

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE



## John Roberts

Abu Dhabi Women's College, UAE

### **“Don’ tell them what to do! Collaborate!” Motivational interviewing with children and young people with obesity**

**Aim:** This interactive workshop focuses on the use of a systematic approach (motivational interviewing) to the assessment and management of escalating and deteriorating child or adult obese patients in hospital care settings.

**Method:** Participatory and Reflective Exercises, Didactic lecturettes.

**Results and Conclusion:** At the end of the workshop the delegate will have: Explored how to apply common motivational interviewing skills with adults, children and young people; Considered some key research applications and developmental factors when using motivational interviewing with adults, children and young people; Experienced use of the OARS method in motivational interviewing with adults, children and young people; Reflected on where to take own practice needs next for the development of motivational interviewing.

**Pre-session Reading:** Learners are advised have undertaken some reading in Motivational Interviewing beforehand. Having undertaken a local Motivational Interviewing course may be of advantage but is not a pre-requisite.

### **Biography**

John Roberts has completed his MA in Social Work Studies at Exeter University. Practicing for 12 years as a Cognitive and Behavioral Psychotherapist and Motivational Interviewer, he joined the Improving Access in Psychological Therapies (IAPT) teaching team at Plymouth University in 2007. He has joined the Higher Colleges of Technology (HCT) as a Lecturer in Social Work in 2017. He has managed and led primary and secondary care mental health services in the UK as well as becoming Director for his own independent consulting and treatment company. He has published in motivational interviewing and managed through a number of CBT research projects in a clinical setting. He retains an interest in psychological aspects of chronic condition management.

[sroberts@hct.ac.ae](mailto:sroberts@hct.ac.ae)

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## X-cmark for detection of cardiac biomarkers in obese and overweight people

Vineeta Sharma

Xpedite Pharma Solutions, USA

Obesity associated metabolic and cardiovascular disorders are the leading cause of mortality in developing and developed countries. One third of the US population is either overweight or obese, according to WHO, by 2030, 50% of the US population will be obese. Obesity is associated with an increased risk of cardiovascular disorders, metabolic disorders and cancer. Obesity associated disorders put enormous burden on health care system, in US associated burden is approximately \$147 billion to \$210 billion per annum and in UK it is approximately £2.5 billion per annum. Cardiac events such as stroke, atherosclerosis and myocardial infraction are the leading cause of death in both men and women, however, obese men have three to four times higher risk of developing a cardiovascular problem compared to women. Effective and early screening of cardiac biomarkers can reduce mortality rate. Xpedite has developed a rapid screening test to identify four cardiac biomarkers from plasma samples. Our rapid screening test, X-cmark requires only a drop of blood and generates results within few minutes. Initial validation studies have confirmed the sensitivity as high as 95% and specificity upto 96%. This test outperforms most of the traditional immunochemical screening assays and offers an ease of testing at remote or resource poor settings. X-cmark is approximately three times cheaper compared to traditional blood tests. To clinically validate the test, we are planning to test 4 patient groups (gp1; myocardial infraction patients, gp2; obese+high LDL and lipids, gp3; overweight+high LDL and lipids, gp4; normal weight+high LDL and lipids) and a control group (healthy individuals); each group includes 10 male patients or controls. To summarize, X-cmark provides rapid detection of cardiac biomarkers and can be used by hospital staff or lab technicians without any specialized training. Global cost of cardiovascular disorders is expected to reach up to US \$1,044 billion by 2030; early and precise detection of cardiac biomarkers can reduce this cost as much as 25-30%. We are expecting to capture 16% percent cardiac biomarker market share by year 2020.

### Biography

Vineeta Sharma is the Founder and Principal Consultant at Xpedite Pharma Solutions, USA. She holds a PhD from AIIMS, New Delhi and Postdoctoral training from University of Michigan and UCSF Benioff Children's Hospital, Oakland. She has published several peer-reviewed articles and book chapters in the field of metabolic disorders, obesity, diabetes, hematology and gene therapy.

vsharma@xpeditepharmasolution.com

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## The rationale behind low carbohydrate diets for weight loss

**Elisabeth Govers**

Dutch Knowledge Center for Dietitians on Overweight & Obesity, Netherlands

**Introduction & Aim:** Low carbohydrate high protein diets have been prescribed from 1797 and are taken seriously by many researchers, although in main stream dietetics and medicine the diet can still be received with skepticism. Insulin Resistance (IR) is the result of a cascade of physiological events, starting with leading to a positive energy balance and weight gain. Patients with IR gain weight easily and have trouble losing weight on diets with normal carbohydrate content, because of the highly elevated insulin levels. A diet for patients with IR must therefore tackle this problem to make weight loss possible. In this review the evidence on the diet short and long-term, effects on comorbidities and difference with Mediterranean diet are discussed.

