



Bettering the Evaluation and Care of Health (BEACH) is a continuous, national survey of general practice activity in Australia in which ever changing random samples of about 1000 GPs per year take part. It commenced in 1998.

Children's BMI and GP management of weight problems in childhood

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What role do GPs play in managing overweight and obesity in children?

Body mass index

In 2004, an international obesity taskforce found that 10% of the world's school age children were carrying excess body fat. According to their study, during the 1990s in Australia, Canada and parts of Europe, an additional 1% of all children became overweight each year.¹ Currently, one-third of children and adolescents in the USA, and one-quarter in the United Kingdom, are overweight or obese.^{2,3}

Every year since 1998, a random, ever changing sample of 1000 GP participants in the BEACH study each record details of 100 patient encounters. At the same time they gather BMI data on patients at 40% of these encounters. Each year, BMI was calculated for 3000–4000 children aged 2–17 years using the appropriate BMI method for children.⁴ Results of this research give us a clear picture of trends in overweight/obesity among Australian children attending general practice over the past decade. The prevalence of overweight ranged between 17% and 19%, and obesity between 10.5% and 11.5%. No significant change occurred over the 10 year period (Figure 1).

GP management of children's weight problems

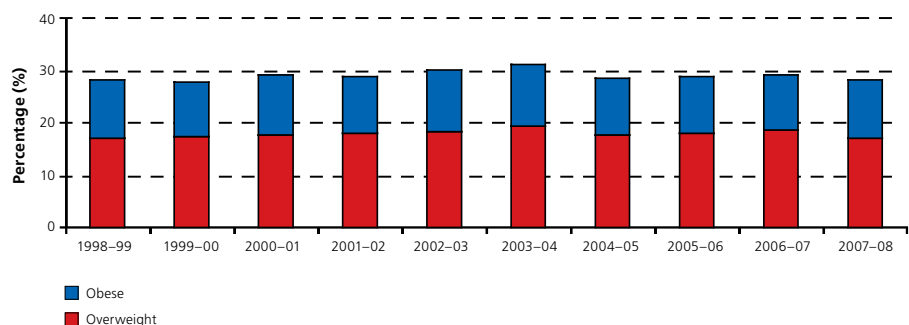
While the prevalence of childhood overweight and obesity in Australia has not changed in a decade, it is still unacceptably high. Prevention is the only realistic approach to this multifaceted problem. All children, not just those who are overweight, benefit from a healthy diet and physical activity.

For this to be feasible, the taskforce suggests we need social changes such as the provision of safe parks, playgrounds, pedestrian zones and cycling paths, as well as advertising bans and taxes on unhealthy food.¹

General practitioners also have a major part to play in this strategy, as they are presently the only universally available service for the management of overweight and obese children in Australia. The current media coverage may increase GPs' opportunities to address the problem at the consultation. A recent study matched BMI data in BEACH with the problems managed

at the encounter and found that on average, GPs managed overweight/obesity in children at one in every 58 encounters with overweight or obese children. The study showed that GPs were much more likely to manage the problem in girls than boys, and in older children more than younger children. Depression was co-managed at the encounters at five times the average rate. When they did manage overweight/obesity, GPs undertook appropriate measures such as counselling and referral, leading to significantly longer consultations.⁵ It is evident that GPs need specific support to focus on this problem. ♦

Figure 1. Prevalence of overweight/obesity in Australian children (2–17 years) attending the GP – BEACH data



1. Lobstein T, Baur L, Uauy R. Obesity in children and young people: a crisis in public health. *Obesity Reviews* 2004;5:4–85.
2. Ogden CL, Carroll MD, Flegal KM. High body mass index for age among US children and adolescents, 2003-2006. *JAMA* 2008;299:2401–5.
3. Childhood Obesity Working Group of the International Obesity TaskForce (IOTF). London, UK.
4. Cole TJ, Bellizzi MC, Flegal KM, Dietz WH. Establishing a standard definition for child overweight and obesity worldwide: international survey. *BMJ* 2000;320:1240–3.
5. Cretikos M, Valenti L, Britt H, Baur L. General practice management of overweight and obesity in children and adolescents in Australia. *Medical Care* 2008;46:1163–9.