

book review

Child and adolescent obesity: causes and consequences, prevention and management.

Edited by Walter Burniat, Tim J Cole, Inge Lissau and Elizabeth ME Poskitt. Cambridge University Press, 2002. £65.00 (hardback).

This book on child and adolescent obesity, like Gaul, is split into three parts, addressing as it does the causes, consequences and management of childhood obesity. Overall, the book is well written and edited; most of the differences in style between the different chapters have been ironed out. The graphics are good, although I would liked to have seen more illustrations and summary boxes in addition to the useful conclusions at the end of each chapter.

The book is aimed at physicians and other health care professionals involved in this growing field (sorry!). The scale of the problem we face is frightening. In France the prevalence of body mass index (BMI) greater than the 90th centile in 4–17 year olds increased from 12.5% to 14.9% over only ten years. The authors highlight how average BMI can be misleading in the evaluation of obesity prevalence. In adult obesity we have hard outcomes, we can define obesity in terms of a particular morbidity or mortality, rather than in relation to centiles from the mean. Much of the data in child and adolescent obesity relates to centile charts rather than outcome. Is the whole-population BMI distribution shifting to the right or is there an obese subpopulation? Can we define childhood obesity in terms of outcome rather than centiles?

The time from writing to publication may have led to some omissions and we see this most in the pathogenesis and consequences of obesity. One would like to see more on central energy control, where we now have a fair understanding of mechanisms and several possible targets for pharmacological intervention. The regulation of body fat distribution and insulin resistance in relation to resistin or hydroxysteroid dehydrogenase are untouched. In the second section dealing with consequences of obesity, type 2 diabetes mellitus in children or the consequences of obesity for pregnancy receive no attention. Our increasing understanding of insulin action and the effects of obesity on ovarian function also receive little coverage.

The strengths of this book lie in its management section. Home-based management, dietary treatment, activity management and psychotherapy have excellent chapters that will be useful to the practising clinician. There is a common theme – that concentrating on the obese child may be unsuccessful unless we try to alter the behaviour of the whole family. The chapter on drug therapy perhaps pays too much attention to older agents and not enough on the only two agents that we can use in the UK. Whilst accepting there is little evidence for their use in children, I think some practical advice about their use or otherwise would be extremely useful.

The chapter on prevention is both thoughtful and timely, focusing on *what* needs to be done rather than necessarily whose

responsibility it is. This chapter covers national and local governmental roles, for example in taxation or advertising, but does not mention modification of behaviour by taxation. We tax smoking, partially at least, to modify the population's behaviour. We tax alcohol, which in moderation may even have some benefits. Should we consider a tax on the saturated fat content of food, in order to address the total calorie consumption and the type of fat consumption in our population? Maybe sensibly, this contentious area is left untouched!

The final chapter on the future is most thought provoking. Will the thrifty genotype defeat us in the end? There is little selective advantage in genes limiting obesity, when the disadvantage will mostly operate after the reproductive years. Whilst humans have access to a 'cafeteria diet', obesity will move from an epidemic to being endemic. This chapter states that we should not blame individuals or the family with the clear implication there is a governmental role to address this major public health problem.

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