**Method:** A search was carried out in PubMed for articles of obesity management, IR, low carbohydrate/high protein diets and weight loss combined with comorbidities, several nutrients and the Mediterranean diet between 1995 and 2017. Outcomes were hyperphagia pared to patient observations from dietary practice in weight loss management. Diagnosis can easily be made by measuring waist circumference. The diet should be low carbohydrate/high protein but not provoking ketosis; energy and macro nutrient requirements should be individually assessed. Fat is not low but also not ad libitum, focusing on unsaturated fats. The intake of vitamin D, iodine and magnesium needs to be optimal. Alcohol consumption is not part of first phase of the diet. Exercise (endurance and resistance) is an essential part of the therapy. For patients with type 2 Diabetes medication, diet and glucose values need to be meticulously observed.

**Conclusion:** Low carbohydrate/high protein diets should be considered as a serious treatment option for all obese patients with and without comorbidities. They should be administered by specialized dieticians working in a multi-disciplinary team.

### Biography

Elisabeth Govers is the President of the Dutch Knowledge Centre for Dietitians on Overweight and Obesity, Netherlands. She has worked as a Researcher for the Institute of Health Sciences at VU University Amsterdam, Netherlands. She chairs the Specialist Network on Obesity of the European Federation of Dietetic Associations (EFAD). As a Registered Dietitian she runs clinics in primary care on obesity and its comorbidities. She has written articles on obesity management by dietitians, a guideline on the management of insulin resistance, as well as four books on nutrition and obesity for the general public.

e.govers112@upcmail.nl

### Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Neurological complications of bariatric surgery

Bilgehan Atilgan ACAR<sup>1</sup>, Atahan ACAR<sup>2</sup>

<sup>1</sup> Department of Neurology, Sakarya University Faculty of Medicine, Sakarya / TURKEY

<sup>2</sup> Department of Surgery, IKCU Atatürk Training and Research Hospital, Izmir / TURKEY

Obesity is a worldwide problem with an increasing prevalence. Bariatric surgery (weight loss surgery) includes a variety of procedures performed on people who have obesity. The number of bariatric surgeries has been rising in recent years because it is commonly considered to be the most effective treatment for obesity in terms of maintenance of a substantial weight loss and resolution of obesity-related comorbidities. There are different types of bariatric surgical procedures. The overall aim of bariatric surgery is to reduce intake or absorption of macronutrients including fats, carbohydrates and proteins which decrease caloric intake. It is also known that this increases the risk of nutritional deficiencies. The absorption of micronutrients including essential minerals and vitamins may be reduced. Most common nutritional deficiencies are vitamin B12, vitamin B9 and vitamin B1. Following them other deficiencies are vitamin D, niacin, pyridoxine, vitamin E and copper. Clinical neurological presentations following bariatric surgery may affect both central and peripheral nervous system and death is a possibility. They can be classified by time to presentation. Wernicke's encephalopathies, Korsakoff syndrome, acute polyradiculoneuropathies, optic neuropathies, myelopathies, peripheral neuropathies and myopathies are the most identified clinical presentations. Clinicians need to recognize and learn to manage these complications and a multidisciplinary approach of nutritional management including patient education is highly recommended.

## Biography

Bilgehan Atilgan has graduated from Medical School of Ankara University in 2004. He has completed Neurology Residency at Ministry of Health, Diskapi Yildirim Beyazit Education and Research Hospital, Turkey. He has worked as a Neurologist and Instructor at Sakarya University and became an Assistant Professor in 2013.

