

Los primeros 1000 días de vida: claves para la prevención de la obesidad

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CIBERESP-Instituto Carlos III, Madrid



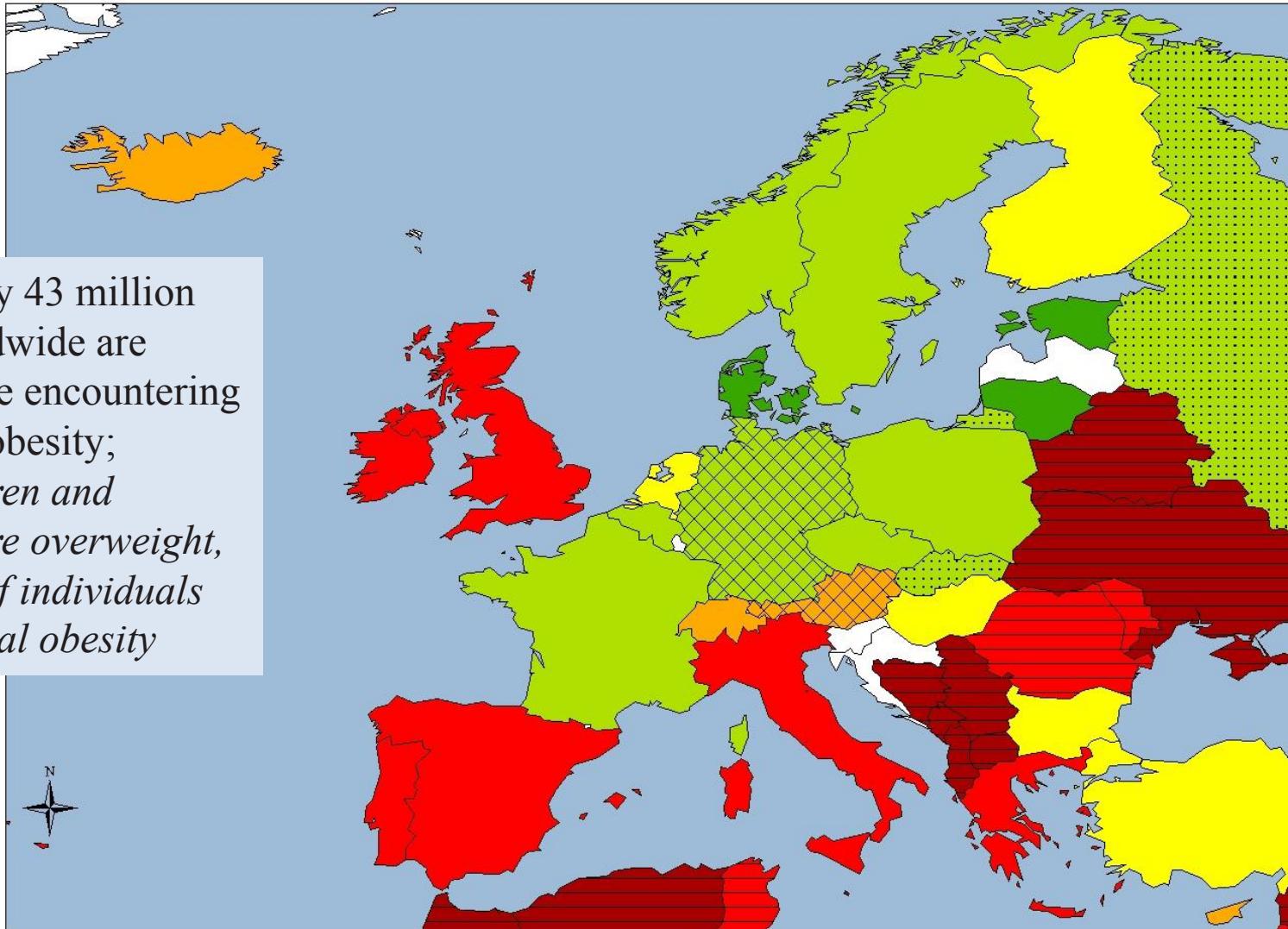
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DE GRANADA



