

Keywords: Obesity; Metabolic diseases; Type 2 diabetes; Cardiovascular diseases; Diabetes, Non-communicable diseases; Tea-leaf extract; Lifestyle, Physical activity

Introduction

Obesity, a global public health problem, is characterized by an excessive accumulation of adipose tissue. It is a major risk factor for the development of various chronic diseases, including type 2 diabetes, cardiovascular diseases, and certain types of cancer. The pathogenesis of obesity is complex, involving genetic, environmental, and lifestyle factors. The World Health Organization (WHO) defines obesity as a condition in which excess body fat has accumulated to a degree that may impair health. It is a global epidemic, with the prevalence of obesity increasing steadily over the past few decades. In 2016, more than 650 million people were obese worldwide, and this number is projected to reach nearly 1 billion by 2030 [1].

The Intersection of Obesity and Metabolic Diseases: Obesity is closely linked to the development of metabolic diseases, particularly type 2 diabetes and cardiovascular diseases. The pathogenesis of these diseases is multifactorial, involving insulin resistance, hyperlipidemia, and hypertension. Obesity is a major risk factor for the development of type 2 diabetes, with the prevalence of the disease increasing significantly in obese individuals. Similarly, obesity is a major risk factor for the development of cardiovascular diseases, including coronary artery disease, stroke, and heart failure. The underlying mechanisms linking obesity to these diseases are complex and involve a combination of genetic, hormonal, and lifestyle factors. For example, obesity is associated with an increase in the production of pro-inflammatory cytokines, which can lead to insulin resistance and endothelial dysfunction. Additionally, obesity is associated with an increase in the production of reactive oxygen species, which can contribute to the development of atherosclerosis and other cardiovascular diseases. Therefore, the management of obesity is crucial for the prevention and treatment of these metabolic diseases.

fe e c a .ge .

C a d c a e :I e e c -ba ed
e e a .ge . be e e a d e ab c ea
.

P c c a .ge :Ad ca ef c c a .ge a ca a d a a
e e c ea e e e a ea fe e , c a
ed acce f d a d ec ea a ace .

I e a a e ea c c a :F e .ge ba c ab a
e ce ,da a,a d e e e,add e .ge e d de b de
f be a d e ab c d ea e .

C a a .ge :De e e e a c de c a a d
c ec c fac e c .ge be a d e ab c ea a
.ge ba ca e.

e f e f add e .ge e ab c d ea e a ca ed
be e a c, a e -ce e ed, a d ec .ge ca
ad a ced a ac . .ge .ge .ge e ea c , c ab a , a d
e .ge a f a e ec .ge , ea ca e fe a
ca ad a ce a d e e ec e e e ,ea e e ,
a d e a ed ea e f d d a a ec ed b be - e a ed
e ab c d de .

B d e :Mea e b d .ge c e e e , d e , a d
a e f a a a e e ab c ea .

L e f c e :E a a e e e e a d e a e
da .ge ea d c d e -a c c fa e d ea e
(NAFLD).

He d a c .ge :A e b d e e e a d

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