

Editorial

Obesity and related complications such as diabetes mellitus, dyslipidemia, cardiovascular disease and hypertension are reaching epidemic proportions worldwide. In the past few decades the prevalence of overweight and obesity has markedly increased not only among adults but also among children and adolescents causing serious implications for worldwide health care systems. Many data are available on the prevalence of obesity from well developed countries while relatively few report on the situation in developing countries. Overweight and obesity has increased in general population up to 50-65% while obesity alone up to 15-20%. The greater prevalence of obesity was found among women than men and greater among non-white populations. Also the prevalence of overweight and obesity in children is rising in the developed countries reaching about 10% in Europe and up to 20% in the United States. It was suggested recently that specific prenatal environmental factors being independent determinants of neonatal body composition may influence on body weight through to adulthood.

The strongest predictors of overweight and obesity are high socioeconomic status and urban living that promote increased food intake and decreased daily physical activity. Genetic susceptibility is another important pathogenic factor.

Simple measures of abdominal obesity, associated with greater risk of cardiovascular disease and diabetes, such as : waist circumference, waist/hip or waist/height ratio seem to be superior to overall obesity measured as BMI (Body mass index) in different ethnic populations. The role of increased visceral fat accumulation and the underlying molecular and cellular mechanisms have been the subject of intensive research in recent times. Visceral obesity results in dysregulation of the physiological balance of adipokines produced and released from adipocytes, insulin resistance, endothelial dysfunction and a proatherogenic state.

Developing strategies to prevent and decrease the frequency of overweight and obesity in high-risk groups may reduce health care expenditures.

Grazyna Sypniewska