



Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

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Dear Reader,

Welcome to 2015! Ushering in a new year is the perfect opportunity to consider healthy changes to make during the next 12 months. Whether you commit to including more vegetables in your diet or exploring a regular yoga practice, the start of a new year can provide positive motivation.

One way to transform your health and even add years to your life: Adopt a positive outlook. For a recent study, researchers at the University College of London asked more than 9,000 men and women with an average age of 65 about their well-being (including having a sense of purpose, worth, and control). At follow-up nearly nine years later, they found that people who reported the greatest sense of well-being were 30 percent less likely to die during that time. These results were independent of the participants' age, sex, socio-economic status, physical health, incidence of depression, smoking habits, physical activity, and alcohol intake. (*The Lancet*, November 6, 2014)

Although more research is needed, the investigators suggest that increasing well-being can help improve physical health and, in turn, extend life expectancy. These findings add evidence to my belief that the combination of physical fitness and optimism provide the greatest long-term benefits.

To the next year of your good health,

Tackling Childhood Obesity

Five years ago, President Barack Obama established a national Task Force on Childhood Obesity, aimed at reducing the rate of childhood obesity to just five percent by 2030—the same rate seen before the problem began to increase in the late 1970s. It was an initiative driven by sobering statistics: According to the US Centers for Disease Control and Prevention (CDC), an estimated 10 percent of children age five and younger, 18 percent of children ages six to 11, and 21 percent of adolescents ages 12 to 19 are obese. All told, about a third of kids and teens are either overweight or obese.

The effects of childhood obesity extend far beyond self-esteem issues and bullying. The condition can have both immediate and long-term consequences that take a toll on health. For example, a large population study by UCLA researchers found that obese children have twice the risk of developing a variety of physical and mental conditions, including bone, joint, and muscle problems, attention deficit/hyperactivity disorder, learning disabilities, asthma, allergies, ear infections, and headaches. (*Academic Pediatrics*, January-February 2013)

Their hearts are also in peril: Research suggests that about 70 percent of obese kids already have at least one risk factor for cardiovascular disease, such as high cholesterol, high blood pressure, and pre-diabetes. Indeed, there's evidence that type 2 diabetes appears to progress more quickly in obese children and becomes much more difficult to treat.

Obesity in childhood can have lasting effects as well. Obese kids often grow into obese adults and have a greater chance of developing all of the health complications that come with extra pounds, including cardiovascular disease, type 2 diabetes, metabolic syndrome, stroke, sleep apnea, infertility, osteoarthritis, and many different types of cancer. Worse, they tend to develop these

problems much earlier than people who didn't become obese until adulthood.

Ten years ago, a troubling report in *The New England Journal of Medicine* made headlines when it predicted that being obese during childhood could shave an estimated two to five years off a person's life. It seems that little has changed in the decade since that study.

The good news is that childhood obesity is preventable—but tackling it can be quite challenging. Perhaps more than any other time in history, parents and kids alike are faced with enormous obstacles to maintaining a healthy

weight. From the constant onslaught of advertisements for junk food, to the decline of recess and other physical fitness programs in schools, to limited time and financial resources, a cascade of daily influences can conspire against healthy habits. Childhood obesity is particularly problematic in certain racial, ethnic, and socioeconomic groups: African Americans, Native Americans, and Latinos have higher rates of childhood obesity, as do lower-income groups. Clearly, telling parents to feed their children healthy food and encourage more physical activity isn't enough.

Continued on page 4

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Continued from page 1

“We need to look at the issue of childhood obesity from every level—kids, parents, schools, communities, and policy makers,” says my colleague Sandy Newmark, MD, head of the Pediatric Integrative Neurodevelopmental Program at the UCSF Osher Center for Integrative Medicine. “It’s not just about what one person should do.”

