Obese Kids Face Lifetime Of Woes Dr. Todd Huffman, for the Eugene *Register-Guard* Published February 14<sup>th</sup>, 2010

Too much sugar, too much fat. Too many meals on the run, and hours on the couch. Not enough vigor or vegetables. As a society we are pushing the scales into dangerous territory.

By now the numbers are familiar. The percentage of overweight and obese children and adolescents has more than tripled in the past twenty-five years. Roughly one in three are now overweight or obese, as are two in three adults. Minority children, particularly black girls and Hispanic boys, and children from poor households are even more likely to tip the scales.

This enormous and growing public health crisis has energized First Lady Michelle Obama to this week announce her spearheading of a new initiative - the *Let's Move* campaign (<a href="www.LetsMove.gov">www.LetsMove.gov</a>) - aimed at directing the Nation's attention to addressing the obesity epidemic. "We do not have a moment to waste," she urged on January 28<sup>th</sup>.

It used to be that the rich were fat, the poor were thin, and right-thinking people worried about how to feed the hungry. Now, in the United States and much of the Westernized world, the rich are thin, the poor are fat, and nations are experiencing a marked increase in the prevalence of obesity. This increase is affecting all age groups but is, for many reasons, especially troublesome in the young.

Young bodies are so much more vulnerable to the toxic effects of fat. The internal damage does not always take medical testing to diagnose. It is visible as a child laboriously climbs a flight of stairs, or tries to sit at a classroom desk, much less rise out of it. On the playground, obesity exerts a cruel price, robbing children of much of the natural enjoyment of being a kid.

Being overweight or obese as a child causes a huge burden of disease, now and across a lifetime. High blood pressure and elevated cholesterol increase the risk and lower the age to onset of coronary vascular disease, which leads to heart attacks and strokes.

Overweight and obesity can lead to liver disease, gallstones, and kidney disease, each at a young age. Certain cancers become more likely, such as colon. I ron, vitamin, and mineral deficiencies are more common, and overweight and obesity increase the risk of bone disease and injuries.

Asthma and asthma attacks occur more often in the overweight or obese, and infants and toddlers who are obese are more likely to be hospitalized for respiratory illness. Obstructive sleep apnea syndrome, once rare in childhood, has become commonplace, with one-third to one-half of obese children and teens suffering in some measure from its consequences.

Childhood overweight and obesity can cause early onset of puberty, and early onset of cigarette, alcohol, and illegal drug abuse. Overweight children are subject to increased victimization – bullying, teasing, and social exclusion – and are seven times more likely than normal weight children and teens to suffer depression, anxiety, and thoughts of self-harm.

Most striking is the 30 to 50 percent lifetime risk of developing type 2 diabetes. Although documentation of this disease in children in the United States can be traced to 1968, reports were rare before 1995. Today, nearly half of new cases of type 2 diabetes are diagnosed in Americans under age 20.

Added together, today's generation of children is facing the likelihood of being the first in modern history to live shorter life spans than their parents. This is nothing less than a national tragedy in slow motion.

What has caused this crisis? Evolution is mostly to blame. It has designed mankind to cope with deprivation, not plenty. Mankind is designed to store energy in good years to see them through the lean years. But we live in a time, thankfully, when lean years are becoming rarer all over the globe.

But every silver lining has a cloud: the consequence of our growing prosperity and amazing agricultural productivity is a new plague, one of obesity.

Every day our children face a barrage of obstacles to good health. They're confronted by powerful fast food and soft drink industries. They're

tantalized by a multitude of sedentary technologies. They're permitted endless hours of screen time, thereby exposing them to countless junk food advertisements. They sit in schools selling unhealthful foods and reducing physical activity.

One in three meals eaten by children is made outside the home, often in ridiculously super-sized portions. Forever on the go, kids of all ages are coming to rely on salty, sweet, or otherwise unhealthy meals and snacks washed down with high-calorie juices, sweetened beverages or soda. Babies are being transitioned from pureed baby foods to French fries, chicken nuggets, and Easy Mac. Little wonder that one in four children under the age of five is already overweight.

While the epidemic of childhood obesity is both a health and social crisis, seemingly insurmountable crises have been faced down before. Infectious diseases once thought incurable are now almost completely relegated to the history books. Once alerted to crisis, the collective resolve of American citizens and communities has always risen to the challenge.

But simply exhorting people to behave differently will not sufficiently address this crisis. It will take sustained community and political activism. So many forces are conspiring against us to change.

Look no further than the work of LCHAY, the Lane Coalition for Healthy Active Youth, (<a href="www.lchay.org">www.lchay.org</a>) for an example of the kind of local activism needed to reverse this epidemic. Since 2004 this community-based nonprofit has been working to create environments that support healthy eating and active living. The organization welcomes invitations to discuss the ways in which government, groups and individuals can help meet the challenge.

While everyone interested in solving this public health crisis welcomes Mrs. Obama's leadership on this issue, the obesity epidemic won't be reversed by federal involvement alone. Responsibility also lies with the health community, corporations, local governments, and, most of all, with parents. Nevertheless, the nation is long overdue for having a champion for children inside the White House.

There will be those who feel that obesity is an individual responsibility, and not a collective one. They will argue that this epidemic is a result of poor individual will power, not an obesifying environment. They will say it's up to individuals, and not the government, to decide who wins the battle between their better and worse selves.

When applied to adults, they may be right. However, the argument for intervention is that dietary and activity habits are established in childhood. A society shares some responsibility for the care of its youngest members, and therefore should try to ensure that they are protected from forces that are conspiring against their good health.

Society also has a legitimate interest in addressing the epidemic of obesity because everybody pays for it. Thin people subsidize overweight people through health care. More illness means less productive workers, which means a weaker economy and higher taxes. And so on.

Prevention must take priority, as the treatment of obesity has proven costly, difficult, and usually ineffective, as the billions spent annually on weight loss programs and therapies has shown. The most logical place to start is with children.

Our nation has a long history of intervening with legislation and grassroots activism to protect the health and well-being of children. It's time to do so again. But it's a David and Goliath fight. We're battling an entire social, cultural, corporate, and political environment. Most daunting of all is the battle we – especially those of us who have children under age 18 – must win against our own habits and complacency.

We must mobilize as communities to create environments – at home, at daycare, and at school – that promote physical activity and healthy eating for children. If we do not, the rise in childhood obesity will reduce Americans' average life spans by as much as five years in the remaining century.

So hurrah for Mrs. Obama. Hurrah for U.S. Surgeon General Regina Benjamin, whose just-released *Vision for a Healthy and Fit Nation* 

(<u>www.surgeongeneral.gov</u>) is recommended reading for anyone interested in reviewing the basic solutions to this crisis.

And hurrah for local groups such as LCHAY and the many others like it nationwide, and for the tens of thousands of physicians and health workers who have for years toiled to shrink the expanding American waistline. After two decades during which Americans ate more and sat more and got bigger, their work is just beginning to pay off: the percentage of overweight and obese Americans seems finally to be leveling off.

We're not done yet. We're a long way from done. But it can be done. Remember, David won.