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Proven Family-Based Interventions in the Treatment of Pediatric Obesity

Sarah Winter

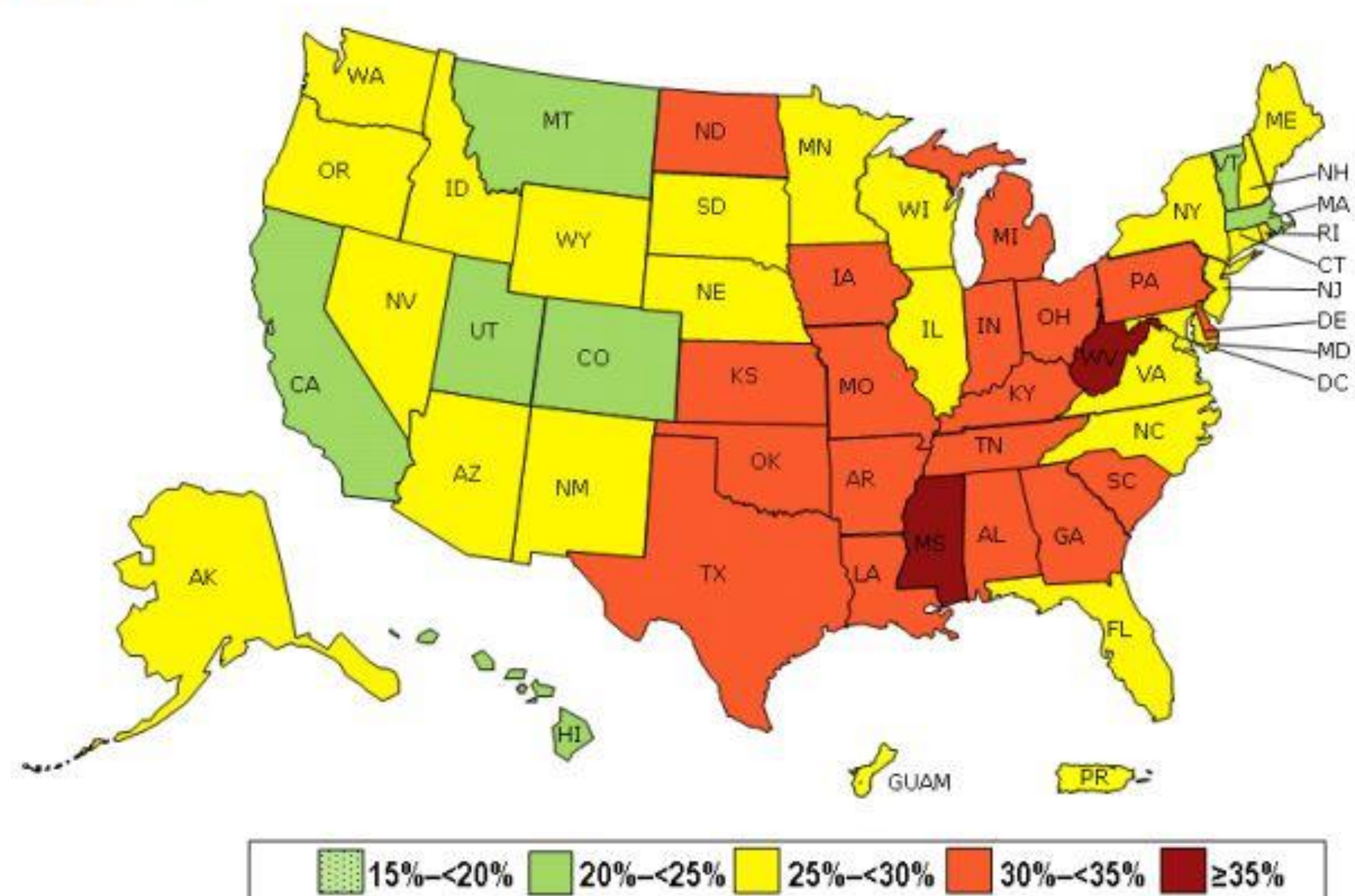
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Abstract

- Childhood obesity continues to be ever expanding.
- This is leading to increasing health care needs and costs.
- Despite numerous interventions, the rates continue to climb.
- The purpose of this study is to identify family-based childhood obesity interventions that are proven to decrease the rates of childhood obesity.
- A literature review explores multiple different family-based childhood obesity interventions.
- The effective interventions are examined closely to discover commonalities between the interventions.
- Family-based interventions that decrease childhood obesity share similar attributes.
- The proven interventions may indicate the need to focus coordination of care with the patients and their families.

Prevalence* of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2013



Source: cdc.gov

Introduction

Childhood obesity rates are increasing across the United States. Obese children are at increased risk for poor self-esteem, social problems, sleep apnea, joint problems, hypertension, and hyperlipidemia. They also have higher rates of adult obesity.

Statement of the Problem

Studies are needed to assess what interventions will improve the rates of childhood obesity.

