

Key to lifelong heart health is childhood intervention

December 6 2018

Evolving evidence shows that heart healthy habits in adults are rooted in the environments we live in in early childhood, representing a window of opportunity in young children to focus on health promotion and potentially prevent disease in adulthood, according to a review paper published today in the *Journal of the American College of Cardiology*. Senior author Valentin Fuster, MD, Ph.D., MACC, will also discuss related findings on Dec. 9 in a Future of Health Education Session at the American College of Cardiology's New York Cardiovascular Symposium.

Cardiovascular disease is the No. 1 cause of death worldwide, and many of the associated <u>risk factors</u> are modifiable behaviors. In this review paper, the authors describe what the future of <u>health promotion</u> looks like and specifically address three focus areas: reasons why children should be a focus for health promotion; strategies for health promotion in children along with legislative efforts; and research gaps.

"Because of the unique plasticity of the human brain during childhood, this period represents a window of opportunity to instill lifelong lasting healthy habits, therefore preventing future development of cardiovascular disease," Fuster said. "By educating on health promotion early in life, we may also have the potential to reduce the burden of other disease as well."

Modifiable risk factors in children and adolescents can include smoking, obesity, physical activity and unhealthy diet, as well as high cholesterol,



high blood pressure and high blood glucose. Research has shown that less than 1 percent of children have ideal dietary habits and only about 50 percent of adolescents get the guideline recommended amount of physical activity. However, research has also shown that children with unhealthy habits who adopt healthy habits before adulthood have similar health outcomes to those who were never unhealthy.

According to researchers, to effectively change the health habits of children, we must use a multicomponent educational approach that involves their family and their teachers. In the review, several strategies for school-based initiatives, family- and community-based interventions, and legislation and public policy initiatives are discussed.

Finally, the authors address the current gaps in research that might influence the success of health promotion interventions in children, including a lack of research on how family strain and emotional issues associated with socioeconomic status may influence unhealthy habits and limited longitudinal data directly linking unhealthy behaviors in children and cardiovascular outcomes in adults.

"The integration of school-, family- and community-based approaches, along with a wide support across multiple sectors through the implementation of public policies, are likely necessary for the success of health promotion programs in children," Fuster said. "However, longterm and large-scale research studies need to establish their effectiveness in reducing cardiovascular risk factors and disease later in life."

More information: "The Future of Health Education Starting at Pre-School: Results in 4,000 Children at Short, Middle and Long Term," *Journal of the American College of Cardiology* (2018).



Provided by American College of Cardiology

Citation: Key to lifelong heart health is childhood intervention (2018, December 6) retrieved 10 May 2024 from https://medicalxpress.com/news/2018-12-key-lifelong-heart-health-childhood.html

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