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HEPA

- What children eat/drink defines their health
 - Is currently causing symptoms we treat as diseases
 - Influences outcomes even if they have true illnesses
- Reduces need to access healthcare
- Reduces healthcare expenditure
- HEPA is a lifestyle, one that is necessary for maximal health
- HEPA is not a luxury and is affordable
- HEPA will influence the likelihood of developing chronic diseases

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My “Patients”

- Birth to 18: medically health or complex
- Healthy kids that seem “sick” most or all the time!
 - Treated for “sinus infections”
 - Chronic **STUFFY and/RUNNY** nose
 - Chronic **COUGH**
 - Frequent viral URI symptoms
 - Symptoms even when not acutely ill
 - Recurrent episodic **“CROUP”**
 - Asthma???
 - Allergies???
- US Preschoolers may average 3-6 medications daily
 - Albuterol, Flovent, Pulmicort, Singulair, Zyrtec, Flonase, Benadryl, Prevacid, Prilosec, Zantac

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Badly Behaving Noses!



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Why Are Medications Not Helping?

- Medications should work if the patients **HAVE** the conditions for which the medications are prescribed
- If medications are not helping....
 - Patient does not have the assumed conditions for which prescriptions were written for
 - Inadequate dose
 - Individual patient factors – poor response to treatment
 - Medication is ineffective – bad medication
- DOES THE CHILD REALLY HAVE WHAT I AM TREATING?

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How We are Trained As Physicians

- Chief complaint
- History of present illness
- Past medical history
- Social
- Physical exam
- Review work-up and results
- Provide differential diagnosis
- Discuss treatment options (medication and/or surgery)
- *Never taught to ask about diet/dietary habits as a key component of assessing health and disease!*
- *Never taught to ask about degree of physical activity*

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Dietary and Activity Habits of Children

- Lots of dairy
 - > 24 oz per day (even after age 2, despite AAP guidelines)
 - Often whole milk instead of 2% or skim
 - Habitual milk at bedtime
 - Milk in middle of the night when they awaken
- **EXCESSIVE** sugary drinks and snacks
- **Drinks little or no water!!!!**
- “Picky” eater – little variation in diet, very little fresh fruits & vegetables
- **SEDANTARY** – electronic devices, screen time, reduced physical education, not all play sports.

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Pre Teen and Teenage Eating Habits

- Skip breakfast
- Skip lunch
- OR
- Pizza/juice/soda
- Binge afterschool
- Energy drinks/Caffeine (compensate for hypoglycemia & “fatigue”)
- Snack all night – sugar, caffeine, processed foods
- Sedentary behavior (Facebook, Youtube, Twitter, etc)
- Eating habits mimic that of adults in family

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Sweet poison: How sugar, not cocaine, is one of the most addictive and dangerous substances

Dr. Mark Hyman outlines a plan to conquer your dependence on one of food industry's worst substances

BY MARK HYMAN, M.D. / SPECIAL TO THE NEWS / Monday, February 10, 2014, 2:00 AM

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MAKSYM KRAVTSOV/GETTY IMAGES

Americans consume an average 152 pounds of sugar each year, much of it hidden in processed

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What I Do In Every Patient Encounter

- Obtain detailed diet and dietary habit history
- Assess for risk of “MCD” and dietary habits
- Recommend concrete changes
 - Have dinner by 6:30 if possible
 - Eat “dessert” or sweet immediately after dinner
 - Minimize dairy and sugar at night
 - Reduce dairy intake, minimize juices, **MORE WATER!**
 - NO BEDTIME SNACKS!!!!!!
 - **“THE KITCHEN IS CLOSED”** - 90 min to 2 hours prior to bedtime other than H2O
 - Read food labels: **every 4 grams of sugar = 1 tsp**
 - Avoid HFCS
- Increase physical activity

Physical Activity Instead of Devices

- Ask how much daily physical activities the child has
- Walk, run, play, jump rope, swim, ride a bike, “Just Dance”
- Join the YMCA
- Join school teams or individual sports
- Access to gyms
- Conversation with family regarding amount of screen time and electronic device time
- Courageous conversation about physical activities for the parents and entire family
- NO DEVICES at least one hour before bed

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Observations after Diet/Habit Changes

- Decreased cough, nasal congestion, runny nose, overall “stuffy” nose
- Decreased “asthma” flare up and overall
- Increased exercise tolerance
- Decreased or no more “croup” episodes
- Decreased “sinus” problems
- Decreased or elimination of medication(s) and need for medical attention
- Weight loss
- Improved sleep & decreased snoring

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Opportunities To Restore Health

- Always ask about child's daily eating/drinking habits
- Ask about daily physical activity
- Educate parents & children
 - School, YMCA, aftercare programs, communities, medical facilities, academic medical centers, primary care providers and subspecialists, social media, industry, government, ELECE
 - Find out what local Parks and Recreation Departments have to offer
 - Collaborative approach – build the same message
- Goals
 - Make this the most important conversation we all have about health
 - Help families UNDERSTAND WHY and then INSPIRE them to develop new routine and habits

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Imagine If...

- Every encounter with a physician/health care provider included assessment of dietary and activity habits
- School enrollment forms include child's diet & activity habits
 - Daily intake of milk, juice, water (food/beverage diary)
 - What they eat
 - What sports? What do they like?
- Physical activity/education is not an option or luxury
- Doctors, insurance companies, teachers, government agencies, & parents/caretakers, local Parks and Rec depts, discussed how to increase HEPA for child at home and at school
- Industry, government, public policies support healthier diet and regulate sugar/HFCS exposure

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