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COURSE: INTRODUCTION TO HUMAN NUTRITION AND DIETETICS.

NTD 212  
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200 level  
NTD 212 assignment  
Solution  
The prevalence of obesity in Nigeria  
Obesity is a medical condition in which excess body fat has accumulated to an extent that it may have a negative effect on health. Obesity is defined as having a body mass index (BMI) of 30 or more. BMI is a calculation that takes a person’s weight and height into account. However, BMI does have some limitations.  
  
Method used in carrying out research: A systematic review of papers published on the prevalence of obesity among adults in the country was carried out in Nigeria. In addition, personal inquiries were made. The search limits were articles published from January 2001 to September 2012. Only studies that used the body mass index to assess for overweight and obesity were included.  
Results: Four studies met the inclusion criteria out of the 75 studies reviewed. In Nigeria, the prevalence of overweight individuals ranged from 20.3%–35.1%, while the prevalence of obesity ranged from 8.1%–22.2%.  
Conclusion: The prevalence of overweight and obese individuals in Nigeria is of epidemic proportions. There is a need to pay much attention to these health disorders in order to prevent them or find a solution for it.  
The prevalence of cancer in Nigeria  
Cancer is the uncontrolled growth of abnormal cells in the body. Cancer develops when the body’s normal control mechanism stops working. Old cells do not die and instead grow out of control, forming new, abnormal cells. These extra cells may form a mass of tissue, called a tumour. Some cancers, such as leukaemia, do not form tumours.  
  
Introduction: Cancer has become a major source of morbidity and mortality globally. Despite the threat that cancer poses to public health in Africa, few countries in this region have data on cancer incidence. In this research, the estimates of cancer incidence in Nigeria based on data from 2 population-based cancer registries (PBCR) that are part of the Nigerian national cancer registry program.  
Materials and methods: data was analysed from 2 population based cancer registries in Nigeria, the Ibadan Population Based Cancer Registry (IBCR) and the Abuja Population Based Cancer Registry (ABCR) covering a 2 year period 2009–2010. Data are reported by registry, gender and in age groups. The data was presented on the age specific incidence rates of all invasive cancers and report age standardized rates of the most common cancers stratified by gender in both registries.  
Results: The age standardized incidence rate for all invasive cancers from the IBCR was 66.4 per 100 000 men and 130.6 per 100 000 women. In ABCR it was 58.3 per 100 000 for men and 138.6 per 100 000 for women.  
A total of 3393 cancer cases were reported by the IBCR. Of these cases, 34% (1155) were seen among males and 66% (2238) in females. In Abuja over the same period, 1128 invasive cancers were reported. 33.6% (389) of these cases were in males and 66.4% (768) in females. Mean age of diagnosis of all cancers in men for Ibadan and Abuja were 51.1 and 49.9 years respectively. For women, mean age of diagnosis of all cancers in Ibadan and Abuja were 49.1 and 45.4 respectively. Breast and cervical cancer were the commonest cancers among women and prostate cancer the most common among men. Breast cancer age standardized incidence rate (ASR) at the IBCR was 52.0 per 100 000 in IBCR and 64.6 per 100 000 in ABCR. Cervical cancer ASR at the IBCR was 36.0 per 100 000 and 30.3 per 100 000 at the ABCR. The observed differences in incidence rates of breast, cervical and prostate cancer between Ibadan and Abuja, were not statistically significant.  
Conclusion: Cancer incidence data from this research results taken in Nigeria suggests the substantial increase in incidence of cancer especially breast cancer in recent times. This paper highlights the need for high quality regional cancer registries in Nigeria and other African countries.  
  
