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Tentative Program

9th International Conference on

Obesity Medicine

Melbourne, Australia November 28-29, 2016

Theme: "Advanced therapy and medicine for obesity"





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- **12+** Interactive Sessions
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Program at A Glance

Day 1

Morning Sessions

Reception/Registration	**08.00-09.00**	
	Time	**General Session**
Least of 3 Keynote/Plenary Talks	09.00-09.15	Inaugural Address
	09.15-09.45	Keynote/Plenary Talk 1
	09.45-10.15	Keynote/Plenary Talk 2
	10.15-10.45	Keynote/Plenary Talk 3
Panel Discussions/Group Photo		
Coffee/Tea Break 10.45-11.00 (Networking)		
11.00-12.40		Obesity- Epidemiology

Evening Sessions

Lunch Break 12.40-13.30	
13.30-14.30	Genetic Obesity- Risk factors
14.50- 15.30	Workshop

Coffee/Tea Break 15.30-15.45 (Networking)

Morning Sessions

	Time	**Session 1**	**Session 2**
15.45-16.30		Keynote Forum	Endocrinal Obesity and Hormonal Therapy
Coffee/Tea Break 16.30-16.55 (Networking)			
16.55- 17.30		Childhood Obesity- Causes and Treatment	Health Effects of Obesity

Day 2

Evening Sessions

Lunch Break 12.35-13.25			
10.15-10.45		Obesity and Diabetes	Obesity and Cancer
Coffee/Tea Break 15.05-15.20 (Networking)			
11.00-12.40		Obesity- Dietary therapy	Exercise, Yoga and Physical stress

Morning Sessions

	Time	**Session 1**	**Session 2**
13.30-14.30		Obesity Surgery	Obesity Medications
Coffee/Tea Break 10.40-10.55 (Networking)			
14.50- 15.30		Weight loss Supplements and Pills	Advanced Weight loss treatments

Evening Sessions

Lunch Break 12.35-13.25		
15.45-16.30	Obesity- Current research	Anti-obesity medication
Awards & Closing Ceremony		

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Sessions & topics at a glance:

- Obesity- Epidemiology
- Genetic Obesity- Risk factors
- Endocrinal Obesity and Hormonal Therapy
- Childhood Obesity- Causes and Treatment
- Obesity and Diabetes
- Obesity and Cancer
- Obesity Medications
- Weight loss Supplements and Pills
- Advanced weight loss treatments
- Obesity- Current research
- Anti-obesity medication
- Weight loss Supplements and Pills
- Advanced Weight loss treatments
- Obesity- Current research
- Anti-obesity medication
- Behavioural Medicine and Counselling studies



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Biography

Zarnain Shah is a fourth-year Medical student at Liaquat University of Medical and Health Sciences, Jamshoro. Along with her extraordinary academic record, she hold a keen interest for scientific research.

syedazarnain@gmail.com

Abstract

How did an albino patient lose 148 lbs of weight? A case report

Zarnain Shah (1) Samaneh A. Motanagh (2) Syed Wajih Rizvi (3)
1. 4th year Medical Student, Liaquat University of Medical & Health Sciences, Jamshoro, Pakistan (syedazarnain@gmail.com)
2. Medical Officer, Ankara University School of Medicine, Turkey
3. Consultant Endocrinologist, R-Endocrinology, New Jersey, USA

INTRODUCTION: Obesity is a highly prevalent and yet the most neglected disease. The number of overweight and obese people reached 2.3 billion and 700 million worldwide respectively, by the year 2015. Obesity is not a social disgrace but an actual disease with a major genetic component to its etiology. Obesity treatment is a lifelong task. Weight reduction medications should be used as an adjunct to diet restriction, exercise and behavioral modifications, when these measures alone have not resulted in adequate weight loss. We hereby present a case of a morbidly obese male patient with occulocutaneous albinism who has lost 148 lbs of weight. Furthermore, the report highlights the genetic link between occulocutaneous albinism and obesity.

CASE PRESENTATION: 28-year-old male with occulocutaneous albinism presented with 361.8 lbs of weight (BMI: 62.1) and complaint of difficulty in losing weight. Physical examination revealed hypertension, low intelligence, gynecomastia and infantile testicles. Lab investigations showed unregulated hyperlipidemia and hypotestosteronemia. The patient was prescribed Xenical (Orlistat) 120 mg. Over the period of five years, he lost 83.8 lbs. After this time, Xenical's effectiveness was significantly reduced. Consequently, the patient was started on Victoza (Liraglutide) on which he lost 64 lbs in three years. Thus, a sum of 147.8 lbs of weight was lost without any side effects of the drugs.

DISCUSSION: Obesity needs to be treated within the healthcare system as any other complex disease. We observed Xenical and Victoza to be safe and effective in reducing obesity. Substantial literature has emerged to show that in both Occulocutaneous albinism and Prader-Willi syndrome (the most common genetic cause of obesity) the P gene is mutated on Chromosome 15. This highlights the genetic susceptibility of our albino patient for developing morbid obesity.

CONCLUSION: Obesity develops from the interplay of both genetic and environmental factors. This case clearly illustrates that Xenical and Victoza can be safe and efficient for weight loss in a morbidly obese patient. Furthermore, scientific research in the genetic aspects of obesity can help develop new strategies towards its prevention and treatment.

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Biography

Aghanenu Godfrey Chukwudi has completed his Master of Public Health (MPH) at age of 44 from the university of Venda, Limpopo province of south Africa and will start his PhD in 2017. His study is awaiting publication

Abstract

The determinants of obesity among students of the University of Venda, Limpopo Province of South Africa. Name: Aghanenu Godfrey Chukwudi

Name: Aghanenu Godfrey Chukwudi
University of Venda, Limpopo Province of South Africa.

Background: Obesity is a serious public health issue; recognised as a global epidemic by the World Health Organisation (WHO, 1998).
Purpose: The purpose of the study was to describe the determinants of obesity among students of the University of Venda.
Methodology: The design of the study was a quantitative correlational survey.
Instrument for data collection was a questionnaire. Simple random sampling and systematic sampling methods was used to select the participants. The data was analysed using Statistical Package for Social Science (SPSS), version
22. Descriptive analyses were performed to show frequency distributions. Chi–square test was used to compare relationship between obesity and socio-demographic; dietary and environmental variables among students.
Results: Overweight and obesity is prevalent among student population with 20% of the participants being overweight and 9.5% obese. Unhealthy eating practices were found among the participants. There was statistical significant difference in BMI between male and female gender with female (66%) being more obese than male (34%). In terms of socio-demographic variable this study found gender and age of participants as important factor of overweight and obesity.
Conclusion and Recommendations: Regular nutrition education campaign be carried out in the University in order to motivate more healthy food choices. Also Moderate to Vigorous Physical Activities (MVPA) recommended.

