



A Comprehensive Look at Obesity and its Treatment

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Obesity is a chronic disease of high prevalence in all countries of the world. It is one of the main public health problems due to its increase in recent years, since it suggests a high risk of morbidity and mortality due to associated complications and represents a great economic burden for health budgets. Although it can be caused by many factors, the root cause is an energy imbalance between calories consumed and calories expended. It is an important risk factor for non-communicable diseases, such as cardiovascular diseases (CVD), mellitus diabetes type 2 (MD2), arterial hypertension (HBP), dyslipidemia (elevated blood lipids), sleep apnea obstructive (SAO), cancer and locomotor disorders, among others.

It is a multifactorial disease, which affects those who suffer from it, from the physical and psychological point of view and therefore must be approached from many perspectives to achieve the desired weight loss.

The therapeutic approach to obesity is based on a combined treatment with dietary measures, physical activity, drugs, modification of healthy habits, regulation of sleep hours, stress reduction, psychotherapy. The change of eating habits generates in the patient, a modification of the lifestyle that will last over time. Education around health and nutrition is essential to carry out weight loss. The treatment must be accompanied by psychological support to achieve greater results, in all cases. But given the failure of conventional nutritional treatment, other alternatives should be evaluated to achieve a reduction in body weight. For this reason, new measures are emerging to treat obesity, among which are surgical interventions.

In patients with morbid obesity refractory to medical treatment, surgical treatment is recommended since significant weight loss is achieved in the medium and long term. Within this group, is bariatric surgery (BS).

Of the surgical interventions, the one performed most frequently in Argentina is the Roux-en-Y gastric bypass (RYGB), which offers superior results in terms of weight loss, reduction or cure of comorbidities and improvement in quality of life. It is one of the most universally accepted approaches, backed by long-term studies.

The success of the RYGB depends on several factors: the way in which the treatment is approached by the work team, the experience of this group, the role that each member plays, and the careful selection of the candidate for surgery.

If the subject meets all the necessary requirements to carry out the intervention, if it is estimated that the quality of life and associated comorbidities will improve, if each case is individually, exhaustively and thoroughly evaluated, then the procedure can be carried out. intervention.

When the practice becomes a business to bring economic revenue to the professionals who perform the surgery, this intervention becomes dangerous.

There are many positions regarding the realization of the BS; Many authors conclude that it is the most effective alternative

for sustained weight loss over time, since weight loss is achieved quickly compared to conventional nutritional treatment. In turn, it has a very low mortality (approximately 1%) compared to other interventions. And with the appropriate professional support and with a work team that acts in an interdisciplinary way, weight regain is low over the years.

On the other hand, there are professionals who recognize that if the selection of the candidate is not responsible, weight gain is achieved quickly. It must be taken into account that if the patient's adherence to post-surgical treatment is not effective, the treatment is not very effective.

Therefore, it can be concluded that nutritional education is the most powerful tool to achieve weight loss, regardless of the technique used. In the case of morbidly obese patients who make repeated attempts to reach a desirable weight and fail, a very detailed physical and psychological examination should be done to determine whether or not the patient is fit to undergo RYGB as an alternative to lose weight.

Once it is decided that the patient can undergo said intervention, all the necessary information must be given regarding the pre-surgical diet, the surgery itself, the post-surgical stage and the possible negative consequences that may arise if it is not followed. adheres correctly or if the protocol established by the interdisciplinary team is not followed.

The choice of surgery must be agreed between the patient and the work team. It must be the best choice to treat the pathology and to improve the subject's quality of life. Priority should be given to improving the health that the person will experience after undergoing RYGB and, although no patient is exempt from post-surgical complications, exhaustive follow-up by professionals and compliance with the regimen help to obtain positive long-term results.