

METABOLIC SYNDROME

The metabolic syndrome is a group of commonly known health abnormalities that together increase the risk for diabetes and cardiovascular disease (CVD). The following lists the diagnostic criteria:

- | | |
|---|-------------------|
| 1. abdominal obesity | >40 inches in men |
| 2. high density lipoprotein-cholesterol | <40 mg/dL in men |
| 3. triglycerides (a form of body fat) | >150 mg/dL in men |
| 4. blood pressure | >130/85 mmHg |
| 5. fasting blood sugar (glucose)* | >110mg/dL |

*Note: You should know that often, prior to developing a persistent elevation of blood sugar, a condition related to the pancreas gland (an important organ inside your abdomen) called “Insulin Resistance” develops insidiously in the body. This problem is more common in obese people and it frequently leads to a hormonal imbalance in your body.

An individual who has 3 or more of the 5 above listed findings is said to have metabolic syndrome. Approximately 24% of the adult population in the US has this condition. The importance of this condition is that it is associated with an increased risk of heart attack, stroke and sudden death in people with this disorder.

In the LHF health screening program, two major CV risk prediction tools are employed: the first is the Framingham Heart Study model (40-year long study based on people from a Massachusetts community) and the second which is more recently popularized metabolic syndrome model (approximately 5-year long studies from multiple locations around the country). Most recently, the newest major indicator of CVD called C-reactive protein (another blood test) has been thought to improve the early identification of CV risk and has been added to the LHF program in 2006. The C-reactive protein is an increasingly popular indicator of inflammation which often involves the CV system.

Because NFL players, active and retired, are often of large body size, they are more likely than the general population of adult men, to develop metabolic syndrome. In fact, initial LHF evaluations suggest that more than 50% of retired players screened in the past three years have this condition. Fortunately, once recognized, this ailment can be addressed and overcome.

The health abnormalities associated with metabolic syndrome are very treatable. Now that the LHF has identified the frequency of this condition, the Faculty is letting the players know about the preliminary findings and their importance. In addition, LHF and its hospital partners have developed programs involving improved nutrition, exercise, health testing and physician referrals for interested LHF members to develop a strategy to fight this harmful condition.

The pathway to improved health remains one of awareness, identification and treatment. The motivation to make the necessary lifestyle changes to overcome the basic underlying problems remains the individual's choice. Without the will to make important behavioral changes, success in overcoming metabolic syndrome will be limited. The LHF will do whatever it can to help the NFL players and their doctors to fight this common enemy.