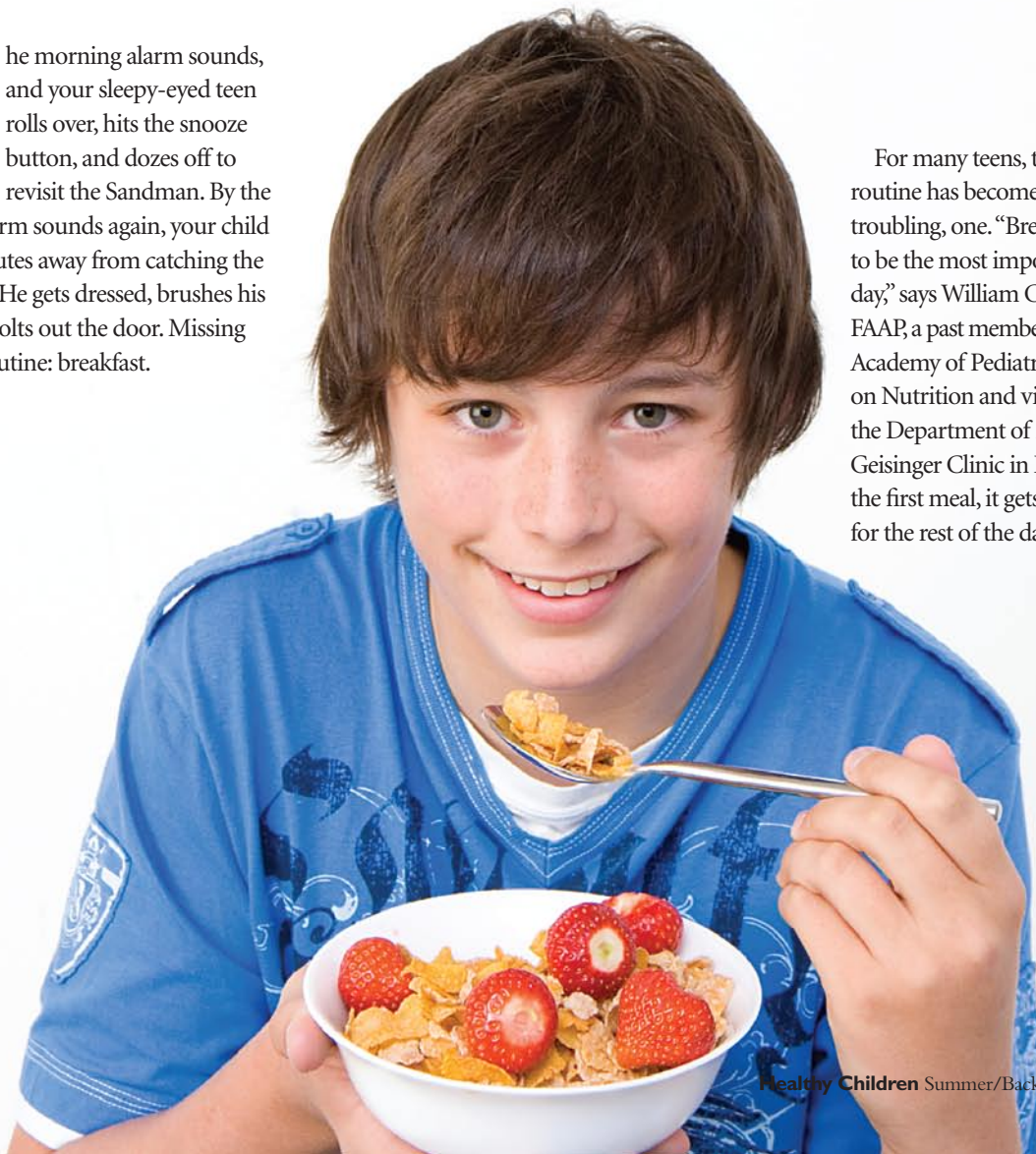


The Case for Eating Breakfast

The first meal of the day may be the most important — especially for children and teens. Here's why.

By Winnie Yu

The morning alarm sounds, and your sleepy-eyed teen rolls over, hits the snooze button, and dozes off to revisit the Sandman. By the time the alarm sounds again, your child is only minutes away from catching the school bus. He gets dressed, brushes his teeth, and bolts out the door. Missing from the routine: breakfast.



