

REPLY

# Toxic stress from childhood trauma causes obesity, too

MAY 23, 2012 By Jane Ellen Stevens in ACE STUDY, CHILD TRAUMA, CHRONIC DISEASE, NEUROBIOLOGY 32 COMMENTS



(<https://acestoohigh.files.wordpress.com/2012/05/obesityhbo.jpg>)

HBO's four-part series, "The Weight of the Nation" (<http://theweightofthenation.hbo.com/>), says a lack of exercise, genetics, an overabundance of sugar and food marketing cause 78 million Americans to be obese and morbidly obese (<http://www.cdc.gov/obesity/data/adult.html>). But HBO missed something significant — the link between obesity and adverse childhood experiences. For millions of people, it's more important than all the rest.

More than six million obese and morbidly obese people are likely to have suffered physical, sexual and/or verbal abuse during their childhoods, according to the Centers for Disease Control and Prevention's ACE Study (<http://www.cdc.gov/ace/>). It's likely that millions more can point to other types of childhood trauma — including loss of a parent through divorce, living with an alcoholic parent or a mentally ill family member — or other traumatic experiences such as rape or assault — as a starting point for their weight gain.

Here's the critical irony: Many people who are obese look at eating as a solution, not a problem. Food offers comfort ....a sure, but temporary escape and relief from stress, bad memories, shame, or guilt, even when obesity becomes uncomfortable or even life-threatening.

For many millions of overweight people, information about diets, nutritional advice, food marketing or exercise are irrelevant and will have no effect.

But what will? Well, to get to that answer, you have to go back a few years.

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The year was 1985. Dr. Vincent Felitti was mystified. The physician, then chief of Kaiser Permanente's Department of Preventive Medicine in San Diego, couldn't understand why 55 percent of the 1,500 people who enrolled in his weight-loss clinic every year left before completing the program.

He was especially confused after examining their medical records: Almost all of the dropouts had been losing, not gaining, weight. It didn't make sense. Why were people who were dropping pounds dropping out?

Felitti had started the weight-loss clinic in 1980 because many Kaiser Permanente members suffered from health problems, such as diabetes and heart attacks, which were exacerbated by their weight. When patient records of the drop-outs did not reveal a pattern, Felitti decided to ask those who had left the program if he could interview them, and 286 agreed.

During the interviews, two clues surfaced: The first was that none of the participants was born fat – all had normal or below normal birth weights. The second was that people who were severely overweight didn't gain 10 or 20 pounds a year over several years.

"I had assumed that people who were 400, 500, 600 pounds would be getting heavier and heavier year after year. In 2,000 people, I did not see that once," says Felitti. When they gained weight, they did so abruptly and then stabilized. If they lost weight, they often regained all of it or more, within weeks or months.



(<https://acestoohigh.files.wordpress.com/2012/05/avafelitti.png>)

Dr. Vincent Felitti

The turning point in Felitti's inquiry came by accident. The physician was running through a series of questions with yet another clinic dropout: How much did you weigh when you were born? In first grade? In high school? How old were you when you became sexually active? How much did you weigh when you married?

"I misspoke," he recalls. "Instead of asking, 'How old were you when you were first sexually active,' I asked, 'How much did you weigh when you were first sexually active?' The patient, a woman, answered, 'Forty pounds.'"

He thought he'd misheard. He asked again. She gave the same answer, began sobbing, and added: "It was with my father."

The moment remains vivid, says Felitti: "I remembered thinking, 'This is only the second incest case I've heard about in 23 years of practice.' I didn't know what to do with the information. About 10 days later, I ran into the same thing. It was very disturbing. It seemed that every other person was providing information about childhood sexual abuse. I thought, 'This can't be true. Someone would have told me in medical school.'"

