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10th International Conference on
Childhood Obesity and Nutrition
&
2nd International Conference on
Metabolic and Bariatric Surgery

June 12-13, 2017 Rome, Italy

Scientific Tracks & Abstracts
Day 1

Childhood Obesity & Bariatric Surgery 2017

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A food and nutrient comparison study of meals eaten at home vs. meals eaten at Head Start Centers in Washington DC, USABeverly M Copeland¹ and Allan A Johnson²¹Prairie View A&M University, USA²Howard University, USA

The purpose of this research was to investigate the food energy, nutrient intake and adequacy of meals served at Head Start Centers versus meals consumed at home among Head Start children. A cross-sectional descriptive survey research design was utilized. A convenience sample of 195 Head Start child and caregiver pairs was recruited from two Head Start sites within the district of Columbia (DC). Weight and height were measured and used to calculate BMI. The centers for disease control and prevention (CDC) BMI for age and gender growth charts were used to evaluate BMI levels. Dietary intakes were collected using the 24-hour food recall method, and Head Start Center menus were analyzed using Nutritionist Pro Software (Axxya Systems, Redmond, WA). Data analysis was conducted using the Statistical Package for the Social Sciences (SPSS) version 19 (IBM SPSS Inc., Chicago, IL). Results of the study showed no significant difference in total calorie intakes between the overweight/obese children and normal weight children who consumed meals both at home and at Head Start Centers. However, in both overweight/obese and normal weight children who consumed meals totally at home, lower nutrient intakes were noted when compared to recommended levels. It was concluded that Head Start children who consumed meals both at school and home on the day of the recall had higher intakes of food energy and were more likely to meet recommended nutrient intakes than Head Start children who did not consume any portion of their meals at school.

Biography

Beverly M Copeland has her expertise in "Childhood obesity working in low-income and underserved populations". She seeks to find solutions to the prevention and treatment of childhood obesity. She is a registered and licensed Dietitian with the skill set needed to understand and develop tailored nutrition intervention programs to combat childhood obesity. She continues to work with caregivers, teachers and other stakeholders who are interested in seeing childhood obesity on a downward trajectory. She is currently working on research to analyze and evaluate meals served in State-Registered Private Childcare Settings. This information will be used to determine the adequacy of meals served to children against 2015-2020 Dietary Guidelines. She is currently an Assistant Professor in Department of Agriculture and Human Ecology at Prairie View A&M University.

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An evaluation of a pilot farm to school program: Student knowledge and awareness

Kathleen Border and Molly Brogan
D'Youville College, USA

Statement of the Problem: The percentage of children with obesity in the United States has more than tripled since the 1970s. Today, about one in five school-aged children (ages 6–19) has obesity. School based interventions to promote healthy eating and prevent obesity are a natural fit. Farm to School is a voluntary program through which schools can purchase and highlight locally produced, farm-fresh foods. The program also promotes nutrition-based curriculum and experiential learning opportunities such as farm visits and school garden-based learning. This study evaluated a farm to school pilot program in a large urban school district to determine students’ awareness of the program at their school and if they could identify benefits of consuming locally grown produce.

Methodology & Theoretical Orientation: A quasi-experimental study design was used. Students in a large urban school district participated in two nutrition lessons which focused on awareness of the farm to school program and; benefits of eating locally grown foods. A pre and post-test was used to evaluate change in awareness and knowledge. The Whole School, Whole Community, Whole Child (WSCC) framework was applied which combined elements of the traditional coordinated school health approach and the whole child framework.

Findings: The sample consisted of 4th grade students (n=290) enrolled in 10 schools within a large urban school district. All 10 schools were part of a farm to school pilot program. After the intervention, a significant difference (p<0.001) was noted in program awareness. Students demonstrated an increased knowledge of locally grown produce after the nutrition intervention, specifically apples (p=0.009), pears (p=0.001), broccoli (p=0.031), and cauliflower (p=0.005). Additionally, students identified benefits of consuming locally grown produce, specifically that the food tastes great (p=0.011) and will support local farms (p=0.004).

Conclusion & Significance: This study found that the nutrition education component of the farm to school program increases knowledge of locally grown foods; benefits of consuming locally grown foods and awareness of the farm to school program within their school. Farm to school programs enhance student knowledge of consuming fruits and vegetables. Future research needs to be conducted to determine changes in eating behaviors based on participation in the farm to school program.



Figure: Whole School, Whole Community, Whole Child Conceptual Model

Biography

Kathleen Border is a nutrition education professional with over 20 years of experience in "Designing and implementing education programs for diverse audiences". She is an Advocate for bringing nutrition education programs to underserved communities throughout her career in dietetics. Her experience in Community Nutrition and higher education has led her to collaborate with stakeholders to support healthy eating initiatives in schools. She is an academic leader with proven success in designing and meeting national accreditation standards. She has held several leadership positions within the Academy of Nutrition and Dietetics. She currently serves as an Assistant Professor of Dietetics at D'Youville College, Buffalo, New York.

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Influence of parents on the development of childhood obesity

Cláudia Araújo da Rocha Benevides¹ and Ieda Cristina Souza da Rocha²

¹Federal University of Pará, Brazil

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Statement of the Problem: Childhood obesity has been growing in the world in alarming numbers; Brazil is among the countries where this growth calls attention. In the last 20 years, the number of obesity has increased more than four times among children of five to nine years of age. The literature on infant nutrition points out that the development of food preferences that define the pattern of feeding in childhood is determined by the family.

Methodology & Theoretical Orientation: Data analysis of questionnaire was applied to one of the parents of 70 children between two to eight years of age. The classification of the nutritional status of the children was carried out applying the curves of Body Mass Index (BMI) for the age of the World Health Organization. The chi-square statistical test was used.

Findings: Of the 70 children, who participated in the study, 51.4% were eutrophic, 21.4% were obese, 18.6% were overweight and 8.6% were lean. Among those classified as overweight and obese in 85.7% of the cases at least one of the parents were obese or overweight by the BMI ($p=0.0483$). Regarding the total sample of participants, when parents were asked if they had offered children candies before two years of age, 81.4% parents had offered. Of these, 10% assumed that children consuming sweets practically every day, while 38.6% stated that they only allowed consumption eventually in cases of celebrations.

Conclusion & Significance: In this study, we can see that the vast majority of overweight children had at least one parent in the same condition. It is of fundamental importance that parents are aware that their habits directly influence the eating behavior of their children and that the high supply of candies, foods of known low nutritional value, early in life may be determinant for the creation of taste buds and food preferences that are not adequate in this and that have contributed to the development of obesity in childhood.

