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**KEY APPROACHES AND METHODS FOR CORRECTING OVERWEIGHT AT THE INDIVIDUAL LEVEL**

Obesity can be called an epidemic of the XXI century. According to the latest statistics, over 30% of the world's population is overweight. This problem is most acute in economically developed countries: the USA, Canada, Germany, where obesity is recorded in almost every second inhabitant. The problem of childhood obesity has recently reached a new level: over the past 20 years, the number of overweight children has increased by 2-3 times. Experts argue that the rapid scientific and technological development and automation will lead to an increase in this indicator by several times. The most alarming situation is obesity in childhood because it has a pronounced tendency to progress. So in 60% of cases, excess body weight in a child or adolescent in the future is transformed into severe somatic diseases such as diabetes mellitus, arterial hypertension, atherosclerosis, arthrosis, metabolic and endocrinological disorders, cholelithiasis, oncological pathology, cardiovascular complications, infertility, etc. On the contrary, a decrease in body weight of at least 10% from the initial level can significantly reduce the risk of certain diseases by 9–40% and the overall mortality rate by 20%. Since 60% of all cases of adult obesity begin in childhood, the problem of overweight should be considered from the side of pediatrics. Thus, the urgent task of modern health care is to determine the main ways of managing such patients, where the primary tasks are the correction of eating behavior and lifestyle; gradual weight loss; rewarding every achievement. The first step in restoring normal body weight is diet therapy. The classic option for correcting the nutrition of an obese child involves a hypo caloric diet with a balanced content of fats, proteins, carbohydrates, vitamins and minerals. In the diet of a child, the amount of simple carbohydrates and fats of animal origin is significantly limited. Portions should be small and contain all the essential nutrients that a growing body needs. To date, there are many dietary recommendations, they must be strictly individual and appointed by an experienced specialist. It is also necessary to assess comorbidities and risk status. Standard dietary regimens may not only not help, but even harm the child. **An active lifestyle is an important part of the treatment program for childhood obesity. It should also be noted that the inability to maintain a reduced body weight is a common problem in the management of these patients. Therefore, long-term contact between the patient and the doctor is of great importance.** When managing patients with obesity, physicians must also take into account psychological aspects such as: ensuring respect from the medical staff for the patient, providing the patient with the same level of care as any other patient, providing general preventive measures, it is important to reassure the patient that body weight can be controlled [1, p.43; 2, p.50; 3, p.186].

**Conclusion.** The main approaches to the treatment of overweight are creation of motivation for the child; correction of eating behavior and lifestyle; gradual weight loss; rewarding every achievement. The main methods are a combination of individual diet therapy and dosed physical activity. At the same time, an important component of the treatment program is to maintain a reduced body weight for a long period, what is possible when establishing a long-term contact between the patient and the doctor. In addition, it is also necessary to take into account the psychological aspects of providing medical care to such patients, the main of which is to convince the patient that body weight can be controlled.

**The list of sources:**

1. Дячук Д. Д. Ожиріння у дітей: фактори ризику та рекомендації з профілактики / Д. Д. Дячук, І. Е. Заболотна, Ю. Б. Ященко // Современная педиатрия. – 2017. – N 2. – С. 42–46.

2. Зелінська Н. Б. Ожиріння в дітей: визначення, лікування, профілактика. Клінічні практичні настанови Ендокринологічного Товариства. Частина 1 / Н. Б. Зелінська // Український журнал дитячої ендокринології. – 2017. – № 3–4 – С. 48–63.

3. Reinehr, T. Long-term effects of adolescent obesity: Time to act. Nat. Rev. Endocrinol. 2018, 14, 183–188.