



Theory and practice behind different childhood obesity treatment models

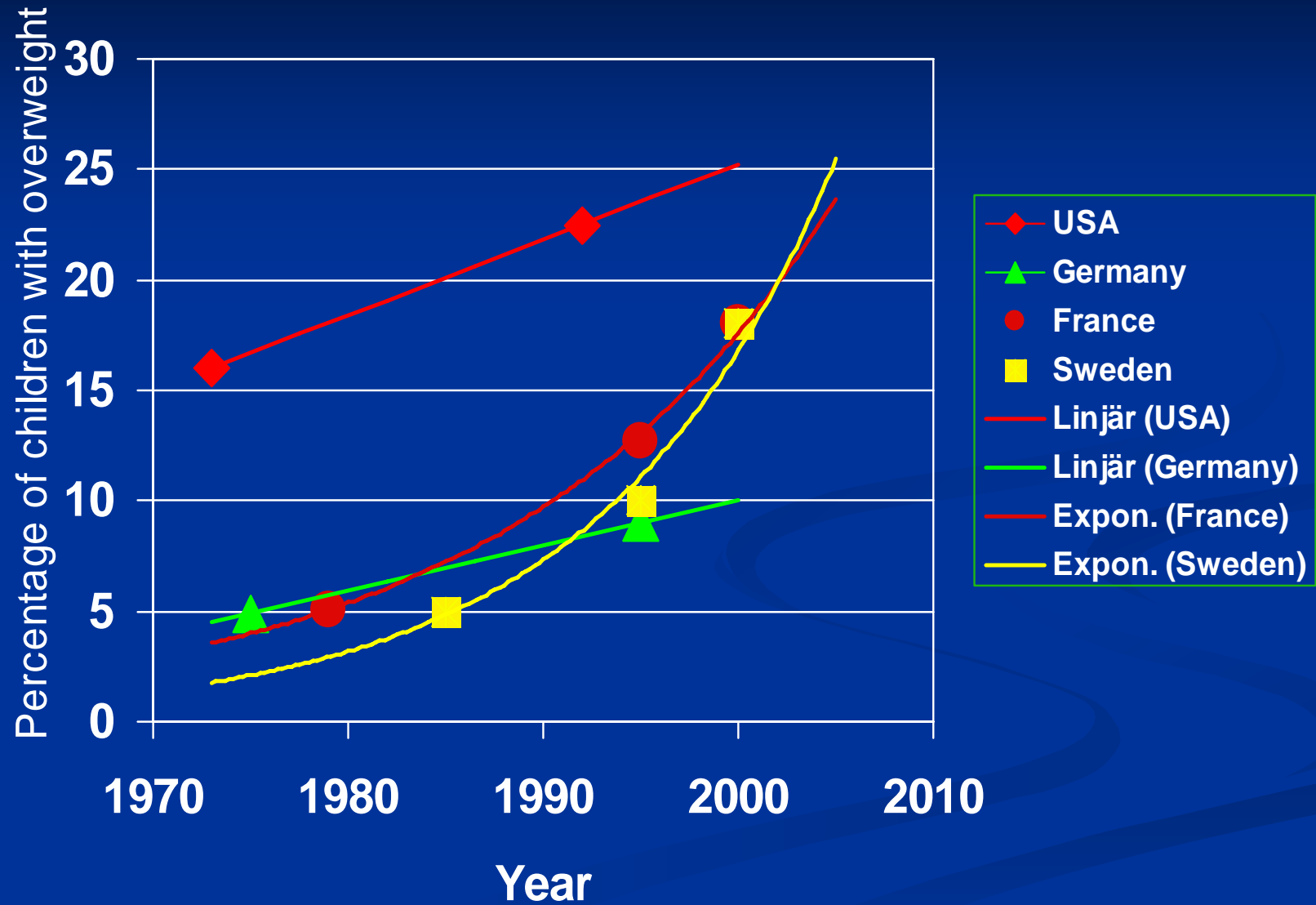
14th June, Reykjavik

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Childhood Obesity Unit, University Hospital Malmö
Medical Faculty, Lund University



Child overweight



Six levels of prevention

1. The family
2. The school and kindergarten
3. Health care professionals and societies (ex. APA).
4. Local and national government
5. Industry
6. Media

Referens: Lissau I. Action, prevention and epidemiology of paediatric obesity. Acta Paediatrica 2005.

An example of a successful prevention trial

- School based intervention
- Children aged 8-9 years
- Follow up after 7 months
- Intervention focused on reducing screen time
- Reduced BMI in the intervention group

Reference: Robinson T, 1999

The South of Sweden – Some facts

Population:

Over 1 million

(1 169 464 inhabitants, Dec 31, 2005)

Largest cities:

Malmö – 271 000 inhabitants, Dec 2005

Helsingborg – 122 000 inhabitants, Dec 2005

Lund- 102 000 inhabitants, Dec 2005

Area:

11 027 km² (of which 10.983 km² land area).

