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# Obesity: An American Epidemic

Americans are gaining weight at an alarming rate. Studies show that approximately 59 million people are obese and that number is expected to grow to 65 million over the next five years. Medical experts now consider obesity to be at epidemic proportions. Obesity increases the risk of diabetes, heart disease and hypertension and shortens a person's lifespan. The ramifications of these statistics are not just relegated to health issues. There are economical, social, and psychological aspects to consider as well.

Why are we gaining weight so rapidly? One reason could be Americans look to pay less and get more. The fast-food industry has made its meals more appealing to the public by offering larger portions for bargain prices. It is difficult for many of us to resist or split a super-sized meal. Doing so would save us money and another notch on the belt.

Obesity affects everyone. Engineers, for example, have designed the width of airplane seats at eighteen inches. If an obese person sits down in one of these seats, his mass may spill over to the adjoining seat making the trip uncomfortable for aisle mates. Some airlines have instituted regulations requiring that airlines ask all passengers what they weigh before they board planes. Safety rather than health is the issue for airlines. Their planes were designed to hold passengers whose average weight is 170 pounds.

America's children, as well as their flying adult relatives, are overweight. Fifteen percent of American children between the ages of 6-19 are obese. Some schools are addressing the problem by providing healthier food choices. In others, fast food restaurants and vending machines turn the heads of teenagers by offering more tasty treats. By informing students about the food they consume, officials hope children will make better nutritional choices.

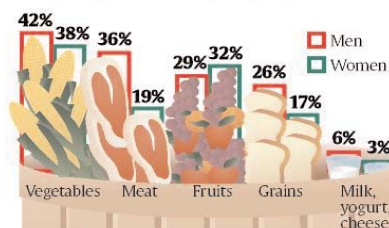
Obese people of all ages often experience physical limitations. Today, fewer senior citizens are eating right. Poor diet affects their health and may worsen medical conditions. Obesity can limit peoples' physical abilities. By shedding pounds, people can participate in daily activities with fewer complications.

Americans can change the course of our epidemic. To do so, we must eat healthfully and exercise. The prescription sounds easy, but it is challenging. Americans need to embrace the challenge. If we do, we can lose in a positive way.

### USA TODAY Snapshots®

#### Few older Americans eat right

The percentage of older American men and women who eat the recommended number of servings daily of the following food groups:



Note: People age 60 and older

Source: USDA Economic Research Service's FoodReview

By Adrienne Lewis, USA TODAY

AS SEEN IN USA TODAY NEWS SECTION, FRIDAY, FEBRUARY 7, 2003, PAGE 4A

# Obesity rate could reach nearly 40% in five years

## Reports address U.S. epidemic among adults, causes, treatments

By Nanci Hellmich  
USA TODAY

Nearly four out of 10 adults in the USA will be obese within five years if people keep packing on pounds at the current rate -- putting their health at risk, says one of the top obesity researchers.

Currently, about 31%, or about 59 million people, are obese, which is defined as roughly 30 or more pounds over a healthy weight. Almost 65% are either obese or overweight, 10 to 30 pounds over a healthy weight, which increases their chances of developing diabetes, heart disease, some types of cancer and a host of other health problems.

The medical costs associated with treating these diseases will strain the health care system and economy in the years to come, experts say.

Americans are gaining one to two pounds a year, says James Hill, director of the Center for Human Nutrition at the University of Colorado Health Sciences Center in Denver. Hill predicts that, at the current rate, 39% of Americans will be obese by 2008.

He's one of several national weight-loss experts who offer possible solutions to the obesity epidemic in Friday's journal *Science*. This report comes on the heels of a landmark report in January that showed being obese shaves seven years off a person's life, and just being overweight shortens a person's life span by about three years.

To stop gaining weight, people need to either burn 100 calories more a day with physical activity or eat 100 calories

less every day, Hill says. They could cut back a little on portions, skip one soda or walk one extra mile a day, which would take about 15 to 20 minutes, he says.

"This isn't going to cause you to lose a lot of weight, but it's going to keep you from gaining any more."