Another piece of the puzzle dropped into place during an interview with another clinic dropout, a woman who had been raped when she was 23. In the year after the attack, she gained 105 pounds. "As she was thanking me for asking the question," says Felitti, "she looks down at the carpet, and mutters, 'Overweight is overlooked, and that's the way I need to be.'"

Felitti began to realize that obese people didn't see their fat as a problem. For many, it was a solution.

In 1990, Felitti presented his findings at a meeting of the North American Association for the Study of Obesity in Atlanta. Its members told him he was naïve to believe his patients, and they loudly denigrated the study. However, Dr. David Williams, then a researcher from the Centers for Disease Control and Prevention (CDC) was intrigued. "He told me that people could always find fault with a study of 100 people," says Felitti, "but not if there were thousands. I said that wouldn't be a problem."

Williams introduced Felitti to Dr. Robert Anda, a medical epidemiologist at the CDC. Anda had been studying how depression and feelings of hopelessness affected coronary heart disease. Researchers had known since the 1960s that behavior and disease are strongly linked. Drinking too much alcohol for too long can cause liver disease, for example. Excessive eating that leads to carrying a lot of extra weight is linked with diabetes, which can lead to blindness and amputation. But what physicians and public health experts didn't understand is why people start and continue to smoke, drink or eat excessively, even when they know it's bad for them.

Anda took six months to research 15 years of child abuse literature, and selected 10 risk factors to measure. Besides the usual suspects: physical, verbal and sexual abuse, and physical and emotional neglect, five others seemed significant. Those were having a parent who was an alcoholic or diagnosed mentally ill, a family member in prison, a mother who was being abused, and losing a parent through abandoned or divorce. Anda and Felitti decided to call their research the Adverse Childhood Experiences Study (ACE Study).



(<https://acestoohigh.files.wordpress.com/2012/05/avaanda.jpg>).

Felitti and Anda, with a dozen other researchers who contributed to the work, published their first findings in 1998 and 1999 in two papers in the American Journal of Preventive Medicine ([http://www.ajpmonline.org/article/S0749-3797\(98\)00017-8/abstract](http://www.ajpmonline.org/article/S0749-3797(98)00017-8/abstract)) and the Journal of the American Medical Association (<http://www.ncbi.nlm.nih.gov/pubmed/10553792?dopt=Abstract>). Since then, they have published 59 other papers in other prestigious medical journals, including Pediatrics, Child Abuse and Neglect, and the International Journal of Obesity.

“We came up with the conclusion that ACEs were the major determinant of the health and social well-being of members of the Kaiser Health Plan,” says Anda. Since that time 18 states have done their own ACE surveys, with similar results.

The researchers came up with an ACE score (<https://acestoohigh.com/got-your-ace-score/>) to explain a person’s risk for chronic disease. Think of it as a cholesterol score for childhood toxic stress. You get one point for each type of trauma. The higher your ACE score, the higher your risk of health and social problems.

A whopping 70 percent of the 17,000 people in the ACE Study had an ACE score of at least one; 87 percent of those had more than one. With an ACE score of 4 or more, things start getting serious. The likelihood of chronic pulmonary lung disease increases 390 percent; hepatitis, 240 percent; depression 460 percent; suicide, 1,220 percent.

By the way, lest you think that the ACE Study was yet another involving inner-city poor people of color, take note: The study’s participants were 17,000 mostly white, middle and upper-middle class college-educated San Diegans with good jobs and great health care – they all belonged to Kaiser Permanente, a health maintenance organization and one of the sponsors of the HBO series. As Anda has said: “It’s not just them. It’s us.”

The researchers had uncovered what Anda calls a “chronic public health disaster”.