For many teens, this morning routine has become a familiar, but troubling, one. “Breakfast is thought to be the most important meal of the day,” says William Cochran, M.D., FAAP, a past member of the American Academy of Pediatric’s Committee on Nutrition and vice chairman of the Department of Pediatrics of the Geisinger Clinic in Danville, Pa. “As the first meal, it gets the body going for the rest of the day.”

And yet, approximately 8 to 12 percent of all school-aged kids skip breakfast, he says. By the time, kids enter adolescence, as many as 20 to 30 percent of them have completely given up the morning meal.

Why Teens Say No to Breakfast

Children of all ages have many excuses for skipping breakfast. Many older teens are busy until late into the night with homework, extracurricular activities, and part-time jobs. They go to bed late, then get up and rush off to school, too frantic to eat. The worst offenders are girls and older teens, though boys and younger adolescents are certainly not immune.

Compounding the challenge is biology. As teens get older, they're often more inclined to fall asleep later at night — it's even natural for teens to be unable to fall asleep until 11 p.m., according to the National Sleep Foundation — and awaken later in the morning, a biological schedule that often doesn't match the one set by schools. When that happens, most kids would rather snooze an extra 15 minutes then get up for a bowl of cereal.

"Many of them are not getting enough sleep," says Marcie Beth Schneider, M.D., FAAP, a member of the AAP's Committee on Nutrition and an adolescent medicine physician in Greenwich, Conn. "They often wake up too tired or too nauseous to eat." Experts believe that some kids, especially girls, may be also bypassing the morning meal in an effort to control weight gain.

Breaking the Fast Is Healthy

In reality however, skipping breakfast is more likely to cause weight gain than it is to prevent it. A 2008 study in the journal *Pediatrics* found that adolescents who ate breakfast daily had a lower body mass index than teens who never ate breakfast or only on occasion.

Ironically, the breakfast eaters even ate more calories, fiber, and cholesterol in their overall diets compared to the kids who skipped breakfast. But the kids who ate breakfast also had diets with less saturated fat. "We know that the biggest predictor of overeating is undereating," Dr. Schneider says. "Many of these kids skip breakfast and lunch, but then go home and don't stop eating."

Eating breakfast also has ramifications on school performance. "Study after study shows that kids who eat breakfast function better," Dr. Schneider says. "They do better in school, and have better concentration and more energy."

Children who eat breakfast are generally in better health overall, a fact that may be attributed to the types of food often associated with the morning meal. Breakfast provides a golden opportunity to fortify your teen with nutrients that can easily fall by the wayside the rest of the day. "Breakfast is a great time to consume fiber in the form of cereals and whole wheat breads," Dr.

Cochran says. Fiber can help with weight control and has also been linked to lower cholesterol levels.

Breakfast is also an opportunity to feed your child bone-building calcium and vitamin D. Kids enter their peak bone-building years in adolescence and continue building bone into their early 20s. Although vitamin D is best known for its role in promoting the absorption of calcium, new studies show vitamin D may also boost immunity and help prevent infections, autoimmune diseases, cancer and diabetes. As a result, the AAP recently doubled its recommended vitamin D intake from 200 IUs a day to 400 IUs.

Exposure to the sun triggers the skin to produce vitamin D, but experts generally caution against relying on the sun for vitamin D — too much sun raises the risk for skin cancer. Instead, experts recommending getting vitamin D from foods, including eggs and fortified foods such as breakfast cereals, milk, and yogurt — all perfect for the morning meal. Vitamin D is also found in salmon, tuna, and other types of seafood. Kids who do not get enough vitamin D from food should consider taking a supplement.

Take Action

With weight gain and obesity becoming a major public health concern, experts agree that the push to get teens to the breakfast table is an important one. According to the U.S. Centers for Disease Control and Prevention, 17 percent of the nation's adolescents aged 12 to 19 are overweight or obese, which sets the stage for serious future health problems such as diabetes and heart disease.

So how do you get your teen to chow down in the A.M.? Start by setting an earlier bedtime, which helps ensure that your child will get up in time to eat something. Then make breakfast a priority in your home. Ideally, the whole family can sit down together for breakfast, a practice that should start well before the teen years. "Families that eat together tend to eat healthier," Dr. Cochran says. "It also gives parents the chance to act as role models in terms of nutrition and eating behaviors."