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Biography

Dr. Saleh M Alrejhi was a chairman of obesity department, obesity endocrine and metabolic center, king fahad medical city. He held the following positions .Employee health Director academic and training affairs acting director, CPD director, Member of multiple committees, consultant in bariatric and family medicine .Started the only Bariatric clinic at King Fahad Medical City. My passion is complicated patients with obesity and common chronic medical problems.

Abstract

Effects of OBESITY treatment on type 2 DM and quality of life

Saleh M Alrajhi, chairman of Obesity department, Obesity Endocrine and Metabolic Center, King Fahad Medical City, Riyadh, Saudi Arabia

Type 2 diabetes in Saudi Arabia is estimated to be between 25-30% of the adult population. At the same time obesity prevalence is estimated to be 35% of the adult population age 18 and above. From the literature it is well established that obesity is the leading cause of type 2 diabetes. Therefore, we looked, retrospectively, at the effect of obesity treatment with focus on lifestyle modification, behavioral therapy, nutritional counseling, increase physical activity, vitamin supplementation, and limited anti-obesity pharmaceutical use, on resolution or improved control of DM2, assessed by improved A1c, decreased number of medications used, and improved quality of life.

Based on this review we found that patients who receive quality obesity care covering all components needed for compliance and improvement in patient's condition, showed better results. This indicates that well-designed obesity treatment program could have a great and positive impact on Diabetes type 2 and other co-morbidities associated with obesity such as hypertension, hyperlipidemia, and sleep apnea, without the use of approved weight loss medications and limited resources.

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Biography

Saeed Kadasah has completed his MD from King Saud University of Riyadh. Earlier he did MBBS from King Saud University of Riyadh, Saudi Arabia. He is the senior consultant in Psychiatry. He has published10 papers in reputed journals and presented several papers in conferences. He is associated with several ongoing projects on genetic

Abstract

Prevalence of Obesity, metabolic syndrome and cardiovascular risk factor in schizophrenia

Saeed Kadasah1, Misbahul Arfin2, Abdulrahman Al-Asmari2

1Departmentsof Psychiatry, 2Research Center, Prince Sultan Military Medical City, Riyadh, Saudi Arabia

Abnormal bioenergetic status has been associated with psychotic disorders including schizophrenia. People with schizophrenia have worse physical health than the general population, and studies demonstrate that their health behaviors are often undesirable and leads to several metabolic disorders. The higher prevalence of metabolic disorders and cardiovascular diseases are reported in schizophrenia patients. However, no similar studies have been conducted in Saudi patients with schizophrenia. This study was undertaken to identify and explore relationships between cardio-metabolic health risks factors, lifestyle and treatment characteristics in people with schizophrenia. This cross-sectional study reports the baseline findings from 181 schizophrenia patients. The diagnosis of schizophrenia was based on the criteria mentioned in American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders, DSM-IV-TR version. Among the confirmed 181 cases of schizophrenia, there were 53 females and 128 males with mean age of 39 ± 12.5 years. The control group consisted of 60 females and 140 males with mean age of 36 ± 10 years. Unhealthy body mass index values were observed in 50% of participants. The antipsychotics were associated with weight gain. Obesity and being overweight increased the risks of dyslipidemia, hypertension, cardiovascular disease, and type 2 diabetes mellitus. One of the causes of obesity in schizophrenia patients was a poor choice of diet. Saudi Patients with schizophrenia showed higher intakes of hydrogenated fats, full fat cream, red meat and carbonated drinks than individuals without mental disorder. Sedentary lifestyle, physical inactivity, tobacco use were other important factors associated with the severity of the disease.

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Biography

Dr.Omech Bernar, During the fellowship his project was based on HIV-associated metabolic abnormalities including Lipodystrophy measurement in patients on Thymidine at infectious diseases institutes , kampala-uaganda. Experiences in implementation of randomized control trials on HIV/TB Co-infection for one year during the Forgarty Fellowship placement at case western Reserve University Collaboration Site-Mulago. He currently engaged with other other faculty members in internal colloborative research in the same field

Abstract

Prevalence and determinants of metabolic syndrome: a cross-sectional survey of general medical outpatient clinics using National Cholesterol Expanded Program-Adult Treat

Omech B, , Tshikuka JG, Mwita JC, Tsima B , Nkomazana O, Amone-P'Olak

Background: Low- and middle-income countries, including Botswana, are facing rising prevalence of obesity and obesity-related cardiometabolic complications. Very little information is known about clustering of cardiovascular risk factors in the outpatient setting during routine visits. We aimed to assess the prevalence and identify the determinants of metabolic syndrome among the general outpatients' attendances in Botswana.
Methods: A cross-sectional study was conducted from August to October 2014 involving outpatients aged ≥20 years without diagnosis of diabetes mellitus. A precoded questionnaire was used to collect data on participants' sociodemographics, risk factors, and anthropometric indices. Fasting blood samples were drawn and analyzed for glucose and lipid profile. Metabolic syndrome was assessed using National Cholesterols Education Program-Adult Treatment Panel III criteria.
Results: In total, 291 participants were analyzed, of whom 216 (74.2%) were females. The mean age of the total population was 50.1 (±11) years. The overall prevalence of metabolic syndrome was 27.1% (n=79), with no significant difference between the sexes (female =29.6%,males =20%, P=0.11). A triad of central obesity, low high-density lipoprotein-cholesterol, and elevated blood pressure constituted the largest proportion (38 [13.1%]) of cases of metabolic syndrome, followed by a combination of low high-density lipoprotein, elevated triglycerides, central obesity, and elevated blood pressure, with 17 (5.8%) cases. Independent determinants of metabolic syndrome were antihypertensive use and increased waist circumference.
Conclusion: Metabolic syndrome is highly prevalent in the general medical outpatients clinics. Proactive approaches are needed to screen and manage cases targeting its most importantpredictors.

