

Cardiometabolic Health & Obesity in Women

A Stakeholder Summit

Program Proceedings

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American Medical Women's Association

Overview

Elizabeth Garner, MD, MPH

President, American Medical Women's Association

Obesity is a common, serious, and costly disease. It's been named a global epidemic by the World Health Organization. The CDC reports that 1 in 5 children and more than 1 in 3 adults struggle with obesity, and the rates are even higher in certain groups, with non-Hispanic Black women having the highest rates. The economic burden of obesity in our country has been estimated to be somewhere around \$173 billion a year, and obesity related conditions such as heart disease, stroke, Type 2 diabetes, and certain types of cancer are among the leading causes of preventable premature death.

The Cardiometabolic Health & Obesity in Women Stakeholder Summit marked an important milestone in advancing advocacy for obesity treatment and management in women across their lifespan. Key themes included acceptance of obesity as a chronic disease, identifying access barriers, understanding obesity stigma, and outlining action areas for stakeholders.

Throughout the summit, challenges, opportunities to improve patient care, and ways to drive alignment among stakeholders were discussed to help achieve these goals.

Opening Remarks

Representative Robin Kelly (IL-2)

U.S. House of Representatives

Representative Robin Kelly (IL-2) underscored the importance of recognizing obesity as a chronic disease -- and one with no geographic or demographic boundaries. Too often obesity is framed as a character failure, but research has shown us otherwise. Obesity is also a significant risk factor in pregnancy that is linked to gestational diabetes, blood clots, and a higher risk of maternal mortality. Black women are especially likely to be impacted by these factors and overlooked for treatment and prevention. In fact, Black women are three times more likely to die from giving birth than their white counterparts.

By working together, we can provide the care and access to treatment needed to lower the national obesity rate. Stressing the need for holistic care, access to treatment and policy support, Representative Kelly emphasized the role of stakeholders in reframing obesity conversations.

Cardiometabolic Health & Obesity in Women: Why Does it Matter?

Janine Clayton, MD, FARVO

Director, Office of Women's Health, NIH

Monica Webb Hooper, PhD

Deputy Director, National Institute on Minority Health and Health Disparities, NIH

Walter Koroshetz, MD

Director, National Institute of Neurological Disorders and Stroke, NIH

Kaveeta Vasisht, MD, PharmD

Associate Commissioner for Women's Health, Director, Office of Women's Health
Food and Drug Administration, FDA

Elizabeth Garner, MD, MPH (moderator)

President, American Medical Women's Association (Moderator)

These leaders, representing our federal health agencies, highlighted the importance of leveraging individual desire for good health, addressing obesity holistically, and acknowledging the role of social determinants as key influencers in clinical outcomes. There is a need for:

- Disaggregation of obesity data to better understand the nuances across different demographics, including sex, age, and race.
- Better education about nutrition with a focus on making information more understandable and culturally appropriate.
- Advocacy outreach with federal agencies to disseminate information and educational materials.

Understanding the influence of sex differences in terms of genetics and organ function was emphasized. Multiple chronic diseases, or comorbidity is a more urgent challenge in women than for men. These variances may reflect the fact that women may be largely underrepresented in clinical trials. Conditions such as obesity must be considered in the context of other chronic diseases.

While obesity is a growing crisis in the U.S., the incidence of stroke, on the contrary, has decreased every year since the 1970s, to almost 70% less. Yet in the last two years, obesity may be driving up the rates of both strokes and heart attacks. Obesity remains a major risk factor for stroke that impacts hypertension, Type 2 diabetes, vascular disease, and age-related cognitive impairment, among other chronic conditions.

Speakers highlighted gaps in obesity care, particularly in underrepresented communities, and stressed the need for more research, education, and culturally sensitive approaches to nutrition and lifestyle modification. Agencies are actively working on educational projects and community-engaged research, recognizing the importance of tailored approaches to health disparities.

Regarding collaboration, efforts are being made internationally, with resources translated into multiple languages to engage diverse communities. The audience is encouraged to participate in campaigns, initiatives, and research funding opportunities, with a focus on advocacy and engagement to amplify the impact of obesity-related initiatives. Overall, the speakers underscored the multifaceted nature of addressing obesity and the importance of collaboration, education, and tailored interventions in promoting healthier communities.