106 inhabitants per km².



Childhood Obesity Unit in Southern Sweden

- Regional treatment and knowledge centre for the management of childhood obesity.
- Coordinator for overweight actions in southern Sweden (Region Skåne) through:
 - Information
 - Dialog
 - Education
 - Evaluation
 - Treatment.

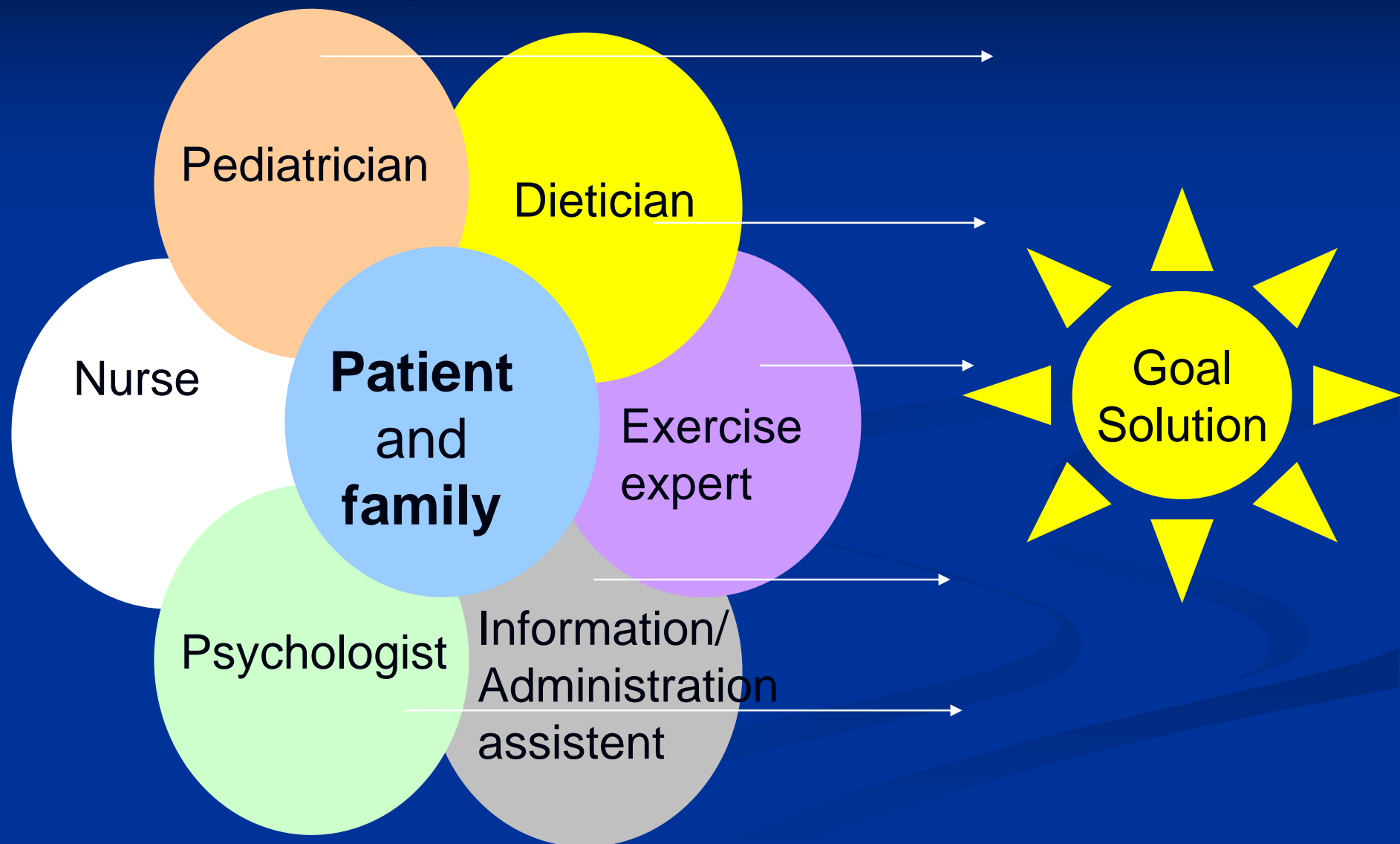
Multidisciplinary obesity team



- Pediatric medicine
- Nutrition
- Physical activity
- Psychology and social sciences

➤ Team competence is necessary to create a tailor-made treatment

Multidisciplinary treatment approach



Evaluation of Childhood Obesity Unit

- 233 children were treated during 18 months
- 81% of 54 participated in the follow-up
- 44 children were treated more than 6 months
- Mean BMI 32,1
- Weight reduction
 - 3,4% for all ages
 - 37/44 (84%) had a good result (stable BMI)
- Significantly improved self-esteem and family dynamics

Evaluation (cont)

- Cost benefit
 - Braet (Belgium) 30 visits per patient per year
 - Epstein (USA) 14 visits
 - Nowicka & Flodmark (Sweden) 3.8 visits
- Patient satisfaction in 70 families
 - 80% want to continue treatment

Treatment methods

■ One family treatment

First visit

- The whole team
- Medical assessment
 - Interview
 - Dialog
 - Individually tailored approach
 - Goal setting

Follow up

In different constellations



Treatment methods (cont.)

