

TEENAGE OBESITY AS A COMPLEX PROBLEM OF PUBLIC HEALTHCARE OF UKRAINE

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Introduction. Teenage obesity is a persistent, epidemic, international problem the prevention of which is paramount. Prevalence of above-mentioned issue is of particular concern nowadays, for its emergence doubles every three decades. For high-income countries, obesity and overweight are now less common than in low- and middle-income ones, for almost 35 million overweight teenagers are officially registered, and the same indicator of developed countries is around 8 mil. Multiple obese individuals under 12 years old provide grounds to predict the overall growth of excessive weight related problems in the nearest future. Moreover, the desire of affected young people to bring their body weight to normal is not always successful. Thus, every year in Ukraine 18-20 thousand new cases of obesity are recorded among children and teenagers.

The treatment of obese teenagers is complex process and requires changes in diet, activity and the environment. Intense lifestyle changes, which include family support, communication with a nutritionist, careful nutrition selection, physical activity and behavioral therapy are poorly compensated, which often hinders positive changes and therapy itself.

Obesity in children is associated with increased disability of young patients and reduced overall life expectancy due to the frequent development of severe comorbidities, increased likelihood of premature death and partial or complete inability to perform certain functions in adulthood. At least 2.6 million people die prematurely each year from being overweight or obese.

There is a number of factors in modern life that contribute to the hereditary predisposition to obesity in teenagers: habitual chronic overeating (as a style of

eating behavior in the family, frequent snacks while watching TV, the desire to perform stress-eating, snack at bedtime or in the middle of the night), sedentary lifestyle (prolonged sitting at school, in front of the TV or in front of the computer screen, driving) and reducing the time for active recreation, uncontrolled consumption of fizzy drinks. The issue of unmeasured high-calorie food intake, which includes eating chips, crackers, fast food, energy drinks, Coca-Cola, sweets, products with excessive use of flavor enhancers and other chemical impurities, is of particular danger and leads to quick accumulation of fats, easily digestible carbohydrates and their further deposition in the body, as well as to a distorted metabolism.

Aim. The main goal is to successfully fight obesity, which is a serious problem for teenagers, therefore, review and analysis of data on the epidemiology of overweight and obesity among teenagers becomes mandatory.

Materials and methods. 100 respondents have undergone our survey: 65 female ($65,0 \pm 4,8\%$) and 35 male teenage participants ($35,0 \pm 4,8\%$).

Results. The middle age of respondents was $16,6 \pm 1,1$ year, however, the mentioned indicator if female participants was a little lower ($16,5 \pm 1,1$ y.) than the male ones ($16,7 \pm 1,1$ y.), but the age difference was statistically insignificant.

Figure 1 presents differentiation of patients by age and gender.

Figure 1

Patients' age and gender differentiation

Age, years	Males		Females		Total	
	Abs	M \pm m, %	Abs	M \pm m, %	Abs	M \pm m, %
14	1	$1,0 \pm 1,0$	1	$1,0 \pm 1,0$	2	$2,0 \pm 1,4$
15	3	$3,0 \pm 1,7$	26	$26,0 \pm 4,4$	29	$29,0 \pm 4,5$
16	13	$13,0 \pm 3,4$	19	$19,0 \pm 3,9$	32	$32,0 \pm 4,7$
17	13	$13,0 \pm 3,4$	14	$14,0 \pm 3,5$	27	$27,0 \pm 4,4$
18	3	$3,0 \pm 1,7$	7	$7,0 \pm 2,5$	10	$10,0 \pm 3,0$
Total:	33	$33,0 \pm 4,8$	67	$67,0 \pm 4,8$	100	$100,0 \pm 0,0$

Figure 2 presents the results of the analysis of the objective assessment of the body weight of the respondents according to the body mass index (BMI).

Objective assessment of patients' body weight by BMI

BMI, kg/m ²	Males		Females		Total	
	Abs	M±m, %	Abs	M±m, %	Abs	M±m, %
< 18,5	1	1,0±1,0	3	3,0±1,7	15	4,0±2,0
18,6-25,0	25	25,0±4,3	21	21,0±4,1	46	46,0±4,8
25,1-30,0	17	17,0±3,8	13	13,0±3,3	30	30,0±4,7
>30,0	7	7,0±2,4	13	13,0±3,3	20	20,0±4,0
Total:	50	50,0±5,0	50	50,0±5,0	100	100,0±0,0

Conclusions. Having conducted a survey among teenagers, we can see that the situation of childhood obesity in Ukraine is unfavorable. Statistics indicate that excess body weight is a precursor to the development of morbid obesity and a risk factor for non-communicable diseases. Among the most significant effects of overweight and obesity, which produce a long-term impact on the health of children and often become apparent only in adulthood, are the following: diabetes, hypertension, stroke, dyslipidemia, atherosclerosis and related diseases, nocturnal syndrome apnea, hyperuricemia, gout, reproductive dysfunction, gallstone disease, osteoarthritis, some cancers, varicose veins of the lower extremities, hemorrhoids, sudden death syndrome and psychosocial disorders. At present, early detection of overweight children and the introduction of the most optimal ways of providing medical care are relevant.

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RABIES: WHAT YOU SHOULD KNOW AND HOW TO PROTECT YOURSELF

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Rabies is an acute infectious disease of animals and humans caused by the neurotropic rabies virus. It is characterized by the development of a kind of encephalitis with rapid damage to the central nervous system. In case of delay in providing qualified medical care, death is inevitable.

Causes of rabies and ways of infection transmission

A person can become infected with rabies from an infected animal through:

- bite;
- scratches and microdamages of the skin;
- getting infected saliva on the mucous membranes.

In contact with humans, cats and dogs are most often infected, and in the wild - foxes and wolves. Homeless animals are particularly dangerous, especially