Most Well-Child Visits Skip Obesity Prevention

BY DENISE NAPOLI Assistant Editor

WASHINGTON — Even as pediatric obesity is on the rise, fewer than a third of nonobese children in the United States are likely to be receiving obesity prevention counseling at well-child visits, based on a representative sample presented in a poster by Dr. Chris Branner at the annual Digestive Disease Week.

Ethnicity plays a role in whether children

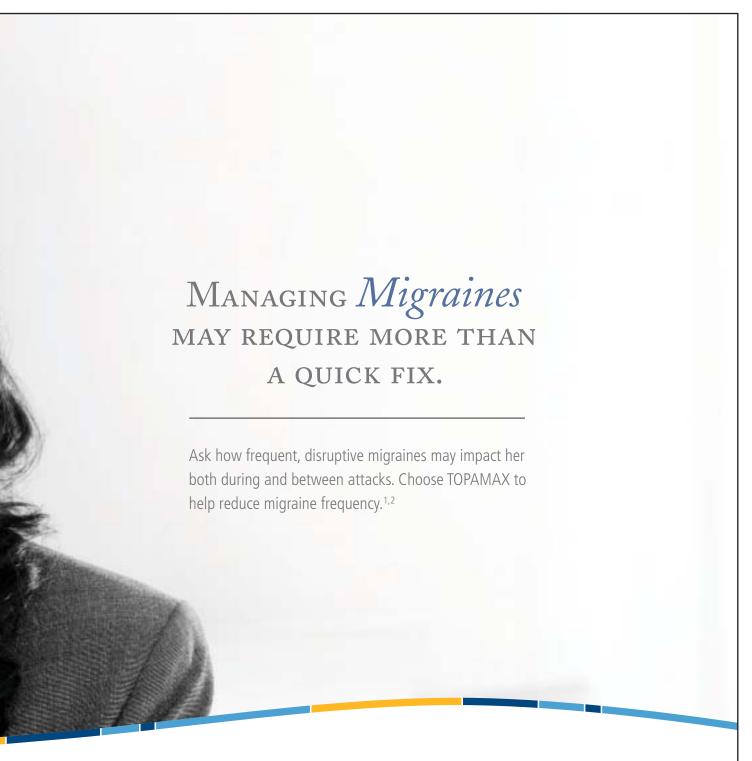
get the information they need about preventing overweight and obesity: Just 15% of Hispanic pediatric patients received counseling, versus 25% of whites and 27% of blacks. Region and pay type also affected whether patients received counseling.

Dr. Branner, of Vanderbilt University Medical Center, Nashville, Tenn., and colleagues, analyzed results from the National Ambulatory Medical Care Survey (NAMCS) and National Hospital Ambulatory Medical Care Survey (NHAMCS) during the period 2001-2004 for patients aged 4-18 years. Obesity prevention counseling was defined as the combined delivery of diet and nutrition and exercise counseling.

Of more than 55.6 million well-child visits of patients aged 4-18 years tallied in the two surveys, just over 13.5 million visits (24%) included obesity prevention counseling (OPC). Overall, 91% were recorded as part of the NAMCS, and while 26% involved counseling, just 12% of those visits in a hospital setting and recorded in the NHAMCS involved preventive counseling.

Region of the United States affected whether children received OPC, with 30% of visits in the Northeast including counseling versus 13% in the West, 20% in the East, and 30% in the South.

Twenty-seven percent of visits covered by private insurers involved OPC, compared with 19% of Medicaid-insured visits, and just 15% of self-pay visits; 6% were listed as "other" in terms of type of payer, 14% of which had OPC.





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References: 1. Silberstein SD, Neto W, Schmitt J, Jacobs D, for the MIGR-001 Study Group. Topiramate in migraine prevention: results of a large controlled trial. *Arch Neurol.* 2004;61: 490-495. **2.** Brandes JL, Saper JR, Diamond M, et al, for the MIGR-002 Study Group. Topiramate for migraine prevention: a randomized controlled trial. *JAMA.* 2004;291:965-973.

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