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Biography

Dr. Uma V . Manjappara obtained Master's degree in chemistry from Bangalore University and PhD from Molecular Biophysics Unit, Indian Institute of Science, Bangalore, Under the guidance of prof. P. Balaram. After post -doctoral research at the Scripps Research institute, San Diego, University of Pennsylavania and Drexel University College of Medicine,Philadelphia, USA, is at present scientist at the department of lipid science CFTRI Mysore.The main research focus is towards studying the mechanistic and application aspects of satiety peptides as to prevent obesity. Five publications have emerged of these studies in reputed journals

Abstract

Obestatin and Nt8U as modulators of fat deposition in mice

Dr. Uma V. Manjappara Department of Lipid Science, Central Food Technological Research Institute

Obestatin is a 23 residue peptide which is produced in the stomach by post-translational modification of the pre-progrhelin gene. This peptide is known to reduce food intake by reducing jejunal motility. In an attempt to establish the minimum length of obestatin required for its activity, three overlapping fragments of obestatin, each 13 residues long, were synthesized and assayed for their effect in albino mice. The N-terminal fragment : residues 1-13, reduced food intake, weight gain, plasma triglyceride levels and epididymal tissue albeit lesser than the parent peptide upon administration for eight days. The active N-terminal fragment was further modified to obtain the potent analog Nt8U which equalled the potency of the full lenght peptide. Micro array analysis of epididymal adipose tissue of mice treated with obestatin, Nt8U and the N-terminal fragment revealed genes related to glycerolipid metabolism and signalling by PPAR-gamma were enhanced in the case of obestatin and Nt8U and the N-terminal fragment brought about similar but reduced diffential effect. These observations have lead us to hypothesise that obestatin and Nt8U bring about reduction in food intake leading to lipolysis. The thus produced free fatty acids act as ligands for activation of PPAR-gamma to bring about their observed effects.

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Biography

Dr. Oleksandr Khoma, MS, MMed, is a senior resident in general surgery at Royal Prince Alfred Hospital, NSW, Australia.
Dr. Aravind Suppiah , MBBS , FACS is a fellow in Upper GIT surgery at concord Hospital , Sydney Australia
Dr. David Martin, MBBS, FRACS is a consultant upper GI and Bariatric surgeon at concord Hospital and Royal Prince Alfred Hospital, Sydney, Australia

Abstract

Case report: Renal infarction by paradoxical embolism through the patent foramen ovale as an unusual cause of post-operative abdominal pain after sleeve gastrectomy.

Dr Oleksandr Khoma, Dr Aravind Suppiah, Dr David Martin
Concord General Repatriation Hospital, Concord NSW 2137

This is a case report of paradoxical emboli through patent foramen ovale following sleeve gastrectomy. Renal infarctions caused by paradoxical embolism are rare and have not been previously reported following surgery, bariatric surgery in particular. This case report highlights importance of complications related to thromboembolism in patients with obesity. Poster presentation contains images of CT scan demonstrating renal infarction, echocardiogram showing patent foramen ovale as well as discussion about paradoxical embolism associated with patent foramen ovale.

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Biography

Dr. Jawad Kiani is a Cardiologist in Rochester, Minnesota. He received his medical degree from Aga Khan Medical college and has been in practice between 6-10years

Abstract

Acute Right Heart Failure and Cor Pulmonale; Sequelae of Obesity Hypoventilation Syndrome

Jawad Kiani MD*, Suraj Kapa MD*

*Division of Cardiovascular Diseases, Mayo Clinic, Rochester, MN 55905, U.S.A
kiani.jawad@mayo.edu

CASE: 55-year-old male with a history of coronary artery disease with a drug-eluting stent placed to the right coronary artery in 2004 and a BMI of 47 kg/m2. He has not sought medical care since then and came to the emergency room with respiratory distress and was markedly hypoxic. And ABG revealed awake alveolar hypoventilation (PaCO2 of 98 mmHg) along with metabolic alkalosis (serum HCO3 40 mmol/L). During his evaluation he had an electrocardiogram which showed rightward axis, nonspecific T-wave changes, and poor R-wave progression across the anterior precordial leads. An echocardiogram was performed and revealed a small to moderate pericardial effusion but primarily pulmonary hypertension with an RV systolic pressure of 60 mmHg but with a D-shaped septum and dilated right ventricle with severe decrease in function along with a dilated IVC. LVEF was 56%. CT PE chest looking for pulmonary embolism was negative. Chest x-ray showed marked interstitial edema and legs were markedly edematous. Labs also showed elevated transaminases related to congestive hepatopathy. Patient has had chronic symptoms of nighttime snoring, daytime somnolence and fatigue per family. Patient was managed in the CCU and intubated and mechanically ventilated and underwent aggressive diuresis and a polysomnography. Patient was eventually enrolled into a medically supervised weight loss program. He had subsequent improvement in symptoms and cor pulmonale.

Conclusion: Acute severe right heart failure and severe pulmonary hypertension can be the first presenting signs of chronically undiagnosed, untreated obesity hypoventilation syndrome and co-existing obstructive sleep apnea from medically complicated obesity.

Biography

Dr. Manchala Raghunath did his PhD. in Biochemistry, Engaged in Research since 1975. present he is Research scientist in National Institute of Nutrition ICMR. He published 91 publications. He is associated with society of Biological chemists, Neuroscience Society and CUBS.

Abstract

Do maternal micronutrient deficiencies underly the Indian Diabesity epidemic ? Probable underlying mechanisms.