ciberesp

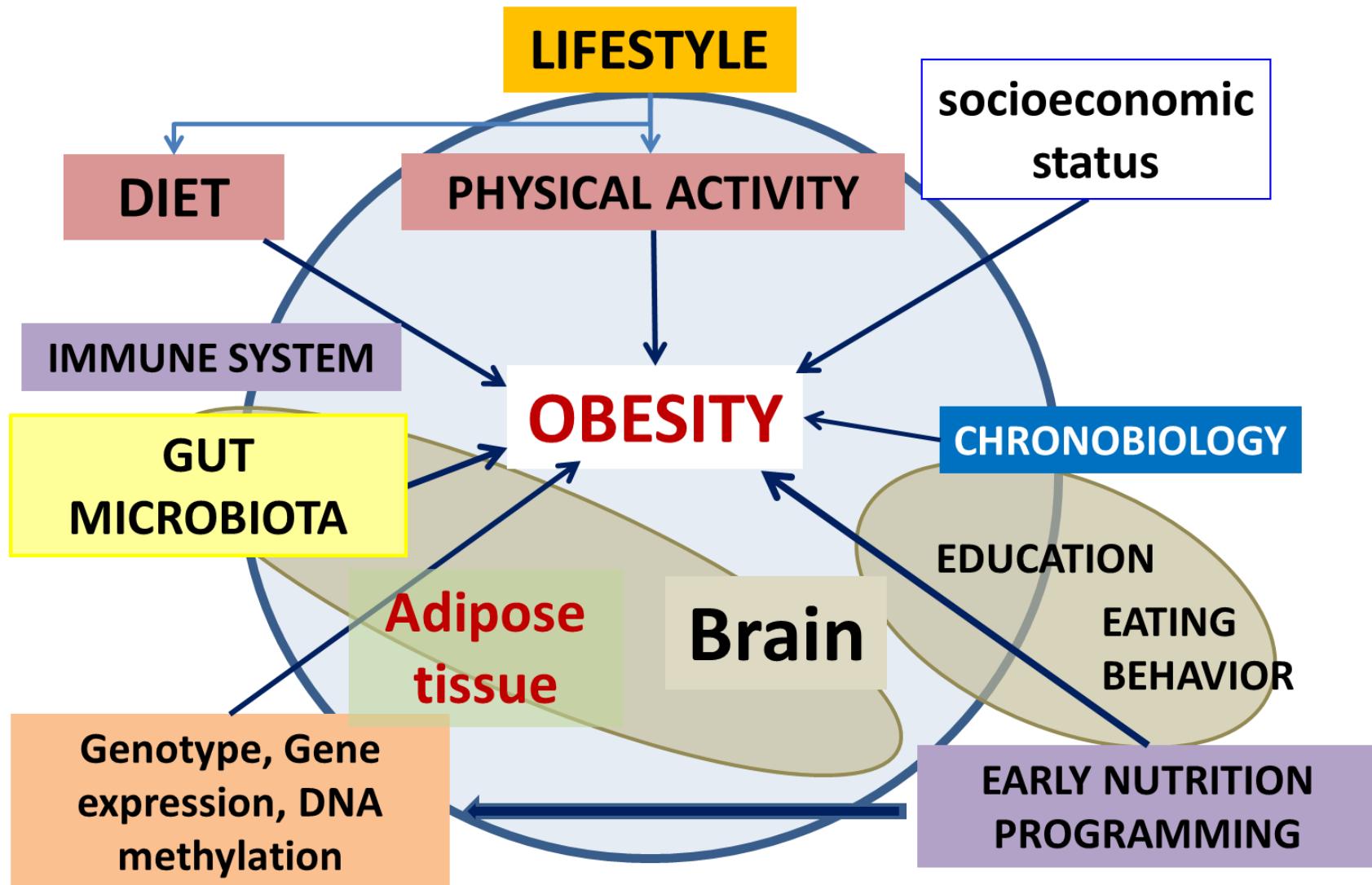


Prevalence of overweight and obesity in European children and adolescents



Approximately 43 million children worldwide are estimated to be encountering a problem of obesity;
21-24% children and adolescents are overweight, and 16-18% of individuals have abdominal obesity

CAUSES OF CHILDHOOD OBESITY



Symonds ME, Mendez MA, Meltzer HM et al. Early life nutritional programming of obesity: Mother-Child Cohort Studies. Ann Nutr Metab 2013; 62: 137-145.

Tabaquismo materno durante el embarazo ⇒ Obesidad infantil

von Kries R, Toschke AM, Koletzko B, Slikker W. Am J Epidemiol 2002;156

Adj. OR sobrepeso 1.43 (1.07; 1.90)

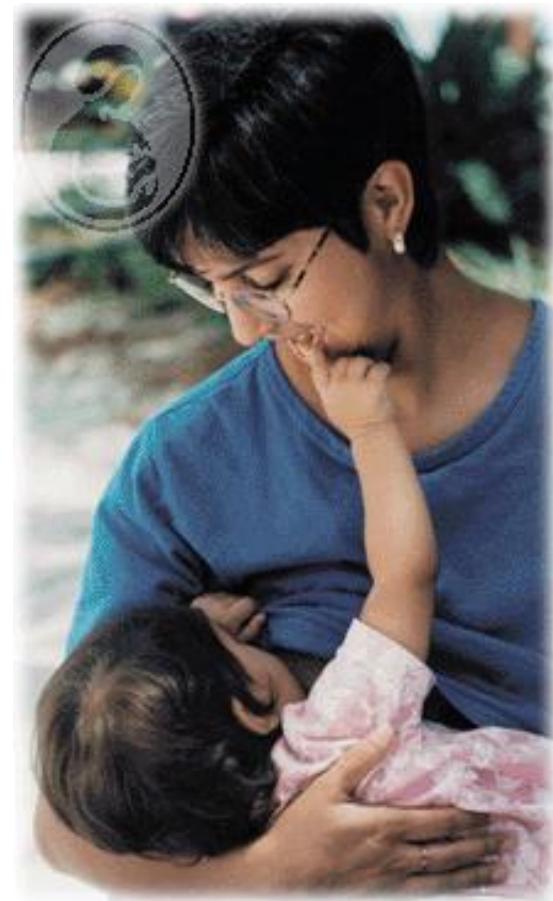
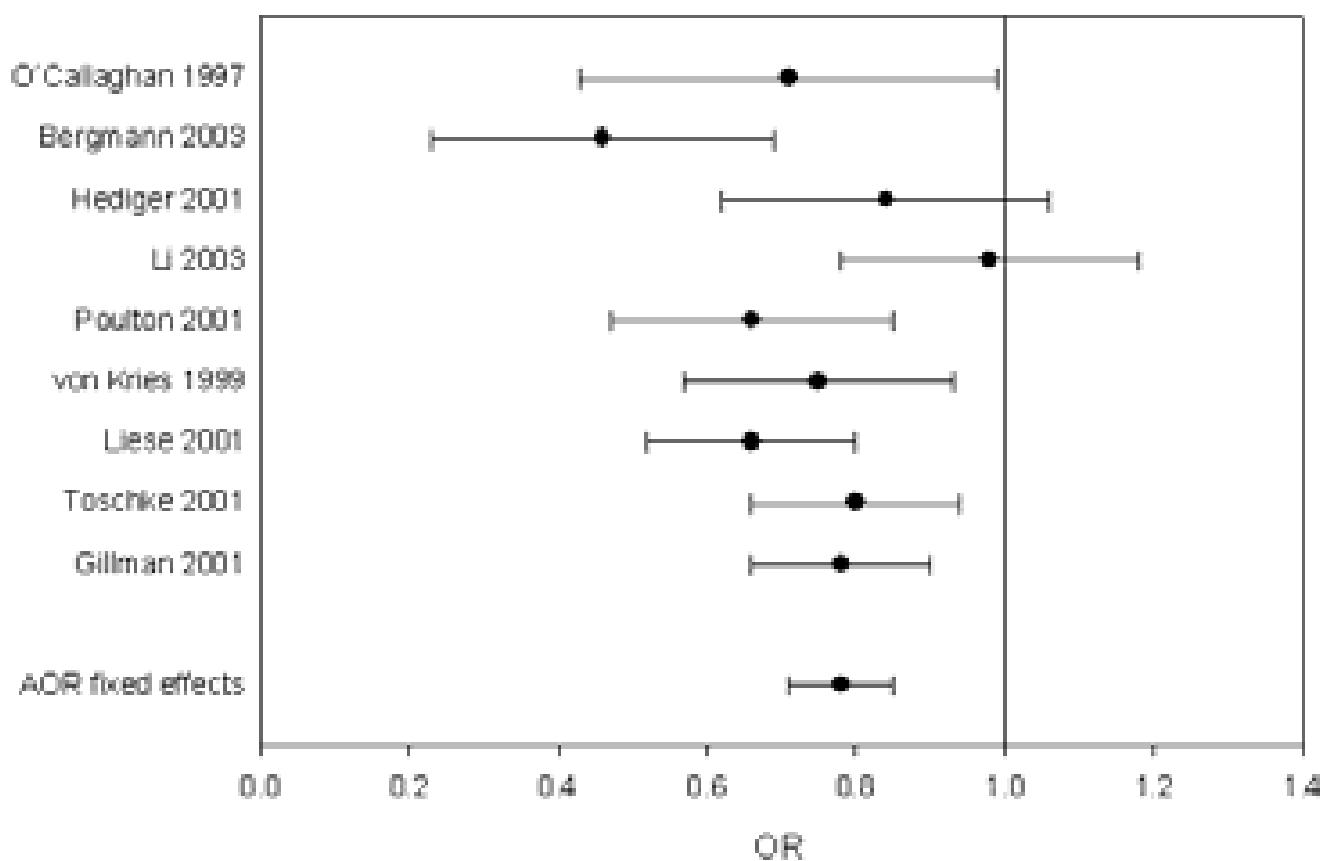
Adj. OR obesidad 2.06 (1.31; 3.23)



