

# The Continuing Challenge of Pediatric Obesity

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Pediatric obesity is a serious problem in the United States—with a growing number of children and adolescents considered overweight or obese. The Centers for Disease Control and Prevention (CDC) reports the following statistics for children and adolescents aged 2-19<sup>1</sup>:

- 13.7 million American children (18.5%) are obese
- Obesity is most prevalent among 12- to 19-year-olds (20.6%)
- Hispanic (25.8%) and non-Hispanic blacks (22.0%) are more likely to be obese than non-Hispanic whites (14.1%)

The CDC defines pediatric obesity as a body mass index (BMI) over the 95th percentile on age-specific growth charts.<sup>1</sup>

### More Complicated Care

Medical and surgical care of children with obesity is complicated and requires recognition of the problem, appropriate equipment, and safe management.<sup>2</sup> Obese children and adolescents are likely to suffer one or more comorbidities—including high blood pressure, heart disease, diabetes, sleep apnea, joint problems, and skin breakdown, among others.<sup>3</sup>

Hospitals must assess their equipment as well as lifting polices to ensure a safe environment for both patients and staff. Special attention should be focused

on additional equipment needs, including larger wheelchairs, beds, support surfaces, as well as gowns as blood pressure cuffs.<sup>2</sup>

### Specific Bed Frame and Support Surface Needs

The National Pressure Injury Advisory Panel (NPIAP, formerly NPUAP) notes that standard-size beds may restrict a patient's ability to turn side-to-side or into a position to offload the sacral area. Selection of a larger bed and support surface should take into consideration the patient's dimensions to ensure adequate space for repositioning.<sup>4</sup> A good rule of thumb is to be sure the patient has at least six inches on either side of their body when lying flat.

For any patient with obesity, no matter the age, hospitals must choose support surfaces with enhanced pressure redistribution, shear reduction, and microclimate management features.<sup>4</sup>

### Conclusion

There is no simple approach to caring for children and adolescents suffering from obesity. Hospitals under construction are taking extra steps to plan for the growing obesity epidemic—and existing facilities are continuously updating their infrastructure, equipment, and furniture to safely accommodate larger patients and their families.<sup>5</sup>

### References:

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