About the same time that Anda and Felitti were doing their research, neurobiologists were discovering why childhood trauma can lead to chronic illness. The toxic stress of the types of adverse experiences in the ACE Study causes the continual release of an overabundance of stress hormones. This physically damages a child’s developing brain (<http://developingchild.harvard.edu/>). This was determined by a group of researchers and pediatricians, including neurobiologist Martin Teicher (<http://www.mclean.harvard.edu/about/bios/detail.php?username=mteicher>) and pediatrician Jack Shonkoff ([http://developingchild.harvard.edu/about/center\\_director\\_and\\_staff/#Shonkoff](http://developingchild.harvard.edu/about/center_director_and_staff/#Shonkoff)), both at Harvard University, neuroscientist Bruce McEwen (<http://www.rockefeller.edu/research/faculty/abstract.php?id=109>) at Rockefeller University, and pediatrician Bruce Perry at the Child Trauma Academy (<http://www.childtrauma.org/>).

Piece together the ACE Study and neuroscience of childhood trauma and you get a compelling story:

Children with toxic stress live their lives in fight, flight or fright (freeze) mode. They respond to the world as a place of constant danger. With their brains overloaded with stress hormones and unable to function appropriately, they can’t focus on schoolwork. They fall behind in school or fail to develop healthy relationships with peers or create problems with teachers or principals because they are unable to trust adults. With failure, despair, and frustration pecking away at their psyches, they find solace in food, alcohol, tobacco, methamphetamines, inappropriate sex, high-risk sports, and/or work. They don’t regard these coping methods as problems. They see them as a way to obtain relief and to escape from depression, anxiety, anger, fear and shame. In other words, a solution, not a problem.

Do the results of the ACE study mean that all obese people were sexually abused as children? Not at all, say the researchers.

“We don’t want to conclude that every obese child or adult has experienced child sex abuse,” says David Williamson, a CDC researcher who used ACE study data to look at the link between child trauma and obesity (<http://www.ncbi.nlm.nih.gov/pubmed/12119573?dopt=Abstract>).





(<https://acestoohigh.files.wordpress.com/2012/05/avawilliamson.jpg>)

Williamson is comfortable with saying that there's a link between child abuse – physical, verbal and sexual – and obesity in at least 8 percent of the obese population. That means that among the 78 million obese and morbidly obese (<http://www.cdc.gov/obesity/data/adult.html>). Americans, that the CDC says exist, more than six million overweight people are likely to have suffered physical, verbal and/or sexual abuse during their childhoods.

Anda concurs and goes a step further: "There are many paths to obesity; ACE is but one."

But it's a significant path. In a special communication in the Journal of the American Medical Association (<http://jama.jamanetwork.com/article.aspx?articleid=184019>) in 2009, Shonkoff, McEwen and Dr. W. Thomas Boyce examined the roots of health disparities, and gave this example:

*In 2008, the American Academy of Pediatrics issued a report to address a "new urgency given the current epidemic of childhood obesity with the subsequent increasing risk of type 2 diabetes mellitus, hypertension, and cardiovascular disease in older children and adults." The report underscored the need for a more proactive approach in childhood to the prevention of cardiovascular disease through enhanced adherence to dietary guidelines, increasing physical activity, and consideration of pharmacologic treatment of dyslipidemia beginning as early as age 8 years. What the report did not consider is the idea, based on growing evidence of the cardiovascular sequelae of early life adversity, that new interventions to reduce significant stress in early childhood may be a more appropriate strategy for preventing adult heart disease than the off-label administration of statins to school-aged children.*

Williamson's study did not include the ACE study's other categories: two types of neglect and five types of family dysfunction. And, so, for many other people who are obese, Felitti believes it is likely that some type of trauma marks the starting point of the path to obesity. The question requires more research, he says, but "what we're convinced of at this point is that we've made a major landing on the right beach."

On this beach, says Felitti, fixing the obesity problem with diets or advice about eating won't have any effect. "Nutrition is a nice subject and has nothing to do with obesity," he explains. "Teaching people about nutrition is essentially predicated on the assumption that people get fat because they don't know any better."

~~NEXT WEEK~~ SOON! — A weight clinic that looks at being obese as a solution, not a problem.