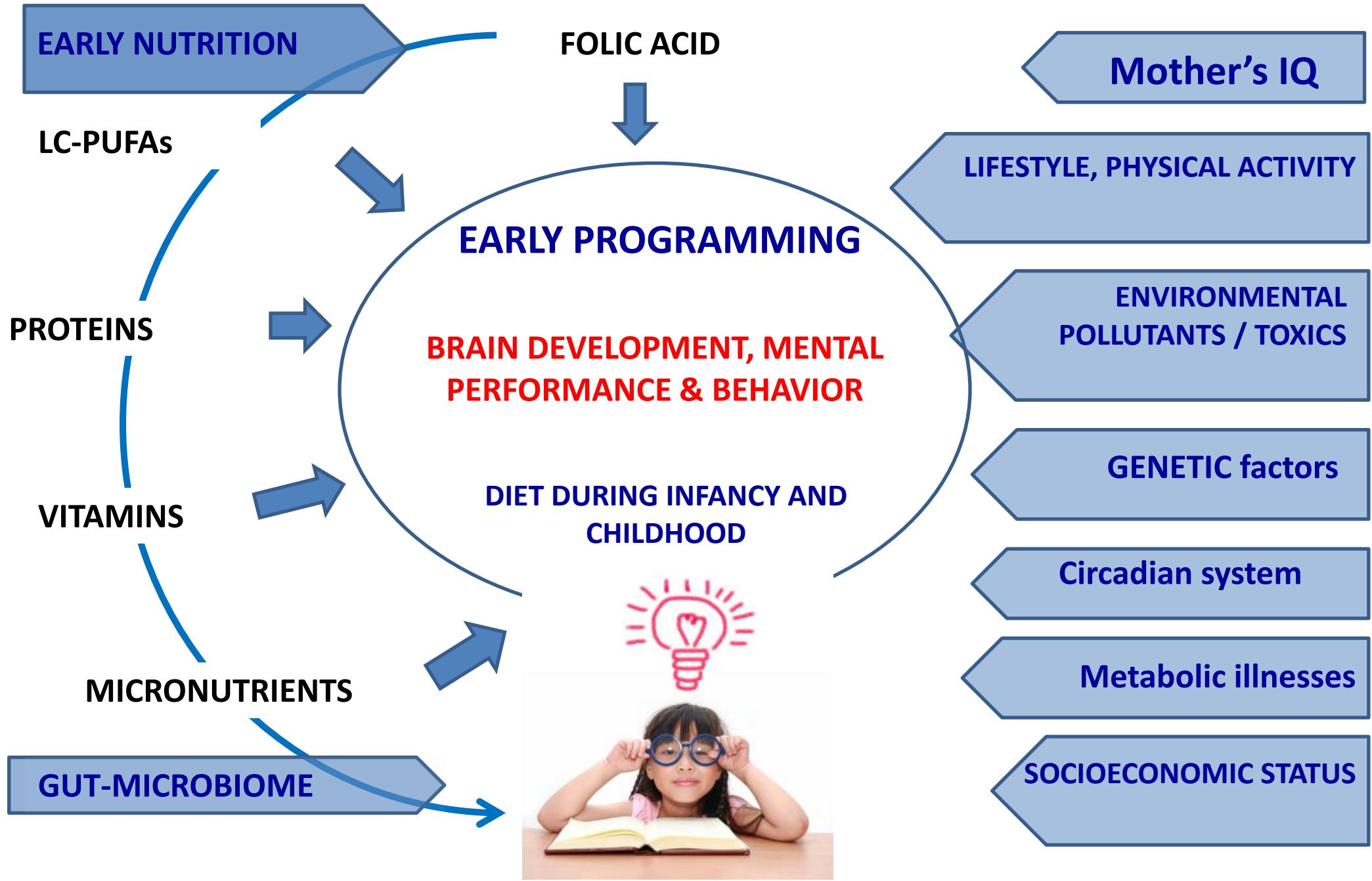
Lactancia materna y obesidad: Meta-análisis

Covariate adjusted odds ratios, pooled odds ratio

Arenz, Rückerl, Koletzko, von Kries. *Int J Obesity* 2004



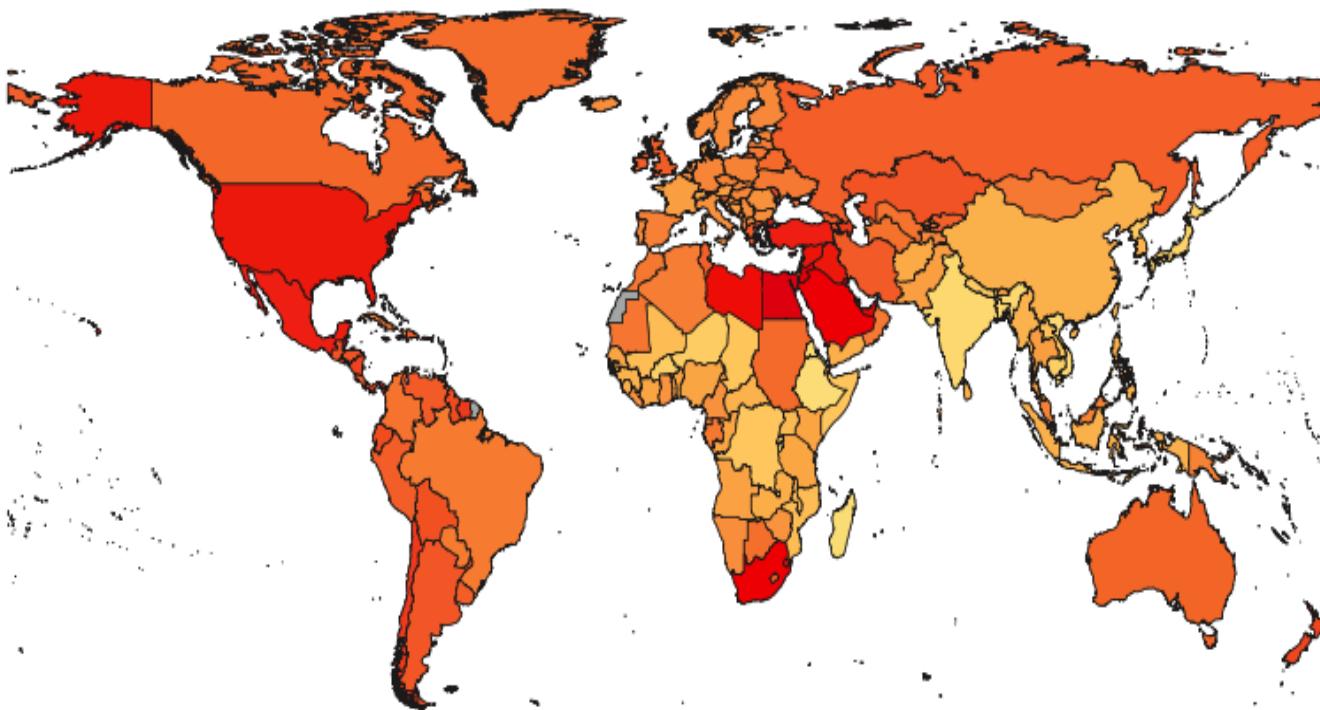
Efecto dosis-respuesta de la duración de la lactancia materna en 4/9 estudios



