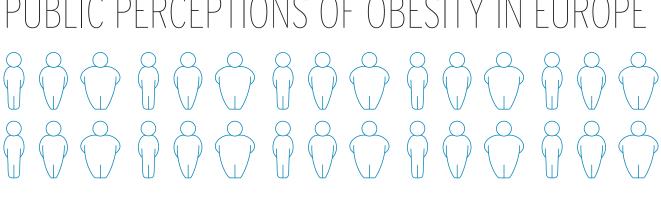
$\langle \rangle$ \bigcirc $\left| \right\rangle$ $\overline{\gamma}$ $\left(\right)$ $\left\langle \cdot \right\rangle$ $\bigcup_{i=1}^{n}$ $\left(\right)$ $\bigcup_{i=1}^{n}$ \bigcirc \bigcirc $\left(\begin{array}{c} \\ \\ \end{array} \right)$ $\left(\right)$ $\left(\right)$ OBESITY AN UNDERESTIMATED THREAT BLIC PERCEPTIONS OF OBESITY IN FUROPE









CONTENTS

Foreword from the European Association for the Study of Obesity (EASO) 3
ntroduction
Summary of survey findings
Country findings
Belgium
Denmark
Finland
France
Germany
Italy
UK
Aethodology
References

Conducted by independent strategic insight agency Opinium, in collaboration with the European Association for the Study of Obesity (EASO) and with the support of Medtronic.

May 2015.

OBESITY: AN UNDERESTIMATED THREAT FOREWORD FROM THE EUROPEAN ASSOCIATION FOR THE STUDY OF OBESITY (EASO)

Obesity is one of the fastest growing threats There are still a surprising number of people to the health and wellbeing of our society. In some European countries as many as six out to many other diseases, including diabetes, of ten adults are now classified as overweight or obese and by 2030 it is predicted that this problems. With a rising number of people could rise to as high as nine out of ten.

And yet, many people still do not understand is snowballing, putting an ever increasing the threat. They underestimate their own weight, misjudge the weight of others around them, and appear to have little knowledge of Europe's healthy workforce. the consequences.

It is clear that the vast majority of people authorities, the findings of this survey should also regard obesity as a problem purely of personal lifestyle, rather than recognising that there are other underlying issues which a selection of European countries. But it also society needs to address.

who do not realise that obesity is a gateway cardiovascular disorders, cancer, and joint becoming overweight or obese, so the prevalence of these secondary conditions burden on society through higher health and social care costs, as well as by reducing

For governments, policymakers and health be of great concern. It gives some fascinating insights into the perceptions of people across confirms that much greater effort needs to be made to educate and inform people about the implications.

This latest survey follows a similar multiobese people about the support and, if country review and survey of policymakers appropriate, treatments that can help them conducted by EASO in 2014^I. avoid conditions like heart disease.

The previous survey looked at whether Major policy change is therefore needed, and policymakers appreciated the extent of the the first step must be improving awareness of epidemic, the drivers of obesity, and the the challenge of obesity. tools and actions that need to be taken to make a difference. It likewise concluded that there is still clearly more to be done to raise awareness, particularly of the impact that obesity prevention and management programmes could have nationally.

EASO believes that overweight and obese individuals should have access to appropriate care to help them manage their weight and prevent later complications. There is an urgent need for better education to improve understanding and inform overweight or

EUROPEAN PERCEPTIONS OF OBESITY INTRODUCTION

Survey across seven European countries reveals low public awareness of the adverse effects of obesity

becoming a growing problem in Europe, the of all respondents did not realise that obesity general public is still largely unaware of its significance, or of the fact that many of them blood pressure. Less than half recognised a are already at risk.

This survey, conducted among 14,000 people even when prompted for the answers. in seven EU countries, has revealed a large number of people who are oblivious to some The survey, which was conducted in Belgium, of the important health implications, the causes and treatment of obesity, and even of how levels of weight relate to themselves. Many also appear to be underestimating the and was conducted by the independent need to take action.

Four out of five respondents who are obese described themselves as simply 'overweight' and a third of all those who were 'overweight' thought that their weight was 'normal'.

Despite it being well known that obesity is From a health perspective, nearly a guarter can cause heart disease, diabetes and high connection with strokes and only 16% knew of the connection with certain types of cancer,

> Denmark, Finland, France, Germany, Italy, and the UK, is one of the most extensive obesity perception studies to have been undertaken strategic insight agency Opinium, in collaboration with the European Association for the Study of Obesity (EASO) and with the support of Medtronic.

Obesity - the background

Obesity is defined by the World Health Being obese frequently leads to other Organization as health conditions, placing a heavy burden on individuals, families and societies, both in terms of reduced quality of life and increased "ABNORMAL OR EXCESSIVE FAT costs for the health and care systems.^{IV}

ACCUMULATION THAT MAY **IMPAIR HEALTH."**

The most straightforward measure of the risk - and the most commonly used - is body mass index, or BMI. This is an indicator of weight relative to height. A healthy BMI range is 18.5 - 25 kg/m2, an overweight person has a BMI of 25 - 30 kg/m2, and someone with a BMI over 30 kg/m2 is considered obese.

Being over a healthy weight is a major risk factor for many chronic conditions including diabetes, heart disease, and several types of cancer. Studies show that as someone's BMI increases, they can shorten their life expectancy by up to twenty years.^Ⅲ

90% of people with diabetes who have obesity surgery no longer need medication after two years. Source: Ikramuddin, S. Roux-en-Y Gastric Bypass vs Intensive Medical Management for the control of type 2 diabetes, hypertension and hyperlipidemia: The Diabetes Survey study Randomized clinical trial. JAMA 2013.

The problems and challenges linked to obesity are not being resolved - obesity is increasing across Europe. A recent study looking at obesity trends found that by 2030, the percentage of people in Europe who will be overweight or obese will range from 44% of the population in Belgium to as high as 90% of the population in Ireland.[∨]

By preventing or treating obesity, the risk of developing many life-threatening conditions can be reduced, and some like type II diabetes can be effectively cured.1

EUROPEAN PERCEPTIONS OF OBESITY

SUMMARY OF OVERALL SURVEY FINDINGS

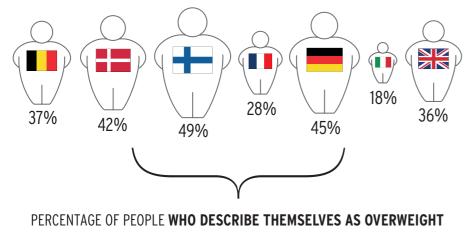
More than 14,000 survey respondents were asked a total of 28 guestions about their perceptions of obesity. The responses indicate that despite growing concerns about obesity, there is still a widespread lack of awareness and lack of understanding among the general public.

A HIGH PROPORTION OF PEOPLE UNDERESTIMATE THEIR OWN WEIGHT

\$~

weight are technically overweight, and a classified as obese.

Many people misjudge their own weight, third of people who describe themselves as believing they are in a lower weight category **overweight are in fact obese.**² In Denmark than they are. One in five people who would and Finland, nearly half of people who **describe themselves as a normal or healthy** thought they were overweight are in reality



WHO ARE ACTUALLY OBESE

PERCENTAGE OF OBESE **RESPONDENTS WHO DESCRIBE** THEMSELVES AS OVERWEIGHT. A NORMAL OR HEALTHY WEIGHT **OR EVEN AS UNDERWEIGHT**



Misjudgement is even greater among those who are technically obese described themselves as

.....



