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Diabetes reversal in an Obese Woman

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The International Diabetes Federation 2017 data estimates that women in earlier stages of life experience higher healthcare expenditure than men across the globe. Globally, the prevalence of diabetes for women 20-79 years is estimated to be 8.4% with 1.7-2.7 million deaths attributable to diabetes in women compared to 1.5-2.3 million in men.

Research study in a large cohort of middle-aged women showed that a combination of several lifestyle factors, such as maintaining a body-mass index of 25 or lower, eating a diet high in cereal fiber and polyunsaturated fat and low in saturated and trans fat and glycemic load, exercising regularly, abstaining from smoking and consuming alcohol moderately, was associated with an incidence of type 2 diabetes could avoid incidence of diabetes. Excess body fat is the single most important determinant of type 2 diabetes. Study data has revealed that diabetes cases preventable by diet and exercise independently of body weight is greater among women of normal weight than among obese women. In overweight and obese women, the combination of an appropriate diet, a moderate amount of exercise, and abstinence from smoking could substantially lower the risk of type 2 diabetes.

Excess weight is an established risk factor for diabetes. Studies have identified links between obesity and type 2 diabetes suggesting the role of pro-inflammatory cytokines (tumor necrosis factor and interleukin-6), insulin resistance, deranged fatty acid metabolism, and cellular processes such as mitochondrial dysfunction and endoplasmic reticulum stress. The links between obesity and hyperinsulinemia is reflective of the compensation by insulin-secreting β -cells to systemic insulin resistance. Genetic factors may link β -cell predisposition.

Hypoglycemia is one of the most important complications of diabetes treatment. Elderly, those with comorbidities such as vascular disease or renal failure, pregnant women are high risk groups for hypoglycemia. In type 2 diabetes, progressive insulin deficiency, longer duration of diabetes, and tight glycemic control also raise the risk of hypoglycemia.

Oral hypoglycemic agents are the most common oral drugs used in the treatment of type 2 diabetes. However, these are associated with several established adverse effects such as hypoglycemia, weight gain, gastrointestinal disturbance, lactic acidosis, and fluid retention.

Here we talk about how an obese woman chose functional medicine to change her life, which has not only put her diabetes into remission but she is also happy about to be able to take charge of her own health

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