

Identification and Management of Obesity by General Paediatricians in the UK

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Introduction:

A third of children in the UK are obese or overweight. The majority are not in contact with medical services. Presentation to general paediatricians for unrelated condition may pose an opportunity to identify children with obesity. The UK obesity services for Children & Adolescents (OSCA) group have produced guidelines for management of obese children in secondary care.

Objectives:

1. Determine the prevalence of obesity in general paediatric out-patients.
2. Describe the rate of identification of obesity.
3. Compare practice with OSCA guidelines.

Methods:

Retrospective review of all patients attending general paediatric out-patient department during 1 calendar month.

Body mass index (BMI) centile was calculated for each child using British 1990 growth reference (UK90). History, investigations performed and management was compared to OSCA guideline standards.

Results:

186 patients attended out-patient clinic.
138/186 (74%) notes were available for review.

13/138 of children were obese with mean age 9.6(±5.3) years and mean BMI SDS 3.6.
7/138 were overweight with mean age 8.2 (±4.9) years and mean BMI SDS 1.8.

	Obese (BMI ≥ 98 th Centile)	%	Overweight (BMI 91-98 th Centile)	%
Total Children	13	9.4	7	5.1
BMI centile documented	5	39	1	14
BP documented	3	23	1	14
weight problem recognised & addressed	5	39	2	29

Of the 13 obese children

- Focused history was documented in 3(23%) & partially in 4(31%) children
- Family history was documented in 5(39%) children
- Obesity pattern documented in 4(31%), Dysmorphic features in 8(62%), Signs of endocrinopathy in 5(39%) children
- Only 2(15%) had the full investigations done
- Thyroid function was done in 8(62%), Fasting glucose, insulin & lipids in 2 (15%), LFT in 9(69%) & FBC was done in 8(62%) children.

Secondary obesity was identified in 1 obese child (congenital hypothyroidism). And 1 of them was referred to a paediatric endocrinologist.

4/13(31%) had co-morbidities including psychological, joint problems, abnormal glucose metabolism and raised ALT.

Conclusions:

Around 10% of children attending general paediatrics out-patients are obese. But there is under-recognition.

Investigations and management of these children is frequently incomplete.

If weight above the 75th centile and/or height & weight centiles differ significantly BMI centile should be calculated and recorded in the notes for every patient during their height and weight measurement.

References:

- OSCA Consensus Statement on the Assessment of Obese Children and Adolescents for Paediatricians - Obesity Services for Children and Adolescents (OSCA) Network Group, 2009
- Viner, Russell M., et al. "Assessment of childhood obesity in secondary care: OSCA consensus statement." *Archives of disease in childhood-Education & practice* edition 97.3 (2012): 98-105.
- Obesity: identification, assessment and management of overweight and obesity in children, young people and adults N Guidance - CG189. London, 2014