Dr M Raghunath, Scientist G
Endocrinology and Metabolism Division
National Institute of Nutrition (ICMR)

Obesity and Diabetes are of global relevance and Diabesity has reached epidemic proportions in India. Developmental Origins of Health and Disease hypothesis associates low birth weight (LBW) with increased incidence of obesity and diabetes in the offspring's later life; several studies have demonstrated the causal role of maternal macronutrient malnutrition. Considering widespread maternal micronutrient (MN) deficiencies and significant LBW prevalence in India, we have tested in rodent models, the hypothesis, "maternal micronutrient deficiency per se programmes/increases the risk of the offspring for obesity and diabetes in later life". Our extensive studies in the Wistar rat models, have demonstrated that maternal dietary deficiency of a variety of MNs per se, i) increased body fat % (visceral fat), altered lipid metabolsim leading to dyslipidemia, ii) decreased the % of lean body and fat free mass (lower muscle mass suggested by decreased myogenesis) and altered muscle function, iii) impaired glucose tolerance and insulin sensitivity in the offspring. Increased oxidative and/or corticosteroid stress, compromised antioxidant status and a proinflammatory state appeared to underly these changes in the offspring. Rehabilitation prevented / mitigated maternal vitamin restriction induced changes, whereas maternal mineral restriction induced changes only in the associated biochemical/molecular mechanisms (but not the phenotype) were mitigated albeit partially. Modulation of PPAR ϟ and PPAR • appeared to underlie altered lipid metabolism, while altered insulin secretion, target tissue insulin sensitivity/glucose uptake and intracellular metabolism seemed to underlie altered glucose tolerance / metabolism. Indeed changes in relevant gene expression were seen in MN restricted pregnant mothers, placenta and foetus on gestational day 15 and altered gene promoter methylation was associated with stress and dyslipidemia in offspring. Interestingly, folate and/or vitB12 restriction altered body composition in mothers also (F0) in addition to F1 and F2 offspring, albeit in only male offspring. Also, maternal Mn deficiency increased the offspring's susceptibilty to the ill effects of high fat feeding in their later life. Vit B12 restriction per se induced anxiety like behaviour in C5

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Biography

Elana Davidson, MPAS, PA-C has been a physician assistant for over 25 years and has specialized in bariatric surgery for the past 7 years. Besides being involved in all aspects of inpatient and outpatient bariatric surgical care she has co-developed and coordinates the Weight Management Program at HMC.

Abstract

Prospective 30-day outcome evaluation of a fast track protocol for 23-hour ambulatory primary and revisional laparoscopic Roux-en-Y gastric bypass in 820 consecutive un

Elana Davidson, MPAS, PA-C
Weight Management Program at Holyoke Medical Center

Results from validated national databases suggest that 1-day length of stay (LOS) is not only unattainable in more than 20% of primary laparoscopic Roux-en-Y gastric bypass (LRYGB), but it is also associated with an increased 30-day mortality risk. There is no published data regarding the feasibility and safety of 1-day LOS after revisional LRYGB. We reviewed one surgeon's experience after implementation of a 1-day fast-track protocol (FTP) in 784 primary and 36 revisional consecutive LRYGB patients. Patient demographics, comorbidities, preoperative laboratory values, diagnostic work-up, operative characteristics, LOS, 30-day outcomes and patient satisfaction scores were prospectively collected in a de-identified registry. Predictors of longer hospitalization were assessed by univariate and multiple regression analysis. 1-day LOS was accomplished in 71.9% primary and 58.3% revisional LRYGB. Median LOS was one day for primary and revisional LRYGB and mean LOS was 1.34 and 1.63 days respectively. "Excellent" or "very good" satisfaction rating was reported regarding the FTP education provided (95.3%), surgeon's accessibility (98.3%) and hospital care (86.5%). Only 0.34% of patients who had a 1-day LOS indicated that they would benefit from additional in-hospital stay. In multivariate analysis, independent predictors of longer hospitalization included prolonged operative time, hemoglobin reduction, re-operation for primary LRYGB and operative time for revisional LRYGB.
We conclude that 1-day FTP can be successfully implemented in the majority of primary and revisional LRYGB patients without increasing the risk of 30-day morbidity and mortality or reducing patient satisfaction.

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Biography

David Snipelisky, MD is currently in his last year of fellowship in cardiovascular diseases at the Mayo Clinic (Rochester, MN) and will be completing an additional year subspecialty fellowship in advanced heart failure and transplantation at the Brigham and Women's Hospital (Boston, MA). He has published more than 30 peer-reviewed manuscripts in reputable journals and currently serves on many leadership committees, including with the American College of Cardiology.

Abstract

Deleterious effects of a complex anabolic steroid regimen used as part of

David Snipelisky, MD, Jae Park, MD, and Suraj Kapa, MD
Department of Medicine, Division of Cardiovascular Diseases
Mayo Clinic, Rochester, MN

Introduction: Anabolic steroid use is becoming increasingly more popular in the United States, particularly as illegal weight loss supplementation. Our case describes a severe cardiomyopathy as a result of an extensive anabolic-androgenic steroid regimen.

Case Presentation: A 38-year old obese male with no past medical history presented to our emergency department complaining of worsening shortness of breath over two weeks' duration. Pertinent findings showed a patient in atrial fibrillation with marked jugular venous distension, extensive pulmonary crackles, and lower extremity edema. Diagnostic evaluation included imaging demonstrating cardiomegaly with marked pulmonary edema. Echocardiography showed a severely reduced left ventricular ejection fraction of 16% with severe biventricular failure and biatrial and biventricular enlargement. Our patient ultimately admitted to the use of a "sophisticated" anabolic steroid regimen, including using trenbolone enanthate, testosterone enanthate, sustanon, stanozolol, oxandrolone, clenbuterol, as well as tamoxifen and anastrozole (both anti-cancer medications) to prevent the excessive testosterone components from being converted to estrogen products. Clinic follow-up three weeks after the initiation of heart failure medications with discontinuation of the steroid regimen showed improvement in his cardiac function with a left ventricular ejection fraction of 38%. The patient ultimately agreed to participation in a structured weight loss program.

Conclusion: Our case demonstrates the possibility of a severe cardiomyopathy as a result of anabolic steroid use in a patient attempting to aggressively lose weight. It highlights the importance of educating patients to avoid such substances as the effects can be fatal.

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Biography

Alline Beleigoli has completed her PhD from the Federal University of Minas Gerais (UFMG), Brazil and has been undertaking postdoctoral studies from UFMG . She is a medical doctor and researcher with special interest in obesity.