ALTHOUGH THEY UNDERESTIMATE THEIR WEIGHT, FEW PEOPLE ARE HAPPY WITH IT.

Regular exercise and diet control were thought control but only 17% of respondents monitor th

20 55% REGULAR EXERCISE

30% GETTING	ENO
A 2204 DE	

6% SMOKING 3% USING DIET PILLS/SUPPLEMENTS O OTHER 🛇 NONE



The lack of awareness of what constitutes In the countries included in the survey, the a 'healthy' weight is not limited to self-percentage of the adult male population perception - the majority of respondents also who are either overweight or obese is known underestimated how many people in their to be between 53% (France^{VI}) and 67% country are overweight. (Germany^{VII}). However, the estimates provided by respondents were lower by as much as 17%.

³ Respondents were asked whether they would describe themselves as underweight, a normal or healthy weight, overweight or obese. The reported weight category was compared with their BMI, calculated using the information they provided about their height and weight.

700/
78%
7/0/
76%
81%
72%
79%
72%
75%
1370

are obese. Three out of four respondents who simply 'overweight'.
Less than half (45%) of respondents were happy with their current weight. But, despite this, almost one in five (17%) take no action of any kind to control it.
as being the most effective means of weight e calories they consume.
UGH SLEEP 25% MONITORING WATER INTAKE

23% MONITORING ALCOHOL INTAKE (f) 22% REGULAR DIETING (f) 17% COUNTING CALORIE INTAKE

BELG	IUM Perceive Actual ^v "		19 21,2
DENM	ARK Perceive	ed 30	18
	Actual ^{IX}	40	14,3
Finl	ND Perceive	ed 33	17
	Actual ^x	38,6	21
FRAN	CE Perceive	ed 26	16
	Actual ^{vi}	38,8	14,3
GERM	ANY Perceive	ed 33	17
	Actual ^v	43,8	23,3
ITALY	Perceive	ed 34	18
	Actual ^{XI}	45,3	11,3
NK UK	Perceive	ed 32	22
	Actual ^x	41,2	24,4

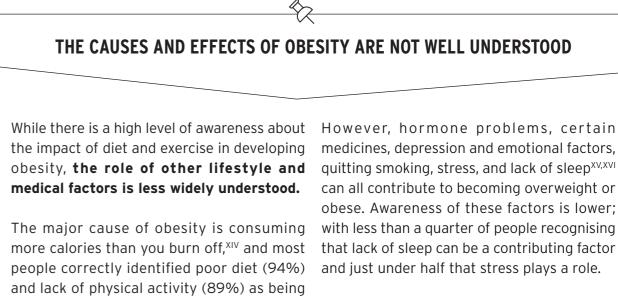
PERCEIVED VS ACTUAL LEVELS OF OVERWEIGHT AND OBESITY

When it comes to differentiating between the number of those who are obese but those that are overweight and those who underestimated the numbers who are are obese, there was an even greater lack overweight. This suggests that being of distinction. Many people overestimated overweight is perceptually becoming a norm.

OBESITY AS A DISEASE IS NOT WIDELY RECOGNISED

of obesity as a disease with genetic and surveyed (46%) recognised it as such. Only psychological elements, this is not reflected a third of respondents identified obesity as in public opinion. In June 2014, the American a psychological or genetic disorder, whereas Medical Association classified obesity as four out of five people (79%) described it as a "disease requiring a range of medical something caused by lifestyle choices. interventions to advance obesity treatment

Although there is growing medical recognition and prevention".^{XIII} But less than half of people



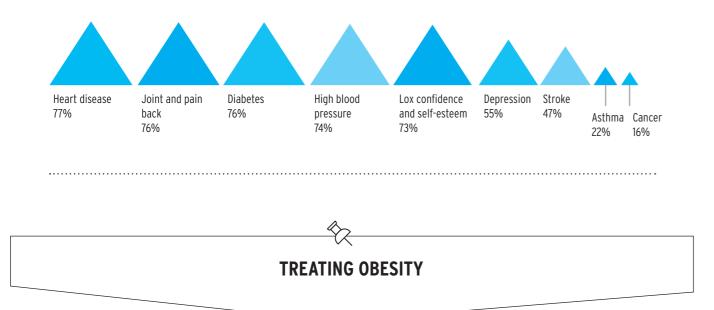
major causes of obesity.

OBESITY IS NOT RECOGNISED AS BEING AS DANGEROUS AS SMOKING

Despite believing that obesity can range of medical conditions, including heart disease^{xvIII}, high blood pressure (a major significantly shorten your life, **relatively** few people recognised that obesity can be risk factor for stroke)^{XIX}, diabetes^{XX}, sleep as dangerous as smoking. More than half approved (when someone stops breathing for a (56%) thought that smoking was the more period when asleep)^{XXI}, asthma^{XXII} and several dangerous of the two even though studies cancer types (including breast, colorectal, show that severe obesity can reduce your life endometrial, kidney, oesophageal and pancreatic)^{XXIII}. expectancy by five to twenty years, compared to ten years for smoking.XVII

The effects that were relatively well known The respondents most likely to recognise were heart disease (77%), diabetes (76%), obesity as a greater threat to health than and high blood pressure (74%). But there smoking are people aged over 55 (59%). Men was little awareness of others, particularly are more likely to recognise this (58%) than stroke (47%) and cancer (16%). Obesity's women (53%). toll on mental health is also not widely recognised. Only just over half of people Several studies have shown that obesity questioned (55%) thought obesity would increases your risk of developing a wide result in an increased risk of depression.

medicines, depression and emotional factors, quitting smoking, stress, and lack of sleep^{XV,XVI} can all contribute to becoming overweight or obese. Awareness of these factors is lower; and just under half that stress plays a role.



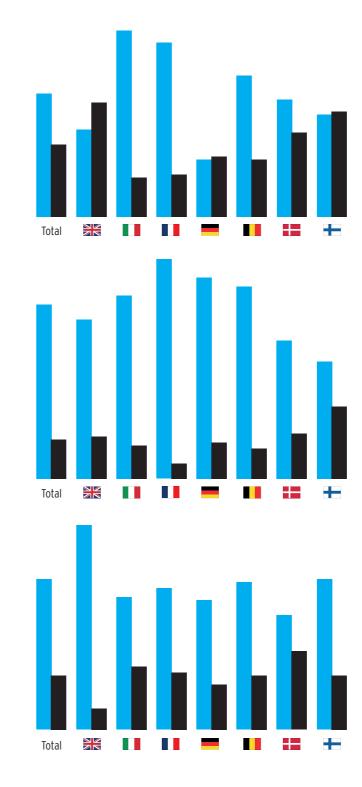
Most people thought that diet and exercise they were aware of it as a treatment although and diet by 85%.

