

OBESITY — OUT OF CONTROL

Denton A Cooley is one of the pioneers of heart transplantation in the 20th century. In 1968, he performed the first successful heart transplant in the United States, and in the following year, he implanted an artificial heart in a human. Nearly 30 years later, reflecting on the practice of medicine in the new century, he noted: "If we truly want to save money and improve the quality of American life, the solution is . . . preventive medicine. We must rid ourselves of our dependence on expensive BandAids and learn to prevent medical problems before they start."

Given this wisdom, it is not unreasonable to expect its convergence with the proceedings of a recent Sydney conference, "Cardiovascular disease in the 21st century — shaping the future". After all, modernity's threats to cardiovascular health, such as the epidemics of obesity and diabetes, are preventable consequences of lifestyles and behaviours affecting communities worldwide.

In fact, preventive medicine was an infrequent player on the conference stage. It did make one brief appearance in a special session called "Obesity — out of control", only to be supplanted by the more predictable papers on biomedical reductionism.

What are the reasons for preventive medicine's reduced scientific standing, and its apparent impotence in dealing with the obesity and diabetes epidemics? Despite the gravy train of committees, summits and taskforces and their guidelines, strategies, action plans and targets, there has been only blunted enthusiasm to "walk the talk". Preventive medicine's role in combating obesity lacks the aggressive public advocacy seen in Australia's successful antismoking and depression awareness campaigns.

It is patently obvious that obesity is out of control. It is also obvious that it is a problem in dire need of fearless champions capable of strong advocacy. Who are these champions, and where are they when we most need them?



Martin B Van Der Weyden

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