

Prevalence of anxiolytics and antidepressants use, physical activity and associates in patients with diseases overweight in a nutrition service clinic in South city Caxias

Summary

Introduction: Overweight is characterized by excessive accumulation of body fat and is already considered as a non-communicable chronic disease. The factors are complex and multifactorial them, hereditary, environmental, social and food.

Objective: To analyze the prevalence of tranquilizers and antidepressants, physical activity and associated diseases in overweight patients in a nutritional care clinic in the city of Caxias do Sul.

Method: This was a cross-sectional, descriptive and retroactive. The research was conducted in a private educational institution in the city of Caxias do Sul. The data collection was carried out through the analyzes the records of patients treated between January 2016 and December 2017. The results were analyzed using descriptive statistics, through Microsoft Office Excel.

Results: There were 43 records collected data. The prevalence of females, with a mean age of 36 years, high education and an average income of \$ 1587.90. Overweight was present in 55.81% of the sample. As for the conditions encountered, the most prevalent was hypertension. Regarding the use of drugs, the majority (79.07%) did not use antidepressant or anxiolytic. However, ten were mentioned anxiolytic and antidepressant drugs, used singly or in combination. The most prevalent was fluoxetine hydrochloride.

Conclusion: There was a low prevalence of use of anxiolytic and antidepressant (20.93%) in patients with overweight on a Program for Food and Nutrition Service in the city of Caxias do Sul. The prevalence of females, with a mean age of 36 years, high education and an average income of \$ 1587.90. Overweight was present in 55.81% of the sample. As for the conditions encountered, the most prevalent was hypertension. Regarding the use of drugs, the majority (79.07%) did not use antidepressant or anxiolytic. However, ten were mentioned anxiolytic and antidepressant drugs, used singly or in combination. The most prevalent was fluoxetine hydrochloride.

Keywords: pharmacology, depression, nutritional status

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Introduction

Overweight and obesity are characterized by excess body fat, that is, by the subcutaneous adipose tissue accumulation. Classified as a non-transferable, multifactorial and complex chronic disease, including hereditary, environmental, metabolic, cultural, economic and social factors. Already recognized as a serious medical condition and disorder. Nutritional important, becoming epidemic worldwide.^{1,2} Overweight is increasing alarmingly worldwide, being the country with the highest prevalence of obesity the United States (37.9% for males and 41.5% for women). In Brazil, overweight increased from 26.3% to 53.8% in a decade, with the predominant age group 35-65 years, more prevalent in men and in people with low levels of education.³⁻⁵ In the case of comorbidities triggered and/or exacerbated by obesity, the Brazilian Association for the Study of Obesity and the Metabolic Syndrome (ABESO) reports that excess weight is associated with disability, reduced quality and life expectancy, and triggering various diseases,⁶ including metabolic syndrome, type 2 diabetes mellitus, cardiovascular and respiratory disease, gallbladder

disease, pancreatitis, non-alcoholic fatty liver disease, psychiatric disorders, cancer, osteoporosis, osteoarthritis.⁷ Among the treatments that can be targeted for the treatment of overweight, is the dietary treatment that for ABESO (2010), includes a negative energy balance, always stay active, stick to a diet that takes into account the biological individuality each individual. The failure in weight reduction with dietary treatment, one can opt for pharmacological treatment for reducing body weight. Among the drugs used are catecholaminergic acting on the central nervous system, tricyclic, fencing inhibitors of serotonin and norepinephrine and gastrointestinal actions (ABESO, 2010). This study aimed to analyze the prevalence of use of anxiolytics and antidepressants in patients with overweight on a Food Assistance and Nutrition Program in the city of Caxias do Sul.

Materials and methods

This was a cross sectional study. The study population included patients with overweight who attended a nutritional care clinic, located in the city of Caxias do Sul, Rio Grande do Sul. The research

was conducted retrospectively by analyzing the records of patients treated from January 2016 to December 2017. Data collection began only after the approval of the Ethics Committee of the Cultural and Scientific Association Virvi Ramos (number of Opinion Embodied 2,928,600 of Oct. 1, 2018) and followed the recommendations of the Council Resolution 466/2012 national Health.⁸ Data were collected and tabulated in a spreadsheet Microsoft Office Excel software in which a descriptive analysis was performed. The results were shown by their relative frequencies (%) and absolute (n). numerical variables were presented as mean and standard deviation.

Results

87 records were analyzed, and 43 met the inclusion criteria. As the female most prevalent, with 90.69% (n=39), corroborating the study Barroso & Colleagues⁹ and Peixoto¹⁰ which also found a prevalence of female patients. The population had a high educational level, being 39.53% with high school education and 27.90% incomplete higher education. The descriptive variables are presented in Table 1. A study in the city of Belo Horizonte, with 1334 subjects, the mean age of 36.4 years, had the highest overweight rate (32.2%) and obesity (11.3%) for both sexes and level of more than nine years of education, confirming the findings of this study for age (mean age of 36 years and more education of eight years). As the present study specifically analyzed medical records of patients with overweight and obesity, the prevalence of overweight was higher, with 55.81%. As can be seen in Table 1, we found an average of 29.95 kg / m² Body Mass Index (BMI). The details are presented in Table 2, in which you can see that most patients is overweight and obesity class I. It is known that increased BMI may be linked to the development of various diseases and serves as a parameter for health risk.³

Table 1 Anthropometric and socioeconomic profile of patients with overweight on a outpatient nutrition service in the city of Caxias do Sul

variables	Average	DP	Minimum	Maximum
Age years)	36.23	13.11	18	65
Weight (kg)	78.35	11.99	57.6	109.1
Height (m)	1.62	0.07	1.47	1.82
BMI (kg/m ²)	29.95	4.23	25.19	44.8
Income (R \$)	1587.9	1085.22	-	5,000.00

