



the skinny on thin kids

At a time when one in three kids weighs too much, an inability to pack on pounds might seem like a minor issue. But some slender children have health concerns of their own. **by JEANNETTE MONINGER**

BACK WHEN her daughter Emily was 2, Laura Bennardo couldn't help feeling self-conscious when the two of them hit their local pool in Cleveland. But it wasn't her own body that had her pining for a cover-up. "Emily looked so gaunt in a swimsuit. You could count every rib," says Bennardo, who worried that onlookers would think she didn't feed her daughter. "I offered her plenty of foods. Emily just wasn't

interested. Even at 4 and 5 years old, she'd take one bite and be finished." At 3 feet, 8 inches, the first-grader is now taller than most of her peers at school. Yet at 36 pounds, she weighs little more than a toddler.

Emily's diminutive size places her in the first percentile on the body-mass-index chart that pediatricians use to determine healthy weight. Approximately 99 percent of girls her age outweigh her, which means that

by medical standards she is officially underweight (as are all kids who fall below the fifth percentile). However, experts say it's best not to fixate solely on numbers. "Steady, continual growth is what really matters," says Neville Golden, M.D., a member of the American Academy of Pediatrics' (AAP) committee on nutrition. He adds that the true causes for concern are drops in weight and height percentile or a failure to gain

weight during a period of height growth. Now 7, Emily has been in the same height and weight percentile since she was 1—but otherwise, she’s growing and developing just fine. Unfortunately, the same can’t be said for all skinny kids.

➔ **Weighty Matters**

Babies grow a lot during their first 12 months, gaining as much as 15 pounds. Between ages 1 and 5, children put on about 5 pounds per year. After that, weight gain slows, with most kids steadily picking up a couple of pounds each year until puberty.

A kid’s appetite can taper off during weight-gain plateaus. “The appetite center in the brain controls how much a child chooses to eat,” says Nancy Krebs, M.D., a pediatric-nutrition specialist at Children’s Hospital Colorado, in Aurora.

And young kids are pretty good at regulating how much food they need—unless other factors interfere.

Some drugs, like those prescribed for ADHD, can squelch appetite. When children with ADHD take extended-release medications in the morning, their appetite-suppressing effects are in full swing at lunchtime. To help your child avoid this, talk to his doctor about switching to an immediate-release medicine or scheduling medication vacations when school isn’t in session. Other health problems, such as a faulty thyroid, reflux, and eating disorders (see “Do Little Kids Get Eating Disorders?”), can impede weight gain too. Then there’s the culprit parents know all too well: finicky eating.

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➔ **Slim Pickings**

While preschoolers are notoriously particular about their food, 4-year-old Brody Bork takes the habit to the extreme. “His diet is entirely chicken nuggets, fish sticks, and pureed fruits,” says his mom, Kasey, of Hinckley, Minnesota.”

Children with eating habits similar to Brody’s may be at risk of not getting the calories, vitamins, and minerals they need to fuel their developing brain and body. As a result, they may be more prone to colds, lack energy, have difficulty focusing in school, and be short-tempered. Certain nutritional deficiencies are worse than others, with iron topping the list: “Not getting enough can lead to anemia and fatigue, and has been linked to poor attention and difficult behavior in children,” says Dr. Krebs. Tied for second: zinc, calcium, and vitamin D, which are all essential for normal growth and bone health, as well as minimizing the risk of osteoporosis in adulthood, adds Dr. Golden. A blood test can determine whether your child has vitamin deficiencies and may need supplements.

➔ **do little kids get eating disorders?**

While infants and children under age 6 are generally too young to develop anorexia or bulimia, they can be diagnosed with avoidant/restrictive food intake disorder (ARFID). Infants with ARFID may refuse to nurse or take a bottle, consume only small amounts of milk or formula, and appear fussy and sleepy. In children, the main signs are low appetite, eating only small portions, avoiding foods of certain colors or textures, expressing fear of choking or vomiting, and weight that drops to a dangerously low level. Parents usually notice delays in development too. Sound like your kid? See your pediatrician; she may refer you to a pediatric nutritionist or an occupational therapist who specializes in swallowing.

