

Obesity and Metabolic Syndrome

Dr. Charles Shaffer

Over the last few months, many patients have inquired about metabolic syndrome. Metabolic syndrome is a group of risk factors that raises an individuals risk of stroke, heart disease, diabetes and other health problems. In recent years, the syndrome has become more prevalent in the United States and approximately 40% of Americans are living with metabolic syndrome today. The risk of developing this syndrome increases with age.

The five risk factors are as follows: high blood glucose levels, low levels of HDL (the good kind of cholesterol), high levels of triglycerides in the blood, a large waist circumference or an apple shape physique, and high blood pressure. To be eligible for diagnosis, a physician must identify central adiposity which is the measure of the waist circumference of more than 40 inches for men and more than 35 inches for women. A fasting blood triglyceride level of 150mg/dL or more or prescribed medication for high triglycerides must also be present at the time of diagnosis. Medical professionals are also attentive to low levels of HDL cholesterol or prescribed medication for low cholesterol. For HDL cholesterol to be considered low, it must be less than 40 mg/dL for men and 50mg/dL for women as well as an elevated blood pressure of 130/85 or if the patient is taking high blood pressure medication.

WHAT YOU'LL FIND INSIDE:

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In the United States, the metabolic syndrome is more prevalent in non-Hispanic white men than in Mexican Americans or non-Hispanic African American males. By contrast, metabolic syndrome is more common in Mexican American females than in non-Hispanic African American females or non-Hispanic white females. Prevalence of metabolic syndrome is increasing globally each and every day.

The role of insulin resistance in metabolic syndrome is perhaps the most single point that deserves great consideration and emphasis. Insulin resistance is not a disease but rather a description of the physiological state that significantly increases the chance an individual will develop close related abnormalities such as cardiovascular disease, insulin resistance, and Type II diabetes. We now have the knowledge obesity is a variable that contributes to insulin resistance and is not a consequence of the deficit. Also, insulin action does not necessarily detract from the individual as it is a requirement for diagnosis.

Metabolic syndrome calls for the management and active watch of your hypertriglyceridemia, hypercholesterolemia, hypertension, elevated fasting blood levels of glucose, and obesity. As you know, elevated triglyceride levels correlate directly with cardiovascular disease. High triglyceride levels are linked to insulin resistance and occur quite commonly in Type II diabetes. In this condition, cells do not usually respond to insulin and do not promote glucose entry into the cells. Insulin resistance can stem from several factors such as obesity, polycystic ovarian syndrome, and a sedentary lifestyle.

In the past, metabolic syndrome was labelled as 'X' because we had not quite understood what metabolic syndrome actually was. We now have the knowledge of metabolic syndrome and are able to correctly identify and diagnose it. New observations associated with metabolic syndrome shows obesity as a primary factor in the neuroendocrine. When accompanied with an autonomic phenomena exposure to different stressful conditions and exposure to elevated glucocorticoids these are all considered products of a cause-and-effect relationship with metabolic syndrome.

The question is 'what can I do about metabolic syndrome?'. The first and upmost priority is to lose your excess weight and become educated on why it is necessary. As many of you already know, it is close related to genetics and genetic inheritance. Learning how to eat appropriately for your body makes a tremendous difference in your outcome.

At The Weigh Station, we educate and give individuals the tools to eat correctly and combat their obesity problems. Some drift back into their old habits which is common among those who are addicted to carbs. However, slowly but surely they gain their weight back and return wondering what they did wrong. Part of our job is to continue to nurture and educate you so you can do what is correct to gain your health back. Everything we ask of you has been proven and demonstrated through medical science and journalism.

In the New York Time's bestseller Fat Chance: Beating the Odds Against Sugar, Processed Foods, and Obesityand Disease by author Dr. Robert H Lustig points out that "a calorie is not a calorie". He goes on to state not all calories are created equal: whether it comes from fructose, glucose, protein, or fat it is essential to know the metabolic effect and how much fat you accumulate from that specific type of calorie.

In the late 1970s the FDA mandated we cut fat out of our diets. The food industry responded by pouring more sugar into our diets which led to an increase in obesity. Be aware that sugar goes many different names such as glucose, maltose, sucrose, and fructose. The infamous Mayo Clinic has bought into the low glycemic index. There are many books that give an outline of the low glycemic index and how to grasp the concept.

If you have any questions, please do not hesitate to ask. Remember to follow the program and put in the effort to see the results. Also, keep in mind that short cuts will not benefit you in the long run and will not teach you how to make healthy lifestyle changes.

Have a Happy Valentine's Day and blessings to all, Chuck Shaffer MD

The Recipe of the Month

Lemon Garlic Steak

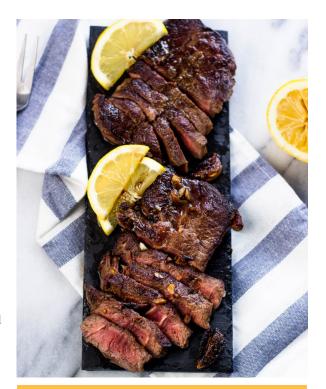
- 4 1/2 in thick top chuck blade steaks
- 1 tsp salt
- 1/2 tsp black pepper
- 1/2 tsp paprika
- 1 tbsp unsalted butter
- 1 tbsp olive oil
- 4-5 garlic cloves (2 diced and 3 whole for pan)
- juice of 1 lemon

Directions

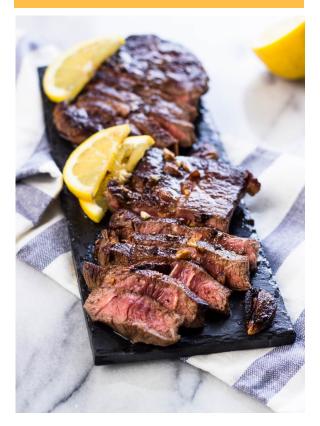
Pat steaks dry and sprinkle both sides with salt, pepper, diced garlic and a squeeze of lemon.

Heat 1 tablespoon butter, olive oil, and garlic in a 12 inch heavy skillet over moderately high heat until hot but not smoking. Add steaks then sauté 2 - 3 minutes each side before removing from heat.

Transfer steaks to plate with tongs and enjoy!



Get Cooking!



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