#### 50 - ASPECTS OF THE OBESIDADE IN INFANCY

SANCLÉYA EVANESSA DE LIMA<sup>1</sup> LIAMARA SCHWARZ<sup>2</sup> UEL, Docente no CESUFOZ e SEED

1 - Especialista em Recreação, Lazer e Animação Sócio-cultural na UEL, Docente no CESUFOZ e SEED 2 - Mestre em Educação Física na UFSC, Docente no CESUFOZ, UNIGUAÇU e SEED Foz do Iguaçu - PR - Brasil

Lima.san@bol.com.br

#### 1. INTRODUCTION

The technological evolution has facilitated to the life of the modern society, on the other hand has contributed acentuadamente for the low indices of physical activity, generating the installation of the overweight and the obesidade. Both constitute currently as one of the problems most serious of public health. In the United States, they is esteem that this problem already reaches 50% of the population and in Brazil the indices are preoccupying and some evidences have demonstrated that the biggest number of deaths for chronic-degenerative illnesses is associates to the obesidade.

The sedentary life is today one of main males of the planet. In academic quarrels and the different uprisings of professionals of the health area, it is also perceived concern with the fact of the infantile obesidade already to be a problem of epidemic character in Brazil, that affects all the social classes and regions of the country.

For Pollock and Wilmore (1993), the weight excess can be defined as the condition where the weight exceeds on the basis of to the ideal percentage, being determined the stature, sex and biótipo and also the obesidade according to FRANGIPANI and PERES (1996), extreme deposit of fat in the fabric can be defined as adiposo, which indicates that the percentage of the corporal weight is greater that the normal conditions.

The allied physical inactivity to the bad feeding is the factors of bigger risk in the development of the obesidade. The maintenance of one weight adjusted for the age, sex, etária band and level of daily physical activity constitutes practical important to propitiate manifestations of physical and mental well-being, beyond preventing health problems associates to the obesidade.

Segundo Wilmore (1994), most of the financial expenses, is generated by the excess of corporal fat, therefore the necessity to demystify this phenomenon and with this to try to clarify the people on the main aspects that generate the obesidade and that the prevention still is half the most efficient one.

This work of clarification must start in infancy, being thus in the pertaining to school segment and the professor of Physical Education, pparently, would be the professional more indicated to act inside of this perspective, for directly dealing with the movement, being this so important in the prevention of the overweight and the obesidade.

Thus, the intention of the present revision of literature was to present and to argue mainly on the aspects of the prevention of the obesidade in infancy, and also to search clarification on the control and treatment of the same one.

## 2. FACTORS THAT INFLUENCE THE OBESIDADE

Some theories exist that try to explain the development of the obesidade, however only two receive prominence. The first one defends that the obesidade of physiological origin is on the genetic factors, endócrinos, hipotalâmicos and metabolic; To the step that second acts as a lawyer that the obesidade is of mannering origin, related the cultural, partner-economic and mannering factors (LEDOUX, 1985).

Thus the obesidade of physiological origin necessarily is not caused by the food excess, however by the disfunção of the organism that causes the overweight. Already the obesidade of mannering origin is closely on to the environment where the individual if relates and to the way of life for adopted it. In synthesis the obesidade seems to be a genetic trend that if combines to the external factors as: sedentarismo, amount and quality of ingested foods (GUEDES and GUEDES, 1998).

Hormonais characteristics make that men and women present distinct behaviors in what refers to to the accumulations of corporal fat. The men tend to accumulate more corporal fat in the trunk, while the women tend to accumulate in the extremities. In virtue of the sexual differences, the woman possesss adiposo greater amount of fabric of what the man, in reason of the effect of the secretion tax of some sexual hormones esteroides and of the local density of the receivers (BJORNTORP apud LOPES et al., 1995).

