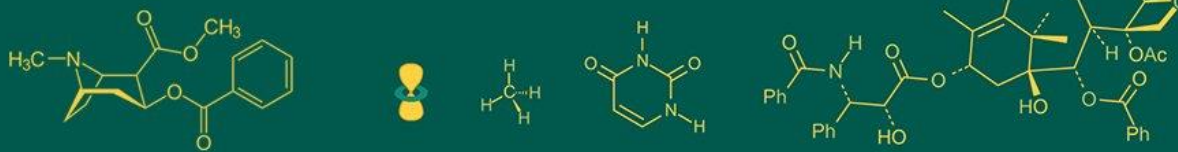


International Journal of Advanced Biochemistry Research



ISSN Print: 2617-4693
 ISSN Online: 2617-4707
 IJABR 2019; 3(2): 14-17
 www.biochemjournal.com
 Received: 02-08-2019
 Accepted: 20-08-2019

Dr. NRV Krishnaswamy
 Assistant Professor,
 Department of Biochemistry,
 Katuri Medical College &
 Hospital, Guntur, Andhra
 Pradesh, India

Dr. DV Satyamurthy G
 Assistant Professor,
 Department of Biochemistry,
 Katuri Medical College &
 Hospital, Guntur, Andhra
 Pradesh, India

Dr. T Sunitha
 Professor and HOD,
 Department of Biochemistry,
 Katuri Medical College &
 Hospital, Guntur, Andhra
 Pradesh, India

Corresponding Author:
Dr. DV Satyamurthy G
 Assistant Professor,
 Department of Biochemistry,
 Katuri Medical College &
 Hospital, Guntur, Andhra
 Pradesh, India

A study on high prevalence of metabolic syndrome among competitive exam appearing students from Andhra Pradesh

Dr. NRV Krishnaswamy, Dr. DV Satyamurthy G and Dr. T Sunitha

Abstract

Background: Metabolic syndrome is a pool of risk factors which are indicators of future development of cardiovascular disease and type 2 diabetes mellitus in adults. Stress is strongly associated with metabolic syndrome. Adolescents are more prone to academic stress and leads to development of metabolic syndrome also.

Aim & Objectives: A comparative study to determine prevalence of metabolic syndrome among the adolescent students appearing for competitive exams.

Methods: A comparative descriptive study was conducted among the intermediate students of 16-19 years age group. Students were selected randomly from students residing at hostel in private junior colleges, Guntur. A sample of hundred students were selected, fifty from exam appearing students and another fifty from non-exam appearing students in the present academic year. Comparison done between both the students groups. Prevalence of metabolic syndrome was measured in both groups based on International Diabetes Federation Criteria. Relevant statistical tests were used to test the statistical significance.

Results: In the current study the results reveal that exam appearing students had higher values of waist circumference, blood pressure, fasting plasma glucose and triglycerides and lower values of HDL-Cholesterol. The prevalence of metabolic Syndrome was high among exam appearing students (34%) when compared to non-appearing students (6%). ($X^2=12.25$, $P=0.0005$) The risk of metabolic syndrome in competitive exam appearing students was eight times higher than in non-exam appearing students ($OR=8.07$).

Conclusion: Finally we conclude that, the prevalence of metabolic syndrome was significantly higher among the students appearing for competitive exams when compared to the students not appearing for competitive exams.

Keywords: Metabolic syndrome, HDL-cholesterol, fasting blood glucose, prevalence

Introduction

Metabolic syndrome (MS) is an inter-related cluster of metabolic abnormalities involving glucose and lipid dysregulation, abdominal obesity and elevated blood pressure [1]. It is a premorbid condition that develops in the setting of insulin resistance and factors such as poor diet, physical inactivity, obesity, and genetics play a contributing role. Metabolic syndrome increases the risk for development of type 2 diabetes mellitus, coronary artery disease (CAD), and other cardiovascular diseases and has been shown to independently increase all-cause mortality [2, 3]. In addition to serving as a predictive tool for the development of cardiovascular disease and type 2 diabetes. MS identification allows for the development and evaluation of targeted lifestyle interventions to combat the rising burden of non-communicable diseases.