However, studies have shown that weight would be cured as a result. loss through lifestyle change is often not like cancer, and that people struggle to keep weight off as low-calorie diets can trigger starvation.XXIV

that surgery is an effective treatment for national health services. obesity. Overall, 85% of respondents said

are the best cures for obesity. Exercise was only just over a third (36%) said they would cited as appropriate by 88% of respondents consider having surgery if they were obese. However, this increased to 58% of people if they had diabetes and realised that they

enough to prevent associated health risks Research has shown that nine out of ten people with diabetes who have obesity surgery no longer need often-costly biological mechanisms designed to prevent medication two years later.^{XXV} However, **few** respondents recognised the value of this to health systems. Only 41% of them thought In most countries there was a high recognition the cost of surgery should be borne by



WHICH OF THESE SHOULD BE REQUIRED TO PAY FOR OBESITY SURGERY?







VARIANCES BY COUNTRY

\$

insights into people's perceptions. It also which the survey was conducted was that just shows there are some significant differences in perceptions in different countries.

This includes the question of whether obesity respondents believed this should be the case, is something that should be treated by a in Finland 49% thought obesity should be specialist or by a general practitioner (GP). treated by a GP.

This survey provides some fascinating The average across the seven countries in under two thirds (64%) thought it should be treated by a specialist rather than a GP. But whereas more than nine out of ten Italian



The proportion of people **CONSIDERING THEMSELVES EITHER OVERWEIGHT OR OBESE** is higher in Italy (45%), the UK (44%) and Finland (43%), and lower in Germany (36%) and France (38%).



HAPPINESS with personal weight is highest in Germany (55%) and lowest in Denmark (40%), the UK (41%), Finland (41%) and Italy (41%). It is also higher among men (48%) than women (41%).

People in Finland (86%), Denmark (80%) and Italy (75%) are most likely to KNOW SOMEONE WHO IS OBESE. They are least likely in France (55%).

.....



More people in Finland (93%), the UK (92%) ar IS CAUSED BY LIFESTYLE CHOICES.

.....



More people in France **DISORDER.** In the UK t



Only in the UK was obes THREAT TO HEALTH compared to 39% in Fra

More people in France recognise STRESS AS A UK (38%).

.....



More people in France (81%) and Belgium (79% **APPROPRIATE TREATMENT** for obesity that second highest awareness of bariatric surgery





Those in the UK are the be made TO PAY FOR with just 38% of those

nd Denmark (84%) say that obesity
e (43%) consider obesity to be a GENETIC this is believed by only 25%.
sity recognised by most people as a GREATER THAN SMOKING. This was recognised by 51% ance.
CONTRIBUTING FACTOR (55%) than in the
%) think that SURGERY IS SOMETIMES AN an in the UK (63%). However, the UK has the (87%) as a treatment after Finland (97%).
most likely to suggest that individuals should SURGERY THEMSELVES (68%) compared in Denmark.

COUNTRY FINDINGS



More than 2,000 adults, representative of national gender and age across Belgium, took part in the survey.

AS ELSEWHERE IN EUROPE. PEOPLE IN BELGIUM TEND TO UNDERESTIMATE THEIR WEIGHT AS WELL AS THE WEIGHT OF OTHERS IN THE COUNTRY.

aht their weight was normal and healthy. **BUT** one in five of these were overweight³ and just over a third of those who thought they were overweight were obese.

OLDER PEOPLE WERE MORE IN DENIAL OF THEIR WEIGHT THAN YOUNGER ONES. Only 4% of people over 55

described themselves as obese, but according to their Body Mass Index (BMI), nearly a guarter of them classified as such.

RESPONDENTS ALSO UNDERESTIMATED THE **OVERALL WEIGHT CATEGORIES** FOR THE BELGIAN POPULATION.

Whilst it is known that more than 60% of Belgian men are overweight or obese, the average estimated was only 50%.

Ŷ

OBESITY IS CONSIDERED TO BE A RESULT OF LIFESTYLE CHOICES.

said that obesity is caused by lifestyle choices.

74% believe that a poor diet is the main factor.



would describe obesity as a disease.

Even fewer recognise that obesity can be a genetic (37%) or psychological (28%) disorder.

recognise that stress is a cause of obesity, but only 21% mentioned lack of sleep to be a contributing factor.

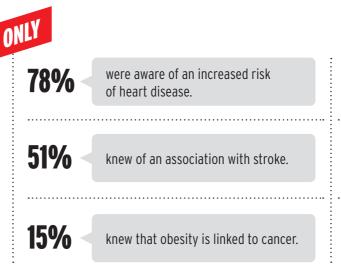
Women are more likely than men to identify stress (51% vs 35%) and lack of sleep (25% vs 16%).

YOUNGER RESPONDENTS TENDED TO SEE **OBESITY AS MORE THAN SIMPLY A RESULT OF LIFESTYLE CHOICES.**

More than half (54%) of people aged 18-34 described obesity as a disease, compared to 39% of people aged over 55. The younger group were also more likely to describe obesity as a genetic or psychological condition.

MANY BELGIAN PEOPLE ARE UNAWARE OF SOME OF THE SERIOUS HEALTH RISKS LINKED TO OBESITY, BUT WOMEN ARE MORE INFORMED THAN MEN.

BELGIAN RESPONDENTS WERE NOT ALWAYS MINDFUL OF SOME OF THE SPECIFIC HEALTH RISKS CAUSED **BY OBESITY:**





BELGIAN WOMEN ARE MORE AWARE OF SOME OF THE HEALTH RISKS

associated with obesity than men, in particular those associated to mental health and wellbeing:

JOINT AND BACK PAIN - 81% compared to 73% LOW CONFIDENCE AND SELF-ESTEEM - 78% compared to 61% **SLEEP APNOEA** - 57% compared to 41% **DEPRESSION** - 55% compared to 43%

³ Based on a BMI calculated from their self-reported height and weight.

YOUNGER PEOPLE HAD A BETTER UNDERSTANDING

- of the role of stress (53% vs 35%)
- and lack of sleep (30% vs 13%).

75%	knew of the link with diabetes.
75%	knew of the link with depression.

BELGIANS HAVE A HIGHER THAN AVERAGE RECOGNITION THAT MEDICAL INTERVENTION, SUCH AS SURGERY, IS SOMETIMES APPROPRIATE.

 \diamond

(79%) recognise that surgery can sometimes be appropriate compared to 71% across all seven countries.

65% believe that medication can sometimes be suitable.

think that diet control (85%) and exercise (86%) are usually suitable treatments.

650 **OF RESPONDENTS THINK OBESITY SHOULD BE TREATED BY A SPECIALIST RATHER THAN A GENERAL PRACTITIONER.**

More women than men think specialist treatment is needed (70% vs 60%).

Younger people (adults under 35) are also more likely than people over 55 to think specialist treatment is appropriate (68% vs 59%).

OF RESPONDENTS WOULD CONSIDER HAVING SURGERY IF THEY WERE OBESE.

However, 59% would consider surgery if they developed diabetes and realised that surgical intervention could cure it.

Respondents in the Luxembourg region of Belgium were the least likely to consider surgery for obesity (25%) but the most likely to consider surgery if they had diabetes (68%).

RESPONDENTS ARE DIVIDED ON HOW TREATMENT FOR OBESITY SUCH AS SURGERY SHOULD BE FUNDED.

.....

Ŷ

HINK THAT AN INDIVIDUAL'S HEALTH INSURER SHOULD FINANCE SURGERY.