[bilgehanacar@hotmail.com](mailto:bilgehanacar@hotmail.com)

## Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Acute pancreatitis after laparoscopic sleeve gastrectomy: An unusual complication

**Biswanath Gouda**

Gouda Speciality Clinic & Somaiya Superspeciality Hospital, India

**Introduction:** Sleeve gastrectomy is the most preferred bariatric procedure done for weight loss across the globe. Staple line leak, bleeding, peritonitis and stricture forms the major complications that has been reported after sleeve gastrectomy. Acute pancreatitis is a rare form of complication seen in our practice, that needs to be kept in mind while undertaking bariatric surgery and treating morbid obesity.

**Case Summary:** A 38 year's old married female with BMI of 41 kg/m<sup>2</sup> having diabetes mellitus, hypertension and hypothyroidism underwent uneventful laparoscopic sleeve gastrectomy. She was discharged on the second post-operative day with normal vitals and negative leak study. She was tolerating clear fluids till post-operative day 10. Then she started having nausea with non-projectile vomiting and low-grade fever. Except raised serum amylase and lipase levels, rest of her bio-chemical laboratory tests was within normal range. Her ultrasound report showed mild edematous pancreas around the mid-body, with no collection or necrosis. We treated her conservatively with i.v fluids, antiemetic's, S/C Octreotide and she settled down in a week. She is currently 6 months post surgery and has no similar events to report.

**Conclusion:** We conducted a search on similar cases of acute pancreatitis post bariatric surgery and found very few cases has been reported. The overall incidence of acute pancreatitis post bariatric surgery is 1.04% which is higher than that reported for the general population (0.017%). Hence bariatric surgeons should be more cautious, aware of such complications and take appropriate consent prior to the surgery.

### Biography

Biswanath Gouda is a well-trained Advanced Laparoscopic GI & HPB Surgeon based in Mumbai, India. He has completed Fellowship in Advanced Laparoscopic Surgery from Scripps Clinic, San Diego, USA and from Institute of Laparoscopic Surgery, Bourdeaux, France with JL Dulucq. He is one of the few surgeons from India to have completed International Laparoscopic Hepato-biliary Pancreatic Surgery Fellowship under Brice Gayet, Paris, France. His clinical interest is in providing accessible health care to morbid obese patients in India, creating more acceptable norms for bariatric surgery and reducing childhood obesity.

dr.biswanathgouda@gmail.com

### Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Role of multidisciplinary approach before and after bariatric surgery

**Carole Wehbe Chidiac**  
GMC Clinics, UAE

**B**ariatric surgery and its short-term outcomes have greatly improved. Nevertheless, more knowledge is needed regarding the long-term sustainability of surgically-induced weight loss, subsequent improvement in obesity-related comorbid disease and long term safety. A review of the literature identified a trend suggesting improvements in quality of life and psychological health after bariatric surgery. However, not all patients report these psychological benefits. Some patients continue to struggle with body image dis-satisfaction. Severe pre-operatives psychopathology and patient expectation that life will dramatically change after surgery were found to negatively impact psychological health after surgery. Nutrition deficiencies are common complications after bariatric surgeries and are linked to physical and psychological disorders. Moreover, cases of eating disorders after bariatric surgery are being reported in the literature complicating the long term physical and psychological benefits of bariatric surgery. Medical, surgical, nutritional and psychological evaluation before the surgery is gold standard nowadays even though proper communication between team members is still lacking.

### Biography

Carole Wehbe Chidiac is having 20 years experience as a Family Medicine Specialist and an Eating Disorder and Obesity Practitioner. She is the Board of Advisers of Middle East Eating Disorders Association and an Active Member of the International Academy of Eating Disorders. She is active in training other health care professionals when it comes to evidence based treatments of obesity and eating disorders. She has given many talks at schools and companies about prevention of obesity and eating disorders. She is also an Aviation Medical Examiner (FAA, GCAA) involved in treating obesity in aviation.

chidiac@eim.ae

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Diabetes type-2 patients can stop insulin treatment when following the low carbohydrate lifestyle

