

OVERWEIGHT AND OBESITY IN CHILDREN: KEY FACTORS

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Annotation

The article presents an overview of the literature on one of the important problems of modern health care — obesity in children and adolescents. The consequences of obesity in childhood are described in detail. Obesity among children and adolescents in the modern world is one of the most important problems for residents of most countries of the world.

Keywords: Overweight, obesity, obesity in children, childhood.

Аннотация

В статье представлен обзор литературы по одной из актуальных проблем современного здравоохранения — ожирению у детей и подростков. Подробно описаны последствия ожирения в детском возрасте. Ожирение у детей и подростков в современном мире является одной из важнейших проблем для жителей большинства стран мира.

Ключевые слова: избыточная масса тела, ожирение, ожирение у детей, детский возраст.

Annotatsiya

Maqolada zamonaviy sog'liqni saqlashning dolzarb muammolaridan biri - bolalar va o'smirlardagi semirish bo'yicha adabiyotlar sharhi keltirilgan. Bolalikda semirishning oqibatlarini batafsil tavsiflangan. Zamonaviy dunyoda bolalar va o'smirlarning semirishi dunyoning aksariyat mamlakatlari aholisi uchun eng muhim muammoldan biridir bo'lib qolmoqda.

Kalit so'zlar: ortiqcha vazn, semizlik, bolalarda semizlik, bolalik davri.

Overweight and obesity today represent one of the urgent problems of the health status of the population of modern society [3]. The prevalence of childhood obesity is reaching alarming levels in many countries and is an urgent and serious problem. While rates may remain stable in some settings, in absolute terms, there are more overweight and obese children in low- and middle-income countries than in high-income countries[5].

Over the past few decades, there has been a trend towards a rapid increase in the number of obese children and adolescents around the world. The number of obese children and

adolescents aged 5 to 19 increased from 11 million in 1975 to 124 million in 2016, and 213 million were overweight in 2016[4].

Overweight and obese children are more likely to experience reduced quality of life and education, behavioral and emotional disturbances, and stigmatization, leading to mental health problems.

Despite the well-known assertion that the main cause of obesity is an imbalance between energy expenditure and energy intake, in recent years there have been many new and interesting data indicating the early origins of obesity, which are laid, possibly during prenatal development and / or infancy and early childhood [6].

The causes of obesity are varied and include both genetic predisposition and environmental factors. External risk factors for obesity in children include:

- maternal smoking during pregnancy;
- high fetal weight at birth (more than 4 kg);
- low fetal weight at birth, combined with rapid weight gain for the first time in 2 years of life (especially for the first time 3-6 months);
- artificial feeding of newborns;
- consumption of sugary drinks in childhood;
- sedentary lifestyle and lack of exercise;
- insufficient sleep (less than 12 hours in the first year of life)[2].

Obesity leads to morbidity, disability and worsens the quality of life. Obese children are at risk of developing many diseases. The severity and duration of obesity increase the risk of comorbidities. Childhood obesity is largely a risk factor for cardiovascular, digestive, musculoskeletal, endocrine systems and mental disorders. It is also associated with poor school performance and low self-esteem. Overweight, especially high obesity, is a risk factor for obstructive sleep apnea syndrome - hypopnea. According to some studies, obese children are 4-6 times more likely to have obstructive sleep apnea. Other previous studies have shown that being overweight during childhood and adolescence has both short-term and long-term adverse effects on physical and psychosocial health. More than 60% of children who are overweight before puberty will be overweight in early adulthood, lowering the average age at which noncommunicable diseases are diagnosed and dramatically increasing the burden on health services to provide these children with the majority of care and treatment [3].

The main physical cause of overweight and obesity is an imbalance in energy intake from food and energy expended in physical activity [1]. And also obesity in children is associated with adverse physical and psychological consequences that can manifest themselves in childhood and continue to be traced in adults. Short-term effects include metabolic disorders such as high blood pressure, dyslipidaemia, insulin resistance, impaired glucose tolerance, type 2 diabetes mellitus (T2DM), steatohepatitis (non-alcoholic fatty liver disease) and metabolic syndrome, endocrine disorders (eg, progressive pubertal development, polycystic ovaries), respiratory

symptoms, including shortness of breath and obstructive sleep apnea, orthopedic complications such as displacement of the main epiphysis of the femur, Blount disease, valgus knee, flat feet, malignant neoplasms [4].

Anthropometric indicators are used to control weight in children. Human height and weight are the most important for assessing and monitoring nutritional status, diagnosing overweight and obesity in adults and children. Body mass index (BMI) is considered a necessary indicator for assessing the condition of children from preschool age. It is calculated as weight (kg) divided by height squared (m²) and is used to determine underweight or overweight and obesity. The calculated indicator is compared with the international standard median according to gender and age[2].

One of the leading directions in the prevention of obesity in childhood is the promotion of healthy nutrition among the population. It is necessary to stop the consumption of high-calorie and low-nutrient foods. These include sugary carbonated drinks, most fast food products, floury, fatty foods. Attention should be paid to eating on a schedule, introducing regular meals, especially breakfast, and avoiding constant snacking throughout the day. Another simple way to control calories is to reduce portion sizes, everyone knows that portion size and obesity progress in parallel. It is recommended to increase the consumption of fruits and vegetables, as well as legumes, whole grains and nuts, limit energy intake from all types of fats and switch from saturated fats to unsaturated fats, limit free sugars. For effective prevention of overweight and obesity, at least one hour of daily physical activity is recommended. To combat the epidemic of obesity among children, it is necessary to encourage physical activity in schools. Because children and adolescents spend most of their lives in school, their school environment is an ideal environment for acquiring knowledge and skills to make healthy choices and increase levels of physical activity[3].

Conclusion

Children tend to become obese in adulthood and are more likely to develop non-communicable diseases such as diabetes and cardiovascular disease at a younger age. Overweight and obesity, as well as the diseases associated with them, can largely be eliminated. For this, the prevention of obesity in children must be given priority. In addition, it is important to eliminate the factors that cause obesity, as well as improve the diet, increase the physical activity of children.

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