The rate of obesity (defined as a “Body Mass Index” or BMI of 30 or above) has more than doubled over the past 20 years. According to World Health Organization statistics, over 50% of men and women are overweight, and 20% men and 23% women are obese. (43)

As many as 200 million adults may be overweight or obese in the EU – that is, over half the adult population. (44) Almost one-quarter (24%) of children aged 6-9 years are overweight or obese across Europe, albeit with regional variations. (45)

Total healthcare costs of overweightness and obesity to the UK National Health Service are currently estimated to be €6.1 billion per annum, whilst the European Commission estimated that obesity costs in the EU represent 7% of its total health care spending in 2006. (44) This equates to around €81 billion per year in 2012. (43) These estimates are in broad agreement with the World Health Organization who estimated that obesity accounts for 2-8% of health care spending in the 53 countries of the European region. (43)

Obesity also causes a range of very serious physical and mental health problems, ranging from diabetes to cancers, heart diseases, infertility to psychological disorders. (43) Because obesity is associated with higher risks of chronic illnesses,
it also adds significantly to health care costs indirectly. (45) Related to this, there is potential overlap between the costs of obesity as presented above, and those for diabetes presented below since diabetes type 2 may result from obesity. However, we do not know the extent of this potential overlap and so assume in this calculation that the two costs are separable and additive.

**DIABETES**

Diabetes absorbs up to **10% of health care budgets in some EU countries**

Diabetes is one of the most common non-communicable diseases in Europe. The vast majority of cases are Type 2. Current prevalence of diabetes in adults aged 20-79 years is about 6% across the EU and ranges from close to 5% in the UK, 6% in France, Greece, Italy and Spain to over 7.5% in Poland and Portugal, and around 9% in Germany and Cyprus. (46) Prevalence is predicted to increase by 17% by 2030 across all age groups in Europe. (47) The burden on health care systems is currently equivalent to more than 10% of national healthcare expenditure and is expected to rise. (47) This figure hides national variations: the burden ranges from 15% of the health care budget in the Czech Republic, 11% in Lithuania and Finland, 6% in Italy and Spain, 5% in France and 3% in Netherlands. (48)

A study by the London School of Economics (49) calculated the direct cost burden of people with diabetes across five EU countries to be €90 billion. This figure includes “the cost of complications or medical conditions some of which may not necessarily be caused by diabetes, but can be exacerbated by it.” Indirect costs, (absenteeism, early retirement, social benefits), for the five countries - Germany, UK, Spain, France and Italy – comprised a further €98.4 billion in 2010. The study also showed that health care expenditures on diabetes in France, Germany, Italy, Spain and UK increased rapidly between 2000 and 2008. The greatest spending growth on diabetes per capita in the eight-year period was in Spain (85%), followed by Italy (43%), France (41%), UK (39%) and Germany (22%).
Table 7
Costs and trends in overweightness and obesity, and diabetes

<table>
<thead>
<tr>
<th>Endocrine-related disease or condition</th>
<th>Incidence/prevalence trends</th>
<th>Cost of illness</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Obesity</strong></td>
<td>Prevalence of obesity in EU has more than doubled over the past 20 years&lt;br&gt;Over 50% of men and women are overweight, 20% men and 23% women obese</td>
<td>Costs of obesity in EU28: €81 billion</td>
</tr>
<tr>
<td><strong>Diabetes</strong></td>
<td>30 million people in EU = 6% of population between ages 20-79 (46)&lt;br&gt;Upward trend: prevalence increasing by approx. 1% every 3 years (47)</td>
<td>Costs of diabetes in EU28: €300 billion</td>
</tr>
</tbody>
</table>