Prevention of Pediatric Obesity: A Focus on the First Two Years

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Prevention of Pediatric Obesity: A Focus on the First Two Years

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INTRODUCTION

- Overweight and obesity rates among children have tripled in the last 20 years and overweight is increasingly recognized as a problem during infancy.1
- Rapid infancy weight gain is a known risk factor for overweight/obesity.2
- Pediatric obesity is linked to: hyperlipidemia, hypertension, type 2 diabetes, sleep apnea, fatty liver disease, and mental health problems.2
- There has been evidence that shows behaviors present in high-risk obesity groups start at a young age, suggesting that the need for intervention should be focused on the very early phases in a child’s life.5
- Pediatric obesity rates are highest among Black and Hispanic populations, as well as families living in poverty.4
- Breastfeeding enhances and nurtures the infant’s ability to self-regulate the sense of hunger and satiety.1

OBJECTIVE/AIMS

- This IRB-approved ongoing research study will investigate whether the introduction of a new clinical model, involving a dietician providing nutrition counseling at each well visit from birth to 2 years of age, will affect rates of obesity at the age of two between intervention infants and matched peers. Specifically, this study will:
  - Assess BMI and rates of overweight and obesity at age 2 years

OUTCOMES

- Over 270 total participant records entered into REDcap database
- Almost all of the participants have received their 12 month visit, a few are up to 18 months
- Existing records will produce preliminary data while the team continues to update after each well visit

REFERENCES


DISCUSSION

- Benefits:
  - The intervention provides a dietician onsite instead of having the patient travel elsewhere
  - Residents establish continuity by serving as background primary care providers
- Limitations:
  - Patient no-shows
  - External factors affecting scheduling
- Future Steps:
  - Continue with data extraction until all participants reach 2 years of age