

Briefing Note for the Member Forum, Content Managers Advisory Group,
Clinical Leads and Community of Practice
25th February 2026

Planned modelling updates to obesity and central obesity concepts

Informational only
Version 1.0

Purpose

Following review and agreement within the Nutrition & Dietetics Clinical Reference Group, this briefing note informs the SNOMED community of planned modelling updates to concepts relating to obesity and central obesity. The changes address identified clinical inaccuracies and align SNOMED CT with internationally accepted definitions and usage.

Background

A number of SNOMED CT concepts relating to obesity and its subtypes, including:

- 414915002 |Obese (finding)|
- 414916001 |Obesity (disorder)|
- 248311001 |Central obesity (disorder)|

are currently modelled using **measured body weight above reference range** as the defining characteristic.

Clinical experts have confirmed that this approach does not reflect how obesity is diagnosed in clinical practice. Obesity is consistently defined as a condition of **excess body fat**, and individuals may meet diagnostic criteria for obesity despite having normal or near-normal body weight. This issue therefore affects both the parent concepts and their descendants.

Issues/problem statement

Expert and Clinical Reference Group review identified the following issues:

- Obesity is diagnosed on the basis of **excess adiposity**, not body weight alone.
- Central obesity is characterised by **excessive central distribution of adipose tissue**, rather than overall body weight.
- Modelling obesity in terms of body weight risks clinical inaccuracy and inconsistency with international guidance.
- As a consequence of the current modelling, all obesity concepts and their subtypes are represented as descendants of 840358001 |High body weight (finding)|, implying that high body weight is a necessary characteristic of all forms of obesity. This is not always clinically true.
- Additionally the concept 840358001 |High body weight (finding)| was highlighted as ambiguous, conflating body weight measurement with clinical interpretation and lacking a defined reference standard.

As a result, the current modelling does not accurately represent the clinical concepts.

Supporting evidence

- National Heart Lung and Blood Institute

Overweight and obesity are common conditions in the United States that are defined as the increase in size and amount of fat cells in the body. [What Are Overweight and Obesity? | NHLBI, NIH](#)

- WHO

Overweight and obesity are defined as abnormal or excessive fat accumulation that presents a risk to health. [Obesity](#)

- Obesity Medicine Association (OMA)

Obesity is a chronic, progressive neurobehavioral disease characterized by increased body fat with adverse health consequences. Fitch, A. K., & Bays, H. E. (2022). [Obesity definition, diagnosis, bias, standard operating procedures \(SOPs\), and telehealth: An Obesity Medicine Association \(OMA\) Clinical Practice Statement \(CPS\) 2022 - PMC](#)

Proposed solution

The following modelling changes have been agreed with obesity experts and the CRG:

414915002 |Obese (finding)|

- Interprets = Body fat
- Has interpretation = Excessive

414916001 |Obesity (disorder)|

- Interprets = Body fat
- Has interpretation = Excessive

248311001 |Central obesity (disorder)|

- Interprets = Distribution of body fat
- Has interpretation = Excessive

These changes reflect that excess body fat is the defining characteristic of obesity, and that central obesity is defined by an excessive distribution of adipose tissue. Clinical experts also advised that modelling obesity in terms of excess body fat does not preclude the continued use of proxy measures (such as body mass index, waist-hip ratio, waist-height ratio, or waist circumference) where direct assessment of body fat is not available, pending wider adoption of more accurate body composition methods (e.g. DXA and CT).

Concept Inactivation

- 840358001 |High body weight (finding)| will be inactivated as ambiguous and POSSIBLY EQUIVALENT TO 238131007 |Overweight (finding)| or to the newly added 1388902000 |Body weight above reference range (finding). As a result 414915002 |Obese (finding)| is now a subtype of 366319001 |Body fat finding (finding)|.

Hierarchy and Synonym Review

The following hierarchy and synonym updates have been agreed with obesity experts and the CRG:

- 238132000 |Android obesity (disorder)| will remain a subtype of 248311001 |Central obesity (disorder)|, as it represents a more specific pattern of fat distribution. This has been confirmed by clinical experts.
- The synonym “**Android fat distribution**” will be removed from 248311001 |Central obesity (disorder)| and added to 238132000 |Android obesity (disorder)|.

- Existing synonyms for 238132000 |Android obesity (disorder)| (e.g. *abdominal obesity*) remain unchanged.
- The synonyms “**visceral obesity**” and “**central adiposity**” will be added to 248311001 |Central obesity (disorder)| to reflect common clinical usage and international terminology.

Impact to content users

These changes improve clinical accuracy and international consistency and support use cases including:

- Clinical documentation and diagnosis
- Population health and epidemiological analysis
- Alignment with international guidance and research

As a result of the updated modelling, **91 concepts** (including parent concepts and their descendants) will have changes to their logical definition.

Next Steps

The agreed changes will be implemented in a future SNOMED CT International Edition release, and early visibility notification will be posted to the community.

Release date

Expected May 2026 Release

Approvals	Date	Name
Chief Terminologist	Dec 17, 2025	James T. Case
Director of Content and Mapping	Jan 5, 2026	Monica Harry
CSRM	Jan 5, 2026	Kelly Kuru

Elaine Wooler, 2026-02-25