People who would describe themselves as obese are more likely to think that health insurers should fund such surgery (82%) than people who think they are a healthy weight (60%).



|S()| |S| | S| | T | 7 $\forall | \forall (, K)$ $() + ()() \times R()$

- BELGIUM SURVEY RESPONDENT.





More than 2,000 adults, representative of national gender and age and from across the country in Denmark, took part in this survey.

OF THE SEVEN COUNTRIES INCLUDED IN THE SURVEY, PEOPLE IN DENMARK ARE THE MOST LIKELY TO UNDERESTIMATE THEIR OWN WEIGHT. THEY ARE ALSO THE MOST LIKELY TO THINK EXERCISE IS THE BEST TREATMENT FOR OBESITY. BUT THE LEAST LIKELY TO DO EXERCISE THEMSELVES.

considered their current weight to be normal and healthy. But almost a guarter of these (23%) were overweight.⁴



FEW PEOPLE IN DENMARK ARE HAPPY WITH THEIR WEIGHT.

- just two in five respondents - and this is particularly true of people who are overweight (7%) and obese (3%).

THE PEOPLE QUESTIONED UNDERESTIMATED THE NUMBER OF OVERWEIGHT AND OBESE PEOPLE IN DENMARK AS A WHOLE.

Despite a high number of respondents (80%) saying they personally know someone who is obese, they estimated that just 48% of men are overweight or obese, compared to statistics showing that the national figure is over 54%.

of respondents think that obesity is caused by lifestyle choices, higher than the survey average of 79%.

60% think that the main factor is a poor diet.

respondents realise stress can contribute to obesity, and less than a third (32%) understood that lack of sleep is also a factor.

Older respondents (over 55) were significantly less likely than younger ones (18-34) to identify stress (58% vs 26%) or lack of sleep (38% vs 21%).

PEOPLE IN DENMARK UNDERESTIMATE THE DANGERS AND HEALTH RISKS OF OBESITY.



despite the fact that studies show both can decrease life expectancy by up to ten years.XXVI

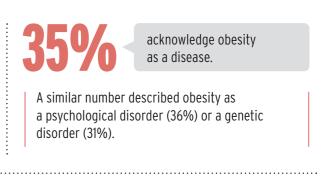
Awareness of the health risks associated with obesity seems to be patchy - while three guarters are aware of a link between obesity and diabetes or high blood pressure, fewer people know that being obese can increase your risk of:

HEART DISEASE - 67% // DEPRESSION - 55% // STROKE - 45% // CANCER - 14% // ASTHMA - 13%

BEING OBESE SIGNIFICANTLY INCREASES YOUR RISK OF ALL OF THESE, AS WELL AS 40% OF CERTAIN CANCERS.XXVII

⁴Based on a Body Mass Index (BMI) calculated from their self-reported weight and height.

OBESITY IS BROADLY SEEN AS CAUSED BY LIFESTYLE CHOICES.



LESS THAN HALF (46%) RECOGNISED THAT OBESITY CAN BE AS DANGEROUS AS SMOKING,

HOW MANY PEOPLE CORRECTLY IDENTIFIED THE HEALTH RISKS ASSOCIATED WITH OBESITY?



✓ 79% - Low confidence/self-esteem
✓ 75% - Diabetes
✓ 71% - High blood pressure
✓ 68% - Joint and back pain

✓ 67% - Heart disease
 ✓ 57% - Tiredness
 ✓ 55% - Depression
 ✓ 45% - Stroke

✓ 41% - Sleep apnoea ✓ 14% - Cancer ✓ 13% - Asthma

Ŕ

PEOPLE BELIEVE OVERWEIGHT AND OBESE PEOPLE SHOULD HAVE ACCESS TO SPECIALIST MEDICAL ADVICE AND CARE.



think obesity needs specialist medical care, rather than treatment from a general practitioner.

72% of women think obesity needs specialist treatment, compared to 65% of men.



think that exercise is almost always an appropriate treatment.

while only half (50%) think diet control is usually suitable - much lower than in the survey as a whole (85%).

JUST ONE THIRD OF RESPONDENTS WOULD CONSIDER HAVING SURGERY IF THEY WERE OBESE - BUT MORE WOULD CONSIDER IT IF THEY HAD DIABETES WHICH SURGERY WOULD CURE.

 $\langle \rangle_{\mathcal{L}}$

34%

would consider having surgery if they were obese, slightly lower than the survey average of 36%.

Younger people are more likely to consider surgery (37% vs 33%).

This rises to 46% when people are asked whether they would have surgery if they developed diabetes and knew surgical intervention would cure it.



thought that surgery for obesity should be funded by their national health service.

This varied between different regions of Denmark, from 45% in Sjælland to 33% in Nordjylland.

46% thought it should be funded by health insurers.

38% thought individual people should have to pay for their own surgery.

 $\langle A | | + \langle A |$

- DANISH SURVEY RESPONDENT.

$\Delta N + + + () + ()$



More than 2.000 adults from different parts of Finland, representative of age and gender, were asked about their perceptions of weight and obesity.

OBESITY APPEARS TO BE MORE VISIBLE IN FINLAND THAN IN OTHER COUNTRIES IN THIS SURVEY. MORE PEOPLE SAY THEY PERSONALLY KNOW SOMEONE THEY WOULD DESCRIBE AS OBESE, DESPITE THE FACT THAT LEVELS OF OBESITY ARE LOWER IN FINLAND THAN IN SOME OF THE OTHER COUNTRIES IN THIS SURVEY. HOWEVER, FINNISH PEOPLE CONSISTENTLY UNDERESTIMATE THEIR OWN WEIGHT AND THE HEALTH RISKS ASSOCIATED WITH IT.





However, a guarter (26%) are in fact overweight⁶ Nearly half (49%) of people who think of themselves as 'overweight' are actually obese.

WHEN ASKED TO ESTIMATE THE PERCENTAGE OF THE FINNISH POPULATION WHO ARE OVERWEIGHT OR OBESE, PEOPLE ALSO UNDERESTIMATED THE TRUE FIGURE.

ON AVERAGE. SURVEY RESPONDENTS THOUGHT THAT 50% OF MEN ARE OVER A HEALTHY WEIGHT WHEREAS NATIONAL STATISTICS PUT THIS AT 60%.

MORE PEOPLE IN FINLAND SAY THEY PERSONALLY KNOW SOMEONE WHO IS OBESE THAN IN ANY OTHER **COUNTRY - 86% COMPARED TO 70% OVERALL - DESPITE THE FACT THAT LEVELS OF OBESITY ARE HIGHER** IN BELGIUM, GERMANY AND THE UK.

PEOPLE IN FINLAND ARE MORE LIKELY THAN OTHER COUNTRIES TO ASSOCIATE OBESITY WITH LIFESTYLE CHOICES.

of respondents in Finland would describe obesity as caused by lifestyle choices, compared to 79% across all seven countries.

67% think a poor diet is the main factor.

YOUNGER PEOPLE AND WOMEN WERE MORE AWARE THAN OLDER AGE GROUPS THAT STRESS AND LACK OF SLEEP CAN CONTRIBUTE TO DEVELOPING OBESITY:

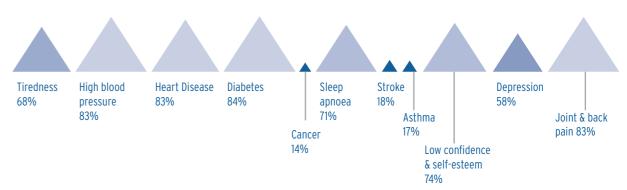
63% of women compared to 45% of men recognised stress as a factor, and 56% of 18-35s compared to 37% of over 55s knew that lack of sleep plays a role.

