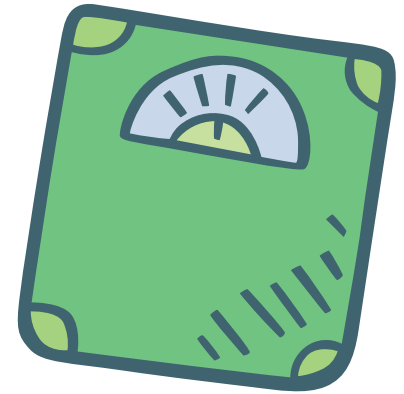


The Effect of Age on Obesity Diagnoses Among US Youth on the Autism Spectrum

Adapted from Must, A. et al. (2017). The effect of age on the prevalence of obesity among US youth with autism spectrum disorder. *Childhood Obesity*, 13(1), 25–35.

Introduction

Previous research has shown that children and teenagers with developmental disabilities are more likely to meet the criteria for an overweight or obesity diagnosis, which includes youth with an autism spectrum disorder (ASD) diagnosis. The purpose of this study was to **determine the relationship between obesity and age in a large sample of children and youth ages 10–17 years in the United States**. To do this study, researchers from the Healthy Weight Research Network used data from the 2011–12 National Survey of Children’s Health (NSCH), a large study sponsored by the U.S. government.



How the Study was Done

In the 2011–2012 National Survey of Children’s Health, government researchers called people either on their home phones or cellphones. Households that had children between the ages of birth to 17 years were invited to be in the study, and parents or guardians answered questions about one child in the home. This study only analyzed data from children ages 10–17 years.

The researchers asked parents or guardians many questions about their children, including a few questions about whether their child currently had ASD. They also asked how much their child or adolescent weighed and how tall they were. This allowed the researchers to calculate the child’s or adolescent’s weight status.



Results

The researchers found that children and youth with ASD were more likely to meet criteria for obesity than those without ASD. Twenty-three percent (23%) of children and youth with ASD aged 10–17 years met criteria for obesity compared to 14% peers of the same age without ASD.

The differences in obesity between autistic children and typical peers increased with age. The prevalence of obesity was consistent between ages 10–17 years in those with ASD; however, the prevalence dropped between ages 10–17 years among children without ASD.

More white, non-Hispanic children and youth on the autism spectrum met the criteria for obesity than non-white and Hispanic autistic youth without ASD. More autistic boys (25%) met the criteria for obesity than did girls (12%); among children without ASD, 17% of boys and 12% of girls met criteria for obesity.

Discussion

Overall, this study found that children and youth with ASD were more likely to meet criteria for obesity than their non-autistic peers in all age categories. There are several possible reasons why this may be the case.

Selective eating: Many autistic people prefer to eat specific foods they enjoy and are less willing to try new things. This can make it more difficult for them to eat enough fruits and vegetables. They may also have sensory sensitivities affecting their eating habits.

Less physical activity: Youth on the autism spectrum are less likely to get exercise and spend more time using electronic devices than their non-autistic peers. They may also struggle with motor skills, making physical activity harder. This can be a major problem in the teenage years, when team sports dominate opportunities to be physically active. Some research has shown that autistic youth encounter more barriers to physical activity than non-autistic youth.

Medication: Many children and youth on the autism spectrum are prescribed psychiatric medications which can also cause them to gain large amounts of weight.

More research is needed to identify strategies to help autistic children and youth manage their weight, including opportunities for physical activity and supportive help to assist with food selectivity.