Abstract

Quality of life in the long-term after Roux-en-Y gastric bypass surgery (GBP): a cohort study of Brazilian severely obese patients

Alline M Beleigoli, Roberta S Rodrigues, Nicholas Magario, Marco Tulio Diniz, Alexandre Savassi-Rocha, Maria de Fátima Diniz

Federal University of Minas Gerais (UFMG), Minas Gerais, Brazil

QoL improves substantially in the first years after GBP. However, physical and psycho-social issues that ensue after surgery might impact on QoL in the long-term. We aimed to evaluate QoL and associated factors in the long-term after GBP in severely obese patients operated in the Hospital das Clínicas of UFMG. We performed a retrospective cohort study with random selection of 115 patients operated for ≥ five years. The SF-36 questionnaire, which provides physical (PCS) and mental (MCS) component scores of QoL, was applied to all patients, as well as consultation of patient records, clinical exam and laboratorial tests. Pre and post-operative characteristics were compared by Wilcoxon or McNemar tests. Ordinal logistic regression models were performed to investigate the association between PCS and MCS and demographic, clinical and laboratorial characteristics. Female sex was predominant (95; 82.6%). Mean age and pre-operative BMI were 40.2 (13.2) years and 51.9 (8.3) kg/m2. Over 8.7 (2.9) years of follow-up, mean percentage of excessive BMI loss (%EBL) was 58% (22.1). The prevalence of hypertension and diabetes decreased ($p<0.001$) after surgery, but not of depression($p=0.25$). Median PCS and MCS were 48.5 (9.8) and 48.7 (15.9), respectively. Higher PCS were associated with %EBL (OR1.03; 95%CI 1.01-1.06) and improvement of metabolic comorbidities (OR7.88; 95% CI1.08-57.3). None of the characteristics investigated was associated with MCS. In conclusion, physical well-being in the long-term after GBP depends on maintenance of weight loss and good control of metabolic comorbidities.

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Alline Beleigoli has completed her PhD from the Federal University of Minas Gerais (UFMG), Brazil and has been undertaking postdoctoral studies from UFMG . She is a medical doctor and researcher with special interest in obesity

Abstract

Long-term control of comorbidities after gastric bypass

Alline M Beleigoli, Roberta S Rodrigues, Marco Tulio Diniz, Alexandre Savassi-Rocha, Victor van Eijk, Lucas Freitas, Douglas Campos, Maria de Fátima Diniz

Federal University of Minas Gerais (UFMG), Minas Gerais, Brazil

Obesity is a risk factor for arterial hypertersion (AH), type 2 diabetes (DM2), depression and gastroesophageal reflux disease (GERD). Gastric bypass (GB) promotes significant Percent of Excess BMI Lost (%EBL), and comorbidities control. Long-term (5 years) control of comorbidities after GB is still a challenge. We aimed to assess comorbidities prevalence after long-term GB, and the clinical and demographic factors associated with it in a retrospective cohort with 5 years of follow-up. The following definitions were applied- AH- arterial pressure140/90mmHg or use of antihypertensives; DM2- fasting glycemia 126mg/dL, or post-dextrosol200mg/dL, or use of oral antidiabetic drugs or insulin; depression- use of antidepressants, and GERD- clinical symptoms. Differences between pre and post-operative characteristics were tested by Wilcoxon or McNemar tests. 115 patients (95; 87% women), aged 40.2±13.2 years were followed-up for a mean time of 8.7±2.9 years. Mean BMI and %EBL before and after surgery were 51.9±8.3, 36.1±6.7kg/m2, and 58±22.1%,respectively. Comparing the pre and post operative periods the prevalence of AH (78.4% versus 54.1%,p<0.001), DM2 (36.9% versus 9%,p<0.001) and GERD (50.9% versus 31.3%,p<0.001) were significantly reduced, but not depression (59.8% versus 53.6%,p=0.25). % EBL was associated with improvement of AH (p=0.004), and depression (p=0.02), but not with DM2 (p=0.53) or GERD (p=0.88). In conclusion, GB is associated with long-term remission of cardiometabolic comorbidities. Significant reduction of DM2 and GERD prevalence unrelated to %EBL reinforces that neuro-hormonal alterations in gastrointestinal-adipose tissue-brain axis are impressive after GB.

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Alline Beleigoli has completed her PhD from the Federal University of Minas Gerais (UFMG), Brazil and has been undertaking postdoctoral studies from UFMG . She is a medical doctor and researcher with special interest in obesity.

Abstract

Factors associated with weight loss within an online weight management community

Alline M Beleigoli, Gisele Pappa, Paulo Bicalho, Tiago Cunha, Wagner Meira, Antonio L Ribeiro

Federal University of Minas Gerais (UFMG), Minas Gerais, Brazil

We aimed to investigate the association between users online behavior, real-world characteristics and weight change in r/loseit- a weight management community of the online social network Reddit. A language-detection algorithm was used to collect data on English posts, comments and other public metadata of active users (i.e., users with at least one post or comment) in r/loseit from August 2010 to November 2014. Data were all unidentified. We extracted data on users' frequency of participation, discussed topics, gender and self-reported weight at the entry in the community in order to investigate their association with at least 30-day weight change by a linear regression model. Data on the online behavior and real-world characteristics were available for 754 users- 418 (55.4%) female. 129 (17.1%) users reported being overweight and 189 (25.1%), 171 (22.7%) and 238 (31.6%) being class I to III obese, respectively, at their entry in the community. Over the follow-up, 701 (92.6%) lost weight with a median 10% (3-18%) loss of their start weight. There was a median of 47 (22-115) activities per users, which included posts, comments and weight reports. Healthy/unhealthy food, clothing, calories count, workout, looks, habits and support were the most commonly discussed topics. BMI at baseline, high levels of online activity and being involved in discussion related to social support were independently associated with weight change. In conclusion, initial BMI, high online activity and social support are issues that should be taken into account in online weight loss interventions.

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9th International Conference on

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November 28-29, 2016 Melbourne, Australia

Biography

Professor Abdulbari Bener is Professor of Public Health at the Cerrahpasa Faculty of Medicine, Istanbul University. He was Professor of Public Health in the Department of Public Health at the Weill Cornell Medical College for a period January 2006- August 2014. Professor Bener was Asst. Medical Director and Head of the Medical Statistics & Epidemiology Department at Hamad Medical Corporation, Qatar during August 2002-July 2014. Add to this, He is advisor to World Health Organization and Adjunct Professor & Coordinator for the postgraduate and master public health programs (MPH) of the School of Epidemiology and Health Sciences, University of Manchester. He is Fellow of Royal Statistical Society (FRSS) and Fellow of Faculty of Public Health (FFPH). He holds a Ph.D. degree in Medical Statistics (Biometry) and Genetics from the University College of London (UCL), and a B.Sc. degree from Ankara University. He completed research fellowships in the Departments of Genetics & Biometry and Statistics & Computer Sciences at the UCL. He has held academic positions in public health, epidemiology, and statistics at universities in Turkey, Saudi Arabia, Kuwait, the United Arab Emirates, Qatar, and England. He has been an author or coauthor of more than 550 published journal articles. He is acting as an Editor, Associate Editor, Advisor Editor and Asst. Editor for over 20 Journals and Referee for over 60 Journals. He has contributed to more than 19 book chapters and supervised theses of 50 postgraduate students (MSc, MPH, MPhil and PhD).

