Childhood Obesity
Are we in the ELEVENTH hour?
Written by Patricia Setzer

If I were to ask you to list some diseases that present the greatest health risk to adults, chances are cardiovascular, cancer, and diabetes would be at the top of your list. Yet there is a health risk that not only is becoming a major threat to adults, it is threatening your children at an alarming rate. Some say the present generation may be the first not to live to an older age than their parents; in this fast pace, high-tech, fast food world, young and old alike are eating themselves to death.

Headlines this morning: “Manufacturers are now making children’s car seats larger” because our kids are becoming heavier. In the United States there are now more than a quarter million children from ages 1-6 years who are overweight. We are now seeing children three years of age weighing as much as 45 pounds when a healthy weight for a six year old is 40 pounds.

The Center for Disease Control and Prevention found that one-third of all mothers thought that their overweight children were at the right weight. Of the mothers who were aware that their children were overweight they were more likely to see their daughters as overweight than their sons.

Companies are spending $10 billion a year on marketing for food and beverages geared specifically toward children and youth. Unfortunately, anything that resembles nutrition is long gone before it reaches your child’s mouth.

The Institute Of Medicine Of The National Academies reports:

“Of the more than $200 billion children and youth collectively spend annually, the top four leading items children ages 8-12 years select, without parental permission, are high-calorie and low-nutrition foods and beverages.”

“Food and beverages, particularly candy, carbonated soft drinks, and salty snacks or chips, were ranked among top leading items that teens ages 13-17 years old purchase with their own money.”

“The purchase influence of children and youth increases with age and is currently estimated at $500 billion for 2-14 year-olds.”

Not a bad return for the companies’ original $10 billion investment.

Why should you be concerned?

Surgeon general, Richard Carmone, states with increased frequency we are seeing children diagnosed with high blood pressure and Type 2 diabetes, at one time thought of only as adult onset diseases.

The more overweight the child the higher the risk for Metabolic Syndrome (insulin resistance) and cardiovascular disease. Along with Type 2 Diabetes, this increases the child’s risk for a stroke, and peripheral disease.

Other health problems facing the overweight child are depression, high cholesterol, asthma, sleep disorder, liver disease, orthopedic complications, and mental health problems.

According to the Associated Press recent studies predict that by 2010 half of the children in North and South America will be overweight.
Dr. Philip James, chairman of the International Obesity Task Force states “We have truly a global epidemic which appears to be affecting most countries in the world.”

The percentages of overweight children also are expected to increase significantly in the Middle East and Southeast Asia, Mexico, Chile, Brazil and Egypt, all of which have rates comparable to fully industrialized nations.

James added that they are being bombarded with all the wrong foods just as we are in the West.

The following is an obesity report card released by webMD. It grades the effort each state is putting forth to combat the obesity epidemic our country now faces.

**Overall Grades**

Here are the grades for state overall efforts to control obesity (states listed in alphabetical order):

- **A**: No states.
- **B**: Arkansas, California, Connecticut, Hawaii, Maryland, New York, North Carolina, Oklahoma, Tennessee, Texas, Washington
- **C**: Arizona, Colorado, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Mississippi, Missouri, New Hampshire, New Jersey, New Mexico, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, Virginia, West Virginia
- **D**: Alabama, Alaska, Delaware, Florida, Michigan, Minnesota, Montana, Nebraska, North Dakota, Vermont, Wisconsin
- **F**: Idaho, Nevada, South Dakota, Utah, Wyoming

**Grades for Childhood Obesity**

The report card also gave grades for state efforts regarding childhood obesity:

- **A**: California
- **C**: Arizona, Delaware, Georgia, Illinois, Indiana, Iowa, Louisiana, Maryland, Massachusetts, Michigan, Missouri, Mississippi, New Hampshire, New Jersey, Nebraska, New Mexico, Ohio, Oregon, Rhode Island, South Carolina, Virginia
- **D**: Alabama, Florida, Minnesota, Montana, North Dakota, Wisconsin, Vermont
- **F**: Alaska, Idaho, Nevada, South Dakota, Utah, Wyoming

**Making the Grade - or Not**

The report card comes from the University of Baltimore’s Obesity Initiative. Grades were based on legislation introduced and/or passed by the states on eight topics: nutrition standards; vending machine usage; body mass index (BMI) measured in school; recess and physical education; obesity programs and education; obesity research; obesity treatment in health insurance; and obesity commissions. The researchers looked at each state’s most recent legislative session.

