3. BÖLÜM

OBEZİTE BİYOKİMYASI

Ali COŞKUN[1]

Obezite dünya sağlık örgütünün (DSÖ) tanımına göre vücut yağ dokusunda sağlığı bozacak şekilde aşırı ya da anormal biçimde yağ depolanmasıdır. Vücudun üç temel bileşeni olan karbohidratlar, yağlar ve proteinlerin, aralarındaki dengenin aşırı şekilde yağlar lehine bozulmasına obezite denir. Termodinamiğin birinci yasasının ihlali obeziteye yol açar. Termodinamiğin birinci yasasına göre bir sistemin dahili enerjisi, sisteme yapılan net ısı transferi (Q) ile sistemin üzerine uygulanan net işin (W) toplamıdır. Yani alınan harcanılan enerji miktarına kıyasla alınan enerji miktarının çok olması obeziteye sebep olmaktadır. (1, 2).

Obezite; Tip 2 Diabetes Mellitus (DM), kardiyovasküler hastalıklar (KVH), stroke (serebro vasküler ataklar), hipertansiyon (HT) hatta kanser gibi çok çeşitli ve yaygın hastalıklarla birlikte görülmekte ve bu hastalıkların prevelansını önemli ölçüde artırmaktadır.

Obezite birlikte bulunduğu tüm hastalıklarda daha fazla morbidite ve erken mortalite oluşturduğu için, ciddi şekilde takip edilmeli ve tedavi edilmelidir. Sadece tedavi edilmekle her şey bitmiş sayılmamalı, vücutta yaptığı ve yapmış olabileceği tahribatlar da gözlenmeli; doğru zamanlarda müdahale edilmelidir. Obezite tedavisi başarılı olarak sona erse bile, hasta kendi başına bırakılmamalı, zaman zaman beden kitle indeksi ve kan değerleri ölçülerek kontrol altında tutulmalıdır. Obezite tedavi periyodundayken hastaya, gözlem altında ve yakın takipte olduğu özellikle hissettirilmelidir.

Obezitede işlevsel halde olan hipotalamus, hipofiz, pineal (epifiz) bez arkı iyi etüt edilmeli, aksayan yönler ortaya çıkarılmalıdır (Şekil 14-A ve Şekil 14-B).

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karanlık-ışıksız ortamda veya soluk kırmızı ışık ortamında uyunmalı. Soğuk sayılacak (16-19 °C) bir ortamda düzenli olarak spor yapılmalı ki kahverengi yağ dokusu oluşsun, adiponektin salgılansın.

Anahtar Kelimeler: Adipokin, Sitokin, Adiponektin, Adipsin, Nesfatin -1, Rezistin, Visfatin.

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