Abstract

Type 2 diabetes mellitus: a comparison between intensive diet, obesity, physical exercise and lifestyle intervention with medication controlled management.

Abdulbari Bener 1,2,6, Abdulla O.A.A. Al-Hamaq 3 ,
Eda Merve Kurtulus 4, Kaleem U. Rajput 5, Mustafa Guzel 6
1 Dept. of Biostatistics & Medical Informatics, Cerrahpaşa Faculty of Medicine, Istanbul University, Istanbul, Turkey
2 Dept. of Evidence for Population Health Unit, School of Epidemiology and Health Sciences, The university of Manchester, Manchester, UK

Background: Exactly when to initiate insulin in recent onset Type 2 Diabetes Mellitus (T2DM) remains unclear. Emerging evidence suggests that increased physical activity and body weight loss, can delay or prevention of the onset of T2DM, and in some cases normalise blood glucose levels.
Aim: Study aims to find if six months of treatment of severe hyperglycemia with oral antihyperglycemic agents was enough to achieve targeted HbA1c in patients with incident T2DM in comparison to intenstive dietary and lieftysle interventions.
Design: This is an observational cohort prospective clinical intervention study.
Setting: Primary Health Care (PHC) and Hamad General Hospital centers in Qatar from November 2012 to June 2014.
Subjects: T2DM patients above the age of 30. Of the 1850 registered with diagnosed diabetes diseases attending Hamad General Hospital and PHC centres 1,368 (74.9%) agreed and gave their written consent to particpate.
Methods: Data analysis included serum lipid profiles (cholesterol, LDL, HDL), uric acid, blood pressure and glycated hemoglobin (HbA1c) at baseline and after six months. In addition socio-demographic data was taken. All patients started diet, lifestyle and oral antihyperglycemic agents. Univariate and multivariate statistical analysis was performed.
Results: There were statistically significant difference between males and female patients in terms of ethnicity ($p=0.012$), occupation ($p<0.001$), monthly income ($p<0.001$), physical exercise ($p<0.001$), sport activity ($p= 0.018$), cigarette smoking ($p<0.001$), shisha smoking ($p= 0.036$) and consanguinity ($p=0.012$). Females reported significantly greater improvements in mean values of blood glucose (-2.50 vs. -2.46; $p=0.001$), HbA1c (-1.22 vs. -1.21 $p=0.001$), Cholesterol (-1.51 vs. -0.59; $p=0.001$). In participants with T2DM, BMI, fasting glucose level, calcium, HbA1c, total cholesterol HDL, LDL, bilirubin, triglycerides, uric acid and also blood pressure systolic and diastolic were higher in T2DM compared to their counterparts. Males, showed improved measures in systolic blood pressure (-4.4 vs. -3.9 $p<0.001$) urea, (1.04 vs -0.83) comparison to females.
Conclusion: Exercise contributes to glycemic control and blood pressure reduction, and may improve several of the cardiovascular consequences of Type 2 Diabetes such as impaired endothelial function and left ventricular diastolic dysfunction. Even those with gross glycemic abnormalities, more than 60% can achieve target glycemic control using diet , lifestyle and metfor

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Abstract

The role of vitamin D , obesity and physical exercise in regulation of glycemia in Type 2 Diabetes Mellitus patients

Abdulbari Bener 1,2, Abdulla O.A.A. Al-Hamaq 3 , Eda Merve Kurtulus 1
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2 Dept. of Evidence for Population Health Unit, School of Epidemiology and Health Sciences,

Aim: The aims of this study were to determine the role of vitamin D, obesity and physical exercise in the regulation of glycemia in Type 2 Diabetes Mellitus patients in a highly consanguineous population.
Design: Case and control study.
Setting: The survey was carried out at the Hamad General Hospital and Primary Health Care (PHC) centers in the State of Qatar.
Subjects: The study was conducted from November 2012 to June 2014 among subjects above 30 years of age. Of the 2,224 registered with diagnosed diabetes and free diseases attending Hamad General Hospital and PHC centers agreed and gave their consent to study.
Methods: Questionnaire included socio-demographic variables, body mass index (BMI), consanguinity, lifestyle habits, family history of diabetes, blood pressure and development of diabetes complications such as retinopathy, nephropathy, and neuropathy were collected at regular intervals throughout the follow-up. Univariate and multivariate statistical analysis were performed.
Results: There were statistically significant difference between patients with diabetic and control in terms of ethnicity ($p=0.012$), level of education ($p=0.002$), occupation ($p<0.001$), monthly income ($p<0.001$), BMI($p=0.024$), sport activity ($p=0.018$), cigarette smoking ($p<0.001$), consanguinity ($p=0.029$) and family history of Diabetes Mellitus ($p<0.001$) and co-morbidity hypertension ($p= 0.041$). Further, the biochemistry values in the studied subjects with T2DM compared to healthy controls and the study revealed that serum Vitamin D, BMI, fasting glucose level , calcium, HbA1c, total cholesterol HDL, LDL, bilirubin, triglycerides, uric acid and blood pressure systolic and diastolic were higher in T2DM compared to their counterparts. Multivariate logistic regression showed that vitamin D deficiency ng/mL, Family History of T2DM, BMI (kg/m2) hypertension, consanguinity, income, mother occupation, ethnicity, educational level and Lack of physical exercise variables were significant predictors of diabetes. In the group of Diabetes Mellitus Type 2 patients, 39.3% as opposed to 51.2% in the control group had vitamin D deficiency, 25(OH) D3 levels ≤ 10 ng/ml ($p < 0.001$). In the group of Diabetes Mellitus Type 2 patients, 34.6% as opposed to 37.9% in the control group had vitamin D insufficiency, 25(OH) D3 levels < 20 ng/ml ($p < 0.001$) . In the group of Diabetes Mellitus Type 2 patients, 22.8% as opposed to 14.2% in the control group had vitamin D sufficiency, 25(OH)D3 levels >30 10 ng/ml ($p < 0.001$).

