

Addressing Obesity with Pediatric Patients and Their Families in a Primary Care Office



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KEYWORDS

• Pediatric obesity • Treatment • Diet • Exercise

KEY POINTS

- Overweight is defined as a BMI at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex; obesity is defined as a BMI that is at or above the 95th percentile for children of the same age and sex.
- Children and teenagers that are overweight or obese should focus on weight maintenance or weight loss, depending on several key factors.
- The US Department of Agriculture/US Department of Health and Human Services recommend a diet rich in fruits and vegetables, whole grains, and fat-free and low-fat dairy products for persons aged 2 years and older.
- Children should be advised to perform 60 or more minutes of physical activity each day.
- Behavior therapy can be an important adjunct treatment of weight loss and weight maintenance.

INTRODUCTION

Obesity is a major health problem in the United States. Since first recognized as a chronic disease by the National Institutes of Health in 1985, childhood obesity has more than doubled in children and quadrupled in adolescents in the past 30 years.¹ According to the National Center for Health Statistics, the percentage of US children in the 6 to 11 age group who were obese increased from 7% in 1980 to nearly 18% in 2012. Similarly, the percentage of adolescents in the 12 to 19 age group who were obese has increased from 5% to 21% over the same time period.² Furthermore, overweight and obese children are more likely to become and stay obese into adulthood³ and more likely to develop noncommunicable diseases, such as diabetes and

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cardiovascular disease, at a younger age.⁴ With the prevalence of childhood obesity and overweight in today's society, the family physician must be comfortable counseling parents of obese and overweight children about treatment options. This article discusses the diagnosis and treatment of obesity with an emphasis on diet, physical activity, pharmacotherapy, gastric bypass, and behavior therapy.

DIAGNOSING OBESITY AND OVERWEIGHT

Body mass index (BMI; weight [kg]/height squared [m^2], or weight [lb]/height squared [in] * 703) can be used to assess a person's weight as it relates to their height. For children weight status is further conceptualized as a BMI percentile, which is determined by plotting BMI on a normal curve according to a child's age and gender. The Centers for Disease Control and Prevention has developed growth charts that define overweight as a BMI at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex.⁵ Obesity is defined as a BMI that is at or above the 95th percentile for children of the same age and sex.⁵

TREATMENT: GENERAL GUIDELINES

After determining that a patient is obese and organic causes are ruled out, a treatment plan should be established. First, the physician must determine if contraindications to weight loss programs exist. When considering weight-reduction programs, patients often have unrealistic expectations, hoping to achieve weight loss goals within a short period of time.⁶ This can be a source of disappointment and frustration. The National Institutes of Health/National Heart, Lung, and Blood Institute recommend that children and teenagers that are overweight or obese should focus on weight maintenance or weight loss, depending on several factors.⁷ Healthy youth are expected to gain weight as they grow taller, so an obese child that maintains their current weight will still reflect positive health changes in some circumstances. **Table 1** describes the different factors to consider when determining a patient's treatment goals.⁸ It is important for physicians to educate parents about this and align patient expectations with what is known to be realistic to avoid the patient having feelings of failure and parent frustration.

The main strategies for weight loss and weight maintenance are dietary therapy; physical activity; combined therapy; pharmacotherapy; and weight loss surgery,

Table 1	
Factors to consider when determining treatment outcome goals	
Goal: Weight Maintenance	Goal: Weight Loss
All children at risk for becoming overweight (BMI >85th percentile and <95th percentile) between 2 and 7 y of age with no medical complications	All obese children (BMI \geq 95th percentile) older than 7 y
Obese children (BMI \geq 95th percentile) between 2 and 7 y of age with no medical complications	Obese children between 2 and 7 y with medical complications
	Children at risk for becoming overweight (BMI >85th percentile and <95th percentile) older than 7 y with medical complications

Adapted from Fowler-Brown A, Kahwati LC. Prevention and treatment of overweight in children and adolescents. *Am Fam Physician* 2004;69(11):2597.

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