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BMI, WHR, and Lifestyle

The study we've been examining is interesting on so many levels: large numbers of subjects; new statistical techniques due in large part to progress in computing capabilities; genetic analysis that allows for rapid analysis and identification of polymorphisms. It's all very exciting. You're probably anticipating a "but" coming and you'd be correct.

This study demonstrated that when using genetic information, WHR is a risk for CVD and type 2 diabetes even with a normal BMI. But there's still at least two factors to consider that are dependent on each other.

First, just because someone has a mutated gene or genes, it doesn't mean it will ever express itself, i.e., turn on. More than likely, the second factor has a role to play and that's the lifestyle of the individual. Some studies refer to it as environment, but they're intertwined. Where you live may limit or provide you with easy access to healthier foods. It may be easier to exercise in the suburbs than in a large city, or just the opposite given the park systems in different areas of the countries.



Then there's the home environment: what foods you ate growing up and what your diet is now. All these can impact whether some genes may be expressed. Others may express themselves only when you get to a specific weight or fat intake. The variables are too numerous to consider.

I'm not attempting to confuse the issue. I just want you to know that while this study provides insight that we didn't have before, you don't have to be overly concerned. If you keep to a normal BMI and WHR, less than 0.9 for men and less than 0.8 for women, your risk for CVD and type 2 diabetes will not be high.

When all is said and done, it still comes down to three things. Eat less. Eat better. Move more.

What are you prepared to do today?

Dr. Chet

Reference: JAMA. 2017;317(6):626-634.

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