GUEDES and GUEDES (1998) affirm that two phases exist importantissimas in the life of the individual that can propitiate the excess of weight in the adult life. The first phase initiates in the first years of life of the child, and at the beginning of the puberty, where the hiperplasia of the cells occurs (increase in the number of the adiposas cells).

This, pparently, can explain why obesos individuals when children have greaters difficulties to lose the weight in the adult life. The second phase occurs after-puberty, after this period will be able to only occur to the cellular hipertrofia (increase in the size of the adiposas cells). E still on this aspect MELLO et al. (2004) it affirms that the obesidade occurs normally in the first year of life of the child, after this phase, between 5 and 6 years and later in the adolescence.

In relation to the ambient aspects, the modern life, with the medias stimulating for the occupation it free time with sedentary activities, contributes for the abandonment of the playful activities of more intense physical efforts, which when allies to the mechanization of the work give space to the room. The diets established for the way where we also live contribute for positive the energy balance (GUEDES and GUEDES, 1998).

On the alimentary questions one has increased the apelos on alimentary products and some of rich them in simple carboidratos, fats and calories and this have affected directly the alimentary habits of the children (MELLO, et al. 2004). Segundo OSCAI and PALMER apud GUEDES and GUEDES (1994), with regard to the nutricionais factors, morphologic studies indicate that these act in the development of the obesidade. The hiper-feeding derived from high calories demonstrates great increase in the fabric adiposo.

In accordance with REUBEN (1975), almost all the people who are obesas consume an feeding of low fibroso text and high text caloric. In what it says respect to one high calórica ingestion, the reasons of this could be on to the emotional factors, the social environment and the acquired alimentary habits in infancy.

In last the 10 years the world-wide organization of health points with respect to referring data to the increase of 10 40% of the infantile obesidade in the majority of the European countries and in Brazil the indices also have increased.

E according to studies, the infantile obesidade reaches all the economic classrooms, but in Brazil the research points mainly with respect to the raised partner-economic classrooms more (MELLO et al., 2004).

For the same author, the increase of the infantile obesidade in Brazil, United States and Europe, imply in the changes of the habits of life of the people, these changes must to the advance of the technology and the violence, making with that the children change its tricks, being in the front of the television or the computer for the most part of the time.

Being thus, the movement lack causes the low levels of physical aptitude, related to the excess of corporal fat, that imply in the lesser capacity consequentemente to remove acid greasy free of the adiposas cells and the lesser use of the fat as power plant in daily physical activities (OSCAI and PALMER apud GUEDES and GUEDES, 1994).

The sedentarismo generates the obesidade and the obesa child tends to be still more sedentary, due to limitation that this physical condition provides. The spontaneous physical activity is important, therefore it motivates the child in the direction to make a parallel with its daily one and to propitiate the playful experience in its accomplishment, therefore the systemize activities are less interesting for the child and dispendiosas for the parents (MELLO et al., 2004).

In accordance with Pollock et al. (1986), endócrinas manipulations are related with the manipulation of insulina and glicocorticóides. The administration of glicocorticóides can provoke the increase of the corporal fat.

The obesidade of hormonal or genetic origin occurs in less than 5% of the cases, however other factors if detach (NADEAU and PÉRONNET, 1985).

## 3. CLASSIFICATION OF THE OBESIDADE

In accordance with the adiposas cells, exist two types of classification for the obesidade, endogenous exógena or. The exógena obesidade reflects to the energy balance. This type of obesidade is responsible for a bigger number in the cases of excess of corporal fat. Being thus, the exógena obesidade is caused by the extreme ingestion of foods and sedentarismo, already the endogenous obesidade is less common, seen to be on to the endócrino system (GUEDES and GUEDES, 1998).

The obesidade can be classified still, in accordance with the size and the adiposas frame number, in hipertrófica and hiperplásica. The size of the adiposas cells of hipertróficos obesos can reach, on average, dimensions 40% greaters if compared with the one of the cells of the not obesos ones (MCARDLE et al., 1998).

