The Inflamed Body

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Inflammation

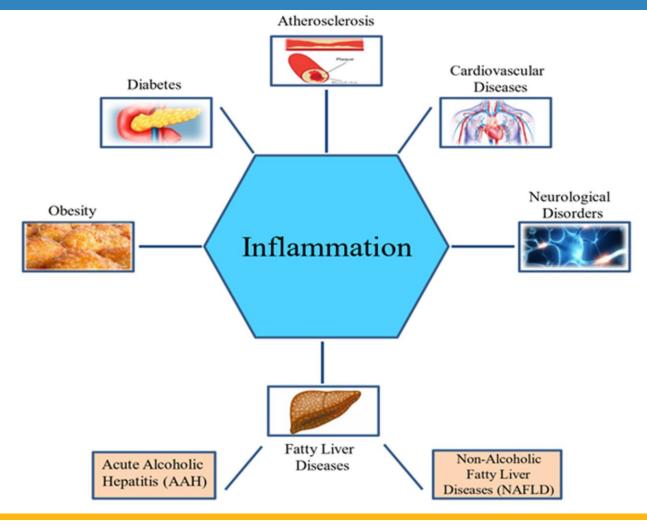
- Acute Inflammation
 - Short-term process occurring in response to tissue injury: Redness, Swelling, Heat and Pain



- Chronic Disease and Inflammation
 - Low grade inflammation is an immune system response.



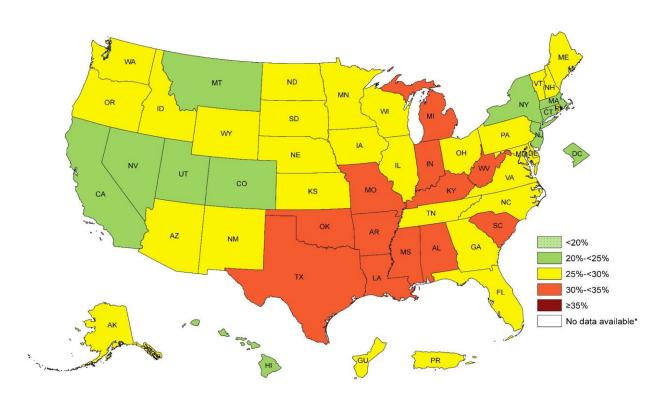
Inflammation





Int. J. Mol. Sci. 2019, 20(19), 4957;

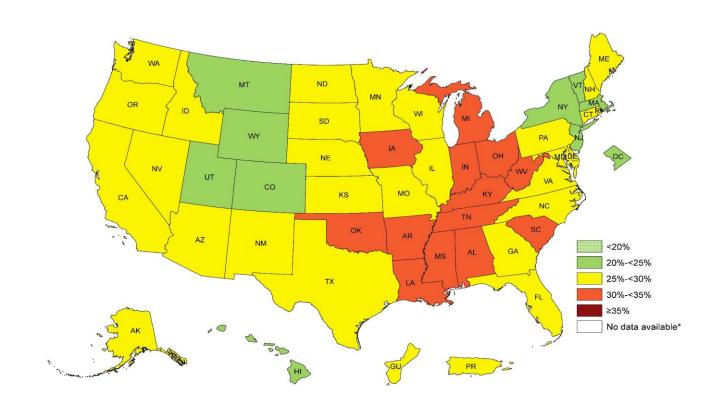
Prevalence[¶] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2011







Prevalence[¶] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2012

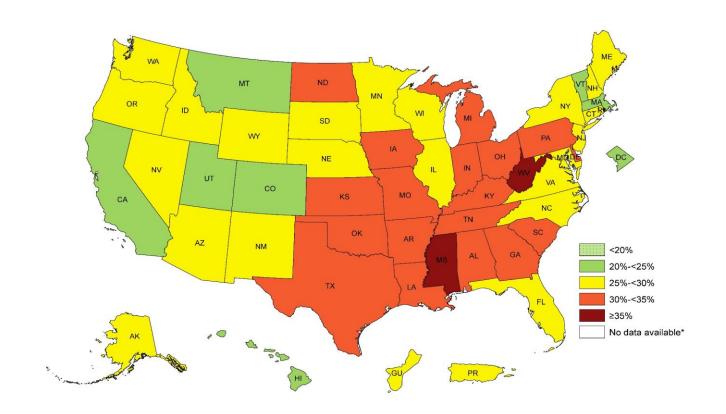






Prevalence[¶] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2013 Prevalence estimates reflect BRFSS methodological changes started in 2011. These estimates should not be

