

Childhood Obesity

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ABSTRACT

Childhood obesity is a serious medical concern per the perspective of the public health medicine practice. Serious medical, social, and mental consequences might be and can be resulted from childhood obesity whether on short or long term so childhood obesity needs to be managed effectively and properly to prevent any future medical, mental, and social consequences.

CHILDHOOD OBESITY

Per the American Academy of Child and Adolescent Psychiatry, childhood obesity most commonly starts between the ages of 5 and 6 years old, and during adolescence as well. However, studies have shown that the child who used to be obese between the ages of 10 and 13 years old has an 80% chance of becoming obese during adulthood.

Per the American Academy of Child and Adolescent Psychiatry, childhood obesity increases the risk of having cardiac diseases, hormonal changes, diabetes, sleep disturbances, joint diseases, and respiratory problems like asthma.

According to the Childhood Obesity Foundation, the live 5-2-1-0 lifestyle for the children is recommended and advised by applying:

5 or more vegetables and fruits per day

2 no more than 2 hours screen per day

1 hour at least physical activity per day

0 Sugary drinks

So, from a public health medicine practice point of view, the healthcare systems and the policy makers/ lawmakers have to interfere more in preventing and managing childhood obesity.

Per an article was published online by The Guardian about a ban in Mexico that “A southern Mexican state of Oaxaca has banned the sale of sugary drinks and high-calorie snack foods to children as a measure aimed at curbing obesity” and the ban was presented by the lawmaker, López Domínguez.

Now, in Mexico all sugary beverages and sugary foods like cereals have to have a big label on them stating “Excessive calories” and “Excessive sugar” as mandatory on the products.