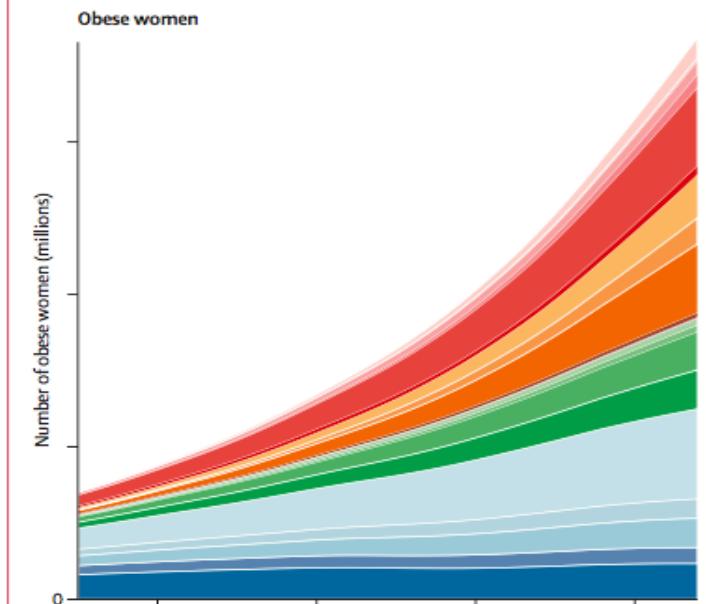
Obesity amongst women 2014

‘By 2025, global obesity prevalence will reach 18% in men and surpass 21% in women’