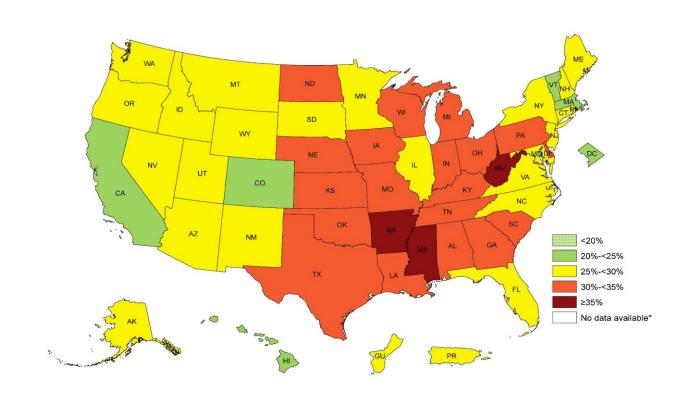
compared to prevalence estimates before 2011.







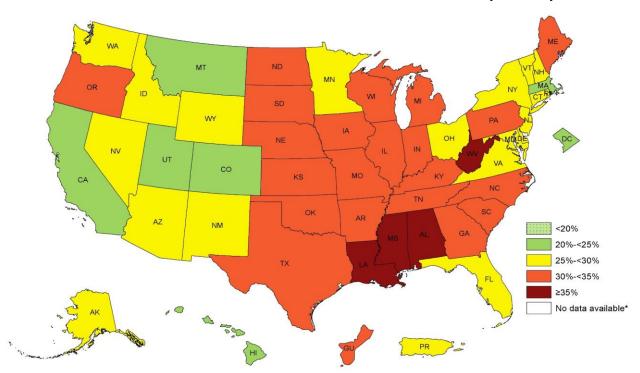
Prevalence[¶] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2014







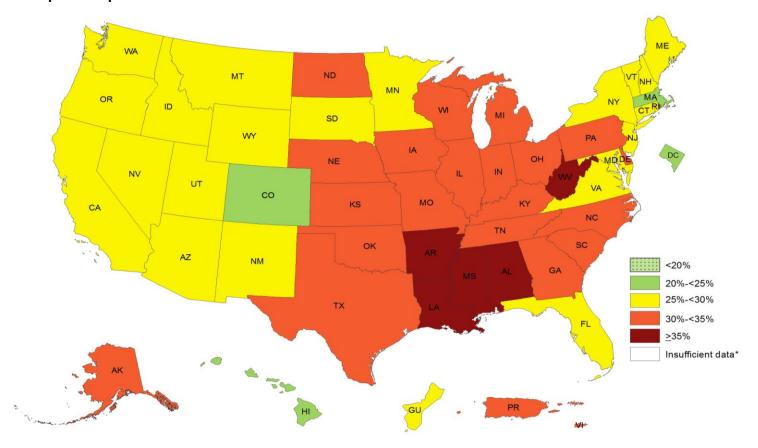
Prevalence[¶] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2015







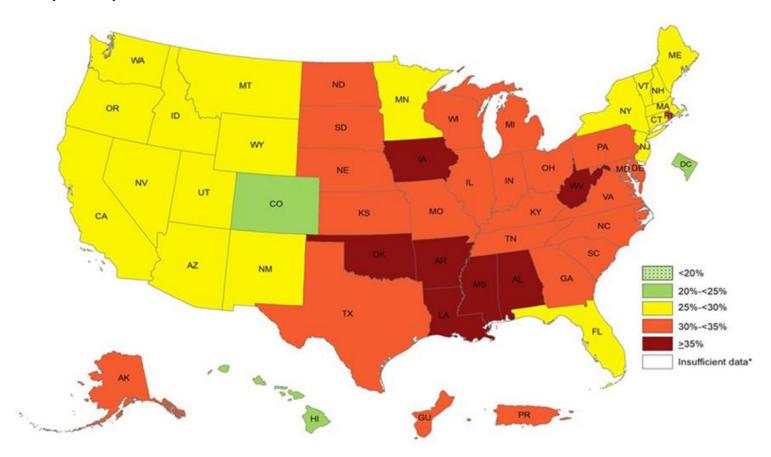
Prevalence¹ of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2016