Biography

Cláudia Araújo da Rocha Benevides has completed her Graduation in Medicine in 2004 from Federal University of Para (Brazil) and Post-graduation in Nutrology from Faculty of Medical Sciences of Holy House of São Paulo in 2013. She completed her MBA in Health Management. She has published a lot of papers in medical journals.

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Bariatric surgery in adolescents and young patients: What is the better option, gastric sleeve resection or gastric bypass?**Marc Schiesser**

Kantonsspital St. Gallen, Switzerland

Background & Aim: The prevalence of obesity in adolescents and young patients is steadily increasing and bariatric surgery has become a standard treatment for selected patients. Sleeve gastrectomy (SG) and gastric bypass (GB) are the standard procedures for adults. However, it remains unclear which operation should be offered to adolescents and young patients. Therefore, we compared the results of these procedures in this population.

Methods: All patients undergoing bariatric surgery <26 years were prospectively assessed between 01/2013 and 01/2017. The choice of the operation technique was based on the interdisciplinary meeting. The primary end point was weight loss at one year. Secondary end points were perioperative complications (Dindo classification) and reoperation rate.

Results: We assessed 104 patients with a mean age of 22.7 years (range 17.2-25.8 years). The mean follow up was 547 days. 87 patients underwent GB surgery and 17 had SG. The mean BMI was 44.9 kg/m² at the time of operation. Weight loss was similar in both groups at one year with a BMI of 29.5 kg/m² in the bypass versus 31.9 kg/m² in the sleeve group (NS). The perioperative complication rate (grade 2 or less) was 4.5% (4/87) in the bypass and 11.8% (2/17) in the sleeve group (NS). Six (6.8%) patients underwent laparoscopy for internal hernia in the GB group. No reoperation was observed in the SG patients.

Conclusion: GB and SG in adolescents and young patients are both safe and effective. We observed a higher rate of reoperations in the GB group, mainly due to internal hernia.

Biography

Marc Schiesser has expertise in Bariatric Surgery and is a cofounding member of the obesity center in St. Gallen, which has brought the adult obesity center together with the obesity unit of the children hospital in 2013. This merge has resulted in a close collaboration and share of expertise for obese adolescents and children. The surgical therapy is one of the therapeutic options, which has been successfully established in our center. As a board member of the Swiss Society for the study of morbid obesity and metabolic disorders, he has been involved with the establishment of the Swiss Guidelines for bariatric surgery in adolescents and children.

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Effect of exercise on body composition in children differing in body mass**Václav Bunc**

Charles University, Czech Republic

Statement of the Problem: Childhood overweight and obesity are a worldwide problem. Childhood overweight and obesity has major consequences in all stages of life; it is associated with co-morbidities such as glucose intolerance, diabetes, metabolic syndrome and other cardiovascular risks factors at young adulthood. Alongside a range of health problems associated with increased body mass (BM): Overweight or obesity is an important limiting factor for realization of PE and qualitative life style.

Methods: In study, we assess the effect of exercise in children differing in BM. Study was carried out in 98 children with normal BM (age=12.4±2.2 years; BM=48.0±3.6 kg; height=157.0±4.8 cm), 68 overweight (12.1±2.0; 61.6±3.0; 157.7±4.5) and 59 obese (12.7±2.6; 71.2±3.8; 155.1±4.2). The mean energy content of exercise/week in normal BM children was 1920±310 kcal, in overweight 1990±230 kcal, and in obese 2260±290 kcal. The exercise was based on walking (82.0±3.1%) of all movement activities.

Results: Relative changes after the imposed movement intervention in % BF ranged from 15.4 in obese to 16.6% in normal BM and in VO₂ peak from 13.9 in normal BM to 15.7% in obese. Children shows absolute changes in somatic and functional parameters like a result of imposed exercise based on walking substantively and statistically significant. On the contrary, differences in relative terms are insignificant.

Conclusions: We may conclude that similar exercise program may invoke the similar BC and functional performance changes in pre-pubertal children differing in BM.

Biography

Václav Bunc has his expertise in "Application of mathematical methods and models in PE and sport, using of biocybernetics by evaluation of physical fitness, exercise physiology, functional and physical testing in laboratory and field, body composition, BIA methods, moving regimes for prevention in cardiac patients". He is the first author of more than 400 research articles published in various scientific journals.

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Eating and neurodevelopmental disorders in a clinical sample of children and adolescents with obesityElisabet Wentz, Anna Björk and Jovanna Dahlgren
University of Gothenburg, Sweden

Statement of the Problem: Eating disorders are overrepresented in adults with obesity, but little is known about children with obesity. Attention-deficit/hyperactivity disorder (ADHD) is more prevalent in children with obesity. Impulsive and disorganized behavior, typically for ADHD, may contribute to an eating pattern that initiates weight gain and complicates the conventional treatment of obesity. No studies on individuals with obesity have investigated the occurrence of autism spectrum disorder (ASD). Little is known about the overlap between eating and neurodevelopmental disorders in children with obesity.

Aim: The purpose of this study is to investigate the prevalence of eating disorders, ADHD, ASD and other neurodevelopmental disorders in children and adolescents with obesity, and to explore a possible overlap between eating and neurodevelopmental disorders.

Method: 76 children (37 girls, 39 boys) were recruited at referral to a university outpatient clinic. The parents were interviewed regarding the child's psychiatric morbidity and completed parental questionnaires pertaining to ADHD, ASD and other neurodevelopmental disorders. The parents were screened for adult ADHD. The pro-bands completed instruments pertaining to eating disorders. Anthropometric and metabolic data were collected.

Result: Body mass index ranged between SDS 1.92 and 5.90, and age between 5.1 and 16.5 years. ASD or ADHD was diagnosed in 13.2% and 18.4% of the children, respectively. 25% were screen-positive for motor problems, 31.6% had at least one neurodevelopmental disorder. 18.4% had a parent who screened positive for adult ADHD. DSM-5 eating disorders were rare but so-called "loss-of-control eating (LOC)" was present in 22% of the adolescents. One in three with LOC had also a neurodevelopmental disorder.

Conclusions & Significance: ASD and ADHD are overrepresented in clinical populations of children and adolescents with obesity. ADHD and LOC both reflect how impulsive traits can manifest in obese children.



Figure: Overlap between obesity, eating and neurodevelopmental disorders; ED: eating disorder; LOC: loss-of-control eating; ASD: autism spectrum disorder; ADHD: attention-deficit/hyperactivity disorder; DCD: developmental coordination disorder; tic: tic disorder.