- Family Weight School
 - An interdisciplinary model for treatment of obese adolescents with family therapy in group meetings.
 - Evaluation with focus on BMI, quality of life, nutrition and physical activity.

Nowicka and Flodmark, *Obesity Research*, Vol 13, September 2005

Nowicka and Flodmark, *International Journal of Obesity*, Vol 29, September 2005

Family Weight School

- 72 families treated during one year.
- Twelve families participated in every session.
- Adolescents divided in two age groups: 12-14.9 years old (mean age 13.5, mean BMI 34.0) and 15-19 years old (mean age 16.7, mean BMI 35.5).
- Ninety percent (n=65; 34 boys and 31 girls) participated in the one year follow-up with a mean age of 14.8 years and a mean BMI 34.6 (range 27.6-50.4).
- No significant increase in BMI after one year treatment in the intervention group.
- Waiting list control group increased BMI from 34.5 to 35.8 (p=0.014).
- The intervention group attended on average 3.4 out of the four scheduled sessions during one year.

More about Family Weight School

www.studentlitteratur.se

Studentlitteratur
VÄGEN TILL VINNANDE VETANDE



FAKTA OM BOKEN

TITEL:

**Barnövervikt i praktiken
– evidensbaserad familjeviktsskola**

FÖRFATTARE:

**Nowicka, P
Flodmark, C-E**

ISBN:

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SIDANTAL:

ca 170

Barnövervikt i praktiken

Denna grundläggande lärobok ger en omfattande teoretisk introduktion i övervikt och fetma hos barn och ungdomar. Författarna definierar begreppen övervikt och fetma och presenterar dess förekomst, orsaker och konsekvenser. Olika behandlingsmetoder som familjeterapi, kost och fysisk aktivitet beskrivs liksom medicinsk bedömning, läkemedel och kirurgi. Boken presenterar också ett evidensbaserat verktyg – en familjeviktsskola – för den som vill starta behandling av barnfetma.

Boken utkommer vecka 24, 2006

Physical Activity Promoting Groups

Additional treatment

Nowicka and Flodmark, *International Journal of Obesity*, 2003, Suppl 1

- ✓ Fun
- ✓ Inspiring
- ✓ Social
- ✓ Individually adapted



Sports camp followed by support from sports clubs

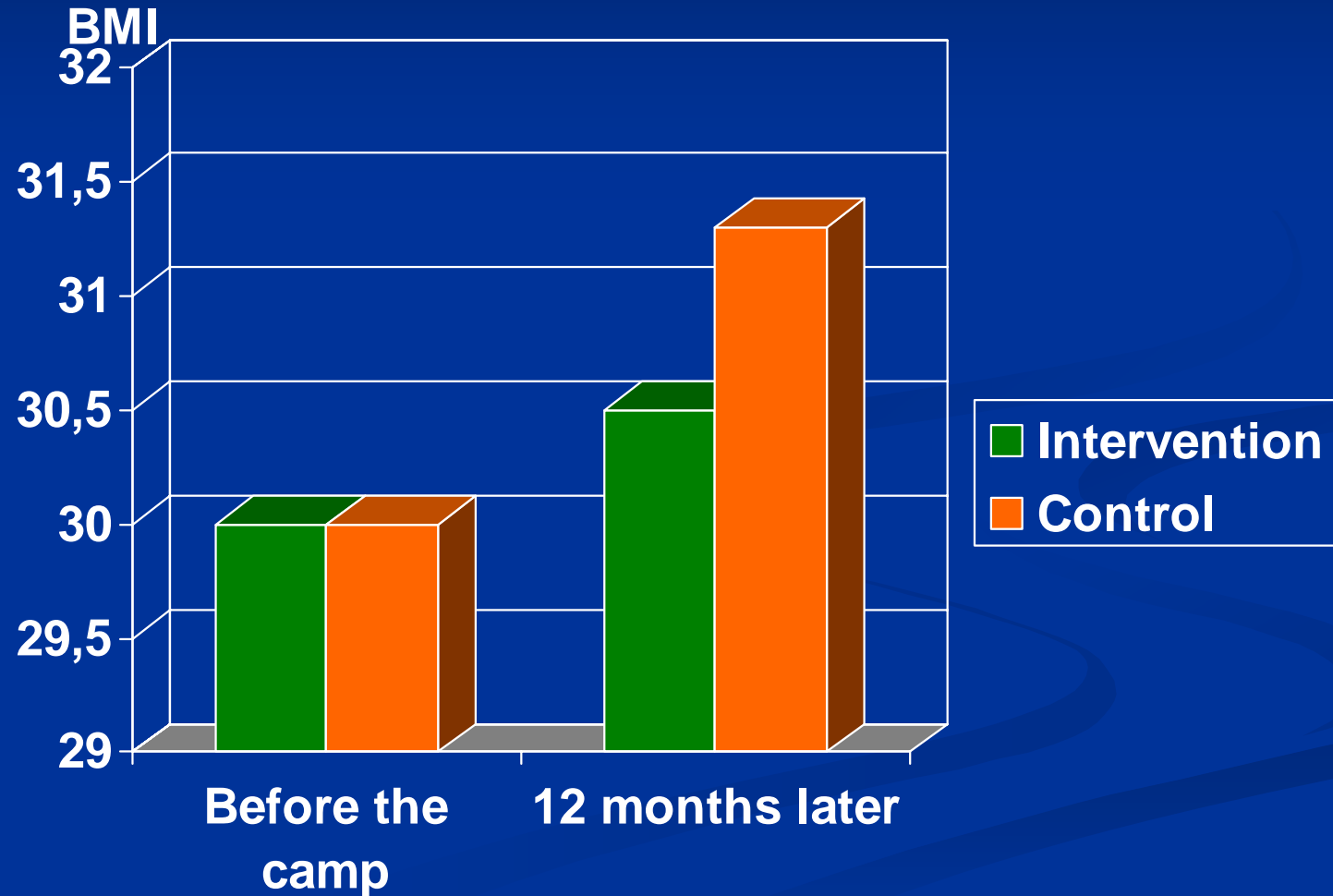
- The children test at least two various sports every day during the camp of one week.
- In the end of the camp the children have to choose their favourite sport.
- A sports trainer from a local sports club was assigned to support the child to participate in the chosen sport in this sports club during six months.



