

U.S. Preventive Services Task Force recommends behavioral interventions for pediatric weight loss

December 12 2023, by Elana Gotkine



The U.S. Preventive Services Task Force (USPSTF) recommends intensive behavioral interventions for children and teenagers with a high

body mass index (BMI). This recommendation forms the basis of a draft recommendation statement published online Dec. 12.

Elizabeth O'Connor, Ph.D., from the Kaiser Permanente Evidence-based Practice Center in Portland, Oregon, and colleagues examined the benefits and harms of weight management interventions (behavioral, liraglutide, semaglutide, orlistat, and phentermine/topiramate) in health care settings for [children](#) and adolescents with high BMI. Data were included from 58 randomized controlled trials, with 10,143 participants.

The researchers found that behavioral weight management interventions were associated with small decreases in BMI and other weight-related outcomes after six to 12 months; in interventions with higher contact hours and that offered physical activity sessions, larger effects were seen. Trials offering 26 or more hours of intervention contact showed improvements in [blood pressure](#) and fasting plasma glucose after six to 12 months.

The largest effects on BMI were seen for semaglutide and phentermine/topiramate; smaller effects on BMI were seen after 12 to 13 months for liraglutide and orlistat.

Based on these findings, the USPSTF recommends that clinicians provide or refer children aged 6 years or older with high BMI to comprehensive, intensive behavioral interventions (grade B [recommendation](#)). Children and adolescents with a high BMI should receive intensive behavioral interventions to achieve benefit.

The draft evidence review and draft recommendation statement have been posted for public comment. Comments can be submitted from Dec. 12, 2023, through Jan. 16, 2024.

More information: [Draft Evidence Review](#)

[Draft Recommendation Statement](#)
[Comment on Recommendation Statement](#)

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