Harriet Verkoelen

Dutch Knowledge Center for Dietitians on Overweight & Obesity, The Netherlands

Treatment of type 2 diabetes mellitus (T2DM), which is usually insulin resistance caused by metabolic syndrome, is mainly by tablets and insulin injections. The treatment protocol starts with a dietary advice which traditionally corresponds to the dietary advice of the World Health Organization (WHO). But when bloodsugarlevels are raised, diabetes medication is prescribed starting with Metformin oral tablets. When bloodsugarlevels are still raised or raise again, Sulfonylurea derivatives (SU) are prescribed in addition. When bloodsugarlevels are still raised or raise again, insulin injections are prescribed in addition. Starting with one injection of long-acting insulin per day. This can be intensified by three injections short-acting insulin per day. Medical treatment of T2DM often comes with a side-effect which is gaining weight. The problem is that T2DM patients mostly are overweight already. Gaining extra weight by medical treatment causes more health problems. Furthermore, increasing overweight causes more insulin resistance. Introducing the low carb lifestyle in the treatment of T2DM brings new possibilities. Less insulin is needed when eating less carbohydrates. This way patients with T2DM can postpone or even stop their medical treatment. A second effect, most importantly, is that the patient will lose weight. This will be beneficial to their health. By losing weight bloodsugarlevels will drop, the blood pressure will also drop, and cholesterol levels will improve (HDL-C and TG). Another effect is that the patient will be less hungry. In my own dietitians' office the focus is on losing weight. That is why I advise the low carb lifestyle. The result was that 90% of T2DM patients was able to stop insulin injections. They all lost weight and in 80% HbA1c value improved within half a year. More studies show similar results. These findings show that the current treatment protocol of T2DM patients could be considered to change.

### Biography

Harriet Verkoelen is a Dutch Dietician and Nurse Diabetes Specialist, working in the field of diabetes care for almost 30 years. She wrote three books on the low carb lifestyle and trains dietitians. She trains the diabetes nurses how to advice their patients in the low carb lifestyle and how to lower and stop their diabetes medication.

info@harrietverkoelen.nl

### Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Zyflamend attenuates high fat diet-induced obesity in mice

Mohammed Alquraishi, Dina Alani, Samah Chahed, Tory Frankel, Jay Whelan and Ahmed Bettaieb  
University of Tennessee-Knoxville, USA

Obesity is a growing epidemic in the United States, affecting more than one-third of adults. There is also a growing body of evidence highlighting the contribution of adipose tissue to systemic inflammatory state that play a potent role in obesity-associated metabolic syndrome and cardiovascular diseases. Zyflamend is a poly-herbal supplement derived from the extracts of ten different herbs effectively activates AMPK in vitro in several cell lines. When activated, AMPK is instrumental in inhibiting anabolic pathways that consume ATP, such as lipogenesis and protein synthesis and enhances catabolic pathways that generate ATP, such as fatty acid oxidation. The effects of Zyflamend on adipogenesis remain largely unknown. The objective of this study was to investigate the effects of Zyflamend treatment on adipogenesis and glucose homeostasis. The report shows the decreased adipogenesis of mouse and human adipocytes in vitro. Moreover, mice treated with Zyflamend exhibited improved glycemic control and enhanced insulin signaling in the muscle and adipose tissue compared with control mice. Further, Zyflamend treatment attenuated chronic HFD-induced Endoplasmic Reticulum (ER) stress in adipose and muscle tissues. Together, these studies identify Zyflamend as a potential treatment for obesity and metabolic syndrome and additional investigation into the mechanism(s) of Zyflamend's metabolic actions.

### Biography

Mohammed Alquraishi is a dietician in the Kingdom of Saudi Arabia with the passion of promoting body weight-reduction and maintenance through encouraging healthy dietary habits. Currently, Alquraishi is a PhD student at the department of Nutrition, University of Tennessee at Knoxville, USA. Alquraishi is working under the supervision of Dr. Bettaieb to investigate mixture of bioactive compounds, key enzymes, as well as signaling proteins and their contribution to metabolic diseases such as obesity and type-2 diabetes.

m\_i2005@hotmail.com

### Notes:



# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Prevalence of metabolic syndrome in specially challenged children

Anshoo Agarwal<sup>1</sup>, Fariha Kauser<sup>2</sup> and Madiha Younas<sup>3</sup>

