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RESPONSE TO LETTER

Can routine hematological markers improve obesity risk stratification? A translational comment on El-Aghbary et al. [Response to Letter]

Dekra Ali El-Aghbary[1], Rashad Ali Thabet[2], Mohammed AW Almorish[3], Khaled Mohammed Al-Sayaghi[4,5], Ahmed M E Elkhalifa[6]

[1]Department of Medical Microbiology and Immunology, Faculty of Medicine and Health Sciences, Sana'a University, Sana'a, Yemen; [2]Department of Biochemistry, Faculty of Medicine and Health Sciences, Sana'a University, Sana'a, Yemen; [3]Department of Hematology, Faculty of Medicine and Health Sciences, Sana'a University, Sana'a, Yemen; [4]Department of Medical Surgical Nursing, College of Nursing, Taibah University, Al-Madinah Al-Munawwarah, Saudi Arabia; [5]Nursing Division, Faculty of Medicine and Health Sciences, Sana'a University, Sana'a, Yemen; [6]Department of Public Health, College of Health Sciences, Saudi Electronic University, Riyadh, Saudi Arabia

Correspondence: Mohammed AW Almorish, Department of Hematology, Faculty of Medicine and Health Sciences, Sana'a University, Sana'a, Yemen, Email m.almorish@su.edu.ye; almorish70@gmail.com

Dear editor

In the letter to editor titled "Can Routine Hematological Markers Improve Obesity Risk Stratification? A Translational Comment on El-Aghbary et al [Letter]," Fangying Wu et al provided insightful recommendations to enhance our future study, for which we express our gratitude and readiness to address their inquiries.[1,2]

Firstly, we agree with Wu et al that integrating CRP and ESR with metabolic indices and central adiposity measures enhances predictive accuracy for diabetes, hypertension, and cardiovascular disease. The combination of inflammatory markers with metrics like HOMA-IR, fasting insulin, lipid profiles, and waist circumference fosters a more holistic comprehension of individual health status.[3]

Secondary, your observation regarding the notable predominance of females within the obese cohort is of paramount importance. It underscores the necessity for sex-stratified analyses to ensure the applicability of our findings across diverse demographic groups. The inclusion of a broad spectrum of participants, encompassing adolescents and older adults, will undoubtedly augment the generalizability of forthcoming research endeavors.[4]

Thirdly, we find your insight into the correlation between reduced physical activity, constipation, and obesity to be particularly compelling. The gut–lifestyle–inflammation nexus represents a domain that warrants extensive investigation, and the incorporation of metrics pertaining to dietary fiber and microbiota could yield significant insights into modifiable lifestyle factors that influence both inflammation and adiposity.[5]

Fourth, the exploration of routine hematological markers in integrated risk models offers a significant opportunity to refine the prediction and management of obesity-related complications, aiming to yield nuanced insights through sex-specific and diverse healthcare assessments that could enhance tailored interventions and improve clinical practices and patient outcomes.[6]

Ultimately, we extend our gratitude to Fangying Wu, Zihan Yang, and Xuanxuan Ren for their insightful recommendations, which are exceedingly beneficial for the formulation of future research methodologies.

Disclosure

The authors declare no conflicts of interest.

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