overweight" people have the lowest mortality.
- Anyone can lose weight and keep it off through diet and exercise. *In fact*, almost all "lost" weight returns within five years, according to a National Institutes of Health expert panel, confirmed by many others.
- Weight loss is a practical and positive goal. *In fact*, weight loss efforts more often lead to feelings of failure and weight cycling than to slimming, both of which are implicated in risk for diabetes, cardiovascular disease, and other concerns.
- Weight loss is the only way for people deemed overweight and obese to improve their health. *In fact*, it is well-proven that changing health behaviors can improve health (even when weight is *gained*). And,
- "Obesity" places an economic burden on society. *In fact*, using Body Mass Index – rather than actual health conditions – as a proxy for health focuses wasteful medical treatment on healthy fat people, while overlooking a not insignificant cohort of at-risk thin people – and also results in damaging weight stigmatization and bias.

“Health professionals may mean well when they suggest people lose weight, but our analysis indicates that the ‘facts’ they’re acting on come through a flawed filter,” explains Bacon.

“When the data are reconsidered without the common assumption that fat is harmful,” she continued, “it is overwhelmingly clear that fat has been exaggerated as a risk for disease or decreased longevity.”

The results of these misconceptions are costly, she notes. “For decades, the United States’ public health establishment and a private weight loss industry of \$58.6 billion a year have focused on health improvement through weight loss,” she said. If fat itself isn’t the culprit, she added, “then the so-called ‘cost of obesity’ may really be the cost of weight bias.”

That bias itself affects individuals’ health, Bacon and Aphramor report. When an *American Journal of Public Health* study compared how often subjects “felt sick,” those with poor body image fared worse than their equally heavy counterparts. In other words, “two equally fat women would have very different health outcomes, depending on how they felt about their bodies,” the study said. “Likewise, two women with similar body insecurities would have similar health outcomes, even if one were fat and the other thin.”

Using Evidence-Based Approaches

With little to show for all the billions of dollars spent on weight-loss, Bacon said, “the result, rather than healthier bodies and minds, is unprecedented levels of body dissatisfaction and failure to achieve desired outcomes – like improved mobility, heart health and reduced blood sugar. It’s time to consider a more evidence-based approach.”

Added Aphramor, “Unintended consequences are particularly troubling, including guilt, anxiety, preoccupation with food and body shape, repeated cycles of weight loss and gain, reduced self esteem, eating disorders and weight discrimination.”

Bacon and Aphramor urge the health care community to adopt “a more ethical, evidence-based approach toward public health nutrition” – one that encourages individuals to concentrate on developing healthy habits rather than weight management.

Weight Neutrality Gets Results

Evidence shows that changing health behaviors can sustainably improve blood pressure, blood lipids, self-esteem, body image, and other indicators of health and well-being *independent of any weight change* and without the negative aspects of weight-focused approaches. While weight loss may result, the goal is self-care rather than weight loss, they say. This weight-neutral practice has become known as Health at Every Size.

“The health care community should shift its emphasis from weight-management to health-improvement strategies, for the well-being of people of all sizes,” Bacon said.

Bacon is the author of the 2010 book, "[Health at Every Size: The Surprising Truth About Your Weight](#)," based on previously published research. She is also the founder of [Health at Every Size Community Resources](#), available online.

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