

## Obesity in Women: A Challenge in Arab World

Firdous Jahan\*

Family Medicine Department, Oman Medical College, Sohar- Sultanate of Oman

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The prevalence of obesity has risen in developed, under-developed countries and Arab world. The WHO (World Health Organization) defines obesity as a BMI (body mass index) of 30 kg/m<sup>2</sup> or more. WHO reported discovered that 30% of the population in the Arab World is overweight or obese, including adolescents and adults [1]. In Oman according to a study done by AL lawati JA et al in 2000 the prevalence of obesity reached 16.7% in men and 23.8% in women [2,3]. According to statistics from the WHO, Kuwait ranks 9<sup>th</sup> in the world and first amongst Arabic-speaking countries in female obesity. The rank order in Arabic-speaking countries for obesity in females is Kuwait (55.2%), Egypt (48%), and UAE (42%). Countries such as Bahrain (37.9%), Jordan (37.9%), Saudi Arabia (36.4%) and Lebanon (27.4%) have higher obesity rates in females [4,5].

Obesity is becoming more prevalent and has adverse effects on a variety of women's health issues. This increases the risk of cardiovascular diseases, diabetes, musculoskeletal disorders, affects fertility throughout a woman's life, cancer (endometrial, ovarian, breast, cervical), and premature death. Obesity is an independent risk factor for the development of coronary artery disease (CAD) in women and is an important modifiable risk factor for prevention of CAD [6]. Prepregnancy obesity contributes to the development of many pregnancy related complications including pregnancy-induced hypertension, preeclampsia, gestational diabetes, cesarean-section, and neonatal death. Maternal obesity is associated with a decreased intention to breastfeed, decreased initiation of breastfeeding, and decreased duration of breastfeeding [7].

Development, urbanization, and improved living conditions in the Arab countries have led to greater consumption of unhealthy/fast food intake; accompanied by decreased physical activity, this has caused an increase in prevalence of obesity. There are significant cultural barriers that appear to affect women more; managing their diet in pregnancy and postpartum and lack of communal exercise facilities for women. Traditional/cultural restrictions in lifestyle choices available to women in Arabic countries are one source for increased rates of obesity: females have limited access to sporting/exercise activities

[8]. Women in Arab world commonly employ cooks and maids adding to a sedentary lifestyle, with TV being the main leisure activity. Lack of information on healthy eating, lack of motivation to eat a healthy diet, and not having time to prepare or eat healthy food and lack of time to do physical activity seems the main barriers [9].

Intervention programs are needed to combat obesity and other chronic non communicable diseases in the Arab world which should include solutions to overcome the barriers to weight maintenance, particularly the sociocultural barriers to practicing physical activity. Clinicians should counsel all women about the negative effects of obesity and the importance of controlling weight to prevent negative outcomes. Health awareness in general and especially in school going girls regarding causes and complications of obesity will help to motivate women for weight management.

### References

1. Ono T, Guthold R, Strong K (2005) WHO Global Comparable Estimates.
2. ALawati JA, Jousilahti PJ (2004) Prevalence and 10-year secular trend of obesity in Oman. Saudi Medical Journal 25: 346-351.
3. Badran M, Laher I (2011) Obesity in Arabic-Speaking Countries. Journal of Obesity.
4. World Health Organization (2010) Global strategy on diet, physical activity and health. Obesity and overweight.
5. Kahan D (2015) Prevalence and correlates of adult overweight in the Muslim world: analysis of 46 countries. Clin Obes 5: 87-98.
6. Guh DP, Zhang W, Bansback, Amarsi Z, Birmingham CL, et al. (2014) The incidence of non-communicable diseases in the Arab world. Lancet 25: 356-367.
7. Callaway LK, Prins JB, Chang AM, McIntyre HD (2006) The prevalence and impact of overweight and obesity in an Australian obstetric population. Med J Aust 184: 56-59.
8. Elkum N, Al-Tweigeri T, Ajarim D, Al-Zahrani A, Amer SM, et al. (2014) Obesity is a significant risk factor for breast cancer in Arab women. BMC Cancer 14: 788.
9. MUSAIGER AO, Al-Mannai M, Tayyem R, Al-Lalla O, Ali EY (2013) Perceived barriers to healthy eating and physical activity among adolescents in seven Arab countries: a cross-cultural study. Scientific World Journal 14: 232164.

\*Corresponding author: Firdous Jahan, Associate Professor/Chair, Family Medicine Department, Oman Medical College, Sohar- Sultanate of Oman, Tel: +96826844004; E-mail: [firdous@omc.edu.om](mailto:firdous@omc.edu.om)

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