Therapeutical interventions (physical diets, activities, etc.), do not modify the number of the adiposas cells, but they can result in the reduction of its size. For this reason, individuals with bigger frame number are more inclined the obesidade of what those with reduced number of adiposas cells. E when the person loses fat occurs a esvaziamento of these cells, but the amount continues unchanged (DILLON, 1983).

The obesidade can in agreement still be classified the localization of the corporal fat. Thus, to the accumulation of central fat in the region of the trunk, peripheral obesidade is called, or android, particularly in the region of the hip, or femural glúteo, calls obesidade ginóide.

The obesidade android also is known of the type apple, to the step that the obesidade ginoide can be dealt with as the type pear. However the fat distributed in the region of abdomem it is most harmful to the health, therefore mellitus of type 2 is associated with the cardiovascular illnesses and diabetes. Already diabetes mellitus in type 1 is developed still in infancy and has genetic characteristic (CYRINO and NARDO Jr, 1996).

Dillon (1983) presents a generalization of the percentage of corporal fat that differentiates the individuals. In such a way, people with 10% above of its ideal weight have "moderate" excess of weight; if they will be 15% above of its ideal weight, beyond being considered obesas start to have probability of if becoming carrying people of chronic-degenerative illnesses.

Segundo Hershman (1985), when the weight excess reaches aproximadamente 100% above of its desirable weight, the obesidade can be considered mórbida. "The mórbido" term comes of the multiple complications of health and the difficulties of psicossocial adjustment of the individual.

## 4. IMPLICATIONS OF THE EXCESS OF CORPORAL FAT

The excess of corporal fat can cause a series of problems to the health, such as to originate and to aggravate metabolic and chronic-degenerative illnesses and to influence in the posturais shunting line development (POLLOCK and WILMORE, 1993).

Amongst the main illnesses premade use or aggravated for the excess of corporal fat, the cardiovascular illnesses, arterial hipertensão, diabetes mellitus, illnesses of the biliary, hipercolesterolemia and hiperlipidemia vesicle are distinguished. However, for BEVILACQUA et. al. (1992), most common in obesos individuals they are the cardiovascular and pulmonary illnesses; therefore to the action of the fat in excess in these agencies it acts more directly and in arbitrary way, had to the increase in the mechanical work, being able to cause infarto of the myocardium, congestiva cardiac insufficience and consequentemente in death

High concentrations of plasmáticos lipídios, lipoprotein of low (LDL) and very low density (VLDL) and cholesterol are part of the metabolic profile of the patient obeso. The rise of the sistólica and/or diastólica arterial pressure has been observed in obesos individuals of both the sexos, in different etárias bands, independent of the race. Disfunções pulmonary also is common in severely obesos individuals, due to pulmonary hipoventilação.

Thus, obesos patients, with compromised respiratory function, run risk during the surgical act or in the immediate postoperative period and still the cicatrização is slower (NADEAU and PERONNET, 1985). The predominance of the fat in the abdominal region (android) takes the individual to the biggest risk of coronariopatias, diabetes, raised triglicerídeos, arterial hipertensão, has seen that the enzyme lípase is more active in this region (MCARDLE et al., 1998).

Obeso is subject to wounds, due to reduction of its physical capacities and reduction of the reaction speed, in view of the so common difficulties of movement in these individuals.

In the same way obeso is subject also to suffer breakings, therefore the weight excess overloads the structure óssea causing injuries, for propitiating brusque movements in the joints (LEDOUX, 1985). E as WILSON and FOSTER (1988) this overload contributes for a lesser daily physical activity.

Segundo Marcondes (1989), the low one of physical activity for the child, beyond propitiating a sedentary style of life causing illnesses, finishes for inhibiting the normal physical growth of the bones. It is of consensus enters the researchers that a minimum of physical activity is essential to obtain a normal growth and the protoplasmática integrity of fabrics. This minimum that represents in terms of intensity and duration is defined.

