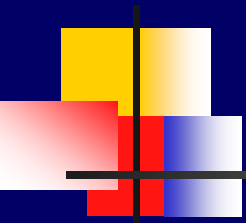


بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



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Obesity

- Measurement and definition
- Physiology
- Genetic causes of obesity
- Endocrine causes of obesity
- Epidemiology



Measurement and Definition

- Increased amount of body fat.
 - Weight (exceptions, such as body builders)
 - BMI
 - $\text{BMI} = \frac{\text{WEIGHT (in kilograms)}}{\text{HEIGHT in meters}^2}$



Classification of Obesity

- BMI 25.0- 29.9 kg/m² Overweight
- BMI 30.0-34.9 kg/m² Grade I
- BMI 35.0-39.9 kg.m² Grade II
- BMI >40 kg/m² Grade III
(morbid)
(extreme)



Measurement and Definition

- Distribution of body fat.
 - Upper body (abdomen and flanks, android obesity, "apples")
 - Lower body obesity (legs and buttocks, gynoid obesity, "pears").
 - Visceral adiposity



Measurement and Definition

- **Research techniques**

- Skin fold thickness
- Waist to hip ratio
- Waist circumference
 - > 88 cm in women
 - >102 cm in men
- Bioelectric impedance
- Underwater weighing
- Isotope distribution
- DEXA
- CT
- MRI



New Definition of Obesity:

**Endocrinologist (AAACE) and
American College of Endocrinology
(ACE) replaced the word of Obesity
with**

**Adiposity- based Chronic
Disease(ABCD).**



Physiology

- Central weight-control center
 - Hypothalamus
- Feed-back control of body weight
 - Leptin and other adipocyte signals
 - Signals from the “gut”
- Balance between energy intake and expenditure



Physiology: Central Pathways

Anorexigenic

- Leptin
 - α -MSH
 - GLP-1
 - Serotonin
 - CCK
- Calcitonin
 - Entero-statin
 - IL-1B
 - Neurotensin
 - Oxytocin
 - Vasopressin

