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Pediatric obesity an emergency crisis

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Pediatric obesity has rapidly become one of the leading international public health challenges. Since the 1980s, rates have more than doubled for preschool-aged children (2 to 5 years) and adolescents (12 to 19 years) and have more than tripled for school-aged children (aged 6-11 years) in the United States. Childhood obesity is an issue of serious medical and social concern. In developing countries, it is a phenomenon seen in higher socioeconomic strata due to the adoption of a western lifestyle. Consumption of high calorie food, lack of physical activity and increased screen time are major risk factors for childhood obesity apart from other genetic, prenatal factors and socio-cultural practices. Obese children and adolescents are at increased risk of medical and psychological complications. Insulin resistance is commonly present especially in those with central obesity and manifests as dyslipidemia, type-2 diabetes mellitus, impaired glucose tolerance, hypertension, polycystic ovarian syndrome and metabolic syndrome. Obese children and adolescents often present to general physicians for management. The latter play a key role in prevention and treatment of obesity as it involves lifestyle modification of the entire family. This article aims at discussing the approach to diagnosis and work-up, treatment and preventive strategies for childhood obesity from a general physician's perspective.

Biography

Ahmed Mohamed Abdelaal has completed his graduation (M.B.B.S) from the Al Zagazi University, Egypt in 1989. He then acquired his Masters in Pediatrics (M.S) and his Doctorate in Medicine (M.D) in 1994 and 2006 respectively from the same university. He is also certified in Advanced Pediatric Life Support (APLS) and Advanced Cardiac Life Support (ACLS), postgraduate in pediatric nutrition PGEN (Boston University) and ENS (Munich University). Dr. Ahmed has more than 25 years of experience in General Pediatrics with a special interest in Pediatric Hematology and have a good experience in pediatric asthma.