REPORT

Gateway to Better Health: the case for coordinated EU action on obesity

A CALL FOR ACTION

MARCH 2025





World Obesity Day at a Glance

World Obesity Day and World Obesity Day Europe are held annually on 4 March. The overall theme of World Obesity Day 2025 was 'systems change in addressing obesity'.

World Obesity Day offers an opportunity to highlight the challenges faced by people living with obesity and the shortcomings of our systems in addressing this chronic disease. But we need to continue addressing obesity together every other day of the year.



"On World Obesity Day, we march for the people living with obesity to discuss the barriers, difficulties and challenges faced in their daily lives. The overarching theme this year is "Changing Systems, Healthier Lives". This is important because our systems seem to be failing, they are failing the people living with obesity. World Obesity Day provides us with an opportunity to challenge the misconception that obesity is caused by personal choices and recognise that stigma cannot have a place in our government or healthcare systems."

Volkan Yumuk

President of EASO



"There are strong assumptions about people living with obesity, and most of this has to do with stigma... Management and treatment under the care of a multidisciplinary team is a game-changer for people living with obesity. We need to do more to address obesity together and we cannot forget who we are fighting for – people living with obesity who need your help."

Susie Birney

European Coalition for People living with Obesity

Event Introduction

On 4 March 2025, the 'Gateway to Better Health: the case for coordinated EU level action on obesity' took place in the European Parliament in Brussels. Central to this event's agenda was the need for coordinated EU level action on obesity and to recognise obesity as a gateway disease to over 230 complications and other NCDs.

The event was hosted by MEP Laurent Castillo (EPP, FR), in partnership with the European Association for the Study of Obesity (EASO). It featured interventions by the European Commissioner for Health and Animal Welfare, patient testimonies from the European Coalition for People living with Obesity, and interventions from the International Diabetes Federation Europe, European Society of Cardiology, European Society of Endocrinology, WHO Europe, and the French Association for the Study of Obesity.

Through the event, EASO highlighted that obesity is a chronic relapsing disease and a gateway to many other NCDs. They emphasised the importance of improving the knowledge and understanding of obesity in the European Union. Convening on World Obesity Day, the event reiterated the crucial message of addressing obesity together to change systems and create healthier lives.





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We were pleased to be joined by over 70 participants in-person. With MEPs and Permanent Representations, as well as stakeholders from industry and across disease groups including diabetes, cardiovascular, cancer, kidney and liver diseases, the audience was representative of the complex nature of obesity.

In this report, you will find the key insights and recommendations generated at the event. These statements are not necessarily supported by all speakers and other attendees.



"Obesity is a silent epidemic that strongly impacts our continent and the globe. We cannot remain idle. Fighting against obesity also means preventing other diseases. The EU needs an ambitious plan, and I would like to see a plan on obesity in this 5-year term. You can count on me in the European Parliament."

MEP Laurent Castillo (EPP, FR)



"There are several factors that need to be addressed at the EU level to effectively address obesity, including recognising obesity as a chronic relapsing disease that is a gateway for several other complications. Additionally, we need a health workforce that is trained to care for the growing population living with obesity – only then will we have a health system that is ready to address obesity."

Euan WoodwardExecutive Director of EASO

The urgent need to act on obesity

Obesity Facts & Figures

Recognised as a disease by the WHO since 1948, **obesity** is defined as an abnormal or excessive fat accumulation that can impair health. It is a **gateway to other non-communicable diseases**, including cardiovascular diseases, type 2 diabetes and some cancers.¹



By actively addressing obesity alongside other NCDs, the EU could prevent over 230 associated disease complications²



80% of all healthcare spending in the EU

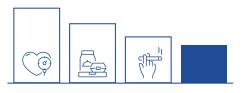
is related to noncommunicable diseases associated with obesity.³



30% of the EU population

will be living with obesity by 2030.4

The economic impacts of the obesity epidemic are also important. If nothing is done, the global costs of overweight and obesity are predicted to reach 2.7 trillion EUR per year by 2030 and more than 16 trillion EUR by 2060.¹



Obesity is the fouth highest risk factor for mortality, after high blood pressure, dietary risks and tobacco.⁶



10-13% of deaths

in different parts of Europe are linked to obesity.⁵



were estimated to have obesity and 36% pre-obesity in the European Union in 2016.⁷



of health budgets in OECD countries is expected to be spent on obesity and related diseases from 2020-2025 if obesity prevalence continues at the current rate.⁸

¹ Obesity and overweight: Fact sheet. WHO (2024). Link here.