Other papers in *Science* address overweight and the role of:

► **Genetics.** Jeffrey Friedman, a scientist at the Howard Hughes Medical Institute at Rockefeller University, says basic differences in people's genetics may partly explain why some remain lean in the current environment of fast food and huge portion sizes, while others are hundreds of pounds overweight.

Friedman says about seven to 10 pounds of people's weight gain in the past decade is due to the environment. But he says the reason some folks are hundreds of pounds overweight is largely attributable to a set of genes, which compose a powerful physiological system that maintains consistency in weight in each individual.

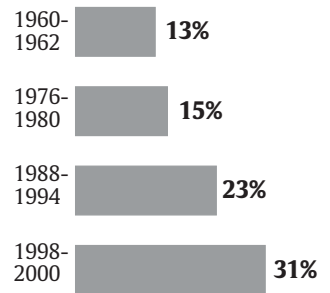
The human body has complex biological systems that include hunger and appetite hormones that make losing weight and keeping it off very difficult, he says.

For instance, when people lose weight, levels of the hormone leptin drop, which makes them feel hungry and possibly slows down their metabolism, he says.

"You can't blame it all in the

### More are obese

The percentage of the population who are 30 pounds or more over a healthy weight:



Source: National Health and Nutrition Examination Survey

By Marc E. Mullins, USA TODAY

environment. In trying to lose weight, the obese are fighting a difficult battle," Friedman says.

► **Medical treatment.** Xavier Pi-Sunyer, director of the Obesity Research Center and chief of endocrinology at St. Luke's-Roosevelt Hospital in New York, says health professionals, including doctors and nurses, need to have better training on how to treat obesity and spend more time helping patients lose weight and keep it off.

Plus, treatment programs, including diet and exercise support, need to be covered by insurance companies, HMOs and government programs such as Medicaid and Medicare, he says. Also, better medications are needed to help people lose weight.

"Weight loss is difficult, but possible to attain," Pi-Sunyer says. "Weight maintenance is harder but also possible."

AS SEEN IN USA TODAY LIFE SECTION, MONDAY, NOVEMBER 26, 2002, PAGE 6D

# No way to go through life

## Once obese and plagued by diabetes, Stephen Furst has the last laugh

By Nanci Hellmich  
USA TODAY

Stephen Furst, who portrayed the rotund Flounder in the comedy classic *Animal House*, has a new starring role. He's an advocate for losing weight and exercising to control type 2 diabetes, the most common form of a disease that can have catastrophic health consequences.

In his lighthearted new book, *Confessions of a Couch Potato* (American Diabetes Association, \$14.95), Furst, 48, recounts the trauma of growing up obese. He describes himself as a food addict and talks about the high price that years of overeating has taken on his health.

Furst, who lives in Los Angeles, now weighs between 175 to 180 pounds, but for years he was severely overweight, carrying as much as 320 pounds on his 5-foot-10 frame.

"I sat, I ate, I grew," he writes in the book. "I felt different from everyone else -- like an alien. The looks I received when I was 320 pounds were ones usually reserved for three-eyed monsters, half-man half-woman reptiles, creatures with hideous rolls of skin that sweated profusely and giggled when they walked. . . . That last one really was me."

He has seen firsthand the high price of diabetes. His father, who was also a diabetic, died at 47 of a heart attack, one of the major complications of the disease. One of his two overweight sisters also has diabetes and is blind and on dialysis.

The actor was diagnosed with the type 2 diabetes when he was 17, but he didn't take it seriously for years. A doctor told him once that he was committing "slow suicide." Furst just scoffed at the remark and kept eating.

He describes himself as a food addict. "My bourbon is bonbons, my martini is manicotti (with extra cheese). Forget cocaine; bring on the Cocoa Puffs. Actually, when I was a child I used to eat sugar Frosted Flakes with chocolate milk, but I digest, I mean digress."

But not paying attention to his diabetes and his weight eventually caught up with him. Furst had a cataract removed from one eye, and he has a diabetic condition called neuropathy in his feet, which has left him with very little feeling and poor circulation.

It wasn't until he was 40 and landed in the hospital with an infection on his left foot -- and doctors talked about amputating part of it -- that Furst decided he had to lose weight.

He met with a dietitian, and much of what he learned was "common sense," he says. "You can eat a lot more vegetables than you can cotton candy. Bring on the veggies. Stay away from the fluffy carbs."