2014



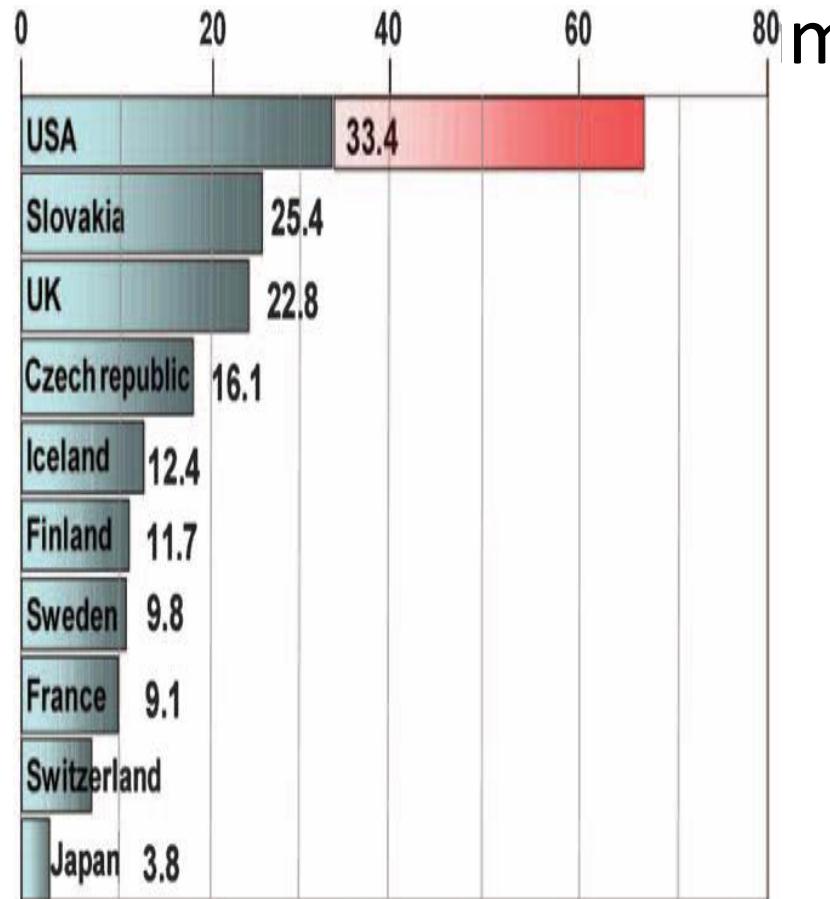
Change 1975- 2014



NCD Risk factor Collaboration, Lancet 2016

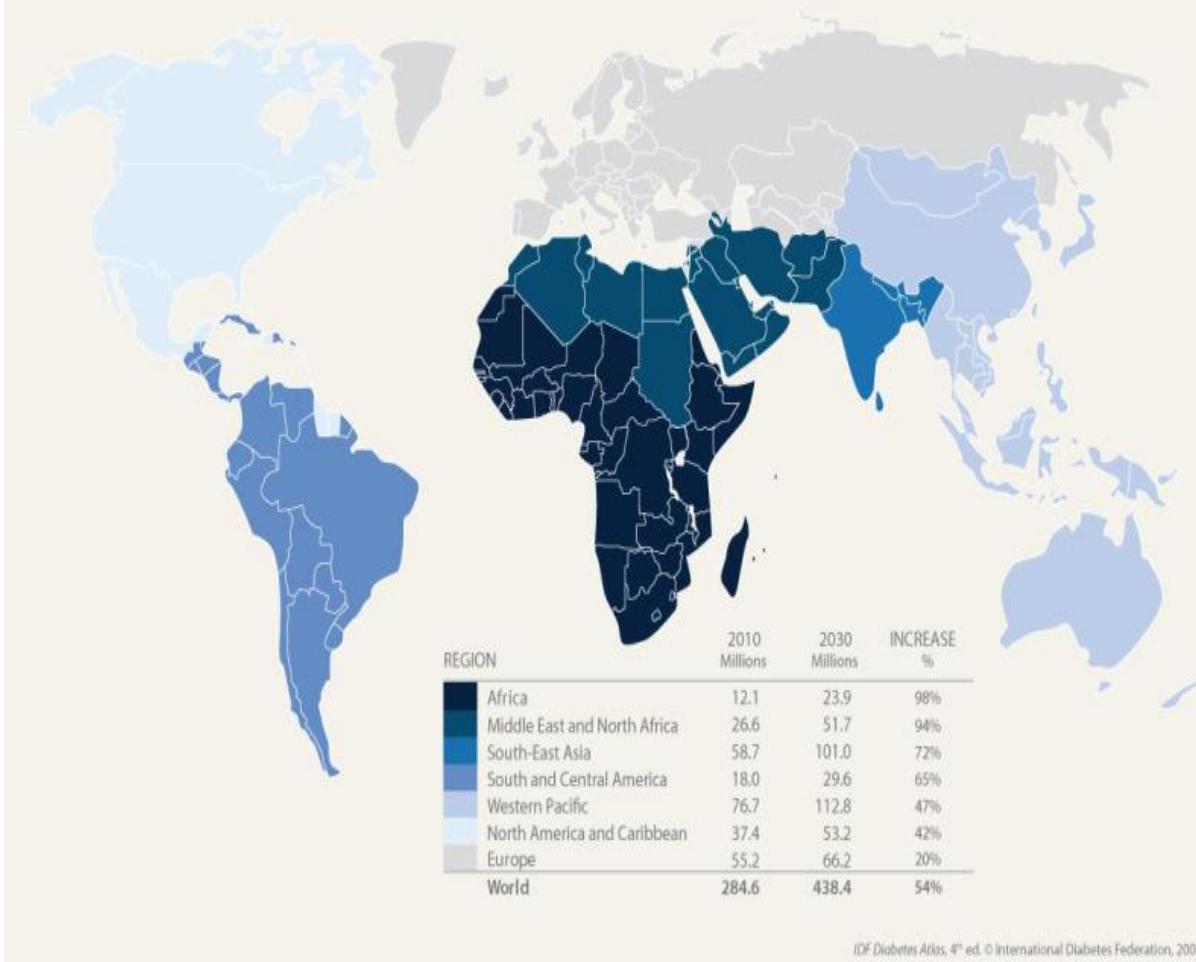
Metabolic diseases during Pregnancy

Metabolic diseases (*obesity, type 2 diabetes, hypertension*) have increased in the modern

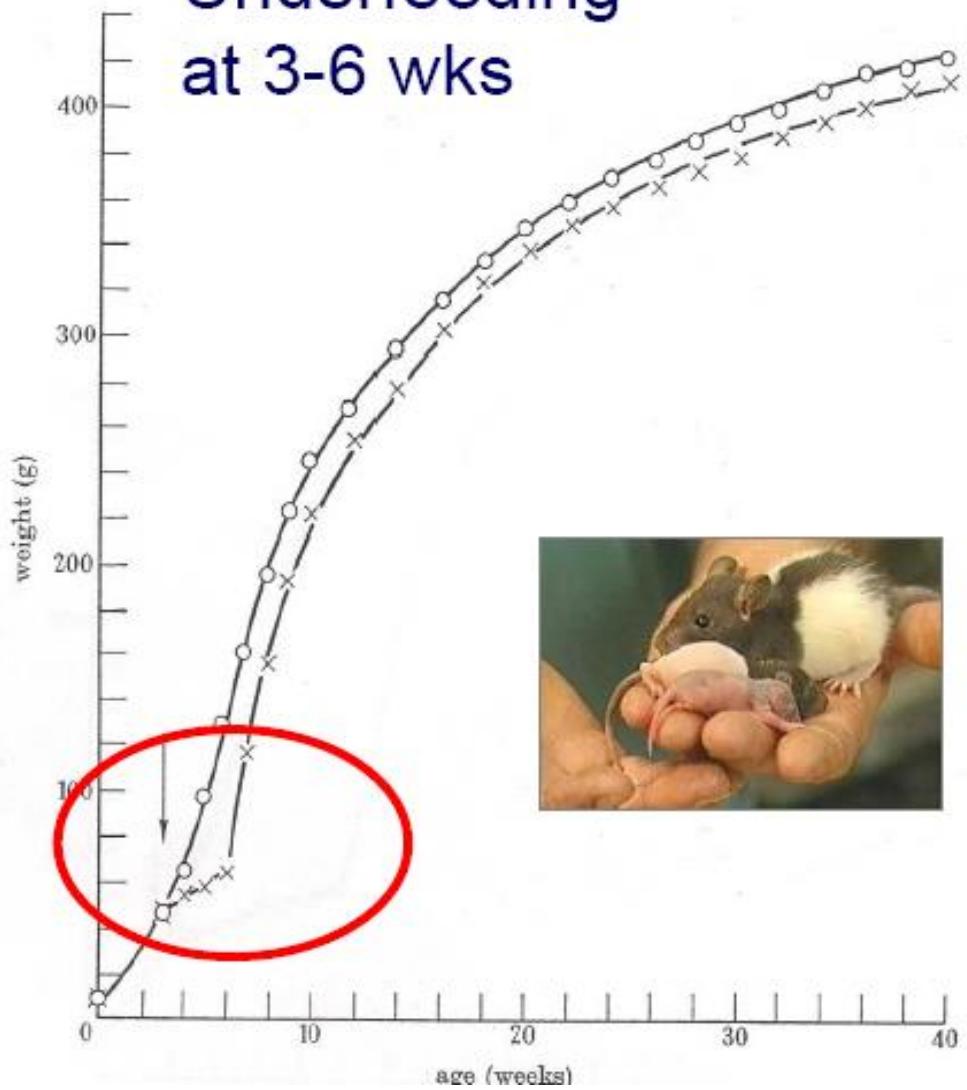


The percentage of women with a BMI > 30 in several countries. USA data also includes BMI > 25 (Catalano, 2006)