Segundo Vasconcellos and Gewandsznajder (1985), the obesidade can still unchain social problems and psychological serious, making it difficult the conviviality in society, beyond reducing auto-they esteem. In the child in pertaining to school age, this is a serious problem, therefore almost always they suffer with the problem from the Bullying, thus generating psychological upheavals, many irreversible times.

De acordo com Mcardle et al. (1998), the obesidade must be faced as an illness. Exactly people who do not present high indices of corporal fat, only 2 the 5 kg above of the ideal weight, are citizens the multiple biological risks. On the other hand,

the loss of weight can diminish the risks proportionally to develop the illnesses caused for the obesidade. Some symptoms, as air lack, apnea in sleep, sleepiness, beyond pains to articulate and in the lumbar column can be diminished with the reduction of the corporal weight.

Segundo Mello et al. (2004), aterosclerose has beginning in infancy, with the cholesterol deposit in the muscular arteries, forming the estrias of fat. These estrias in the coronarianas arteries of children can in some individuals, to progress for advanced arteroscleróticas injuries in few years.

In accordance with the same author the prevalence of obesidade in infancy points with respect to some complications and high risks of morbidade. E the more time the people if keep obesas, greaters the possibilities of the complications still to occur precociously.

## 5. PREVENTION OF THE OBESIDADE

A consensus exists enters the scholars of the corporal composition that, in the case of the obesidade, the ideal is the prevention, has seen that the maintenance of the balance between ingesta and expense caloric in obeso does not seem to be so simple, therefore includes a change, many times, radical in the life style, alternating alimentary habits, reducing the consumption of these calories, increasing bigger degree of physical activity

"The sedentary style of life adopted by many children and adolescents has been objective of strong concerns on the part of the parents, educators, researchers and involved people with the problem of collective health" (TANI, 2001, P. 1).

For Barbosa (2003), the people who are directly on with the question of the prevention of the obesidade are the doctors, parents, and professors, the parents have a basic paper for the appropriation of the style of life of the child, it he influences directly in the alimentary habits and of physical activity in general way. In such a way, the change in the behavior of the child and the adolescent is atrelada to its family, who exerts basic paper so that the results are positive.

Recognizing that the infantile obesidade is one of the problems that the modern society worries, therefore the indices of obesas children had increased and other problems of health had also increased proportionally, of this form the Pertaining to school Physical Education have the function of assisting in this work of prevention, oportunizando the practical one of physical activity in the life of the individual, in the direction to improve the quality of life of the people (TANI, 2001).

For the same author one of the forms of if fighting the infantile sedentarismo it is to provide to the children and adolescents chances of envolvement with the practical esportiva, but we know that this is not so simple. So that these chances of practical esportivas are used to advantage, it needs an effort to motivate them and this is a complex task in way to the competition of activities as: electronic, television, Internet, among others half. Being thus it fits to the professional of Physical Education and the excessively professional ones, plus this challenge.

## 6. CONSIDERAÇÕES FINAL

The sprouting of patologias in infancy, related with the energy ingestion, as to the obesidade, is comumente associates to the disequilibrium between the physical activity and the alimentary ingestion. It can say that the obesidade is resultant of the action of ambient factors on the individuals genetically premade use to present adiposo fabric excess. Under its relevance it is observed necessity how much to the development of the awareness of the society on the aspects that refers to the overweight and the obesidade.

The Physical Education in the Pertaining to school scope, is not the solution of all the problems faced for the society, but as for the questions on the corporal culture of movement, this disciplines if well guided it can positively assist in the acquisition of physical qualities and essential habits for the attainment of a good quality of life, inside of the genetic predispositions of each individual, thus preventing risks of illnesses.

Therefore one of the objectives of the Physical Education is for the work of development of the conscience of the pupil for the improvement of its condition of life, inside and outside of the school, but this the necessary child to be motivated to remain active and this work also depends on the family, therefore we know that sedentary children are potential of sedentary adults and high risks of morbidade and the prevention still is half the most efficient one.

