

OVERWEIGHT / OBESITY

Background

This case definition was developed by the Armed Forces Health Surveillance Center (AFHSC) for the purpose of epidemiological surveillance of a condition important to military-associated populations. To ensure a mission-ready force with a “military appearance,” the Department of Defense mandates that each military service implement “body composition programs,” including enforcement of weight-for-height standards required for accession and advancement.¹ Despite physical fitness and body fat standards, many active service members receive clinical diagnoses of overweight or obesity during routine medical examinations and other outpatient encounters.

Clinical Description

Obesity is a state of excess adipose tissue mass. The most widely used method to gauge obesity is the body mass index (BMI), which is equal to weight/height² (in kg/m²). Based on data of substantial morbidity, a BMI of 30 is most commonly used as a threshold for obesity in both men and women. Most authorities use the term *overweight* (rather than obese) to describe individuals with BMIs between 25 and 30. A BMI between 25 and 30 should be viewed as medically significant and worthy of therapeutic intervention, especially in the presence of risk factors that are influenced by adiposity, such as hypertension and glucose intolerance.²

Case Definition and Incidence Rules

For surveillance purposes, a case of overweight / obesity is defined as:

- *One outpatient medical encounter* with any of the defining diagnoses of overweight/obesity in *any* diagnostic position (see ICD9 code list below); or
- *One outpatient medical encounter* with a V-coded diagnosis indicating a body mass index above 25 kg/m² for adults, or a pediatric body mass index above the 85th percentile for persons up to 20 years of age in *any* diagnostic position.

Incidence rules:

For individuals who meet the case definition:

- The incidence date is considered the date of the first outpatient medical encounter that includes any of the defining diagnoses of overweight/obesity.
- An individual is considered an incident case only *once per lifetime*.

Exclusions:

- None

¹ Department of Defense Directive No. 1308.1 June 30, 2004. DoD Physical Fitness and Body Fat Program.

² Braunwald, E., Fauci, A., Longo, D. et al. 2008. *Harrison's Principles of Internal Medicine*. 17th ed. United States: McGraw-Hill Professional.



Codes

The following ICD9 codes are included in the case definition:

Condition	ICD-9-CM codes	CPT Codes
Overweight / Obesity	278.00 (obesity, unspecified) 278.01 (morbid obesity) 278.02 (overweight) V85.2x (body mass index between 25-29, adult) V85.3x (body mass index between 30-39, adult) V85.4 (body mass index 40 and over, adult) V85.53 (body mass index, pediatric, 85 th percentile to less than 95 th percentile for age) V85.54 (body mass index, pediatric, greater than or equal to 95 th percentile for age)	NA

Development and Revisions

- The case definition was developed by the AFHSC Medical Surveillance Monthly Report (MSMR) staff for the January 2009 and 2011 MSMR articles referenced below.^{3,4} The case definition was developed based on reviews of the ICD9 codes, the scientific literature, and previous AFHSC analyses.

Reports

None

Review

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| Jun 2011 | Case definition reviewed and adopted by Surveillance Methods and Standards (SMS) working group. |
| Jan 2011 | Case definition developed and reviewed by the AFHSC MSMR staff. |

Comments

None

³ Armed Forces Health Surveillance Center. Surveillance Snapshot: Diagnoses of overweight/obesity among Reserve component members, U.S. Armed Forces, 1998-2007. *Medical Surveillance Monthly Report (MSMR)*. 2009 January; Vol 16(1): 7.

⁴ Armed Forces Health Surveillance Center. Diagnoses of Overweight/Obesity, Active Component, U.S. Armed Forces, 1998-2010. *Medical Surveillance Monthly Report (MSMR)*. 2011 January; Vol 18(1): 7-11.

