



OPTIMAL WEIGHT FOR LIFE PROGRAM

OWL PROGRAM AT A GLANCE

- Founded in 1996
- Accepts patients up to age 21
- Has provided care for more than 7,500 families in New England
- Offers a multidisciplinary approach
- Provides ongoing support for both child and family
- Integrates clinical research and care
- Includes a type 2 Diabetes Program for patients with or at risk for type 2 diabetes.

SUPPORTED BY A MAJOR GIFT FROM
THE NEW BALANCE FOUNDATION.



THE OPTIMAL WEIGHT FOR LIFE (OWL) PROGRAM

The OWL Program offers a multidisciplinary care clinic dedicated to the evaluation and treatment of children who are overweight, obese or have type 2 diabetes mellitus. As the largest pediatric obesity program in New England, the OWL Program has provided care to more than 7,500 families.

Our team of experienced physicians, nurse practitioners, dietitians, psychologists and social workers is committed to:

- Providing state-of-the-art care for overweight and obese children
- Developing innovative treatments for pediatric obesity through clinical research and care
- Promoting public awareness and prevention efforts

TYPE 2 DIABETES PROGRAM

Within the OWL Program, the type 2 Diabetes Program focuses on the special needs of patients with or at risk for type 2 diabetes and other disorders associated with insulin resistance. In addition to the standard OWL Program evaluation and resources, patients with type 2 diabetes receive diabetes education, diabetes-specific resource materials and diabetes health monitoring by pediatric endocrinologists and diabetes nurse educators.

COMPREHENSIVE MEDICAL EVALUATION

New patients will be evaluated by a medical provider, either a physician or nurse practitioner (supervised by an attending physician). This examination includes:

- Comprehensive personal and family history
- Physical examination
- Lab tests (in most cases)

The purpose of this evaluation is to identify any underlying medical conditions (such as hormone problems) and potential complications (including high cholesterol, diabetes or gastrointestinal disease).

NUTRITIONAL COUNSELING

Dietary modification is the primary treatment approach used in the OWL Program. Only under rare circumstances would weight-reducing medications be considered. After dietary analysis, dietary recommendations are individualized to the needs of the patient and family. We utilize a "low glycemic" eating plan, made up of fruits, vegetables, healthy fats and protein to help stabilize blood sugar and insulin levels, and thereby help control appetite. During the initial evaluation and follow-up nutrition consults, families meet privately with a registered dietitian to discuss practical aspects of following the recommended meal plan.

BEHAVIOR MODIFICATION

Behavior modification focuses on increasing motivation to change diet and physical activity levels using a combination of short-term individual and family psychotherapy sessions. These treatments may also help children cope with the emotional stresses associated with being overweight, as well as underlying family dynamics or issues that may contribute to overeating.

Additionally, group therapy may be offered on a periodic basis to facilitate individual treatment. Topics covered in group therapy include:

- Designing a healthy and tasty meal plan
- Increasing levels of physical activity
- Providing reinforcement to your child for healthy lifestyle choices
- Maintaining long-term weight loss

CONTACT US:

Optimal Weight For Life Program
Division of Endocrinology
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bostonchildrens.org/owl

APPOINTMENTS

Scheduling

A new comprehensive evaluation can be scheduled by calling our office at **617-355-5159** or online at **bostonchildrens.org/owl**.

Patients younger than 18 years of age are required to have a parent or guardian present for each visit.

In order to improve access for all patients, we request that families call our office one week prior to the appointment to confirm if you will be attending the appointment or if you need to reschedule.

New appointments

Please plan to spend an entire morning or afternoon with us on your initial visit. Patients will meet with a nurse practitioner and/or physician, a dietician and, if appropriate, a psychologist or social worker. We will:

- Discuss the possible reasons why the patient is overweight or obese
- Review potential complications of excessive body weight, including issues related to self-esteem
- Provide an individualized dietary treatment plan and physical activity goals
- Formulate a plan for long term follow-up that may include individual behavioral modification and/or outside group therapy

Follow-up appointments

We typically recommend a follow-up visit within several weeks of the initial evaluation. Subsequently, we suggest appointments every month with the dietitian and behavioral therapist, and medical check-ups every two to three months, until a satisfactory body weight has been achieved. A minimum commitment to the program of six months is strongly recommended.

