



# The Occurrence of Metabolic Syndrome in The Elderly Population.

**Khiloloy Ruzmatova  
Kabilovna**

Central Asian Medical University Anatomy 888140228

**ABSTRACT**

Metabolic syndrome (MS) is visceral obesity, decreased sensitivity of peripheral tissues to insulin, hyperinsulinemia, dyslipidemia, all types of changes in metabolism, symptoms that lead to the development of type 2 diabetes mellitus and arterial hypertension, and the deterioration of the health of the population is a complex. Currently, the problem of metabolic syndrome is one of the main medical, social and economic trends of modern society, which leads to a decrease in life expectancy and deterioration of its quality. The presented article examines modern views on the problem.

**Keywords:**

Metabolic syndrome, insulin, cardiology, decreased sensitivity to hyperinsulinemia, disorder of carbohydrate, lipid metabolism, purine metabolism

In the main directions of studying and diagnosing the components of the metabolic syndrome, articles on the etiopathogenesis and distribution of the syndrome are analyzed and modern criteria for its treatment are shown. Attention is paid to the modern factors affecting the development of pathology, as a rule, these are genetic factors, eating a large amount of high-calorie foods and low physical activity. Genetic risk factors are considered to be in the constitutional properties of muscle fiber composition, fat distribution, activity of the main enzymes of carbohydrate and fat metabolism, and sensitivity to insulin. Eating disorders that often accompany metabolic syndrome are analyzed, including hyperphagic response to stress, compulsive hyperphagia, craving for carbohydrates, and premenstrual hyperphagia. The prevalence of metabolic syndrome is twice that of diabetes and is expected to increase by 50% over the next 25 years." This problem affects not only people over the age of 18. Over the past 10 years, the number of children with symptoms of metabolic

syndrome has increased from 4.2 to 6.4%. Excess body weight occurs in 12-14% of the juvenile population of economically developed countries. MS is associated with subclinical damage to vital organs. This is manifested in a decrease in the filtration function of the kidneys, microalbuminuria, increased stiffness of the arteries, left ventricular myocardial hypertrophy, diastolic dysfunction, enlargement of the left ventricular cavity, thickening of the carotid artery wall, and many other diseases. These disorders manifest themselves regardless of the presence of AG. According to the data of researchers of the Russian state, arterial hypertension (AG) in 73.3% of patients with android type obesity, coronary artery disease - 57.3%, type 2 diabetes - 64%, hypercholesterolemia - in 60% of those examined determined. In the group of patients with IYK, obesity was found in 62%, hypertension in 58%, hypercholesterolemia in 54%, and type 2 diabetes in 32% of patients. In patients with type 2 diabetes, obesity is noted in 80% of patients, hypertension in 68%,

hypercholesterolemia in 62%, and coronary artery disease in 65%. characterized by a decrease in tissue sensitivity to insulin and hyperinsulinemia, a violation of carbohydrate and lipid metabolism, a change in purine metabolism, and the development of arterial hypertension. Many people think of metabolic syndrome as a common diagnosis, but it's actually a very serious disease! Metabolic syndrome (MS) has been talked about a lot lately. Why is this cash register dangerous? Because it can lead to the development of many serious diseases - atherosclerosis, heart attack, stroke, kidney failure, cancer, and the most common - the risk of diabetes increases many times. Fortunately, these problems can be prevented if you take care of them in time.

Metabolic syndrome is characterized by a combination of 4 symptoms:

Excess weight;

High level of cholesterol in the blood (total cholesterol is higher than 5.2 mmol / l);

Hypertension (tonometer often shows 140/90 mm Hg or more);

Insulin resistance is a decrease in the sensitivity of cells to the hormone insulin, which leads to an increase in blood glucose levels and the development of type 2 diabetes.

