



Special Issue Reprint

Metabolic Syndrome

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Metabolic syndrome has been the topic of countless publications. It still remains a subject of debate and some experts have even questioned its clinical relevance. Its diagnosis is nevertheless predictive of an increased risk of type 2 diabetes and cardiovascular disease even in the absence of traditional risk factors. Many years ago, our team made the point that the most prevalent form of metabolic syndrome was linked to abdominal obesity, which can be found even among individuals who are not considered obese by body weight standards. Imaging techniques such as computed tomography and magnetic resonance imaging have revealed the link between regional body fat partitioning and cardiometabolic risk. Visceral obesity is the most dangerous form of obesity, with subcutaneous obesity being associated with lower health risk. We have proposed that excess visceral fat may be a marker of subcutaneous adipose tissue dysfunction not being able to serve as a metabolic sink, causing lipid accumulation at undesired sites, a condition described as ectopic fat deposition. Among the effective approaches to prevent, delay, or manage metabolic syndrome, lifestyle changes are the key elements, with an emphasis on the importance of healthy global dietary patterns, regular physical activity, and adequate sleep quality.



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