

STUDY AND TREATMENT OF THE ORIGINS OF OBESITY IN PREGNANT WOMEN

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Abstract

Obesity is becoming an increasingly serious medical and social problem every year in countries with high levels of economic development.

Eating etiquette refers to a value attitude towards food that shapes dietary stereotypes and includes individual attitudes, habits, and emotions toward food. Nowadays, the term “carbohydrate thirst” has even appeared in the literature, where a person immediately feels the need for sweet and fatty foods. In addition, it is similar to a drug, and when it is absent, the person becomes depressed, which is somewhat reminiscent of abstinence [26, 27]. When a restricted type of behavior is followed by an overly strict diet, the period of overeating changes against the background of a development called “dietary depression” [2, 3, 19]. The most severe forms of malnutrition cause anorexia and bulimia nervosa. This leads to very serious psychiatric illnesses and is treated with the mandatory participation of psychiatrists.

Keywords: - Obesity, eating disorders, pregnancy, body mass index.

Introduction:-

Purpose of work - To study the features of lifestyle-related diseases in pregnant women.

Materials And Methods

The study included 54 women of working age who did not do OOrio. We tested using standard medical questionnaires. Physical activity, taking into account the amount of kcal used and ingested. We also developed a complex test to calculate BMI and approximate waist size to determine lifestyle characteristics. The goal of this study was to monitor pregnant women with high body weight according to lipoprotein counts at each trimester and to adjust their eating habits. Inpatient follow-up and treatment were performed in the obstetrics department of SamMI Clinic 1. The division of pregnant women into groups was structured taking into account the degree of obesity.

During the follow-up, the diet was adjusted for lipoproteins in each trimester.

The formula for calculating body mass index (BMI (kg / m²)), according to which the degree of obesity was assessed, Body length and body weight were measured.

The degree of disruption of lipid metabolism (total cholesterol, triglycerides, high lipoproteins, and low density (HDL and LDL)) was determined by the amount of lipoproteins.

Research results: The average age of the women observed ranged from 21 to 55 years. The division of pregnant women into groups was according to the WHO classification.

All of the women who underwent the examination were prone to obesity. They had obesity in 80% of their close relatives.

Table 1.

Lipid levels in pregnant women.

Groups	I	II	II	II
Lipid levels	n=20 M±m	(I trimester) n=58 M±m	(II trimester) n=52 M±m	(III trimester) N=49 M±m
total cholesterol	3,76±0,24	4,15±0,62	4,63±0,35*	6,48±0,48*

(mmol\l)				**
HDL (mmol\l)	1,82±0,11	1,71±0,23	1,01±0,13*	0,89±0,22* **
IA (ED)	1,06±0,30	1,43±0,12	3,58±0,37*	6,28±0,44* **
LDL (mmol\l)	1,66±0,35	1,94±0,48*	2,85±0,24*	4,69±0,21* **
VLDL(mmol\l)	0,28±0,02	0,50±0,05*	0,77±0,15*	0,90±0,19* **

The study included 54 able-bodied women (21% to 24%, 76% to 55 years).

According to the survey, all subjects were divided into two groups - 46% normal (BMI 18.5-24.9 kg / m2) and 54% overweight (BMI 25 kg / m2 and above).

In the first group of women, PP disease was observed in 69% of cases. In subjects aged 21 to 35 years, the combination of restrictive type (Og.) (22%) and its external type (Ec.) (22%) prevailed. In the age group of 36 to 55 years, the combination of two (34%) types of eating behaviors predominated.

Compared to other OO diseases during meals, 23% who were more involved in parallel activities often had a habit of urgency. swallowing food (23%) and continuing to eat after satiety (23%). Compared to others, these women buy fast food (15%). In the PP group of the mixed type (EC and OG), low physical activity is predominant in women with normal body weight.

In the group of women with high body weight, women aged 36-55 years prevailed (Fig. 1) (83%). In 93% of cases, OO impairment predominated in the mixed group (47%), slightly less in 33% - all three types of PP. Overweight women aged 36-55 years and mixed type of PP (Ec. And Og.) Are characterized by low physical activity (20%), 7% of women in this group. Compared to other groups with OO disease, the main diet is often 2 halves of the day and night (30% and 17%, respectively). Women aged 36–55 years with different OOs (Ec. And O.) spend less time on physical labor (30%) than other groups who break OOs.

Abdominal obesity was detected in 68% of women, and in 13% of women in the 36-55 age

group, in terms of TVI, it was predominant in two types of combined groups (equality and O.) (7%). Use was safe in all women, but most often occurs when Ek is added. Og. OO 40%.

Nazorat guruhi , OO-ko'rsatkichlari

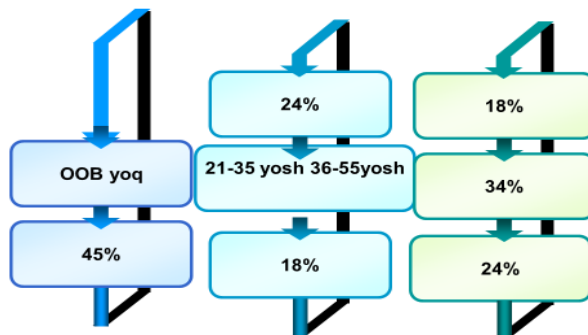


Figure 1.

88.8% of women were not on a special diet. Most women ate more than three meals a day, with women typically consuming fruits and vegetables, yogurt, and sweets between meals. Most of the women ate meat twice or once a day, preferring poultry. Of these, only 17.6% ate fish at the recommended frequency and 21.2% chose non-recommended species. Almost 29.6% of patients consumed 3-4 servings of milk or dairy products per day, and 16.8% of them consumed milk in addition to dairy products. Half of the women reported consuming whole grain bread, and 24% of them opted for whole wheat bread during pregnancy. Despite the large number of women who consumed wheat products, the vast majority of women opted for whole wheat bread and whole grain products. Nutritional etiquette was related to education level and weight gain during pregnancy.

Conclusions

1. OO-restricted group with low levels of physical activity in women aged 21 to 35 years with normal body weight, and mixed group (Ec. And Og.) In the group aged 36 to 55 years, the second day in addition to consuming half of the food, they were more involved in parallel activities, with other OO diseases, and, unlike women aged 21–35 years, were able to digest food more quickly and after satiety. they had a habit of continuing to eat.
2. In the overweight group, women aged

36-55 years with EC were predominant. and Og. OO type characterized by low physical activity and smoking. Compared to other groups with OO disorders, the main meal often falls in the second half of the day and night, they continue to eat after they are full, serve less time, cook more often in a hurry, eat in a hurry, and vice versa. OO leads to disorders, 3. Diseases associated with age and OO disorders, an increase in the number of overweight women, which may increase the risk of developing arterial hypertension, diabetes mellitus, coronary heart disease and other pathologies.

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