Biography

Elisabet Wentz is the Manager of Gillberg Neuropsychiatry Centre, Associate Professor of Child and Adolescent Psychiatry, Senior Consultant at Child Neuropsychiatry Clinic, Queen Silvia Children's University Hospital and licensed as a Specialist in Child and Adolescent Psychiatry. Her PhD thesis entitled "Ten-year outcome of anorexia nervosa with teenage onset". Her current research includes, but is not limited to, "Longitudinal follow-up studies of anorexia nervosa, the correlation between obesity, neuropsychiatry and eating disorders, eating disorders within the autism spectrum, non-pharmacological interventions (including IT interventions) in cases of neuropsychiatric disabilities, as well as neuropsychiatric comorbidity in cases of various syndromes". She has Post-doctorate position at St. George's Hospital Medical School, London. She has published around 50 peer-reviewed scientific papers as well as several book chapters. She supervises PhD students at University of Gothenburg and at Lund University.

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Physical (in) activity-physical and psychological effects**Cristiana Pop**

Bucharest University of Economic Studies, Romania

The globalization of overweight and obesity, the acute perception of being stressed most or all the time, the sedentary life style and the comorbidities of those behaviors might be the most common consequences for the new millennium generation and their families. Education and healthcare systems are attempting a weak counterattack to this aggressive epidemic and to the consumption culture which pushes the younger generation towards a greedy lethargy. Five years ago, we were worried because physical activity among European children tends to drop significantly between the ages of 11 and 15 years and only 20% of them exercise regularly, nowadays it is certain that physical inactivity accounts for more than five million deaths each year globally. The obsessive informatics and communication technology use results in a progressive physical skills decay and less social interaction. Today when the intelligent phones are shaping our daily life, our bodies are also shaped by bending the neck and back in a tapping position. A bad posture has not only physical consequences, but psychological also: an upright, open, expansive posture is associated with power, self-confidence and good mood. There is a significant correlation between self-body image perception and self-esteem, mediated by weight and subsequent by fat deposits. Results indicates a consistent statistically significant correlation between body mass index and body dissatisfaction [$r(158) = 0.56, p < .0005$], with a prevalence of 79% of body dissatisfaction on young women. Integrating physical and health education in overweight preventative strategies would have effect in reducing the occurrence of physical and emotional disorders and co-morbidities associated with these later, over the lifetime.

Biography

Cristiana Pop is currently a full Professor at Bucharest Economic Studies University. She has her expertise in "Teaching physical education in higher education and training athletics mainly for university contests". Her main research interests are in "Education quality and social issues related with health, physical activity, eating behaviors and wellbeing". She has authored "The role of physical activity in promoting well-being (2015), Athletics for Students (2013)" and other few books promoting physical activity and a healthy lifestyle. She is member of Romanian Agency for Quality Assurance in Higher Education, member of Romanian Athletic Federation (women commission) and has research collaboration with Romanian Academy Anthropological Institute Research Center. She is serving as Senior Editor and Editorial Board Member of several reviews in education, health and sport sciences domain.

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Final results of multi-center, prospective, controlled trial of the duodenojejunal bypass liner for the treatment of type-2 diabetes mellitus in obese patients: Efficacy and factors predicting a suboptimal effect**Marek Benes, Spicak Julius, Drastich Pavel and Huel Tomas**
Institute of Clinical and Experimental Medicine, Czech Republic

Introduction: The global increase in obesity incidence results in an increase of type-2 diabetes mellitus (T2DM). Surgical treatment has proven to be effective; however, it carries a high risk of complications. The duodenal-jejunal bypass liner (EndoBarrier®, GI Dynamics and EB) is an endoscopic implant that mimics the intestinal bypass portion of the Roux-en-Y gastric bypass. It results in weight loss and improvements in glucose control in obese patients with T2 diabetes mellitus (T2DM).

Case Report: This is a final report of a prospective, controlled, multi-centre study aimed to determine the effectiveness of EB and to identify factors associated with a sub-optimal outcome of EB.

Results: 70 subjects (45 with an implant, 25 controls) were included in the study. The groups were comparable with respect to age, gender, BMI (mean 41.7 vs. 39.5 kg/m²), T2DM duration (7.8 vs. 8.3 years), HbA1c level (88 vs. 86 mmol/mol) and T2DM treatment. In the EB group, all devices were successfully implanted. Only six devices had to be explanted prior to the end of the 10 months study period (bleeding, dislocation and need for ERCP because of choledocholithiasis). The mean procedure time was 17 minutes for an implantation and 16 minutes for an explanation. At 10 months, there was significantly greater weight loss and %EWL (19% vs. 7% and 43 vs. 12) and significantly improved long-term compensation of T2DM marker HbA1c (decreased by 25 vs. 10 mmol/mol) in the EB group. T2DM medicinal treatment could be reduced in more device subjects than controls. There was no serious adverse event. Mild abdominal pain and nausea after implantation were experienced by 60% of patients during first 14 days after implantation, 30% of patients during the first month and 10% of patients after one month. Lower initial BMI and lower body height were identified as negative prognostic factors for pain, but positive for efficacy of EB.

Conclusion: The EB is safe when implanted for 10 months and results in significant weight loss and HbA1c reduction. This suggests that this novel device is a candidate for the primary therapy of morbid obesity and T2DM. Lower initial BMI and lower body height could be negative prognostic factor for pain, but positive for efficacy.

Biography

Marek Benes completed his Graduation at 3rd Medical Faculty of Charles University in 2001. He was a Physician in Department of Gastroenterology and Hepatology at Institute of Clinical and Experimental Medicine in Prague. His main subjects of interest are Endoscopy and Bariatric Endoscopy.

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Association of the availability of maternal and child health center (Posyandu) with child weight status in Indonesia: A cross-sectional study**Hsien Wen Kuo** and **Helen Andriani**
National Yang-Ming University, Taiwan

The Indonesian government has focused on improving maternal and child health (MCH) through the organization of volunteer-staffed integrated health service post (Posyandu). However, little is known about the childhood obesity prevention practices of MCH in Indonesia or their equivalent counterparts in other countries. The present study aims to assess the association of the availability of Posyandu with child weight status and what factors might influence such associations. This was a secondary analysis of data collected in the 2013 Riskesdas (or basic health research) survey, a cross-sectional, nationally representative survey of the Indonesian population. Height and weight, information regarding the availability of Posyandu and basic characteristics of the study population were collected from parents with children aged 0 to 5 years (n=63,237) in 2013. Non-availability of Posyandu significantly raised the odds of being obese (OR=1.13, p<0.01). However, non-availability of Posyandu did not seem to show a significant relationship in the odds for overweight. This relationship persisted after a full adjustment. There was effect modification by household wealth of the association between the availability of Posyandu and child weight status. The availability of Posyandu has a protective association with child obesity in Indonesia. Household wealth modified this association. MCH services are well placed to play an important role in obesity prevention in early life. Odds ratio and adjusted odds ratio (95% CI) using multinomial logistic regression model for overweight or obesity is compared to normal weight according to maternal and child health.