OLDER PEOPLE IN FINLAND ARE MORE LIKELY TO UNDERESTIMATE THE DANGERS AND HEALTH RISKS OF OBESITY.

OLDER AGE GROUPS (OVER 55) ARE LESS AWARE OF THE HEALTH RISKS ASSOCIATED WITH OBESITY.

RATES OF RECOGNITION OF A HEALTH RISK :

.....



⁶Based on a Body Mass Index (BMI) calculated from their self-reported weight and height.



recognise that obesity is a disease or a genetic disorder.

Women are more likely than men to recognise obesity as a disease (42% vs 34%).



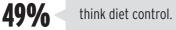
FEW PEOPLE IN FINLAND BELIEVED THAT OBESITY SHOULD BE TREATED BY A SPECIALIST.

(34%) think that surgery for obesity should be funded by the national health service.

thought obesity needs specialist medical care. Nearly half (49%) of people in Finland think obesity can be treated by a general practitioner.

However, people in Finland are divided when asked what the best treatment for obesity is:

Compared to 39% in the overall study.





75%

37%

recognise that surgery can sometimes be an appropriate treatment for obesity.



identified surgery as the most effective treatment for morbid obesity.

Despite the emphasis on diet, fewer people in Finland than in the other countries diet regularly to control their weight: - just 5%, compared to 22% overall.

ATTITUDES TO SURGERY VARY BETWEEN DIFFERENT FINNISH REGIONS.

people would consider having surgery for obesity.

This is lowest in the Aland Islands (20%).

64%

would consider having surgery if they had diabetes which could be cured through surgical intervention.

However, people in the Aland Islands were the most likely to consider surgery under these circumstances - (70%).

| - Y() | | (A |)'YOUR SHOELACES, Y()||KF||()|+A|

- FINNISH SURVEY RESPONDENT.

This is higher among people who describe themselves as obese than among people who think they are a healthy weight (59% vs 26%).

More than half (59%) think that patients should be required to pay for their own surgery, higher than in the overall survey (50%).

WHAT IS ORFSITY?



We questioned over 2,000 adults across France covering a nationally representative sample of age and gender.

RECOGNITION OF OBESITY AS A DISEASE IS HIGHEST IN FRANCE OUT OF THE SEVEN COUNTRIES IN THE SURVEY. HOWEVER, THERE IS A WIDESPREAD UNDERESTIMATION OF THE BURDEN OF OBESITY AND ITS HEALTH IMPLICATIONS. PEOPLE IN FRANCE WERE THE LEAST LIKELY TO RECOGNISE THAT OBESITY CAN BE AS DANGEROUS AS SMOKING.



16% of those who describe themselves as a 'normal' were overweight.7

More than a guarter (28%) of those who considered themselves overweight were obese.

Respondents' estimates of the number of people who are overweight or obese in the whole country reflected the fact that FEWER PEOPLE IN FRANCE ARE OVERWEIGHT THAN IN OTHER COUNTRIES.

BUT THE REAL FIGURE WAS STILL UNDERESTIMATED:

On average, people believed that 42% of adult men are overweight or obese whereas national statistics put the figure at 53%.

MORE PEOPLE IN FRANCE THAN IN OTHER COUNTRIES IDENTIFIED OBESITY AS A DISEASE. BUT DIET IS STILL SEEN AS THE MAIN CONTRIBUTING FACTOR IN DEVELOPPING OBESITY.



recognise that obesity is a disease, compared to 46% in the overall survey.

Recognition that obesity can be a psychological or genetic condition is also higher in France than other countries (40% vs 36% and 43% vs 34% respectively).

MORE PEOPLE ARE AWARE OF THE ROLE OF STRESS IN CAUSING OBESITY THAN IN OTHER COUNTRIES: 55% vs 47% (average across all countries)



Women are more likely to identify stress as a contributing factor (60%) than men (49%).

However, the impact of lack of sleep is less widely understood - 19% in France vs 24% overall.

MORE PEOPLE IN FRANCE THAN IN OTHER COUNTRIES UNDERESTIMATED THE RISK TO HEALTH OF OBESITY.

Only 39% recognised that obesity can be as dangerous to your health as smoking, compared to 44% overall.

The only group of people who considered obesity more dangerous than smoking were those who described themselves as obese (52%).

⁷ Based on a BMI calculated from their self-reported height and weight



believe that obesity is caused by lifestyle choices.

72% think that poor diet is the main factor.

PEOPLE IN FRANCE WERE THE MOST LIKELY TO UNDERESTIMATE THE DANGER OF OBESITY.

MANY PEOPLE IN FRANCE APPEAR UNAWARE THAT BEING OBESE SIGNIFICANTLY INCREASES RISK OF A WIDE RANGE OF CARDIOVASCULAR AND OTHER CONDITIONS, INCLUDING DIABETES, DEPRESSION, STROKE AND CANCER.



were aware that obesity can lead to diabetes, and just 16% knew that obesity can cause cancer.

WHO IS MORE AWARE ABOUT HEALTHS RISKS BETWEEN OLDER AND YOUNGER RESPONDENTS?

+55	49% 46%	HEART DISEASE JOINT AND BACK PAIN TIREDNESS HIGH BLOOD PRESSURE SLEEP APNOEA MENTAL HEALTH, INCLUDING INCREASED RISK OF DEPRESSION		-35
	68%	LOW CONFIDENCE AND SELF-ESTEEM	76%	

RESPONDENTS IN FRANCE ARE DIVIDED ON WHICH TREATMENT IS THE MOST EFFECTIVE FOR MORBID OBESITY.

.....

 $\langle \!\!\!\!\!\!\rangle$

89%

of respondents think that diet control is almost always an appropriate treatment for obesity.

81% think that surgery can sometimes be an appropriate treatment and 66% think medication can sometimes be suitable.

36%

believe diet control is the best treatment for morbid obesity.

while 34% identify surgery as the most effective treatment.



think that obese people should be required to pay for their own surgery.



would consider having surgery if they were obese.

 \diamond

759% OF PEOPLE SURVEYED BELIEVED THAT OBESITY SHOULD BE TREATED BY A SPECIALIST RATHER THAN A GENERAL PRACTITIONER.

This is highest in the IIe-de-France region (80%), and lowest in the South West and East of the country (71%).

Women are also more likely to recognise the importance of specialist treatment than men (81% vs 70%).

32

VIEWS ON OBESITY TREATMENT VARY REGIONALLY.

This is lowest in the Ile-de-France region (32%).
589% OF RESPONDENTS THINK THAT TREATMENT SUCH AS SURGERY SHOULD BE FUNDED BY THE NATIONAL HEALTH SERVICE.
This is lowest in the Ile-de-France region (55%), and highest in the central region of France (66%).
73% think that treatment such as surgery should be funded by an individual's health insurer.
This is highest in the Ile-de-France region (50%), and lowest in the South West (33%).



The survey was conducted among 2,000 adults across Germany who were representative of region, gender and age.

