

## Children's Obesity, Overweight and Underweight: Alarms of Youth Epidemics in Future

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### Editorial

Nowadays following risk factor and epidemiologic transition the world is experiencing more episodes of chronic and non-communicable diseases. Obesity and overweight as a main risk factor for cardiovascular diseases, some cancers and Diabetes has been focused during recent decades. Industrialization and urbanization changed the life style of people; their physical activity decreased following technology improvement and their dietary habits changed toward high calorie and low volume foods [1]. Developed countries mainly are in the final level of the risk factor transition. They successfully controlled underweight and under nutrition in children and now their main problem is overweight and obesity following over nutrition and physical inactivity. Developing countries based on their health system function are in different levels of transition. Most of them have under nutrition yet as a consequence of inequality in revenue distribution, low education and sometimes cultural issues. On the other hand they faced with over nutrition at the same time but in different levels and the burden of obesity and overweight is now shifting towards the poor [2,3].

In the case of disease epidemiology, we still expect to see considerable cases of communicable diseases in children as the result of lower immune system function following malnutrition. On the other side in future years, we expect a dramatic decrease in the onset age for diabetes, cardiovascular diseases, some cancers and other obesity-induced diseases. The reason for this phenomenon is considerable increase in overweight and obesity in primary school children [2,4].

Authorities of health systems should be aware of consequences of these transitions. The best strategy for combating the outcomes of nutritional imbalance is primordial prevention. Public health actions should be considered as the best cost effective tool for control of these

risk factors. Field studies should be designed to follow the trend, suggest the best interventions and assess the effectiveness of applied interventions. Unfortunately, the trend of obesity is going to involve even pre-school children; so the target population in these studies and interventions is very wide including pre-school and school children, youths, adults and even older people. A main problem in all countries, especially developing countries, is limited resources for intervention. To overcome this, the most cost-effective group for educational intervention is mothers; the married women who have at least one child should be considered as the first important target group, especially in developing countries.

Developing evidence based policies needs native data for every country. It is recommended to set priorities of health system based on scientific methods and encourage researchers to develop relevant evidence. This evidence should be valued and used by policy makers. Most of developing countries have serious problems in inter-sectoral cooperation for planning and implementing public health actions. This is another key point for improving preventive programs for combating risk factors of non-communicable diseases. Advising multidisciplinary committees for this issue could help policy makers to overcome this limitation.

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