



Obesity and Depression: A Short Note

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Short Communication

People with depression or anxiety may experience weight gain or weight loss thanks to their condition or the medications that treat them. Depression and anxiety can both be related to overeating, poor food choices, and a more sedentary lifestyle. Over time, weight gain may eventually cause obesity.

About 43 percent of adults with depression are obese, consistent with the Centre for Disease Control and Prevention (CDC), and that they say adults who've been diagnosed with depression are more likely to be overweight than those that haven't.

Likewise, children who are depressed often have a better BMI than children who aren't. In one 2002 study, they found that children who were depressed were more likely to become obese by the time researchers' followed up one year later.

One standard measure of obesity is weighing quite 20 percent greater than the perfect weight for a given height. Another definition has a body mass index (BMI) of quite 30, consistent with recent findings, approximately one third of the U.S. population is suffering from obesity.

Defining depression has always been a puzzle. Many of us are depressed but don't realize it. Others could seem depressed to friends but really aren't. It seems that we all have stereotypes of what depression is, but they aren't always accurate actually.

Several recent studies have found significant improvements in depression following major weight-loss. This finding has been reported during a large group of patients after gastric restrictive procedures.

Younger patients, women and people with greater excess weight loss after surgery had the best improvement on their BMI scores.

In a study of depression in our own bariatric surgical population at Scottsdale Bariatric Centre, approximately 2,005 consecutive patients were evaluated for depression before and after surgery, also as post-surgical weight loss. We defined improvement of depression in three areas:

Cognitive (reduced thoughts of worthlessness, hopelessness and private failure)

Affective (reduced feelings of sadness, frequent crying and mood swings)

Physiological (increased energy state and better sleep habits)

It was found that 24 percent of these patients were diagnosed with depression before surgery, a finding very according to national norms. Six months after surgery, there was a 62.5 percent decrease in excess weight, amid a 13 percent reduction of depressive symptoms, while at 12 months after surgery, there was a 76.9 percent loss of excess weight, also as an 18 percent resolution of depression. It's going to be surmised from our data that loss of excess weight following bariatric surgery is amid a discount of depressive symptoms.

Among middle-aged women, depression is strongly and consistently related to obesity, lower physical activity, and (among the obese) higher caloric intake. Public health approaches to reducing the burden of obesity or depression must consider the strong association between these two common conditions.

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