

# I HAVE A CHILD WITH OBESITY. NOW WHAT?

by Suzanne E. Cuda, MD, ABOM certified

**M**any parents are facing the dilemma of deciding what to do once they realize, or are told, that their child's weight is too high. As a parent, you consider this news in the context of your own life experience, your family's situation and the welfare of your child. If you decide that your child's weight is indeed a problem, and you are ready to address it, you may be wondering where to begin.

Prepare yourself for the loving grandparents who try to insist that the grandchild is just like her parent(s) and will "outgrow it," or the doting aunt who doesn't believe that children should be on "diets." The facts are that children with obesity at age five have a high likelihood of becoming an adolescent with obesity, and then an adult with obesity as well. Few children outgrow their obesity, and the earlier the child is treated – the better the outcome.

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Treatment requires a commitment by the family to be supportive of the dietary and lifestyle modifications that will be made, regardless of what path is chosen to make those changes. Children don't shop for groceries or prepare meals – they are the world's best imitators. What you do, they do. In other words, don't expect to be the armchair director of your child's metamorphosis toward a healthier weight and lifestyle. You've got to participate! Furthermore, the changes you make must be life-long. If you and your family return to old habits, expect your child to regain any weight that he or she may have lost.



# WHAT CAN PARENTS DO TO HELP?

A discussion with your child's primary care provider is a good place to start. If your child's body mass index (BMI) is in the overweight range, defined as a BMI between the 85th and 95th percentile, it may be appropriate to receive treatment in the primary care setting with the help of a registered dietitian. Periodic follow-up is necessary to see if the changes you start to make at home are producing results.

## Create a Healthier Home Environment

Helping your child to manage their weight and health can begin right in your home. Just make sure that you change the diet and exercise plan for everyone at home, too – not just the target child or children.

### To do this, follow some of these tips:

- Make it easier on yourself by going through your pantry and refrigerator and getting rid of snack foods, desserts and any beverages other than milk or water.
- Keep driving when you pass a fast food restaurant.

- Plan your meals and your exercise schedule, and have a fallback plan as well. For example, keep some healthy go-to foods in the refrigerator or freezer just in case you run out of time to cook. Try to cook ahead so you can heat up healthy dishes for those busy days.



- Keep a jump rope at home or have an electronic exercise plan (found on CDs, phones, YouTube, etc.) for those days when you oversleep or can't make it to the gym.



- Take the power cords to the TV, video games and tablets, and don't allow anyone in the house to spend countless hours of time in front of the screen. Don't expect your child to limit themselves from their electronic addiction – there are few adults who can do this and fewer children.

## Find a Healthy Commercial Weight-loss Program

Commercial weight-loss systems are mostly marketed and structured for adults. Some systems offer pre-prepared foods which have the benefit of controlling portion sizes. Unfortunately, those portion sizes may not be appropriate for younger children. Children also have higher requirements for calcium and other nutrients than adults do, so if you decide to try one of these systems for your child, you should consult their primary care provider first.



## Seek Out a Weight Management Center

If you think you need more help, ask your primary care provider for a referral to a pediatric weight management center. There are more than 40 weight management clinics in the U.S., and 30 of these clinics collaborate as part of the Pediatric Obesity Weight Enrollment Registry. These clinics offer multidisciplinary care – usually a medical provider, dietitian, exercise specialist and/or behavioral health provider.

Your child will also be seen more frequently – initially, it may be weekly to monthly, and then it may be every few months. A specific dietary and lifestyle plan will be recommended. If your child has medical or behavioral complications secondary to obesity, these will also be addressed. Even medications and supplements may be used, if necessary. Care in this type of setting is covered by Medicaid and more insurance providers.

