

Chinese people may be more susceptible to obesity-related health risks than other racial, ethnic groups

February 11 2021

Chinese people are more likely to face high blood pressure and other health risks as a result of higher body mass index (BMI) and waist circumference than people from other racial and ethnic groups, according to a new study published in the Endocrine Society's *Journal of Clinical Endocrinology & Metabolism*.

Over [2.1 billion adults](#) are estimated to have obesity, which is a chronic disease of having too much body fat. Health care providers can diagnose obesity using a number called the body mass index. People with obesity are more likely to develop serious health complications like diabetes, high [blood pressure](#) and heart disease, and these risks differ among various races and ethnicities.

"Our study demonstrated that Chinese adults were more susceptible to the effects of overall obesity and abdominal fat accumulation on blood pressure and triglycerides than those in other racial and ethnic populations," said study author Weiqing Wang, M.D., Ph.D., of the Shanghai Jiaotong University School of Medicine in Shanghai, China. "These racial and ethnic differences in susceptibility of obesity-related health problems should be noticed while screening for high-risk individuals using BMI and [waist circumference](#)."

The researchers analyzed a total of 126,284 participants from a major national Chinese study and the National Health and Nutrition

Examination Survey (NHANES) in the U.S. and compared cardiometabolic risk factors among different races and ethnicities. They found Chinese adults are more affected by obesity-related risks like [high blood pressure](#) than Black, white and Mexican American people.

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The manuscript received funding from the Ministry of Science and Technology of the People's Republic of China, the National Natural Science Foundation of China, the Shanghai Municipal Government, the Shanghai Shen Kang Hospital Development Center and the Shanghai Jiao Tong University School of Medicine.

More information: "Chinese Adults Are More Susceptible to Effects of Overall Obesity and Fat Distribution on Cardiometabolic Risk Factors," *Journal of Clinical Endocrinology & Metabolism* (2021). [academic.oup.com/jcem/advance- ... inem/dgab049/6129061](https://academic.oup.com/jcem/advance-article/doi/10.1210/clinem/dgab049/6129061)

Provided by The Endocrine Society

Citation: Chinese people may be more susceptible to obesity-related health risks than other racial, ethnic groups (2021, February 11) retrieved 25 December 2022 from <https://medicalxpress.com/news/2021-02-chinese-people-susceptible-obesity-related-health.html>

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