Editorial

Effects of Disadvantage in Early Life on Cardiometabolic Health Status in Adulthood Kyung Hee Park

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Obesity and its related cardiovascular diseases have been known to be largely preventable. Understanding of modifiable risk factors for obesity in early life will be helpful in establishing effective prevention programs and policies to reduce the obesity epidemic. Among the early determinants of obesity that have been suggested in numerous studies, research indicates that cardiometabolic health in adulthood may be partly associated with early disadvantaged conditions such as socioeconomic status and adversity.

Recent epidemiologic studies have suggested that socioeconomic groups with greater access to high-energy density foods are at greater risk of being obese than the opposite conditions¹⁾ and socioeconomic factors in childhood and adolescence have significant association with coronary heart disease risk, all-cause mortality, or cardiovascular mortality in mid-life.^{2,3)} Data from one Swedish prospective cohort study have suggested two life course pathways for metabolic syndrome: one through body mass index in adolescence and early childhood for both men and women and the other through adolescent socioeconomic disadvantage for women.^{4,5)}

In terms of adversity in early life, there are several studies that report a correlation between early adverse experience and cardiovascular disease as well as obesity in adult life.^{6,7)} Possible mechanisms that may link early adverse experience and cardiovascular disease may include a mediating effect caused by behavioral changes in lifestyle factors and adipomyokines or inflammatory markers.^{8,9)}

Interestingly, in this issue of Korean Journal of Family Practice, Choi et al.¹⁰⁾ propose a positive association between maternal education and occupational status in childhood and metabolic syndrome in adulthood among Korean females from the Korean National Health and Nutrition Examination, 2007–2009. Although this study has some limitations, this finding is intriguing and, if confirmed from well-designed longitudinal cohort studies in the future, will hopefully be helpful in establishing public health strategies for preventing obesity and its related cardiovascular disease at the population level.

Considering the increasing prevalence of obesity and its associated chronic diseases in Korea and the few numbers of published studies on early risk factors for obesity, much more research is thus needed in order to elucidate the association between the two in the foreseeable future.

CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

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