

# Overweight children outside Edmonton region heavier than city counterparts

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Children referred for weight management who live outside the metropolitan Edmonton region are more overweight than Edmonton kids, researchers with the Faculty of Medicine & Dentistry suggest in a recently published a paper.

This may mean that children who live farther from a large urban centre are at a higher risk for obesity-related health issues, so improved health-care services need to be available outside metropolitan areas, say the researchers.

Geoff Ball and Kathryn Ambler, who work in the faculty's Department of Pediatrics and at the Alberta Health Services' Pediatric Centre for Weight and Health, are the lead researchers. Ball directs the centre and is an assistant professor at the U of A; Ambler is a research co-ordinator. The centre works with children between the ages of 8 and 17 who have a body mass index, or BMI, greater than the 85th percentile. Doug Hagedorn, a geography expert from the University of Calgary, was a co-author in the paper.

The researchers looked at 555 physician referrals to the centre between April 2005 and April 2009. About one in five lived outside the Edmonton metro area and almost half (48 per cent) of all the children referred to the clinic had BMIs over the 99th percentile.

The data showed the average height of metro Edmonton children was 5'1", while their average weight was 172 pounds. Kids from outside the

Edmonton metro area were taller and heavier, with the average height of 5'2" and 202 pounds. On average, kids who lived outside the Edmonton area were 31 pounds heavier and had a BMI four units higher than Edmonton-area kids, suggesting an increased health risk for those outside the metro region. The average age of children in the study was 12.

The researchers noted in their paper, published online by BioMed Central *Health Services Research*, that obesity-related health care delivered to children and their families outside metropolitan centres may need to be tweaked to ensure they are getting the care they need.

The paper suggests working more closely with health-care providers outside metro areas, so those physicians have more contact with specialists in large cities and more opportunities to learn about treating obesity-related health issues. And doctors outside metro areas need to be more aware about the importance of referring overweight and obese children to a centre that specializes in pediatric [weight-management](#) care.

A key point raised in the paper was the importance of physicians measuring children's height and weight and then plotting the children's BMIs, so a referral can be made for kids who have a BMI over the 85th percentile. The sooner these children are referred, the better it is for everyone, say the researchers. Currently, many children aren't referred because they're not recognized as being overweight by their family doctors.

"Families outside of metro areas often have fewer local resources to help them manage health risks that tend to accompany obesity," says Ball, "and a one-size-fits-all approach won't work."

In Canada, about 25 per cent of children and youth are overweight or

obese. This summer, Ball, Ambler and a colleague from the University of British Columbia, J.P. Chanoine, published a paper in the *International Journal of Pediatric Obesity* looking at 18 pediatric weight management programs in Canada.

That paper noted the centres don't have the capacity to deal with the two million overweight [children](#) in Canada. Unless pediatric weight management becomes more integrated in primary care settings, the related health consequences of childhood obesity will overwhelm the current health-care system, the researchers warned. Pediatric weight management programs in Canada need to get involved in an initiative to start a national research network, the researchers concluded.

Provided by University of Alberta

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