

Obesity Challenges & the Power of Rx Exercise

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This introductory article about the power of Rx Exercise relative to the overweight and obesity health challenges is meant to inspire effective individual action.

"You don't have to be thin to be happy, healthy and fit"

(Theme of Charities Challenge's – Annual Challenge Obesity 5k Events)

But, every one of us must fill our own individual Rx Exercise (exercise prescription) on a near-daily basis to be optimally happy, healthy and fit.

Overweight and statistically obese individuals can enjoy good health and fitness if they are adequately and effectively exercising.

If you are overweight or obese, follow your physician's advice about your exercise prescription (Rx Exercise).

CHALLENGE Obesity

A Charities Challenge Program & Annual Rx Exercise Celebration Event

Being overweight or obese brings along even weightier problems, added risks of a variety of serious challenges to one's health.

But, like many other chronic diseases (like arthritis, cancer, diabetes, heart disease and other health challenges), appropriate and adequate exercise, what some of us call Rx Exercise (Exercise Prescription), can have generally healthful modifying effects for overweight and even obese individuals.

Rx Exercise (an exercise prescription appropriate to the individual) can bring significant improvement to an individual's quality of life, and even measurable "quantity" of life.

The object of this article is to highlight the power of Rx Exercise relative to overweight and obesity health challenges:

- A. Definition of Overweight and Obesity
- B. The Health Risks of Obesity
- C. The Power of Rx Exercise in the lives of Overweight and Obese Individuals
- D. The Role of Exercise in Weight Loss and Weight Maintenance

A. Definition of Overweight and Obesity

Overweight and obesity is measured in a variety of ways.

The *first*, most common, and easiest to measure, method of determining overweight and obesity is **Body Mass Index (BMI)**. It is calculated as:

$$\frac{\text{Body Weight in Pounds} \times 703}{(\text{Height in inches}) \times (\text{Height in inches})}$$

Recommended healthful BMI ranges from 18.5-24.9.

BMI > 25 = Overweight

BMI > 30 = Obese

Many studies have found increases in morbidity (disease risk) and mortality (early death risk) for individuals with a high BMI.

It has been persuasively argued that some athletes, due to their above average muscle mass needed for power in their sports, will appear obese based on their BMI, and therefore should be measured differently to determine their risks of being overweight or obese.

So, a *second* common, and also easy to measure, method for determining overweight and obesity among more muscular athletes is **waist-to-hip measurement ratio**. This method accounts for abdominal adiposity by comparing the relative size of the waist and hips.

Abdominal obesity begins at 40 inches for men and 35 inches for women. A waist-to-hip ratio of >95% for men or >86% for women is considered too high.

B. The Health Risks of Obesity

The following section (B) are excerpts from _THE EXERCISE-HEALTH CONNECTION_ by David Nieman, PhD. The bolded highlights and [bracketed statements] are mine.

About one in three American adults is now classified as obese, while about two-thirds weigh more than they should.

Health Hazards [of Obesity]

There are **many health hazards associated with obesity**. Many health experts now feel that **obesity constitutes one of the more important medical and public health problems** of our era. Researchers have advised that people enjoying the best health are those weighing 15 to 20 percent less than the average American (who tends to be too heavy).

At least eight major health problems are associated with obesity:

1. **A psychological burden:** Because of strong pressures from society to be thin, obese people often suffer feelings of guilt, depression, anxiety, and low self-esteem.
2. **Increased osteoarthritis:** Overweight persons are at high risk of osteoarthritis in the knees and hips.
3. **Increased high blood pressure:** High blood pressure is much more common among the overweight, and the risk climbs strongly with increase in body weight.
4. **Increased levels of cholesterol and other blood fats:** Overweight individuals are more likely than normal-weight persons to have high blood cholesterol and triglycerides, as well as lower high-density lipoprotein cholesterol [aka good cholesterol].
5. **Increased diabetes:** The prevalence of diabetes is about three times higher among people who are obese.
6. **Increased heart disease:** Not only do people who are obese have more of the risk factors for heart disease, they also die from it at a much higher rate.
7. **Increased cancer:** Men and women who are obese have higher cancer death rates for most of the major cancers than do the people who are not obese.
8. **Increased early death:** Many researchers have shown that death rates from all causes are higher among people who are obese, while men and women have the lowest death rates....obese people die earlier than those who are lean.

