Beverage intake in treatment-seeking obese children in eastern NC using the validated BEVQ-15

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Background
Excess caloric intake is a major etiological factor in the onset of childhood obesity, with sugar sweetened beverages (SSB) being a major source of these calories. However, current assessment of SSB intake collects limited information to help target intervention. The beverage intake questionnaire (BEVQ15) assesses frequency, amount (ounces), and caloric energy from SSB consumption in a 3-5 minute assessment that allows for a more detailed evaluation.

Methods
• Retrospective chart review included patients completing a first visit at the East Carolina University Comprehensive Healthy Weight Clinic (CHWC) in 2019
• Data collected included sex, age, race/ethnicity, body mass index (BMI), height, weight, zip code, county, preferred language, and insurance coverage (Medicaid vs other).
• Habitual beverage consumption was assessed by collecting beverage subtypes and average ounces consumed in all patients at baseline via the BEVQ15.

Results
• Study participants (N=79) included a mean age of 10 years with 56% female, 58% Black, 10% White, and 19% Hispanic
• Of total, 46% of patients were in a two parent household compared to 36% living with single mothers
• Average BMI was 32.3 kg/m^2 with a BMI z-score of 5 ± 1.7 and mean of 140 ± 25.9th percentile BMI for age and sex (class III obesity)
• 73% of patients were enrolled in Medicaid compared to 26% who have other types of insurance.

Conclusions
On average, drink intake is high from 100% juice and juice-flavored drinks compared to soda and sweetened tea in children with severe obesity

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References