Ages served

We treat new patients aged 2 to 21 years. Patients under the age of 2 are generally referred to the Clinical Nutrition Service for initial evaluation. Rare exceptions can be made on a case-by-case basis by one of our attending physicians.

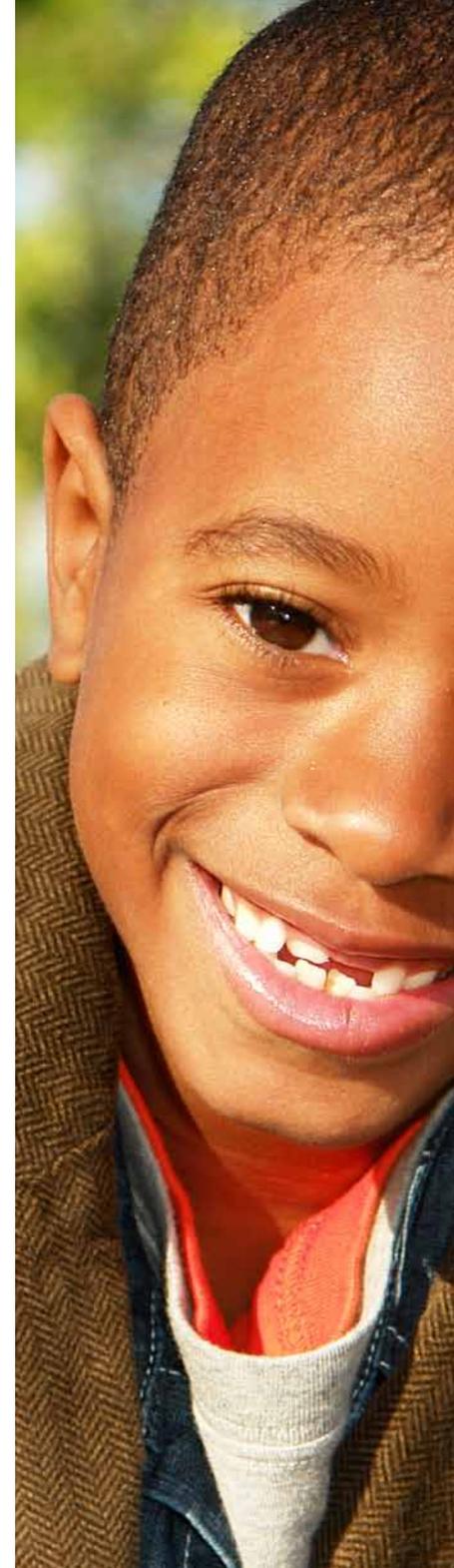
Insurance and referrals

Unfortunately, some insurance companies do not yet recognize the importance of timely evaluation and treatment of obesity in children. We recommend that you discuss coverage with your insurance company before scheduling an appointment.

If your insurance company requires referrals, you will need to obtain one referral for each component of the program that the patient will participate (i.e. medical, nutritional counseling, behavioral counseling). If you do not obtain required authorization prior to your visit, hospital policy requires a guarantor to sign a waiver and pay a \$50 deposit for each visit. Deposits are not required for Medicare or Medicaid (including MassHealth, BMC and NHP) subscribers.

FACTS ABOUT OBESITY

- Body weight is affected by genetics, diet, physical activity and psychological factors.
- According to national surveys, two in three adults and one in three children is overweight or obese.
- Rates of obesity have tripled in the past four decades.
- Overweight children are at risk for a number of serious health problems such as diabetes, hypertension, high cholesterol, fatty liver, asthma, musculoskeletal problems, sleep apnea and emotional distress.
- Multidisciplinary approaches to pediatric obesity may offer the best long-term success rates.



PROGRAM STAFF:

MEDICAL

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