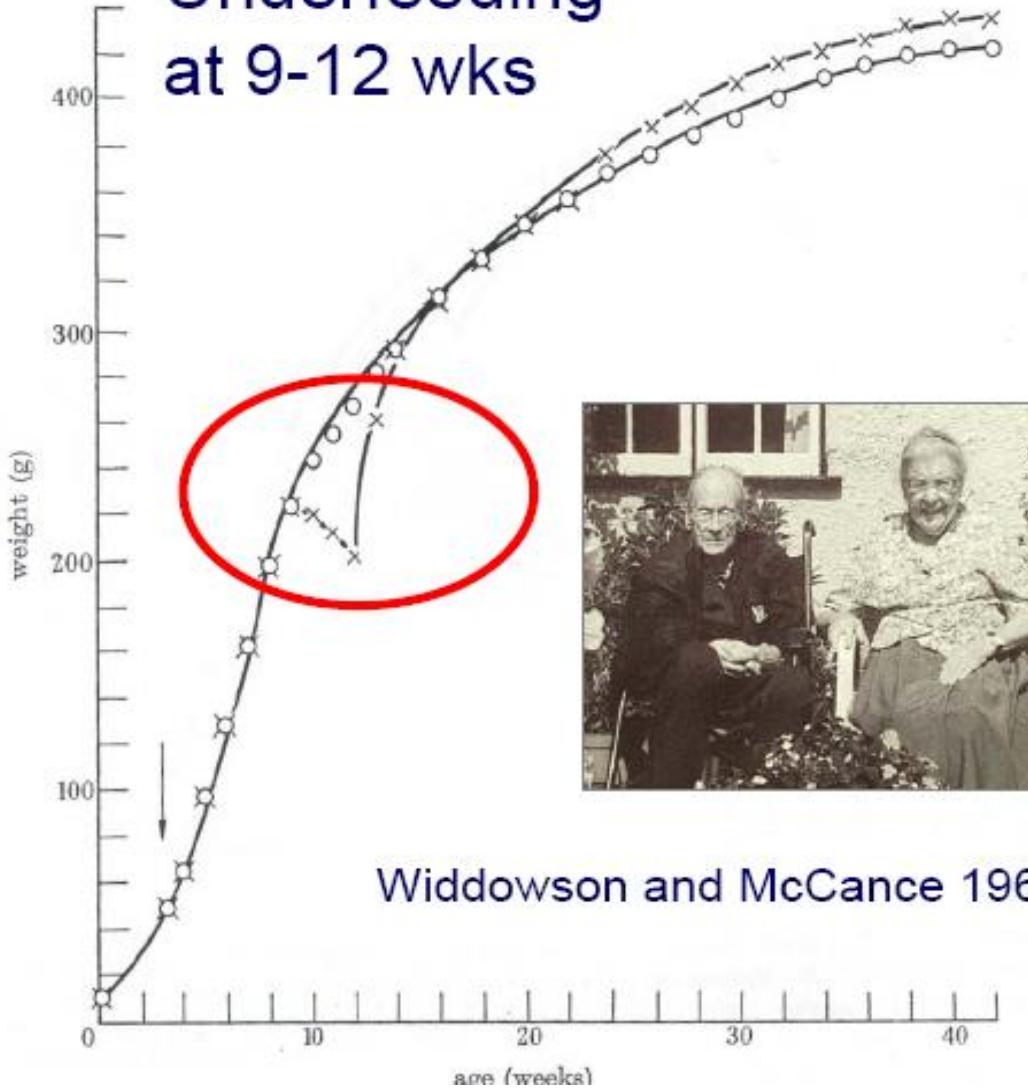
IDF Regions and global projections for the number of people with diabetes (20-79 years), 2010-2030



Underfeeding at 3-6 wks



Underfeeding at 9-12 wks



Widdowson and McCance 1963

❖ La malnutrición en animales durante la vida precoz, y no durante la adultez, determina el tamaño corporal

Elsie Widdowson & MacCance, Cambridge 1970

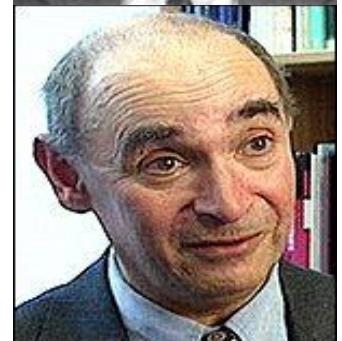


photo: Jan Chladek

❖ Programación (Programming) de las funciones del adulto y de las enfermedades, mediante hormonas, metabolitos y neurotransmisores durante periodos críticos del desarrollo. *Günter Dörner, Berlin, Germany 1974*



❖ Programación mediante la nutrición precoz en el humano
Alan Lucas, Cambridge, UK 1991



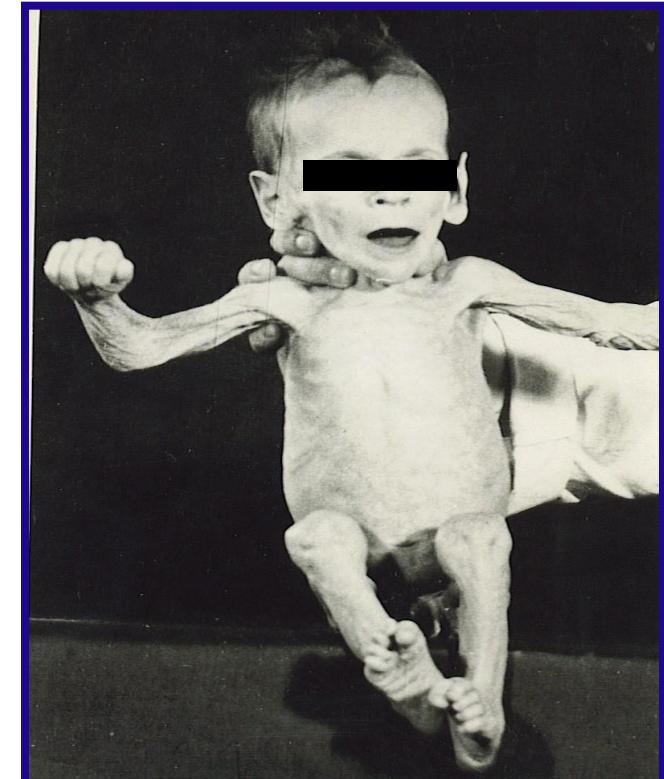
❖ Orígenes del desarrollo de las enfermedades del adulto por malnutrición fetal y bajo peso al nacimiento

David Barker, Nick Hales, Oxford, Southampton, UK 1992





TIPO A



RETRASO de CRECIMIENTO POSTNATAL

CIR SIMÉTRICO

NO SE OBSERVA FENÓMENO DE RECUPERACIÓN

MAL PRONÓSTICO A LARGO PLAZO

↓ Peso al nacimiento ⇒ ↑ índice de mortalidad a los 20-74 años en 10,141 hombres nacidos en Hertfordshire 1911-1930

Barker, 1994

↑ Recién nacidos con bajo peso al nacimiento →
riesgo a largo plazo de enfermedad coronaria

¿Efectos de la malnutrición prenatal?