Ref: Nowicka, Ek, Flodmark, International Journal of Obesity 2006

Sports camp of 2004

Changes in BMI



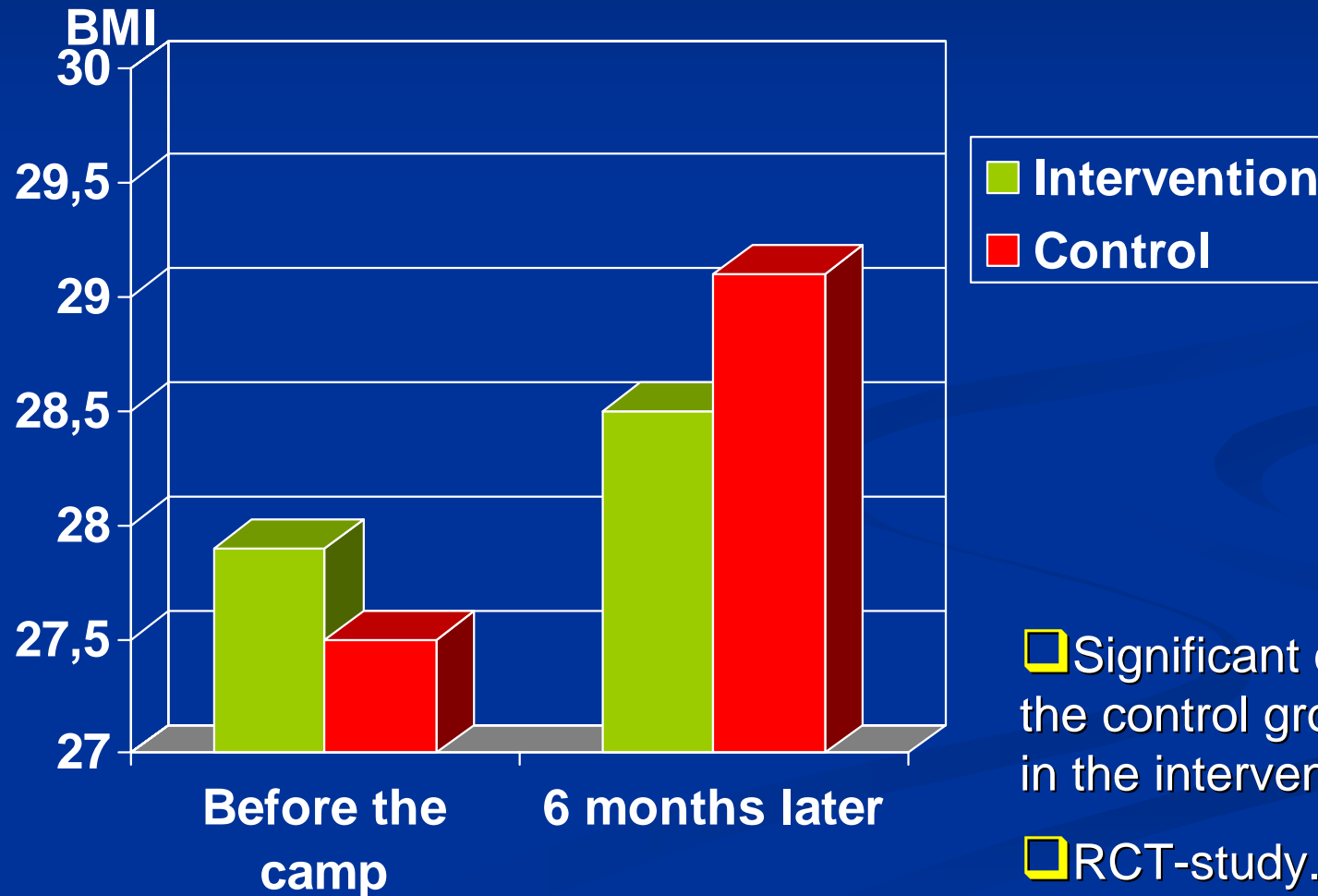
Sports camp of 2004

Changes in physical activity



