

Childhood Obesity Epidemiology

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THE EPIDEMIOLOGY OF CHILDHOOD OBESITY IN EUROPE AND WORLDWIDE

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The dramatic increase of the prevalence of overweight and obesity in adults over the last decades is paralleled by a corresponding increase in children and adolescents. WHO estimated a global increase of overweight/obese young children (up to 5 years) from 32 million in 1990 to 42 million in 2013. Although recent data indicate a halting in the rise of childhood overweight/obesity in western countries the prevalence remains unacceptably high. The related population burden of metabolic, cardiovascular, musculoskeletal and psychiatric disorders may increase in the future and result in a large increase of healthcare costs. The prevalence of childhood overweight/obesity varies considerably between countries. North America, Southern/Eastern Europe and Northern Africa/Middle East are among the regions with the highest prevalence worldwide. However, the comparison between countries and over time is hampered by heterogeneous sampling frames and measurement methods as well as different reference standards, where, e.g., the commonly used WHO standard result in higher prevalence values as compared to the reference standard proposed by the International Obesity Task Force (IOTF). In most countries strong differences are observed between socio-economic groups, often assessed by parental education: while an inverse association is observed in most western countries, positive associations are observed in developing countries. Countries being in a transitional phase exhibit divergent trends: positive in rural and inverse in urban areas. Data from Europe indicate that known risk factors like lack of physical activity, over-consumption of energy-dense foods and unhealthy lifestyle behaviours like excessive TV exposure may explain a major part of the observed social differences. Addressing behaviours alone to reduce the incidence of obesity are expected to have little effect and may rather increase the social divide. Future strategies to curtail the high prevalence of childhood overweight/obesity need to address the causes of unhealthy behaviours, i.e. the obesogenic environment.