## 32 responses

Pingback: [Die wahre Ursache von Depressionen wurde möglicherweise komplett übersehen!! -](#)

SUSAN HAWKES says:

September 29, 2018 at 3:31 am

Could we try mdma and memory reconsolidation for ptsd as a diet?

Pingback: [The body keeps the score – Stuff that doesn't fit in 280 characters](#)

Pingback: [Mind Your Own Damned Business – Miss Dimity Swick](#)

Pingback: [Die wahre Ursache von Depression wurde möglicherweise komplett übersehen – .](#)

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SCOTSWHAHAE says:

November 29, 2017 at 10:13 am

Obesity is not about nutrition. It us a sign of human needs not being met. It is an overcompensation in one area to soothe a harm or trauma or unmet need. The ACE study may well unlock the mysteries behind psychopathic and narcissistic family abuse which enslaved children to their parents and often leaves the children who were golden children the next generation just like their parents. Whilst the scapegoat child if they survive can become an empathic and truth telling chronicler of the situation with the power to shine a light on to remedy this for other survivors. The more we learn scientifically about this the better off the human race will be. Thanks to all those involved in this work you are amazing.

LISA says:

April 7, 2017 at 5:21 pm

Here's the thing that isn't being realized in this article. You don't have to be an over eater or poor eater to have obesity as a result of childhood trauma ptsd. I'm a health nut. I eat very healthy, no junk and within the calorie range depending for my activity level and I'm still dealing with this. My husband says you are the healthiest eater I've known. You should be the healthiest person ever. Yet as I've gotten older my weight keeps going up. I recently found out via testing that my cortisol is sky high. People who were abused have chronic high cortisol. I was beaten and shaken and thrown around as a toddler and preschooler and continuing through my childhood. I've never had counseling or treatment of any kind. Most never knew I suffered abuse. No one ever asked or said you need help either in medicine or otherwise. But I had lots of problems coping with relationships and jobs and constant health problems. I always tried nutrition lifestyle and medical help to address

the health problems but it's only been minimally effective. I think my weight issues could be rooted in my past. For many even if you eat well having constant stress and high cortisol is going to cause weight gain over time.

Pingback: [Survivors Breaking the Rules and Telling the Truth about Healing | WE Survive Abuse](#)

Pingback: [Survivors Breaking the Rules and Telling the Truth about Healing – WE Survive](#)

Pingback: [The One Voice Project: Colorado's SPOTLIGHT Moment – Strengthening the Response to Adult Survivors of Childhood Sexual Abuse | Colorado Coalition Against Sexual Assault](#)

MIRIAM GORDON says:

May 1, 2016 at 6:39 pm

Reblogged this on [Parallelaphors™](#) and commented:

These studies were pretty robust in the late 1990s. Why is this only getting attention now?

Pingback: [Rob Hartman – Childhood Stress & Complex PTS](#)

Pingback: [Adverse Childhood Experiences Study – labs.stressfreedc.org](#)

CHESS says:

December 24, 2015 at 6:03 am

Ellen on October 24, 2015 at 10:08 am wrote: "...What I have NOT found is an article about healing up from this. How to heal your brain and the self after abuse. Sure, state that nutrition education isn't effective for people with these issues. Fine. But offer a solution."

Suggestion: Find a trained and qualified EMDR therapist in your area. They will help you.

Pingback: [ACES - Adverse Childhood Experiences Study - StressFreeDC](#)

ELLEN says:

October 24, 2015 at 10:08 am

This is all very important information and I identify with this. I've stumbled upon a few articles along these themes. What I have NOT found is an article about healing up from this. How to heal your brain and the self after abuse. Sure, state that nutrition education isn't effective for people with these issues. Fine. But offer a solution.

CHESS says:

December 24, 2015 at 6:07 am

EMDR Therapist. Certified by EMDRIA (EMDR = Eye Movement Desensitization & Reprocessing). It addresses trauma, such as mentioned in this article. Good luck & all the best.

