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Dietary fat consumption frequency and body mass index of middle-age adults in Mumbai city, India during COVID-19 pandemic

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Obesity and COVID-19 are global pandemics listed by World Health Organization, which need urgent attention. Obesity involves low grade chronic inflammation, which is characterised by sustained pro-inflammatory innate immune responses mediated through activation of the NLR family pyrin domain-containing 3 (NLRP3) inflammasome/IL-1 axis, and is a strong risk factor for Diabetes and Heart diseases⁽¹⁾. Dietary fats provide energy, satiety, source of fat-soluble vitamins and essential fatty acids – Omega 3 (n-3) and Omega 6 (n-6) fatty acids, but must be consumed in right amounts and ratios. Essential fatty acids (EFA) deficiency and n-6/n-3 imbalance is linked with chronic illnesses such as, heart attacks, cancer, insulin resistance, stroke, obesity, and diabetes⁽²⁾. Excess dietary fat intake and imbalance of fatty acids, contribute to obesity, inflammation, comorbidities and faster disease progression. A cross-sectional survey aimed to understand the fatty food frequency of overweight and obese middle age adults from Mumbai, India during the COVID-19 outbreak. Using purposive sampling, 100 adults (30-60 years), a questionnaire (demographics, anthropometrics and fat food frequency questionnaire) was administered. Data was analysed using SPSS 26.0. As per BMI standards, 60.2% participants were overweight, 12.6% were obese and 27.1% had normal BMI. For visible fat consumption, sunflower oil (47.6%), ghee (38.8%), rice bran oil (34%) groundnut oil (11.7%) and invisible fats – milk (100%). Other dairy products, nuts and oilseeds were consumed weekly, twice a week, majority (92.3%) consumed packaged high fat foods as compared to eating deep-fried items (58.9%). We concluded that excess dietary fat intake is high risk factor for obesity and related comorbidities diabetes, and hypertension. High BMI increases the risk for noncommunicable diseases (NCDs) such as obesity, cardiovascular disease (CVD), insulin resistance and type 2 diabetes. People with comorbidities are high risk groups for COVID-19 infection susceptibility. Hence, managing weight could be a cost-effective preventive strategy to help in delaying the onset and progression of NCDs, thereby lowering the susceptibility to COVID-19. Our findings have important implications in working towards adopting healthy fats and reducing mortality and reducing the global burden of pandemic. High dietary fat intake is a modifiable risk factor for overweight and obesity. Comorbidities increased risk for COVID-19 infection, disease severity and mortality. Hence, there is a need to understand the dietary fat consumption patterns in obesity and COVID-19. Dietary carbohydrate, sugar and fat quality in relation to obesity and pandemic such as, COVID-19 could be explored in future studies.

Keywords: dietary patterns; food frequency questionnaire; non-communicable diseases; obesity

Ethics Declaration

Yes

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References

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