If you have at least 2 of these symptoms (for example, being overweight and high blood pressure), get your blood sugar and cholesterol checked. Are they tall? Don't delay a visit to an endocrinologist and cardiologist! But even if the biochemical indicators are normal, check them every six months. It helps to notice that something is wrong in time and start treatment in time. Metabolic disorders are formed long before the obvious symptoms of diabetes and atherosclerotic vascular damage. The pathological process often begins at a young age, especially with a sedentary lifestyle, a very high-calorie diet, and excess weight. And this syndrome is diagnosed not only in women over forty, but also in women aged 20-35. The reason is pregnancy and childbirth, which is a serious test of metabolism. Have you noticed that women often gain weight after giving birth? This is not a natural process, but a sign that they are developing a disease called peripheral neuroendocrine syndrome (PNES). In fact, this

is a special case of metabolic syndrome. Therefore, if you gain more than 12 kg during pregnancy and this condition increases again after childbirth, consult a gynecologist-endocrinologist. The doctor helps regulate metabolic and endocrine processes. At the same time, men who are actively gaining weight should also undergo medical supervision. Obesity does not always lead to metabolic syndrome! In order to assess your own risk of developing obesity, it is important to know not only your weight and body mass index, but also exactly where the fat is stored in the body. First of all, the risk group includes those fat accumulations that are mainly accumulated in the abdominal cavity and are located around the internal organs. According to scientists' calculations, with apple-type obesity, the risk of type 2 diabetes increases 6 times, and the probability of developing hypertension increases 4 times. But that's not all! Such people have a significantly increased risk of developing bronchial asthma. The risk of spine and joint diseases also doubles due to metabolic causes. Measure your waist circumference correctly to assess your risk of developing metabolic syndrome. Stand upright, do not pull in the abdomen, and pull the tape measure along the convex point of the abdomen at the level of the navel. Is it more than 80 cm (the norm for men is 94 cm)? You are in danger! If the pressure rises at the same time, if there are patients with diabetes and hypertension in the family, get a medical examination. With this lifestyle, it's no surprise that many people develop metabolic problems that lead to insulin resistance and metabolic syndrome. Is there any way to prevent this? Of course! Practice at least 2-3 hours a week. By doing this, excess fat will disappear and your body will feel young and full of energy: after all, it recognizes physical inactivity as a long-term illness or premature aging, and adjusts the metabolism accordingly. Eat more plant-based foods eat it. It fills a large stomach, gives a feeling of satiety, but at the same time it is low in calories.

Eat often, but little! If you do, small portions will have an effect: your metabolism will shift from fat-sparing mode to fat-burning mode. Many, on the contrary, try to eat less than three times a

day, for example, to reduce the energy value of the diet by a third. But the effect can be reversed. Nutritionists have found that if you eat two meals a day without increasing your daily calorie intake, you will gain 2.5 kg of extra weight per year. Fearing too long breaks in food intake, the body begins to economize - this slows down the metabolism and increases the absorption of nutrients from 60-70 percent to 100 percent!

### Conclusion:

In this way, it actively consumes calories, divide the daily diet into small portions of 5-6 times. Consult your doctor about drugs that eliminate insulin resistance and reduce the risk of developing diabetes. If necessary, the doctor will prescribe them. According to the initial calculations, everyone controls their own health, so everything will respond well. Periodic control is important has, it helps to prevent the disease (glycemia, total cholesterol, HDL, triglycerides). to do).

### Reference:

1. Беляков Н.А. Метаболический синдром у женщин // Патофизиология и клиника / под. ред. Г.Б. Сеидова. – СПб: Издательский дом СПбМАПО, 2005. – 440 с.
2. Бокарев И.Н. Метаболический синдром // Журнал клиническая медицина. – 2014. –Т.9, №8 – С.71
3. Беленкова Ю.Н., Оганова Р.Г. Кардиология: национальное руководство. – М.: ГЭОТАР –Медиа, 2008. – 1232 с.
4. Александров О.В. Метаболический синдром // Российский медицинский журнал. –2006. – Т.5, №6. – С. 50-55.
5. Балаболкин М.И., Клебанова Е.М., Креминская В.М. Лечение сахарного диабета и его осложнений. – М.: Медицина, 2005. – 511 с.