Different criteria were proposed to define and diagnose metabolic syndrome. Among all of them, International Diabetes Federation criteria is the most accepted one. It defined metabolic syndrome as the presence of central obesity along with any two of the following five conditions:

1. Raised triglycerides: 150 mg/dL, or on specific treatment for this lipid abnormality
2. Reduced HDL cholesterol: < 40 mg/dL in males, < 50 mg/dL in females, or specific treatment for this lipid abnormality
3. Raised blood pressure \geq (BP): systolic BP \geq 130 or diastolic BP 85 mm Hg, or on treatment of previously diagnosed hypertension
4. Raised fasting plasma glucose (FPG): >100 mg/dL, or previously diagnosed T2DM

5. If BMI is $>30 \text{ kg/m}^2$, central obesity can be assumed and waist circumference does not need to be measured.

Nowadays the society is transforming into a competitive world. Education is not an exception to this transformation. In spite of getting knowledge, securing marks and holding the top ranks became the goal of education. Both parents and teachers were expecting more and more from the students. These expectations putting the student under constant stress. Students are also suffering with poor financial and family support. In spite of these, adolescent age itself is a risk factor of stress because of different physiological and psychological changes in the body and mind. Thus the students in the adolescent age group are more vulnerable to the stress (6) and metabolic syndrome also.

Every year in Andhra Pradesh, about 3-4 lakhs of adolescent age group students are appearing for competitive exams like common entrance test for engineering and medicine (EAMCET). Seventy to eighty percent are taking coaching at various institutes. Based on this background the present study was conducted with an aim to estimate the prevalence of metabolic syndrome in the students of age group between 16 to 19 years in Guntur city.

Materials and Methods

Study design

The current study was a comparative descriptive study conducted among the 16-19 years age group intermediate students residing at hostel in coaching institutes. Samples of hundred students were selected randomly by simple random technique from the intermediate studying students of Private junior colleges. Among the hundred selected students, fifty students from competitive exam appearing students and another fifty from non-exam appearing students in the present academic year. Twenty five male and twenty five female students were included in both groups. Students who gave informed consent were included in the study. Students suffering from acute illness were excluded from study.

Duration of the study

A Prior permission was taken from college administration to conduct the study and data was collected during the period December 2013 to January 2014.

Anthropometric measurements

International Diabetes Federation Criteria was used to estimate the prevalence of metabolic syndrome. Waist Circumference of students was measured by using a non-stretchable tape. Waist circumference 90 cm was considered as central obesity in males and 80 cm in females. Blood Pressure both Systolic & Diastolic blood pressures were measured using electronic BP apparatus.

Collection of blood samples and biochemical parameter analysis

Blood samples were collected by venepuncture in early morning, i.e., in 10-12 hours of fasting state from both groups to estimate Plasma Glucose, Total Triglycerides and HDL Cholesterol levels. Two samples were collected separately, one for glucose estimation and another one for triglycerides and HDL-cholesterol estimation.

Plasma glucose values in the range between 70-110 mg/dl were considered as normal values. Triglycerides values in the range between 50-150 mg/dl and HDL-C values in the range between 40-60 mg/dl were considered as normal values.

Statistical analysis

Comparison done between the students appearing for EAMCET exam at the end of the present academic year and students not appearing for EAMCET exam at the end of present academic year for the prevalence of metabolic syndrome. Gender wise comparison also done for assessing the influence of gender on metabolic syndrome. Standard error of difference between two means and chi-square tests were used for assessing the strength of statistical significance of results.

