



Childhood Obesity: A Healthier Future

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Obesity is a **chronic disease**.

Obesity is not:

- Laziness
- Lack of knowledge
- A moral failure
- Caused by just one thing



What does it mean to think of obesity as a **disease**?

Obesity is:

- Complex
- Chronic—and requires lifelong management
- Treated in multiple ways: nutrition, exercise, medication, surgery
- Cause of many other diseases
- Best treated early to prevent or treat obesity-related diseases



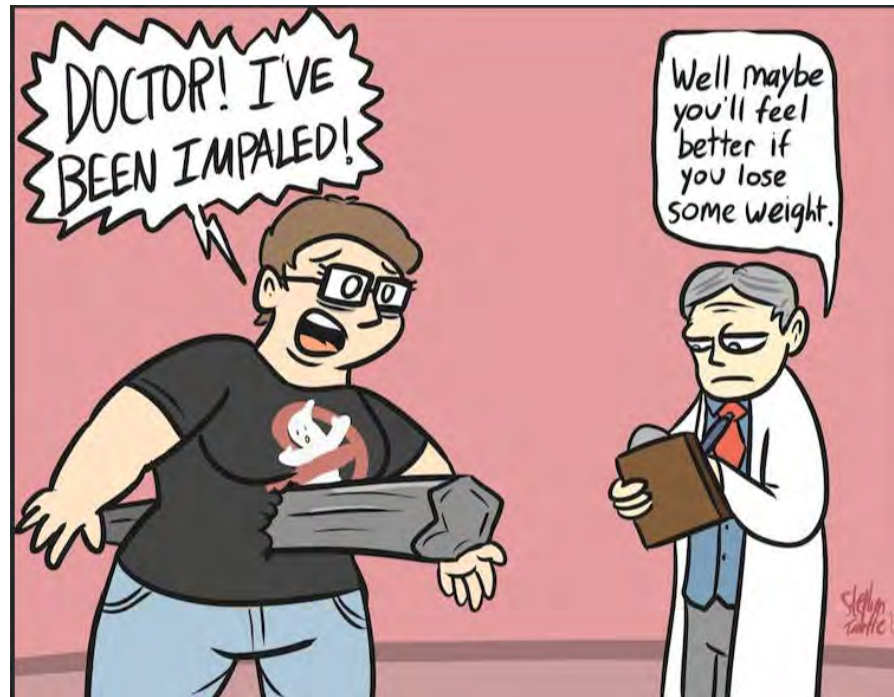
Why do we **worry** about obesity in children?

Obesity has been known to cause or increase a child's chances of:

- Depression and anxiety
- Decreased school performance
- Diabetes
- Sleep apnea
- High blood pressure
- High cholesterol
- Fatty liver disease
- Eating disorders
- Early puberty
- PCOS
- Hypogonadism
- Gynecomastia
- Periodontitis
- Multiple sclerosis
- Renal disturbance
- GERD
- Skin concerns

Bias is also a major concern.

Our society tends to blame every ill on a person's weight.



What are the **causes** of obesity in children?

