

Tips for Teens:

ACHIEVING & MAINTAINING ANORMAL BODY WEIGHT

FOR CLEAR SKIN, STRONG HAIR, & PEAK ATHLETIC PERFORMANCE:

- AVOID SODA & OTHER SUGAR-SWEETENED BEVERAGES.
- LIMIT SCREEN TIME (TV, PHONES, TABLETS, OR COMPUTERS) TO LESS THAN ONE HOUR PER DAY OUTSIDE OF SCHOOLWORK.
- EAT BREAKFAST EVERY DAY.
- GET ACTIVE FOR AT LEAST 60 MINUTES EACH DAY.
- EAT FRESH FRUITS & VEGETABLES, LOW- OR NON-FAT DAIRY, LEAN PROTEIN FROM A VARIETY OF SOURCES (MEAT, FISH, BEANS, NUTS & SEEDS) & SELECT AT LEAST 1/2 OF GRAINS FROM WHOLE GRAIN.



ANNOTATED BIBLIOGRAPHY

1. Zhao-Huan Gui, Yan-Na Z, Cai L, Feng-Hua S, Ying-Hua M. Sugar-sweetened beverage consumption and risks of obesity and hypertension in chinese children and adolescents: A national cross-sectional analysis. Nutrients. 2017;9(12):1302. DOI:10.3390/nu9121302

The authors investigated the consumption of sugar-sweetened beverage (SSB) and its association with obesity and hypertension in a national sample of children and adolescents in China. They concluded, that SSB consumption in children and adolescents was independently related to a high risk of abdominal obesity. The results of this study indicated that SSB reduction strategies and policies may be useful in preventing obesity among children and adolescents.

2. Chaput J. Screen time associated with adolescent obesity and obesity risk factors. The Journal of Pediatrics. 2017;186:209–212. Accessed Nov 18, 2018. doi: 10.1016/j.jpeds.2017.04.023.

In this article, Chaput ponders the question "Among high school students, what is the association of screen-time with obesity and obesity risk factors?" He found that TV watching (>5 hours daily) was associated with sugary beverage consumption and obesity. He found that other screen devices (computers, phones, tablets) demonstrated similar associations with obesity and obesity risk factors. His conclusions were clear, screen time use is associated with self-reported obesity and obesity risk factors.

3. Timlin MT, Pereira MA, Story M, Neumark-Sztainer D. Breakfast eating and weight change in a 5-year prospective analysis of adolescents: Project EAT (eating among teens). Pediatrics. 2008;121(3).

http://pediatrics.aappublications.org.une.idm.oclc.org/content/121/3/e638.

Breakfast-eating frequency declines through adolescence and has been inversely associated with body weight in cross-sectional studies. This study was conducted to examine the association between breakfast frequency and 5-year body weight change. The authors found that the more frequent the consumption of breakfast the lower the BMI. These findings support the importance of promoting regular breakfast consumption among adolescents.

4. Davis MM, Gance-Cleveland B, Hassink S, Johnson R, Paradis G, Resnikow K. Recommendations for prevention of childhood obesity; Pediatrics. 2007;120(Supplement 4).

http://pediatrics.aappublications.org.une.idm.oclc.org/content/120/Supplement_4/S229.

In this article, the authors note that a major health challenge for most American children and adolescents is obesity prevention—today, and as they age into adulthood. In this report, the authors review the most recent evidence regarding many behavioral and practice interventions related to childhood obesity, and present recommendations to health care providers. The firm consensus recommendation from the review is that school-aged youths should participate every day in ≥60 minutes of moderate to vigorous physical activity that is developmentally appropriate and enjoyable.

5. Ensle K. Choose MyPlate physical activity. Journal of Nutrition Education and Behavior. 2018;50(10):1062. https://doi.org/10.1016/j.jneb.2018.04.277. Accessed Nov 18, 2018.

The USDA's Choose MyPlate website is addressed in this article. MyPlate discusses how following a diet high in fruits and vegetables, low- fat-free dairy, whole grains, and lean proteins can help teens maintain health, vitality, and top physical performance.