## Allow Your Child to Attend a Wellness Camp

Don't live near enough to a pediatric weight management center? You may want to consider a wellness camp. There are multiple camps treating children with overweight and obesity in the U.S., and the length of stay is chosen by the parents. Four to nine weeks is the average range, as they are overnight camps that require separation from the family. Usually, there are weekends that parents and/or siblings can spend at the camp. These camps can offer total immersion – from nutrition education, multiple daily activities, a coach assigned to each camper, cognitive behavioral therapy, a structured diet and more. They are a great opportunity, but with some caveats: it can be difficult to replicate the camp experience once back home, and expenses can also be an issue for some families. The cost of these camps can range from approximately \$8,000 - \$14,000, and this is mostly out-of-pocket.

## Consider an Inpatient Program

There are also a few inpatient programs at locations throughout the U.S. These are residential programs where the child stays at the facility for six weeks to three months. The child receives a lot of individual attention and monitoring, and is placed on a specific diet and exercise plan. Schooling is usually provided in the facility as well. These programs can have dramatic results, but the challenge is learning how to continue the changes made once the child returns home. The programs can also be expensive, but may be covered by some insurance plans.

## Determine if Surgery is Necessary

How about surgery? Bariatric surgery is commonly done in adults with obesity, and the results are generally good – especially right after the procedure. Long-term results are dependent upon maintaining a restricted diet and appropriate activity level. In the U.S., bariatric surgery is being done in adolescents with severe obesity who have completed or nearly completed their growth. Although the number of adolescents receiving procedures is small, it is increasing every year. The most common procedure being done is called gastric sleeve, which involves reducing the size of the stomach but preserving the anatomy of the intestinal tract. Short-term outcomes in adolescents are as good (or better) than those of adults, but it is too soon to say much about the long-term outcomes. However, they seem to be similar to long-term outcomes in adults – in other words, dependent on compliance with diet and exercise. The amount of weight-loss to be expected is half of the excess weight. For example, if the child is 100 pounds overweight, then you could expect a weight-loss of 50 pounds from surgery.

## Conclusion

The good news for our children with obesity is that the treatment options are slowly increasing, and more insurance plans are covering these treatments. Regardless of what treatment plan is chosen, the success of the plan is largely dependent on the family's commitment to making lifelong changes. Helping a child with obesity to achieve a healthier weight can be the single most important health intervention in the life of that child. A decreased weight is directly associated with a decrease in diseases due to obesity such as diabetes, cardiovascular disease, sleep apnea, fatty liver disease, behavioral issues and more.

### About the Author:

*Dr. Suzanne Cuda runs a multidisciplinary pediatric weight management clinic at The Children's Hospital of San Antonio. She is actively involved in research and a full time clinician. She is an Associate Professor of Pediatrics at Baylor College of Medicine and Board certified in General Pediatrics, Adolescent Medicine and Obesity Medicine.*



Obesity Action Coalition

# ABOUT THE OBESITY ACTION COALITION (OAC)

The Obesity Action Coalition (OAC) is a National non-profit organization dedicated to giving a voice to individuals affected by obesity and helping them along their journey toward better health. Our core focuses are to elevate the conversation of weight and its impact on health, improve access to obesity care, provide science-based education on obesity and its treatments, and fight to eliminate weight bias and discrimination.



PUBLIC EDUCATION



ADVOCACY



ANNUAL CONVENTION



NATIONAL AWARENESS CAMPAIGNS



VIBRANT COMMUNITY

## LEARN, CONNECT, ENGAGE

The OAC knows that the journey with weight can be challenging but we also know that great things happen when we learn, connect and engage. That is why the OAC Community exists. Our Community is designed to provide quality education, ongoing support programs, an opportunity to connect, and a place to take action on important issues.

**Through the OAC Community,  
you can get access to:**

- Weight & Health Education • Community Blogs
- Community Discussion Forum
- Ongoing Support • Meaningful Connections
- AND MUCH MORE

**JOIN TODAY: GO TO [OBESITYACTION.ORG/JOIN](http://OBESITYACTION.ORG/JOIN)**

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