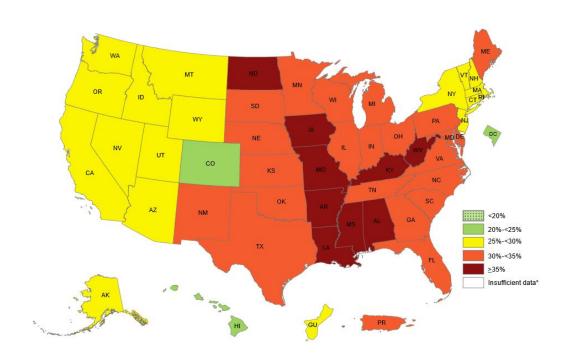
Prevalence¹ of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2017







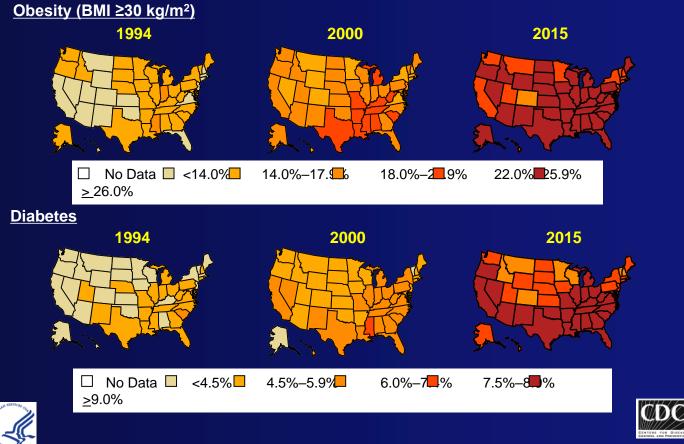
Prevalence¹ of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2018







Age-adjusted Prevalence of Obesity and Diagnosed Diabetes Among US Adults





What is Changing?





What is Changing?

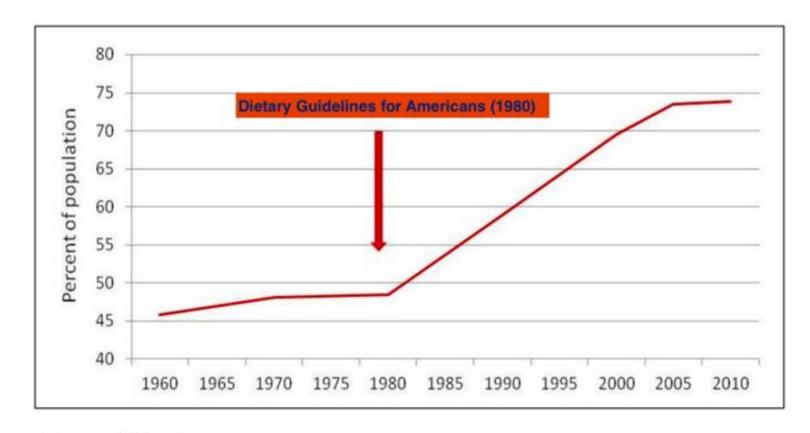




Standard American Diet (SAD)

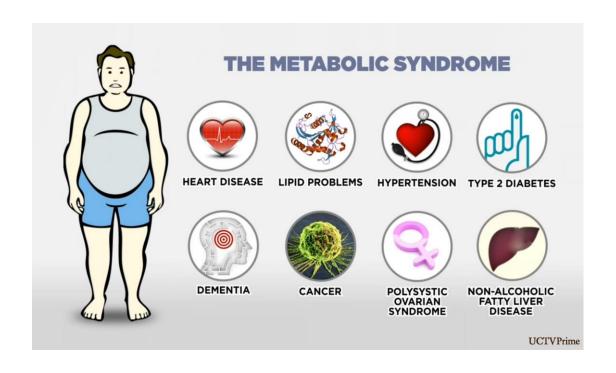


Rate of Overweight/Obesity in US



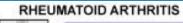
Source: CDC data

Metabolic Syndrome





HASHIMOTO THYROIDITIS Childhood obesity *risk of occurrence (OR=1.21)



