Rural and Remote Health

The International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy

LETTER TO THE EDITOR

High body mass index in rural children

V Wiwanitkit

Wiwanitkit House, Bangkhae, Bangkok, Thailand

Submitted: 14 December 2009; Published: 23 March 2010

Wiwanitkit V

High body mass index in rural children *Rural and Remote Health* 10: 1408. (Online), 2010

Available from: http://www.rrh.org.au

Dear Editor

I read the recent publication by Montgomery-Reagan et al with great interest¹.

Montgomery-Reagan et al concluded that 'eating breakfast at home and at school and increased hours of television viewing may be associated with higher BMI, especially in younger boys¹'. Indeed, the problem of obesity in rural children is a current concern, even in developing countries².

The affordability of food and eating habits, both of which can be affected by the family's socioeconomic status, are important factors in determining the body weight of rural children². It is most important to know what the children eat, and clarifying "eating at home and at school" from Montgomery-Reagan et al.'s preliminary report seems important. Even more important, however, is the discordance in findings between the US report¹ and a previous report from Thailand, a developing Asian country². The US finding that higher income was associated with a decreased incidence of obesity is in contrast to the Thai report that found a high income to be associated with an *increased* incidence of obesity. The Thai study hypothesized that wealthier parents tend to provide excessive amounts of high-sugar foods for their children, and this can lead to pediatric obesity².

MEDLINE listed

It may be that there is a difference in fundamental health knowledge (in this case regarding pediatric nutrition) between parents in developed and developing countries. Indeed, an Australian study showed that eating patterns in among lower-educated populations in Aboriginal communities include greater amounts of high sugar foods, compared with a higher educated urban population³. Further collaborative research across developed and developing countries is suggested to fully examine this issue.

Viroj Wiwanitkit, MD Wiwanitkit House Bangkhae, Bangkok, Thailand

-Rural-and-Remote-Health-



The International Electronic Journal of Rural and Remote Health Research, Education Practice and Policy

References

1. Montgomery-Reagan K, Bianco JA, Heh V, Rettos J, Huston RS. Prevalence and correlates of high body mass index in rural Appalachian children aged 6-11 years. *Rural and Remote Health* **9**: 1234. (Online) 2009. Available: www.rrh.org.au (Accessed 12 March 2009).

2. Wiwanitkit V, Sodsri P. Underweight schoolchildren in a rural school near the Thai-Cambodian border. *Southeast Asian Journal of Tropical Medicine and Public Health* 2003; **34(2):** 458-461.

3. Lee AJ, O'Dea K, Mathews JD. Apparent dietary intake in remote aboriginal communities. *Australian Journal of Public Health* 1994; **18(2):** 190-197.