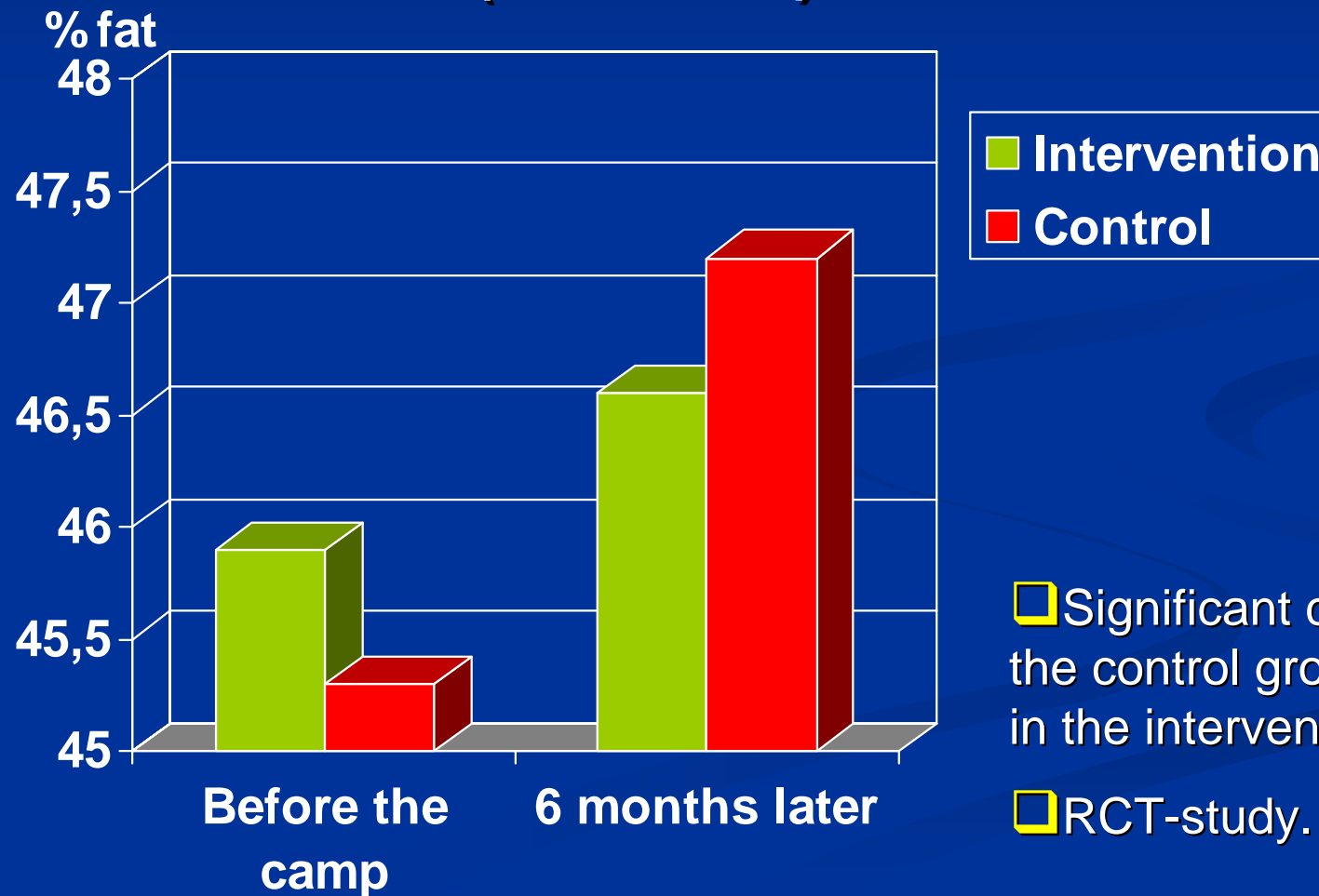
Sports camp of 2005

Changes in BMI

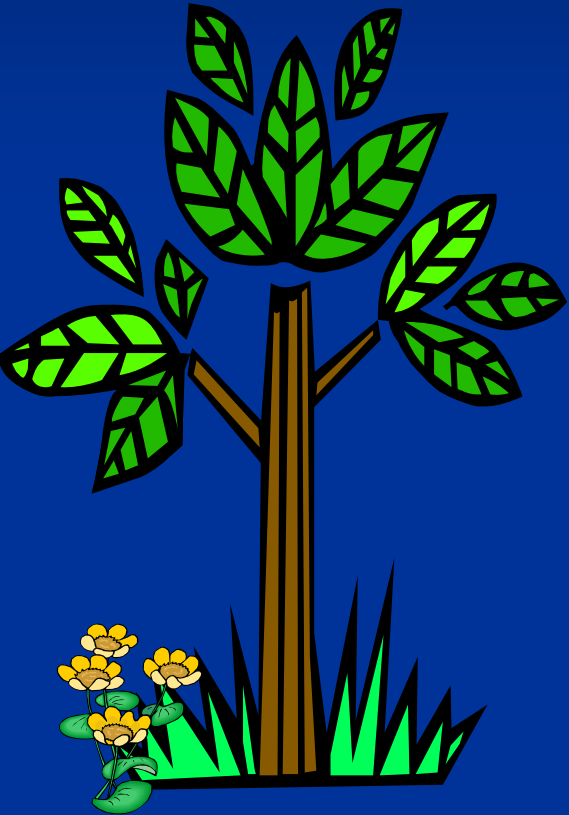


Sports camp of 2005

Changes in percentage of fat (DEXA)