Results

The study population had average waist circumference of $84.77 \pm 10.64 \text{ cm}$, $115.26 \pm 9.64 \text{ mm of Hg}$ & $74.62 \pm 5.34 \text{ mm of Hg}$ systolic and diastolic blood pressures. The average fasting plasma glucose levels in the study population was $75.22 \pm 4.85 \text{ mg/dl}$. Mean triglyceride and HDL-Cholesterol levels in the study population were $111.31 \pm 30.00 \text{ mg/dl}$ and $44.6 \pm 8.43 \text{ mg/dl}$ respectively.

The mean waist circumference in exam appearing students was $81.76 \text{ cm} \pm 10.16 \text{ cm}$, where as in non-exam appearing students the average waist circumference was $87.78 \text{ cm} \pm 10.23 \text{ cm}$. The mean systolic and diastolic blood pressures in exam appearing students was $119.56 \text{ mm of Hg} \pm 8.87 \text{ mm of Hg}$, $76.68 \text{ mm of Hg} \pm 5.12 \text{ mm of Hg}$, where as in non-exam appearing students average blood pressures were $110.96 \text{ mm of Hg} \pm 8.65 \text{ mm of Hg}$, $72.56 \text{ mm of Hg} \pm 4.76 \text{ mm of Hg}$.

Biochemical parameters

The mean fasting plasma glucose levels in exam appearing students was $76.10 \text{ mg/dl} \pm 4.72 \text{ mg/dl}$ and in non-exam appearing students was $74.34 \text{ mg/dl} \pm 4.81 \text{ mg/dl}$. The mean total triglycerides in exam appearing students was $123.56 \text{ mg/dl} \pm 32.26 \text{ mg/dl}$, where as in non-exam appearing students total triglycerides was $99.06 \text{ mg/dl} \pm 21.39 \text{ mg/dl}$. The mean HDL-cholesterol levels in exam appearing students was $41.54 \text{ mg/dl} \pm 8.74 \text{ mg/dl}$, where as in non-exam appearing students mean HDL-cholesterol was $47.66 \text{ mg/dl} \pm 6.84 \text{ mg/dl}$.

Standard error of difference between two means of exam appearing students and non-exam appearing students were calculated and found that, the difference was statistically significant between the mean values of all the risk factors viz., waist circumference, systolic and diastolic blood pressures, total triglycerides and HDL-Cholesterol levels except in fasting plasma glucose levels.

Table no.2 shows that, female students had more waist circumference than male students and the difference was statistically significant. The difference between male students and female students in other metabolic syndrome risk factors was not statistically significant. The mean HDL-cholesterol levels in female students was 45.7 mg/dl . This value was less than 50 mg/dl which is a cut-off point for metabolic syndrome in female students according to International diabetes federation criteria.

The current study, explained that among the six risk factors only four risk factors present in the both groups. Fasting

plasma glucose levels and Diastolic blood pressure were normal in both groups. Prevalence of low HDL-cholesterol levels was high followed by abdominal obesity in both groups. Competitive exam appearing students had more risk of metabolic syndrome when compared to non-exam appearing students.

The present study shown, prevalence of low HDL-cholesterol values and abdominal obesity was high among males and females. Females had more number of risk factors of metabolic syndrome when compared to males.

According to International Diabetes Federation Criteria, the total prevalence of metabolic syndrome in exam appearing students was 34% and whereas in non-exam appearing students the prevalence was only 6%. It indicated high prevalence of metabolic syndrome in exam appearing students when compared to control groups.

The difference observed was statistically significant ($X^2=12.25$, $df=1$ P -value=0.0005). More number of males had high metabolic syndrome, when compared to female students. But the difference observed was not statistically significant ($X^2=1$, $df=1$ P value=0.3173). The risk of occurrence of metabolic syndrome is eight times higher in competitive exam going students when compared to non-exam appearing students (Odds Ratio=8.07). The risk of metabolic syndrome was 1.6 times more in males when compared to females. (OR=1.65).