<sup>1</sup>University of Dundee, UK

<sup>2</sup>Northern Border University, Saudi Arabia

<sup>3</sup>Riphah International University, Pakistan

Obesity has become one of the major risk factors for chronic diseases later in life. It is a reversible predisposing factor for several debilitating diseases including atherosclerosis, hypertension and diabetes mellitus. So our main goal is to raise awareness among the special care centers and to educate the parents and staff about the risks of obesity and associated disorders and measures to be taken to improve their lifestyle and prevent the complications which may occur in the future in such individuals. This study aimed to determine risk factors by assessing the prevalence of obesity, overweight, central obesity, their associated factors and other diseases in specially challenged children and to educate the parents and care takers about the risk of among them. The study was done based on a pre-structured questionnaire comprising the lifestyle data, in particular, age, sex, ethnicity, medical condition, diet, socioeconomic status, education level, family history of obesity and frequency of physical activity in specially challenged people. Variables including height, weight, height/weight ratio, waist circumference, calculation of BMI were also determined as a requirement to study obesity among them. Diagnosis of obesity and central obesity was confirmed by the WHO standard recommended method by determining of Body Mass Index (BMI) and Waist Circumference (WC). We studied the percentage of specially challenged children who are obese, overweight, have central obesity and are at risk. The study provided information about the changes in lifestyle which are required to avoid the complications and reducing the prevalence of obesity among the specially challenged people. It also helped in educating the parents and care takers of these people regarding risk of cardiovascular disorders and the diseases associated with obesity and among these people. The prevalence of obesity was high indicating that these individuals are prone to chronic diseases in the future, if not intervened at early stages. There is a need to educate the parents and care takers of these people. More health programs should be introduced among these centers to fight the prevalence of obesity and make the health care providers aware of the danger of obesity among them.

### Biography

Anshoo Agarwal is currently working as Professor & Chairperson at Department of Pathology, Northern Border University, Arar Kingdom of Saudi Arabia. She received her Bachelor of Medicine & Bachelor of Surgery from King George's Medical College Lucknow. Dr. Anshoo Agarwal received her M.D in Pathology from LLRM Medical College / Ch. Charan Singh University. She is an Associate professor and Discipline Coordinator in University Technology MARA, Malaysia. Dr. Anshoo Agarwal has served on many scientific memberships like Life member of Indian Association of Pathology and Microbiology, Member of International Academy Pathology, Life member of Indian Society of Hematology & Transfusion Medicine, Emirates Medical Association Pathology Society. Dr. Anshoo Agarwal has more than 80 publications. Dr. Anshoo Agarwal is editorial member of 3 journals and has many reviewed publications. Dr. Anshoo Agarwal research interests include Advance Haematology & Immunohaematology, Breast cancer and Anticancer vaccines.

dranshoo3@gmail.com

### Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Managing complexity in psychological crisis: A single case cognitive and behavioural formulation of binge eating, type-1 diabetes mellitus and obesity with features of multi-impulse control disorder

John Roberts

Abu Dhabi Women's College, UAE

Obesity has become one of the major risk factors for chronic diseases later in life. It is a reversible predisposing factor for several debilitating diseases including atherosclerosis, hypertension and diabetes mellitus. So our main goal is to raise awareness among the special care centers and to educate the parents and staff about the risks of obesity and associated disorders and measures to be taken to improve their lifestyle and prevent the complications which may occur in the future in such individuals. This study aimed to determine risk factors by assessing the prevalence of obesity, overweight, central obesity, their associated factors and other diseases in specially challenged children and to educate the parents and care takers about the risk of among them. The study was done based on a pre-structured questionnaire comprising the lifestyle data, in particular, age, sex, ethnicity, medical condition, diet, socioeconomic status, education level, family history of obesity and frequency of physical activity in specially challenged people. Variables including height, weight, height/weight ratio, waist circumference, calculation of BMI were also determined as a requirement to study obesity among them. Diagnosis of obesity and central obesity was confirmed by the WHO standard recommended method by determining of Body Mass Index (BMI) and Waist Circumference (WC). We studied the percentage of specially challenged children who are obese, overweight, have central obesity and are at risk. The study provided information about the changes in lifestyle which are required to avoid the complications and reducing the prevalence of obesity among the specially challenged people. It also helped in educating the parents and care takers of these people regarding risk of cardiovascular disorders and the diseases associated with obesity and among these people. The prevalence of obesity was high indicating that these individuals are prone to chronic diseases in the future, if not intervened at early stages. There is a need to educate the parents and care takers of these people. More health programs should be introduced among these centers to fight the prevalence of obesity and make the health care providers aware of the danger of obesity among them.