He figured out ways to cut fat and control carbohydrates. He revamped his cooking style. He made lots of soups, and when he was on the road and hungry, he drank coffee.

Furst lost about two pounds a week for a year. "One of the key things I did to stay on my diet is I never allowed myself to get hungry. As soon as I got hungry, I'd eat healthy foods."

At first he couldn't exercise at all, but he took the batteries out of his remote control and started walking over to change the channels on the TV. And he'd go upstairs to get things he needed instead of sending his children.

Later, he began doing yardwork and started with 10 minutes on the StairMaster. Now, he goes to the gym three times a week and does the StairMaster for 20 to 30 minutes and lifts weights on machines for 20 minutes or so. On the other days, he takes extra long walks with his dog.

He no longer has to take insulin shots and is down to one pill a day for his diabetes. He had to have surgery to remove eight pounds of extra skin around his midsection, arms and thighs.

Furst is worried about the increase in type 2 diabetes in this country and hopes others are motivated by his success and will try his recipes.

"I hope this book helps them find humor in a serious situation," Furst says. "They can laugh their way to being thin."

### Silent killer is on the rise, but treatable

Type 2 diabetes is:

- ▶ The most common form of the disease, affecting 95% of the more than 17 million Americans who have diabetes.
- ▶ Associated with a combination of genetics, excess weight and sedentary lifestyle.
- ▶ On the increase in almost all ages and ethnic groups.
- ▶ Increasingly being diagnosed in children, something that rarely happened 20 years ago.
- ▶ Preventable in people at risk for developing it with moderate lifestyle changes such as losing 5% to 10% of body weight, making healthier food choices and increasing physical activity.

Source: American Diabetes Association  
([www.diabetes.org](http://www.diabetes.org) or call 800-342-2383)

AS SEEN IN USA TODAY MONEY SECTION, FRIDAY THROUGH SUNDAY, JANUARY 24-26, 2003, PAGE 1B

# McDonald's losses reflect nation's changing tastes

## Diners favor more upscale fast food

By Bruce Horowitz  
USA TODAY

McDonald's reported its first-ever quarterly loss Thursday, signaling a national decline in appetite for burgers, fries and plastic seats.

After steady growth for decades, the company often credited with turning America into a nation of fast-food fanatics lost \$344 million during the last three months of 2002. Much of the loss was linked to the high costs of closing restaurants that had lackluster sales.

McDonald's annual results weren't much better. Its domestic sales at restaurants that were open at least one year, considered a reliable business gauge, fell 1.5% for the year. The burger giant says it expects to close 719 poorly performing restaurants, mostly in the USA. Though the company's problems aren't limited to this country, that's where 37% of its annual revenue comes from and where 45% of its stores are located.

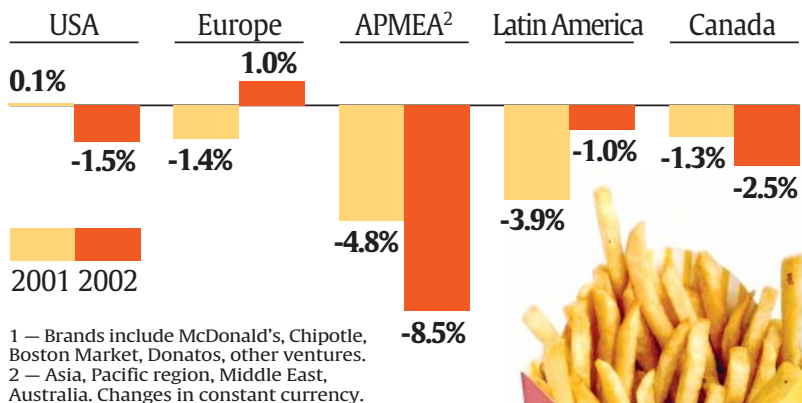
The bad quarterly news was expected, but McDonald's stock still fell Thursday. After dipping below \$15 a share for the first time in eight years, it closed at \$15, down 36 cents.

McDonald's isn't the only fast-foodie ailing. Much of the \$110 billion industry is in the doldrums as an aging population turns away from bargain meals in paper sacks and toward more upscale quick meals that make folks feel good about the food, the experience and themselves.

