

Maintaining a healthy weight has become the focus of many, as health implications of obesity are now better appreciated. As was discussed in the first part of this article last month, abnormal loss of weight is unintended/unplanned weight loss. Finding the cause can pose a diagnostic challenge. Several medical conditions present as weight loss which can pose challenges at making diagnosis. It is extremely important to give the doctor as accurate a history as possible to assist in planning a systematic approach at investigating the cause. Unintentional weight loss becomes a concern when someone loses up to ten pounds in one month or experiences progressive decrease in weight over several weeks or months.

Like we did last month, we will look at more scenarios that cause weight loss:

Scenario 1: Ms. Janet has been overweight most of her life. She noticed over the course of one year, she has lost about fifty pounds. She had always wanted to lose the weight and people have been asking her how she was able to lose it. Janet, however, began to get concerned that her weight loss is not intentional and it has been progressive. She is generally in a good state of health. The only other thing she noticed is that she eats a lot and loves the winter weather even when everyone is freezing cold. Her friends feel it is a good thing she is losing weight but Jane is bent on having an evaluation. Is Janet just paranoid?

Ans: Janet is not just paranoid. She has unintended consistent weight loss. She needs to get evaluated, even though her weight loss may look like a quick fix to her previous overweight problem. Janet visited her doctor who on further questioning discovered that Janet had been

ABNORMAL WEIGHT LOSS (Part II)

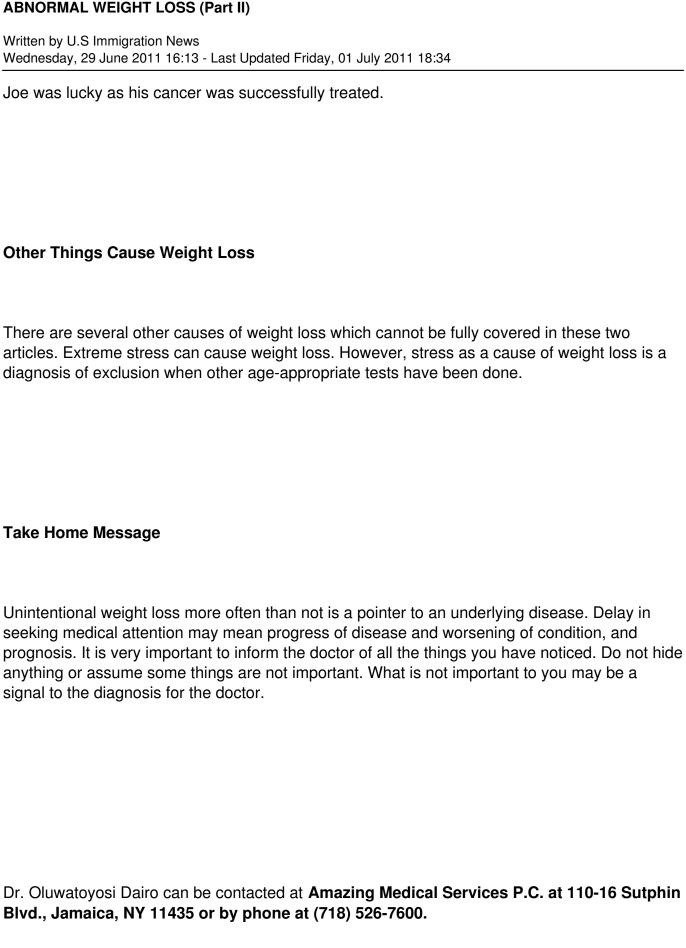
Written by U.S Immigration News Wednesday, 29 June 2011 16:13 - Last Updated Friday, 01 July 2011 18:34

feeling her heart beat fast (palpitations) for a few months. She moves her bowel a couple of times in a day. The doctor had a suspicion of hyperthyroidism, which was confirmed by blood work.

Thyroid hormone controls the metabolism of the body. It is secreted from the thyroid gland which is located in the front part of the neck. Normally it is not prominent. When the gland produces too much hormone (thyroxine), it speeds up body metabolism. This can present in several ways such as weight loss, nervousness, shaking of the hands and fingers (tremors), excessive hunger, fast/pounding heart beat (palpitations), sweating, and more frequent bowel movement. It is like activating the body system. Some people may also have prominent and protruding eyes. Hyperthyroidism is easily treatable with antithyroid medications or radioactive iodine to stop the cells from producing too much hormones.

Scenario 2: Joe is in his mid-fifties and lives a relatively quiet and healthy life. He has lost about twenty pounds within two months. He does not drink alcohol and has no physical complaints apart from the weight loss. He used to smoke up until six years ago. His wife succeeded in convincing him to have a doctor's check up after about several months of weight loss. What are your thoughts on Joe's weight loss?

Ans: At the doctor's visit, Joe's blood work did not reveal anything to point to as reason for his weight loss. The doctor decided to do a chest X-ray because of Joe's remote history of smoking. There was an abnormality on the chest X-ray. After this, Joe remembers that some years back a doctor had told him about a small spot on a chest X-ray he did for other reasons. He did not follow-up because he felt he had no symptoms. It turned out that after taking a piece of the abnormal spot (biopsy) and sending it to the laboratory, it was cancer in the lungs. Cancer anywhere can cause weight loss. It is very essential to give past history as it may be vital to diagnosis. Cancers at times may take a long time before they present with florid symptoms. Worse still are cancers that grow in areas of the body where there is enough room to grow big before causing major symptoms. Such areas are cancer in the stomach, colon, and much more. Do not ignore symptoms such as blood in sputum, or unresolved cough in previous/current smoker. Blood in stool should also not always be assumed to be hemorrhoids. Females should also be aware of bleeding in between periods or bleeding after menopause.



This article is for educational purpose and it is not intended to replace the advice of your doctor.

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