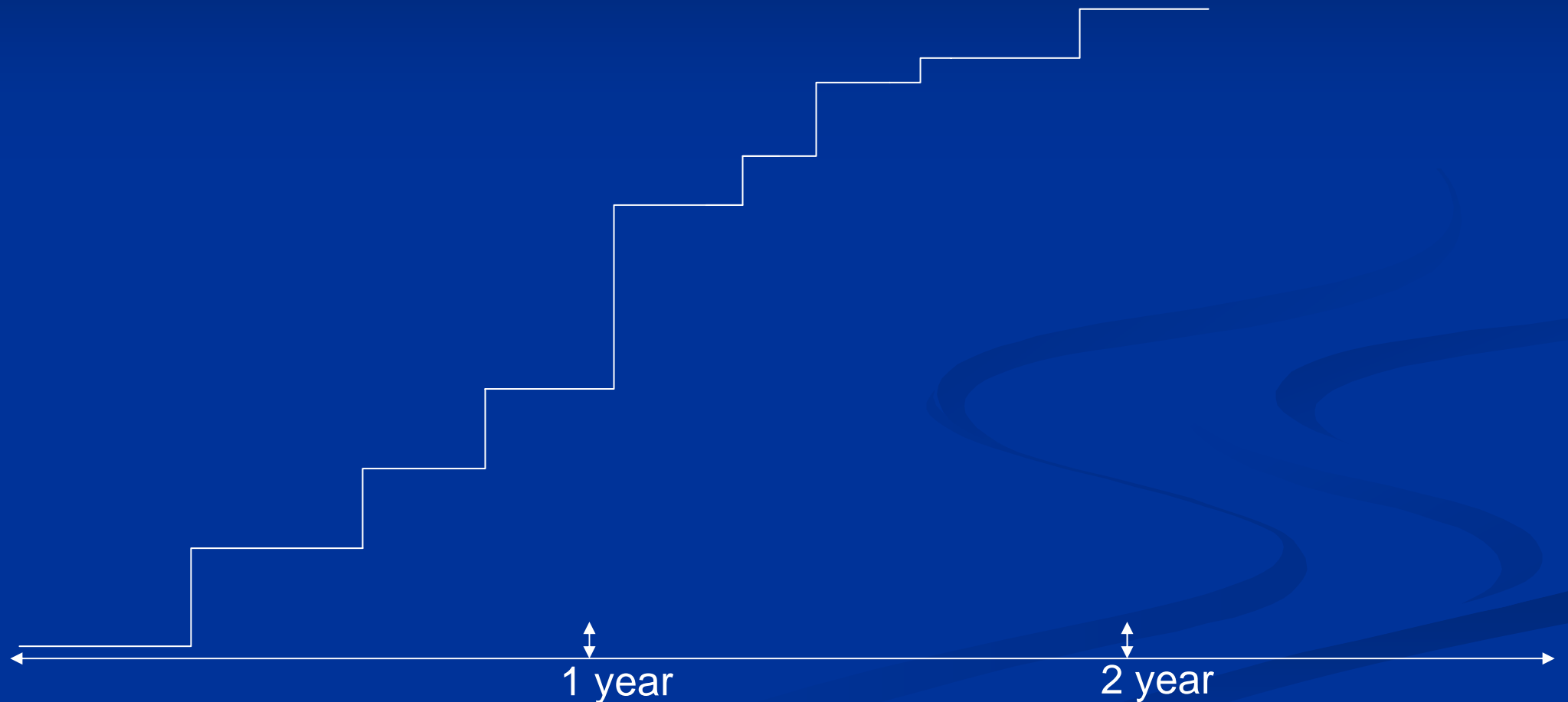


The Flensburg Family Treatment Model

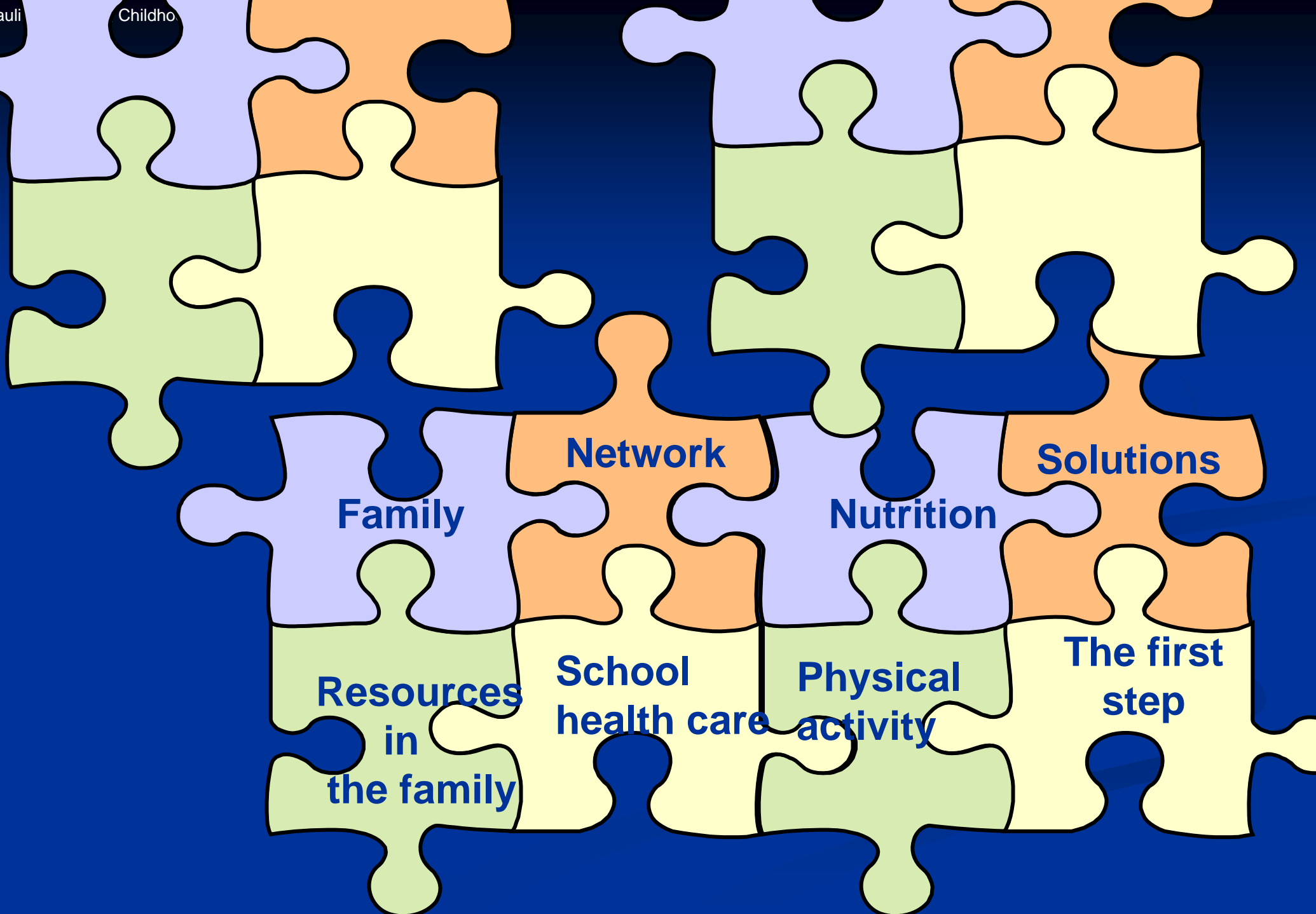


- Based on lifestyle changes of food habits and physical activity, together with support of the family system.
- Essential to establish a dialog with the family, as the family is regarded as basic to the child's psychological development and a major factor influencing the child's quality of life.
- A solution-based perspective is useful as an addition to the family therapy approach by giving the families faith in the possibility of changing lifestyle.

The Flensburg Family Treatment Model



Every change starts with the first step and the family decides the pace.



