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HEALTHY LIFESTYLE FOR THE PREVENTION OF CHILDHOOD OVERWEIGHT AND OBESITY IN A MULTIDISCIPLINARY APPROACH TO PUBLIC HEALTH IN THE COMMUNITY PHARMACY

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Background and Objectives:

A pilot intervention has been designed as a possible and additional strategy in coordination with other health professionals in the framework of the Operating Committee of Prevention and Community Health (COPISC) for the prevention of childhood overweight and obesity (6-14 years old) in the Community Pharmacy.

The prevention of overweigh and obesity in children has become a priority given the current Spanish rates (25.7 % and 16.8 % respectively). Community pharmacies are widely accessible by families and could provide food aid & physical activity counseling and easily carrying body mass index measurements. Moreover, for those families not routinely accessing to primary care services, pharmacists might be the only healthcare professionals in seeing them on a regular basis.

Methods:

COPISC accepted lifestyles recommendations stemmed from the latest scientific evidence on obesity prevention:

Food items

- Adequate fruit & vegetable consumption and other relevant Mediterranean Diet components (fish, olive oil, nuts, legumes and cereals)
- · Relevance of family meals,
- Serving-size density foods occasional consumption (pastry and fast food like sugary drinks and pre-cooked foods)
- Meat and processed meats moderate consumption

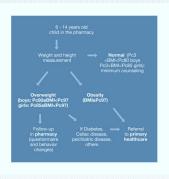
Physical activity and rest

- Physical activity promotion (at least 60 minutes/day)
- · Limiting sedentary activities (less than 2 hours/day of screen (TV, computer...) exposure)
- Enough hours of sleep (about 9 hours/day)

Through those accepted messages a score-based questionnaire was weighted according to the level of scientific evidence. Food items consensus according to the Spanish Society for the Study of Obesity - SEEDO. Being evidence grade A issues with the highest weighting, evidence grade B issues weighted intermediate and evidence grade C issues the lowest weighting. There were not considered the issues with controversial and inconsistent grade of evidence.

Results:

And algorithm is established to describe the interaction between pharmacists and other health professionals to detect, follow-up and referral.





Conclusions:

The Community Pharmacy intervention in preventing childhood overweight and obesity through promotion healthy lifestyles is a possible cost-effective additional strategy in coordination with other health professionals which can help to reduce the cost of treating the consequences of obesity at a long-term basis.

Keywords:

Childhood, Obesity, Overweight, Community Pharmacy, Public Health Nutrition, Intervention