

## Waist circumference cutoff and metabolic syndrome

Sir,

The report on the waist circumference cutoff and metabolic syndrome revealed many interesting aspects.<sup>[1]</sup> Pratyush *et al.* concluded that “WC of 90 cm in males and 85 cm in females should be a mandatory criterion of MetS in our subset of population.<sup>[1]</sup>” Several concerns on this work should be discussed. First, clarification on quality control of laboratory investigations and analysis is needed. Lipid profile and blood glucose measurement can be easily disturbed by interference such as hemolysis during blood collection. The limitation of using calculated LDL as parameter is already mentioned by Pratyush *et al.* in the report.<sup>[1]</sup> Also, the reliability of the waist circumference measurement technique should be discussed. Whether the circumference was directly and correctly measured or not should be discussed. The indirect measurement or self-report of the subjects can be unreliable.<sup>[2]</sup> Despite measurement by medical personnel, several factors can affect the results including “patient movement or position changes, poor positioning of the measuring tape or differences in tension applied to the tape by the clinician.<sup>[3]</sup>” In a recent report by Bernritter *et al.*,<sup>[3]</sup> the “Height of Iliac Crest (HIC) method” is a recommended technique. Second, the use of closed relatives of the patients as subjects might not be a good representative of healthy population. These things should be considered before acceptance of the concluded cutoff for implementation in practice.

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