



How do you tell your child that they're overweight, asks STEVE DOW.

Your couch-potato son is developing a belly. Your daughter won't eat her school lunch but devours junk food when she gets home. She, too, is starting to look more than a little overweight. So how do you broach the subject without upsetting them or, much worse, setting them up for an eating disorder?

The key is more what not to say, says paediatrician Dr Matt Sabin.

Teenagers particularly resent negativity such as: "You're putting on weight; you need to do something about it" or "You need to cut down on takeaway foods."

Sabin, an obesity specialist with Melbourne's Royal Children's Hospital, says statements such as these will just make them switch off. Instead, children and adolescents need to feel empowered in order to change their eating habits.

For parents of children aged up to 12, it's mostly about leading by example.

"If you say, 'No, we're not going to watch TV, we're going for a walk' then they'll learn from this behaviour," Sabin says.

In young children, often all that is required to stabilise weight are a few key changes: controlling portion sizes at mealtimes, choosing healthy snacks, making family takeaway dinners a rare treat (no more than once a month, if that) and getting enough daily exercise to get "a little bit sweaty and out of breath".

Among teenagers, breaking the weight cycle can be tougher, so short-term goals are best. For those 12 and over, parents can effectively broach the issue with reasoned questions such as: "Do you really like those foods? Is it because we haven't got the right foods to put in your lunch box?" and "Why

don't you come shopping with me and we can think about what we can buy together?"

Eating regularly – three meals and two healthy snacks a day – should be the goal. But "we" is key: the family that eats better and exercises together is most likely to ensure its obese or overweight child or teen loses weight and gets fit.

How do you know a child is overweight? Body mass index testing – a calculation that adjusts weight for height – is less useful because the index charts are based on research on adults and projected back for children.

Instead, Sabin suggests using a tape to measure a child's waist circumference – but, again, do it sensitively.

As a rule of thumb, "anyone's waist should be no more than half the value of their height". Measure *everyone* in the household,

Fact file

☐ Lead by example. Control portion sizes at mealtimes, choose healthy snacks, make family takeaway dinners a rare treat and exercise daily.

☐ For lunch boxes, consider packing two sandwiches, a drink, a piece of fruit and a yoghurt. It's better to fill up on healthy food than raid the cupboard for snacks after school.

☐ Involve children and teenagers in planning meals, shopping and cooking.

rather than single out a child. And do it no more than fortnightly or, preferably, monthly.

It's important not to be too strict, Sabin says, because that can make kids give up. Children and teens shouldn't be encouraged to follow commercial diets, especially during puberty.

Parents sometimes worry that tackling obesity in childhood will lead to eating disorders later in life but Sabin says there's no real evidence to suggest a link.

Schools and after-school programs have not had much impact on childhood obesity, nor have GPs had much influence on their patients' weight status, he says. Children's holiday "fat camps" lack long-term data, suggesting the "long-term results are not great", while lap band surgery should be a last resort, given US data shows long-term gut problems and the need for re-operation in significant numbers of patients.

One in 100 obese children referred to specialist services such as Sabin's has an underlying medical, genetic or hormonal cause for weight gain. But sometimes, parents simply need help with their overweight children. In that case, if the child is under 12, Sabin will advise the parents directly.

With teenage patients, they know what they are coming to the clinic for. That's when the indirect probing stops and directness begins. "Your parents or your doctor are noticing you're putting on a little bit of weight," Sabin will diplomatically tell the teen, "and this is something we need to tackle." By that stage, "most are open to those kinds of discussions".

Matt Sabin is the author of *Is Your Child Overweight?* (Wilkinson Publishing, \$9.95).

Vital signs

FAT IN THE FAMILY

Finally, something new to blame on your parents: love handles. Two new studies on 195,000 people lend fresh evidence to the thesis that obesity is at least partly genetic. The studies – the Genetic Investigation of Anthropometric Traits (GIANT) – identified 18 genes linked to obesity and more than a dozen that could affect whether the kilos land on your hips or thighs. Nutritionists still believe, however, that environment plays just as big a role in obesity.

ALZHEIMER'S GUIDELINES

Alzheimer's experts are proposing new criteria for diagnosing the disease. *The Lancet* medical journal reports the guidelines would take account of recent scientific developments that indicate whether a person is at risk of developing the disease, so treatment could start earlier.

Vital sites

PODRUNNER djsteveboy.com /podrunner.html

Techno, trance, funk, breakbeat and tribal percussive. American DJ Steve Boyett says they all make great workout music. In his free weekly podcast, *Podrunner*, Boyett mixes dance music to motivate joggers, runners, cyclists and power walkers. For a frenetic session, there are mixes with songs at 180 beats a minute. For lazy days, Boyett slows it to 130 beats a minute.



REACH OUT au.reachout.com

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