Discussion

In our present study exam appearing students have higher values of all the variables of the metabolic syndrome than their control groups except HDL-Cholesterol values, when compared to control groups. The difference between both groups exam appearing students and non-exam appearing students for all these variables were statistically significant and proved the relation of metabolic syndrome and chronic stress, except in the fasting plasma glucose values. The difference between both groups for fasting plasma glucose levels was not significant.

Normal Fasting plasma glucose levels were observed in the current study. This may be due to the reason, glucose intolerance may develop later than other remaining

syndrome abnormalities. It can be explained by three-stage model for the development of T2DM proposed by Beck-Nielsen and Group [7]. Stage 1 includes fasting hyperinsulinemia with normal or slightly increased blood glucose, Stage 2 is characterized by prediabetic glucose intolerance with insulin resistance and Stage 3 is development of T2DM. But, many of the macro vascular changes associated with T2DM and related to CVD begin in stages 1 and 2, well before diagnosis. Hence the appearance of normal glucose levels is not an indicator of no risk for CVDs. The individual may fall in the first stage of Type 2 Diabetes mellitus.

The total prevalence of metabolic syndrome in test groups is 34% and in control groups is only 6%, indicating high prevalence in students preparing and appearing for competitive exams than in non-exam appearing group of students. It showed the impact of academic stress on students. It indicated that, mainly coaching and preparation for competitive exams creating a chronic stress on the adolescent students and greatly enhancing the risk of metabolic syndrome even at a younger age.

Coming to the gender, females had more number of risk factors of metabolic syndrome when compared to males. But the concurrence of at least three risk factors in a student was more in males.

Narinder Singh *et al.* [8], in his study among school going adolescents aged 10-18 years reported that, metabolic syndrome was most prevalent in 16-18 years age group (4.79%) and higher in males (3.84%) than in females (1.6%). They also reported that 33% of obese adolescents are at risk to develop metabolic syndrome.

Tarani Chandola *et al.*, in their study [9, 10] reported a dose-response relation between exposure to work stress and risk of the metabolic syndrome. They also stated that, employees with chronic work stress were more than two times at risk to have the syndrome, than the employees without work stress. From these studies it is suggested that chronic stress could increase the prevalence of metabolic syndrome. The same was observed in the current study.

Tables & Figures

Table 1: Mean values of metabolic syndrome risk factors in exam appearing students and non-exam appearing students

Variable	Total students n=100	Exam appearing students n=50	Non-exam appearing students n=50	Z value (P value)
Waist circumference in cm	84.77±10.64	81.76 ± 10.16	87.78 ± 10.23	2.96 (<0.05)
Systolic blood pressure in mm of HG	115.26±9.64	119.56 ± 8.87	110.96 ± 8.65	4.94 (<0.05)
Diastolic blood pressure in mm of HG	74.62±5.34	76.68 ± 5.12	72.56 ± 4.76	4.20 (<0.05)
Fasting plasma glucose in mg/dl	75.22±4.85	76.10 ± 4.72	74.34 ± 4.81	1.83 (>0.05)
Total triglycerides in mg/dl	111.31±30.00	123.56 ± 32.26	99.06 ± 21.39	4.47 (<0.05)
HDL-C in mg/dl	44.6±8.43	41.54 ± 8.74	47.66 ± 6.84	3.92 (<0.05)

Table 2: Mean values of metabolic syndrome risk factors in male and female students

Variable	Total students n=100	Male students n=50	Female students n=50	Z value (P value)
Waist circumference in cm	84.77±10.64	80.86±10.40	88.68±9.33	3.95(<0.05)
Systolic blood pressure in mm of HG	115.26±9.64	117.08±9.46	113.44±9.73	1.89(>0.05)
Diastolic blood pressure in mm of HG	74.62±5.34	74.44±5.28	74.8±5.43	0.33(>0.05)
Fasting plasma glucose in mg/dl	75.22±4.85	76.08±5.35	74.36±4.11	1.80(>0.05)
Total triglycerides in mg/dl	111.31±30.00	113.18±34.87	109.44±24.12	0.62(>0.05)
HDL-C in mg/dl	44.6±8.43	43.5±8.23	45.7±8.49	1.31(>0.05)