"McDonald's needs to reinvent itself," says Matthew DiFrisco, analyst at Gerard

### Growth decline cuts McDonald's revenue

Lack of sales growth resulted in McDonald's first-ever quarterly loss, reported Thursday. Sales change vs. previous year at all McDonald's stores<sup>1</sup> open at least 13 months worldwide.



Source: McDonald's Corp.

By Frank Pompa, USA TODAY

Klauser Mattison. "Consumer behavior has moved to grazing for a snack at a Starbucks or Panera Bread and not ordering a meal at McDonald's."

But Jim Cantalupo, who has been CEO for 23 days, told analysts in a conference call on Thursday that he has no plans to reinvent McDonald's. His near-term plan: Improve service, keep food hot and clean up the restaurants.

"The experience we deliver has eroded," he says. "If we can just get the customers we've lost back in the stores, our financial picture would be dramatically different."

That is precisely what McDonald's needs to do, consultant Pam Murtaugh says. "The bedrock of McDonald's used to be pride," she says. "But that is broken since McDonald's stopped respecting itself."

By the end of March, Cantalupo says he plans to spell out details of the company's turnaround plans. That's also

when McDonald's expects to roll out a national line of nutritional salads that industry experts say are modeled after Wendy's brisk-selling salad lineup.

Cantalupo and other officials alluded to other possible changes down the line:

- ▶ The Big 'N Tasty burger may not be a longtimer on the Dollar Menu because it is eroding sales of pricier burgers such as the Big Mac.

- ▶ A costly new cooking system will probably need to be modified to speed service.

- ▶ Consideration is being given to selling a few items from the company's other restaurant brands, such as the popular burritos from Chipotle.

- ▶ By summer, the company will introduce the McGriddle Sandwich, a breakfast item that stuffs egg and cheese between two pancakes. No gloppy mess: The syrup's baked in.

AS SEEN IN USA TODAY NEWS SECTION, WEDNESDAY, JANUARY 22, 2003, PAGE 1A

# Larger portions bring larger appetites

## Studies make sense of a supersized America

By Nanci Hellmich  
USA TODAY

Americans are eating significantly bigger portions of fries, chips and burgers and drinking more soda than they did 20 years ago -- sometimes consuming 50, 100 or even more calories of the food, according to new research.

For years, nutritionists and consumers have noticed that restaurants are serving bigger portions, but now two large studies estimate how much more Americans are actually chowing down when they're dining out or at home eating meals or snacks.

The findings may help explain why more than 120 million Americans are either overweight or obese. The number has been rising dramatically since the late '70s.

In one of the new studies, researchers at the University of North Carolina-Chapel Hill examined three large nationally representative surveys on food consumption conducted from 1977 through 1998. The surveys collected data on what more than 63,000 people said they ate.

The findings, reported in today's Journal of the American Medical Association, reveal that the average portion eaten at one sitting of:

- ▶ Salty snacks (crackers, chips, pretzels) increased from 1 ounce to 1.6 ounces, up 93 calories.

- ▶ Mexican fare (burritos, tacos, enchiladas) went from 6.3 ounces to 8 ounces, up 133 calories.

"Portions sizes are probably larger than what is being reported in this study," partly because the last data was collected in 1998, and sizes have increased since then, says Samara Joy Nielsen, a nutrition researcher at UNC-Chapel Hill. Also, people underreport what they are eating, she says.

In another study, Penn State researchers looked at the changes in portion sizes that people consumed from 1990 through 1995. Among the findings in the January issue of the Journal of the American Dietetic Association:

