

Sugar-Sweetened Beverages (SSBs)

And their link to childhood obesity

Soft Drinks

- Soft drinks include all carbonated beverages with added sugar.

Beverage (12 oz serving)	Calories	*Grams (tsp) of sugar
Coca-Cola® Classic	146	41 (10)
Mountain Dew®	170	46 (11)
Pepsi® Cola	150	41 (10)
Fanta® Orange	165	45 (13)

Sugar-Sweetened Beverages (SSBs)

- Sugar-Sweetened Beverages (SSBs) are all drinks that contain added caloric sweeteners.
- Examples include: Soft drinks/sodas, sports drinks, fruit drinks, and energy drinks

Sports Drinks

- Sports drinks include all beverages marketed for rehydration for athletes.

Beverage (12 oz serving)	Calories	*Grams (tsp) of sugar
Gatorade®G™ Orange	90	22 (5)
Capri Sun®Sport® Sports Drink	133	28 (7)

Fruit Drinks

- Fruit drinks include all fruit drinks, fruit juices, and fruit nectars with added sugar.

Beverage (12 oz serving)	Calories	*Grams (tsp) of sugar
Minute Maid® Orange Juice	165	41 (10)
Hawaiian Punch® Fruity Juicy Red	180	45 (11)
SunnyD® Tangy Original Style	180	44 (10)

***The best choices are beverages that contain 0-5 grams of sugar in 12 ounces**

Energy Drinks

- Energy Drinks are soft drinks, usually with larger quantities of caffeine, marketed to increase one's energy.

Beverage (12 oz serving)	Calories	*Grams (tsp) of sugar
Red Bull®	165	40 (10)
Vault™	179	48 (11)
SoBe® Adrenaline Rush	195	51 (12)

SSB Consumption is on the Rise

A study found that caloric intake from SSBs increased by 222 calories from 1965 to 2002

In 2002, SSBs were estimated to be 21% of the total calories consumed by children.

From the late 70s to the early 90s, the average SSB serving size increased 44%.

Obesity

Obesity is the most common medical condition of childhood and has reached epidemic proportions in children

Worldwide estimates are that 155 million children are overweight and 30-45 million children are obese.

Childhood obesity is known to increase risk of obesity in adulthood

Link between SSBs and Childhood Obesity

- Numerous studies have shown a link between intake of SSBs and obesity.
- Children fail to reduce the consumption of solid foods to adjust for the additional calories consumed in SSBs
- SSBs cause a decrease in feeling full and over stimulate appetite causing children to eat more solid foods
- In one study, the incidence of obesity in 7-11 year old children significantly decreased after receiving an intervention to reduce SSB intake.
- An increase in SSBs is associated with an increase in weight in relation to a child's height!

Alternatives to SSBs

- Milk - SSBs tend to replace milk in a child's diet. Milk is a good source of calcium and zinc and should be consumed regularly to prevent insufficiencies.
- Water - One study estimated that replacing SSBs with water reduced children's total calorie intake by 235 calories per day.

Obesity is an important risk factor for diabetes, cardiovascular disease, cancer and premature death

In 2006, an average obese person spent \$1,429 more on health care than a normal-weight person

The 6th most important risk factor for the overall burden of disease is excessive body weight

Resources

- www.thenutritionsource.org
- www.rwjf.org - Robert Wood Johnson Foundation - "Healthy Eating Research"
- Physiology & Behavior professional journal
- International Association for the Study of Obesity - "Obesity Reviews"
- The Journal of School Nursing
- Project HOPE
- ❖ *Created by Marinda Kolar, UNMC4 Student Nurse*