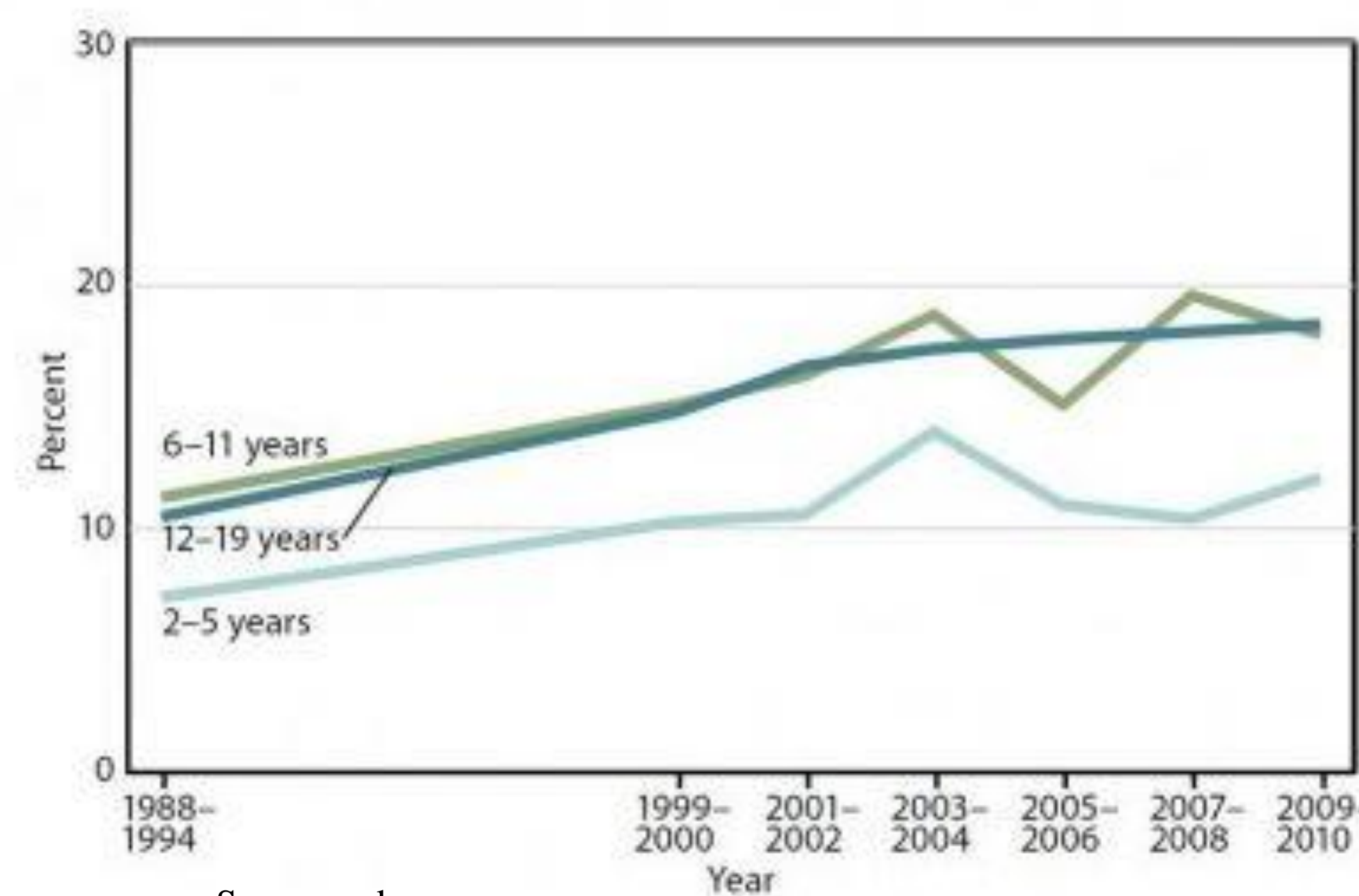
Research Questions

- In obese children, what are the effects of family-based weight loss interventions on the reduction of body mass index compared to non-family-based weight loss interventions?
- What family-based weight loss interventions have the greatest post-intervention impact on childhood obesity?

Literature Review

- The pathophysiology of childhood obesity is complex with numerous risk factors being linked to the disease process.
- Childhood obesity is classified as being greater than the 95th percentile with the 85th to 95th percentile being classified as overweight.
- Odds ratio is approximately three for having an obese child if one parent is obese. Odds ratios is 10 for childhood obesity if both parents are obese.
- According to McCance et al. (2010), “Mechanisms contributing to the imbalance of energy intake in relation to energy expenditure and the multiple pathogenic effects of excess adipose tissue are not completely understood.”
- Several hormones work to control appetite, satiety, and body weight. Imbalances in these hormones have been linked to obesity.
- Different studies focused on different interventions to target childhood obesity: family factors, dietary, and activity.
- Post-intervention comparisons were completed on family-based and nonfamily-based interventions.

Childhood Obesity Prevalence



Source: cdc.gov

Discussion

- Childhood obesity and the treatment of the disease are both complex issues. Approaches to treating childhood obesity target multiple factors that impact the obesity picture.
- In obese children, family-based interventions tend to have a greater reduction of body mass index compared to non-family-based interventions.
- Family-based interventions that involved parents with higher motivation or physical activities levels showed statistically significant data in improving childhood obesity.
- More intense interventions with higher levels of parental involvement also proved to have a higher likelihood of improving childhood obesity.



Applicability to Clinical Practice

- Knowing that family-based interventions with assistance from outside of the doctor's office are proven to improve childhood-obesity is key.
 - Assess the family dynamics and plan accordingly.
 - Consider involving the entire family and suggest regular meetings with a dietitian or personal trainer.
 - Close follow-up during the initial intervention is needed.
 - Reinforce that these are lifestyle modifications, and that they do not stop once improvement is seen.
 - This may be a time consuming topic, but it is one that is important enough to spend the time on.

thanks . . .

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