

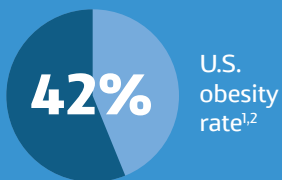
Investing in Nutrition for Quality Obesity Care



Now, more than ever, we need a comprehensive nutrition model to address the escalating obesity issue in communities across the United States. The key is establishing an interdisciplinary collaboration dedicated to creating a comprehensive, convergent standard of care that brings to light the essential value of medical nutrition therapy on a national, state, and local level.

OBESITY IN THE UNITED STATES IS...

PREVALENT



SERIOUS

Obesity can lead to a multitude of health consequences, including comorbid chronic diseases (diabetes, heart disease, cancer), joint problems, sleep apnea, and poorer mental health.³

COSTLY

\$173 Billion/yr⁴
Obesity-related medical costs in the U.S.

\$3.38 – \$6.38 Billion/yr⁴

Cost of lost productivity due to obesity-related absenteeism

\$1,861 Higher⁵

Medical costs for adults with obesity than those without



The demand for Anti-Obesity Medications (AOMs), such as GLP-1s, is on the rise

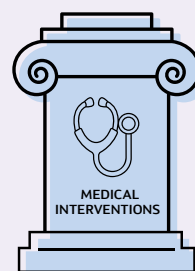
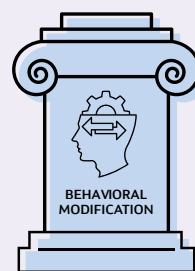
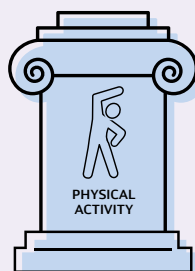
16 million⁶

Americans are taking GLP-1 medications

While a welcome tool, AOMs can be most effective when used with other essential elements of care, especially nutrition



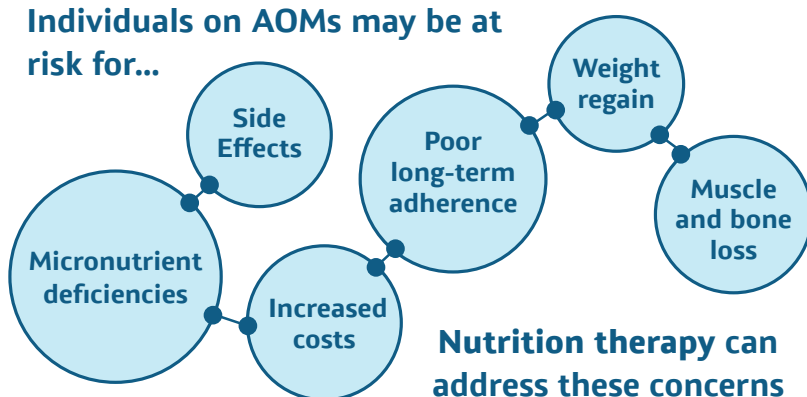
THE 4 PILLARS OF OBESITY TREATMENT⁷



Sustaining benefits over time requires a comprehensive care plan that emphasizes **nutrition therapy**

THE CHALLENGES OF RELYING ON AOMS ALONE⁸

Individuals on AOMs may be at risk for...



TAKE ACTION SUPPORT NUTRITION FOR OBESITY CARE



PROGRAMS

Provide quality nutrition education, training, & certification programs for healthcare professionals



POLICY

Support policies that address nutrition as a key component of quality obesity care (e.g., TROA, MNT)



RESEARCH

Realign research funding to evaluate the effectiveness of nutritional strategies in the treatment of obesity



FUNDING

Lead efforts to fund national and local quality improvement initiatives focused on nutrition



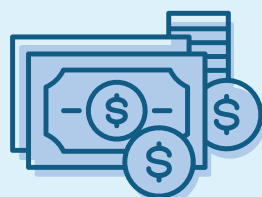
STANDARDS

Mandate the development of standard definitions for comprehensive nutrition care

NUTRITION THERAPY IS ESSENTIAL FOR COMPREHENSIVE OBESITY CARE. A MULTIDISCIPLINARY APPROACH CAN MAXIMIZE PATIENT OUTCOMES IN ACHIEVING THEIR HEALTH GOALS

Evidence suggests that combining GLP-1 therapy with comprehensive obesity care could lead to

over \$35,000
in lifetime savings
compared to GLP-1 therapy alone⁹



For more information, please see [Nutrition and Obesity Management in the Context of Anti-Obesity Medications: Blueprint for Action](#)

1. Reduce the proportion of adults with obesity –Data -Healthy People 2030| odphp.health.gov. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/overweight-and-obesity/reduce-proportion-adults-obesity-nws-03/data> (2025).

2. Emmerich, S. D., Fryar, C. D., Stierman, B., & Ogden, C. L. Obesity and Severe Obesity Prevalence in Adults: United States, August 2021–August 2023. (2024) doi: <https://www.cdc.gov/nchs/products/databriefs/db508.htm>.

3. CDC. Causes and Consequences of Childhood Obesity. Centers for Disease Control and Prevention <https://www.cdc.gov/obesity/basics/consequences.html> (2022).

4. Ward, Z. J., Bleich, S. N., Long, M. W., & Gortmaker, S. L. Association of body mass index with health care expenditures in the United States by age and sex. PLOS ONE 16, (2021).

5. CDC. Adult Obesity Facts. Obesity <https://www.cdc.gov/obesity/adult-obesity-facts/index.html> (2025).

6. Amenabar J., 5 things doctors want you to know before you start taking a GLP-1. Washington Post, (July 15, 2025)

7. Obesity Medicine Association. The Four Pillars of Obesity Treatment. <https://obesitymedicine.org/about/four-pillars/> (2025).

8. Mozaffarian, D., et al. "Nutritional priorities to support GLP-1 therapy for obesity: a joint Advisory from the American College of Lifestyle Medicine, the American Society for Nutrition, the Obesity Medicine Association, and The Obesity Society." Obesity Pillars (2025): 100181

9. Kim, D.D., et al. "Balancing innovation and affordability in anti-obesity medications: the role of an alternative weight-maintenance program." Health Affairs Scholar 2.6 (2024): qxae055