

Obesity, Time of Change...

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The increasing number of people with obesity or overweight in today's society is a worrying reality. In addition, this number grows every year and causes multiple problems for those who suffer from it, such as limitations in their daily lives, considerable alterations in their health status, and even an increase in health spending for the care and attention these patients receive. Until not long ago the usual treatment was the hypocaloric diet and intense physical exercise in order to increase energy expenditure while reducing calorie intake, all with the purpose of creating a negative balance that „burn „ the accumulated fat for years.

New insights

Well-structured hypocaloric diets achieve weight reduction in cases where there is an imbalance between expenditure and energy consumption, and in those cases can be helpful at first, but all diets fail in the long term for 2 main reasons: they cause anxiety to the patient when withdrawing foods that are usually pleasant for him, and the other reason is that one cannot maintain a diet forever, it is incompatible with daily life, and more considering that if they are left, there is usually an increase in weight, the much feared „rebound effect“. For all this, to what extent is it still advisable to establish a hypocaloric diet, seeing the poor results that are achieved in the long term? What happens with other factors that predispose to obesity such as certain genes, alterations in the gut microbiota or certain endocrine or psychological disorders?

All this requires a multidisciplinary vision and several coordinated action fronts to achieve the common goal. We can change the eating patterns and not stick to a diet; the recommended guidelines are by all known, and in the world in which we live one of the greatest enemies are the simple sugars. We can add some daily physical activity such as walking for 40 minutes at a good pace; we cannot pretend that an obese person does intense exercise, because he would be forcing his joints unnecessarily. We can recommend the intake of probiotics for a longer or shorter time to help regulate the intestinal flora. We can refer to endocrinology and/or psychiatry to assess other possible pathologies that predispose to obesity. In the future, we will probably be able to edit certain genes with the help of CRISPR/CAS technology, as has already been seen in a recent new (He Jiankui, Southern University of Science and Technology - Shenzhen - China). In any case, it will be the union of several of these factors that can achieve a reduction of effective long-term weight and will improve the quality of life of these patients.

The bad companions

All the aforementioned is supported by scientific evidence contrary to pseudotherapies and “miracle diets“. There are several alternative therapies that are offered with the promise of achieving a weight reduction or an improvement of comorbidities without showing up to date results supported by reliable and proven quality studies. We must make it clear that these only contribute to the loss of valuable time at the time of starting treatment, stop following the guidelines mentioned above or even negatively affect health. It is our responsibility to bring patients the latest advances to fight obesity that are sufficiently supported by the existing scientific literature.

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