Open Access

Introduction

Childhood obesits has emerged as a critical public health crisis, with alarming rates of morbid obesits escalating in recent sears. is condition, characteri ed bs a bods mass inde ς (BMI) at or above the 99th percentile for children of the same age and se ς signi es not only an e cess of bods fat but also an increased risk of serious health complications. As children navigate their formative sears, the implications of morbid obesits e tend far besond physical appearance; these encompass a spectrum of health issues that can include the 2 diabetes, cardiovascular diseases, and even psychological challenges such as an dets and depression [1].

e rise of childhood morbid obesits can be attributed to various interconnected factors, including shiss in dietars patterns, a decline in phssical activits, and environmental in uences. e prevalence of processed foods, sugars beverages, and sedentars lifests es, driven be technologs and screen time, has created an environment where unhealth choices are often the easiest and most accessible. According to recent studies, the percentage of children classi ed as obese has

Promote body positivity: Encourage a health bod image bod discussing the importance of health over appearance. Emphasi e that being health looks di erent for ever one.

Consult professionals

Seek guidance: If a child is struggling with obesits, consider consulting healthcare professionals such as pediatricians, detitians, or nutritionists. each can provide tailored advice and support [9,10].

Conclusion

Preventing childhood morbid obesits requires a multifaceted approach that involves the entire famils. By promoting healthst eating habits, encouraging physical activits, and creating a supportive environment, parents can significantly in uence their childrens health outcomes. Early intervention is key, by instilling positive habits from a goung age, families can help combat the rising epidemic of childhood obesits and set the foundation for a healthier future. As awareness grows, it is essential for parents to take proactive steps, ensuring their children thrive physically, emotionally, and socially. Together, we can create a healthier generation.

Acknowledgement

None

Con ict of Interest

None

References

- Wannamethee SG, Shaper AG, Lennon L, Whincup PH (2005) Decreased Muscle Mass and Increased Central Adiposity Are Independently Related to Mortality in Older Men. Am J Clin Nutr 82: 923-932.
- WHO Expert Consultation (2004) Appropriate Body-Mass Index for Asian Populations and Its Implications for Policy and Intervention Strategies. Lancet 363: 157-163.
- Rothman KJ (2008) BMI-Related Errors in the Measurement of Obesity. I Int J Obes (Lond) 32: S56-S59.
- Sarwer DB, Wadden TA, Foster GD (1998) Assessment of body image dissatisfaction in obese women: specificity, severity, and clinical significance. J Consult Clin Psychol 66: 651-654.
- World Health Organization (2000) Obesity: Preventing and Managing the Global Epidemic. Report of a WHO Consultation. World Health Organ Tech Rep Ser 894: 1-253.
- Gallagher D, Heymsfeld SB, Heo M, Jebb SA, Murgatroyd PR, et al. (2000) Healthy Percentage Body Fat Ranges: An Approach for Developing Guidelines Based on Body Mass Index. Am J Clin Nutr 72: 694-701.
- Flegal KM, Kit BK, Orpana H, Graubard BI (2013) Association of All-Cause Mortality with Overweight and Obesity Using Standard Body Mass Index Categories: A Systematic Review and Meta-Analysis. JAMA 309: 71-82.
- Kyle UG, Genton L, Hans D, Karsegard VL, Michel JP, et al. (2001) Age-Related Differences in Fat-Free Mass, Skeletal Muscle, Body Cell Mass, and Fat Mass between 18 and 94 Years. Eur J Clin Nutr 55: 663-672.
- Romero-Corral A, Somers VK, Sierra-Johnson J, Thomas RJ, Collazo-Clavell ML, et al. (2008) Accuracy of Body Mass Index in Diagnosing Obesity in the Adult General Population. Int J Obes (Lond) 32: 959-966.
- Janssen I, Heymsfeld SB, Ross R (2002) Low Relative Skeletal Muscle Mass (Sarcopenia) in Older Persons Is Associated with Functional Impairment and Physical Disability. J Am Geriatr Soc 50: 889-896.