² Frühbeck, G., Toplak, H., Woodward, E., Yumuk, V., Maislos, M. and Oppert, J.-M. (2013). Obesity: The Gateway to Ill Health

⁻ an EASO Position Statement on a Rising Public Health, Clinical and Scientific Challenge in Europe. Obesity Facts, 6(2), pp.117–120

³ World Obesity Federation (2022). The economic impact of overweight and obesity in 2020 and 2060. Estimates for 161 countries. 2nd edition.

⁴ World Obesity Federation (2024). World Obesity Atlas 2024.

⁵ Challenge in Europe. Obesity Facts, 6(2), pp.117-120.

⁶ Obesity causes cancer and is major determinant of disability and death, warns new WHO report. WHO (2022). Link here.

⁷ Health Promotion and Disease Prevention Knowledge Gateway. European Commission (2023). Link here.

⁸ Heavy Burden of Obesity: The Economics of Prevention. A quick guide for policy makers. OECD (2019). Link here.

The urgent need to act on obesity

Obesity is defined by the World Health Organisation (WHO) as a complex chronic disease defined by excess adiposity that impairs health and is driven by multiple factors including biological, genetic, environmental, socioeconomic, behavioural and psychological influences.⁹ Obesity is a chronic, relapsing, and life-long disease and is a gateway to other non-communicable diseases including cardiovascular disease, type 2 diabetes, kidney and liver diseases, and certain cancers.

To achieve the best possible outcomes for people living with pre-obesity and obesity, it is essential to move beyond primary prevention and also focus on effective management and treatment. Addressing obesity through comprehensive care can significantly improve health outcomes and prevent related complications.

Without urgent action, 30% of Europeans will be living with obesity by 2030.¹ Unfortunately, current efforts at the EU level are not enough to address the growing prevalence. While existing initiatives such as the Council Conclusions on the improvement of cardiovascular health¹⁰ and the review of the European Beating

⁹ World Health Organisation (2023). Health Service Delivery Framework for prevention and management of obesity. 10 Cardiovascular health: Council calls for more robust efforts to help prevent cardiovascular diseases. European Council (2024). <u>Link here.</u>





"The key issue with obesity is that it is a gateway disease. If effectively managed, we can prevent 230 other diseases."

Jennifer Baker Vice-President of EASO



"Obesity should be put high on the political agenda. Business as usual will not help us reach the targets. If we want to tackle obesity and NCDs we need to change our systems and our policymakers should invest now."

Kremlin Wickramasinghe

WHO Europe



"Obesity is one of the main causes of CVD, so there should be a real connection between obesity and cardiovascular health in the EU's upcoming plan. Treating people living with obesity will prevent CVD – this can only be done through a comprehensive, overarching plan."

Paul Dendale *European Society of Cardiology*

Cancer Plan (EBCP)¹¹ provide platforms for discussion on obesity, they do not include the necessary comprehensive actions required to fully address the health and societal impacts of the disease.

Within this mandate, the European Commissioner for Health and Animal Welfare, Olivér Várhelyi, is committed to drafting an EU plan on cardiovascular health. Given the strong link between obesity and cardiovascular diseases, this plan must include obesity as a key risk factor and outline concrete actions to address it at the EU level.

This event highlighted the urgent need to recognise the interlinkages between obesity and other NCDs. It is increasingly clear that Europe cannot fully address one disease without simultaneously addressing others. A more integrated and coordinated approach is essential for meaningful progress in public health.