Biography

Hsien Wen Kuo has completed his PhD at Taiwan University and worked as Visiting Scholar at UC Berkeley. He is a Professor at National Yang-Ming University and has published more than 200 papers in reputed international and domestic journals and has been serving as an Editorial Board Member of reputed.

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Unraveling the role of gut hormone PYY in diabetes remission and pancreatic islet function following Roux-En-Y gastric bypassReshma Ramracheya, Anne Clark, Helene Johannessen, Magnus Kringstad Olsen, Chun-Mei Zhao, Duan Chen and Patrik Rorsman
University of Oxford, UK

Roux-En-Y gastric bypass (RYGB) results in long-lasting remission from type-2 diabetes (T2D) in most cases. Improvements in glucose homeostasis occur within days of surgery, but the mechanisms involved remain unclear. Although pancreatic islets play a fundamental role in glucose homeostasis, the impact of RYGB on islet architecture and secretory properties has not been studied thoroughly. T2D is a bihormonal disease characterized by both insufficient insulin secretion and impairment in glucagon regulation. RYGB can correct both hormonal secretory defects remain unexplored. Using the Goto-Kakizaki (GK) rat model of T2D, we have explored whether RYGB affects islet structure and glucose-stimulated insulin secretion (GSIS) and glucagon release. RYGB restored distorted islets from diabetic rats to spheroidal shape as in healthy animals. Compared to the sham-operated animals, RYGB normalized glucose-dependent glucagon and insulin secretion. Thus, islets from RYGB rats exhibited markedly enhanced insulin secretion at 20 mM glucose and complete restoration of glucose-induced suppression of glucagon release. Culture of isolated islets with serum from RYGB animals resulted in improved insulin and glucagon secretion, in support of a humoral factor which remains conserved in serum. These effects were reversed following immuno-neutralization of the gut hormone peptide tyrosine (PYY) but persisted in the presence of a glucagon-like peptide-1 (GLP-1) receptor antagonist. Chronic (60-72 h) treatment of islets with synthetic PYY enhanced GSIS in a NPY1-receptor-dependent manner. PYY application also restored GSIS and normalized impaired glucose-induced glucagon release in islets from severely diabetic GK rats and human donors with T2D. These data provide a novel mechanistic insight on the effect of RYGB in diabetes and highlight that the mechanism behind the improvement of islet function is dependent on PYY and not GLP-1. These findings imply that a pharmacological agent enhancing PYY release or its action could provide an effective and non-surgical therapy for T2D.

Biography

Reshma Ramracheya is investigating the regulation and failure of the insulin-secreting beta-cell and glucagon-secreting alpha-cell in normal health and diabetes respectively. As an islet Physiologist, she is intrigued by how pancreatic islet cells, despite being biochemically similar, are able to respond to nutrients and drugs differently.

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Multi-dimensional validated reporting of dysphagia post sleeve gastrectomy**Sukaina Jaffar and Michael Devadas**
Nepean Hospital, Australia

Background: Few studies have reported the prevalence of dysphagia, as its own clinical entity in the bariatric population; without being examined under the umbrella of gastro-oesophageal reflux disease. This is compounded by studies not outlining methodologies used to assess dysphagia. Moreover, varying follow-up periods and different bariatric procedures have led to conflicting results.

Objectives: To assess the prevalence of dysphagia using a statistically robust patient-reported tool, Dysphagia Handicap Index (DHI) post Laparoscopic Sleeve Gastrectomy (LSG). DHI is a validated tool which additionally measures the handicapping effects of dysphagia on emotional and functional domains of living.

Methods: DHI questionnaire was administered to 124 patients who underwent LSG at least 1 year prior. Post-operative weight, change in BMI, percent Total Weight Loss (%TWL) and percent Excess Weight Loss (%EWL) were calculated. Physical, emotional and functional subscales were analyzed separately and altogether. Three additional questions were added to the DHI to delineate oesophageal dysphagia.

Results: Average pre-operative weight and BMI is 123.8 kg and 43 kg/m², respectively. Median %TWL and %EWL are 32% and 76.2%, respectively. An average reduction in BMI value of 14 kg/m² was found. 41% of our cohort reported to mild dysphagia and 54% reported moderate to severe dysphagia based on the Modified DHI Score (DHI+Oesophageal Specific Dysphagia Score). No patient required corrective intervention. Patients reporting higher DHI scores were less likely to achieve the median TWL of 35.4 kg (OR 0.40, 95% CI 0.17-0.91). Dysphagia is a common symptom reported in our cohort and was found to have an impact on weight loss outcomes.

Conclusion: Prospective, single-institution analysis using a validated tool reveals post-operative dysphagia to be a common clinical entity in our population with functional and psychological influences.

Biography

Sukaina Jaffar is working as a Surgeon in Nepean Hospital, Australia. Sukaina Jaffar has participated in National and International conferences in the field of bariatric surgery and she has published many research articles in various International and National journals.

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Deficiency in vitamin D and calcium associated comorbidities in overweight children**Ellie Wright**

EGW Research Institute LLC, USA

Obesity is increasing in epidemic proportion around the world with most concern for health issues among children. Vitamin D (25OHD) deficiency is reported in obese children. Low 25OHD levels are associated with dyslipidemia and insulin resistance with increased risk of cardiovascular complication in adulthood. Studies suggest that a low vitamin D which is linked to dysregulation of white adipose tissue and that calcium influences adipocyte metabolism. High calcium intake depresses levels of parathyroid hormone and 1, 25-hydroxy vitamin D. These decreased hormone levels cause decreases in intracellular calcium, thereby inhibiting lipogenesis and stimulating lipolysis. Dietary Calcium has been also shown to increase faecal fat excretion. Deficiency of vitamin D in children is linked with further comorbidities in life such as hypertension, myocardial infarction, and stroke, as well as other cardiovascular-related diseases, such as diabetes associated with impairment of cooperative signaling from the 1,25-(OH)(2)D(3)-activated vitamin D receptor (VDR). Vitamin D and calcium insufficiency causes cellular dysfunction in many organs and could increase the risk of diseases, particularly of osteoporosis, colorectal and breast cancer, inflammatory bowel disease, insulin-dependent diabetes mellitus type I, metabolic syndrome, diabetes mellitus type II, hypertensive and cardiovascular disease. This research focuses on the mechanisms by which calcium and vitamin D could regulate body weight and adiposity and prevent future health issues in children.

