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Eating disorders prevalence and determents in Sharjah high school among Emirati young females

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Objective: To assess the prevalence of Disordered Eating Attitude (DEA) and to investigate the cultural determinants of eating disorders in a representative sample of Emirati young females.

Methods: A cross sectional study of a sample of 508 adolescent females were chosen through a stratified randomization technique; where one section from each of the grade 10, 11 and 12 was chosen from each public school (n-6) located in Sharjah in the UAE. All consenting students in the selected classes filled the Eating Attitudes Test (EAT-26) and Body Figure Rating Scale (BFR). From the latter, body dissatisfaction score was calculated. From the students who scored 20 or above on EAT 26 (cut off point for eating disorder) and high on body dissatisfaction, a small sample was selected (n=52) and were included into one to one interviews for further investigation on determinants of DEA.

Results: From the study sample, 37.8% scored at-least 20 on EAT-26 and 65.2% had body dissatisfaction. Significant relationships were seen between the following pairs: 1) EAT-26 and body dissatisfaction, 2) BMI and body dissatisfaction, 3) occurrence of vomiting and EAT-26. After the in-depth interviews, the following factors were noted as pre-detriments of eating disorders: 1) family has negatively influenced 76.9% of the adolescent by emphasizing on thinness, verbal insults, and non-satisfaction with girls shapes and appearances; 2) Media has negatively influenced 73.1% adolescents (western view of women, models, and celebrates); 3) bullying at either home or school, because of either shape or weight negatively influenced 71% of the participants.

Conclusion: The study shows a high prevalence of eating disorder and body dissatisfaction among schools girls in Sharjah. Additionally, interviews showed that the major leading factors to these conditions are family, media, and bullying. Finally, future studies should start prioritizing educational campaigns in schools and within families targeting eating disorders to prevent further deterioration in health of the young generation in UAE.

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The clinical approach to the patient with obesity

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More than 2/3 of the US population is afflicted with either overweight or obesity. Obesity is the cause of over 60 other medical disorders including hospitalizations, illness and other healthcare expenditure. Obesity also either exacerbates, causes or worsens several comorbodities including diabetes, cardiometabolic disease, depression/anxiety and cancers as examples. Despite its medical importance, the medical community continues to inadequately address the disease and treats patients based on the outdated concept of calories in vs carloies out or solely as a behavioral dysfunction. We now know that energy balance is regulated and science has advanced our understandings of metabolic physiology and its relationship to the brain, gut and fat.

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