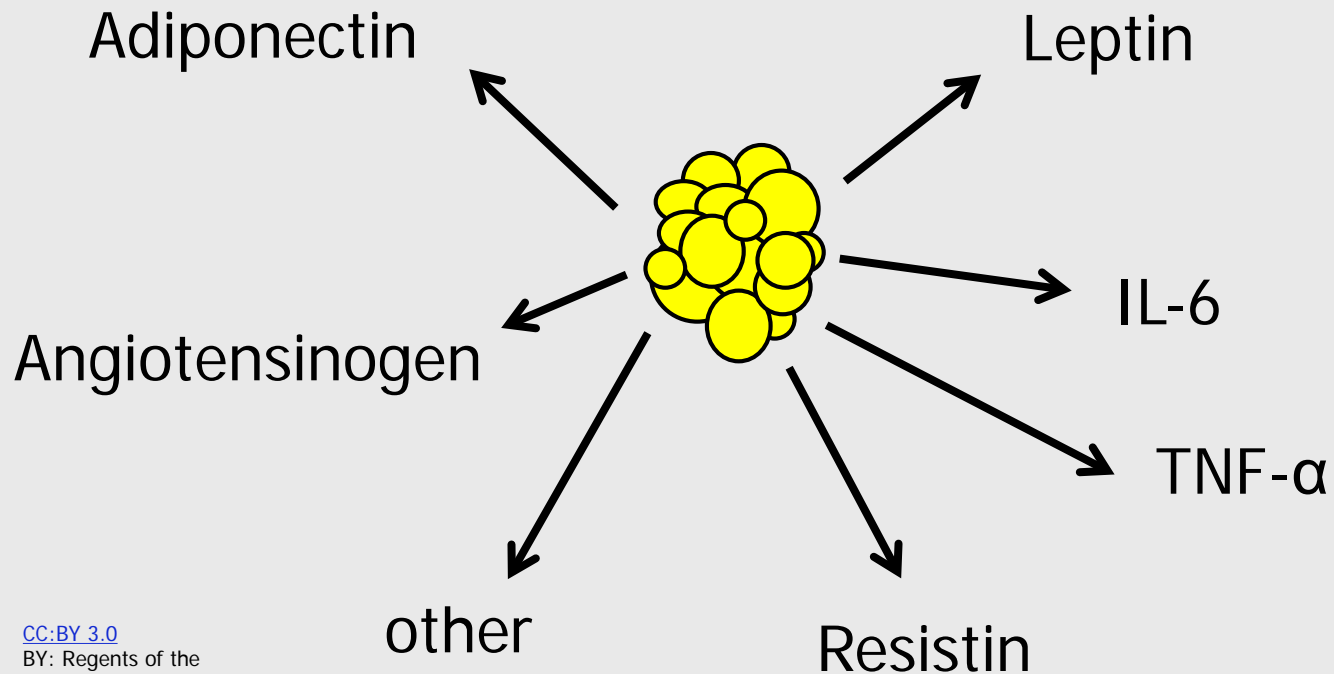


Physiology: Central Pathways

Orexigenic

- Neuropeptide Y
- Orexin A, B (Hypocretin 1,3)
- Galanin
- Dynomorphin
- Norepinephrine
- B-endorphin

Adipose Tissue: An Endocrine Organ





Physiology: Leptin

- A 16-KD hormone produced predominantly by adipocytes
- Circulating levels are determined chiefly by fat mass
- Increased leptin synthesis/secretion
 - Re-feeding (after fasting)
 - Adiposity
 - Glucocorticoids
 - Insulin
- Inhibition of leptin synthesis/secretion
 - Sympathetic stimulation
 - Circulated partially protein



Physiology: Leptin

- Leptin's central actions :
 - Increase energy expenditure (via physical activity, sympathetic nervous system activity)
 - Decrease food intake
 - Decrease body weight
 - Increase insulin sensitivity
 - Regulate other pituitary hormone axes
- Leptin's peripheral actions
 - Stimulate angiogenesis
 - Hematopoietic cell proliferation
 - T-cell immunity



Genetic bases of obesity

- Big genetic component
 - Estimated at 40-70%
- Most of obesity polygenetic or logogenic

- Monogenetic forms of obesity
 - Isolated genes
 - Syndromic obesity



Monogeneic obesity

- Leptin
 - A few families
- Leptin receptor
 - A single family
- MC4-Receptor (Melanocortin)
 - Most common defect



Endocrine Causes of Obesity

- Hypothalamic injury or tumor
 - Cushing's syndrome
 - Growth hormone deficiency
 - Hypothyroidism
- Insulin Resistance
 - Polycystic ovarian syndrome
 - Diabetes type2



A Global Epidemic

Obesity prevalence

Years	Prevalence
■ 1995	200 million
■ 2000	300 million
■ 2008	857 million
■ 2013	2.1 billion
■ 2030	3.3 billion

(2.2 Overweight and 1.1 obese)



Prevalence of obesity in the U.S.

- Past Targets: 2010
 - 15% of adults
 - 5% of children

- Current Targets: 2020
 - 30.5% of adults
 - 14.5% of children



Prevalence of Obesity

- In 2014, more than 1.9 billion adults (18 years and older) were overweight.
- Of these over 600 million were obese.
- 42 million children under the age of 5 were overweight or obese in 2013.
- The same report states that the prevalence for overweight among children under the age of 5 is 12.4%.



Race/ethnicity

- Adults (age-adjusted)
 - 47.8% non-Hispanic black
 - 42.5% Hispanic
 - 32.6% non-Hispanic white
 - 10.8% non-Hispanic Asian

- Children/Adolescents
 - 22.4% Hispanic
 - 20.2% non-Hispanic black
 - 14.1% non-Hispanic white
 - 8.6% non-Hispanic Asian



Prevalence of Obesity (future)

- It has been further projected that 60% of the world's population, i.e. 3.3 billion people, could be overweight (2.2 billion) or obese (1.1 billion) by 2030 if recent trends continue.



Prevalence of Obesity in I.R.Iran

1401 6-18 years

18.3 % (over weight and Obese)

1401 Over 18 years

37.05% (over weight), 33.95% (Obese)

Data from KSA National Surveys

Studies by National Surveys KSA	Age group	Prevalence Obesity BMI>30kg/m ²		Prevalence Overweight BMI 25-29.9 kg/m ²		Self eported Physical inactivity	
		Male	Female	Male	Female	Male	Female
1990-93 (n=13177)	>15years	16%	20.26%	27.23	25.20	43.3%	84.7%
1995-2000 (n=17232)	>30 years	26.4%	44.0%	42.4%	31.8%	93.9%	98.1%



Gateway to diseases

- Obesity is a gateway to diseases, and it has become one of the leading causes of disability and death, affecting not only adults but also children and adolescents worldwide.



Obesity Complications

- Obesity has important consequences for morbidity, disability and quality of life and entails a higher risk of developing type 2 diabetes, cardiovascular diseases, several common forms of cancer, osteoarthritis and other health problems.