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Rua Heleno Schimmelpfeng, número 71, apto. 202, Vila Yolanda, CEP: 85853-510.

Foz do Iguaçu – Paraná.

E-Mail: Lima.san@bol.com.br

## ASPECTS OF THE OBESIDADE IN INFANCY ABSTRACT

The obesidade has been white of quarrel for diverse professionals compromissados with the health human being, since the excess of corporal fat can cause innumerable, hipertensivas cardiovascular, pulmonary illnesses, beyond causing injuries, breakings and reduction of mobility, and also psychological damages. Its etiology is multifactorial being, the sex, the age, the psychological environment, problems, physical inactivity, bad feeding and endocrinos problems, considered as main .causing agents of this phenomenon. How much to the origin, the obesidade can be classified as exógena and endogenous, how much to the size and number of the cells in hipertrófica and hiperplásica and finally how much to the distribution of the corporal fat in android and ginoide. Therefore, the intention of this research was to verify the main evidences of literature in what it says respect to the installation, causes and consequences of the obesidade in infancy, identifying main ways of control, treatment, and mainly the prevention. E understanding the importance of the movement as prevention of illnesses, being the movement in the somewhat born child in this phase of the life, this must be stimulated. In this in case that, the Physical Education as it disciplines curricular that it aims at the Education by means of the movement, that has the intention of assisting in the development of the form citizens that, these come to transform the reality in which they are inserted, must be assumen of the considered ways more efficient to help our children in the development of the conscience on the importance of a style of healthful life. In accordance with the inquiries in innumerable studies, can be concluded that practical of physical exercise the regular associate to a balanced feeding can contribute in the prevention of the infantile obesidade and reversion of the picture of obesidade in the great majority of the cases

KEYWORDS: physical activity, prevention, style of life.

## DES ASPECTS DE L'OBÉSITÉ DANS L'ENFANCE RÉSUMÉ

L'obésité a été l'objet de discussion par de divers professionnels compromissados avec la santé humaine, vu que l'excès de graisse corporelle peut causer d'innombrables maladies cardiovasculaires, pulmonaires, hipertensivas, outre causer des blessures, fractures et réduction de la mobilité, et aussi préjudices psychologiques. Son étiologie est multifatorial en étant, le sexe, l'âge, l'environnement, problèmes psychologiques, inactivité physique, mauvaise alimentation et problèmes endocrines, considérés comme de principaux agents provocateurs de ce phénomène. Combien à l'origine, l'obésité peut être classée comme exogène et endogène, combien à la dimension et au nombre des cellules dans hipertrofica et à la hiperplásica et finalement combien à la distribution de la graisse corporelle dans androïde et ginóide. Donc, l'intention de cette recherche a été vérifier les principales évidences de la littérature en ce qui concerne l'installation, causes et conséquences de l'obésité dans l'enfance, en identifiant principaux moyens de contrôle, traitement, et principalement la prévention. Et en comprenant l'importance du mouvement je mange prévention de maladies, en étant le mouvement dans l'enfant légèrement né dans cette phase de la vie, celui-ci doit être stimulé. Dans ce cas, l'Éducation Physique comme discipline curriculaire qui vise l'Éducation au moyen du mouvement, qui a l'intention d'assister dans le développement des sujets de forme laquelle, ceux-ci viennent transformer la réalité dans laquelle ils sont insérés, il doit s'approprier des moyens considérés plus efficaces pour aider nos enfants dans le développement de la conscience sur l'importance d'un style de vie saine. Conformément aux recherches dans d'innombrables études, il se peut conclure que la pratique d'exercice physique régulier associé à une alimentation balancée peut contribuer dans la prévention de l'obésité infantile et à du retour du tableau d'obésité dans la grande plupart des cas.

MOTS-CLÉS: activité physique, prévention, style de vie.