Prevention: The Sooner, The Better

With all of the serious negative complications associated with childhood obesity, it makes sense to start preventing the problem as soon as possible. That means even earlier than you might think, says Dr. Newmark. Indeed, a growing body of evidence shows that childhood obesity begins *during pregnancy*—before a child is even born. Some research suggests that many of the racial and ethnic disparities in childhood obesity appear to occur early in life. One large study found that black and Hispanic children were more likely than white children to have gained weight rapidly during infancy. These babies spent less time breastfeeding, were introduced to solid foods sooner, consumed more fast foods and sugar-sweetened beverages, slept less, and had television sets in their bedrooms during the first three years of life—all risk factors for childhood obesity. Black and Hispanic moms were also more likely to begin their pregnancies overweight or obese. (*JAMA Pediatrics*, August 2013)

The exact reasons for these differences are still unclear, but researchers do know that the choices a woman makes during pregnancy and in the first several months of her baby’s life can have a dramatic affect on that child’s risk of obesity. Here are some of the most important factors, according to recent research.

Healthy mother, healthy baby. Research demonstrates that children born to overweight pregnant women are at higher risk of gaining extra pounds themselves. One study found that children of mothers who had gained excessive weight in pregnancy had about four times the risk of being overweight by age three. More recently, a study of more than 41,000 mothers and their children showed that high pregnancy weight increases the risk of childhood obesity all the way until age 12. Other evidence suggests that children whose mothers smoked while pregnant have twice the risk of being overweight by age three than those whose mothers did not smoke.

Delivery makes a difference. According to a 2012 study, three-year-old children who had been born by Caesarean section were twice as likely to be obese as those who had been delivered vaginally. The microbiome—the collection of millions of bacteria and other microbes that populate our bodies soon after birth—may be responsible. Researchers believe that babies born by C-section have a different microbial

makeup than those born vaginally, which might affect energy balance and metabolism.

Breast is best. A number of studies suggest that children who are breastfed are less likely to be overweight or obese. That may be because breastfed babies learn to better regulate their appetite and food intake by responding to hunger rather than other cues. Meanwhile, one study found that children who were introduced to solid food before four months old were six times more likely to be obese by age three, compared to those who didn’t receive solid food until at least four to six months of age.

Sleep more, weigh less. Research suggests that adequate sleep during infancy and childhood can help protect against extra pounds. One study found that babies who slept less than 12 hours a day were twice as likely to be obese by age three than those who slept more. Another showed that children who consistently had reduced sleep in early childhood had increases in obesity by age seven. (*Pediatrics*, May 19, 2014) It makes sense: The hormones produced during a good night’s sleep help regulate appetite.

Antibiotics may add pounds. I’ve long warned against the overuse and misuse of antibiotic medications, which can lead to the rise of drug-resistant bacteria. Now, two recent studies suggest that antibiotics may have even more insidious effects. In the first, Pennsylvania researchers reviewed electronic health records from more than 64,500 children to

determine the incidence of obesity in kids ages two to five years old. They found that 69 percent of the children had been given antibiotics before age two, and that there was an increased risk of childhood obesity among those who were exposed to broad-spectrum antibiotics, particularly among children who had been prescribed antibiotics on four or more separate occasions. (*JAMA Pediatrics*, November 2014)

Likewise, a study by Columbia University researchers found that children who were exposed to antibiotics in utero during their mother’s second or third trimester of pregnancy had an 84 percent higher risk of childhood obesity at age seven. (*International Journal of Obesity*, November 11, 2014) In both cases, antibiotics may have altered the children’s microbiota, leading to imbalances between beneficial and harmful bacteria and increasing the likelihood of obesity.

What You Can Do

While it’s ideal to start preventing childhood obesity very early in life, many parents may not even consider it a problem until their child begins to gain noticeable weight. Still, there’s much you can do to help kids achieve and maintain a healthy weight, no matter what their age.

Set a good example. Studies have found that children are more likely to be physically active if their parents and siblings

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are active, and if they're encouraged to take part in physical activities. Take family walks, hikes, or bike rides on a daily basis, if possible, or simply play outside with your child. Kids should get at least 10 to 15 minutes of vigorous exercise a day and an hour or more of overall physical activity.

The same holds true for nutrition: Eat as you would like your child to eat. Eliminate processed, junk, and fast foods and focus on choices that are high in fiber, such as fruits, vegetables, whole grains, whole soy products, nuts, legumes, and seafood. Don't just change your child's diet: Change the way your entire family eats.