Table 3: Prevalence of Metabolic syndrome

Risk factor	Metabolic syndrome	Metabolic Syndrome present (%)	Metabolic syndrome absent (%)	Total n=100 (%)	P value
Academic stress	Present n=50	17 (34%)	33 (66%)	50 (100%)	X ² = 12.25, P = 0.0005, OR = 8.07
	Absent n=50	03 (6%)	47 (94%)	50 (100%)	
	Total	20 (20%)	80 (80%)	100 (100%)	
Gender	Male n=50	12 (24%)	38 (76%)	50 (100%)	X ² = 1 P = 0.3173 OR = 1.65
	Female n=50	8 (16%)	42 (84%)	80 (100%)	
	Total	20 (20%)	80 (80%)	100 (100%)	

Conclusion

The prevalence of metabolic syndrome was significantly higher among the competitive exams appearing students than among the non-exam appearing students. It was indicating a risk of future development of cardio vascular diseases and Type 2 Diabetes mellitus in adolescent students. Academic stress due to competitive exam was strongly associated with metabolic syndrome. Stress free environment in the academic institutions and family support were needed to reduce the stress upon students and in turn to reduce the prevalence of metabolic syndrome.

Acknowledgements

We are thankful to the students who participated in the study and to the management of Private Junior colleges, and Katuri Medical College, Guntur for giving permission to conduct the study.

References

- Huang PL. A comprehensive definition for metabolic syndrome. *Dis Model Mech.* 2009; 2(5-6):231-7.
- Galassi A, Reynolds K, He J. Metabolic Syndrome and Risk of Cardiovascular Disease: A Meta-Analysis. *The American Journal of Medicine.* 2006; 119(10):812-9.
- Wilson PWF. Metabolic Syndrome as a Precursor of Cardiovascular Disease and Type 2 Diabetes Mellitus. *Circulation.* 2005; 112(20):3066-72. <https://doi.org/10.1161/CIRCULATIONAHA.105.539528> PMID: 16275870
- Grundey SM. Definition of Metabolic Syndrome: Report of the National Heart, Lung, and Blood Institute/American Heart Association Conference on Scientific Issues Related to Definition. *Circulation.* 2004; 109(3):433-8.
- Raikkonen K, Hautanen A, Keltikangas-Jarvinen L. Association of stress and depression with regional fat distribution in healthy middle-aged men. *J Behav Med.* 1994; 17:605-16.
- International Diabetes Federation: The IDF consensus worldwide definition of the metabolic syndrome. From http://www.idf.org/webdata/docs/Metabolic_syndrome_definition.pdf.
- Michael P Dunne1, Jiandong Sun1, Nguyen Do Nguyen2, Thai Thanh Truc1, 2, Kim Xuan Loan1, 2, Jason Dixon. The Influence of educational pressure on the mental health of adolescents in East Asia: Methods and tools for research journal of science, Hue University, N0 61, 2010.
- Beck-Nielsen H, Groop LC. Metabolic and genetic characterization of prediabetic states: sequence of events leading to non - insulin-dependent diabetes mellitus. *J Clin Invest.* 1994; 94:1714-1721.
- Narinder Singh, Ravi Kumar Parihar, Ghanshyam Saini, Sandeep Kumar Mohan1, Neeraj Sharma2, Mohd

Razaq. Prevalence of metabolic syndrome in adolescents aged 10-18 years in Jammu, J and K Departments of Pediatrics and 2Medicine, G.M.C, 1Department of Surgery ASCOMS, Jammu, Jammu and Kashmir, India, 1994.

- Tarani Chandola, Eric Brunner, Michael Marmot Chronic stress at work and the metabolic syndrome: prospective study *Bmj Journals.*