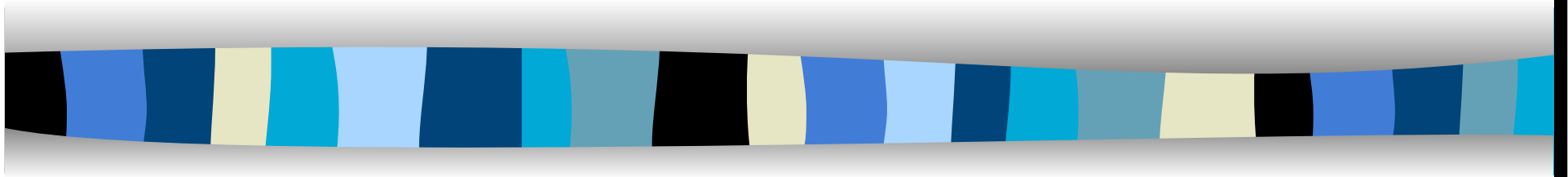


Obesity: The Equity Issue

Tackling the root causes of childhood obesity



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Obesity

- Causes of Obesity are complex
- Life course approach: health development as a lifelong process
- Focus on prevention
- A view of prevention by looking at root cause



Initiatives

- White House plan to cut childhood obesity by 2.5% by 2015
- Educate and help women conceive at a healthy weight and have a healthy weight gain during pregnancy
- Encourage and support breastfeeding
- Payment for services needed to help prevent child obesity



Why Infancy?

Shifting the paradigm from disease focus toward the root: infancy and childhood

- Holistic perspective that looks at environment, social and emotional aspects of regulation and early childhood development
- The mother-baby dyad



Background

The prevalence of obesity in low-income two to four year olds increased from 12.4% in 1998 to 14.5 % in 2003 and 14.6 % in 2008

In 2008 obesity prevalence was highest among American Indian or Alaskan Native (21.2%) and Hispanic children (18.5%)

