Expert Committee Recommendations Regarding the Prevention, Assessment, and Treatment of Child and Adolescent Overweight and Obesity: Summary Report

Actions and Directives

Actions and Directives
Document BMI routinely
Rec_1: Imp_1: Dir_1
establish procedures to deliver obesity prevention messages
Rec_1: Imp_2: Dir_2
Use BMI percentile to screen for body fat
Rec_2: Imp_3: Dir_3
Do not perform Skinfold thickness measurements
Rec_2: Imp_4: Dir_4
Do not measure waist circumference
Rec_2: Imp_5: Dir_5
review and regularly update the family history
Rec_2: Imp_7: Dir_6
Assess blood pressure at all health supervision visits
Rec_2: Imp_9: Dir_7
asses behaviors that have the strongest evidence for association with energy balance and that are modifiable.
Rec_2: Imp_10: Dir_8
Address frequency of eating food prepared outside the home,
Rec_2: Imp_11: Dir_9
Address ounces, cups, or cans of sugar-sweetened beverages consumed each day
Rec_2: Imp_11: Dir_10
Address portion size
Rec_2: Imp_11: Dir_11
Address ounces or cups of 100% fruit juice consumed each day;
Rec_2: Imp_11: Dir_12
Address frequency and quality of breakfast
Rec_2: Imp_11: Dir_13

Rec_2: Imp_11: Dir_14	
	er of fruit and vegetable servings consumed each day
Rec_2: Imp_11: Dir_15	
	pent in moderate physical activity each day
Rec_2: Imp_12: Dir_16	
	e activity patterns
Rec_2: Imp_12: Dir_17	
Address seden	
Rec_2: Imp_12: Dir_18	
involve the wh	ole family in lifestyle changes
Rec_3: Imp_13: Dir_19	
help families ta	alor behavior recommendations to their cultural values
Rec_3: Imp_14: Dir_20	
consider obese	
Rec_4: Cond_1: Act_1	
consider overw	reight; this term replaces "at risk of overweight."
Rec_4: Cond_2: Act_2	
Measure pulse	
Rec_4: Cond_3: Act_3	
Blood pressure	
Rec_4: Cond_3: Act_4	
signs associate	d with comorbidities of overweight and obesity
Rec_4: Cond_3: Act_5	
Obtain a fastin	g lipid profile
Rec_4: Cond_4: Act_6	
Measure fastin	g lipid profile, AST, ALT, and fasting glucose levels
Rec_4: Cond_5: Act_7	
Measure fastin	g lipid profile, AST, ALT, and fasting glucose levels
Rec_4: Cond_6: Act_8	
Assess at a min	imum yearly height, weight and BMI for age
Rec_4: Imp_15: Dir_21	

Plot those measures on standard growth charts

Rec_4: Imp_15: Dir_22

use 99th percentile BMI values for age as cutoff points to allow for improved accessibility of the data in the clinical setting and for additional study

Rec_4: Imp_17: Dir_23

qualitatively assess dietary patterns at a minimum, at each well-child visit for anticipatory guidance

Rec_4: Imp_18: Dir_24

obtain a focused family history for obesity, type 2 diabetes mellitus, cardiovascular disease (particularly hypertension), and early deaths resulting from heart disease or stroke

Rec_4: Imp_19: Dir_25

Counsel: limiting consumption of sugar-sweetened beverages (consistent evidence)

Rec_5: Cond_7: Act_9

Counsel: encouraging diets with recommended quantities of fruits and vegetables (mixed evidence)

Rec_5: Cond_7: Act_10

Counsel: limiting television and other screen time by allowing no more than 2 hours per day

Rec_5: Cond_7: Act_11

Counsel: removing television and computer screens from children's primary sleeping areas (consistent evidence)

Rec_5: Cond_7: Act_12

Counsel: eating breakfast daily (consistent evidence

Rec_5: Cond_7: Act_13

Counsel: limiting eating at restaurants, particularly fast food restaurants (consistent evidence)

Rec_5: Cond_7: Act_14

Counsel: encouraging family meals in which parents and children eat together (consistent evidence)

Rec_5: Cond_7: Act_15

Counsel: limiting portion sizes (consistent evidence)

Rec_5: Cond_7: Act_16

Counsel: eating a diet rich in calcium

Rec_5: Imp_20: Dir_26

Counsel: eating a diet high in fiber

Rec_5: Imp_20: Dir_27

Counsel: eating a diet with balanced macronutrients

Rec_5: Imp_20: Dir_28

Counsel: initiating and maintaining breastfeeding

Rec_5: Imp_20: Dir_29

Counsel: participating in 60 minutes of moderate to vigorous physical activity per day

Rec_5: Imp_20: Dir_30

Counsel: limiting consumption of energy-dense foods.

Rec_5: Imp_20: Dir_31

advocate for the federal government to increase physical activity at school

Rec_6: Imp_21: Dir_32

support efforts to preserve and to enhance parks as areas for physical activity, inform local development initiatives regarding the inclusion of walking and bicycle paths, and promote families' use of local physical options by making information and suggestions about physical activity alternatives available in doctors' offices

Rec_6: Imp_21: Dir_33

actively engaging families with parental obesity or maternal diabetes,

Rec_6: Imp_22: Dir_34

encouraging an authoritative parenting style

Rec_6: Imp_22: Dir_35

discouraging a restrictive parenting style regarding child eating

Rec_6: Imp_22: Dir_36

encouraging parents to model healthy diets and portions sizes, physical activity, and limited television time;

Rec_6: Imp_22: Dir_37

promoting physical activity at school and in child care settings

Rec_6: Imp_22: Dir_38