Build boundaries. Children are less likely to demand pizza, chicken nuggets, burgers, and other unhealthy fare if they learn to avoid them early on, says Dr. Newmark. According to one recent study by researchers at the University of Buffalo, children whose parents set restrictions on what and when they could eat at age two had healthy eating habits by age four.

Watch what they drink. Kids may crave sugar-sweetened beverages like soda, chocolate milk, and fruit juice, but these drinks can provide a surprisingly large number of calories per day. For instance, the average 20-ounce soft drink contains 15 to 18 teaspoons of sugar and more than 240 calories. A 64-ounce cola may have as many as 700 calories. That can translate to heavier kids: A well-publicized study by Harvard researchers found that children's risk of obesity significantly increased with each additional serving of sugar-sweetened beverage that they consumed. Studies have found that reducing consumption of sugary drinks can help children control their weight.

Share family meals. Busy schedules can make finding time for family dinners difficult, but your effort will pay off. Eating meals together gives you more control over what your child eats. According to one recent study, sharing just a couple of family meals a week may have lasting effects on weight. Among teens who reported that they never ate family meals together, 60 percent were overweight and 29 percent were obese 10 years later. Even having one or two family meals each week during adolescence was linked to lower odds of being overweight or obese within 10 years.

Keep a lid on stress. Childhood isn't all fun and games. These days, a kid's calendar can be just as full as that of his or her parents. Factor in a heavy homework load, friendship ups and downs, and greater stressors like moving, divorce, or death of a loved one, and you can see that children aren't free from anxiety. Just like adults, some kids may turn to food for comfort, explains Dr. Newmark. For that reason, teach your child a relaxation technique such as breath work, progressive muscle relaxation, yoga, or guided imagery (see page 2) and practice it together often. If your child exhibits signs of binge eating or other disordered eating, counseling may help.

Curb screen time. An increasing amount of research has shown a link between time spent watching television and the risk of childhood obesity. For example, one study of 13- to 15-year-olds found that those who spent the most time watching TV, playing video games, and using computers were more likely to be obese than those who had less screen time. (*Pediatrics*, May 2013) This relationship doesn't appear to be based solely on the fact that screen time is passive and replaces healthier activities like exercise, says Dr. New-

A Group Effort

They say that it takes a village to raise a child, and the same certainly holds true for raising a healthy child. While there's plenty that parents can do to help kids maintain an optimal weight, I agree with experts who believe that we must also address childhood obesity at a policy level. For instance, schools should receive better funding for physical education classes and healthier lunch programs, and city planning boards should address the lack of "green space" for outdoor activities in many communities. I'd also like to see Congress work with the US Food and Drug Administration and Federal Trade Commission to regulate food marketing aimed at children. And our government needs to revamp the Farm Bill, which currently doesn't subsidize foods like fruits and vegetables.

These and other changes would go a long way to making healthy foods more accessible and affordable, while encouraging exercise and limiting kids' exposure to junk food. Other policy changes could also help reduce rates of childhood obesity, say experts. For an analysis in the November 2014 issue of the *American Journal of Preventive Medicine*, researchers examined the potential effects of three policy changes on childhood obesity: afterschool physical activity programs, a \$0.01-per-ounce sugar-sweetened beverage excise tax, and a ban on child-directed fast food TV advertising. They predicted that a tax on sugar-sweetened beverages such as sodas, energy drinks, sweet teas, and sports drinks would reduce obesity in adolescents more than other policies, and would also generate significant revenue for additional obesity prevention activities.

You can make your voice heard by contacting your state and local representatives about childhood obesity and joining advocacy groups such as the Center for Science in the Public Interest (cspinet.org), Let's Move (letsmove.gov), and the Environmental Working Group (ewg.org).

mark. In fact, there's evidence that screen time also means snack time for many kids. One study found that that every hour of TV a child watches is associated with the consumption of an extra 167 calories, particularly in the form of fast food, salty snacks, and sugar-sweetened beverages. It's no wonder: Children are exposed to constant commercials for these unhealthy options. Screen time also crowds out sleep, which can influence appetite and hunger. Limit the time your child spends in front of the TV, computer, and other gadgets, and encourage active play instead. **SH**

Special thanks to Sandy Newmark, MD, for his assistance with this article. He is the author of ADHD Without Drugs: A Guide to the Natural Care of Children with ADHD.

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