**MONITORING OF HEALTH STATUS OF CHILDREN AND ADOLESCENTS WITH OBESITY**

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The health and quality of life of patients is significantly influenced by such a factor as the state of health care, so we evaluated the health care of obese children [3, p. 770]. For the main results obtained revealed obesity had a 59±3,4 ‰ of children and adolescents, including severe obesity were observed in 7±1,2 ‰ individuals. At the same time, according to the analysis of the medical cards of the child (f.026/a) and the history of the child's development (f. № 121/a), it was found that the established diagnosis of obesity had only 70±2,7 % of adolescents. One of the distinguishing characteristics of outpatient care is a combination of therapeutic and preventive work of all doctors where clinical supervision method or method of active and dynamic observation (follow-up) plays an important role. The level and completeness of the coverage of patients with pathology of the endocrine system by clinical supervision is one of the criteria of the quality of medical care. In 2015, the level of clinical supervision of children with endocrine pathology in Ukraine was 52, 62 per 1,000 children aged 0–17 years inclusive, with a negative dynamics for the last 6 years (66,32 in 2010) [1, p. 10; 2, p. 12;] .It was established that in 2015 the general index of coverage by clinical supervision was only 29, 64±2,7 %. Thus, a dynamic supervision of the health status of patients was not available for more children and adolescents with obesity (70,4±2,7%). Such a condition of dispensary observation should cause concern to paediatricians and health managers and is subject to correction. It should be noted that children with obesity need is follow-up and monitoring of health that is possible under clinical supervision.

**References:**

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