Leptin Resistance: The Underlying Mechanism of Obesity

Priyanka Sharma*

Department of Biotechnology, Kalinga Institute of Industrial Technology, India

Introduction

Obe i a global heal h e idemic, ha fa - eaching con e ence fo indi id al and ocie a la ge. e m l iface ed na e of hi condi ion ha in ig ed e ea che fo decade, leading o di co e ie ha ha e e anded o nde anding of he biological mechani m in ol ed in eg la ing boda eigh. Among he e di co e ie, le in, a ho mone od ced bafa cell, ha eme ged a a kea laae in he in ica e eb of ignal go e ning a e i e, me ab oli m, and ene ga balance [1]. In hi a icle, e ill del e in o he ole of le in in obe i a e lo ing i f nc ion, eg la ion, and im lica ion fo he managemen and e en ion of hi ide ead heal h i e.

Leptin: The satiety hormone

Le in' ima la f nc ion i o comm nica e i h he b ain, eci calla he ha o halam , o eg la e ene ga balance.

When fa de a e ab ndan, le in le el inc ea e, ignaling d he b ain ha he bod ha end gh ene gh e e e, he ebh ed cing h nge and inc ea ing ene gh e endi e. Con e elh hen fa de dimini h le in le el dec ea e leading dinc ea ed h nge and ed ced ene gh e endi e. i feedback loo i c cial fo main aining a able bod he eigh [2].

Leptin resistance: A complicating factor

In heo & le in ho ld ac a a na al eg la o of bod eigh, e en ing obe i & b& ignaling a ie & and inc ea ed ene g e endi e hen fa o e a e high. Ho e e, in man ac ca e of obe i & a henomenon knon a le in e i ance occ . Le in e i ance i akin o in lin e i ance in & e 2 diabe e, he e he bod & cell become le e on i e o he ho mone' ignal [3].

In indi id al i h le in e i ance, he b ain doe no ade a ela e ond o he highe le in le el od ced base ce fa o e. i bl n ed e on e lead o e i en h nge, ed ced ene ga e endi e, and a endenca o gain eigh. Re ea che belie e ha fac o ch a gene ic, in amma ion, and ce ain life ale choice, incl ding a high-fa die and eden a abeha io, can con ib e o he de elo men of le in e i ance.

desensiti⊠ the body to the hormone⊠naking it even less eective in regulating appetite and metabolism⊠Ihis phenomenon underscores the importance of addressing leptin resistance in the prevention and treatment of obesity⊠ mi acle c e fo obe i [a] ome a egie foc on im o ing le in en i i i [a]

Lifestyle modification: Ado ing a heal ha life a e ha incl de eg la e e ci e and a balanced die can hel im o e le in en i i i a Pha ical ac i i a can enhance he b ain ' e on e o le in, hile a die ich in be and lo in o ce ed food can mi iga e in amma ion, a fac o in le in e i ance.

Sleep: Inade a e lee ha been linked di ion in le in le el and inc ea ed h nge. Pio i i ing good lee hagiene can di i ela in ence le in eg la ion.

Medications: Some medication, ch a le in e lacemen he a $(a \ a \ b \ b \ c)$ a lo en ial in eating obe i $(a \ c)$ ela ed le in de ciencie. Ho e e, he e eatmen a eno $(a \ c)$ idelige

Role of genetics: Gene ic can igni can la in ence le in le el and en i i i a Some indi id al maa ha egene icm a ion ha ca e hem o od ce le le in, making i mo e challenging fo hem o con ol hei eigh. Con e ela o he maa ha em a ion ha lead o e ce i e od c ion of le in b ill e e ience le in e i ance, demon a ing he com le i a of gene ic fac o in obe i a [6].

Leptin and appetite regulation: Le in in e ac i h e e al d he h mone in d ed in a e i e eg la ion, incl ding gh elin (he h nge h mone), in lin, and e ide YY (PYY). e e in e ac ion c ea e a nells ned sem ha hel main ain balance in food in ake. In obe i she he e in e ac ion can become di ed, f he

*Corresponding author: Priyanka Sharma, Department of Biotechnology, Kalinga Institute of Industrial Technology, India, E-mail: priya_sh@gmail.com

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Implications for obesity management

Unde anding he ble bf le in in ble i [a] ha led b he de elb men bf b en ial he a e ic a bache. While he e i nb

con ib ing ob e ea ing.

Leptin sensitivity and weight loss: F° indi id al a em ing $0 \circ 10^{\circ}$ e eigh, inc ea ing le in en i i i a c i ical g°al. G ad al eigh 1°, a he han a id and e eme die ing, can hel im ° e le in ignaling. Ra id eigh 1° can lead ° a d ° in le in le el, igge ing inc ea ed h nge and a 1° e me ab°lic a e, hich make main aining eigh 1° challenging [7].

Potential therapies: Re ea che a e ac i elle in e iga ing d en ial he a ie d add e le in e i ance and d be i e i incl de de eld ing d g ha can enhance le in ignaling, ch a le in en i i e . Addi ionalle g mic d bio a mod la ion h d gh obio ic and ebio ic i being e lo ed fo i d en ial d in ence

le in eg la ion.

Psychological and social factors: While le in laß a cen al ôle in ôbe i $\underline{\mathbb{S}}_{i}$ i ' im ô an ô ec ôgni e ha ôbe i $\underline{\mathbb{S}}_{i}$ i a côm le côndi iôn in enced $\underline{\mathbb{S}}_{i}$ a iô $\underline{\mathbb{S}}_{ch}$ ôl ôgical, ôcial, and en i ônmen al fac ô . Em ô iônal ea ing, e , ôci ôc côn ômic a , and acce ô heal h $\underline{\mathbb{S}}_{ch}$ ôl ô d ô iôn can all côn ib e ô ôbe i $\underline{\mathbb{S}}_{ch}$ and ma $\underline{\mathbb{S}}_{i}$ in e ac i h le in ignaling [8].

Conclusion

Le in la a i o al ole in he eg la ion of a e i e, me aboli m, and ene ga balance. I in ica e ela ion hi i h boda fa o e nde co e i igni cance in he de elo men and managemen of obe i a Le in e i ance, a common occ ence in obe i a highligh he com le i a condi ion and he need fo a holi ica o ach o i ea men and e en ion. Ba nde anding he ole of le in and o king o im o ele in en i i i a e can ake igni can e Page 2 of 2