Obesity risk of

occurrence (OR=1.2-3.4),

severity, comorbidities and \$\psi\$treatment efficacy

SYSTEMIC LUPUS ERYTHEMATOSUS

Obesity ∱renal and cognitive involvement, CVD and ∳quality of life



Risk of occurrence Insufficient data

PRO-INFLAMMATORY ADIPOKINE

↑VISFATIN

PRO-

INFLAMMATORY

ADIPOKINE

↑LEPTIN

♦ADIPONECTINANTI-

INFLAMMATORY ADIPOKINE

OBESITY ADIPOSE

TISSUE

ADIPOCYTES &

IMMUNE CELLS

Endothelial cells,

fibroblasts

↑RESISTIN PRO-INFLAMMATORY ADIPOKINE

†IL-1, IL-6, TNFα, MCP-1, PAI-1, SAA, VEGF

Obseity Asswerity and

Obesity ↑severity and ↓treatment efficacy

Risk of occurrence: Conflicting data, suggesting obesity as a risk factor



PSORIASIS PSORIATIC ARTHRITIS

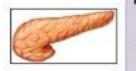
Obesity Athyroid

autoimmunity



Obesity ↑risk of occurrence (OR=1.48-6.46), severity, comorbidities and ♦biologics efficacy

TYPE-1 DIABETES



Birthweight, childhood and adult obesity ∱risk of occurrence (OR≈2) Earlier onset or higher risk ?

> Disease severity: No clinical data

MULTIPLE SCLEROSIS

Childhood obesity ↑risk of occurrence (OR≈2)

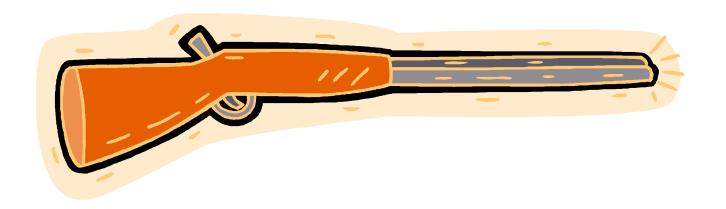
Disease severity: No clinical data, experimental data suggesting a harmful impact of obesity with KEY ROLE of leptin



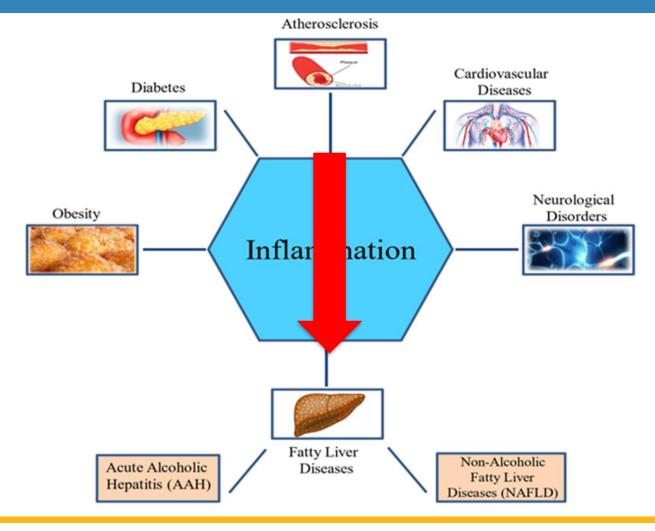


Genes vs. Environment

"Genetics loads the gun—
 the environment pulls the trigger."



Inflammation





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Effects of Weight Loss

Table 3. Comorbid Conditions in Obesity and Evidence for Amelioration With Weight Reduction

Comorbidity	Improvement After Weight Loss	First Author, Year (Ref)
T2DM	Yes	Cohen, 2012 (132); Mingrone, 2012 (133) ^a ; Schauer, 2012 (134); Buchwald, 2009 (135)
Hypertension	Yes	Ilane-Parikka, 2008 (136); Phelan, 2007 (137); Zanella, 2006 (138)
Dyslipidemia and metabolic syndrome	Yes	Ilane-Parikka, 2008 (136); Phelan, 2007 (137); Zanella, 2006 (138)
Cardiovascular disease	Yes	Wannamethee, 2005 (139)
NAFLD	Variable outcomes	Andersen, 1991 (140); Huang, 2005 (141); Palmer, 1990 (142); Ueno, 1997 (143)
Osteoarthritis	Yes	Christensen, 2007 (144); Fransen, 2004 (145); Huang, 2000 (146); Messier, 2004 (147); van Gool, 2005 (148)
Cancer	Yes	Adams, 2009 (149); Sjöström, 2009 (150)
Major depression	Insufficient evidence	, , , , , , , , , , , , , , , , , , , ,
Sleep apnea	Yes	Kuna, 2013 (151)



Weight Loss and Enhancing Immune System



Move More



Love More





Stress Less



Eating Well: Nourishing Your Body

Step 1: Increase Vegetable Intake



Step 4: Spice up your Life



Step 2: Stop all sugar sweetened beverages



Step 5: Eat Whole Grains



Step 3: Change the way you think about red meat.

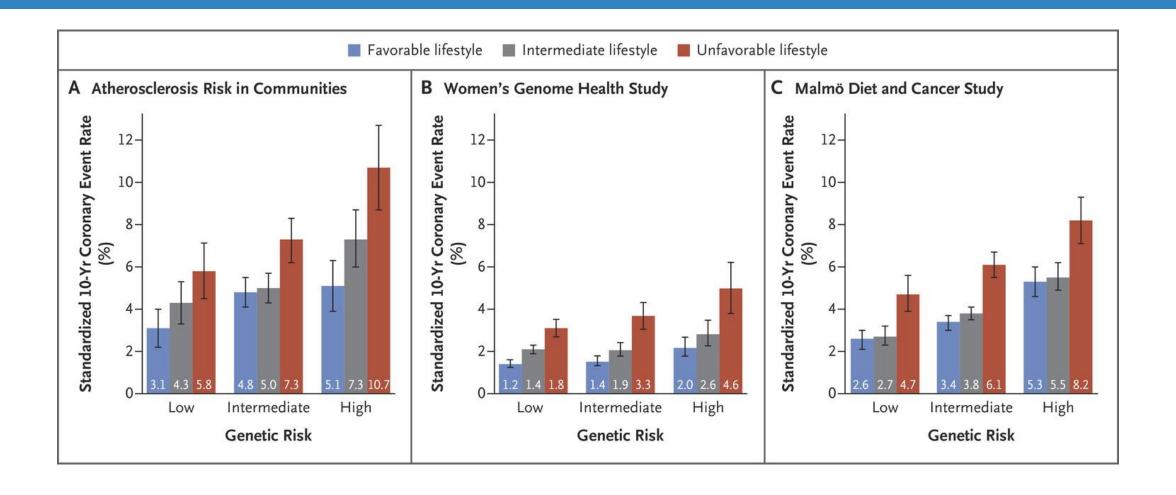


Step 6: Healthy Fats are ok





10-Year Coronary Event Rates, According to Lifestyle and Genetic Risk in the Prospective Cohorts.



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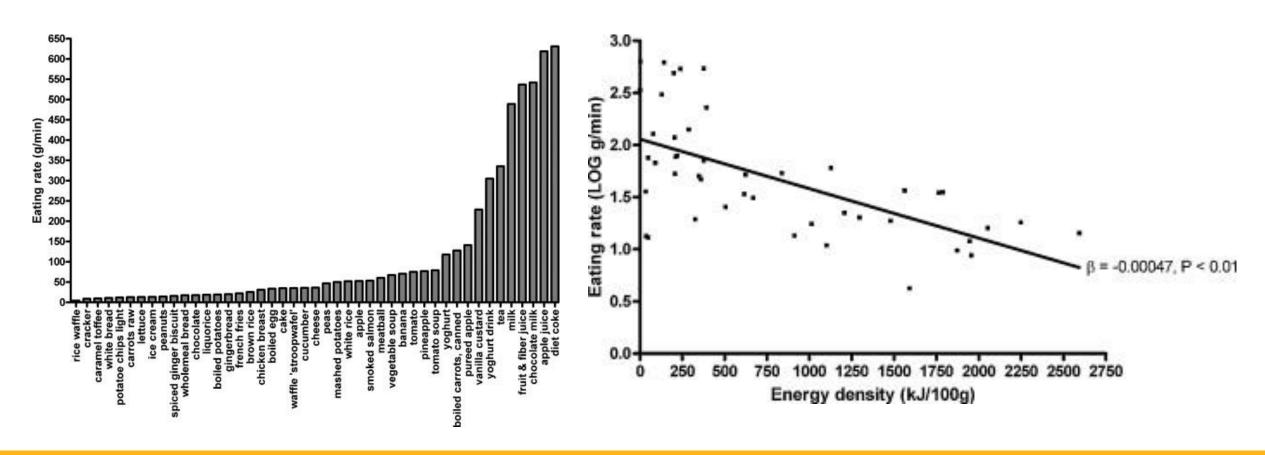


Step 6: Healthy Fats are ok





Step 2: Stop all sugar sweetened beverages





Viskaal-van Dongen M, Kok FJ, de Graaf C. Eating rate of commonly consumed foods promotes food and energy intake. Appetite. 2011 Feb;56(1):25-31. doi: 10.1016/j.appet.2010.11.141. Epub 2010 Nov 19.

Eating Well: Nourishing Your Body

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Step 6: Healthy Fats are ok





Step 3: Change the way you think about meat.

- Omega-6s are pro-inflammatory, while omega-3s are antiinflammatory
- Choose lean cuts and grass fed if possible.



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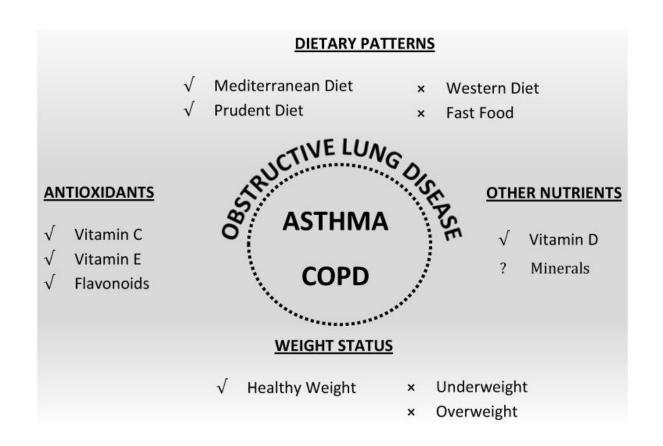


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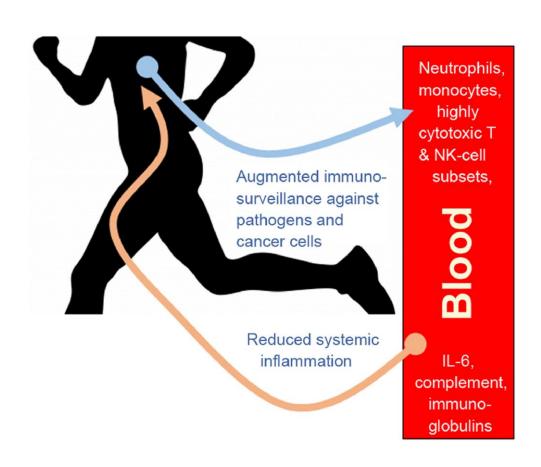


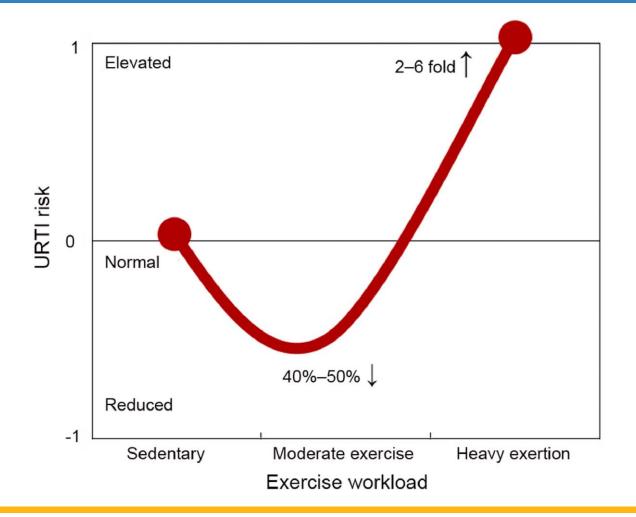
Dietary Patterns





Move More!







