

# Ask Leyla: I have a healthy BMI, but a high waist-to-hip ratio – what should I do?



**Q:** My BMI is 19.8 but my waist-to-hip ratio is .96. My body fat percentage as measured in a health club ranges from 38 to 40 percent! My doctor said it's hereditary—both my mother and grandmother carried weight around the midsection.

My HgbA1c is 5.6 to 5.8. I exercise every day which includes biking, hiking, strength training and skiing. Am I in big trouble?

**A:** The waist-to-hip ratio (WHR) is an indicator of health status and determines the presence of abdominal obesity—a risk factor for chronic disease such as diabetes and cardiovascular disease. Abdominal obesity is defined as a WHR above 1.0 (for men) and 0.8 (for women) by the National Institute of Diabetes, Digestive and Kidney Disorders (NIDDK). You can find the app for WHR [here](#).

While your WHR is in the higher risk range, what's more telling is your body fat percentage (greater than 30% is defined as *metabolic obesity*) and your HgbA1c which puts you in the range of prediabetes.

Here's the conundrum: Your body mass index (BMI) indicates you are well within the normal weight category (normal is between

18.5 and 24.9). And this is why I'm not fond of the BMI as a health determinant: You're the perfect example of someone who is "normal" weight, but metabolically obese. It's simply a poor indicator of weight and health status.

Another example: I have patients who develop high blood pressure with BMIs approaching 23 or 23.5, even though this is considered normal weight. These individuals also tend to carry more body fat.

On the other end of the spectrum, my athletic patients will have a much higher BMI—often over 25 (considered the overweight category), but it's mostly lean body mass with very little body fat—clearly NOT overweight!

*What is most important is the presence of metabolic obesity (body fat percentage as determined by body composition) and abdominal obesity as determined by WHR, not BMI.*

So, you're only in trouble if you *don't* make any changes. Daily exercise is key and you're already doing that. The big change for you will be your diet. Prediabetes is defined as a condition of carbohydrate intolerance. Lower your carbs and you should start to see a change in your WHR and body composition over time.

After four to six months, recheck your HgbA1c. An optimal number would be 5.0.

To your health!

**As you may know, I've been doing a weekly "Q&A with Leyla" podcast feature with Dr. Hoffman. Now you can get my perspective and expertise every Friday on my own episode of the *Intelligent Medicine* Podcast. If you missed last week's, you can listen here. To be sure you don't miss out on any of my important insights and information, subscribe today!**