❖ Pobre crecimiento fetal

- ✓ Hipótesis del origen fetal de las enfermedades del adulto

¿Efectos de la nutrición postnatal?

❖ Efecto compensador con un crecimiento postnatal excesivo

- ✓ Hipótesis de una aceleración del crecimiento postnatal

TIPO B



CIR ASIMÉTRICO



BAJO PESO PARA LA EDAD DE
GESTACIÓN

MALNUTRICIÓN FETAL

SECUELAS a LARGO PLAZO

RETRASO POSTNATAL de CRECIMIENTO

OBESIDAD y CO-MORBILIDADES

HIPERTENSION ARTERIAL DIABETES TIPO II,
ALTERACIONES SISTEMA INMUNE

NEUROLÓGICAS

Parálisis cerebral infantil

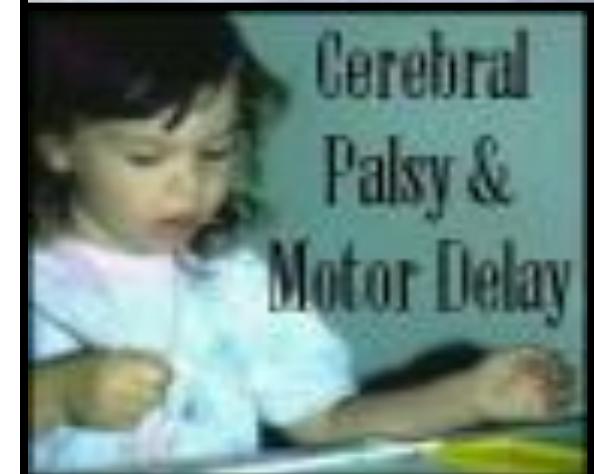
Epilepsia

Disfunción cerebral mínima

PSÍQUICAS

Déficit mental

ANOMALIAS ASOCIADAS A LA CAUSA



Promoting growth – risks and benefits

Preterm Infants

BENEFIT

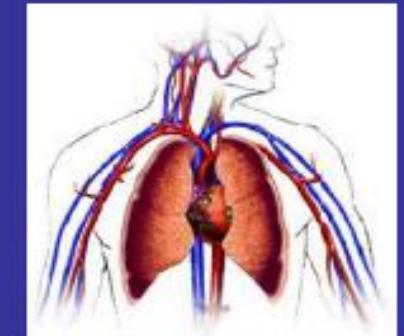
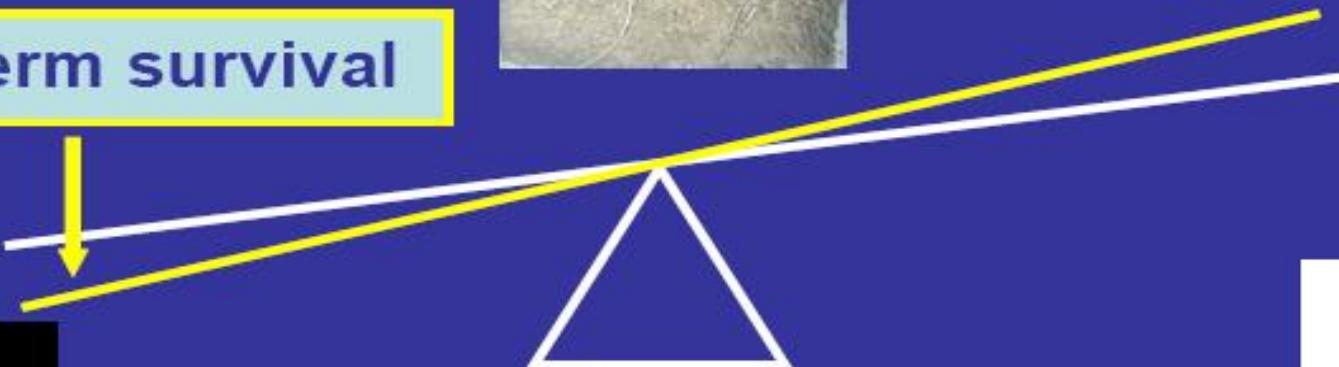
Bone health
Cognitive function

