Role of Lebanese Hospitals in Fighting Obesity



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Obesity is described as a global pandemic with 30% of the world now overweight and more than one third of children and adolescents overweight or obese. Childhood obesity has more than doubled in children and quadrupled in adolescents in the past 30 years.

"In 2010, overweight and obesity were estimated to cause 3.4 million deaths and 4% of years of life lost".

Obesity in Lebanon vs. Other Countries

Obesity & Overweight Rates	Lebanon	USA	Gulf countries
Adults	62%	52%	68%
Children or adolescents	33%	16%	33%

Causes

It is important to assess root causes of weight gain:

- Slow metabolism: age, sex, genetics, neuroendocrine, medication, etc.
- Increased food intake: socio-cultural and psychiatric factors, knowledge deficit, mindless or emotional eating, sleep deprivation, medication, etc.
- Reduced activity: sociocultural and psychiatric factors.

physical limitations, chronic fatigue, musculoskeletal pain, medications, etc.

Why are Lebanese People Gaining Weight?

An alarming increase in obesity prevalence was noted in the Lebanese population.

Economic, social and cultural changes, the fast rate of urbanization, reduced physical activity, and a fast-track lifestyle are the main reasons behind this.

68% of the Lebanese adult population is estimated to be physically inactive.

Lebanese adolescents total screen time (TV viewing, computer & videogames) is around 30 hours/week thus exceeding values reported for US adolescents (approximately 18 hours/week).

Trends in dietary patterns are also involved: increasing desire for Western diet and modernized Lebanese food instead of traditional food (which studies have shown are a good model for diet diversification).





Consequences of Obesity

Obesity leads to higher risk of developing diabetes type 2, sleep disorders, cardiovascular diseases, depression, Physicians must advise their patients on obesity risks, the benefits of weight loss and all treatment options while hypertension, dyslipidemia, bone and joint disorders, and cancers (colon, breast, prostate, uterus, cervix). focusing on the root cause of obesity.

Treatment of Obesity

Ideally, lifestyle modifications -eating fewer calories and being physically active- with realistic goals are the best way to treat obesity. Children and teens must be medically observed. When lifestyle modifications are not sufficient, pharmacotherapy and surgery can be the solution.

Hospitals can also collaborate with neighboring schools in order to boost fitness programs under one of the slogans "Keep calm and move", "Keep calm and ignore junk food", "Health is a great wealth, don't waste it". Together, they can improve school cafeteria menus, student-reward programs, promote healthy lifestyles among school staff, and organize educational fun activities and phone applications for kids. After-school activities are also essential to promote active, outdoor habits. The ministries of education and health must sponsor and generalize this collaboration, in collaboration with the WHO and UNICEF.

How can hospitals help to curb the obesity rise in the country? Social support: many obese patients have poor selfesteem, a distorted body image or unrealistic weight loss expectations. That's why mental and social support is as important as medical support. Patient education: hospitals should empower individuals with real information on the body, nutrition, and fitness.

Hospital social media and TV screens in patient rooms and

waiting rooms are some of the tools that can be used for this education.

For children and teenagers, information can be adapted to become an enjoyable experience (colorful and attractive); the pediatric ward must diffuse this information on TV screens. Educational games can be installed on tablets in hospitals to make learning more fun.