Watching overweight: Monitoring in child health consultations

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ABSTRACT

Overweight and obesity in children is considered an epidemic but it can be prevented with one of the strategies, such as the monitoring of children in the child health consultations provided in the National Program for Children and Youth. Objectives: To identify the prevalence of overweight and obesity in children; Identify the number of child health consultations attended up to 18 months old; Verify if greater monitoring by the family health team up to 18 months is associated with the nutritional status of children. Methodology: Participants - 285 children aged 0 to 17 years. Instruments / Procedures: The percentile of body mass index (BMI) was used to determine nutritional status and the SClínico program was used to collect data of child health consultations. The BMI value used was related to the age of 5-6 years or in the case of children under this age was used the last value registered. Results: It was verified that 14.2% of the children were overweight and 12.3% were obese and that only 1.8% participated in all the consultations. There was a negative correlation between the number of consultations participated up to 18 months and the BMI of the children (-0.123, p = 0.04), that is, as the number of consultations observed increases, BMI decreases. Conclusion: Since the birth of children, close and regular monitoring of the family health team is essential so that problems such as overweight and obesity can be prevented. Keywords: Overweight; Obesity; Children; Medical Attention; Prevention.



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INTRODUCTION

Overweight and obesity in children is currently presented as an epidemic, whose deleterious consequences have increasingly recognized impact. Physical inactivity as well as inappropriate dietary patterns are cited as the leading causes of increased overweight in the world population (World Health Organization (WHO), 2002). Despite the alarming results, overweight and obesity can be prevented, and this is one of the goals of the child health consultations that are part of the National Program for Child and Youth Health (DGS, 2013). Therefore, the objectives of the present study are to identify the prevalence of overweight and obesity in children, as well as the number of children's health consultations that they attended until the age of 18 months, and finally, to verify if a greater monitoring by the team of family health up to 18 months is associated with the nutritional status of the children.

MATERIAL AND METHODS

Participants

A total of 285 children participated (149 males (52.3%) and 136 females (47.7%)). The children were aged between 0 and 17 years old (8.47 \pm 5.08). The study was conducted at a Family Health Unit (FHU) in the central region of Portugal.

Measures

To determine the nutritional status of the children it was used BMI's percentile which was obtained by a calculation based on the child's height and weight. This percentile was categorized according to WHO guidelines (2006). The weight and height were measured, until approximately the 2 years of age, by digital scale and infant stadiometer and for older ages a digital scale with stadiometer.

Data on participation in child health consultations were obtained through SClínico program and subsequently exported to an Excel database and SPSS statistical program for analysis.

Procedures

This study is an integral part of the FHU internal health monitoring plan. This follow-up plan aims to evaluate the children seen by each family doctor regarding their nutritional status.

Data on child weight and height were collected at planned child health consultations by the family nurse. The BMI used refers to the age of 5-6 years or in the case of children under this age, the last value registered.

All data processing ensured the anonymity of the children.

Analysis

Descriptive analyses were used to verify the nutritional status and the number of child health consultations participated up to 18 months and Spearman correlation to verify the association between the variables. A significance level of 5% was adopted for all tests.

RESULTS

Regarding BMI, it was found that 14.2% of the children were overweight and 12.3% were obese.

A total of 131 children (46.3%) never attended the family health team until 18 months, 16.6% participated in 1 to 6 consultations, 35.3% in 7 to 8 consultations and only 1.8% participated in the total number of consultations planned up to 18 months. There was a negative correlation, however weak, between the number of consultations by the age of 18 months and the BMI of the children (-0.123, p = 0.04), in other words, as the number of consultations taken place increases, the BMI decreases.

DISCUSSION

The main results are the high prevalence of overweight children (24.1%), corroborated by several investigations (COSI, 2016, PNPAF, 2016) but also the lack of participation of children in child health consultations. Since childhood is the main period for the adoption of life habits affecting the health of the child and its family, monitoring by the family health team during childhood, mainly in the first months of life, is fundamental for the control of their nutritional status. Sedentary lifestyles, namely the increasingly evident physical inactivity associated with changes in dietary patterns in new generations, as a result of the declining adherence to the Mediterranean diet and the higher consumption of foods with low nutritional value, correspond to two of the main causes of these dietary imbalances (Khan et al., 2017). Despite the limitations of the study as the lack of knowledge about other monitoring that children had, the study shows that these consultations, where food plans are elaborated and revised as well as explained which motor and cognitive stimuli parents should performed in children according to their developmental stage, are essential for a harmonious growth. Thus, since birth, a closer and regular monitoring of the family health team is essential to physical, psychomotor and social development and the adoption of healthy lifestyles are evaluated (DGS, 2013) leading towards a fit approach to the child's growth that can be defined to prevent situations of overweight and obesity with consequences in short, medium and long term.

CONCLUSIONS

As a disease that affects more and more children in Portugal and the rest of the world, overweight and obesity should be a concern of the whole society, and its combat a priority. Awareness about all of its consequences in short, medium and long term is vital not only to children's physical health but also mental. Therefore, the active participation in child health consultations, essentially in the first months of life seems to correspond to one of the strategies of prevention of overweight and obesity and for that reason all parents must be alerted to the vital importance of actively participating in these.

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