Economic Benefits of Obesity Treatment: Review of the Current Literature

This review synthesizes evidence from 31 studies published between January 2012 and June 2025 across a range of obesity treatment categories to evaluate the annual benefits per treated person:

Healthcare Cost Savings | **Quality of Life Value** | **Indirect Cost Benefits**

Strong evidence exists for healthcare savings and quality of life benefits from obesity treatment but the indirect economic benefits such as productivity improvements have not been rigorously studied

Note: All cost estimates in 2025 dollars

TREATMENTS CATEGORIES

Intensive Lifestyle Management

Intensive lifestyle management (diet, exercise, behavior support) yields ~5.2% weight loss

Metabolic/Bariatric Surgery

Surgery (bypass, sleeve, banding) yields ~24.8% weight loss in severe obesity

Obesity Medications

Obesity medications (OMs) are pharmacological treatments that work through mechanisms including appetite suppression, delayed gastric emptying, and improved glucose metabolism

Modern OMs

Incretin-based OMs (e.g., semaglutide, tirzepatide) achieving up to 20.1% average weight loss in trials

First-Generation OMs

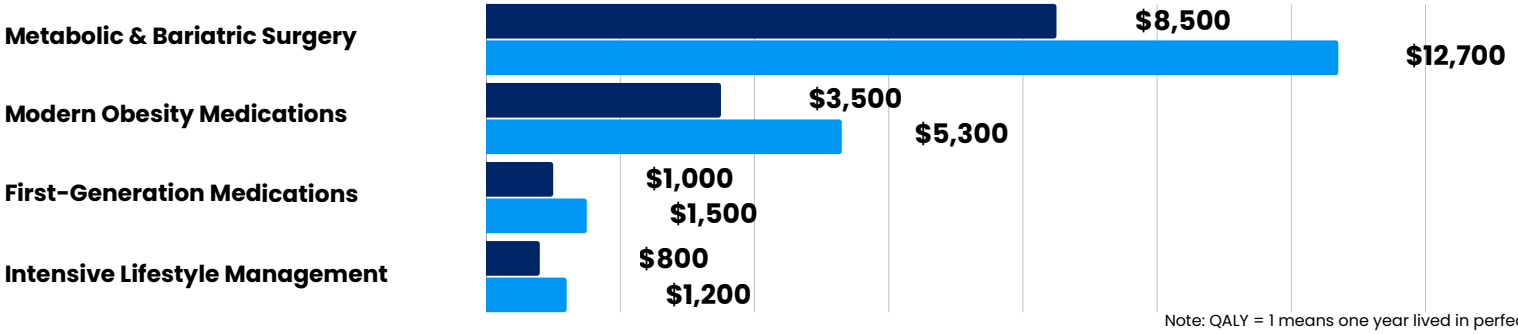
Prior FDA-approved OMs (orlistat, phentermine/topiramate, bupropion/naltrexone) yield ~5.2% weight loss

ESTIMATED ANNUAL HEALTHCARE COST SAVINGS

INTERVENTION TYPE	INSURANCE	ANNUAL HEALTHCARE COST SAVINGS - OBESITY	ANNUAL HEALTHCARE COST SAVINGS - OBESITY WITH DIABETES
Metabolic & Bariatric Surgery	Commercial	$1,880 - $2,780	$4,270 - $5,830
	Medicaid	$940 - $1,190	$2,180 - $2,430
Modern Obesity Medications	Commercial	$1,530 - $2,250	$3,460 - $4,720
	Medicaid	$760 - $960	$1,770 - $1,970
First-Generation Medications	Commercial	$400 - $580	$890 - $1,220
	Medicaid	$200 - $250	$460 - $510
Intensive Lifestyle Management	Commercial	$400 - $580	$890 - $1,220
	Medicaid	$200 - $250	$460 - $510

ANNUAL QUALITY OF LIFE YEAR (QALY) VALUE PER TREATED PERSON

Using established thresholds of $100,000 to $150,000 per QALY



Note: QALY = 1 means one year lived in perfect health

RECOMMENDATIONS

1. **Adopt comprehensive economic frameworks that capture healthcare savings, QALYs, and broader benefits for a more complete picture of obesity treatment value**
2. **Ensure access to the full spectrum of evidence-based treatments so patients and providers can choose the most effective, cost-efficient options**
3. **Align cross-payer value through policy risk-sharing arrangements, outcomes-based contracts, cross-payer coordination, and expanded public coverage**
4. **Support long-term treatment durability with ongoing clinical support, real-world data collection, and tailored patient-centered care**
5. **Strengthen evidence on indirect economic benefits, such as productivity gains and reduced disability costs, to capture obesity's full societal impact**

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