

## ***Peripatetic Column*** **Fighting Fat**

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**T**he last three decades have seen a great explosion in the development of anti-obesity clinics. It is a need based specialty, and caters to all ages. Little wonder that dieticians, nutritionists, physiotherapists, beauticians, medicos and even laymen have got on the band wagon of specialists who claim to reduce body fat. Fancy names have come up everywhere like weight loss clinic, body shaping, body contouring and look-young clinics. Tall claims are made in the media of weight reduction in days and weeks. Some even publish the before and after look: following treatment at their clinics. What is the role of the ordinary medical practitioner who is often approached for advice?

In this article we exclude patients who have hormonal or genetic problems with their obesity. Familial obesity where the whole family feasts on fatty, fried and fast food is difficult to tackle because the whole family needs counselling. Broad boned and big hulk of a person e.g. wrestler may look overweight, but most of that may be bone and muscles. To us medicos two types of over weight people are of interest, one is the cardiac and the other a diabetes patient who has been asked to drop weight as a part of his lifestyle change. This will entail less frequent eating of simple and high roughage food. And exercise. The main problem here is motivation. Unless the patient himself agrees to change his lifestyle and follow it up with an iron will he will not win. Most of these patients are highly successful men who live life in the fast lane.

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To ask for lifestyle change may be asking for too much. His success is often linked with his circle of friends who have similar life style. To become a different man is never easy. Instead of giving a long winded advice and a host of charts it may be prudent to go after the problem piece meal. Smoking must be stopped totally; diet must include fibre and less frequent eating but must be close to what the family eats. Exercise is a MUST. Let him stop spirits but continue wine. This will allow him to retain his friends circle. Yoga is prescribed frequently by doctors and often without thought. Yoga is an ocean and involves diet, discipline, positive thinking, breathing, relaxation through yoga takes years to learn and needs a guru. Practising stretching exercises and Hath yoga may make the body more active but may not help obesity. Gross obesity involving over 40% of body weight per sq. metre may need surgical intervention. Bariatric surgery is a new star on the horizon. Liposuction and lipectomy is only good for regional obesity especially lower abdomen and buttocks. Gastric balloon and gastric banding has gained popularity over a period of time because they are simple and reversible. Gastric sleeve resection and duodenal bypass are big operations and need expert hands, preferably through the laparoscope. Patient selection is very important. Fat patients are poor surgical risks. Every effort must be made to make the patient fit for surgery. Bypass operations alter body physiology and long term results are awaited. The patient must be clearly informed as to what to expect. An interesting development has been that Bariatric surgery claims to cure Diabetes Type II. Let us wait to hear more!!