

Living with... NASH

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My name is Hana, I live in Bratislava, the capital of the Slovak Republic. When I think of my childhood, I suffered from obesity. I did not like physical education, it always ruined my school report, and I was unhappy about it. I did not realize the stigma then.

By changing my lifestyle and environment, by studying at the university in Bratislava, I managed to reduce my weight and my BMI was fine (waist size was 68 cm).

I wanted to lose weight after giving birth, but my jealous husband did not allow it, I gave up as I do not like conflicts.

Later, I started putting on weight again, I had a Grade 1 obesity and high blood pressure, a metabolic syndrome started along with an enlarged waist size.

About 5 years ago I was diagnosed with high cholesterol and started taking medication for this disease. Last year, during an examination on a FibroScan Device, within a research work of Doc. Belovičová, I was diagnosed as Non Alcoholic Steato-Hepatitis (NASH) in an initial stage, due to long-term overweight.

I was incredibly surprised because my liver tests were fine. The doctor explained to me that NASH is an inflammation of the liver and arises as a result of fat storage in the liver. In patients living with obesity, lipogenesis (fat synthesis) in the liver is most often caused by excessive consumption of high-sugar foods.

When we take in more calories without compensating for physical activity, fat damages tissue, scars form on the liver, fibrosis and

later cirrhosis occurs, and liver failure occurs.

I try to control my appetite and keep my weight low. I know how to change my eating habits, limit sweets and farinaceous meals, and to eat lots of vegetables.

Also, to exercise so that my muscles produce myokines, hormones of muscle tissue that have an anti-inflammatory effect and effectively affect our organs.

Due to the Covid 19 pandemic, things have been hard now, for well over a year, and because of my passion for work and its resulting stress, I sometimes forget to eat and drink, and the body remembers that.

Obesity is not considered a disease in our country, where only its consequences are treated.

This fact alone has a significant economic impact on increased costs in healthcare and other sectors of the state.

Many people do not even know how many, and what diseases arise from obesity, including the effects of Covid-19, and what the consequences may be for their health.

According to experts, more than 60% of people in Slovakia are overweight or have obesity.

Many of them do not know just how dangerous obesity is, they think, "I'll take a pill to lower a pressure, to treat heart pain

or to lower sugar levels, and I'll be fine." They have no information that obesity can be prevented by diet, exercise, and a change in their habits. I am delighted that as a member of the ECPO EASO Council, I am receiving information on how to tackle obesity and its prevention, with cooperation and support in our activities from colleagues from all over Europe.

Proof of this, is a publication of a special edition of the book "Treatment of obesity for primary care physicians and internists" by Dominique Durrer and Yves Schutz in Slovak translation. This publication is published with kind consent of the authors to WOD Europe 2021 and is the first publication of this kind in Slovakia.

In my opinion, there is a need for European wide recognition of obesity as a chronic disease, there must be an effective system of prevention from the very beginning of life, and a system of paid healthcare in obesity.

Equally important is to ensure that all people are educated not only about obesity but also about diet and its composition, and its role in people's lives, eating behavior and the importance of exercise, and make commitments among countries to comply with recommended measures on prevention and treatment of obesity while at the same time, to adopt the Obesity Charter.

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