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May 6, 2026

Submitted electronically: nchscd10cm@cdc.gov

Re: Public Comment on ICD-10-CM Classification for Hypothalamic Obesity

Dear Members of the ICD-10-CM Coordination and Maintenance Committee,

On behalf of the Obesity Action Coalition (OAC), we appreciate the opportunity to provide input on ICD-10-CM classification and the importance of accurately reflecting complex and underserved medical conditions within the coding system.

The OAC is a national nonprofit organization dedicated to improving the lives of individuals affected by the disease of obesity through education, advocacy and support. We work to ensure that individuals have access to evidence-based care, are treated with dignity and respect, and are represented accurately within healthcare systems and policies.

We are writing to strongly support the establishment of a distinct ICD-10-CM diagnosis code for acquired hypothalamic obesity (HO) and to emphasize the urgency of this request from both a patient care and public health perspective.

Acquired hypothalamic obesity is a severe, life-altering condition that develops following injury to the hypothalamus. Common causes include brain tumors such as craniopharyngioma, neurosurgical intervention, traumatic brain injury, radiation therapy or stroke. People affected by this condition experience rapid and uncontrollable weight gain driven by disruption of the body's regulatory systems for hunger, satiety and energy balance.

It is critical to recognize that acquired hypothalamic obesity is distinct from genetic forms of obesity. Its etiology, progression and clinical management differ significantly from other (MC4R-pathway) conditions. As such, it should not be grouped within or delayed by broader considerations related to gene-based coding proposals. Accurate classification must reflect these meaningful clinical differences.

The absence of a dedicated ICD-10-CM code creates real and immediate challenges for people affected by this condition. One gap includes healthcare providers lacking a precise way to document and communicate this diagnosis. Coding limitations can delay or restrict access to appropriate, evidence-based treatments. Further, without accurate coding data, it is difficult to track prevalence, outcomes and treatment effectiveness. Finally, misclassification can lead to inappropriate care pathways and missed opportunities for intervention.

These challenges are especially concerning at a time when advances in obesity care are expanding treatment options. Without a specific diagnosis code, people affected by acquired hypothalamic obesity may face unnecessary barriers to therapies that could meaningfully improve their health and quality of life.



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Establishing a dedicated ICD-10-CM code for acquired hypothalamic obesity would:

- Support accurate and consistent diagnosis
- Improve access to appropriate care and treatment
- Strengthen data collection and research efforts
- Ensure this serious condition is recognized within healthcare systems

This request is about ensuring that people affected by complex forms of obesity are seen, understood and appropriately supported within our healthcare system. Accurate classification is a foundational step in advancing evidence-based care. We respectfully urge the Committee to prioritize the creation of a specific ICD-10-CM code for acquired hypothalamic obesity.

Thank you for your time and consideration. We welcome the opportunity to provide additional insight or connect you with patient and clinical perspectives to further inform this important decision.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracy Zvenyach", with a stylized flourish at the end.

Tracy Zvenyach, PhD
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