

# Computer-assisted tools alert pediatricians to obese patients

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Electronic health records and embedded tools can alert and direct pediatricians so they can better manage the weight of children and teenagers, according to a new Kaiser Permanente study published online in *The Journal of Pediatrics*.

Researchers analyzed visits for nearly 740,000 [children](#) and adolescents ages 2 to 17 to evaluate the impact of computer-assisted decision tools and found that extracting information from the electronic health record substantially improves the identification and diagnosis of overweight and obesity among children and adolescents, and also facilitated [exercise](#) and nutrition counseling.

"By using [electronic medical record](#) tools we can diagnose and address obesity-related issues at a [population level](#) rather than just among a few families. These are great tools that could be implemented by physicians in a variety of clinical settings to better diagnose and manage obesity among children and adolescents," said study lead author Karen Coleman, PhD, from Kaiser Permanente's Southern California Department of Research & Evaluation.

The prevalence of obesity has increased sharply in children and adolescents in the last 30 years, with at least 18 percent of 12- to 19-year-olds now considered obese. To address this dramatic increase, the American Academy of Pediatrics Expert Committee guidelines recommended standardized approaches to the identification and treatment of overweight and obese children and adolescents as well as

prevention of overweight and obesity among an at-risk population in [clinical settings](#). To date, these guidelines have been inconsistently or poorly implemented.

For this reason the Kaiser Permanente Southern California Pediatric Weight Management Initiative was implemented in 2008 to improve adherence to these guidelines and to ensure that KPSC met the Healthcare Effectiveness Data and Information Set (commonly known as HEDIS) requirements for the measurement of pediatric height and weight and exercise and nutrition counseling for children and adolescents.

"One of the first steps in dealing with any epidemic is finding successful ways to identify the patients at risk. The pediatric obesity epidemic is no exception. Tools such as these will be a great help to the primary care pediatrician, and will allow not only earlier assessment, but can help direct the providers to the recommended testing and treatment," said study co-author Amy Porter, MD, Kaiser Permanente Southern California pediatrician.

Before the KPSC initiative, 66 percent of all children and adolescents in the study had height and weight documented in KP HealthConnect, Kaiser Permanente's electronic health record that is the largest non-governmental medical record system in the world. Three years after the initiative was implemented, this increased to 94 percent. Among children and adolescents, diagnosis of overweight or obesity increased significantly from 12 percent in 2007 to 61 percent in 2010, and documented rates of counseling about exercise and nutrition increased significantly from 1 percent in 2007 to 50 percent in 2010.

The rate of clinically diagnosing [overweight and obesity](#) increased across all age and racial and ethnic groups. The increase was highest among overweight and obese children 2 to 5 years old (13 percent to 75 percent)

and in extremely obese children and young adults across all ages (23 percent to 75 percent).

The KPSC initiative began as a result of implementing height and weight as a vital sign in the electronic health record. This made it easier for pediatricians to quickly assess whether their patients were overweight or obese. When the height and weight are entered into the EHR, BMI and BMI-for-age percentiles are calculated based on the World Health Organization and the Centers for Disease Control and Prevention criteria. Growth chart graphs in the EHR track and display this information to help [physicians](#) monitor their patient's height and weight to determine if the patient is at risk for obesity.

Few studies have reported the impact that a system wide clinical initiative can have on improving the [diagnosis](#) and management of obesity among children and [adolescents](#).

Provided by Kaiser Permanente

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