Obesity

Boys

33% Hispanic/Latino

35.7% African-American

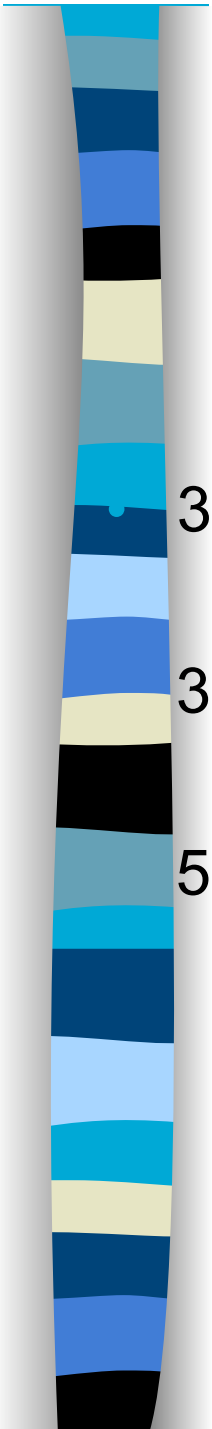
51.2% Mexican-American

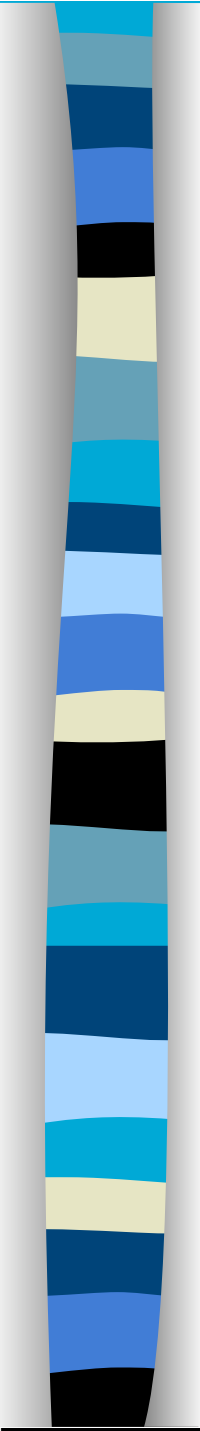
Girls

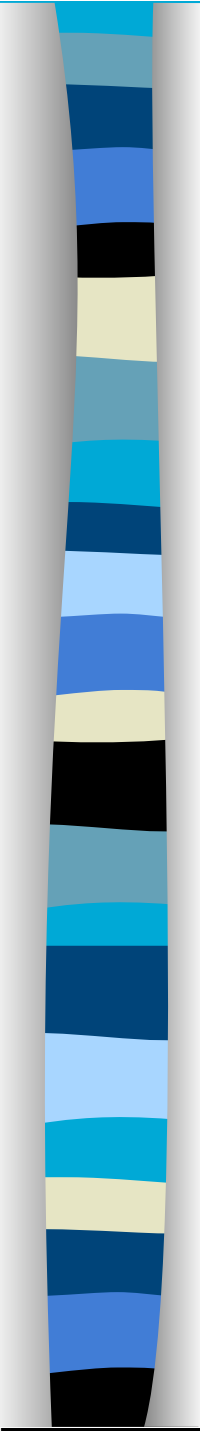
- 30.1% Hispanic/Latino

- 46.4% African-American

- 36.7% Mexican-American



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- Significant literature that values the mother-baby dyad as a focus for health interventions that last a lifetime
 - ...“the environment in early life can determine the risk of obesity in childhood” *BMJ June 2005*
 - “evidence that increased intensity and exclusivity of breast-feeding is associated with decreased obesity...in childhood and adolescence” *Journal of Nutrition Feb 2009*

- 
- “ Human milk is exquisitely fitted for optimal infant growth and development and may uniquely modulate ...pathways involved in the regulation of body weight.” *Journal of Nutrition Feb 2009*
 - The Growing up Today Study (GUTS) “....breast-feeding was associated with reduced overweight..in childhood. Breast feeding was inversely associated with childhood obesity ..” *Diabetes Care October 2006*



LA Times March 2009

- “ Rapid weight gain during the first 6 months of infancy appears to increase the chances that a child will be obese by age three...The link between rapid infant weight gain and obesity by age 3 was striking...”

Title: Prenatal influences on choice of newborn feeding at WCHOB

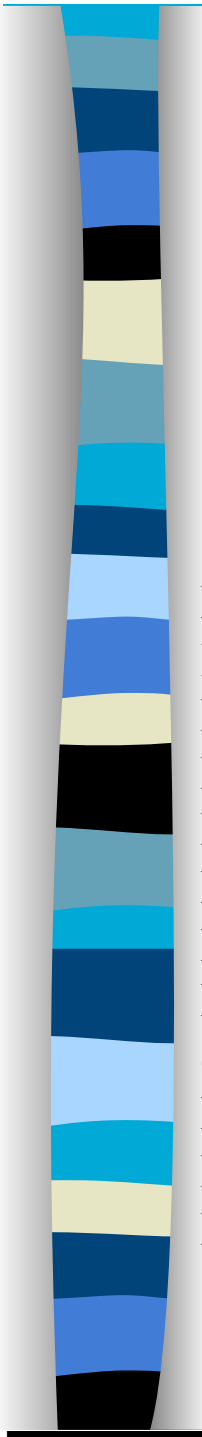
Investigator:

Amos M. Moberg, M.D.

Research preceptor:

Stephen J. Turkovich, M.D.





Breastfeeding is the optimal way to nourish a newborn, and is the healthiest choice for infant and mother in the majority of cases.¹



Reduction in rates of AOM
Increased mucosal immunity
Reduction in gastrointestinal infections
Reduction in respiratory infections
Reduced risk atopic disease/asthma
Reduced risk of obesity
Reduced risk of SIDS
Reduced risk of necrotizing enterocolitis
Reduced risk of food allergy
Reduced risk of pediatric leukemia
Reduced risk of diabetes mellitus



Reduced risk of type 2 diabetes
Reduced rates of breast cancer
Reduced rates of ovarian cancer
Reduced risk of postpartum depression
Reduced risk of osteoporosis

Considerably cheaper
Faster return to prenatal weight



The Equity equation

- Interventions need to be inclusive of input from the population at risk, and be sensitive to diverse norms, cultural traditions , practices and choice



Next steps

- Understanding factors that influence not only initiation but sustenance of the breastfeeding mother after she delivers
- Recognizing the implementation of policy that addresses the need for employers to provide adequate time and a place of security to breastfeed



Next steps

- Community Health workers/doulas trained as lactation specialists, and reimbursement as lactation consultants
- A 5 year study that looks at outcome initiatives listed, from birth to age 5
- Data from our community that looks at the number of lactation consultants that come from communities that represent diversity