



Interventions for preventing childhood obesity effective

Clinical question

How effective are interventions in preventing childhood obesity?

Bottom line

There was strong evidence to support beneficial effects of child obesity prevention programmes on body mass index (BMI). The best estimate of effect on BMI was of a 0.15kg/m² reduction, which would correspond to a small but clinically important shift in population BMI if sustained over several years. The interventions were predominantly based on behavioural change theories and implemented in education settings. Analysis by age group (0–18) indicated the strongest evidence of effectiveness was in 6 to 12 year olds, with promising findings also in 0–5 year olds, particularly for interventions conducted in home or healthcare settings. Only 8 studies reported on adverse effects, and no evidence of adverse outcomes, such as unhealthy dieting practices, increased prevalence of underweight or body image sensitivities, was found. Interventions did not appear to increase health inequalities, although this was examined in fewer studies.

Caveat

The unexplained heterogeneity of effects observed, potential attrition bias in many studies, and the likelihood of a small-study bias may have inflated the estimate of effect, so these findings should be interpreted with caution.

Context

Prevention of childhood obesity is an international public health priority given the significant impact of obesity on acute and chronic diseases, general health, development and well-being. The international evidence base for strategies that governments, communities and families can implement to prevent obesity and promote health is accumulating but remains unclear.

Cochrane Systematic Review

Waters E et al. Interventions for preventing obesity in children. Cochrane Reviews, 2011, Issue 12. Article No. CD001871. DOI: 10.1002/14651858.CD001871.pub3. This review contains 55 studies (including a meta-analysis of 37), involving 27,946 participants.

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