IOM Critical of Efforts to Fight Childhood Obesity

BY JANE ANDERSON
Contributing Writer

Despite some success stories, efforts to combat childhood obesity remain fragmented, and the policies and programs that are in place are not being evaluated, making it difficult to identify what works, according to a new report from the Institute of Medicine.

The federal government has failed to take the lead on tackling the issue, said the report, "Progress in Preventing Childhood Obesity: How Do We Measure Up?"

"There has been progress, but it's not enough, it's not fast enough, and it hasn't been taken to scale," said Dr. Jeffrey Koplan, vice president for academic health affairs at Emory University in Atlanta, who chaired the IOM committee that wrote the report.

The document, a follow-up to a 2005 report on the same topic, was designed to assess progress in childhood obesity prevention. It finds that national awareness has increased and that short-term objectives are being achieved—for example, some school districts are restricting availability of sweetened soft drinks, and communities have built bike paths to encourage physical activity.

But these efforts aren't enough to turn around a multifaceted public health problem that took decades to develop, panel members said.

Currently, one-third of American children and youth are either obese or at risk for obesity. Over the past 30 years, the obesity rate nearly has tripled for children aged 2-5 years (from 5% to 14%) and youth aged 12-19 years (5% to 17%), and nearly has quadrupled for children ages 6-11 years (from 4% to 19%).

Despite efforts to improve nutrition and increase physical activity on the local level, few if any of these initiatives are being evaluated for efficacy, said the report. Federal, state, and local governments should ensure that such evaluation takes place, the committee members said.

The members called on families and caregivers to commit to promoting healthful eating and regular physical activity, and on governments at all levels to mobilize resources, both by convening high-level task forces to identify priorities and coordinate efforts and by sustaining successful programs.

That's where the federal government has lapsed, Dr. Koplan said. The IOM report highlighted the VERB: It's What You Do campaign, a successful effort sponsored by the Centers for Disease Control and Prevention, which ended in September because of a lack of funding.

Study findings have shown that the campaign, launched in 2002, was successful in raising awareness of its pro–physical activity message among children aged 9-13 years. Higher awareness of VERB was associated with higher free-time physical activity levels, according to the findings (Pediatrics 2005;116:e277-84).

But the VERB campaign, which received $36 million in 2004 and $59 million in 2005, was not included in the 2006 federal budget.

"This is something there should be outrage over," said Dr. Koplan. "This campaign was able to get children and youth to get more physical activity. It was found to be effective. If we had a vaccine that worked and we put it on a shelf, people would be outraged over it."

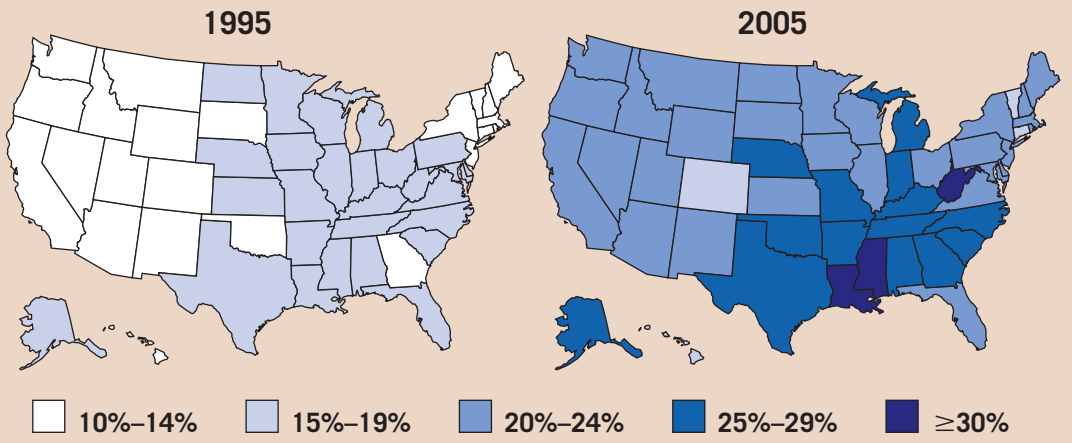
The panel called for the program to be reinstated.

It also highlighted professional organizations that actively promote obesity prevention.

