

Obesity, Risks and Managements

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Backgrounds

Obesity is an undesired phenotype/symptom that causes many troubles to whom suffers from it [1]. However, it is difficult to be remedied by existing management measures and resources. Many types of therapeutic/management measures have been developed for this symptom-some of these measures are even very expensive or harmful for the sufferers [1]. Usually, body-weight loss effort fails after discontinuation of intervention. This article tried to shed new light on this matter.

Current Condition

More than 1/4 of global adult population is overweight, even obesity. Obesity persons have a higher risk of many diseases, such as depression, diabetes, cardiovascular risks and so on [2-7]. In addition, obesity youngsters often meet with some kinds of other environmental factors and stresses that make them more likely episode of romance failures in blind-date, difficult to find decent jobs and lower possibility of position promotion. From these obesity sufferers, losing weight is their first choice and addictive with.

Disease Managements up to Now

Disease managements of obesity encompass wide-ranges of medical/pharmacologic issues-including diet control, life-style adjustments, operation and different types of drug interventions [8-11].

Generally speaking, purposed weight loss is very difficult no matter from personal practice and seeking medicine from specialized doctors or hospitals. Only small proportion of obesity people can receive excellent therapeutic responses in the clinic. Many people, especially personal practice regain their weight after therapeutic discontinuation. As a result, most obesity people struggle with this problem in a long-term.

Patho-physiologic Analysis

Human obesity is caused by a lot of different factors-including:

- Overfeed
- Pathologic factorials
- Sedentary less physical exercises
- Gastro-intestinal abnormal

Psychiatric burden

Behavior (alcoholic and laziness)

Drug-induced

Tumor-induced

Physiological change

Inheritance

Hormonal or blood glucose level escalations

Further Deteriorating

Cardiovascular risks (heart-attack and so on)

Type 2 diabetes

Immune system impairment

Mental illness (suicide, intimidate and so on)

Major Counteractive Measures

Diet-control

Consumption of more fresh fruits, vegetable and seafood

Life-style adjustments (exercises, Yoga, Qi-gong and meditation)

Surgery (gastric bariatric surgery)

Chemical drugs

Biotherapy

Psychiatric intervention

Therapeutic combinations

New Insights

New and update obesity therapeutics should be targeted to disease originality and causality. Without these targeted therapeutics, clinical obesity therapy will be unchanged and less responsive.

Genomic study of obesity might bring us many new insights into this chronic phenotype/symptom [12-14]. Along with the advance of other diseases, the patho-therapeutic knowledge of obesity might be improved by this genomic approach in the future.

Therapeutic combinations are also very useful for obesity patients. These kinds of therapeutic paradigms are very useful for many other diseases [15-20]. Further work in this regard is inevitable.

Natural chemotherapeutic agents or drugs might be more effective against obesity onset and progresses [19,20].

Conclusion

New insights into human obesity causality and therapeutics may help those sufferers with overweight and even obesity. We need to promote these researches in the near future. Look forward to new generation of medical breakthroughs for obesity control.

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