

### Weight-Related Comorbid Conditions That Were Undiagnosed by Primary Care Providers

Hyperinsulinemia/abnormal blood glucose (n = 20)	90%
Acanthosis nigricans (n = 38)	82%
Hypertension (n = 18)	78%
Elevated blood pressure without hypertension (n = 24)	62%
Hyperlipidemia (n = 41)	59%
Other* (n = 18)	33%

\*Includes asthma, sleep problems, depression, menstrual problems, and abnormal liver function tests.

Note: Data on 89 children who often had more than one comorbidity.

Source: Dr. Auron-Gomez

# Comorbidity Undiagnosed In Overweight Children

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TORONTO — Only about one-third of weight-related comorbidities were identified by generalist providers before referral to a weight management program, Dr. Moises Auron-Gomez reported at the annual meeting of the Pediatric Academic Societies.

“The majority of obesity-related comorbid conditions appear not to be identified by primary pediatric providers,” said Dr. Auron-Gomez. These included some that are relatively easy to spot, such as acanthosis nigricans and hypertension.

Dr. Auron-Gomez and colleagues found an average of 1.8 conditions per child upon referral for weight management; on average, 0.6 conditions were detected prior to referral and 1.2 conditions were detected after referral.

“This means that most of the patients sent to our clinic had at least one [previously undetected] weight-related comorbidity,” said Dr. Auron-Gomez of the MetroHealth Medical Center in Cleveland, where the study was conducted.

Weight-related comorbid conditions noted in the primary care patient charts of 89 overweight children who were referred to a pediatric nutrition and exercise program were compared with conditions identified at the first clinic visit.

Children were referred to the clinic if they had body mass indexes above the 85th percentile for age, gender, height, and weight. Clinic screening was according to established guidelines for identifying comorbidities in overweight and obese pediatric patients.

In total, 168 conditions were identified. Of these, 57 (34%) were identified prior to the first weight management clinic visit, and 111 (66%) were detected at the first visit.

Only asthma (12 cases) was identified 100% of the time before referral for weight reduction.

Patients were generally seen within 1 month of referral, indicating that new conditions were unlikely to arise between the last primary care visit and the first specialist visit.

“Guidelines-based screening of children attending a weight management clinic can identify many previously undiagnosed weight-related comorbid conditions,” said Dr. Auron-Gomez.

The implications of these findings—if action is taken—include quicker referral for weight management in overweight and obese children, more effective weight management, and decreased weight-related morbidity, said Dr. Auron-Gomez.

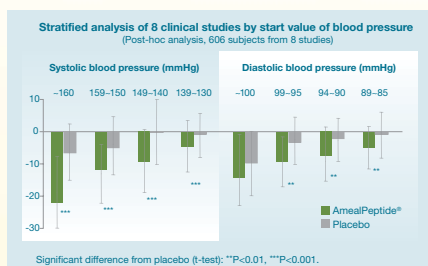
## Nutrition Campaign Targets ‘Tweens’

The Food and Drug Administration’s Center for Food Safety and Applied Nutrition has launched a public education program, branded “Spot the Block,” that encourages “tweens” (youth aged 9-13 years) to read the “Nutrition Facts” block on food labels in order to make more healthful food choices. The campaign, which uses online announcements featuring television cartoon characters, can be accessed at [www.cfan.fda.gov/~dms/spotov.html](http://www.cfan.fda.gov/~dms/spotov.html).

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Reference: 1. Data on file. Post-hoc analysis adapted from AmealPeptide® clinical studies.

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