Paediatric obesity and exposure to environmental adversity.

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Abstract: Purpose of study: Exposure to four or more environmental adversity factors in childhood is associated with a 1.4 to 1.6 fold increase in obesity and myocardial infarction in adulthood and a 1.4 increase in coronary artery disease and stroke. Specifically, experiencing sexual abuse in childhood is associated with an elevated risk of obesity in adulthood. However, few studies have investigated adversity exposure and elevated weight in childhood. The aim of this study is to characterise the relationship between environmental adversity, paediatric obesity, and cardiovascular risk factor diagnoses.

Methods used: A retrospective medical review of electronic medical records of 295 children aged 1 to 17 years old with elevated BMI was conducted. Records were obtained from Child Health Clinic at Children’s Hospital Colorado, selecting for patients who received a mental health consultation following a weight measurement of BMI greater than the 85th percentile. Data collected included: demographics, cardiovascular risk related diagnosis, BMI and behavioural health flowsheets. Following EHR abstraction encounter data were manually coded for adversity using ATLAS.ti.

Summary of results: The sample was predominately Latino/Hispanic (67.7%) and publicly insured (85.7%) patients. There were equal percentages of males and females (50.5% and 49.5%, respectively). On average, there were 1.5 adversity factors reported per child with 72.5% of patients reporting at least one adverse experience. The most common adversity factor reported was family separation (38%) followed by abuse (15%). Weight diagnoses were evenly distributed between overweight (25.8%), obese (40.3%), and morbidly obese (33.9%). There were 38 patients with cardiovascular risk factor diagnoses including: essential hypertension, hyperglycemia, hypertriglyceridemia, and dyslipidemia. After correcting for age, race, gender, insurance, and financial factors families who reported housing instability were more likely (p=0.002) to have children who were morbidly obese (61.3%) than families who did not report housing instability (30.7%).

Conclusions: This study demonstrated the most common environmental adversity factor in the overweight or obese paediatric population was family separation. Finally, it demonstrated a dose dependent relationship between elevated weight in childhood and housing instability.

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