Biography

Magdalana Potempa, pawel Jonczyk and Michal Janerka- we are 6-year medicine students attending Medical University of Silesia. We are active Publisher of about 25 journal papers (research and review papers) as well as active presenters during Conferences. Our medical interest are in the field of civilization disorders (obesity,diabetes,cancer).Private, magda like running and is a fasion addicted, Michal likes sailing and pawal is a book and cinema lover

Abstract

Assessment of dietary habits and level of knowledge about principles of nutrition among parents of children attending Primary Schools in the area of Silesian and Opole Region

Magdalena Potempa1, Pawe• Jonczyk1, Micha• Janerka1
1. Department: Student Research Cycle at the Chair of Patophysiology and Endocrinology University: School of Medicine with the Division of Dentistry in Zabrze, Medical University of Silesia, Europe, Poland

Proper rules of dietary habits should be present in most of households and known by every adult people, particularly among parents raising their children and educating them how to eat healthy. Regular nutritional habits are an elementary factor to achieve good growth and human health. Our main assumption of this research was to determinate through anonymous questionnaire the level of knowledge of proper nutritional habits among parents of children attending some primary Schools in Poland (Silesian and Opole Research). This research is a follow-up of our previous study, which were focused on the assessment of dietary habits among children going to Primary Schools (in the age od 6-13 years old). Our last study consisted of nearly 1000 respondents living in rural and urban areas. The results were alarming – approximately 20% of all studied children have overweight and the same percent revealed obesity. Proper body mass was shown only among 40% of populated study group. These findings persuaded us to go ahead and broaden this results. We want to know, which factors determine this disturbances most. Thanks to our present research we would have a possibility of a wider analysis of the theme connected with diet. We could analyze the results looking at the nutritional principles having at family home – the most important factor in creating children dietary habits. Our results of present study are still in progress. We already have about 1000 questionnaires sent to the parents and now we are preparing the results. We truly hope that the research will be interesting and could improve the knowledge about society orientation about nutrition.

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Biography

Mr. Andi Imam Arundhana has completed his Master Degree at the age of 25years Gadjah Mada University, School of Medicine in Indonesia. Currently, He is one of the faculty member and staff of Research center at Hasanuddin University School of Public Health. He is reviewer of journal of Food science and Engineering,US

Abstract

The more sedentary activity on the weekend, the higher risk of obesity in Indonesian children

Andi Imam Arundhana1*, Hamam Hadi2, Asry Dwi Muqni3
*Hasanuddin University School of Public Health, Makassar, Indonesia

Indonesia is currently facing nutritional transition including displacement of traditional activity to sedentary activity. Active playing, moving and reducing
sedentary activities during weekend activities are expected to minimize risk of obesity. The objectives of the study are as follows 1) to describe the difference in sedentary activity duration during weekdays and weekend, and 2) to examine relationship between sedentary activities during school day and weekend, with obesity. A total of 244 obese and 244 non-obese children were recruited from Yogyakarta in 2012. Obese subjects were from elementary schools with BMI-for-Age > 95th percentile identified from previous survey. Non-obese subjects were children from the same schools. Weight and height of the children were measured using a calibrated digital weighing scale and microtoice by trained nutritionists. Data of screen-based activities were collected using one-week physical activity recall questionnaires. BMI of the subjects were computed using WHO Anthro2005. Statistical analysis was done using STATA. The study showed that obese children have longer duration of sedentary activity than non-obese children. On weekend the difference of sedentary duration between obese and non-obese children is 56 minutes, whereas on school days only 47 minutes ($p<.0001$). Children who have longer duration of sedentary on school day are more likely to be obese [OR=3.56; CI: 2.41-5.26]. Similarly children with longer duration of sedentary activities on weekend are more likely to be obese [OR=7.91; CI: 5.18-12.09]. Children with longer duration of sedentary activities on weekend have high likelihood to be obese than it counterpart.

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Biography

Dr. Ahreum Han is a post-doctoral fellow in the discipline of exercise and sport science at the University of Sydney and has been working on childhood obesity since 2014.
she has expertise in developing and conducting interventional studies,exercise performance assessment,body composition analysis and in blood/hormone analysis.
she received M.Sc. degree in Exercise Science from Bochum University, Germany. Her research interest are in the area of childhood obesity,motor skill development in children and adolescents,sport physiology and sport performance

Abstract

Effectiveness of exercise intervention on improving fundamental movement skills and motor coordination in overweight/obese children and adolescents

Ahreum Han, Allan Fu, Stephen Cobley, Ross H. Sanders
Exercise and Sport Science, Faculty of Health Sciences, University of Sydney, Australia

Purpose: Overweight(OW)/obese(OB) children and adolescents are experiencing poorer fundamental movement skill (FMS) and motor coordination (MC) compared to normal weight (NW) peers. Consequently, they have a perception of low physical competence, which limit their participation in physical activity (PA) resulting in weight gain. This association forms a vicious cycle. This systematic review was conducted to evaluate effectiveness of exercise/PA interventions on improving FMS and MC in OW/OB children and adolescents.
Methods: A systematic search of literature was conducted from six databases for randomized control trials and interventional or longitudinal studies of FMS/MC in OW/OB participants between 0-18 years of age.
Results: The evidence suggests strongly that exercise intervention is effective in improving locomotor skill, object-control skill and complex tasks (body manoeuvring) in OW/OB peers. However, balance skill did not improve. Moreover, this review revealed needs of more research on motor development involving OW/OB participants. Of 17 studies, only two studies quantified kinetics and kinematics, only two compared OW/OB and NW peers, five re-examined at follow-up phase with conflicting results and above all only three studies organized their intervention program with skill-based exercise focusing on skill development.
Conclusions: There is strong evidences that exercise interventions are effective in increasing FMS/MC in OW/OB peers, who were having decreased skill level compared to NW peers. To maximize the skill improvement in this population, enjoyable interventions with exercises focusing on FMS/MC development are needed to help them to increase perceptions of sport competence, PA participation and reduce childhood obesity to break the vicious cycle

