

Fact Sheet

(CHS_FS_GNA_024)

MANAGEMENT OF THE OVERWEIGHT CHILD

Adequate nutrients are needed for growth and development. Restrictive diets are not suitable for children - the emphasis should be on long-term weight maintenance, or a very slow rate of weight loss, while height increases. Slow weight loss is only indicative when the child is not getting taller, has associated medical conditions or is severely obese. Management involves modification of diet, behaviour, exercise and environment.

Assessing overweight in children

Overweight in children can be assessed by 'weight for height' ratios. A child whose weight is at least two deviations above the height (for eg her weight is on the 90th percentile and her height is on the 50th percentile) is usually considered overweight.

A 3-4 day diet and activity diary is useful to gain insights into when, where and what the child is eating. How the child and family feel about obesity is important as is determining motivation, commitment and readiness for lifestyle changes. It is essential to involve caregivers and families in management.

Sometimes overweight in children can occur in response to a "life stress" in this case grief counselling may be required and a referral to a psychologist or a psychiatrist may be needed. Assessing the child's family background and psychosocial situation is required to determine possible causes.

Diet

The first rule is don't diet! The overweight child should never be made to feel different and should eat what the family eats at meal times. It is important to develop healthy habits. These suggestions may be helpful:

- Eat a wide variety of foods every day.

- Choose foods from the five food groups.

- Drink plenty of water and milk. Limit juices to one a day, and save cordial and soft drink for special occasions.

- Involve the whole family.

- Offer plenty of positive encouragement.

- Eat regularly – snacks are an important part of the diet.

- Limit high fat snacks – offer cut-up fruit, raw vegetables, sandwiches, crackers, fruit muffins or pikelets, yoghurt or cheese pieces.

One of the easiest ways to reduce energy intake is to replace juice, soft drink and cordial with water or reduced fat milk. Teaching carers to cook using less fat and serving smaller portions at meals to all family members may be necessary. Teach good habits and remember these take time to learn. Avoid using food as a reward – this leads to children thinking of food as 'good' or 'bad'.

Exercise

Increasing activity in the overweight child is important in management. It is recommended that 30 minutes of exercise/day, 5 times a week, in addition to what is currently being done take place. The child should select and enjoy the activity. Enjoyment will increase if friends or family members participate in the exercise with the child.

Behaviour

A food and behaviour record is useful for children to complete to gain insight into when and why they eat. The record could include when and what the child eats and feelings at the time of eating. Causes may include feelings of boredom or loneliness. In this situation teaching the child to recognise hunger and satiety cues could be useful.

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Management of the overweight child is complex and requires sensitivity, flexibility and patience from all involved. It is essential to have realistic expectations of the child to prevent feelings of failure. Too much emphasis on the child's weight can be detrimental to success. Severe or complicated cases should be referred to a paediatrician.

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