The prevalence of diabetes in Nigeria  
Diabetes is a disease that occurs when your blood glucose, also called blood sugar, is too high. Blood glucose is your main source of energy and comes from the food you eat. Insulin, a hormone made by the pancreas, helps glucose from food get into your cells to be used for energy. Sometimes your body doesn’t make enough or any insulin or doesn’t use insulin well. Glucose then stays in your blood and doesn’t reach your cells.  
Over time, having too much glucose in your blood can cause health problems. Although diabetes has no cure, you can take steps to manage your diabetes and stay healthy.  
Introduction  
There has been no nationwide diabetes survey in Nigeria since 1992, when a diabetes mellitus (DM) prevalence of 2.2% was reported. Therefore, the prevalence of and risk factors for Diabetes in Nigeria was by performing a systematic review and meta-analysis.  
Methods  
Medline, EMBASE, PubMed, African Journals Online, Institute of Scientific Information, and Google Scholar from the year 1990 to 2017 were searched for information relating to diabetes in Nigeria. Only studies that utilized the random plasma glucose test, the fasting plasma glucose test, the oral glucose tolerance test (OGTT) to diagnose DM were included. A total of 23 studies (n = 14,650 person) were evaluated. A random effects model was used to estimate the pooled prevalence of DM. The estimated results were overall pooled prevalence of DM and subgroup-specific DM prevalence’s while accounting for inter-study and intra-study /heterogeneity.  
Results  
the overall pooled prevalence of DM was 5.77% (95% CI 4.3–7.1). The pooled prevalence’s of DM in the six geopolitical zones of Nigeria were 3.0% (95% CI 1.7–4.3) in the north-west, 5.9% (95% CI 2.4–9.4) in the north-east, 3.8% (95% CI 2.9–4.7) in the north-central zone, 5.5% (95% CI 4.0–7.1) in the south-west, 4.6% (95% CI 3.4–5.9) in the south-east, and 9.8% (95% CI 7.2–12.4) in the south-south zone. The Risk factors for the pooled prevalence of DM were a family history of DM (4.6%; 95% CI 3.5–5.6); urban dwelling (6.0%; 95% CI 4.3–7.8); unhealthy dietary habits (8.0%; 95% CI 5.4–10.5); cigarette smoking (4.4%; 95% CI 1.3–10.2); older age (6.6%; 95% CI 4.5–8.7); physical inactivity (4.8%; 95% CI 3.2–6.4); and obesity (5.3%; 95% CI 3.8–6.9).  
Conclusion  
There has been an increase in the prevalence of Diabetes in Nigeria. All regions of the country have been affected, with the highest prevalence seen in the south-south geopolitical zone. Urban dwelling, physical inactivity, advanced age, and unhealthy diet are important risk factors for DM among Nigerians. A national diabetes care and prevention policy is highly recommended.  
  
The factors responsible for the prevalence of these diseases in Nigeria are:  
These diseases share four common behavioural risk factors which are  
-tobacco use  
-excess alcohol consumption  
-unhealthy diet  
-physical inactivity  
and four metabolic risk factors which are  
-elevated blood pressure-  
-overweight and obesity  
-hyperglycaemia  
-hyperlipidaemia  
The World Health Organization (WHO) has therefore recommended the surveillance of non-communicable diseases and their risk factors to inform the implementation of appropriate public health strategies.  
  
Dietary management of these diseases  
  
Diabetes  
eating a healthy balanced diet, taking regular physical activity, and maintaining a healthy body weight can help to prevent or delay the onset of type 2 diabetes. People with diabetes should try to maintain a healthy weight and eat a diet that is low in fat (particularly saturates) and salt but contains plenty of fruit and vegetables (at least five portions a day) and starchy carbohydrate foods such as bread, rice and pasta (particularly whole-grain versions).

Cancer

There is no diet that can cure cancer but it is important to focus on healthy foods even before treatment. It can help one feel better and make one’s body stay strong. It is important to eat lots of protein such Lean meat, chicken, and fish, Eggs, Beans, nuts, and seeds, Cheese, milk, and yogurt and healthy calories. That will keep the body strong and help repair damage from any treatment.

It is also important to take fruits and vegetables which include dark green and deep yellow vegetables, and citrus fruits like oranges and grapefruits. Colourful foods like these have many healthy nutrients. Drink plenty of liquids all day and fresh-squeezed juice, too. It gives one some extra vitamins along with the liquid the body needs to stay hydrated.

Obesity

The optimal diet for prevention of weight gain, obesity, metabolic syndrome, and type 2 diabetes is fat-reduced, fibre-rich, high in low-energy density carbohydrates (fruit, vegetables, and whole grain products), and intake of energy-containing drinks is restricted. Lifestyle changes, medications, or surgery can also help to manage obesity. The main treatment for obesity consists of weight loss via dieting and physical exercise Diet programs can produce weight loss over the short term and long-term, although combining with exercise and counselling provide greater results.

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