



ASOI / EASO/WOF Submission to the Oireachtas Committee on Children and Youth Affairs ‘Tackling Childhood Obesity’

The Association for the Study of Obesity on the Island of Ireland (ASOI) is the Irish representative body at the European Association for the Study of Obesity <http://easo.org/> and the World Obesity Federation <https://www.worldobesity.org/>. ASOI aims to develop an understanding of obesity through the pursuit of excellence in research and education, the facilitation of contact between individuals and organisations, and the promotion of action to prevent and treat obesity, across the island of Ireland. See asoi.web.ie for details.

In line with the World Health Organisation and based on scientific evidence, ASOI recognises obesity as a disease and as a public health epidemic. The statistics for Ireland are particularly worrying where one in four Irish children are overweight or obese(1). Obesity can have devastating medical and social costs including short term health difficulties in childhood and an increased risk of social isolation, mental health difficulties, adult obesity, Type 2 diabetes, heart disease, cancer and shortened life expectancy. Consequently, addressing childhood obesity requires urgent and timely action, both with regards to primary prevention and the treatment of obesity(2-6).

ASOI welcomes the publication and proposed resourcing of ‘A Healthy Weight for Ireland’ – Obesity Policy and Action Plan 2016-2025 and for European Obesity Day (May 19th 2018) ASOI urges the Irish Government to invest in treatment services for Irish children and adolescents with obesity. ASOI recognises the commencement of Prof. Donal O’Shea, in his post as HSE Clinical Lead for obesity in Ireland and is eager to learn how the Department Of Health, the Health Service Executive and the Children’s Hospital

Group plan to improve access to treatment for Irish children and adolescents diagnosed with clinical obesity.

As a scientific association committed to promoting the translation of research into practice, ASOI recommends that any available treatments for children with obesity in Ireland are evidence-based and align with published clinical guidelines and standards(7-11).

Specifically, ASOI recommends the following:

1. ***Implementation of a National evidence-based Clinical Guideline*** on the treatment of clinical obesity during childhood and adolescence, in order to improve care based on evidence rather than ideology, to facilitate staging the severity of disease for timely access to appropriate care and to prevent variation in practice across the country. As such, the planning and implementation of treatment services in primary, secondary and tertiary care are urgently needed for children with obesity:
 - a. In line with clinical guidelines, *primary care treatment* of obesity encompasses timely access to adequately trained health professionals in addition to community-based supports. Healthcare professionals working in primary care include general practitioners, public health nurses, clinical dietitians, Chartered physiotherapists, and clinical psychologists.
 - b. In line with clinical guidelines, *secondary care treatment* of obesity encompasses timely access to specialist obesity services provided by general paediatricians and specialist multidisciplinary teams of nurses, clinical dietitians, Chartered physiotherapists, and clinical psychologists.
 - c. In line with clinical guidelines, *tertiary care treatment* of obesity encompasses timely access to specialist tertiary obesity services provided by paediatric endocrinologists, paediatricians, bariatric surgeons and specialist multidisciplinary teams of public health nurses, clinical dietitians, Chartered physiotherapists, occupational therapists, clinical psychologists and social workers.

2. ASOI urges the Committee to ***seek concrete details*** from the Department Of Health, the Health Service Executive and the Children's Hospital Group regarding the planning, implementation and resourcing of clinical obesity services *currently available* to children/adolescents with obesity *in addition to those planned* for the Children's Hospital Group.
3. In relation to official statements delivered to the Committee on April 17th 2018 by Prof Donal O'Shea, Dr Sinead Murphy and Ms Cheryl Flanagan, representing the RCPI Policy Groups and Clinical Advisory Groups on Obesity(14), we raise the following concerns:
 - a. It was stated that "bariatric surgery is the only successful treatment" for severe obesity in adolescents. We are unaware of evidence to support this statement. Recent guidelines and meta-analyses identify bariatric surgery as a component of a wider treatment service and also highlight the lack of long-term data in this area(10-13).
 - b. It was stated that "behavioural treatment strategies are ineffective" for the treatment of severe obesity in adolescents. To our knowledge this does not accurately reflect the current evidence base (10-11).
 - c. Neither of the above statements are contained in the RCPI Obesity Policy Group's publications on obesity management in Ireland or the HSEs A Healthy Weight for Ireland – Obesity Policy and Action Plan 2016-2025. We urge the committee ***to seek clarification and evidence to support these statements***. We respectfully request that ***the public record be corrected*** in this regard.
4. Lastly, we urge continued development of policies and measures to reduce the obesogenicity of the social and physical environment. Tackling obesogenic environments is integral to the treatment process as well as serving to prevent obesity. Failure to maintain weight loss is a major problem for obesity management. Environments that lead to weight gain for the population generally also encourage weight re-gain among patients attempting to reduce and manage their weight. Preventive measures therefore help prevent initial weight gain and reduce the risk of relapse for those receiving treatment(15).

In summary, we thank the Committee for seeking public submissions and recognise the importance of the Committee with regard to addressing the issue of childhood obesity from a cross-sectoral approach. We would be delighted to provide any further information as needed in the future and we look forward to your response regarding the recommendations we have suggested.

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