### Biography

Anshoo Agarwal is currently working as Professor & Chairperson at Department of Pathology, Northern Border University, Arar Kingdom of Saudi Arabia. She received her Bachelor of Medicine & Bachelor of Surgery from King George's Medical College Lucknow. Dr. Anshoo Agarwal received her M.D in Pathology from LLRM Medical College / Ch. Charan Singh University. She is an Associate professor and Discipline Coordinator in University Technology MARA, Malaysia. Dr. Anshoo Agarwal has served on many scientific memberships like Life member of Indian Association of Pathology and Microbiology, Member of International Academy Pathology, Life member of Indian Society of Hematology & Transfusion Medicine, Emirates Medical Association Pathology Society. Dr. Anshoo Agarwal has more than 80 publications. Dr. Anshoo Agarwal is editorial member of 3 journals and has many reviewed publications. Dr. Anshoo Agarwal research interests include Advance Haematology & Immunohaematology, Breast cancer and Anticancer vaccines.

dranshoo3@gmail.com

### Notes:

# MIDDLE EAST OBESITY, BARIATRIC SURGERY AND ENDOCRINOLOGY CONGRESS

June 25-26, 2018 Dubai, UAE

## Lifestyle, diabetes and metabolic after bariatric surgery: A 5 years clinical dietitian intervention experience and report in Abu Dhabi, UAE

Amani Kamal Mohamed Akeelah Saqallah  
Zayed University, UAE

Loss of weight is linked with short-term improving and prevention of metabolic risk, but whether these benefits persist over time among UAE national subjects post-bariatric is unknown. The prospective, controlled UAE obese subjects study involved obese subjects who underwent gastric surgery and matched with traditionally treated obese control subjects (weight reeducation diet care plan). We report follow-up data for subjects (mean age 30 years; mean body-mass index, 40) who had been followed by a clinical dietitian for 1-2 years (200 subjects) or before the analysis (August 1, 2017). The follow-up rate for laboratory examinations was 80.6% at 2 years. Follow up with dietitian clinic after one and two years, the weight had increased by 0.3% in the control group (diet care plan) and had decreased by 24% in the bariatric surgery group after 2 years, the weight had increased by 1.6% and decreased by 16%, respectively. Food intake was lower and the physically active subjects higher in the surgery group than in the control group during the observation period. Two year rates of recovery from diabetes, hypertriglyceridemia, low levels of high-density lipoprotein cholesterol, hypertension and hyperuricemia were more positive in the surgery group than in the control group. The surgery group had lower 2-year incidence rates of diabetes, hypertriglyceridemia and hyperuricemia than the control group with considering nutrition intervention and education in both. As compared with usual therapy, bariatric surgery appears to be a good option for the treatment of severe obesity, resulting in long-term weight loss, improved lifestyle, reducing the risk factors with subjects with butting in consideration the good follow-ups of medical nutrition-dietitian clinic interventions in both subjects.

### Biography

Amani Kamal Mohamed Akeelah Saqallah has completed her BSc degree from King Faisal University and had her one year Residency training at King Fahad Educational Hospital, KSA. She had her formal RD training at Kansas State and her Master's degree in Nutrition Science and Policy with the combination of Public Health at Tufts University, Boston, USA in 2013. She has developed successful nutrition workshops to meet age group educational needs. She designed and implemented innovative programs benefiting public and enhancing their well living skills and self-esteem. She achieved her Health Care MBA and Field Dietitian - Health Researcher Certificate from North Carolina and UAEU. She has joined Zayed University in 2014 and is a freelancer Member at Abu Dhabi CVD Public Health (Weqaya-Nutrition). She has an affiliation with the Emirate Strategic Research Center (ESRC) and her research focus is on behavior change, lifestyle and public health roles in prevention disease such as obesity, DM, cancers and CVD in UAE. She has volunteering roles in several humanitarian agencies and certified as Public Health Ambassador by Abu Dhabi Department of Health since 2015. She is currently a Medical Nutrition Therapy Dietitian and Well-being, Health Coach and Instructor at Zayed University, UAE.

amanikama@gmail.com

### Notes: