LETTERS TO THE EDITOR

METABOLIC SYNDROME IN THE SOLDIERS OF PAKISTAN ARMED FORCES

Respected Sir,

This refers to the study "Metabolic Syndrome in the Soldiers of Pakistan Armed Forces"¹.

The study has shown a frequency of metabolic syndrome of 22.5% amongst the Pakistan soldiers. The reported frequency is higher than in the soldiers of Saudi's Army and Royal Jordanian Air Force^{2,3}.

The more alarming is the reported frequency of metabolic syndrome amongst the Indian soldiers much lower compared to the Pakistani soldiers through in the study more aged group of the Indian soldiers was selected⁴.

I wrote an editorial "Prevention of Coronary Disease" in the PAFMJ in 2013 emphasizing the importance and necessity of the prevention of the metabolic syndrome in diabetes-mellitus, order to prevent hypertension, heart attacks, strokes, renal failures, peripheral vascular disease etc in the Pakistani population⁵. I emphasized that the diet should consist of five portions of vegetables and fruits (four vegetables and one fruit), whole grains of low glycaemic-index, pulses/legumes (lentils, beans, peas) low fat dairy products, plant based mono-saturated fats (canola/olive preferably virgin extract) oily fish, chicken white meat without skin, nuts, seeds-using low quantities of red-meat, saturated fat, sodium-chloride, tran-falty acids free diet and doing regular exercise (stretching, muscles strengthening (at least twice a week) and aerobic exercises, to achieve the aim of keeping the mid-abdominal girth (mid-way costal margins and iliac crest), less than 351/2 inches in males and 311/2 inches in females.

In 1962 the Indian govt appointed a commission to ascertain the causes of Indian Army's disastrous defeat by the Chinese in the Indo-china war. The commission concluded that the cause of defeat was the lack of fitness of

the Indian soldiers due to having excessive incidence and prevalence of central abdominal obesity amongst the Indian soldiers. The commission recommended to modify the diet of Indian soldiers, reducing calories, saturated fats, sugars etc, emphasizing to keep the midabdominal girth of male soldiers less than 351/2 inches and of the female soldiers less than 311/2 inches.

Pakistan has one of the highest incidences and prevalence of the metabolic syndrome even amongst the 'SAARC' countries. This is due to the unhealthy life-style of eating diet, rich in saturated fats, sugars, red-meat, high fat dairy products and less activity. I have studied the diets of the OR's messes, officers messes (including AMC) and the Armed Forces clubs and found diets highly unhealthy rich in redmeats, saturated fats, sugar, very high in calories and low in vegetables, fruits, pulses/, nuts, seeds and fish. The solution of this problem lies in prevention and the promotion of health – by adopting healthy life-style as recommended in my editorial. Prevention in not only better than cure but the only cure, the real cure and cost-effective.

In the editorial I also emphasized that the Armed Forces being a disciplined organization should set an example of healthy-life style. The Army Medical Corps particularly the doctors should perform their sacred duty and full-fill their responsibility of keeping the Armed Forces healthy and fit and be a role-model for the nation to follow.

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