C. The Power of Rx Exercise in the lives of Overweight and Obese Individuals

Highly significant studies of the power of Rx Exercise since the 1990's through to today have demonstrated that **overweight exercisers can improve their qualities of life and quantifiable aspects to health/fitness even while still overweight.**

Continuing studies, especially those lead by Steven N. Blair, PhD, of the Cooper Institute of Dallas, TX, and former President of the American College of Sports Medicine, **compare favorably the morbidity and mortality risks of overweight and obese (O-O) individuals who exercised against those same risks in the lives of "thin" individuals who didn't exercise.**

The thin non-exercisers had higher morbidity/mortality risks than did the O-O exercisers!

Simply, Rx Exercise was more predictive of health and longevity than was statistical overweight and obesity measures.

Below are conclusions about the power of RxEx for O-O individuals from just one of the many ongoing studies.

“ CONCLUSIONS--High levels of CRF [cardiorespiratory fitness] are associated with a *substantial reduction in health risk* for a given level of visceral and subcutaneous fat.” From a 2005 Steven Blair study entitled, **“Cardiorespiratory fitness attenuates metabolic risk independent of abdominal subcutaneous and visceral fat in men.(Metabolic Syndrome/Insulin Resistance Syndrome/Pre-Diabetes)”**.

So, until many of us lose more weight, improving our fitness with Rx Exercise can have “substantial” healthful, happy effects on our health risks, especially those risks highly associated with being overweight or statistically obese.

D. The Role of Exercise in Weight Loss and Weight Maintenance

While many people have lost significant weight without exercise, **long-term weight management has very rarely been successful for individuals who don't make regular exercise a part of their lives.**

And, merely achieving a lower “goal” weight without the health benefits and pleasures of Rx Exercise leaves most “losers” unsatisfied, and less than optimally healthy.

As we learned from the study mentioned above (in C), these newly thinner people may be less healthy, and happy, than those who chose to emphasize Rx Exercise regardless of the amount of weight they didn't lose.

Imagine: All the sacrifice to lose weight and discovering that one is still less happy, or healthy and fit, than others who exercise regularly even in the absence of as great a weight loss.

Furthermore, most people who achieve their goal weight with exercise and dietary adjustments, and kept their weight under control of five years or more, learned to enjoy their exercise for its own sake. They didn't “have to exercise”. They wanted to walk, race walk, run, bike, dance, and be generally active. They learned to love their sports.

Successful, happy and healthy/fit, weight managers discover the pleasure they enjoy in their physical activities, for the sake of the activity itself, and not just as a necessary requirement of weight management.

Long-term exercisers have learned to love their exercise, sports and activities. (See *_The Intrinsic Exerciser...discovering the Joy of exercise_* by Jay Kimiecik)

Conclusion: Lack of exercise (aka physical inactivity) is a more important determinant and predictor of health risks, morbidity and mortality, than is being overweight or obese.

Therefore, let us each emphasize Rx Exercise, ahead of weight loss, in our own lives and in our participation in public health campaigns.

Again, always consult your physician when adding or increasing exercise to your lives, and especially consult your physician when you decide to eliminate Rx Exercise from your life.

“There’s no cure for all the ills associated with prolonged physical inactivity...except Rx Exercise”.

“Until there’s a cure, there’s still a lot of living well to do.”

“You don’t have to be thin to be happy, healthy and fit”.

“Live Well-Move Happy”

Coach Gary Westlund

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CC Mission: To improve health and fitness, reduce health risks, and enhance disease management through goal-oriented training programs.

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