

# 5<sup>th</sup> Asian Obesity Specialists & Endocrinologists Annual Meeting

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## Endoscopic therapy for weight loss and DM

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**Introduction:** For a long time, obesity has been known as a risk factor for cardiovascular disease, which is one of the main causes of death. Resistance to insulin and consequent compensatory hyperinsulinemia significantly increase the risk of death due to cardiovascular diseases. Endoscopic weight loss therapies may provide some of the benefits of weight loss surgery while being reversible, with a lower risk profile, and being available to patients who do not qualify for surgery. Those endoscopic solutions for weight loss are also applicable as metabolic procedures to address comorbidities as type 2 diabetes, dyslipidemia and nonalcoholic fatty liver disease.

**Metabolic Improvements with the Intra-gastric Balloon:** The intra-gastric balloon is a spherical silicone balloon that is resistant to degradation by gastric acid for approximately 6 months. It can be placed endoscopically and filled with 400 to 700 ml of saline. A meta-analysis by Imaz et al. of 15 studies comprising 3698 patients estimated 14.7 kg weight loss, 32.1% excess weight loss (EWL), and 5.7 kg/m<sup>2</sup> decrease in BMI after 6 months. A prospective study, evaluating the effect of the balloon on weight, insulin resistance, and liver steatosis in obese patients showed that 76% of the patients had a BMI decrease of 3.5 Kg/m<sup>2</sup> or more. The mean (SD) weight loss with respect to baseline values was 16.4 (8.2) kg with a corresponding mean (SD) BMI reduction of 6.4 (3.2) kg/m<sup>2</sup>. The absolute percentage of participants with glycemia levels of 100 mg/dL or higher decreased from 50% to 12%, those with triglyceridemia 150 mg/dL or higher from 58% to 19%, and those with abnormal ALT level from 38% to 7% [23].

**Conclusion:** The intra-gastric balloon and the Duodenojejunal bypass liner (DJBL) are tools with promising results in the endoscopic treatment of obesity. They are still subjects of research with a great potential for improvement. Although outcomes from the use of the intra-gastric balloon and the DJBL are not comparable to those of surgery with regard to weight loss and late results, these new techniques have showed an excellent result in ameliorating health status, in the control of the metabolic syndrome as well as improving the quality of life for a well selected group of patients.

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## The determinants of obesity among students of the University of Venda, Limpopo Province of South Africa

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**Background:** Obesity is a serious public health issue; recognised as a global epidemic by the World Health Organisation (WHO, 1998).

**Purpose:** The purpose of the study was to describe the determinants of obesity among students of the University of Venda.

**Methodology:** The design of the study was a quantitative correlational survey. Instrument for data collection was a questionnaire. Simple random sampling and systematic sampling methods was used to select the participants. The data was analysed using Statistical Package for Social Science (SPSS), version 22. Descriptive analyses were performed to show frequency distributions. Chi-square test was used to compare relationship between obesity and socio-demographic; dietary and environmental variables among students.

**Results:** Overweight and obesity is prevalent among student population with 20% of the participants being overweight and 9.5% obese. Unhealthy eating practices were found among the participants. There was statistical significant difference in BMI between male and female gender with female (66%) being more obese than male (34%). In terms of socio-demographic variable this study found gender and age of participants as important factor of overweight and obesity.

**Conclusion & Recommendations:** Regular nutrition education campaign should be carried out in the University in order to motivate more healthy food choices. Also Moderate to Vigorous Physical Activities (MVPA) recommended.

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