KAREN DONALDSON says:

November 2, 2016 at 1:40 pm

Hi Ellen. I am a dietitian but, more importantly, an EFT (Emotional Freedom Techniques) Certified Weight Loss Coach. I use EFT (tapping) as a mind-body tool to aid in healing traumas, including those from sexual abuse. Please feel free to email me at [excelweightloss@gmail.com](mailto:excelweightloss@gmail.com).

RODNEY CROWSE says:

September 30, 2015 at 9:05 am

I think this article touches on a very valid point, but there's one statement, I really take issue with. I even find it somewhat offensive:

"Many people who are obese look at eating as a solution, not a problem. Food offers comfort ....a sure, but temporary escape and relief from stress, bad memories, shame, or guilt, even when obesity becomes uncomfortable or even life-threatening."

No obese people will agree to this. Most would like lose weight to increase health and self-esteem, but there is a strong physiological propensity for the body to fight against weight loss. Addiction perpetuated by a temporary good feeling after overeating, what you call "comfort," which is a term I sorely dispute, are entirely subconscious and often followed by guilt and starvation behavior. Some studies suggest many obese people actually eat less than average weight people, but their eating habits are more irregular or they eat, less healthy types of foods, or they have hormonal imbalances or other health problems. Your statement smacks of the "They're fat just because they want to be." mentality. The secret to weight loss is a total overhaul of eating habits and philosophy on food. Replace bad, unhealthy foods with good, low fat, high nutrient food. Discipline on eating habits can never occur when there is a nutrient deficiency or imbalance.

JANE ELLEN STEVENS says:

September 30, 2015 at 9:01 pm

Many obese people told me this, and it's a common theme in the weight clinic that Dr. Vincent Felitti started at Kaiser Permanente, which led to the Adverse Childhood Experiences Study. Instead of asking people who came to the clinic, "How's the weight hurting you?", he asked "How does gaining weight working for you?" And the answers poured out — I gained weight so that men wouldn't bother me. I gained weight so that classmates would stop bullying me. I gained weight so that I would be overlooked. I eat because I'm unhappy. There's more information in [this story](#).

JULES1050 says:

August 19, 2015 at 9:25 pm

I think my ACE score was 8. I have obesity but hate it, do not see it as a solution, consciously anyway. How can I recover & get healthy & heal my brain? I am 48 now.

Pingback: [What's Your ACE Score? | Darkness to Light Blog](#)

KASHIF ANSARI says:

May 8, 2015 at 11:49 am

you are right on target about this. my father once hit me on the face with a flip flop slipper when i was fourteen years old. he even had the chutzpah to hit me on the face with his hands on the day when i attempted suicide by cutting my wrists, the bastard had a bad habit of delivering lectures on sex and morals and religion. this i hated when i was an adolescent. he even destroyed my love affair. as for my mother she was a savage monster. she hit me hard every occasion she got in my childhood. once she took a pencil and stabbed me in the thigh so that the blood started oozing from the wound. she even hit me with a slipper once all over my body when i was in my teens so that it left marks and welts all over my body. i currently weigh 280 pounds. and i have diabetes, high uric acid levels, high blood pressure and ten thousand other diseases. i was diagnosed with bipolar and am living a life of sadness and general apathy despite being married. i pity my wife for putting up with me. may such parents as mine rot in hell for what they did to me. the insults and pain and poison i have had to tolerate all my life thanks to their venomous style of child rearing is something that no one ought to go through. i just wish they would die on the spot and i could spit on their graves.



RODNEY CROWSE says:

September 30, 2015 at 9:07 am

Hang in there. You aren't the only one.

Pingback: [Creating Sanctuary](#).

Pingback: [What is the ACE Study? | Darkness to Light Blog](#)

Pingback: [The link between child sexual abuse and obesity | Darkness to Light Blog](#)

## ACEs Too High

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