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Biography

Umberto Pagano, after completing his phd in Sociology in 2003, has worked on many national and international research programs, mainly on issues of cultural change in post-modernity, sociology of health, sociology of nutrition.
He has been adjunct professot at the Universities of Rome, Naples, Catanzaro.
Currently he teaches "Sociology of Culture" at the University "Magna Graecia" of Catanzaro and is responsible for a research program entitled "The socio-cultural determinants of obesity

umberto.pagano@gmail.com

Abstract

Globalization as a Determinant of Obesity Epidemic: an Empirical Insight

Umberto Pagano
University “Magna Graecia” of Catanzaro, Italy

relationship between the obesity epidemic on a world scale and the dynamics, directly or indirectly, induced by ongoing globalization processes, is an item of attention to those who analyze the evolution of present food production and consumption, if only for the more than suspect chronological coincidence. Up today, however, the empirical studies to corroborate the existence of a correlation and measure its magnitude are very few. Thus, in order to achieve a fuller understanding of the spreading phenomenon of overweight and obesity – carrying with it terrific social and sanitary costs – more studies are needed. This paper provides a contribution in this direction. The research we conducted allowed to prove a significant statistical relationship between the level of globalization (measured by the KOF index) and obesity in a very large sample of countries. It is also shown that this relationship is revealed direct and strong up to a high value of the level of globalization, but after this treshold it changes direction and intensity. The observation of this non-linear trend of relationship between the two variables studied - although further insights into the causes of non-linearity and analysis of longitudinal type for years to come are neeeded - provides guidance in learning more about social factors causiong obesity, specifically about the complex relationship between "stages" of socio-economic systems and the prevalence of obesity

Venue

Melbourne, Australia.

About Melbourne

Tourism in Melbourne is a significant industry in the Australian state of Victoria. Melbourne, the country's second most-populous city, was visited by just under two million international overnight visitors and 57.7 million domestic overnight visitors during the year ending March 2014.[1] Melbourne's attractions include spectator sports, art, live music, festivals and fashion events that are popular with tourists. In 2008 Melbourne exceeded Sydney for the first time, in terms of money spent by domestic tourists on a per capita basis; however, at the time that the figures were released, a spokesman for the NSW Tourism Minister stated that Melbourne earned less in terms of overall tourist revenue.

There are a variety of interesting things to see outside Melbourne proper but still within a day trip of Melbourne:

- The Yarra Valley region, producer of high-quality wine and with beautiful rainforest scenery nearby.
- The Mornington Peninsula, with its wineries, beaches and the Arthurs Seat lookout.
- The Surf Coast near Geelong, with excellent surf beaches and the spectacular views of the Great Ocean Road (Voted the world's best road trip in 2003).
- Ballarat, a small city once the centre of the gold rush and site of the Eureka Stockade.
- Bendigo.
- Phillip Island, home of the Australian Motorcycle Grand Prix, also has one of the few easily accessible colonies of little penguins.
- French Island in Western Port Bay
- Geelong, 80 kilometres (50 mi) down the Princes Hwy is the gateway to many of Australia's tourist destinations such as the Great Ocean Road, Twelve Apostles and Bells Beach. Geelong is famous for its world class waterfront on Corio Bay. One of the largest waterfront redevelopments ever undertaken in Australia, Waterfront Geelong includes Cunningham Pier featuring a Carousel Pavilion, and the art-deco bathing area at Eastern Beach.

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Tourist Attractions



Federation square building



Royal exhibition building



Princess Theatre



Great Ocean Road



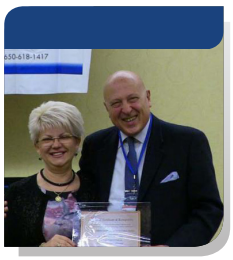
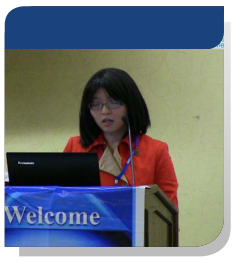
The Mornington Peninsula

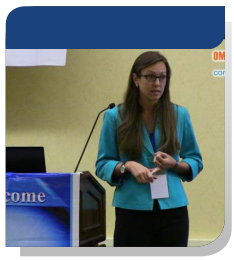
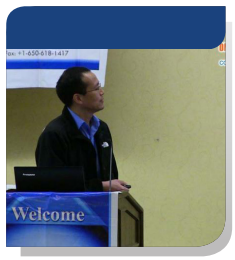


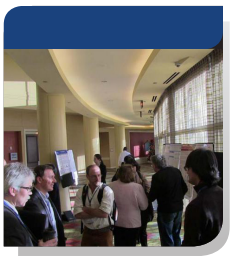
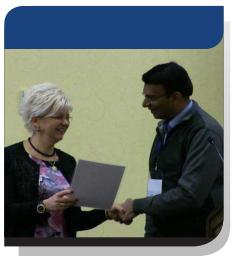
Tea rooms

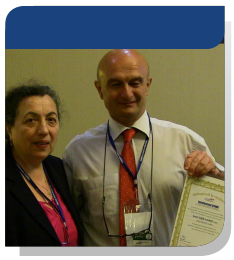
Glimpses of Conferences



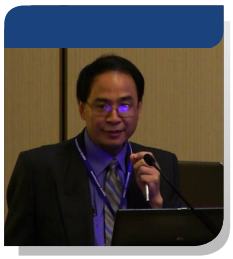






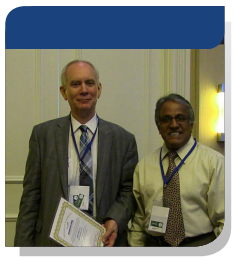
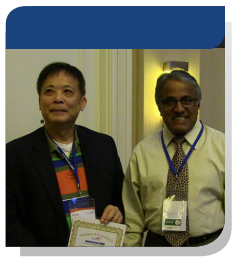








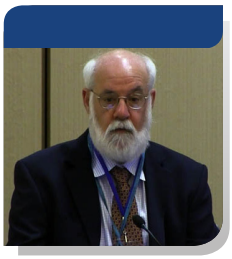


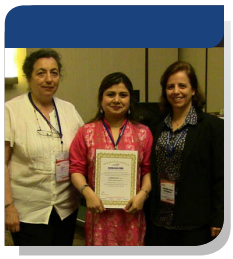



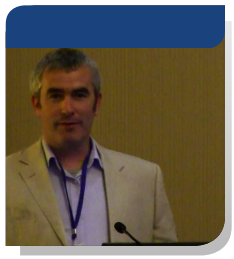













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