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Heading off weight gain early

Kids are learning how to moderate eating, exercise for lifetime

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Ten-year-old Ian Johnson of Akron could see his future, and it worried him. The Johnson men -- his father and grandfather, for instance -- all tended to put on weight around the middle. At 4 foot 9 inches and 119 pounds, Ian was on track to carry on the family tradition.

"He's always been on the higher end of the weight charts," says his mother, Sandra Johnson. "But it was never an alarm. Then one day I noticed when he had his shirt off, he just looked so uncomfortable."

The Johnsons' family doctor referred them to Akron Children's Hospital's Future Fitness Program. The yearlong program begins with a personalized weight-loss evaluation by a physician, nurse practitioner, dietitian and exercise technician. Clients are screened for health problems such as diabetes and high blood pressure that often accompany excess weight, even in the young. Then they meet regularly with the dietitian and exercise technician.

"The dietitian taught us about making food choices," Sandra Johnson says. "She would give us different goals each time we met with her, for instance, to have no more than one sugary drink a day. She taught us about portion control and gave us some snack ideas."

The exercise technician worked out with Ian at the Sports Medicine Center, Johnson says. "She would give him monthly workout goals, like to try to get 30 minutes of heavy, sweaty exercise three times a week."

Ian admits he was apprehensive at first.

"I was worried that it would be hard for me, and it kind of was. But I was glad I would get to lose the weight I gained."

Ian is at an ideal age for intervention, according to Dr. Troy Smurawa, a pediatrician in the children's sports medicine department.

"Younger kids have the advantage that they still have growth potential. Teenagers have reached their adult heights, and have established an unhealthy lifestyle pattern. And with younger kids, parental influence can have more impact." Success in a younger child often means halting the progression of gain so that height can catch up.

At younger ages, weight-loss clients are evenly divided between boys and girls in the children's program. Among teens, there are more girl participants. This reflects national data that show that while the prevalence of overweight is actually higher among teen boys, dieting behavior is more common among girls.

Girls mature earlier, Smurawa points out. Because they reach adult height around age 14, they don't have the advantage of being able to grow into weight.

Ian did well in the Future Fitness program. Although still at the upper end of the growth charts, he lost 12 pounds and gained an inch of height, so that his BMI dropped from 26 to 23. He learned to ride his bike

last summer, something he had not been able to do before.

"I used to not be able to exercise," Ian says. "It used to hurt just to try to do a sit-up."

His eating habits have changed, too.

"I always remember to keep focused, eat healthy snacks, and not eat as much junk food," he says.

His mother agrees. "One thing he learned was portion control. He's so good about not eating seconds. He eats his one plateful and then he's done."

The hardest part for Ian? The family doesn't eat out as much.

"I miss eating at a buffet after church. But now after church we come home and have a nice meal that's healthy."

And now he has advice for other kids who are concerned about their weight.

"I suggest to kids who feel like they're overweight that they exercise, eat healthier and don't be embarrassed. If I can do it, they can do it."

Cinda Williams Chima is a registered dietitian on the faculty of the University of Akron. E-mail nutrition and weight-control questions, labeled "Nutri-News" (or, for this series, "A Heavy Burden") to food@plaind.com.

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