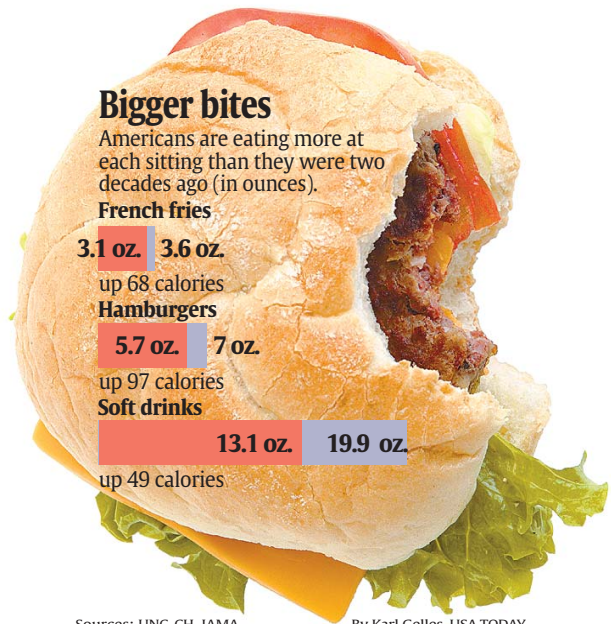
- ▶ People consumed larger portions of a third of the 107 foods analyzed. That includes bread, cookies, cereal, fries, coffee, wine and fruit juice.

- ▶ The average amount of beer consumed by men older than 40 went from 23 to 32 ounces, about 100 more calories.

"When we are presented with larger sizes of foods, we do eat them," says Penn State researcher Helen Smiciklas-Wright.

Lisa Young, a nutrition researcher at New York University, says because restaurants offer huge portions, people expect to eat bigger servings at home, too. When she studied recipes in classic cookbooks and on food packages, she found some have created bigger portions. "The Nestle Toll House Chocolate Chip Cookie recipe from 1949 yielded 100 cookies. That same recipe today is 60 cookies," says Young, whose study will be published in the February issue of the Journal of the American Dietetic Association.

Marion Nestle, nutrition professor at New York University, says, "There's no end in sight to the supersizing of portions and the supersizing of us."



AS SEEN IN USA TODAY NEWS SECTION,  
FRIDAY THROUGH SUNDAY, NOVEMBER 15, 2002, PAGE 23A

## Schools can help kids' lifelong health

### Commentary

By Desda Moss

Alarmed by the rising number of overweight kids, some public schools are serving up healthier lunch fare: more fruits, veggies and low-fat foods and fewer salty, sugary and fat-laden ones.

The overhaul is overdue: Obesity is an epidemic in our land of plenty, even among our children. Today, 15% of all American kids ages 6-19 are obese, three times as many as in the early 1970s. The numbers are even higher for African-American, Hispanic and Native American children.

Doctors link obesity in young people to such serious health problems as diabetes, hypertension, asthma and sleep apnea. Because overweight children are more likely to become overweight adults, their lifespan could be affected: Overweight people, on average, live a decade less than those at a healthy weight.

Surveys show that most adults are confused about proper nutrition, so it's no wonder so many kids are ill-equipped to conquer the battle of the bulge. The approaching holiday season will bring challenges even the most iron-willed dieter will find hard to resist.

The knowledge and support children receive in school is critical in helping them avoid the pitfalls of our supersize culture. Because proper nutrition is linked to successful learning, teaching kids the basics about caloric intake, portion size and the food pyramid could boost their academic performance as well.

Despite the requirement that schools serve meals that meet a child's dietary requirements at the lowest possible price, political and economic pressures often conspire to undermine those efforts. In some school systems, for example, marketing agreements allow fast food and soda pop to be sold on campus, even if they are banned from the cafeteria.

I'm not suggesting that Dietary Guidelines for Americans become recommended reading (although maybe it should), but schools must find ways to strengthen their nutrition-education programs and encourage healthy eating. At a minimum, schools should prominently post nutritional information about the foods they serve in the cafeteria and near snack machines, presented in clear language children can understand.

Even at schools with revamped menus, students haven't given up chicken nuggets or chips, but they are learning that good nutrition requires balance and moderation. That's a lesson every kid should absorb.

AS SEEN IN USA TODAY NEWS SECTION,  
THURSDAY, JANUARY 30, 2003, PAGE 12A

## New flight risk: Obesity?

As if there weren't enough evidence of health woes caused by increasing obesity, now comes news that the growth in overweight Americans could threaten air safety.

Indeed, investigators are questioning whether inaccurate estimates of passengers' poundage played a role in the crash of a US Airways Express commuter plane in North Carolina on Jan. 8, which killed all 21 aboard.