Ŷ OBESITY IN GERMANY IS SEEN AS BEING CAUSED BY LIFESTYLE CHOICES.

PEOPLE IN GERMANY ARE MORE LIKELY TO UNDERESTIMATE THEIR WEIGHT CATEGORY THAN IN SOME OTHER COUNTRIES AND THEY ALSO SIGNIFICANTLY UNDERESTIMATE THE COUNTRY'S OVERWEIGHT AND OBESITY PROBLEM.

hose who consider themselves as being of normal weight were in fact 'overweight'.





PEOPLE WHO ARE OVERWEIGHT OR OBESE ARE NOT HAPPY ABOUT IT.

14% of those who believe themselves to be overweight are happy with their weight and only 5% of those who describe themselves as obese are happy with their weight.

Asked to estimate the number of people in Germany who suffer from being overweight or obese, respondents estimated that:

- 17% of adult men suffer from obesity

ONLY

- 33% from being overweight.

National statistics show that: - 23% are classified as obese - 67% are obese or overweight.

73%

THE MAJORITY OF THOSE QUESTIONED (56%) DID NOT RECOGNISE THAT OBESITY CAN BE AS DANGEROUS AS SMOKING. However, medical statistics show that severely obese people can reduce their life expectancy by up to ten years.XXVIII



consider **HEART DISEASE** as the biggest obesity related threat to health, wellbeing and lifestyle.

of respondents believed that obesity is caused by

lifestyle choices.

agree that obesity is a disease.

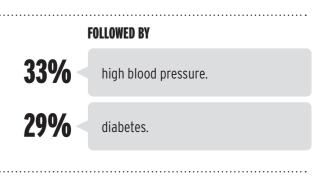
identified stress as being

a cause.

⁸ Based on a Body Mass Index (BMI) calculated from their self-reported weight and height.

66% consider a poor diet as being the main contributing factor.
However, only 34% of respondents see it as 'a psychological disorder' and 32% as a genetic disorder.
Only 19% consider 'a lack of sleep' to be a cause.
In both cases it is considered higher by women than men (45% vs 38% and 23% vs 15%).

THE EFFECTS OF OBESITY ARE UNDERESTIMATED IN GERMANY.





recognised that obesity can cause diabetes.



recognised that being obese increases your risk of stroke.



IN REALITY, BEING OBESE INCREASES YOUR RISK OF HEART DISEASE, HIGH BLOOD PRESSURE, DIABETES, STROKE, DEPRESSION, CANCER AND SEVERAL OTHER SERIOUS HEALTH RISKS.

12%

were aware of a link between cancer

and obesity.

Non-medical conditions were also identified as effects of obesity in Germany:

LOW CONFIDENCE AND SELF-ESTEEM - 72%

LIMITED OPPORTUNITIES FOR WORK/CAREER ADVANCEMENT - 67%

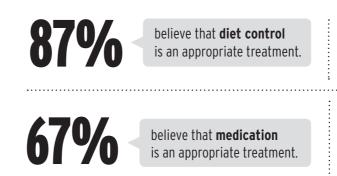
R

TREATMENT FOR OBESITY SHOULD BE CARRIED OUT BY SPECIALISTS.



ALMOST THREE QUARTERS OF PEOPLE IN GERMANY (72%) THINK THAT SPECIALISTS RATHER THAN GENERAL PRACTITIONERS (GPS) SHOULD CARRY OUT THE TREATMENT FOR OBESITY.

 > MORE WOMEN THINK THAT OBESITY NEEDS SPECIALIST TREATMENT - 75% vs 68%.
 > YOUNGER RESPONDENTS (18-34 YEAR OLDS) THINK THAT OBESITY SHOULD BE TREATED BY SPECIALISTS - 75% vs 69% of those aged 55.



JUST OVER A THIRD OF ALL RESPONDENTS WOULD CONSIDER HAVING SURGERY IF THEY WERE OBESE.

 \Diamond

36% of women 31% of men

would consider having bariatric surgery if they were obese.

This figure rises to 40% of those who already consider themselves obese and to 60% among people if they were to develop diabetes and knew that it would cure it.

67%

thought that their health insurer should fund such surgery.

believe that **exercise** is an appropriate treatment.

72%

believe that **surgery** is an appropriate treatment.

slightly higher than the average of the seven countries surveyed (58%).



For this survey, we questioned over 2,000 adults in Italy who were representative of the country's age, gender and regional makeup.

PEOPLE IN ITALY WERE THE LEAST LIKELY TO UNDERESTIMATE THEIR OWN WEIGHT AMONG SURVEY RESPONDENTS. HOWEVER, PARTICULARLY MEN UNDERESTIMATE THE DANGERS OF OBESITY.

500% of those who participated in the survey described themselves as being of normal or healthy weight.



AROUND 10% OF PEOPLE WHO DESCRIBED THEMSELVES AS HEALTHY UNDERESTIMATED THEIR WEIGHT AND WERE ACTUALLY OVERWEIGHT.⁹

However, unlike many other countries where most people had underestimated rather than overestimated their weight, around 18% of respondents who described themselves as overweight would be considered normal for their height.

NEVERTHELESS, A SIMILAR PROPORTION (18%) OF THOSE WHO DESCRIBED THEMSELVES AS OVERWEIGHT WERE OBESE.

PEOPLE IN ITALY ALSO MORE ACCURATELY ESTIMATED THE PROPORTION OF PEOPLE IN THE COUNTRY WHO ARE OVERWEIGHT AND OBESE.

The average estimation was that 52% of adult men are overweight or obese.



PEOPLE IN ITALY ARE MORE LIKELY TO RECOGNISE OBESITY AS A DISEASE THAN IN OTHER COUNTRIES SURVEYED BUT STILL SEE OBESITY AS CAUSED BY LIFESTYLE CHOICES.

629/0 OF RESPONDENTS RECOGNISED OBESITY AS A DISEASE, COMPARED TO 46% IN THE OVERALL STUDY.

Women were more likely than men to describe obesity as a disease (69% vs 53%).

Younger people (aged under 35) were also more likely to recognise obesity as a disease than people over the age of 55 (69% vs 56%).

449% DESCRIBED OBESITY AS A PSYCHOLOGICAL DISORDER, COMPARED TO 36% IN THE OVERALL SURVEY.

⁹ Based on a BMI calculated from their self-reported height and weight.

slightly less than the actual number of 56%.

.....



Men are more likely to associate obesity with lifestyle choices (66% vs 57%).

67% think a poor diet is the main factor.

Women are more likely than men to be aware that stress can contribute to the development of obesity (60% vs 47%).

52% of people under 35 described obesity as a psychological disorder, compared to just 37% of respondents over 55.

Younger people were also more likely to identify obesity as a genetic disorder (41% vs 34%).



said they would consider surgery if they were obese than in other countries surveyed (48% compared to 36%).

SOUTH 45% 65% 39%

OLDER RESPONDENTS IN ITALY ARE MORE LIKELY TO ACTIVELY MANAGE THEIR RISK OF DEVELOPING OBESITY.

 \diamond

OLDER AGE GROUPS INDICATE THAT THEY ARE MORE ACTIVE IN MANAGING THEIR RISK OF DEVELOPING OBESITY.

.....