Obesity Management in Women's Health Across the Lifespan**Beth Battaglini, RN-C**

CEO, HealthyWomen

Tiffany Powell-Wiley, MD, MPH

Stadtman Investigator, Social Determinants of Obesity and Cardiovascular Risk, National Heart, Lung, and Blood Institute, NIH

Kathryn Schubert

President and CEO, Society for Women's Health Research

Constance Bohon, MD

Assistant Clinical Professor of Obstetrics and Gynecology, George Washington University School of Medicine and Health Sciences; Fellow and Legislative Committee Co-Chair, American College of Obstetricians and Gynecologists

Connie Newman, MD (moderator)

Adjunct Professor of Medicine, NYU Grossman School of Medicine; Past President, AMWA (Moderator)

Obesity poses multifaceted challenges throughout the various life stages of women, affecting both physical and psychological well-being. Rather than a simple lifestyle choice, weight regulation is governed by intricate pathways within the brain and gastrointestinal tract. Panelists delved into the ramifications of obesity during pivotal life stages such as pregnancy and menopause, underscoring heightened risks for conditions like gestational diabetes and certain cancers among women with obesity.

From adolescence onwards, obesity can initiate a detrimental cycle leading to orthopedic issues, depression, and social challenges such as bullying. Women with obesity face compounded risks during critical periods like pregnancy, where conditions like polycystic ovarian syndrome (PCOS) can exacerbate fertility difficulties and increase the likelihood of complications such as gestational diabetes and maternal mortality. Additionally, obesity is associated with heightened risks of breast and uterine cancer.

Behavioral management is crucial, with an emphasis on educating children early about healthy eating habits. The need for a comprehensive, multi-level approach to obesity interventions was emphasized, considering socio-economic factors and environmental influences. Diverse populations also experience obesity disparately, so racial and ethnic disparities and the differential impact of obesity-related diseases was also discussed. Understanding sex and gender differences in obesity and its management are important, underscoring the need for tailored interventions.

Successful strategies were cited, ranging from personalized approaches to pharmacological treatments targeting obesity. Strategies for preserving muscle mass during weight loss were discussed, alongside initiatives for promoting employee health and wellness. Policy solutions which stress the importance of interdisciplinary collaboration in developing effective interventions and policies to combat obesity and its associated health risks are needed.

A Patient's Perspective: Seeking Care, Facing Bias

Michele Tedder

Senior Program Manager, Black Women's Health Imperative

Patty Nece

Immediate Past Chair, Obesity Action Coalition

Nancy Glick (moderator)

Director of Food and Nutrition Policy, National Consumers League (Moderator)

The discussion emphasized the importance of a patient-centered approach in obesity care, rejecting the notion of a one-size-fits-all. Two patients shared their personal journeys and the biases they faced.

With one, experiences of bullying started in childhood, which began a spiral of shame, resulting in self-blame regarding weight. Physicians' admonishments to lose weight left her in tears, one physician treating her as though she "wasn't worth his time." The mental health challenges were a result of suffering the stigma of obesity.

With the second patient, obesity impacted the quality of healthcare. When seeking care for a knee injury, one physician told her to lose 50 lbs before he would treat her. Another physician fortunately diagnosed her knee condition and noted that she should have had surgery six months earlier. Finally, a primary care physician gave her the confidence to pursue weight loss surgery, defining it as a 'tool, not a cop-out' to help her live a healthier life.

Both patients spoke about the need for healthcare practitioners to confront their own biases about obesity and to never lose sight of the person behind the disease. Other suggestions included having open and respectful conversations and believing patients' experiences and efforts in weight management. These points reinforce the need for a compassionate and empathetic approach that respects the autonomy and lived experiences of each and every patient.

Patients should also be informed about all available treatment options, including medication and surgery, and should have access to supportive and well-informed primary care physicians who can guide them through their obesity care journey. It's crucial for clinicians to refrain from making assumptions about patients' previous efforts to manage their weight and to acknowledge the complexities and challenges faced by individuals who have obesity.

The Obesity Bill of Rights, which champions the fundamental principles of equity, dignity, and patient-centered care within the realm of obesity treatment, can help empower people to receive equitable care. It serves as a clarion call for recognizing obesity as a chronic disease, rejecting stigmatization, and helping to ensure access to comprehensive care options as with other chronic conditions. Central to these rights is the acknowledgment that one size does not fit all in obesity management, emphasizing the importance of tailored approaches that cater to the unique needs and circumstances of each patient.

Congressional Insights

Rep. Mariannette Miller-Meeks (IA-1)

U.S. House of Representatives

Rep. Mariannette Miller-Meeks (R-IA-1) began by noting that obesity is increasingly recognized as a chronic disease, with treatment often focusing on managing its associated co-morbidities rather than directly targeting obesity itself, a perspective often influenced by biases. While exercise is a potent tool for weight loss, its efficacy varies among individuals, and metabolic factors can pose challenges to

achieving desired outcomes. Factors that need to be addressed with obesity are counseling, nutritional guidance, exercise support, and medications if appropriate: all to support a healthy lifestyle.

