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Proceedings of

20TH GLOBAL OBESITY MEETING

August 24-25, 2018 Singapore

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20th Global Obesity Meeting

August 24-25, 2018 Singapore

Keynote Forum

Day 1

Deepa Iyengar, J Obes Weight Loss Ther 2018, Volume 8
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Deepa Iyengar

The University of Texas- McGovern Medical School, USA

Obesity a global paradigm: Do ethnic variations have an impact?

Globally there are 1.9 billion adults, 18 years and older, who are overweight and of these over 650 million are obese (WHO) and this rate has tripled since 1975. It is well known that obesity is a risk factor for many chronic conditions including hypertension, diabetes, cardiovascular disease and cancer with a huge financial and economic impact. Despite the magnitude of the problem no country in the world has been able to successfully reduce the rate of obesity in the last 30 years. In the times of global migration, there are people belonging to different ethnicities residing in a geographic location away from their ethnic origin which presents a unique challenge in the diagnosis and management of different diseases. This over the years has proven to be a very important issue in the field of obesity due to the variability that arises in diagnosis and management of overweight/obesity due to ethnic variations. There are different criteria used for identification of overweight/obesity based on ethnicity and also a difference in modalities of treatment based on variations due to genetics, dietary habits, exercise behavior patterns and cultural norms. Despite obesity being a global epidemic, physicians and related health care professionals serve as inadequate sources of information for identification and management of overweight/obesity. This may be more pronounced when there is a diverse ethnic group due lack of knowledge on specific ethnic guidelines and also culturally sensitive treatment plans. Successful management of overweight and obese patients globally needs physicians and health care professionals all over the world to come together and be more aware and cognizant of the ethnic related variations and use resources appropriately to help manage the disease. The main objectives of the study are: Understanding the global impact of obesity, understanding the differences in the diagnosis and management of obesity among different ethnic group of patients and reviewing the future direction of management of obesity in lite of its impact on multiple medical diseases with attention to variability related to ethnicity.

Biography

Deepa Iyengar is a Clinical Associate Professor for the Department of Family and Community Medicine at McGovern Medical School at The University of Texas Health Science Center at Houston (UTHealth). She is also the Medical Director for UT Physicians Family Medicine at the Texas Medical Center and Bellaire. She is board certified in Family Medicine.

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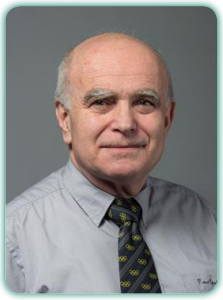

Vaclav Bunc
Charles University, Czech Republic

Active lifestyle is a crucial means of body mass reducing in overweight or obese girls

In developed countries overweight and obesity affects at least one in three girls. Young people with a high BMI during youth are more likely to remain overweight or obese throughout their adult life. Poor nutrition, in addition to an overall lack of exercise, is one of the major issues of the current modern day lifestyle. The energy content of current nutrition in the Czech Republic has been practically stable over the last two decades. In contrast, the energy content during general, daily functions during the same period, decreased by about 30%. The basis of regime interventions to influence obesity is increasing the volume of PA regularly carried out to change the sedentary on active life style. The most common questions needed to be answered when designing exercise intervention are thus are the physical assumptions affected by BM? To assess the predispositions for PA using BC, we can look at the ratio of Extracellular (ECM) and Intracellular (BCM) mass. To verify the dependence of the coefficient ECM/BCM on Body Mass (BM) we used bio-impedance analysis, calculating this ratio for girls (normal BM, N=102, mean age=12.7±3.1 years, BMI=19.4±0.2 kg.m^2; overweight, N=83, 12.7±3.1, 24.9±0.4; obese, N=69, 12.8±3.0, 29.8±0.5). We did not find significant differences in the ECM/BCM and thus in predispositions for PA and non-significant dependence on BM (normal BM, mean ECM/BCM=0.89±0.02; overweight, 0.90±0.03; obese, 0.91±0.02). In conclusion, the morphological predispositions for exercise are not dependent on BM, there do not exists any objective limitations for regular PA realized in the majority of the female population and for successful management of an overweight populous and/or in the case of individual obesity, it is necessary to adapt their life style.

Biography

Vaclav Bunc has completed his PhD from Technical University Prague, Czech Republic. He is a Professor of Exercise Physiology at Charles University Prague, Member of Czech and International scientific societies, head of many research projects and author of the great numbers of research reports.

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