

A Review on Obesity and its Management

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ABSTRACT

Fatness is the most important health hazard in the world today. Obesity has reached epidemic proportions globally, with at least 2.8 million people dying each year as a result of being overweight or obese. Being overweight or obese is associated with a higher risk of dying prematurely than being normal weight. Obesity is associated with higher rates of death driven by comorbidities such as type 2 diabetes mellitus (T2DM), dyslipidemia, hypertension, obstructive sleep apnea (OSA), certain types of cancer, steatohepatitis, gastroesophageal reflux, arthritis, polycystic ovary syndrome (PCOS), and infertility. It is the excessive accumulation of fat weight and is expressed as percent body fat. It is an excess of adipose tissue in relation to body size. The condition is determined essentially by two variables, the number and size of fat cells. Gross obesity occurs when both are increased. The number of fat cells is laid down in early childhood. People can maintain a healthy weight, limiting total fat intake and shift fat consumption away from saturated fats to unsaturated fats, increasing consumption of fruit, vegetables, pulses, whole grains and nuts, limiting the intake of free sugars and salt, People should engage in adequate levels of physical activity throughout their lives. At least 150 minutes of regular, moderate-intensity physical activity per week reduces the risk of cardiovascular disease, diabetes, colon cancer and breast cancer. Muscle strengthening and balance training can reduce falls and improve mobility among older adults. More activity may be required for weight control. The basic treatments which are generally offered to treat the Obesity are reducing of energy intake, correct apportionment of food over the course of the day, increasing energy expenditure.

Key Words : Overweight, Obesity, Exercise

INTRODUCTION

Body weight is made up of fat weight and lean body weight of fat free weight. Percentage body fat is simply the proportion of total weight that is fat weight. It is possible for two individuals of same height and same body weight to differ substantially in percent body fat, which is why we use it as the standard for evaluating body composition. In a young adult male, weighing 80 kg, the skeleton weighs approximately 12 kg, the muscles add another 40 kg and fifty (adipose) tissues approximately 4.5 kg. Muscles therefore are the body's heaviest tissue. A young woman has 10-15 kg less muscle, but equivalent 5-10 kg more adipose tissue than the man. With

advancing years, the proportion of fat increases and that of muscle decreases, which does not necessarily affect either the weight or the appearance. With respect to the proportions of muscle, fat and skeletal tissue, boys and girls have essentially the same body composition until just before puberty. The differences between the sexes described above are due to the effects of sex hormones. There are different causes of overweight such as metabolic defects, food absorption, appetite, economic and uneconomic food, satiety, habitual over eating, familial, psychological problem. Obesity is the excessive accumulation of fat weight and is expressed as percent body fat. It is an excess of adipose tissue in relation to body size. The condition is determined essentially by two

variables, the number and size of fat cells. Gross obesity occurs when both are increased. The number of fat cells is laid down in early childhood. It has been the earliest contributory factor in parental nutrition which may activate a genetic tendency towards over weight. That apart, it has also been observed that when one parent is overweight there are 50% chances that the child will be obese. Studies of adolescent girls reveal a familiar and probably genetic predisposition to the development of obesity, with normal food intake. Obesity has reached epidemic proportions globally, with at least 2.8 million people dying each year as a result of being overweight or obese. Being overweight or obese is associated with a higher risk of dying prematurely than being normal weight. Obesity is associated with higher rates of death driven by comorbidities such as type 2 diabetes mellitus (T2DM), dyslipidemia, hypertension, obstructive sleep apnea (OSA), certain types of cancer, steatohepatitis, gastroesophageal reflux, arthritis, polycystic ovary syndrome (PCOS), and infertility. WHO defines overweight as a BMI equal to or more than 25, and obesity as a BMI equal to or more than 30 and up to 34.9 this is obesity class I. Severe obesity i.e. obesity class II is in between 35.0-39.9. Obesity III, Morbid Obesity range is 40.0-49.9. Severe Morbid Obesity i.e. Obesity class IV is >50. Body mass index (BMI) – the weight in kilograms divided by the square of the height in meters (kg/m^2) – is a commonly used index to classify overweight and obesity in adults. Inherited factors play a certain role, but more important are overindulgence in food and inadequate physical exercise. People who have acquired an excessive number of fat cells can never get rid of the surplus. Food supplied to the body is either utilized for metabolic purposes or stored in fat cells. The later are inclined to absorb as much of the food as possible, although this can be counteracted by physical exercise. Eating followed by no physical exercise is thus more likely to be obese. However, it has seen for a given daily intake of food, the risk of obesity is greater if a large proportion on this food is consumed in the evening.

Observation:

In 2016, more than 1.9 billion adults were overweight and 650 million were obese. At least 2.8 million people each year die as a result of being overweight or obese. The prevalence of obesity nearly tripled between 1975 and 2016. Once associated with high-income countries, obesity is now also prevalent in low- and middle-income

countries. Childhood obesity is one of the most serious public health challenges of the 21st century. Overweight children are likely to become obese adults. They are more likely than non-overweight children to develop diabetes and cardiovascular diseases at a younger age, which in turn are associated with a higher chance of premature death and disability. Most of the world's population live in a country where there are more people overweight and obese than underweight. This includes all high-income and middle-income countries. Diabetes, ischaemic heart disease and certain cancers are attributable to overweight and obesity. An increased consumption of energy dense foods, without an equal increase in physical activity, leads to an unhealthy increase in weight. Decreased levels of physical activity will also result in an energy imbalance and lead to weight gain.

Discussion:

Social and economic development as well as policies in the areas of agriculture, transport, urban planning, environment, education, food processing, distribution and marketing influence children's dietary habits and preferences as well as their physical activity patterns. Increasingly, these influences are promoting unhealthy weight gain leading to a steady rise in the prevalence of childhood obesity. Metabolic defects, food absorption, appetite, economic and uneconomic food, satiety, habitual over eating, familial, psychological problem accelerate over weight. People can maintain a healthy weight, limiting total fat intake and shift fat consumption away from saturated fats to unsaturated fats, increasing consumption of fruit, vegetables, pulses, whole grains and nuts, limiting the intake of free sugars and salt, People should engage in adequate levels of physical activity throughout their lives. At least 150 minutes of regular, moderate-intensity physical activity per week reduces the risk of cardiovascular disease, diabetes, colon cancer and breast cancer. Muscle strengthening and balance training can reduce falls and improve mobility among older adults. More activity may be required for weight control. The basic treatments which are generally offered to treat the Obesity are reducing of energy intake, correct apportionment of food over the course of the day, increasing energy expenditure.

Conclusion:

The causes of Obesity are plenty. However, People can maintain a healthy weight, limit total fat intake and

shift fat consumption away from saturated fats to unsaturated fats, increase consumption of fruit, vegetables, pulses, whole grains and nuts, limit the intake of free sugars and salt, People should engage in adequate levels of physical activity throughout their lives. At least 150 minutes of regular, moderate-intensity physical activity per week reduces the risk of cardiovascular disease, diabetes, colon cancer and breast cancer. Muscle strengthening and balance training can reduce falls and improve mobility among older adults. More activity may be required for weight control.

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