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Why Cardiovascular Risk Factors are high among Men than Women?

The research article of predicting the cardiovascular risk factors among adulthood investigates the associations between childhood anthropometric measurements during childhood. The data was collected from the children at an early age and based on the Body mass Index and Skinfold thickness it was predicted that the Cardiovascular risk factors were high among men than women. The findings of this study suggest that childhood anthropometric measurements can be a good predictor of Cardiovascular risk factors in adulthood. This Study can help and identify and distinguish between the children who are at risk of developing cardiovascular disease and to implement interventions to reduce the risk at an early age.

This paper noteworthy findings that childhood anthropometric measurements in childhood were associated with the risk of adult obesity, metabolic syndrome, type 2 diabetes, elevated high levels of CRP. However, there was no connection between childhood anthropometric measurements and arterial hypertension, raised level of triglycerides or reduced level of HDL cholesterol. Logistic regression analysis was used to assess the associations of childhood BMI and skinfold thickness with adult cardiovascular risk factors, both with and without adjusting for BMI gain from childhood to adulthood. The models were adjusted for sex, physical activity level, alcohol consumption, smoking, and family history of obesity.

Interestingly, BMI gain from childhood to adulthood did not depend on the initial BMI level. However, the prevalence of adult obesity increased considerably with increasing quintiles of childhood BMI. Children with higher initial BMI had a greater likelihood of becoming obese in adulthood. Early identification and intervention for childhood obesity may play a crucial role in reducing the long-term risk of cardiovascular diseases. The findings also suggest that the impact of childhood obesity on adult cardiovascular risk is independent of the degree of BMI gain from childhood to adulthood, emphasizing the importance of addressing childhood obesity as a preventive measure for cardiovascular health in adulthood.

The author has used only the BMI index and skinfold thickness to predict the cardiovascular risks but there are a lot of other features or metrics that could have been used for prediction. The study has limitations. It was conducted for a single country so the result can not be applicable to other countries children and also the study did not collect data on all potential confounders, so it is possible that some of the associations found were due to residual confounding.

Overall, the statistical calculation and mathematics provide a complete predictive model for CRF. The comprehensive statistical approach used in this research strengthens the validity and reliability of the results, providing valuable insights for public health strategies aimed at improving cardiovascular health outcomes in populations facing increasing rates of childhood obesity.