



Dietary Challenges faced by middle income group post bariatric patients as compared to the affluent class patients: Clinical study done in Indian Government health setup

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ABSTRACT

Background/Objective: The main objective of this study was to explore the locally available regional foods which can be included in the post bariatric diet of patients of low income group and to analyse the challenges faced by the Bariatric patients related to meal pattern in low income group.

Subject/Methods: In the present study the OPD patients and patients referred by other department were taken in to the Bariatric Clinic under the leadership of Gastro Surgeon. The whole bariatric clinic team comprised of Trained Dietician, Clinical Psychologist. Inclusion Criteria for the study: although many no of patients got themselves enrolled in the Bariatric Clinic but only those, whose BMI was Above 40 were considered suitable for the surgery.

Results & Conclusions: The findings of the present study can be summarised in the following points. People belonging to the low income group found difficult to adhere to the small frequent meals concept but gradually learnt how to include buttermilk, sattu, laiyaa, jaggery chilla etc as small meals with due course of time. They were quite satisfied in modifying their conventional eating pattern rather than changing and adopting the entire new dietary pattern as sometimes suggesting in post bariatric protocols. Government centres with trained Team of Bariatric surgeons, Dietician and Clinical Psychologist can tackle with this problem at ground level because patients found it cost effective and affordable. Thus it provides greater access to the middle income group obese population.

KEYWORDS :

INTRODUCTIONS

Globalisation had been a boon in terms of economic factors but from Health point of view, it has tremendously promoted the Western life style patterns in our country and thus exposed the Indian population to the Silent killer disease that is Obesity. Indian population is the greatest victim of Junk food, Alcohol, and Sedentary Lifestyle.

Earlier Obesity, Diabetes and Cardiac Disorders were known to be the Diseases of Affluent Class, but in the present scenario they no longer affect the affluent class but has also started affecting the health of low income group patients. Over nutrition is not only confined to the intake of fat rich food but quantity wise increase in the intake of street food and less preferred Healthy food are also the cause for increasing obesity problem.

Bariatric surgery is coming up as most effective therapy to treat the morbid obesity cases and to reduce the complications of morbid obesity. Bariatric surgery call for the comprehensive care and life long commitments to follow a restricted post bariatric dietary regime which carefully monitors the quantity as well as the quality of the food prescribed.

Present study was done in Dietetics Department at Dr. Ram Manohar Lohia Institute of Medical Sciences, Lucknow. The Clientele approaching to this department comprised mostly of middle and lower middle income group.

Therefore in the following study below stated objectives were considered.

- To explore the locally available regional foods which can be included in the post bariatric diet of patients of low income group.
- To analyse the challenges faced by the Bariatric patients related to meal pattern in low income group.

Findings of this study will definitely help the future researches to

have better understanding towards increasing problem of obesity in vegetarian as well as low income group population of the country.

MATERIALS/SUBJECTS AND METHODS: In the present study the OPD patients and patients referred by other department were taken in to the Bariatric Clinic under the leadership of Gastro Surgeon. The whole bariatric clinic team comprised of Trained Dietician, Clinical Psychologist.

The sample Size of the present study was 30.

The patient's assessment was done at two stages namely Pre Bariatric phase and Post Bariatric Phase. In both the phase all aspects were intervened thoroughly and detailed investigations were done. From Dietician perspective assessment comprised of following categories

- Past clinical History and family history contributing to the morbid obesity.
- Socio economic background of the patients.
- Eating pattern of the whole family as well as the individual.
- Awareness of the patients about the changed eating patterns after the bariatric surgery.
- Anthropometric assessment of each individual pre surgery and post-surgery.(maximum 5 visits result were considered).
- Family support and his willingness to adhere to the post Bariatric regime and life style.

Inclusion Criteria for the study: although many no of patients got themselves enrolled in the Bariatric Clinic but only those, whose BMI was Above 40 were considered suitable for the surgery.

RESULTS:

The morbid obese patients mostly belonged to the middle income group and the lower income group. Lower income group patients found very less options in post bariatric dietary regime as compared to high income strata patients. Small frequent meal pattern was much difficult for lower income group patients to follow.

DISCUSSION

The findings of the present study can be summarised in the following points.

- People belonging to the low income group found difficult to adhere to the small frequent meals concept but gradually learnt how to include buttermilk, sattu, laiyya, jaggery chilla etc as small meals with due course of time.
- They were quite satisfied in modifying their conventional eating pattern rather than changing and adopting the entire new dietary pattern as sometimes suggesting in post bariatric protocols (Black coffee, coconut water, Electrol water, Glucon-D water).
- Government centres with trained Team of Bariatric surgeons, Dietician and Clinical Psychologist can tackle with this problem at ground level because patients found it cost effective and affordable. Thus it provides greater access to the middle income group obese population.

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CONFLICT OF INTEREST: None declared

Figure Legends:

- 1) Economic status of the sample
- 2) Constraints of availability of food choices in different income groups
- 3) Adherence to the dietary regime in post bariatric stage

Figure: 1

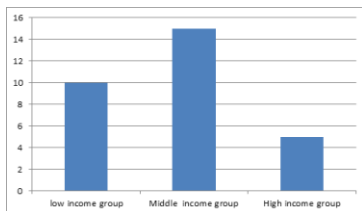


Figure: 2

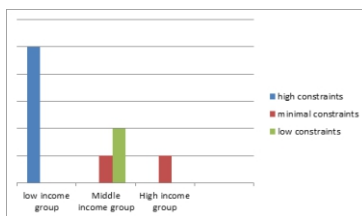
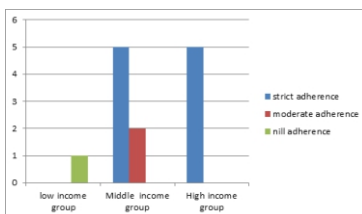


Figure: 3



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