Obesity among Medical Healthcare Professionals

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Obesity is a global epidemic. There are rising rates of obesity and its associated disorders, especially in developing countries including health care providers. Obesity is associated with early retirement, increased mortality and morbidity. It may reduce long-term retention of health workers in inadequately staffed health systems of developing countries.¹

Recently, obesity has become a significant publichealth threat with prevalence increasing worldwide. Like other types of professions, doctors and nurses are also affected by obesity. They are role models who develop community awareness towards a healthy lifestyle. Despite working in a disease preventive environment, several studies have shown a trend of doctors towards developing obesity.^{2,3} Obesity among doctors may affect patients' perception of their credibility in advising patients regarding lifestyle modification among overweight or obese patients.⁴

Obesity is linked to increased risk of developing a range of life-limiting illness including heart disease, musculoskeletal disorders, cancer, type 2 diabetes and other chronic diseases. It is known to increase the likelihood of lower back injury and has been associated with reduced quality of life.⁵ Investigators have reported a high prevalence of obesity among health workers. These high prevalence rates are occurring in the same context where more than 80% of urban professional adults do not meet the World Health Organization (WHO) recommendations for physical activity.⁶

In employees, obesity imposes significant costs. A recent US study indicated that morbid obesity in employees costs \$8067 in covered medical, sick days, short-term disability, and workers' compensation claims combined, a statistic more than double (\$3830) for normal-weight employees.⁷

The workplace and health professionals play a critical role in the prevention of obesity and its consequences.

It is therefore vital to carry out research into the burden and factors associated with obesity among health workers because this will give critical insight into designing workplace programs to prevent and control obesity and overweight in healthcare settings. Increased awareness of healthcare workers regarding their own diet and physical activity can also help them to be models for patients, clients, and the communities they serve.⁸

Musa et al⁸ found a high prevalence of obesity and overweight among health workers at a tertiary hospital in an urban setting. Female workers and married staff were more likely to be obese and overweight.⁸ Kasu et al⁹ found prevalence of overweight/obesity among females 42.4% and 32.9% in males. Males were more physically active than their female colleagues. The prevalence of obesity among health care workers was higher than in the general population.⁹

Prevalence of obesity among Bangladeshi doctors is not known. We need to collect data about BMI of Bangladeshi doctors. Doctors are very busy to get enough time for exercise. Tertiary care hospitals in urban areas should have set up for gymnasiums to prevent obesity. During work hour they should get time for exercise to become fit for their better performance.

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References

 Iwuala SO, Ayankogbe OO, Olatona FA, Olamoyegun MA, OkparaIgweU, Sabir AA et al. Obesity among health service providers in Nigeria: danger to long term health worker retention? Pan African Medical Journal 2015; 22(1): 1–8.

- Chou CF, Johnson PJ. Heath disparities among America's health care providers: Evidence from the Integrated Health Interview Series, 1982 to 2004. J Occup Environ Med 2008; 50: 696–704.
- Luchaupt SE, Cohen MA, Li J, Calvert GM. Prevalence of obesity among U.S. workers and associations with occupational factors. Am J Prev Med 2014; 46: 237–248.
- Puhl RM, Gold JA, LeudickeJ, DePierre JA. The effect of physicians' body weight on patients attitudes: Implications for physician selection, trust and adherence to medical advice. Int J Obes 2013; 37: 1415–1421.
- Kyle RG, Wills J, Mahoney C, Hoyle L, Kelly M, Atherton IM. Obesity prevalence among healthcare professionals in England: a cross-sectional study using the Health Survey for England. BMJ Open 2017; 7: e018498.

- Akarolo-Anthony SN, Adebamowo CA. Prevalence and correlates of leisure-time physical activity among Nigerians. BMC Public Health 2014;14: 529.
- Van Nuys K, Globe D, Ng-Mak D, Cheung H, Sullivan J, Goldman D. The association between employee obesity and employer costs: Evidence from a panel of U.S. employers. Am J Health Promot 2014;28: 277–285.
- Musa D, Adeyinka SJ, Emmanuel OA, Victoria MO. Prevalence and correlates of obesity and overweight in healthcare workers at a tertiary hospital. Journal of Medicine in the Tropics2016; 18(2): 55–59.
- Kasu ES, Ayim A, Tampouri J. Prevalence of obesity among health workers in Kadjebi district of Ghana. Journal of Biology, Agriculture and Healthcare 2015; 5(2): 155–166.