Table 2 Body Mass Index of patients with overweight on a Nutrition Service From Clinic in the city of Caxias do Sul (n = 43)

Rating (BMI)*	n	%
overweight	24	55.81
Grade I obesity	14	32.55
Grade II obesity	4	9.3
Obesity grade III	1	2.32

*None of the patients with malnutrition oreutrophic

Data provided by the Risk and Protective Factors Surveillance System for Chronic Diseases Telephone Survey (VIGITEL) (Brazil, 2016), shows that half the population is in a state of excess weight and is likely to develop some kind of disease cardiovascular, diabetes, among other morbidities. In the study by Barroso & colleagues⁹ sevaluated patients in the metabolic syndrome clinic Emilia Nutrition Faculty of Jesus Ferreiro, Fluminense Federal University, found a prevalence

of overweight and obesity (63.0% and 27.4%, respectively), and the most prevalent diseases in these patients were hypertension and diabetes (38% and 26% respectively). Data presented in the study by Peixoto (2006) showed that the most prevalent chronic diseases in this population were abdominal obesity (61%), hypertension (30%) and BMI above 25 kg/m². In turn, Barroso & colleagues⁹ demonstrated that patients who were at high BMI (overweight and obesity) had a significant trend in the development of hypertension (25.7% and 48.3% respectively), thus confirming the findings of this study. This study was cited as the primary pathology with obesity, hypertension, with a prevalence of 13.95% (n=6).

Table 3 it can be seen that the disease had higher prevalence obesity was 13.95% (n=6). Most patients showed no pathology associated with being overweight or obese. Among the treatments available for obesity is pharmacological, including the anxiolytic and antidepressant medications. These medications can have side effects such as increased body weight.¹¹ The study Coast & Caletti¹² showed that only had a change of body weight patients who were being treated with antidepressants of the tricyclic class. To Peixoto¹³ the antidepressant drug with the highest prevalence of use amitriptyline (30%) followed by fluoxetine hydrochloride (27.67%).

Table 3 Analyzed conditions and conjugation conditions of patients with excess weight in Nutrition Care Clinic in the city of Caxias do Sul (n=43)

Pathologies	n	%
Diabetes mellitus	1	2.32%
Hypertension	2	4.65%
Obesity	6	13.95%
Cancer	1	2.32%
Kidney disease	1	2.32%
Hypertension + liver disease	2	4.65%
Diabetes and obesity	1	2.32%
Hypertension and obesity	6	13.95%
Liver disease and obesity	1	2.32%
Kidney disease and obesity	2	4.65%
More than three conditions	2	4.65%
None	18	41.86%

The drug most widely used and reported by patients in their records was Fluoxetine hydrochloride (4.65%), as shown in Table 4. In this context, it was not possible to evaluate whether an increase of weight after the beginning of use of anxiolytic and/or antidepressant paan by patients because when dietary treatment were started already using the drugs. Peixoto¹⁰ found no significant difference in the change of the nutritional status of patients using antidepressants. There was prevalence of overweight in 38.5% of patients using tricyclic class of drugs and obesity in 36% of patients using selective serotonin reuptake inhibitors.

The weight gain or changes in body weight by patients treated with antidepressants¹³ can be explained by the fact that patients prefer high-calorie foods such as sweets and other fatty foods; Apart from that depressed patients often have low self-esteem, making often Drop treatment, may have an increased appetite due to their anxious state, not by the use of antidepressants and antianxiety medications.¹⁰

Table 4 Anxiolytics and antidepressants drugs used by patients with excess weight in a care clinic nutrition in the city of Caxias do Sul (n=43)

Active principle	n	%
Citalopram	1	2.32%
Quetiapine	1	2.32%
Fluoxetine hydrochloride	2	4.65%
Sertraline hydrochloride	1	2.32%
Amitriptyline	1	2.32%
Hydrochloride venlafaxina	1	2.32%
Risperidona+divalproex sodium	1	2.32%
+Citalopram hydrobromide hydrochloride	1	2.32%
Levomepromazine		
Does not use	34	79.07%

It was found that the 43 records analyzed, 79.07% (n=34) did not use these drug classes. All records containing the information use of these drugs were female (100%), totaling 9 (20.93%) women who used medication (s). A study conducted in Porto Alegre, in the Home of Humility, analyzing records showed that most patients who used some sort of antidepressant were women,¹¹ corroborating the present study. Study of 75 users of the Unified Health System, the countryside of Bahia, showed a predominance of females compared to males on the prescription of antidepressants, 86.7% and 13.3% respectively,¹⁴ thus confirming the findings of this study.

When collected information on performing physical activity (data not shown in tables), 24 records (55%) patients reported not perform any physical activity per week and only 10 patients (23.25%) were sufficient assets (at least 150 minutes of physical activity weekly). The variable physical activity was classified according to the criteria adopted by the Ministry of Health,¹⁵ ie above 150 minutes per week was rated as sufficient physical activity and present below 150 minutes per week this as insufficient physical activity. For those who do not practice any physical activity was classified as missing. These findings corroborate what was found in the study by Costa et al.,¹⁶ which showed a percentage of 36.1% with insufficient physical activity. In addition, the authors showed that participants with low or medium levels of physical activity corresponded to higher prevalence of overweight (75.9%) and obesity (38%) and higher prevalence of abdominal obesity.

Conclusion

Pharmacological treatment for obesity is of paramount importance, however, a method that should be started when there is no effective results in weight loss. This study showed that the study population, there was a low prevalence of antidepressants and / or anxiolytic and that patients have sought Ambulatory making use of these drugs, low physical activity and having as the most prevalent diseases overweight and hypertension.

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Conflicts of interest

Author declares there is no Conflict of interests.

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