Letter to the Editor

New Criteria for 'Obesity Disease' in Japan

To the Editor:

The American Heart Association¹ and IDF² stated that the criteria of abdominal obesity were waist circumference (WC) ≥90 cm in men and ≥80 cm in women for Asian populations other than Japanese, and ≥85 cm in men and ≥90 cm in women for Japanese. They indiscriminately accepted recently issued Japanese definition and criteria of metabolic syndrome, which were proposed by the Examination Committee of Criteria for 'Obesity Disease' in Japan set up by the Japan Society for the Study of Obesity⁴ (ie, WC of 85 cm in men and 90 cm in women) as equivalent values for visceral fat area (VFA) of 100 cm². However, these cutoff-points of WC result from the inappropriate presupposition that VFA is linearly proportional to WC. They determined the values by linear regression y=ax-b, where y=VFA and x=WC, though in fact, the dots in their VFA-WC graphs were scattered along quadratic lines4 These distributions are natural because the area varies with the square of the circumference. If they had determined the cutoff-points of WC by quadratic regression lines or by receiver-operating characteristic curves as they did to determine the cutoff-points of BMI and VFA, the values might have been equivalent to the Asian criteria: ≥90 cm in men and ≥80 cm in women.

References

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Author's Reply Cutoff Point of Waist Circumference in Japan

We thank Dr Oda for his interest in our article! He commented that the linear regression analysis between visceral fat area (VFA) and waist circumference (WC) was inappropriate and recommended a quadratic regression analysis. When we re-examined the analysis, the WC corresponding to $100\,\mathrm{cm}^2$ was $84.2\,\mathrm{cm}$ in men and $92.0\,\mathrm{cm}$ in women by quadratic regression analysis, compared with the values from linear regression analysis of $84.4\,\mathrm{cm}$ in men and $92.5\,\mathrm{cm}$ in women. There were little differences between curve and linear approximations in both sexes.

The cutoff-points of WC for Asian populations are 90 cm in men and 80 cm in women as proposed by WHO/IASO/IOTF^{2,3} however, the value is defined as a predictive one for clustering risk factors. On the other hand, the WC in Japanese criteria is assumed to be a marker for VFA, which is an essential factor in the new criteria of metabolic syndrome proposed by JSIM or the IDF^{4,5} Accordingly, we think that the Japanese cutoff-points of WC are appropriate and the only ones supported by evidence. The Asian committee, of which we are a part, is now studying the standardization of the cutoff-points of WC in Asia populations.

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