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Effect of therapeutic life-style change (TLC) technique to combat obesity and its related sequences: A prospective and retrospective analysis

Mohammad Nazrul Islam

Hamdard University Bangladesh, Bangladesh

Therapeutic Life Style-Change (TLC) has been a widely accepted and recognized technique to combat the modern disease of civilization. TLC diet, aerobic, anaerobic exercise, shaping, modeling, reinforcing techniques, life-style modification, information, education and communication system development are the prime interventions to fight obesity. It has been revealed that TLC technique reduce excess fat e.g. LDL, VLDL Cholesterol and Triglyceride level, and decrease cardiac mortality rate, improve cardiac efficiency, longevity and prevent stroke and their long term complications. It has been recognized that the consequence of obesity can be prevented by adopting a planned comprehensive approach. Research on traditional herbal formulation for weight loss, genetic counseling and cellular modification of non-modifiable factors are the painstaking issues to the scientific communities.

dr_sayemnazrul@yahoo.com

Cardiometabolic risks profile of normal weight obese and multi-ethnic women in a developing country

Foong Ming Moy

University of Malaya, Malaysia

Objectives: To determine the prevalence of normal weight obesity among multi-ethnic women in Peninsular Malaysia and examine its associations with cardiometabolic risks and lifestyle behaviors.

Methods: This was a cross-sectional study involving women recruited via multi-stage sampling from six states in Malaysia. Anthropometric and body composition analysis were performed. Normal weight obese (NWO) was defined as normal body mass index for Asians and the highest tertile of % body fat (BF). Biochemical measurements included fasting lipid and blood glucose levels. Metabolic syndrome was diagnosed based on the Harmonization criteria. Participants completed self-reported questionnaires that included physical activity, smoking, alcohol consumption, fruit and vegetable intake and sleep duration.

Main outcome measure: Body mass index, %BF, cardiometabolic risk factors, lifestyle behaviors.

Results: A total of 6854 women were recruited and the prevalence of NWO was 19.8% (95% CI: 17.3–22.5). NWO was more prevalent among the Indians and older women. NWO women had higher odds for abdominal obesity (OR: 2.64, 95% CI: 1.73–4.04), hypertriglyceridemia (2.51, 1.47–4.29) and hypertension (1.63, 1.15–2.31) compared to women with lower % body fat after adjusted for age and ethnicity. The prevalence of metabolic syndrome among NWO women was 5.4% (95% CI: 3.0–9.8). None of the lifestyle behaviors were significantly associated with NWO.

Conclusions: Women with NWO had cardiometabolic abnormalities including abdominal obesity, dyslipidemia and increased blood pressure.

moyfm@ummc.edu.my