Biography

Ellie Wright completed her Bachelor of Arts and master degree at arizona state university. she completed her graduate certificate in geriatric and gerontology at university of arizona. in 2015, she completed her doctoral degree in naturopathic medicine at southwest college of naturopathic medicine, USA. she is a passionate researcher in natural medicine, prevention and cure.

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Weight perception among parents and health care providers in Sharjah, UAE**Abdelreheima Naguib, Anwar M, Dejan E, Gomaaa N and Vamegh M**
University Hospital Sharjah, UAE

Background: Overweight/obesity is common in UAE as in many parts of the world. Management of obesity in children is usually not rewarding because of many barriers. Prevention of obesity is therefore of high importance. Proper weight perception and awareness among parents and health care providers are basic prerequisites to achieve this aim

Aim: This study aims to find weight perception among parents and health care providers in Sharjah, UAE

Methods: Retrospective review was done for 1000 patients' files aged 2 to 18 years who visited UHS pediatrics OPD during 2015. Purpose of the visit, diagnosis of weight status, documented general and specific weight counseling in cases of overweight/obesity were reviewed. Overweight and obese are defined as >85th and >95th centiles respectively based on CDC BMI chart.

Results: Among the 1000 patients enrolled in study; 73 patients (7.3%) were overweight, 107 patients (10.7%) were obese and the remaining 817 patients (81.7%) had normal weight. Out of 180 patients, visits of obese or overweight children was weight related in only six patients (3.3%) while it was due to weight unrelated causes in 174 patients (96.7%). Out of 107 obese child, weight counseling was found with only 38 (35.5%) including the six patients visited specially for obesity. In overweight group (73 patients), weight counseling was found with four patients (5%) while patients with normal BMI (817 patients) counseling was found with two patients (0.2%).

Conclusions: Most of parents in UAE have weight misperception and are unaware of overweight/obesity as a medical disease. Many pediatricians also have weight misperception; they care for weight issue only if the patient's visit is for weight abnormality, even in cases of obesity.

Biography

Abdelreheima Naguib has many years of Clinical Experience in Pediatrics. He has contemporary experience in the management of young children and teenagers with endocrine disorders specially childhood diabetes and obesity, including modern therapeutic interventions like insulin pump and continuous blood glucose monitoring. He also runs a general pediatric clinic that deals with common pediatric problems like fever, asthma and common respiratory problems, vaccinations, common gastrointestinal disorders; follow up of nutrition, growth and development. His professional experience also includes academic appointments with the University of Sharjah, UAE, as an Associate Professor of Pediatrics in the College of Medicine and Health Sciences.

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June 12-13, 2017 Rome, Italy

Childhood obesity: The relations between fatty acids, gut micro-biota and low grade inflammation**Ellie Wright**

EGW Research Institute LLC, USA

The purpose of this research is to analyze if low grade inflammation in obese children could be address with probiotics/prebiotic and fatty acids as they play a role in intestinal permeability, intestinal inflammatory responses and regulating insulin and fat storage. Recent evidence suggests that gut micro biota is involved in the control of body weight, energy homeostasis, and inflammation and plays a role in the pathophysiology of obesity. Obesity in children is characterized by low grade inflammation expressed by pro-inflammatory cytokines, adipokines and reactive oxygen species. With the increased usage of antibiotics and refined foods, there is an increased alteration of micro biota done via several mechanisms: increasing gut permeability with subsequent metabolic inflammation, impairing short-chain fatty acids synthesis, and altering bile acids metabolism. Probiotics/prebiotics affect the gut micro biota directly and indirectly by modulating its bacterial content and through bacteriocins. Long-chain saturated fatty acids are associated with dysbiosis while short-chain and certain unsaturated fatty acids are protected against dysbiosis and may promote insulin sensitivity and regulate energy metabolism. This research aims to find nutritional approaches for preventing and attenuating the pathological consequences of obesity in children.

Biography

Ellie Wright completed her Bachelor of Arts and master degree at arizona state university. she completed her graduate certificate in geriatric and gerontology at university of arizona. in 2015, she completed her doctoral degree in naturopathic medicine at southwest college of naturopathic medicine, az, USA. she is a passionate researcher in natural medicine, prevention and cure.

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Improvement in bagged lunches following an intervention in the preschool setting: A randomized controlled trialVered Kaufman-Shriqui¹, Drora Fraser², Yelena Novack², Natalya Bilenko^{2,3}, Hillel Vardi², Zvi Feine⁴ and Danit R Shahar²¹Ariel University, Israel²Ben-Gurion University of the Negev, Israel³Ministry of Health, Israel⁴American Jewish Joint Distribution Committee, Israel

More than a third of preschool children's nutritional intake is consumed during school hours. However, few studies have assessed the quality of bagged lunches sent from home to feed children during the day. A cluster-randomized controlled-trial examining the effect of a preschool-based comprehensive intervention on nutrition behaviors among low socioeconomic status (LSES) preschool-aged children was performed. During a full school year, LSES preschoolers (mean age 63 m, 48% boys) and their mothers were recruited from preschools in a large town in Israel and cluster-randomized to an intervention group (seven preschools, 184 children) or to a control group (four preschools, 74 children). The intervention children received in school, nutrition education and physical activity (PA) classes; intervention parents and teachers received healthy nutrition classes. The control group received PA classes for children only. Family data were obtained by parental interviews. Food and nutrition knowledge testing and observations and anthropometric measurements were conducted at baseline, at intervention termination and at the end of the school year. Differences between groups were analyzed while controlling for clustering. Of the 258 children enrolled, 220 (87.6%) completed the six-month program. Improvement in the quality score of bagged lunches was shown in the intervention group ($p < .0001$). Intervention group increased fruit and vegetable consumption and habitual water drinking ($p = 0.02$), and decreased sweet-drinks consumption ($p = 0.05$). In this study, the bagged lunches prepared at home and sent with the children to their preschools reflected marked changes in parental feeding behaviors. The six-month follow-up showed that this improvement was sustained.