Recognizing the need for comprehensive approaches to obesity management, legislation has been introduced to expand coverage of anti-obesity medications to Medicare recipients. Dr. Miller-Meeks has been a champion of The Treat and Reduce Obesity Act (TROA) which would also expand the types of health care professionals that are covered by Medicare to provide intensive behavioral therapy for the treatment of obesity (to include clinical psychologists, registered dietitians, or nutrition professionals), if referred by a physician. This legislation would also allow FDA-approved obesity medications to be covered under Medicare Part D.

These efforts signify a proactive shift towards acknowledging and addressing obesity as a serious chronic disease. Although the benefits may not be immediately evident, long-term ramifications are expected to include substantial healthcare savings stemming from a reduction in obesity prevalence, highlighting the importance of proactive measures in combating this pervasive health issue.

Advancing Opportunities to More Effectively Address Obesity

Catherine Ferguson, MA

Vice President of Federal Advocacy, American Diabetes Association

Jeanne Blankenship, MS

Vice President, Policy Initiatives and Advocacy, Academy of Nutrition and Dietetics

Richele Corrado, DO, MPH, FACP, ABOM

Clinical Associate Professor of Medicine, Uniformed Services University of the Health Sciences

Millicent Gorham, PhD (Hon), MBA

CEO, Alliance for Women's Health and Prevention

Christine Gallagher, MPA (moderator)

Senior Center Administrator, STOP Obesity Alliance, Milken Institute School of Public Health, George Washington University

Advancing opportunities to effectively address obesity requires a multifaceted approach that prioritizes access to treatment and care for the most vulnerable individuals and those already suffering from obesity-related health issues. The Treat and Reduce Obesity Act (TROA) stands as a potential catalyst for broadening access to obesity treatment options, underscoring the importance of prevention, screening, and comprehensive care.

Lifestyle interventions with a multidisciplinary approach are deemed essential, recognizing that not all individuals are suitable candidates for medication or surgical options. Intensive behavioral therapy, coupled with nutritional counseling and physical activity, form the cornerstone of comprehensive obesity treatment, emphasizing personalized care tailored to individual needs and circumstances.

A critical barrier to effective obesity management, however, lies in the clear lack of education among healthcare providers (HCPs) on how to address obesity. Medical professionals across all specialties must

be adequately educated and trained on the latest treatment therapies, given the prevalence of weight-related complications seen in various medical contexts. Education on obesity care should ideally commence in medical school, addressing the glaring deficiency revealed in surveys where obesity is absent from curricula for a significant portion of respondents. It is imperative to empower individuals with a nuanced understanding of obesity as a complex disease, devoid of individual blame, fostering a culture of compassion and understanding.

Discussions delved into the current landscape of obesity treatments, highlighting barriers faced by individuals seeking access to anti-obesity medications through Medicare, Medicaid, and employer health insurance plans. Prior authorization requirements for obesity medications for some patients is also a challenge and will continue to be so with more drug therapy options in the pipeline.

The inclusion of obesity treatments in military healthcare underscore ongoing efforts to improve access to care. Still, ongoing challenges include gender bias and lack of time during medical visits to fully discuss treatment options with patients. Obesity medications are covered by the military, though utilization has not measurably increased in the last few years.

Strategies to advocate for better insurance coverage, provide access to treatment for underserved and rural communities, and promote policy changes to enhance access to obesity care were also explored. Efforts to make medications more affordable were discussed, emphasizing the potential for long-term healthcare cost reduction through improved medication access and efficacy.

Closing the Gap in Obesity Care – Envisioning the Way Forward

Elizabeth Garner, MD, MPH

President, American Medical Women's Association

The summit concluded by stressing the need to address gender-specific aspects of obesity, treating obesity like other chronic diseases, considering patient perspectives, and continuing efforts to advance obesity care. Overall, the summit provided a platform for stakeholders to collaborate, identify challenges, and outline strategies to improve obesity treatment and management in women, marking a crucial step forward in addressing this pressing public health issue.

AGENDA

8:30 am: Light Breakfast and Networking

9:00 am: Welcome

- Elizabeth Garner, MD, MPH (*President, American Medical Women's Association*)

9:05 am: Opening Remarks

- Congresswoman Robin Kelly, PhD (*Illinois 2nd Congressional District*)

9:15 am: Keynote Panel: Cardiometabolic Health and Obesity in Women: Why Does It Matter?

