EDITORIAL

Prevent and preempt obesity, promote and protect health

Fatema Jawad[1], Sanjay Kalra[2]

Obesity has emerged as a major public health challenge, not only in Pakistan and its neighbouring countries, but across the world.[1] Along with its myriad clinical presentations, complications and comorbidities, the various causative, contributory and confounding features of obesity serve to confuse an already complex situation.

While the diagnosis of obesity should be straightforward, this is not always the case. Various countries have their own diagnostic thresholds for body mass index and waist circumference. These are decided according to the risk of cardiovascular disease. Asians, in general, have higher cardiovascular morbidity at a relatively lower body weight. The intricacies of obesity diagnosis and classification have also been increased, rather than eased, by the emergence of newer terms such as preclinical obesity, metabolically healthy obesity, and clinical obesity.[2]

The present figures of obesity in the adult population of the Indo-Pak population are of concern. India has a much larger population with the NFHS-5 (2019-2021) data showing 38% women and 36% men between the ages of 15 to 49 years being obese.[3] The second NDSP (2016-2017) study from Pakistan revealed figures of obesity being 42% in males and 58% in females.[4]

Obesity is known as the mother of many other metabolic disorders which can compromise the quality of life of an individual of all ages.This calls for strong preventive measures initiating from childhood. Educating the general population, especially the school children and housewives is of primary importance. Implementing a healthy life style should be considered the responsibility of every individual from all walks of life, as a normal body weight is the prime target to enjoy a good quality of life.

The Journal of Pakistan Medical Association (JPMA) has championed the cause of obesity prevention and management through its special section on Barocrinology. A regular monthly column on the subject has been in existence since August 2021.[5]

Apart, from this, editorials, original research and other communications have been published frequently. A search using the keyword [obesity] throws up 77 articles within the journal.[6] This, however, is just the beginning. Much more needs to be done in the field of obesity care. Primordial prevention should begin in the intrauterine period itself. A focus on the first thousand days of life, exclusive breastfeeding, appropriate physical activity, and minimization of screen time is of paramount importance.[7] Equal emphasis should be paid to child development and adolescent health.

Weight maintenance must be integrated in all medical and surgical specialties. Health care professional of all disciplines should be sensitized to the importance of weight management. This will help in integrating primary, as well as secondary prevention, of obesity at all levels of health care. Secondary and tertiary prevention, i.e., management of obesity and its complications, must be strengthened by empowering endocrinologists and physicians.[8] National regulations regarding authority to prescribe anti-obesity medications must be respected.

Two other, higher, levels of prevention are equally important. Quaternary prevention enjoins us to avoid over investigation, overdiagnosis, and overtreatment. Rational, evidence-based therapy should be advised when indicated, while abstaining from non-evidence based or empirical interventions.[9]

Quinary prevention suggests that we should work to neutralize misinformation about obesity, and promote accurate knowledge of the syndrome. This is essential for optimal management, as psychological and social determinants of health play an important role in obesity pathogenesis, prevention, therapeutic practice and prescription.[10]

At JPMA, we shall continue our endeavor to fight against obesity. Through our publications, we hope to showcase national and international evidence and opinion, share best practices, and contribute to a healthier and happier future.

DOI:https://doi.org/10.47391/JPMA.26-01

[1]Department of Diabetology, Sindh Institute of Urology and Transplantation, (SIUT), Karachi, Pakistan; [2]Department of Endocrinology, Bharti Hospital, Karnal, India; University Center for Research & Development, Chandigarh University, Mohali, India.

Correspondence: Fatema Jawad. e-mail: fatemajawad@gmail.com
ORCID ID: 0000-0003-4120-5072

References

1. Kalra S, Lodhi S, Selim S, Shakya S, Mehta RJ, Jayawardena R, et al. The Colombo Declaration on Obesity Care (CDOC): Person-, Public-, and Planner-Friendly Obesity Management. Asian Journal of Obesity(AJO). 2024;1: 7-9.
2. Rubino F, Cummings DE, Eckel RH, Cohen RV, Wilding JP, Brown WA, et al. Definition and diagnostic criteria of clinical obesity. The Lancet Diabetes & Endocrinology. 2025;13:221-62.
3. International Institute for Population Sciences (IIPS) and ICF. 2021. National Family Health Survey (NFHS-5), 2019-21: https://dhsprogram.com/pubs/pdf/FR375/FR375.pdf
4. Basit A, Askari S, Zafar J, Riaz M, Fawwad A. Prevalence and risk factors for obesity in urban and rural areas of Pakistan: A study from second National Diabetes Survey of Pakistan (NDSP), 2016–2017. Obes Res Clin Pract. 2021;15:19-25
5. Kapoor N, Kota S, Kalra S. Obesity a communicable disease-a new age paradigm. J Pak Med Assoc. 2021;71: 2100-02.
6. Obesity. Available at: https://www.archive.jpma.org.pk/search?srch_type=article&kword=obesity&year= Last accessed on 17 October 2025
7. Verma M, Kapoor N, Senapati S, Singh O, Bhadoria AS, Khetarpal P, et al. Comprehending the Epidemiology and Aetiology of Childhood Obesity: Integrating Life Course Approaches for Prevention and Intervention. Diabetes Therapy. 2025:16:1177-1206.
8. Somasundaram N, Sumanatilleke M, Raza SA, Bajaj S, Sahay R, Madhu SV, et al. The Colombo Declaration, 2019. Sri Lanka Journal of Diabetes Endocrinology and Metabolism(SJDEM). 2019;9:87-92.
9. Latt TS, Verma M, Kapoor N, Kalra S. Preventive Metabolic Medicine in Primary Care. J Pak Med Assoc. 2025;75:1141-2.
10. Bhattacharya S, Kalra S. Quinary Prevention and Bariatric surgery. J Pak Med Assoc. 2020;70:1664-6.