Low body mass in children can also delay puberty. If your daughter is below the 15th percentile for body weight and hasn't started showing signs of puberty or menstruating by age 15, consult your pediatrician.

➔ Growth Opportunities

There's usually no need to "fatten up" a skinny kid who is otherwise growing at a steady pace and meeting developmental milestones. But if you're worried about your child's nutrient intake or simply want to foster better eating habits, these expert tips can help.

● **Forget the food fights.** "It's a parent's job to regularly offer nutritious meals and snacks. It's up to the child to decide whether to eat," says Angela Lemond, R.D.N., a registered dietitian in Plano, Texas.

● **Limit junk.** Considering increasing your kid's calorie intake by offering milkshakes and fries? Don't. Hooking her on sweets and salty snacks can up her risk for health problems like diabetes and high blood pressure.

"The nutritional value of foods still matters for skinny kids—perhaps even more so because they eat so little," says Lemond, who also is a spokesperson for the Academy of Nutrition and Dietetics. Don't want to put your child to bed with an empty belly? Serve one food that you know she likes with every meal. If your picky child already eats unhealthy fare exclusively, try to wean her off it by serving wholesome versions (think: mac 'n' cheese with whole-wheat noodles).

● **Seek out high-calorie, nutrient-dense foods.** Choose full-fat dairy products over low-fat ones; put butter, cheese, or sauces on vegetables, pasta, and meat; offer foods rich in healthy fats like nuts and avocados; and serve creamy soups rather than broth-based ones.

● **Dine as a family.** Even if your child pushes food around her plate the whole time, she should sit at the

➔ bolstering boys

Being thin is often harder on boys than it is on girls. The not-so-surprising reason: They're teased more often, says Aaron Blashill, Ph.D., assistant professor of psychology at San Diego State University, in California. If your boy is skinny, try these tactics:

*** Keep communication open.**

Boys are less likely than girls are to talk about their appearance because "body-image issues are stigmatized as a 'girl' problem," says Dr. Blashill. So try to tune in to clues that your child may be bothered by the way he looks, such as comments that he's not strong.

*** Choose your words carefully.**

Saying things like, "You need to put some meat on those bones!" or "You eat like a bird!" can reinforce your child's negative body image. On the other hand, don't go overboard with compliments about his appearance; doing so can give him the impression that his appearance is important to you, says Steven Crawford, M.D., codirector of

The Center for Eating Disorders at Sheppard Pratt, in Towson, Maryland. Watch what you say about your own looks, too, as you are your child's most important body-image role model. Even a toddler can pick up on a parent's self-critical statements and apply them to himself, leading to anxiety and low self-esteem, which can in turn cause unhealthy weight-loss behaviors.

*** Emphasize ability.** More important than what a boy says back to a bully is what he learns to say back to himself. Without discussing his looks, remind your son that he is much more than his body type by playing up all the great things his body can do—run, jump, climb trees, play the piano, and more.

table. With any luck, she'll eventually want to try eating what you are enjoying. Limit distractions at mealtimes too—no TV or devices.

● **Stick to a snack schedule.**

"Serve snacks at the same time each day," suggests Lemond. While it may be tempting to give snacks any time your child asks, it's best to let her appetite build up for meals.

● **Cut back on liquids.** Offer whole milk or water at meals and monitor what your kid drinks in between. Skip juice, which can be filling.

● **Encourage exercise.** In addition to helping your child work up a

bigger appetite, movement can strengthen bones, build muscle, aid heart health, foster better sleep, and boost brainpower.

● **Talk to your doctor.** If your child complains of headaches, fatigue, or light-headedness, or if you're simply concerned about your child's weight, speak with your doctor. He may refer you to a specialist to help rule out a health problem. You may also want to consult a nutritionist about how to introduce a greater variety of foods and increase the calories and nutrients in the dishes your kid already regularly eats. ☺