Using government guidelines, the airline calculated the plane's weight at close to its capacity of 17,000 pounds. But because of passengers' expanding girth, those calculations may underestimate the real load. Investigators are examining whether malfunctioning flight controls and weight placed near the tail caused the crash.

The weight of passengers is irrelevant on big jetliners, according to air safety experts. But every pound counts for those boarding the nation's 223 small commuter planes.

Yet the airlines still use estimates set by the Federal Aviation Administration in 1995. Airlines assume adults weigh an average 185 pounds (180 in summer), including clothing, shoes and a 20-pound carry-on.

This week, the FAA told commuter-plane operators to check passengers' weights to determine whether a better gauge is needed. Beginning next month, passengers on small planes will be given a choice: either step on a scale or confess your weight. (To account for cheaters, airlines will add 10 pounds to the weights of those choosing option two.)

Maybe that's not so bad. Having to weigh in to fly could jolt Americans into shedding pounds, if not for their own health, then for the safety of others. At the very least, it could prod the FAA to dump guidelines that have been supersized into oblivion.

A government survey of weight conducted from 1988 to 1994 put the average American adult at 166 pounds. New statistics show a 10-pound gain. That squares with a survey showing that more than 59 million people were obese in 1999-2000 -- double the percentage of a 1980 study.

The obesity epidemic is challenging more than assumptions about fliers' waistlines. Seats on subways, in stadiums and in movie theaters, traditionally 18 inches in width, are getting wider. And last year, Southwest Airlines said it would charge some overweight fliers for two seats.

Safety concerns, not weight loss, are behind the government's mandated weigh-in. But calling attention to a new danger from overeating might prove effective in encouraging the public to slim down.

## For discussion

1. How did Americans become, as author Greg Critser suggests, the fattest people in the world? What changes have occurred in our society that altered what and how we eat? How and why have we become "coach potatoes"?
2. To what extent is obesity and its prevention and treatment an individual responsibility? To what extent is obesity and its prevention and treatment a societal responsibility?
3. How can we change the perception of obesity to a health risk rather than a beauty issue?
4. The Surgeon General has outlined fifteen national priorities in *The Surgeon General's Call to Action To Prevent and Decrease Overweight and Obesity*. How realistic are those priorities? What are the factors that mitigate for and against the Surgeon General's vision for the future?
5. How has the food industry influenced American nutrition and health? How has the industry influenced nutrition and health in other parts of the world? To what extent does the industry have a responsibility to help stem the obesity epidemic in the United States?

## Future implications

To make a difference in the future, we need to collaborate as a society to make obesity a topic of health rather than beauty. Obesity causes an estimated 300,000 deaths each year and accounts for 6% of our national health care expenditures. Those numbers will climb without significant action on our parts.

Obesity is a multi-generational epidemic. We need to focus future efforts on education for Americans of all ages. Education that begins in preschool can encourage students to eat healthier diets and include daily physical activity in their lives. Expectant parents can explore the benefits of breastfeeding their children to prevent obesity later in life. All of us can learn to be savvy consumers.

In addition to education, responsibility on the part of business and marketing leaders can stem the tide of American obesity. Leaders can provide opportunities for physical activity at job sites. We have become a fast-food nation and depend on its convenience for our very survival. With the help of business leaders, we can learn to share super-sized meals or make smaller, healthier fare fashionable and convenient.

Without attention to our obesity epidemic, health insurance costs will continue to rise and more Americans may live without insurance.

## Additional resources

Critser, Greg. *Fat Land: How Americans Became the Fattest People in the World*. ( January 2003).

Nestle, Marion. *Food Politics: How the Food Industry Influences Nutrition and Health* (March 2002).

Schlosser, Eric. *Fast Food Nation: The Dark side of the All-American Meal* (January 2001)

Shell, Ellen Ruppel. *The Hungry Gene: The Science of Fat and the Future of Thin* (October 2002)

Overweight and Obesity, Virtual Office of the Surgeon General - <http://www.surgeiongeneral.gov/topics/obesity/>

Obesity, disease of Affluence–Great Questions of Economics - <http://www.arnoldkling.com/gqe/arch12.html>

American Obesity Association - <http://www.obesity.org/>