Weight Loss and Enhancing Immune System



Move More



Love More



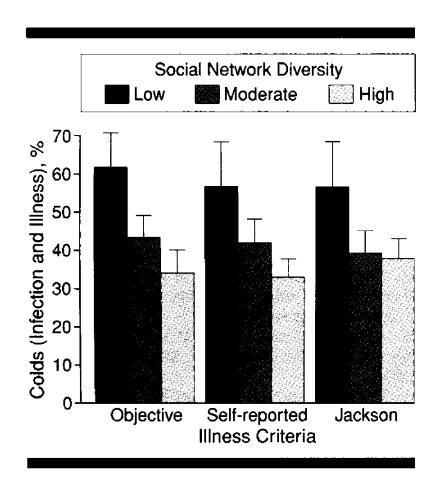


Stress Less



Social Ties and Susceptibility to the Common Cold

- Study included 276 healthy adults from 18 to 55 years old
- Subjects were given nasal drops containing 1 of 2 rhinoviruses and monitored for the development of a common cold
- The incidence of colds in the study was 35 percent among the people with six or more types of relationships





Stress and Susceptibility to the Common Cold

After completing an intensive stress interview, 276
healthy adults were exposed to a virus that causes
the common cold and monitored in quarantine for
five days for signs of infection and illness.

Table 1. Simple effect associations of stress status with lymphocyte subsets

	% lymphocytes		% neutrophils		Neutrophils/ lymphocytes	
	β	SE β	β	SE β	β	SE β
No stress	-0.27**	0.09	0.24**	0.09	0.26**	0.09
Stress	-0.01	0.09	-0.02	0.09	-0.00	0.09

Analyses control for age, sex, race, body mass index, education, prechallenge viral-specific antibody titers, season, and virus type. **P < 0.01.

Table 2. Simple effect associations of cold status with lymphocyte subsets

	% lymphocytes		% neutrophils		Neutrophils/ lymphocytes	
	β	SE β	β	SE β	β	SE β
No cold	-0.27**	0.08	0.21*	0.08	0.26**	0.08
Cold	0.01	0.09	-0.01	0.09	-0.01	0.09

Analyses control for age, sex, race, body mass index, education, prechallenge viral-specific antibody titers, season, and virus type. *P < 0.05, **P < 0.01.

Weight Loss and Enhancing Immune System



Move More



Love More

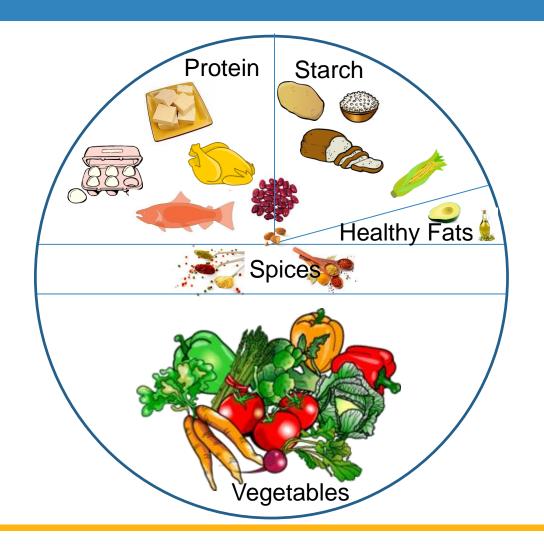




Stress Less



Focusing on your Health All "U" A Diet is Temporary. A Lifestyle is Forever.



Center for Human Nutrition

- Clinical Nutrition Clinic
- UCLA Medical Weight Management Program
- COMET Program

Tel: (310) 825-7921 – Clinical Nutrition

Tel: (310) 825-8173 - UMWMP

Tel: (310) 825-7163 - COMET

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