- Moderator: Elizabeth Garner, MD, MPH
- Janine Clayton, MD, FARVO (*Director, Office of Research on Women's Health, NIH*)
- Monica Webb Hooper, PhD (*Deputy Director, National Institute on Minority Health & Health Disparities, NIH*)
- Walter J. Koroshetz, MD (*Director, National Institute of Neurological Disorders and Stroke, NIH*)
- Kaveeta Vasisht, MD, PharmD (*Assoc. Commissioner for Women's Health, U.S. Food & Drug Administration*)

10:15 am: Obesity Management in Women's Health Across the Lifespan

- Moderator: Connie Newman, MD (*Adjunct Professor of Medicine, NYU Grossman School of Medicine; Past President, AMWA*)
- Beth Battaglino, RN (*CEO, HealthyWomen*)
- Tiffany Powell-Wiley, MD, MPH (*Stadtman Investigator, Social Determinants of Obesity and Cardiovascular Risk, National Heart, Lung, and Blood Institute, NIH*)
- Kathryn Schubert (*President and CEO, Society for Women's Health Research*)
- Constance J. Bohon, MD (*Assist. Clin. Professor of Obstetrics & Gynecology, George Washington Univ. School of Medicine & Health Sciences; Gen. Chair, Committee on Sci. Program, Amer. College of Obstetricians & Gynecologists*)

11:00 am: A Patient's Perspective: Seeking Care, Facing Bias

- Moderator: Nancy Glick (*Director of Food and Nutrition Policy, National Consumers League*)
- Michele Tedder (*Senior Program Manager, Black Women's Health Imperative*)
- Patty Nece (*Immediate Past Chair, Obesity Action Coalition*)

11:30 am: Congressional Insights

- Congresswoman Mariannette Miller-Meeks, MD (*Iowa 1st District*)

11:35 am: Advancing Opportunities to More Effectively Address Obesity

- Moderator: Christine Gallagher, MPAff (*Research Project Director, STOP Obesity Alliance, Milken Institute School of Public Health, GWU*)
- Catherine Ferguson, MA (*Vice President of Federal Advocacy, American Diabetes Association*)
- Jeanne Blankenship, MS (*Vice President, Policy Initiatives and Advocacy, Academy of Nutrition and Dietetics*)
- Richele Corrado, DO, MPH (*Clinical Associate Professor of Medicine, Uniformed Services University, Walter Reed National Military Medical Center*)
- Millicent Gorham, PhD (Hon), MBA (*CEO, Alliance for Women's Health and Prevention*)

12:20 pm: Closing the Gap in Obesity Care - Envisioning the Way Forward

- Elizabeth Garner, MD, MPH

12:30 - 2 pm: Connecting Obesity Care Champions and Women's Health Stakeholders to Accelerate Change (*Small group breakouts, working lunch*)

Health Disparities & Equity Stigma & Bias Advocacy & Education Policy & Access



Beth Garner, AMWA President



Cardiometabolic Health & Obesity in Women



Representative Robin Kelly Opening Remarks



Obesity Management in Women's Health



Patient's Perspective: Seeking Care, Facing Bias



Advancing Opportunities to Address Obesity



Rep. Mariannette Miller-Meeks - Insights



Summit Audience



Summit Speakers

Acknowledgements

Steering Committee

Dr. Bharti (Abby) Abichandani Shetye (*Obesity Medicine Association*)
Dr. Bisi Alli (*AMWA and American College of Lifestyle Medicine*)
Jeanne Blankenship (*Academy of Nutrition and Dietetics*)
Diane Enos (*American Society for Metabolic and Bariatric Surgery*)
Catherine Ferguson (*American Diabetes Association*)
Dr. Beth Frates (*American College of Lifestyle Medicine*)
Christine Gallagher (*STOP Obesity Alliance, Milken Institute, George Washington University*)
Rob Goldsmith (*Endocrine Society*)
Dr. Millicent Gorham (*Alliance for Women's Health and Prevention*)
Dr. Connie Newman (*AMWA Obesity Lead and AMWA Past President*)
Dr. Rachel Pojedni (*Health & Human Performance/Norwich Univ. & Inst. of Lifestyle Medicine, Harvard*)
Dr. Fatima Cody Stanford (*AMWA and The Obesity Society*)
Tracy Zvenyach (*Obesity Action Coalition*)

Supporting Organizations

Alliance for Women's Health and Prevention	National Consumers League
American College of Lifestyle Medicine	Obesity Care Advocacy Network
Black Women's Health Imperative	Obesity Medicine Association
HealthyWomen	Society for Women's Health Research
National Association of Nurse Practitioners in Women's Health	The Obesity Society

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