EASO believes that obesity must be treated with the same urgency and structured approach as other non-communicable diseases. It should be a central consideration in upcoming EU policy plans related to disease prevention and management. Without decisive action, the prevalence of obesity will continue to rise, underscoring the need for a comprehensive and sustained response to address obesity that considers the interconnectivities of the wider non-communicable disease sphere.

¹¹ Review of Europe's Beating Cancer Plan. European Commission (2025). <u>Link here.</u>





"One of the key issues is how we compartmentalise the care of patients when several co-morbidities, like obesity and diabetes, are strongly related. In this way, our health systems are failing people living with these diseases."

João Filipe Raposo

International Diabetes Federation Europe



"Obesity is not simple – and we need governments to focus on both preventive measures as well as multidisciplinary treatment. If we treat and prevent obesity, we can really lower the prevalence of other diseases."

European Society of Endocrinology

Liesbeth van Rossum



The discussions throughout the event focused on the current challenges of effectively diagnosing, treating and caring for people living with obesity. In both panels, speakers highlighted that there is a need for improved understanding of the causes of obesity as well as the consequences of inaction.

An EU-wide approach for the prevention, diagnosis, treatment and management of obesity is crucial for improving European competitiveness. A healthier population with lower rates of obesity can significantly reduce healthcare costs and public health spending, while providing substantial economic gains due to improved health and productivity.

For Europe to effectively address obesity together, EASO calls for action on the following:

1. EU Policymakers should support an EU Action Plan on Obesity

Obesity is an important disease which is both increasing in prevalence and is also a gateway disease to several NCDs and other complications. Developing an EU level plan on obesity has the potential to not only prevent the onset of co-morbidities, but also to contribute significantly to cost-savings in the healthcare sector.

Such a plan on obesity would strengthen the EU's long-term competitiveness nu fostering a healthier, more productive work

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"I would like to see a plan on obesity in this 5-year term. This would be important for our health and for EU Competitiveness."

MEP Castillo (EPP. FR)



"Prevention is essential, but it is not sufficient. When addressing obesity, we must consider all stages of the disease — from prevention to care and treatment — and ensure a comprehensive, multidisciplinary approach. This includes involving professionals with diverse expertise. Moreover, effective policy-making requires the active participation of all relevant stakeholders, including clinicians, economists, epidemiologists, policy-makers, and academics."

Karine Clément

European Association for the Study of Obesity

force, reducing healthcare costs and enhancing labour market participation. Obesity and its related co-morbidities contribute to absenteeism, lower productivity and early retirements, all of which have a significant economic and societal impact. By investing in a plan to prevent and manage the disease, the EU can alleviate pressure on healthcare systems and free up resources to maintain economic resilience.

Any future EU level action plan on obesity must take a comprehensive and multisectoral approach. It is not enough to focus on prevention; we must focus on the entire disease spectrum including improved diagnosis, treatment and management of the disease. To avoid a siloed approach, it will be important to bring together different types of stakeholders, including patients, clinicians, academics, and policymakers to ensure that obesity, and all accompanying complications, is addressed effectively.

Lastly, it is imperative that the right people are at the table during the development of the plans. Perhaps one of the most important messages of the entire day is that the patients are the people living with the disease and the broken systems. Their voices must be heard in the development of an EU Action Plan on Obesity.



2. Obesity should become a political and financial priority in Europe

The only way to fully and effectively address obesity at the EU level is for stakeholders and policymakers alike to make it a political priority. There must be political will to develop plans, fund and implement them. We need partners from all levels who are willing to fight to push obesity up the policy agenda. There is a challenge ahead due to the vast diversity on the policy status of obesity within EU Member States. To reach consensus and drive political action on obesity, it will be essential to have obesity recognised as a chronic disease and as a health and societal priority in Member States.

At the same time, there needs to be a financial commitment from the EU to advance action on obesity. European Commissioner Varhelyi mentioned potential funding for Member States under EU4Health, this needs to become a reality. Currently obesity is overlooked at EU level even though obesity is a significant concern in some Member States, and therefore financial commitment is needed as part of the solution.