When asked what action they take to control their weight, people aged over 55 were more likely to indicate that they diet regularly and exercise, as well as monitor their alcohol intake.

'OBESITY IS A DISFASE AND IS SADIY UNI)FRFSTIMAT AS SUCH"

- ITALIAN SURVEY RESPONDENT.

43



We questioned 2,000 adults from across the UK PUBLIC PERCEPTION in a sample representative of age and gender.

IN THE UNITED KINGDOM

PEOPLE IN THE UK SIGNIFICANTLY UNDERESTIMATE THEIR WEIGHT, AND ARE THE LEAST LIKELY AMONG RESPONDENTS FROM SEVEN COUNTRIES ACROSS EUROPE TO IDENTIFY OBESITY AS A DISEASE. YOUNGER RESPONDENTS (AGED UNDER 35) ARE MORE LIKELY THAN THOSE OVER 55 TO BE AWARE OF THE CAUSES OF OBESITY BUT LESS LIKELY TO UNDERSTAND THE HEALTH RISKS.

respondents considered their weight to be normal and healthy.

described themselves

of people who described themselves as being a 'normal' weight were technically overweight.¹⁰

those who consider themselves to be overweight are in fact obese.

PEOPLE ALSO UNDERESTIMATED THE NUMBER OF OVERWEIGHT AND OBESE PEOPLE AS A WHOLE IN THE UK.

SURVEY RESPONDENTS THOUGHT

NATIONAL STATISTICS SHOW THAT

32% of men are overweight **22%** of men are obese





24% of men are obese



recognised obesity as a disease, compared to 46% in the survey overall.

This is particularly low among older respondents, with only 14% of people over 55 identifying obesity as a disease, compared to 22% of people aged 18-34.

Younger respondents were also more likely to describe obesity as a psychological condition (40% vs 32%).



of respondents in the UK identified obesity as a genetic disorder compared to 34% in other countries.

¹⁰ Based on a BMI calculated from their self-reported height and weight.

PEOPLE IN THE UK ARE THE LEAST LIKELY TO IDENTIFY OBESITY AS A DISEASE AND MORE LIKELY THAN IN OTHER COUNTRIES TO DESCRIBE OBESITY AS CAUSED BY LIFESTYLE CHOICES.

people guestioned (92%) said that obesity is caused by lifestyle choices.

compared to 79% in the survey as a whole.

PEOPLE IN THE UK ARE LESS LIKELY THAN IN OTHER COUNTRIES TO IDENTIFY STRESS (38% VS 47%) AND LACK OF SLEEP (18% VS 24%) AS CONTRIBUTING FACTORS TO OBESITY.

However, younger respondents are more likely to be aware that obesity can be caused by stress (43%) and lack of sleep (26%).

65% think that poor diet is the main contributing factor for developing obesity.

PEOPLE IN THE UK ARE MORE AWARE OF THE HEALTH RISKS THAN AVERAGE IN THE SURVEY, BUT ARE STILL GENERALLY UNAWARE OF MANY SERIOUS RISKS.

BEING OBESE INCREASES YOUR RISK OF DEVELOPING MANY SERIOUS CONDITIONS INCLUDING DIABETES, HEART DISEASE, HIGH BLOOD PRESSURE (A MAJOR RISK FACTOR FOR STROKE), **DEPRESSION AND CANCER.**

However, there are low levels of awareness of many of these risks, but people in the UK are more aware than in many other countries.

For example, 83% knew of a link between obesity and diabetes, compared to 76% overall, and 81% recognised the increased risk of heart disease or high blood pressure, compared to 77% and 74% overall.

were aware that obesity increases risk of stroke.



although these awareness levels are higher than in the survey overall (55% and 16% respectively).

DESPITE BEING MORE AWARE OF THE CAUSES OF OBESITY, YOUNGER RESPONDENTS WERE LESS LIKELY TO IDENTIFY THE MANY HEALTH RISKS ASSOCIATED WITH IT.

People over 55 were more likely to identify diabetes, heart disease and high blood pressure as risks associated with obesity.



52% of people under 35 knew of a link between obesity and stroke, compared to 63% of people over 55.

knew that obesity

can cause cancer.

HEALTH RISKS OF OBESITY AGAINST AGE GROUP OF RESPONDENT

DIABETES HEART DISEASE	
HIGH BLOOD PRESSURE	
JOINT AND BACK PAIN	
TIREDNESS	
DEPRESSION STROKE	

PEOPLE ARE DIVIDED AS TO WHETHER OBESITY SHOULD BE TREATED BY SPECIALISTS.

PEOPLE IN THE UK THINK THAT OBESITY SHOULD BE TREATED BY: A SPECIALIST (43%)

believe that medication is appropriate treatment.

THINK DIET IS THE MOST **EFFECTIVE TREATMENT.**

Older respondents were also more aware of the benefits of treatments such as surgery, with 30% believing surgery to be an effective treatment for obesity compared to 20% of 18-34 year olds.

18-34	25-54	+55
76% 75% 74% 73% 75% 62% 63% 52%	84% 83% 82% 79% 70% 69% 66%	86% 85% 84% 79% 73% 66% 63%

GENERAL PRACTITIONER (39%)

18% ARE NOT SURE

believe that surgery is appropriate treatment



WOULD CONSIDER HAVING SURGERY IF THEY WERE OBESE.

This rises to 63% of men and 57% of women when people are asked if they would consider having surgery if they developed diabetes which could be cured by surgical intervention.

MOST PEOPLE IN THE UK THINK PEOPLE SHOULD HAVE TO PAY FOR SURGICAL TREATMENT THEMSELVES.

 \Diamond

PEOPLE WERE MOST LIKELY TO THINK THAT INDIVIDUALS SHOULD PAY FOR THEIR OWN SURGERY (68% COMPARED TO 50% OF PEOPLE IN ALL COUNTRIES IN THE SURVEY).

Respondents in the UK were the most likely to think that the National Health Service should not be required to fund surgery (38% vs 24%).

People over 55 were less likely to think patients should pay for their own treatment than younger respondents (66% vs 73%).

METHODOLOGY

agency Opinium. Just over 2,000 people in each of the selected countries were included. Results have been weighted to nationally representative criteria on age and gender.

	Belgium:	2,003 adults (of which 961 men an between 3 - 11 December 2014
- 5	Denmark:	2,005 adults (of which 982 men an between 3 - 15 December 2014
H	Finland:	2,005 adults (of which 962 men an between 9 - 19 February 2015
	France:	2,005 adults (of which 962 men an between 3 - 9 December 2014
•	Germany:	2,000 adults (of which 980 men a between 3 - 9 December 2014
	Italy:	2,025 adults (of which 972 men ar between 3 - 10 December 2014
	UK:	2,000 adults (of which 971 men ar between 5 - 16 December 2014

This survey on perceptions of obesity was conducted by the independent strategic insight

nd 1,042 women) were surveyed

nd 1,023 women) were surveyed

nd 1,043 women) were surveyed

nd 1,043 women) were surveyed

and 1,020 women) were surveyed

nd 1,053 women) were surveyed

nd 1,029 women) were surveyed

¹ European Association for the Study of Obesity, Obesity Perception and Policy, a Multi-country review and survey of policymakers, (2014): http://easo.org/policymakersurvey

World Health Organization, Fact sheet N°311: Obesity and Overweight (2015): http://www.who.int/mediacentre/ factsheets/fs311/en/

^{III} Prospective Studies Collaboration, 'Body-mass index and cause-specific mortality in 900 000 adults: collaborative analyses of 57 prospective studies', The Lancet (2009) 373(9669): 1083-96: http://www.thelancet.com/journals/ lancet/article/PIIS0140-6736%2809%2960318-4/fulltext, p.1083.