Quick Tips: A Healthy Breakfast on the Fly

There's no getting around the truth: Adolescents are often in a hurry, and mornings are no exception. While a sit-down breakfast made up of the four basic food groups is the ideal, a grab-and-go breakfast item is the next best thing. Such sources of carbohydrates (good energy for teens) as these should be in your teen's possession as he or she dashes out the door on a school morning:

- Granola bars
- Breakfast bars
- Dried fruit
- Fresh fruit
- Dry cereal

If mornings are too difficult to orchestrate a sit-down meal, try having some easy-to-go breakfast foods available for your child. Good options include yogurt, granola bars, dried cereal, breakfast bars, fresh fruit, and dried fruit. Let her take it and eat it on the way to school if possible, or encourage her to go to school and buy breakfast, which most schools now make available. “Ideally, a breakfast should have all the food groups represented,” Dr.

Schneider says. But anything nutritious they grab on their way out the door works. “What’s important is that they get some healthy carbohydrates, which provide energy,” says Dr. Schneider.

One beverage that kids should omit from their morning meal: coffee and energy drinks. While the craving for a quick pick-me-up is certainly understandable, caffeine raises blood pressure and heart rate in teens, Dr. Schneider says. •

Vaccination (continued from page 24)

There are other vaccines that teens in certain high-risk categories may need, and catch-up vaccines are available in some cases for teens who didn’t receive all their scheduled immunizations as younger children. Talk with your pediatrician about what your child needs.

Keep It On the Schedule

For many parents, remembering to take young children to the pediatrician for immunization is not a challenge. Well-child checkups are fairly frequent for the first few years of life, and the doctor’s phone number is never far away.

That changes in the adolescent years, for a variety of reasons. “We live in a busy world, it’s true,” says Dr. Byington, who is on the American Academy of Pediatrics’ Committee on Infectious Disease — and is a working mom herself. “But no matter how busy we get, protecting our children is something we always make time for.”

Dr. Byington has a good suggestion for remembering to take adolescent children in for annual checkups and needed immunizations. “Everyone has a birthday every year,” she says. “Use that child’s birthday as a reminder to take them in for their annual well-child check and the vaccines he or she needs at that time. It’s the best birthday present you can give your child.” •

Vitamin D (continued from page 26)

preparations for infants that contain 400 IU vitamin D per dose as well. Chewable vitamins are generally regarded as safe for children over the age of three who are able to chew hard foods and candy.”

For breast- or bottle-fed babies, liquid supplements are the best option. “There are liquid preparations that give the recommended intake of 400 IU in 1/2 or 1 mL, which are considered to be safer by some,” says Dr. Wagner. “There are also liquid drop solutions available that provide one drop that equals 400 IU per day. The care provider can put the vitamin D drop on an index finger and then place the finger in the baby’s mouth,” she suggests. “Alternatively, the drop can be put on a pacifier or breast and then when the infant sucks the pacifier or breast, the infant receives the vitamin.”

As with all medications and supplements, vitamin D supplements should be kept out of a child’s reach. “The risk with drop solutions is that an infant or other children in the house could receive too much vitamin D,” Dr. Wagner says.

Finding D Naturally

In addition to vitamin supplements, enriched foods are another way to increase the vitamin D in your child’s diet. Look for foods fortified with vitamin D such as milk, cereal, orange juice, yogurt, and margarine.

Vitamin D is found naturally in only a few foods — they include oily fish, beef liver, cheese, egg yolks, and some mushrooms. Oily (or fatty) fish are one of the best sources of the

vitamin. For example, 3.5 ounces of cooked salmon offers approximately 360 IU (about 90 percent of your child’s daily recommended value) of vitamin D per serving. Other examples of oily fish include tuna, mackerel, trout, herring, sardines, kipper, anchovies, carp, and orange roughy. •

Quick Tips: The ABCs of Vitamin D

How to make sure your child is getting enough vitamin D:

- **Breastfed and partially breastfed infants should be supplemented with 400 IU a day of vitamin D beginning in the first few days of life.**
- **All non-breastfed infants, as well as older children, who are consuming less than 32 ounces per day of vitamin D-fortified formula or milk, should receive a vitamin D supplement of 400 IU a day.**
- **Adolescents who do not get 400 IU of vitamin D per day through foods should receive a supplement containing that amount.**
- **Children with increased risk of vitamin D deficiency, such as those taking certain medications and with chronic diseases such as cystic fibrosis, may need higher doses of vitamin D. Consult your pediatrician.**