Inspiration can be taken from the European Beating Cancer Plan to create a dedicated workstream and funding for research on

obesity, with a focus on health literacy and developing evidence-based parameters for prevention and professional training. Dedicated funding at Member State level will also be essential as Member States will require appropriate funding mechanisms to develop the agile, modern health systems needed to effectively address obesity.



"We need robust action in the healthcare policy system – we need to stop being so siloed. We also need to have the correct people at the decision-making table to ensure that all voices are heard."

Vicki Mooney

European Coalition for People living with Obesity

3. The EU should focus joined-up action on non-communicable diseases

Across the NCDs sphere, it is clear that past policies have been ineffective in addressing the burden of various NCDs. Siloed healthcare systems, too much focus on prevention, and lack of education and awareness of the interconnectivities across NCDs have contributed to this problem.

Throughout the discussions on World Obesity Day, it was clear that the NCD community needs to work together to push for more joined up action on NCDs, particularly between interconnected disease areas. Considering that treating and managing a disease such as obesity might lead to the prevention of other NCDs, the EU may see significant cost savings by implementing a comprehensive strategy that works across the different NCD communities.

It is essential that health policies reflect this interconnectedness and include strategies to address various NCDs simultaneously. Such strategies must be comprehensive and multisectoral, covering the entire disease spectrum from prevention to management, and voices of individual patients should be heard.



"Ultimately, obesity does need its own comprehensive plan at the EU level, but we cannot forget that we are part of the wider NCD community. There is a lot of work that we can already do to integrate obesity into other disease areas."

Euan Woodward

European Association for the Study of Obesity

About EASO

The European Association for the Study of Obesity (EASO) is the leading voice of obesity science, medicine, and community in Europe, representing scientists, health care professionals, physicians, public health experts and patients. As an accredited partner of WHO Europe, EASO represents 40 National Associations and a network of over 200 accredited specialist treatment centres.

EASO's Members



Belgian Association for the Study of Obesity (BASO)



Dansk Selskab for Adipositas Forskning - Danish Association for the Study of Obesity (DSAF or DASO)



Finnish Association for the Study of Obesity (FASO)



Deutsche Adipositas Gesellschaft; German Association for the Study of Obesity (DAG)



Icelandic Society for Obesity Research and Prevention (FFO)



Association for the Study of Obesity on the Island of Ireland (ASOI)



Netherlands Association for the Study of Obesity (NASO)



Norsk Fedmeforskningsforening; Norwegian Association for the Study of Obesity (NFFF)



National Association of Dieticians and Nutritionists (Russia): Working Group for the Study of Obesity



Svensk Förening för Obesitasforskning: Swedish Association for the Study of Obesity (SFO)



Association for the Study of Obesity (ASO)



Austrian Obesity Association (ASO)



Croatian Obesity Society (COS)



Czech Society for Study of Obesity (CSSO)



Association Française d'Etudes et de Recherches sur l'obesite (AFERO)



Georgian Association for the Study of Obesity



Hungarian Society for the Study of Obesity (HSSO)



Lietuvos nutukimo asociacija (Lithuanian Obesity Association)

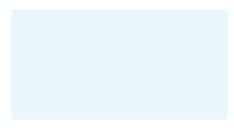




Romanian Association for the Study of Obesity (RASO)



Slovak Obesitology Association (SOA)



Professional Section of the Slovenian Association for Obesity



Association Suisse pour l'Etude du Metabolisme et de l'Obesite (ASEMO)



Armenian Association of Obesity Prevention – AOP



Academy of Nutrition, Dietetics and Obesity Prevention



Association for Obesity in Bosnia and Herzegovina



Bulgarian Association for the Study of Obesity and Related Diseases (BASORD)



Hellenic Medical Association for Obesity (HMAO)



Israeli Society for Research and Treatment of Obesity (ISRTO)



Societa Italiana dell'Obesita (SIO)



Malta Obesity Association



Montenegrin Association for the Study of Obesity (MASO)



Sociedade Portuguesa para o Estudo da Obesidade (SPEO)







Sociedad Española para el Estudio de la Obesidad (SEEDO)

Turkish Association for the Study of Obesity (TASO)