For example, the committee found that physicians who hold public office often are proponents of obesity prevention measures, and groups such as the American Academy of Family Physicians and the American Academy of Pediatrics offer tools for preventing and managing obesity. In addition, major health plans increasingly are emphasizing obesity prevention for children and youth. ■

DATA WATCH

A Heavier Burden: In Just a Decade the Percentage of Adults With Obesity Has Risen Drastically



Note: Percentage of individuals with a BMI of at least 30 kg/m², based on self-reported weight and height estimates.
Source: Centers for Disease Control and Prevention

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Child Exercise Guidelines Need a Workout

BY KATE JOHNSON
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Exercise guidelines for children and adolescents should recommend more physical activity than they do currently, according to the authors of a new study.

"To prevent clustering of cardiovascular disease risk factors, physical activity levels should be higher than the current international guidelines of at least 1 hour per day of physical activity of at least moderate intensity," wrote Lars Bo Andersen, Ph.D., from the Norwegian School of Sport Sciences, Oslo, and colleagues (Lancet 2006;368:299-304). "Achieving 90 minutes of daily activity might be necessary for children to prevent insulin resistance, which seems to be the central feature for clustering of cardiovascular disease risk factors."

The cross-sectional study included data from 1,732 children aged 9 and 15 years—"on either side of puberty"—from Estonia, Denmark, and Portugal who were enrolled in the European Youth Heart Study. The researchers evaluated a combination of cardiovascular risk factors to calculate a combined risk factor score for each child. Factors that were measured included blood pressure, waist circumference, weight, height, pubertal status, skinfold thickness, cholesterol level, insulin resistance, and aerobic fitness. Each child's physical activity level was monitored with an accelerometer for 4 consecutive days.

The study found that cardiovascular risk decreased with increasing levels of physical activity, such that subjects in the most active quintile of physical activity showed the lowest risk. When compared with the most active quintile of subjects, risk in the third quintile and lower was significantly higher.

Thus, those in the least active quintile had an odds ratio of 3.29 for cardiovascular risk, those in the second quintile had an OR of 3.13, and those in the third quintile had an OR of 2.5, compared with the most active subjects. Subjects in the fourth quintile of physical activity did not have a significantly raised cardiovascular risk compared with the most active quintile. In 9-year-old children, this highest level of activity corresponded to 116 minutes, and in 15-year-olds, it corresponded to 88 minutes of moderate to vigorous intensity activity—the equivalent to a walking speed of 4 km/hour—every day.

"Whether the recommendation should be that all children ought to be as physically active as children in this quintile is a subjective judgment but the present data show consistently raised risk in the three lowest quintiles," the authors wrote.

In an accompanying commentary, Dr. Ram Weiss and Dr. Itamar Raz from Hadassah Hebrew University Hospital in Jerusalem noted the consistency of the study's findings across all three countries and potentially different dietary habits. They also noted that the association between physical activity and cardiovascular risk "was independent of the degree of adiposity and was similar for lean and overweight children, emphasizing the effect of physical activity as an independent factor and not only as a protective measure against obesity" (Lancet 2006;368:261-2).

The study's authors noted that previous studies on which the current exercise guidelines were based depended on subjective recall of physical activity and often measured only one cardiovascular risk factor. "Clustering of cardiovascular disease risk factors has recently proven a better measure of cardiovascular health in children than single risk factors." ■

Minorities Rely on Diet, Exercise to Shed Weight

DALLAS — African Americans and Hispanics were more likely to use diet and exercise to lose weight than to seek counseling from a dietitian or try prescription medications, according to a poster presented at the annual meeting of the National Medical Association.

Among individuals who had attempted to lose weight, about 69% of African American adults and 61% of Hispanic adults said they had tried exercise. And eating healthier as a weight loss method was reported by 59% of African Americans and 51% of Hispanics.

But fewer reported seeking counseling from a dietitian, with 12% of African Americans and 8% of Hispanics citing that approach as a weight loss method. Only about 8% of individuals in both groups had ever used prescription medications for weight loss.

The study, conducted by investigators at GlaxoSmithKline Consumer Healthcare of Pittsburgh and consultants affiliated with the company, included 604 African Americans and 600 Hispanics who were surveyed by telephone about their weight loss strategies. All of the participants were overweight or had been overweight.

A significantly greater proportion of African American respondents were overweight or obese, compared with the Hispanics surveyed. Of the 604 African Americans who participated, 31% were overweight, with a body mass index (BMI) between 25 and 29.9 kg/m², and 54% were obese, with a BMI of 30 or more. Among the 600 Hispanic respondents, 38% were overweight and 34% were obese. The BMI calculations were based on self-reported height and weight.

—Mary Ellen Schneider