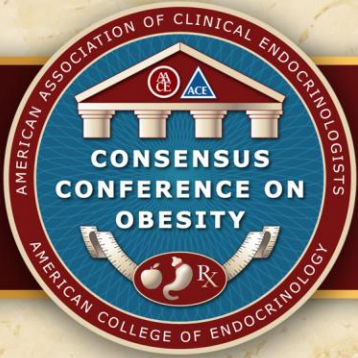


AAACE/ACE CONSENSUS CONFERENCE ON OBESITY: BUILDING AN EVIDENCE BASE FOR COMPREHENSIVE ACTION

MARCH 23–24, 2014

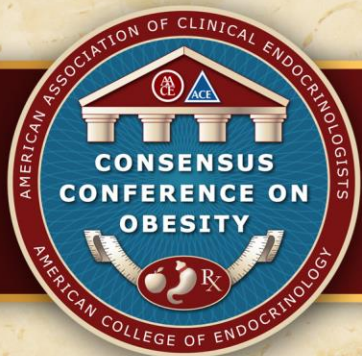
JW MARRIOTT | WASHINGTON, DC



Biomedical Pillar

What are the knowledge gaps and how can they be filled?

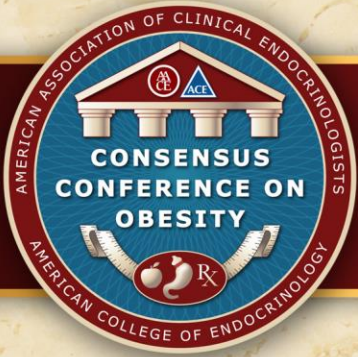
- Neurohormonal control of appetite and adiposity
- New therapeutic interventions are needed
- Role of genetics
- Cost effectiveness should be assessed, both short term and long term
- More education is needed at the level of medical school and residency.
- Strategies to maintain weight loss is an overarching issue; we know too little about this. Need more long-term data for sustained weight reduction.



Biomedical Pillar

Knowledge Gaps (cont'd.)

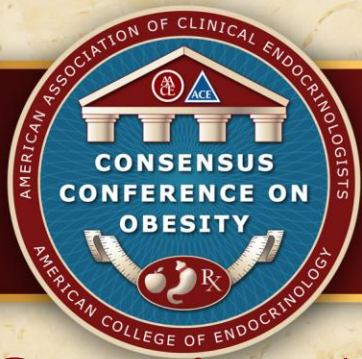
- In addition, research is needed on:
 - Impact of psychological disorders (eg, binge eating, addiction)
 - Endocrine disruptors and obesogenic drugs
 - Effective social messaging, increased public awareness
 - Strategies to modify the environment to decrease obesogenic potential.
 - The relationship between disordered sleep and weight gain.
 - Pediatrics: optimal age for intervention.
 - Impact of obesity on inpatient costs/hospitalization
 - Development of personalized medicine to treat obesity based on genomic or metabolomic profiles



Government & Regulatory Pillar

What are the knowledge gaps and how can they be filled?

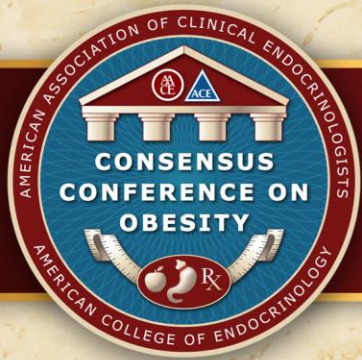
- Additional information about effectiveness of modalities on various age groups
- Health disparities
- Health literacy/dietary guidelines
- Clinical trials to measure environmental impact
- Provider attitude and knowledge base
- Guidance for drug development and approval
- Policy implementation outcomes



Health Industry & Economics

Question 5: What are the knowledge gaps and how can they be filled?

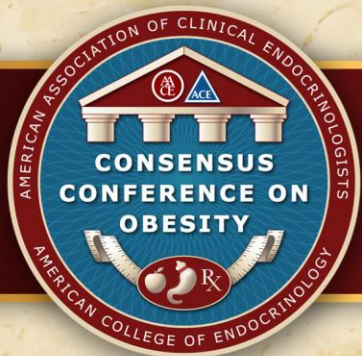
- How would treatment patterns change if payors *reimburse* for clinician time and therapies prescribed
- Weight *trajectory* as a metric
- Weight *plateau* as acceptable end point.
- Can we design a person and/or population-*specific economic modeler*?
- Stratification *algorithm* by ethnicity, gender, race
- BMI vs Waist circumference vs DXA vs Other



Health Industry & Economics

Question 5b - What are the knowledge gaps and how they can be filled?

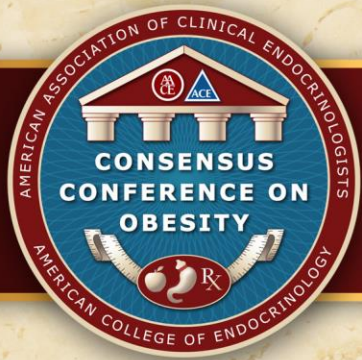
- Impact of adding obesity guidelines to the guidelines for the complications
- ACA and ACOs create opportunity
- ICD-10 creates opportunity



Health Industry & Economics

Question 5c - What are the knowledge gaps and how they can be filled?

- Analogous to anti- smoking and drunk driving?
- Does the ACA and ACOs create opportunity?
- Shared financial risk model
- Agreeing on consistent coding so that databases can be mined effectively
- Overcoming therapeutic nihilism in obesity
- Impact of the LOOK-Ahead results



Organizations, Education & Research Pillar

What are the knowledge gaps and how they can be filled?

- Agreement on the definition of obesity and adequacy of BMI as sole determination
- Health Care Professionals and their staff are not trained to address obesity in patients
- Team approach and defining lifestyle modification based on individual patients
- Match appropriate therapy to individual patients, taking cultural awareness into consideration
- Critical periods for intervention
- Better understanding regarding the types, location and function of adipose tissue
- Best diet