Biography

Vered Kaufman-Shriqui is a registered Dietitian and an Epidemiologist. She completed her MSc in Nutrition at Hebrew University, and her PhD in Epidemiology at Ben-Gurion University, Israel. She is a faculty member in Department of Nutritional Sciences at Ariel University. She has conducted several intervention trials aimed to reduce childhood obesity, and examined the association of social determinants with maternal chronic conditions. During her research, she focused in "Developing culturally adopted methods to collect nutritional information". Her current research focuses on "The effect of social capital and food policies on body weight and food choices".

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The validation of an instrument to assess parental feeding styles of children in Filipino language**Carmina Niña Salac-Grantoza**

University of Santo Tomas Hospital, Philippines

Overweight and obesity are emerging major problems among children today worldwide. Research on parent feeding styles and practices has begun to provide some clues about the role parents play in the etiology of childhood obesity. Recently, attention has been directed toward the parental feeding styles. Experts have suggested that gestation to early infancy is a critical period in which physiologic changes occur that greatly influence a child's later risk for obesity. The objective of the study is to examine validity and reliability of an instrument translated to Filipino language for characterizing parental feeding practices. Subjects were the parents with toddlers from the University of Santo Tomas Hospital. A focus group discussion was done. The toddler feeding questionnaire was translated to Filipino language. A final questionnaire underwent pretesting and Cronbach's alpha test. Data analysis was done using Strata SE version 13. Quantitative variables were summarized while qualitative variables were tabulated. Test-retest and Cronbach's alpha tests were done. A total of 18 parents participated in the study. About 89% of the toddlers had normal weight according to the WHO growth standards (weight for length). 2 items (Q18 and Q33) in the final questionnaire had reached significant differences ($p < 0.05$). The overall internal reliability of the questionnaire was acceptable ($\alpha = 0.82$). This instrument was found to be valid with acceptable reliability and internal consistency.

Biography

Carmina Niña Salac-Grantoza has completed her Degree in Doctor of Medicine at University of Santo Tomas, Manila, Philippines. She completed her Residency in Pediatrics at University of Santo Tomas Hospital, Manila. She is currently a Fellow-in-training of Pediatric Critical Care Medicine at University of Santo Tomas Hospital.

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Thyroid function in childhood obesity and metabolic comorbidity**Lucia Pacifico**

Sapienza University of Rome, Italy

Childhood obesity is a worldwide health problem and its prevalence is increasing steadily and dramatically all over the world. Obese subjects have a much greater likelihood than normal-weight children of acquiring dyslipidemia, elevated blood pressure and impaired glucose metabolism, which significantly increase their risk of cardiovascular and metabolic diseases. Elevated TSH concentrations in association with normal or slightly elevated free T4 and/or free T3 levels have been consistently found in obese subjects, but the mechanisms underlying these thyroid hormonal changes are still unclear. Whether higher TSH in childhood obesity is adaptive, increasing metabolic rate in an attempt to reduce further weight gain or indicates subclinical hypothyroidism or resistance and thereby contributes to lipid and/or glucose dysmetabolism, remains controversial. My report will highlight current evidence on thyroid involvement in obese children and discusses the current controversy regarding the relationship between thyroid hormonal derangements and obesity-related metabolic changes (hypertension, dyslipidemia, hyperglycemia and insulin resistance, nonalcoholic fatty liver disease) in such population; the possible mechanisms linking thyroid dysfunction and pediatric obesity and; the potential role of lifestyle intervention as well as of therapy with thyroid hormone in the treatment of thyroid abnormalities in childhood obesity.

Biography

Lucia Pacifico was a Researcher and Assistant Professor in Pediatrics from 1988. She completed her Medical studies at Sapienza University of Rome from 1971-1977; Residency in Pediatrics at Sapienza University of Rome from 1977-1980 and; Residency in Pediatrics at St. Lukes-Roosevelt Hospital, Columbia University, USA from 1981-1982. She was Board Certified in Neonatology (Rome, Italy) in 1983. Her research interests include Pediatrics, Infectious Diseases, Gastroenterology, Hepatology and Nutrition.

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Obesity or normal nutritional behavior; which should be the main focus in children and adolescents?

Ata Pourabbasi

Tehran University of Medical Sciences, Iran

Over the past decades, obesity has become a global concern. This issue is not limited to a certain range of age so that a plethora of research body has focused on obesity in childhood and adulthood. Several studies have also supported the impact of obesity in raising the rate of mortality and the incidence of non-communicable diseases such as cancer and cardiovascular diseases. However, in parallel with these findings, a new concept, metabolically healthy obesity has been developed in this area. According to this new concept, metabolic parameters could be normal such as insulin resistance, lipid profile, etc. despite of obesity phenotype. Consistently, it has been confirmed in several studies that metabolically healthy obese individuals are not significantly different from those of normal weight in respect of risk of obesity-related disorders such as CVDs, and liver fibrosis. Putting all these findings together raises the question whether the obesity phenotype is a troublemaking health issue or obesogenic behaviors even without obesity phenotype? Is it possible for obese individuals to have normal behavior, and normal weight individuals, in contrast, have inappropriate behaviors such as excessive intake of junk foods, sedentary life style, overeating, etc.? Although, no documented study has been so far carried out in this field, but the experience of the author attest to the fact that the obesity phenotype is not necessarily correlated with the eating behaviors; and the issue which leads to the obesity-related complications in different ages may not be the obesity phenotype but is the abnormal nutritional behaviors even though in non-obese individuals. Thus, it seems necessary to put more emphasis on establishing normal nutritional behaviors in childhood instead of obesity phenotype and fitness.



Figure 1: Is it possible to consider the obesity phenotype as a confounding variable in relation between behavior and Non-Communicable Diseases?

Biography

Ata Pourabbasi completed his PhD in the field of Cognitive Neuroscience at Endocrinology and Metabolism Research Institute (EMRI). His main research focus is on "Relation between health problems, medical illnesses and cognitive functions especially in children and adolescents". He has developed a new concept named Cognitomics in which human behavior is considered as the main window into cognitive functions. He has established Cognitomics Lab at EMRI for expanding his studies.

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Correlation between Laparoscopic Sleeve Gastrectomy outcomes and Mental Health**Sukaina Jaffar and Michael Devadas**
Nepean Hospital, Australia

Background: High incidence of depression in obese populations is well-reported. While several studies examined the impact of weight loss outcomes after bariatric surgery on post-operative psychological well-being and vice-versa, fewer have analyzed influence of pre-operative depression on post-operative weight loss outcomes. Furthermore, this question has been limitedly applied to Laparoscopic Sleeve Gastrectomy (LSG) versus other bariatric procedures.

