Overcoming Childhood Obesity: How parents can help... or hurt

Childhood obesity rates continue to rise in the United States, but this doctor claims parents can help turn that around.

In the United States, childhood obesity is a big concern — and it's growing bigger.

Children are at a greater risk of developing obesity than ever before. A recent _study_ found that lack of exercise, fast food, and number of hours spent watching television are all factors contributing to the epidemic.

Yet, Dr. Joseph Galati, author of "_Eating Yourself Sick: How to Stop Obesity, Fatty Liver and Diabetes from Killing You and Your Family_," suggests another factor is partly to blame: parents.

The source, Dr. Galati, informs Heathline is that parents aren't paying full attention to what they feed their kids. Families aren't eating enough home-cooked meals and parents aren't serving healthy snacks.

Dr. Galati, a liver specialist in Houston, claims parents need to step up and assume responsibly. He also urges doctors to be more forceful with their assessments.

"Most physicians do not have the spine to tell the entire family, you are all in trouble, you're all going to die early," he says.

Dr. Galati may have a point. But the American Academy of Pediatrics (AAP) counsels a gentler approach.

"Obesity, is a medical diagnosis with health consequences, and so critical for children and families to understand the present and future health liabilities," a 2017 policy statement *notes*. "But the information should be given in a sensitive and supportive manner."

"Guilt and blame don't inspire long-term healthy changes, they make people feel bad," Texas pediatrician Stephen Pont, co-author of the AAP statement, says. He encourages children and families to make small changes as a family that stick and "keep it positive."

It's a way of life

Obesity is a risk factor of the current American lifestyle and that's heavily reflected in the habits of our children.

There are several ways to make changes, here are three to name a few:

- **regular dinners and healthy eating**
- **increasing physical activity**
- **plenty of sleep and regular bedtimes**

American kids are *less likely to bike or walk to school* than ever before.

From the ages of eight to eighteen, they spend an average of *7.5 hours a day* wrapped up in video games, computers, TV, cell phones, and movies. During those hours they typically tend to snack as well.

About one in five American children/teens cope with obesity, compared to about a third of adults.

Recently, obesity rates among young children seemed to be dropping, but a *study* in the journal Pediatrics in March, using 2016 data, reported that this wasn't true.

In fact, severe obesity among children ages two to five has jumped since 2013.

Among sixteen to nineteen year olds, 41.5% live with obesity. More than 4% fall into the heaviest group, "Class III."

Some parents dismiss plumpness as "baby fat," but kids tend not to shrink. In a *study* of almost 4,000 public school students, nearly all 10th graders with obesity were above normal weight in 5th grade.

Instead, the experts advise a more realistic approach. They suggest concerned parents use tools such as the Centers for Disease Control and Prevention's calculator, including healthy standards for different ages and heights, to assess their child's risk.

Dr. Frank Biro, at the Cincinnati Children's Hospital Medical Center's rule of thumb is that if after the age of one, a girl's waist is more than 60% of her height, both measured in inches, she is "at risk of having metabolic complications and of being overweight."

Recent research shows childhood obesity may become an even bigger health concern in the future.

According to projections, in a 2017 *study*, close to 60% of all today's American children could be living with obesity by the time they are thirty five.

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The risk to your child's health

As a liver specialist, Dr. Galati often sees adults with obesity who have been diagnosed with fatty liver disease and when those patients tell him they have children, he starts asking questions. Oftentimes, Dr. Galati finds that the kids of those patients are also on the path to developing obesity. That's when Dr. Galati warns them that their kids are likely to die sooner than they would if they lost weight.

Much of the *evidence* backs up Dr. Galati's claim that childhood obesity can shorten a person's life, upping their chances of heart disease, *stroke*, liver disease, and *cancer*.

Modern medicine and an expanding economy pushed U.S.

life expectancy up expeditiously for more than a century, but that increase began to slow when more Americans became overweight.

The research shows that the U.S. life expectancy at birth has actually *dropped* in the last two years.

The problem is worse in regions of the South and the Midwest where more people have obesity, *notes* Dr. David Ludwig, an endocrinologist and obesity specialist at Boston Children's Hospital.

Dr. Ludwig, who is also an author of the cookbook "*Always Delicious*," *contends* that the "downward trend in longevity will almost absolutely quicken as the current generation of children — with higher body weights from earlier in life than ever before — reaches adulthood."

Health problems we associate with middle age are showing up earlier. Dr. Galati has begun to see teenagers fretting of fatigue and nausea. More often than not, their blood work also demonstrates they have a fatty liver.

