Achievement of meaningful impacts on childhood obesity requires more than single interventions

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Childhood obesity is one of the greatest health challenges of the 21st century. Worldwide, there has been a more than ten-fold increase in the number of children and adolescents with obesity in the past four decades, increasing from 5 million girls in 1975 to 50 million in 2016, and from 6 million to 74 million boys, according to a new global analysis of trends in child and adolescent obesity in 200 countries, published in *The Lancet*.

In Europe, 19-49% of boys and 18-43% of girls are overweight or have obesity, representing approximately 12 to 16 million overweight youth, very few of whom receive adequate treatment. The European prevalence of childhood obesity continues to rise except in a few countries where it is levelling off (Denmark, France, Sweden, Switzerland).

Childhood obesity is a complex disease, which in the majority of children has a multifactorial basis. It has been shown to have a strong association with adult mortality and morbidity. The length of exposure to obesity is also associated with the risk of developing related co-morbidities over time, in particular non-communicable chronic diseases (NCDs). As childhood obesity has a strong tendency to track into adulthood, most children and adolescents who have obesity will have obesity in adulthood and will have a significant lifelong exposure. Childhood is a unique window of opportunity to have a lifetime impact on health, quality of life and prevention of disabilities. Therefore, urgent

action is needed.

The EASO Childhood Obesity Task Force (COTF) is convinced that considering obesity as a chronic disease is a crucial step for increasing individual and societal awareness, enhance the development of novel preventive interventions and health policies, and improve the care of children with obesity worldwide. Treating obesity early prior to the appearance of co-morbidities, may prevent its escalation into significant clinical and psychosocial problems. Healthcare systems should be adapted and professionals should be trained to prevent and treat childhood obesity.

The EASO is aiming to address the childhood obesity epidemics via policy and educational activities, identification of research agendas and the creation of collaborations across Europe of clinicians and researchers involved in childhood obesity. EASO has recently proposed a revision of the ICD-10 and ICD-11 Beta Draft definitions of obesity in children and adults. Achievement of meaningful impacts on childhood obesity requires more than single interventions, such as taxing soda or traffic light food labelling. Although individual-level changes are a necessary component of obesity prevention and treatment, they are only one part of a whole system response, and must be supported by upstream actions that focus on promoting healthier physical, economic and social environments.

Provided by European Association for the Study of Obesity

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