**It's often a combination of things.
Emerging research points to:**

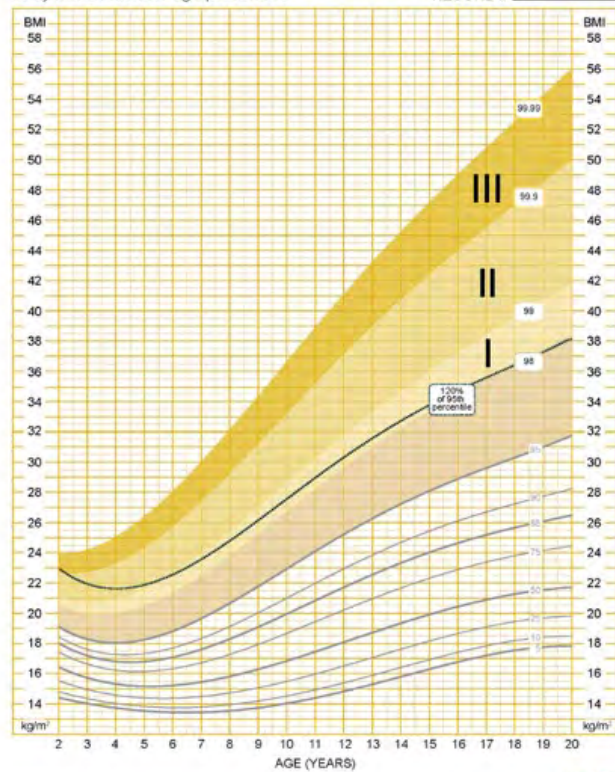
- Each generation producing larger mothers—a cycle
- Genetic abnormality
- Maternal insulin resistance
- C-section
- Microbiome: First 2 years, then development after
- Environmental toxins
- Bottle-feeding
- Breastfeeding if mother has gestational diabetes
- Introduction of solid foods before 4 months
- Food as a reward
- Lack of sleep
- Lack of physical activity
- Early antibiotic exposure

We use growth charts to **diagnose** obesity in children.

Girls: Ages 2–20 years

Body mass index-for-age percentiles

NAME _____
RECORD # _____



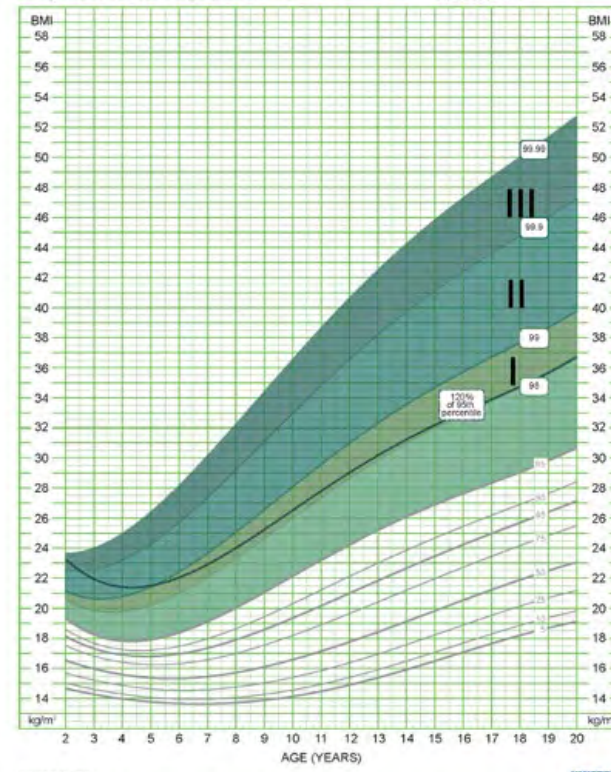
December 15, 2022
Data source: National Health Examination Survey and National Health and Nutrition Examination Survey.
Developed by: National Center for Health Statistics in collaboration with National Center for Chronic Disease Prevention and Health Promotion, 2022.



Boys: Ages 2–20 years

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Healthy Weight: 5th-84th percentile

Overweight: 85th-94th percentile

Obesity: 95th-99th percentile

Class I Obesity: 95th percentile to 120% of 95th percentile

Class II Obesity: 120% to 140% of 95th percentile

Class III Obesity: More than 140% of 95th percentile

What are some physical signs of obesity in children?

Acanthosis Nigra



Striae



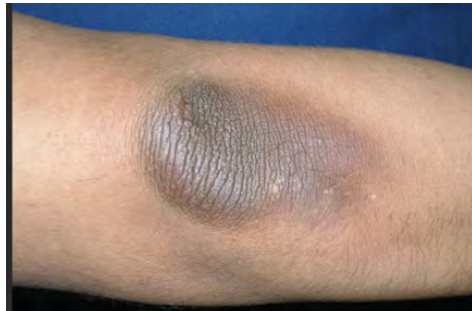
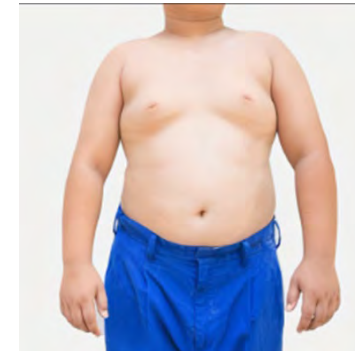
Hirsutism



Tonsillar Hypertrophy



Gynecomastia



There are **five goals** when treating childhood obesity.