Up to 40% of children with obesity have nonalcoholic fatty liver disease (NALD), which can grow to cirrhosis of the liver.

One group's *clinical guidelines* favors screening children with obesity for NALD between ages nine and eleven, and screening overweight children with prediabetes, a big belly, or sleep apnea. NALD seems linked to the size of your waist-line as much as your overall weight.

Starting early

A mother's responsibility for a child's weight may begin as early as the womb. In agreement with one large 2012 German *study*, expectant mothers who gain too much weight during pregnancy increase their child's chances of being overweight by 28% before they turn six years old.

Minimizing such things as antibiotics for babies and toddlers might help. *Evidence in mice* and *children under two* surmises that antibiotics can alter gut bacteria in an unhealthy way.

Fighting the trends

How can you benefit your kids and help them steer clear of this unhealthy trend?

Family dinner is a good start, according to much research.

In a *study* of 8,550 four year olds, findings showed that those who regularly ate dinner as a family — and also had limited screen-time and enough sleep — were 40% less likely to have obesity.

Children who eat with their families also have better grades, family relationships, and overall health, Dr. Galati points out.

The American Academy of Pediatrics (AAP) advocates for "screen-free" zones in children's bedrooms, don't allow TV during dinner, and only allow one or two hours a day of TV or video games.

Tapping fingers on a keyboard or jiggling a mouse doesn't count as exercise. The CDC *suggests* a target of doing at least an hour of physical activity a day, most of it aerobic, and muscle and bone-strengthening activities like skipping rope, gymnastics, and pushups at least three days a week.

Look into game-oriented activity and step trackers. You might also use point systems attached to rewards. Case in point, if your son is active for a half hour a day four or five nights a week, he might get to pick a family movie night. "It's ideal if the reward is not an unhealthy food," Pont says.

Stick to set bedtimes and keep electronics away from bed. Fatigue usually leads to overeating and can prime the body for weight gain. Overweight children may need treatment for sleep apnea as well.

"When you do not sleep enough, your inflammatory markers go up and raises your blood pressure, insulin and cortisol," Dr. Galati says.

When you eat out, you might talk about how much portion sizes have grown bigger than in the past. Make it a rule to share entrees or have a child eat an appetizer as their main course. Turn down the bread basket, order salads, avoid rich sauces, and share or skip dessert.

But cooking food at home is the best way to control fat and sugar, Dr. Galati says. "When parents pick up the kid from an activity, they say, 'I don't have time to cook dinner, let's go to the drive through, let's go to the Cheesecake Factory and take something home.' They are consuming high-calorie, high-fat food three or four times during the week," Dr. Galati said. "Naysayers say to me you're living in a fantasy world if you think parents are going to start cooking dinner again. I say that we have to get back to the basics."

Dr. Galati argues that children like home-cooked healthful food. He recalls when his mother would serve soups and fruit salads to his friends growing up on Long Island. "The kids would come over looking for the cookies and chips," but they'd love his mother's food. "My mother would invariably get a phone call from the other kid's mother asking for the recipe," he said. "At her funeral, they all were telling me they remembered what she made for them."

Dr. Galati believes in cultivating kids to think of food in two distinct categories: "Earth food came from the ground or had a mother. Man food comes in a box or can."

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— Dr. Stephen Pont

"It's time for parents to start educating themselves and their children about food and have everyone start making better choices," Dr. Galati says. "Otherwise, the consequences will be a lot direr than what most parents probably realize."

Stephen Pont, medical director of the Office of Science and Population Health for the Texas Department of State Health Services, urges doctors to avoid any kind of fat-shaming. A number of _studies_ have documented "anti-fat bias" among medical professionals.

Pont points out that shame, guilt, and blame backfire.

Johns Hopkins had a team that did a _national survey_ of 600 higher-than-normal weight adults to test that thesis. The result: If your primary care doctor talked to you about your weight and you felt judged, you were more likely to *try* to lose weight, less likely to really succeed. About 13.5 % of those who felt judged in that conversation went on to lose at least 10% of their weight year. But among those who didn't feel judged, a larger group — more than 20% — reached that goal.

Pont, who struggled with his own weight as a boy, argues that parents should avoid judgment as well.

"Parents should be empathic and say that there's no perfect shape or size," he said.

The goal would be to slowly make healthy changes, rather than adopt an extreme diet that won't last.

Parents can also set an example, improving their own eating habits. "If a parent does something then, it means it is important to the family; if a parent doesn't do something, then it means it is less important," Pont says. "When parents lead the way and create a supportive environment for a child then they are all far more likely to be successful."