

Addressing pediatric weight status in clinic: The need is there but the tools are not.

Jennifer Burns Katafigiotis

MS, Founder & CEO Weight Wellness Center and WWC KIDS, USA

Abstract

An excess in the amount of calories consumed, compared with the amount of calories expended is fueling an epidemic in overweight and obesity in the American family – specifically American children.

Screening for obesity is endorsed by the US Preventive Services Task Force (USPSTF) and American Academy of Pediatrics (AAP). The AAP recommends screening begin at age 2 years, the USPSTF recommends screening begin at age 6 years and older.

Age, gender and activity level appropriate caloric needs in children change frequently and pediatric healthcare providers need to include delivery of appropriate nutrition information as part of their standard of care. Screening for trends in weight gain as well as the prevalence of overweight and obesity in children needs to be reviewed at each encounter. Weight management treatment should be started when the trend in increasing weight surpasses the trend in increasing height.

Despite the urgent need for weight related interventions, pediatric healthcare providers and support staff have been slow to confront this problem. Lack of knowledge and skills to assess and counsel pediatric patients with overweight and obesity, along with time constraints are the main barriers to implementation of a nutrition education and weight management protocol in clinic. Additionally, high overhead costs and low reimbursement of obesity interventions are of concern.

The need to advance nutrition education in the training of allied health care professionals as well as pediatric clinic staff to conduct screenings, assessments and prevention visits and increase the number of contact hours to improve weight measure outcomes is paramount to the reversal of the increasing weight status of American children. The development of a weight management protocol that is easy to implement, age appropriate, evidence based, includes staff training, ongoing support, provides education materials and includes the use of new technologies such as EMR portals and telemedicine to facilitate weight management is needed.

References

1. Aboueid, S., Bourgeault, I., & Giroux, I. (2018). Nutrition and obesity care in multidisciplinary primary care settings in Ontario, Canada: Short duration of visits and complex health problems perceived as barriers. *Preventive medicine reports*, 10, 242–247. doi:10.1016/j.pmedr.2018.04.003
2. Davis MM, Gance-Cleveland B, Hassink S, Johnson R, Paradis G, Resnicow K. Recommendations for prevention of childhood obesity. *Pediatrics*. 2007;120(suppl 4): S229-S253.
3. Hassink SG. Evidence for effective obesity treatment: pediatricians on the right track! *Pediatrics*. 2010;125:387-388.
4. Krebs NF, Himes JH, Jacobson D, Nicklas TA, Guilday P, Styne D. Assessment of child and adolescent overweight and obesity. *Pediatrics*. 2007;120(suppl 4): S193-S228.

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***Corresponding author:** Jennifer Burns Katafigiotis, MS, Founder & CEO Weight Wellness Center and WWC KIDS, USA; Email: [ihsanelyamni11\(at\)gmail .com](mailto:ihsanelyamni11@gmail.com)

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5. Moran R. Evaluation and treatment of childhood obesity. *Am Fam Physician*. 1999;59:861-868; 871-863.
6. Silberberg, M., Carter-Edwards, L., Murphy, G., Mayhew, M., Kolasa, K., Perrin, E. M., ... Menon, N. (2012). Treating pediatric obesity in the primary care setting to prevent chronic disease: perceptions and knowledge of providers and staff. *North Carolina medical journal*, 73(1), 9–14.
7. Spear BA, Barlow SE, Ervin C, et al. Recommendations for treatment of child and adolescent overweight and obesity. *Pediatrics*. 2007;120(suppl 4): S254-S288.
8. US Preventive Services Task Force. Screening for obesity in children and adolescents: US Preventive Services Task Force recommendation statement. *Pediatrics*. 2010;125(2):361–367
9. Williams CL, Campanaro LA, Squillace M, Bollella M. Management of childhood obesity in pediatric practice. *Ann N Y Acad Sci*. 1997;817:225-240.