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Scientific Statement: Coronavirus (COVID-19) & Obesity

Obesity-related conditions seem to worsen the effect of COVID-19; indeed, the Centers for Disease Control and Prevention (CDC) reported that people with heart disease and diabetes are at higher risk of COVID-19 complications.

Given the extremely high rates of obesity around the globe we expect a high percentage of the population to be at greater risk of contracting coronavirus. Furthermore, persons with obesity who become ill and require intensive care present challenges in patient management as it is more difficult to intubate patients with obesity, it can be more challenging to obtain diagnostic imaging (as there are weight limits on imaging machines), patients are more difficult to position and transport by nursing staff and, like pregnant patients in ICUs, they may not do well when prone. Special beds and positioning/transport equipment are available in specialized surgery units, but may not be widely available elsewhere in hospitals and certainly not in all countries. In general health systems are already not well set up to manage patients with obesity (as reported by our MAPPS study published on Clinical Obesity) and the current crisis will expose their limitations even more.

This global pandemic is also quickly becoming a global economic crisis, which will disproportionately affect the world’s most vulnerable population. In many countries this same segment of the population is also the one at higher risk of obesity, which might worsen the obesity crisis in the future. In addition to that, the current pandemic might contribute to an increase in obesity rates as weight loss programmes (which are often delivered in groups) and interventions such as surgery are being severely curtailed at present – and this is likely to go on for a long period of time. The measures introduced in some countries (e.g. not leaving the home for several weeks even for those who are not sick) will have an impact on mobility and enforced physical inactivity even for short periods of time increases the risk of metabolic disease. Finally, the current crisis and the need for self-isolation is prompting many to rely on processed food with longer shelf life (instead of fresh produce) and canned food (with higher quantities of sodium) and we might see an increase in weight if this persists for a longer period of time.

World Obesity Federation will release regular information on its website regarding any new discovered associations between COVID-19 and obesity and its comorbidities. We will monitor through our global members specific challenges/ suggestions that might come from different countries on how to respond to the crisis.