^{IV} European Association for the Study of Obesity, Obesity Perception and Policy, a Multi-country review and survey of policymakers, (2014): http://easo.org/policymakersurvey, p.6

^v L. Webber, D. Divajeva, T. Marsh et al, 'The future burden of obesity-related diseases in the 53 WHO European-Region countries and the impact of effective interventions: a modelling study', BMJ Open (2014) 4(7): http://bmjopen. bmj.com/content/4/7/e004787.full

^{VI} ObEpi-Roche 2012, 'National survey of obesity and overweight': http://www.roche.fr/home/recherche/ domaines_therapeutiques/cardio_metabolisme/enquete_ nationale_obepi_2012.html#sthash.ZpQEHiTl.dpuf

VII G.B.M. Mensink et al., 'Overweight and obesity in Germany:results of the German Health Interview and Examination Survey for adults', Bundesgesundneitsbl (2013) 56: 786-94: http://edoc.rki.de/oa/articles/ re1TvD7NKLhTk/PDF/20DMwbg1YNPdQ.pdf, p. 4.

^{VIII} Belgian 2008 overweight and obesity statistics extracted from WHO Global Health Observatory Data Repository: http://apps.who.int/gho/data/view.main.2430?lang=en (accessed 26 February 2015)

^{IX} Sundhedsstyrelsen, Danskernes Sundhed - Den Nationale Sundhedsprofil (2013):

http://sundhedsstyrelsen.dk/en/news/2014/~/ media/8538E83A23B64880B3960909F85FED4D. ashx?m=.pdf, p. 94.

[×] Finland 2008 overweight and obesity statistics extracted from WHO Global Health Observatory Data Repository: http://apps.who.int/gho/data/view.main.2430?lang=en (accessed 26 February 2015)

^{XI} Consiglio regionale del Veneto, 'L'obesita nel Veneto', p.24.

^{XII} UK 2008 overweight and obesity statistics extracted from WHO Global Health Observatory Data Repository: http://apps.who.int/gho/data/view.main.2430?lang=en (accessed 26 February 2015)

XIII America Medical Association, 'AMA Adopts New Policies on Second Day of Voting at Annual Meeting', (2013): http:// www.ama-assn.org/ama/pub/news/news/2013/2013-06-18new-ama-policies-annual-meeting.page

^{XIV} World Health Organization, Fact sheet N°311: Obesity and Overweight (2015): http://www.who.int/mediacentre/ factsheets/fs311/en/ ^{XV} M. Bose, B. Olivan, B. Laferrere, 'Stress and obesity: the role of the hypothalamic-pituitary-adrenal axis in metabolic disease', Curr Opin Endocrinol Diabetes Obes. 2009 Oct; 16(5): 340-346: http://www.ncbi.nlm.nih.gov/ pmc/articles/PMC2858344/

^{XVI} National Institute of Health. What causes overweight and obesity? http://www.nhlbi.nih.gov/health/health-topics/ topics/obe/causes

^{XVII} Sjöström L: Review of the key results from the Swedish Obese Subjects (SOS) trial - a prospective controlled intervention study of bariatric surgery. J Intern Med 2013; 273: 219-234.

^{XVIII} J. Logue, 'Obesity is associated with fatal coronary heart disease independently of traditional risk factors and deprivation', Heart (2011) 97(7): 564-8: http://heart.bmj. com/content/early/2011/01/24/hrt.2010.211201.short, p. 567.

^{XIX} M. Bombelli et al., 'Impact of body mass index and waist circumference on the long-term risk of diabetes mellitus, hypertension, and cardiac organ damage', Hypertension (2011) 58(6): 1029-35: http://hyper.ahajournals.org/ content/early/2011/10/24/HYPERTENSIONAHA.111.175125. full.pdf+html, p. 1029.

^{XX} G. Hu, 'Physical activity, body mass index, and risk of type 2 diabetes in patients with normal or impaired glucose regulation', Arch Intern Med (2004) 164: 892-6: http:// archinte.ama-assn.org/cgi/reprint/164/8/892, Figure 1, p. 895.

^{XXI} Frühbeck G, Toplak H, Woodward E, Yumuk V, Maislos M, Oppert JM: Obesity: the gateway to ill health - an EASO position statement on a rising public health, clinical and scientific challenge in Europe. Obes Facts 2013; 6: 117-120.

^{XXII} L. Boulet, 'Asthma and obesity', Clin Exp Allergy. 2013 Jan;43(1):8-21: http://www.ncbi.nlm.nih.gov/ pubmed/23278876

XXIII A.G. Renehan et al., 'Body-mass index and incidence of cancer: a systematic review and meta-analysis of prospective observational studies', The Lancet (2008) 371(9612): 569-78: http://www.thelancet.com/journals/ lancet/article/PIIS014067360860269X/abstract, pp. 572-3.

^{XXIV} Ochner et al. Treating obesity seriously: when recommendations for lifestyle change confront biological adaptations. The Lancet Diabetes and Endocrinology 2015; 3 (4) 232-234.

^{XXV} Dixon JB. Adjustable gastric banding and conventional therapy for type 2 diabetes: a randomized controlled trial. JAMA 2008; 299: 316-23.

xxvi Ibid iii

XXVII A.G. Renehan et al., 'Body-mass index and incidence of cancer: a systematic review and meta-analysis of prospective observational studies', The Lancet (2008) 371(9612): 569-78: http://www.thelancet.com/journals/ lancet/article/PIIS014067360860269X/abstract, pp. 572-3.

xxvIII Ibid iii

ABOUT OPINIUM RESEARCH LLP

Opinium Research is an award winning strategic insight agency built on the belief that in a world of uncertainty and complexity, success depends on the ability to stay on the pulse of what people think, feel and do. Established in 2007, Opinium works with organisations across multiple geographies, using a wide variety of research methodologies to uncover commercial and social insights which deliver robust findings to help guide clients towards accurate and strategic business and policy decision making.

ABOUT MEDTRONIC

Medtronic is a leading global medical device company, whose medical technologies help make it possible for millions of people to resume everyday activities, return to work, and live better and longer. Medtronic's mission is to alleviate pain, restore health, and extend lives, and to do this it produces a range of products designed to help chronic disease patients improve their lives. This includes medical technology used in obesity surgery.

ABOUT THE EUROPEAN ASSOCIATION FOR THE STUDY OF OBESITY (EASO)

The European Association for the Study of Obesity (EASO) (www.easo.org) is the leading European scientific and practice-based professional membership association in its field, with networks in over 30 countries. EASO facilitates and engages in actions that prevent and combat the epidemic of obesity. It contributes to high-level European and national scientific consultations, hosts the annual European Congress on Obesity, has dynamic and active topic specific Task Forces and Working Groups, and coordinates obesity education across Europe.

 $\left| \right\rangle$ $\left| \right\rangle$ $\left(\right)$ $\left\{ \right\}$