Aim: Given the increasing utilization of LSG, we aim to evaluate the relationship between pre-operative Beck's Depression Index (BDI) scores and post-operative weight outcomes.

Method: 117 patients underwent LSG. BDI, a validated tool for assessing psychometric properties was completed pre-operatively. Additional psychological history and medications were obtained during patient interview. Pre and post-operative BMI, percent Total Weight Loss (%TWL) and percent Excess Weight Loss (%EWL) were recorded.

Results: Among the 88 females and 29 males, the mean pre-operative weight and BMI is 123 kg and 42.7 kg/m², respectively. Mean reduction in BMI post operatively at one year is 14 kg/m². This equates to a median %TWL of 32%. The median BDI score is 14 (Range 0-52), correlating to 'mild' depression. Females reported a higher average BDI score. 39.6% and 33.3% of patients reported minimal and mild depression, respectively. Patients classified with severe BDI score, were less likely to lose more than the median TWL of 35.4 kg found in our cohort (OR: 0.32 95% CI 0.06-1.66).

Conclusion: In our cohort, an important association was found between pre-operative BDI scores and weight loss post LSG. This highlights the significance of pre-operative assessment for depression and makes implications for the involvement of early psychological services to improve both bariatric-specific and psychosocial outcomes.

Biography

Sukaina Jaffar is working as a Surgeon in Nepean Hospital, Australia. Sukaina Jaffar has participated in National and International conferences in the field of bariatric surgery and she has published many research articles in various International and National journals.

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The effectiveness of the ‘way to go kids’ programme for children who are overweight and underactive**Elaine Shea**

University of Chester, UK

Statement of Problem: Childhood overweight and obesity has become an epidemic health issue in today’s society with one in four children (nine, seven and as young as three years of age) are overweight or obese in Ireland. The cost of treating obesity in Ireland is costly and has a huge economic impact. ‘Way to go kids’ is a nutrition and fitness education programme designed to support overweight children in developing the skills needed to adopt a healthy lifestyle. ‘Way to go kids’ was adapted from an American programme and redesigned by the author from Limerick Sports Partnership and by Limerick Health Service Executive to meet the needs of Irish children. The Irish ‘way to go kids’ is the first national programme to target overweight children and childhood obesity in Ireland. This report is the first review of the effectiveness of the Irish ‘way to go kids’ programme.

Methodology & Theoretical Orientation: 24 overweight/obese children (9-12years) and their parents were recruited for this study. 12 participants’ weight and fitness levels before and after the ‘way to go kids’ programme was compared to 12 participants of a similar stature in a control group who did not participate in the programme. Pre and post questionnaires were also carried out to investigate if the ‘way to go kids’ programme improves participants’ knowledge, confidence, attitudes and behaviors in relation to nutrition, physical activity and weight.

Findings: Results revealed that participants who completed the ‘way to go kids’ programme lost weight, decreased waist circumference, decreased BMI, improved muscle strength, muscular endurance, cardiovascular endurance, lung capacity and flexibility. ‘Way to go kids’ participants also showed an increase in knowledge and confidence, and positive changes in attitude and behaviors in relation to nutrition, physical activity and weight.

Conclusion & Significance: Due to the small scale of this study, some of the results did not reach statistical significance. However, indication of clinically different changes were identified which may have become statistically significant if the study had continued for a longer timeframe.

Biography

Elaine Shea has her expertise in Exercise and Nutrition Science with her Master’s Degree at University of Chester in 2016. She received a distinction in her Master’s project titled “The effectiveness of the ‘way to go kids’ programme for children who are overweight and underactive”. As a Sports Development Officer for Limerick Sports Partnership, she redesigned the ‘way to go kids’ programme and manual along with Limerick Health Service Executive which was adapted from an American programme to meet the needs of Irish children.

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The evolution of aerobic activity on the level of IgA immunoglobulin in female teenager studentsM Pishsaraeian¹ and M Fallah²¹Meshkat School, Iran²Shahed School, Iran

Obesity is a major problem in many societies. One of the proposed solutions for the treatment of obesity is exercise. Exercise has complex effects on immune system. One of most important immunoglobulin in mucus is IgA that protect the body against microorganisms. The aim of this study was to evaluate the effect of aerobic exercise on the levels of IgA and total protein in salivary of female teenager students. 20 female healthy volunteer students (age 12-13) without any infection, using drug, cardiovascular diseases and with healthy diet randomly divided into control (n=10) and aerobic activity (n=10) groups. Before the exercise saliva samples were taken from each student and kept in suitable condition. Aerobic activity group performs the shuttle run test for exercise and control group has no activity. After finishing the exercise the samples were collected and sent to laboratory for analysis. For detection of IgA the ELISA kit essay was used and the Bradford protein essay was used for the detection of total protein. Our results have indicated that in comparison with pre-test and post-test of aerobic activity group, the level of IgA concentration was significantly ($P \leq 0/05$) decreased but the total protein was increased ($P \leq 0/05$) significantly. There has been no significant change in the level of IgA between two groups. It is recommended that duration, type and intensity of physical activity can be considered for prevention of infection.

Biography

M Pishsaraeian has completed her MS degree in Exercise Physiology at University of Mazandaran, Iran. She is a Teacher of Sport Science at High School of Tehran city and her field of interest is "The evaluation of effects of sport and exercise on psychological and physiological factors".

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The correlation between socio-economic status and energy and nutrient intake of girls aged 8-11 years in Saudi Arabia**Rabab Alkutbe¹, G A Rees¹ and A Payne²**
Plymouth University, UK

Obesity has become a major world-wide health issue. Social and economic factors may influence nutritional intake as a result of differing regional diets, lifestyles and cultures, and these require closer scrutiny. However, this issue has not been examined in studies of children in Saudi Arabia. The aim of this study was to assess energy and nutrient intakes of girls aged 8-11 years in western of Saudi Arabia according to socio-economic status (SES). Girls (n=134) participated from different schools (private n=4 and public n=3). Height and weight were measured and BMI was calculated. Girls were classified as obese, overweight, healthy weight and underweight according to BMI centile charts (CDC). Dietary intake was measured via a 4-day food diary and with the purpose of assessing the household socioeconomic status as classified by king Khalid foundation; parents or carers were asked to fill out a questionnaire attached to the diet diary. Dietary data was analyzed using Arab Food Analysis Programme 1st version 2007 analysis package. Data were statistically analyzed using SPSS version 21. Number of subjects according to their income status is presented in Table 1. Results showed that 17 out of 28 obese subjects were from high-income families, whereas 7 out of 14 underweight girls were from low-income families. Nevertheless, chi-square was not significant suggesting that being from any family income status would not affect the BMI status (Chi-Square=5.151-P=0.272). There was a positive correlation between the two variables, $r=0.22$, $n=134$, $p<0.05$, with high levels of energy intake associated with high levels of income as shown in Table 2. To sum up, results showed that there is a positive relationship between energy intake and the family income status.

