24th European Congress on Obesity
Porto, Portugal, May 17–20, 2017

ABSTRACTS
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T3P86

Experiences in affective-sexual obesity contexts

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Introduction: The adverse effects of obesity are well documented; however, a growing topic is that relationship with sexuality. Studies show that obesity is associated with a decrease in sexual desire and involvement, avoidance of sexual encounters difficulties in sexual performance, reduced number of sexual partners, and the females to report poor quality of sexual life.

Methods: With the objective to find relationships between the level of Body Mass Index (BMI) and sexual experiences, we proceeded to a quantitative descriptive methodology through the BMI calculation to a sample of 306 users of Obesity Therapy (30.7% gender male and 69.3% female) aged 18 and 65 years.

Results: The results are Grade I obesity in most (96 to 31.4%) and pre-obesity in 23.5% (72) of respondents, but obesity and pre-obesity, particularly Obesity Grade I (63-65.6% of individuals) is more prevalent in marital status. “Married” respondents with higher BMI have lower qualifications. Regarding the number of sexual partners, it appears that the higher the BMI, the lower the number of sexual partners that the sample states: 63 of respondents Obesity Grade I self reports a sexual partner, and the normal weight respondents, this number varies between 1 and 20, while the class III obesity varies from 1 to 4 partners. Individuals with normal weight and pre-obesity present frequency of sexual relations / week between 2/3 times / week, while individuals with Obesity Grade II and Grade III have this frequency 1/2 times/week.

Conclusion: BMI assumes influence of variable outlines the quality of affective and sexual experiences. It is considered urgent and relevant to invest in Sexual Education and Nutrition at the level of these populations.

Keywords: Obesity, sexual relations, BMI, sexual partner, sexuality, sexual desire, sexual experience, affective-sexual, relationship, sexual performance, Nutrition

Conflict of Interest: None disclosed.

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T3P87

Fasting plasma glucose levels in impaired fasting glucose participants and coronary artery calcification

Kang, S.1; Song, S.2
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Introduction: Prediabetes is associated with an increased risk of cardiovascular disease (CVD). While the association of impaired glucose tolerance with CVD has been shown in many studies, the relationship between impaired fasting glucose (IFG) and CVD remains unclear. The purpose of this study was to compare the coronary artery calcium scores (CACS) of participants with normal fasting glucose versus those with IFG, according to fasting plasma glucose (FPG) levels, and to assess whether differences in CACS were independent of important confounders.

Methods: This was a cross-sectional study that was conducted through the Health Promotion Center of the University Hospital (Gyeonggi-do, Republic of Korea), during the period 2010–2014. CACS were assessed by multidetector computed tomography in 1,012 asymptomatic individuals. Anthropometric parameters and metabolic profiles were also acquired. Study subjects were divided into four glucose groups, excluding participants with a history of CVD or diabetes mellitus.

Results: Out of 1,012 participants, 346(34.2%) had a CACS >0. The incidence of CAC differed according to FPG level (χ²=44.22, p < 0.001), and the mean CACS increased with FPG. After adjustment for other factors, those subjects with FPG ≥ 110 mg/dl had a significantly higher risk of coronary artery calcification than did subjects with normal fasting glucose. (110 ≤ FPG [mg/dl] < 120, OR = 2.507, p = 0.002; 120 ≤ FPG [mg/dl] <126, OR = 3.568, p = 0.001)

Conclusion: FPG values in the IFG patients are positively correlated with CAC, and IFG (especially FPG ≥ 110 mg/dl) could be an independent risk factor for CAC. These associations were not significantly altered after adjustment for other possible confounders.

Conflict of Interest: None disclosed.

Funding: No Funding.

T3P89

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1the Catholic University of Korea

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