Maintain Young Adult Weight to Limit CV Risks

Family Practice News

February 15, 2005

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Section: Pg. 10; Vol. 35; No. 4; ISSN: 0300-7073

Length: 632 words

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Body

NEW ORLEANS - Young adults who maintain a stable body weight into middle age-or who at least manage to gain less than the American average of about 1 pound per year-may largely prevent the progression of other cardiovascular risk factors and development of the metabolic syndrome, Donald M. Lloyd-Jones, M.D., said at the annual scientific sessions of the American Heart Association.

This new observation from the National Heart, Lung, and Blood Institute-sponsored ***Coronary Artery Risk Development in Young Adults*** (***CARDIA) study*** carries a hopeful message that has important implications. It suggests that greater public health emphasis should be placed on achieving weight stabilization in young and middle-aged adults. That's a more realistic goal for most people than long-term maintenance of weight loss, according to Dr. Lloyd-Jones of Northwestern University, Chicago.

CARDIA is an ongoing multicenter epidemiologic study of African American and white men and women who were 18–30 years old at enrollment in 1985–1986. Dr. Lloyd-Jones' analysis was restricted to the 2,476 participants who underwent all six examinations conducted during the first 15 years of follow-up.

Subjects whose body mass index (BMI) increased by more than 2 kg/m^2 from baseline through year 15-that's about a 15-lb weight gain in most people-displayed a steady deterioration in all the cardiovascular risk factors measured in the examinations, namely triglycerides, HDL cholesterol, fasting blood glucose and insulin, and blood pressure. In contrast, participants whose BMI remained steady or rose by no more than 2 kg/m^2, or who actually lost weight and kept it off, had essentially no change in their risk factors.

For example, serum triglycerides in men who maintained a stable BMI rose by an average of just 1.01 mg/dL annually, compared with 4.31 mg/dL annually in men whose BMI increased by more than 2 kg/m^2.

"If you take that out for 15 years, it means that men who were initially lean but gained weight over the next 15 years increased their triglycerides by 65 points, compared with the other men whose triglycerides increased by only 15 points. That's a huge difference at a time when we know atherosclerosis is starting to develop," he said.

Similarly, systolic blood pressure in women whose weight remained stable increased by an average of just 0.13 mm Hg annually, compared with 0.64 mm Hg per year in women whose BMI increased significantly.

Among participants who gained weight, the rate of deterioration in cardiovascular risk factors was largely independent of their baseline BMI. In other words, CARDIA participants who were lean as young adults-say, with a baseline BMI of 22.5 kg/m^2-but who ended up 15 years later with a BMI of 25 kg/m^2 experienced roughly the same rate of increase in fasting blood glucose, triglycerides, and the other risk factors as subjects who started with a BMI of 30 kg/m^2 and ended up at 34 kg/m^2.

The incidence of metabolic syndrome during the follow-up period was 17% among subjects with significant weight gain, compared with just 2.2% in those whose BMI remained stable.

One of the most intriguing ancillary findings of CARDIA was that even though conventional wisdom says that blood pressure increases with age, this didn't hold true in study participants who maintained stable body weight.

The bad news is most people find it difficult to avoid significant weight gain as they move from young adulthood toward middle age. Indeed, fully 82% of CARDIA participants increased their BMI by more than 2 kg/m^2 over the course of 15 years.

"That's tragic in some ways. What I think most Americans need to focus on is cutting portion size. If we could just throw a third of the plate away, that would be a good start," he said.

Classification

Language: ENGLISH

Publication-Type: Newspaper

Journal Code: FPNEWS

Subject: CHOLESTEROL (94%); ADULTS (91%); CARDIOVASCULAR DISEASE (90%); PUBLIC HEALTH (78%); MIDDLE AGED PERSONS (78%); HEART DISEASE (77%); AFRICAN AMERICANS (74%); CAUCASIAN AMERICANS (73%); EPIDEMIOLOGY (70%); News (%)

Industry: EPIDEMIOLOGY (70%)

Load-Date: July 31, 2009

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