

14th GLOBAL OBESITY MEETING

October 23-24, 2017 Dubai, UAE

Effect of lifestyle practices and cultural dietary habits on abdominal obesity and the risk of type-2 diabetes mellitus (type-2 DM) in Jordan

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Background: T2DM is considered as one of the most prevalent diseases in Jordan and worldwide in the last decades. Preventive strategies are needed urgently due to the chronic complications of diabetes such as cardiovascular diseases, stroke, blood vessels damage, nerves atrophy, kidney damage and blindness. Dietary modification, physical activity, medical care, body weight and abdominal obesity and family support are crucial factors which may either improve or worsen glycemic control in diabetic patients.

Objectives: The objectives of this study were to evaluate lifestyle and dietary practices/behaviors that may correlate with the glycemic status of diabetic patients in Jordan.

Methods & Participants: 116 subjects (51 male and 65 females: 27-75 years) who visited the dietitian clinic at King Hussain Hospital, Amman, based on the referral of the endocrinologist were recruited in the study and approved to sign a consent form. All subjects had a baseline serum HbA1c of $\geq 6.5\%$ and followed the standard regimen that included an individualized balanced diet based on the baseline anthropometric measurement and dietary assessment. Along comprehensive questionnaire was filled out at their first visit with the assistance of trained researcher. Body composition was also measured using a bioelectrical impedance analyzer (in body 770).

Results: Female subjects had poorer glycemic control (HbA1c >7) compared to males. BMI, waist circumference, body fat % and waist to hip ratio were significantly correlated with poor glycemic control ($P \leq 0.05$). Skipping breakfast and eating with others were also significantly associated with poor glycemic control while the speed of eating, sleeping right after eating were not associated with glycemic control.

Conclusion: Lifestyle practices, body weight, abdominal obesity, body fat %, and dietary habits may correlate significantly with glycemic control in diabetic patients.

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