Biography

Rabab Alkutbe is currently a PhD candidate, examines the relationship between body composition, nutritional intake and physical activity in children. Since she completed her degree in Nutrition and Food Sciences in Saudi Arabia followed by a Diploma in Complementary Medicine (Herbal Medicine), she pursued her passion, research which led to undertake a Master's Degree in Public Health (Nutrition) in Australia in 2010. She is a highly competent Researcher and closely involved in the issue of childhood obesity and has intensive experience in aspects of Public Health.

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Evaluation of periaortic adiposity and metabolic disorders in obese children**Mehmet Emre Atabek, Beray Selver Ekliloglu, Nesibe Akyürek and Hayrullah Alp**
Necmettin Erbakan University, Turkey

Aim: Aim of this study is to evaluate the relationship between periaortic fat thickness (PAFT) and parameters involved in the development of metabolic complications of the cardiovascular system in obese children and to assess the usefulness of echocardiographic measurements of PAFT in correlation with cardiovascular risk factors.

Methods: The study was conducted with 263 obese and 100 healthy children and adolescents. PAFT was measured with echocardiography method which was recently performed in obese children and adolescents.

Results: PAFT was significantly higher in the obese group (0.258 ± 0.031 mm) than in the control group (0.137 ± 0.032 mm) ($p < 0.001$). In multivariable regression analysis, body mass index-standard deviation score and total body fat were predictors of PAFT. The area under the receiver operating characteristic curve was 0.989 and was quite significant at $p < 0.001$. PAFT above 0.179 mm was determined as the cut-off value in obese children and adolescents (sensitivity=1, specificity=0.97).

Conclusion: The measurement of PAFT in obese children and adolescents may be a good method to reveal the presence of early cardiovascular risk.

Biography

Mehmet Emre Atabek has completed his PhD at Erciyes University and Post-doctoral studies at Selcuk University School of Meram Medicine. He is the Director of Pediatric Endocrinology, a premier pediatric endocrinology and diabetology service organization. He has published more than 120 papers in reputed journals and has been serving as an Editorial Board Member of repute. He has been interested in searching metabolic problems of obese children in most of his articles. He continues to work as Head of Department of Pediatric Endocrinology at Necmettin Erbakan University.

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Reliability of body mass index in predicting cardiovascular risk factors in overweight and obese children

Vishnu Sivapatham¹, Liyanage P N², Sivakanesan R³, Arulpragasam A N⁴ and Sujirtha N³

¹Eastern University, Sri Lanka

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Introduction: Childhood overweight and obesity is in an increasing trend throughout the world. Distribution of body fat is an important determinant in predicting the future cardiovascular risk factors. Body Mass Index (BMI) is the commonly used tool in diagnosing overweight and obesity. Waist circumference (WC) percentile and waist height ratio (WHtR) demonstrated high sensitivity and specificity for detection of abdominal fat mass.

Aim: The aim of this cross sectional study involving children from an urban area, Sri Lankan aged 3-18 years was to investigate the reliability of BMI in predicting central adiposity.

Method: Weight, height, and WC were measured using standard methods and BMI, and WHtR were calculated. The BMI of 85th and 95th percentiles were adopted as cutoff points for overweight and obesity respectively and similar values were considered for WC to define obesity and overweight based on age and sex as per centre for disease control classification. WHtR 0.6 and 0.5 were considered as alert line and action line for interventions respectively.

Findings: Among 116 subjects, 29 (25%) were overweight and 87 (75%) were obese. According to WC percentile 9 (7.7%) were overweight while 107 (92.2%) were obese. Thus BMI has 77.7% (83/83+24) sensitivity and 55.5% (5/5+4) specificity to detect central obesity. The positive predictive value was 95.4% (83/83+4) while the negative predictive value was 17.2% (5/24+5). In our study, 83.7% of actually overweight population lied in alert line (Figure 1) and 43.7% of actually obese population lied in action line (Figure 2).

Conclusion: Even though BMI is a simple tool in detecting overweight and obesity it has low sensitivity and specificity to detect central fat distribution which is more important to predict the future cardiovascular risk factor in children.

Recommendation: Ethnic-specific cutoff value of WC and WHtR will help to identify future cardiovascular risk factors especially in children and adolescents.

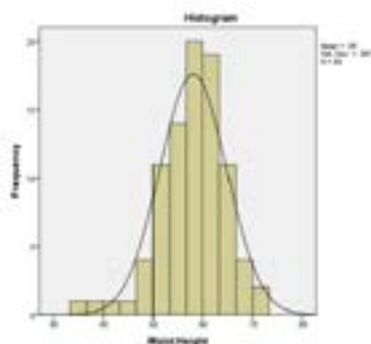


Figure 1: 83.7% actually over weighted population lied between W/H ratio 0.49-0.59 (alert line)

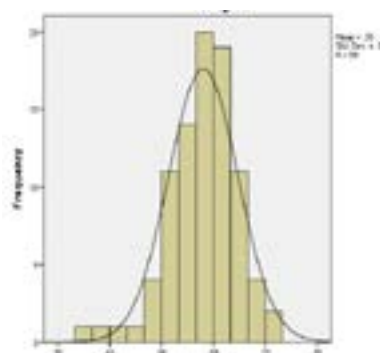


Figure 2: 43.7% actually obese population lied between W/H ratio >0.59 (action line)

Biography

Vishnu Sivapatham is a Researcher with a strong background in Health Science especially in Pediatrics. He has his expertise in Evaluation and passion in improving the health and wellbeing. After completing his MBBS at Eastern University in 2012, he completed Post-graduate Diploma in Child Health in Sri Lanka. Currently, he is pursuing his MD in Pediatrics at Post-graduate Institute of Medicine, University of Colombo, Sri Lanka. He is a Lecturer in Pediatrics at Eastern University, Sri Lanka. He is also a member of Sri Lanka Medical Council (SLMC), Sri Lanka Medical Association (SLMA), Young Scientist Forum (YSF), Perinatal Society of Sri Lanka (PSSL) and Nutritional Society of Sri Lanka (NSSL).

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