1. Develop healthy eating habits
2. Prevent future health problems
3. Improve health and quality of life
4. Improve body composition
5. Improve body image and self esteem



At MetroHealth, we take an **age-appropriate approach** to treating obesity.

Intensive Lifestyle Therapy	Medication	Surgical Options
<ul style="list-style-type: none">• Education• Assessment: complications, nutrition, physical activity, psychological, environmental• Focus on the family	<ul style="list-style-type: none">• As early as age 10• Helps with:<ul style="list-style-type: none">• Brain/gut connection• How body eliminates fat• Feeling fuller	<ul style="list-style-type: none">• As early as age 16

Try these tips for a **healthy childhood diet.**



Milk and milk products:
2.5-3 cups/day



Vegetables:
1.5-3+ cups/day



Meats and protein:
4-6 oz/day



Fats and oils:
4-6 tsp/day



Breads, cereals, starches:
5-7 oz/day



Miscellaneous sweets:
None



Fruits:
1.5-2 cups/day

The **MATCH Clinic** helps families with obesity.

- Family-focused weight management
- Four obesity medicine-certified med-peds providers
- Seeing parents and children together



Assessment—Goal Setting—Treatment

Myth: Eat less, do more.

Fact: Eating right and exercising is important, but:

- Eating less doesn't mean eating healthy: quality and timing
- Many causes of obesity

Myth: If I don't eat, I'll be OK.

Fact: Your focus should be on your health. A lower weight isn't always a healthy weight.

Myth: Obesity is a sign of laziness.

Fact: The people we see are trying—and have tried many things. Let us help you find the treatment that fits you!

Myth: Medications cannot be used in children

Fact: Based on age, medications may be used, but need to be monitored closely for effectiveness and tolerance

Phentermine/Topiramate (Qsymia) - ≥ 12 years of age

Phentermine (Adipex) - ≥ 16 years of age

Liraglutide (Victoza and Saxenda) - ≥ 12 years of age

Semaglutide (Ozempic and Wegovy) - ≥ 12 years of age

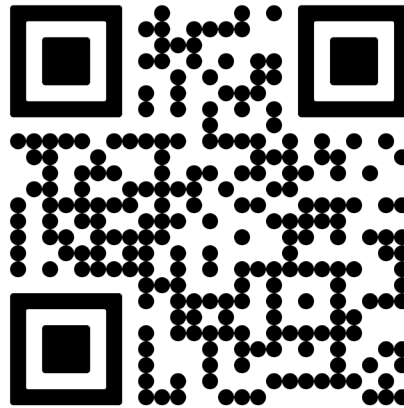
Orlistat (Alli and Xenical) - ≥ 12 years of age

Setmelanotide – (Imcivree) ≥ 6 years of age

Naltrexone/Bupropion (Contrave) - > 18 years of age

Tirzepatide- (Mounjaro and Zepbound) > 18 years of age

MetroHealth is **here to help.**



metrohealth.org/weight-loss

MetroHealth Weight Loss Center
MetroHealth MATCH Clinic
216-778-7433

Your Questions:

How do cultural and biological differences affect childhood obesity?

Your Questions:

**How do mental health issues
impact childhood obesity?**





ABOUT METROHEALTH

Founded in 1837, MetroHealth is leading the way to a healthier you and a healthier community through service, teaching, discovery and teamwork. Cuyahoga County's public, safety-net hospital system, MetroHealth meets people where they are, providing care through five hospitals, four emergency departments and more than 20 health centers. Each day, our nearly 9,000 employees focus on providing our community with equitable healthcare—through patient-focused research, access to care and support services—that seeks to eradicate health disparities rooted in systematic barriers. **For more information, visit metrohealth.org.**

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