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The World Health Organization has considered obesity to be the 'non-infectious epidemic of the 21st century' and one of the principal chronic health problems worldwide. Obesity is a chronic multifactorial and complex disease that develops through the interaction of genotype and environment. e therapeutic approach should take into account cultural alimentary beliefs to improve a lifestyle intervention. Health-related quality of life scales are being used increasingly to assess the health in population and analyst the e ectiveness of health interventions. e 'subjective well-being' has two components: Emotional and cognitive approach. is research is a cross sectional descriptive study with 276 users of the Primary Health Centre 'OfraDelicias-Miramar', in Santa Cruz d Tenerife (Spain), in the rst quarter of 2016. e sample consists of 52% normal weight (Body Mass Index-BMI <25) and 48% non-normal weight: 27% overweight (BMI 25-30) and 21% obese (BMI>30). 60% were female and 40% were male aged between 19 and years old (42.3±12.73). Instruments used were: Satisfaction with life scale (SWLS) and health-related quality-of-life (EQ-5). EQ-5 is simple and widely used multi-attribute utility model that assesses 5 dimensions: Mobility, self-care, usual activities, pain/discomfort and anxiety/depression. SWLS is a ve-item scale designed to measure a person's global judgment (cognitive) of satisfaction with their life. Additionally, the satisfaction with life scale has been found to be positively associated at statistically signi cant levels with other measures of subjective wellbeing and negatively associated with measures of psychopathology. It is a valid and reliable measures of subjective wellbeing and negatively associated with measures of psychopathology.