

## 2024 KACO Posts

### **January**

#### *AAP Obesity Evaluation and Treatment Clinical Practice Guideline*

#### **Key Action Statement 12:**

**Pediatricians and other PHCPs should offer adolescents 12 y and older with obesity (BMI  $\geq$ 95th percentile) weight loss pharmacotherapy, according to medication indications, risks, and benefits, as an adjunct to health behavior and lifestyle treatment.**

No KAS has garnered more attention or controversy than KAS 12. The meaning of the word “should” here is critical. In the Clinical Practice Guideline, “should” does NOT imply an obligated or mandatory action. Providers need to use clinical judgment to determine when an option like medication is appropriate. Furthermore, providers should only provide therapy that they are comfortable with. As we learned to use SSRI’s in practice over the past few years, we eased in with a single med and then learned more sophisticated management as we moved along. Medications should also never be prescribed in isolation. It should always be accompanied by intensive health behavior and lifestyle treatment.

<https://publications.aap.org/pediatrics/article/151/2/e2022060640/190443/Clinical-Practice-Guideline-for-the-Evaluation-and>