Family

Network

Nutrition

Solutions

**Resources
in
the family**

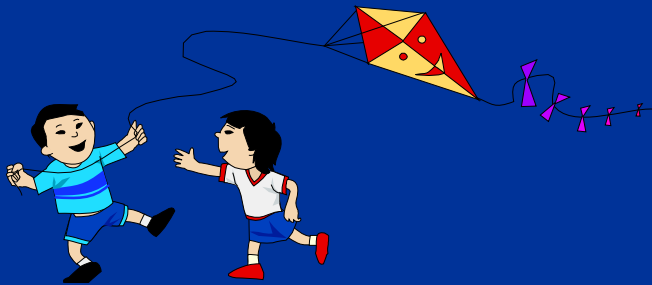
**School
health care**

**Physical
activity**

**The first
step**



Nutrition + Physical activity
= HEALTHY WEIGHT



BABY BLUES
av Rick Kirkman & Jerry Scott



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Today I have said "Sit quiet" and "Stop doing that" ten thousand times...

I usually say it twenty thousand times...

Maybe the kids have been doing better or maybe you miscalculated.



BABY BLUES
av Rick Kirkman & Jerry Scott

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KIRKMAN & SCOTT

How to help the family

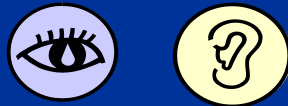
Let changes happen slowly



Choose one or two things to change



Encourage by giving positive comments



Confirm that you have noticed a difference



Avoid criticism – look for good examples

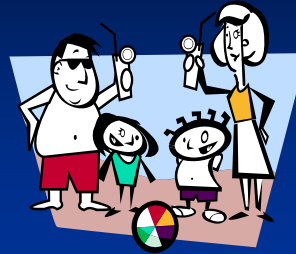
See progress



Make a deal with your child



The family works together but everyone in his or her own way



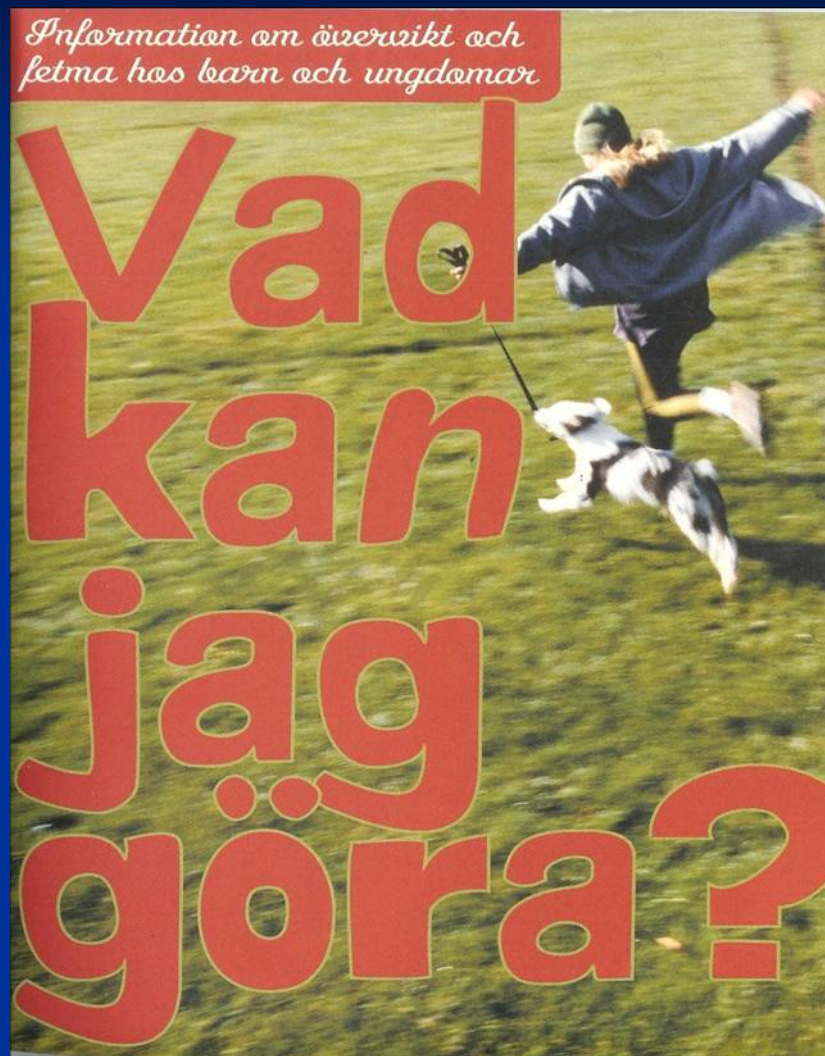
Accept that there are different ways to achieve the goal

Instead of nagging- remind kindly

Stay calm even if it might be difficult



It will take time and it has to do it



Our handbook

Free for all children and families in Southern Sweden

Our website

www.bravikt.info