To receive an "A," states had to successfully pass a law related to obesity. Points were awarded if legislation was introduced but not passed. "Introducing legislation at least indicates some awareness and the presence of a will directed to controlling obesity," notes the report card.

Researchers working on the report card included Kenneth R. Stanton, PhD, MBA, an assistant professor of finance at the University of Baltimore’s business school.
This trend does not have to continue but we all need to do our part to turn things around.

If you think your child is overweight, the first and most important thing is to have them examined by their pediatrician. Once it has been determined that your child is physically fit other than the weight problem, Surgeon General Richard Carmone suggest using this guideline:

GENERAL SUGGESTIONS

- Let your child know he or she is loved and appreciated whatever his or her weight. An overweight child probably knows better than anyone else that he or she has a weight problem. Overweight children need support, acceptance, and encouragement from their parents.
- Focus on your child's health and positive qualities, not your child's weight.
- Try not to make your child feel different if he or she is overweight but focus on gradually changing your family's physical activity and eating habits.
- Be a good role model for your child. If your child sees you enjoying healthy foods and physical activity, he or she is more likely to do the same now and for the rest of his or her life.
- Realize that an appropriate goal for many overweight children is to maintain their current weight while growing normally in height.

PHYSICAL ACTIVITY SUGGESTIONS

- Be physically active. It is recommended that Americans accumulate at least 30 minutes (adults) or 60 minutes (children) of moderate physical activity most days of the week. Even greater amounts of physical activity may be necessary for the prevention of weight gain, for weight loss, or for sustaining weight loss.
- Plan family activities that provide everyone with exercise and enjoyment.
- Provide a safe environment for your children and their friends to play actively; encourage swimming, biking, skating, ball sports, and other fun activities.
- Reduce the amount of time you and your family spend in sedentary activities, such as watching TV or playing video games. Limit TV time to less than 2 hours a day.

HEALTHY EATING SUGGESTIONS

- Follow the Dietary Guidelines for healthy eating (www.health.gov/dietaryguidelines).
- Guide your family's choices rather than dictate foods.
- Encourage your child to eat when hungry and to eat slowly.
- Eat meals together as a family as often as possible.
- Carefully cut down on the amount of fat and calories in your family's diet.
- Don't place your child on a restrictive diet.
- Avoid the use of food as a reward.
- Avoid withholding food as punishment.
- Children should be encouraged to drink water and to limit intake of beverages with added sugars, such as soft drinks, fruit juice drinks, and sports drinks.
- Plan for healthy snacks.
- Stock the refrigerator with fat-free or low-fat milk, fresh fruit, and vegetables instead of soft drinks or snacks that are high in fat, calories, or added sugars and low in essential nutrients.
- Aim to eat at least 5 servings of fruits and vegetables each day.
- Discourage eating meals or snacks while watching TV.
- Eating a healthy breakfast is a good way to start the day and may be important in achieving and maintaining a healthy weight.

IF YOUR CHILD IS OVERWEIGHT
• Many overweight children who are still growing will not need to lose weight, but can reduce their rate of weight gain so that they can "grow into" their weight.

• Your child's diet should be safe and nutritious. It should include all of the Recommended Dietary Allowances (RDAs) for vitamins, minerals, and protein and contain the foods from the major Food Guide Pyramid groups. Any weight-loss diet should be low in calories (energy) only, not in essential nutrients.

• Even with extremely overweight children, weight loss should be gradual.

• Crash diets and diet pills can compromise growth and are not recommended by many health care professionals.

• Weight lost during a diet is frequently regained unless children are motivated to change their eating habits and activity levels for a lifetime.

• Weight control must be considered a lifelong effort.

• Any weight management program for children should be supervised by a physician.

Recommended Reading:

Disease Proof Your Child by Dr. Joel Fuhrman