# ASPECTOS DEL OBESIDADE EN INFANCIA RESUMEN

El obesidade ha sido blanco de la pelea para los compromissados diversos de los profesionales con el humano de la salud, puesto que el exceso de la grasa corporal pueden causar innumerable, los hipertensivas cardiovasculares, las enfermedades pulmonares, más allá de causar lesiones, los breakings y la reducción de la movilidad, y también los daños psicologicos. Su etiología es el ser multifactorial, el sexo, la edad, el ambiente psicologico, los problemas, inactividad física, mala alimentación y problemas de los endócrinos, considerados como agentes principales de .causing de este fenómeno. Cuánto al origen, el obesidade se puede clasificar como exógena y endógeno, cuánto al tamaño y el número de las células en hipertrófica e hiperplásica y finalmente cuánto a la distribución de la grasa del cabo en androide y ginóide. Por lo tanto, la intención de esta investigación era verificar las evidencias principales de la literatura en lo que dice respecto a la instalación, a las causas y a las consecuencias del obesidade en infancia, identificando maneras principales del control, el tratamiento, y principalmente la prevención. E que entiende la importancia del movimiento como prevención de enfermedades, siendo el movimiento en el niño algo llevado en esta fase de la vida, ésta debe ser estimulada. En esto en caso de que eso, físico educación como disciplina del plan de estudios que tiene como objetivo la educación por medio del movimiento, que tiene la intención de asistir en el desarrollo de los ciudadanos de la forma a que, éstos viene transformar la realidad en la cual él se inserta, debe estar assumen de las maneras consideradas más eficientes ayudar a nuestros niños en el desarrollo de la conciencia en la importancia de un estilo de la vida saludable. De acuerdo con las investigaciones en los estudios innumerables, puede ser concluido que práctico de ejercicio físico el asociado regular a una alimentación equilibrada puede contribuir en la prevención del obesidade y de la reversión infantiles del cuadro del obesidade en la gran mayoría de los casos.

PALABRAS CLAVE:: actividad física, prevención, estilo de la vida.

## ASPECTOS DA OBESIDADE NA INFÂNCIA RESUMO

A obesidade tem sido alvo de discussão por diversos profissionais compromissados com a saúde humana, visto que o excesso de gordura corporal pode acarretar inúmeras doenças cardiovasculares, pulmonares, hipertensivas, além de acarretar lesões, fraturas e redução da mobilidade, e também prejuízos psicológicos. Sua etiologia é multifatorial sendo, o sexo, a idade, o meio ambiente, problemas psicológicos, inatividade física, má alimentação e problemas endócrinos, considerados como principais agentes causadores desse fenômeno. Quanto à origem, a obesidade pode ser classificada como exógena e endógena, quanto ao tamanho e número das células em hipertrófica e hiperplásica e finalmente quanto à distribuição da gordura corporal em andróide e ginóide. Portanto, o intuito desta pesquisa foi verificar as principais evidências da literatura no que diz respeito à instalação, causas e consequências da obesidade na infância, identificando principais meios de controle, tratamento. e principalmente a prevenção. E entendendo a importância do movimento como prevenção de doenças, sendo o movimento na criança algo nato nessa fase da vida, este deve ser estimulado. Nesse caso, a Educação Física como disciplina curricular que visa a Educação por meio do movimento, que tem o intuito de auxiliar no desenvolvimento dos sujeitos de forma que, estes venham transformar a realidade na qual estão inseridos, deve apropriar-se dos meios considerados mais eficazes para ajudar nossas crianças no desenvolvimento da consciência sobre a importância de um estilo de vida saudável. De acordo com as investigações em inúmeros estudos, pode-se concluir que a prática de exercício físico regular associado a uma alimentação balanceada pode contribuir na prevenção da obesidade infantil e reversão do quadro de obesidade na grande maioria dos casos

PALAVRAS-CHAVES: atividade física, prevenção, estilo de vida.