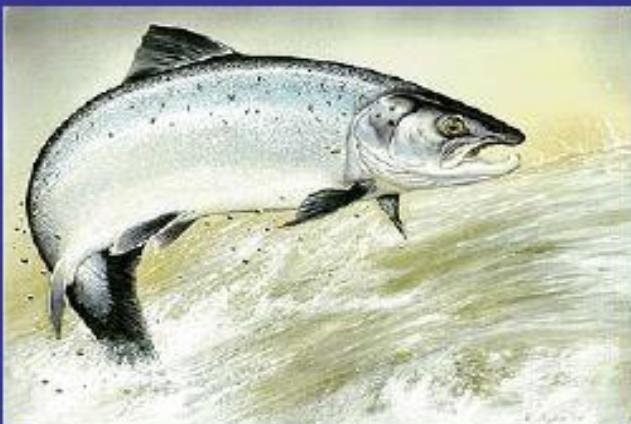
RISK

**Cardiovascular
disease**



Short-term survival

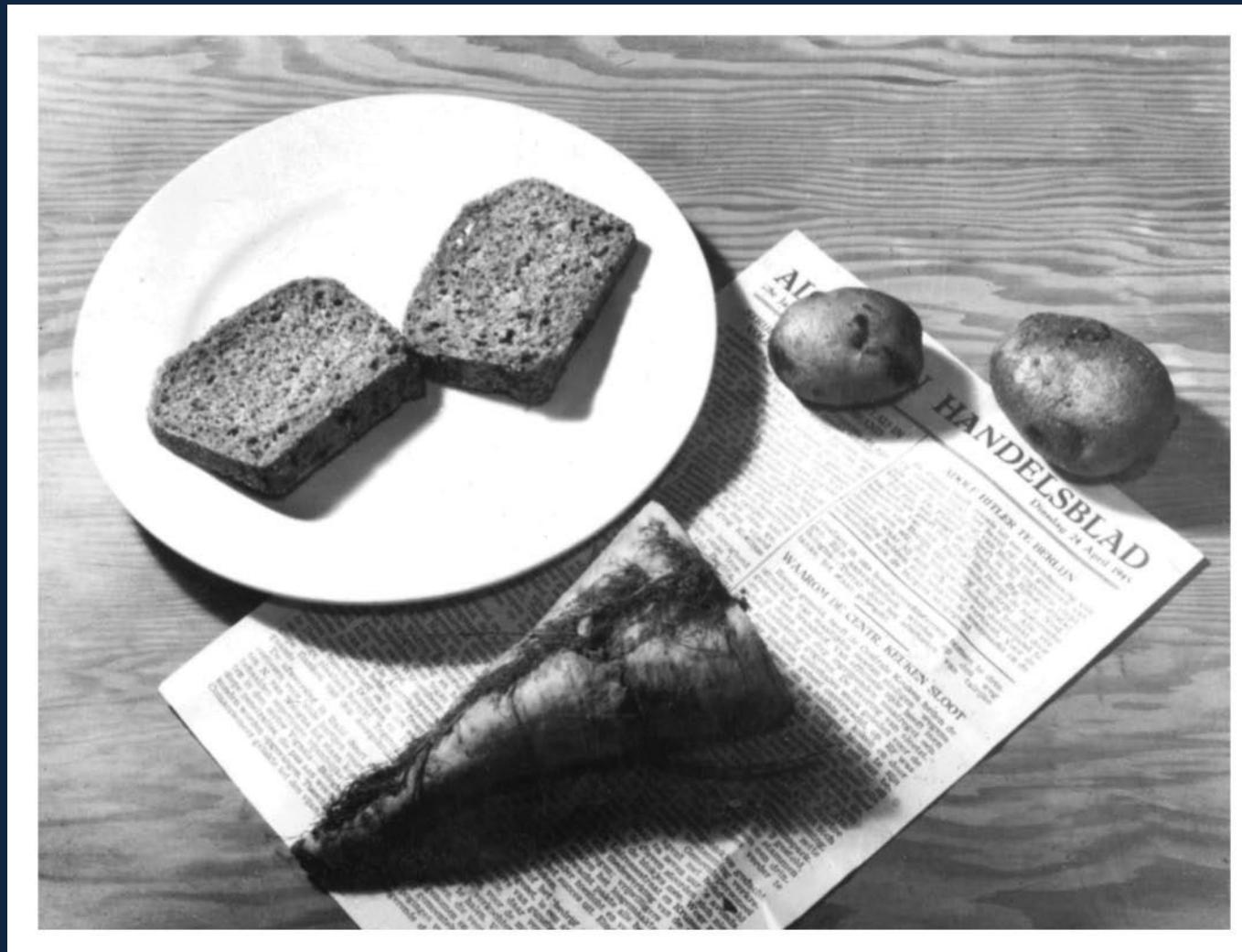




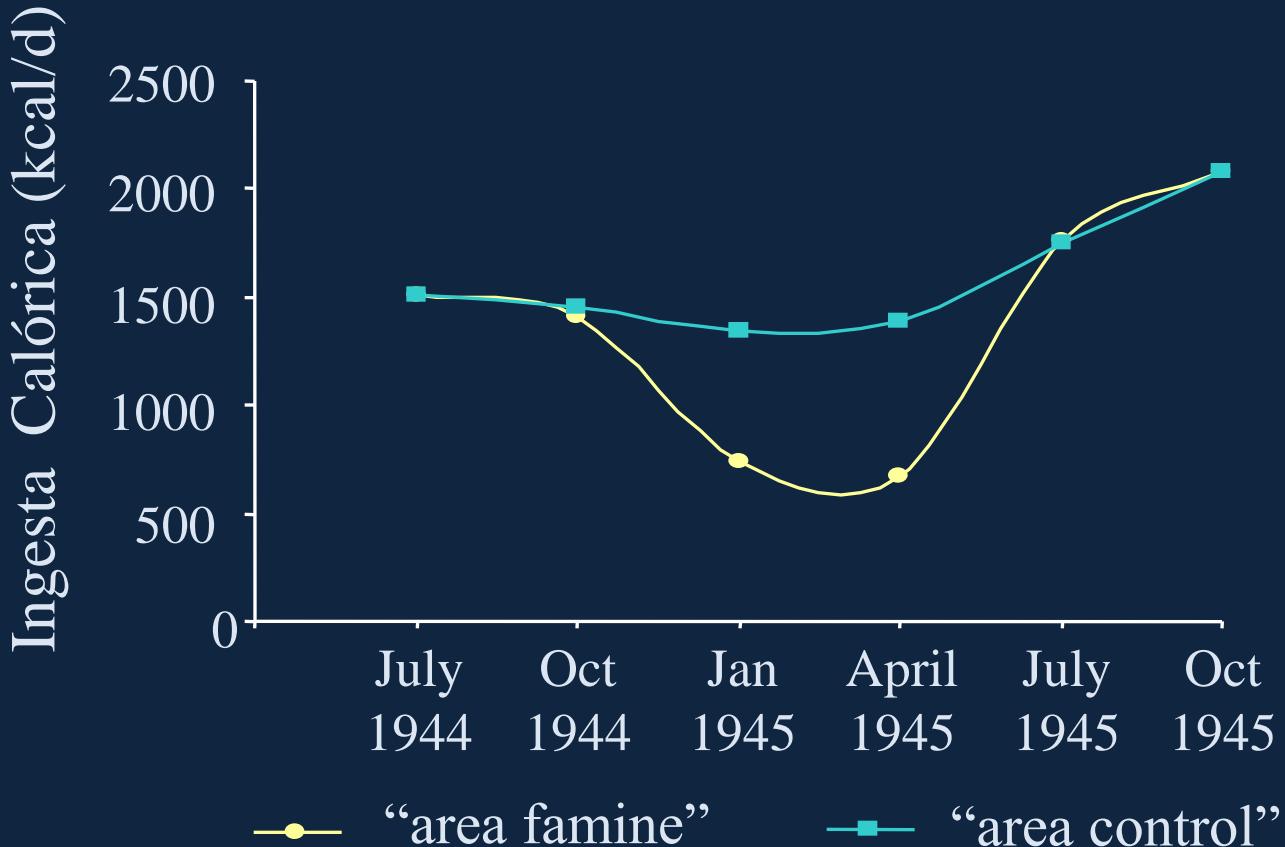
'Grow now – pay later'

Metcalfe
TEE 2001;16:254

Typical diet during the Dutch famine



Estudios en humanos- Estudio Famine 1944-45



Adultos:

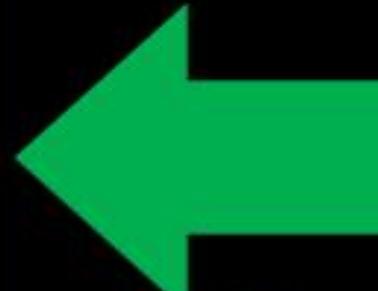


Tiempo de la restricción nutricional

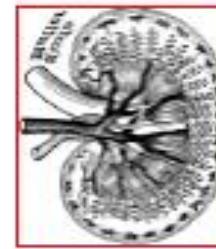
Precoz Mitad Tardía



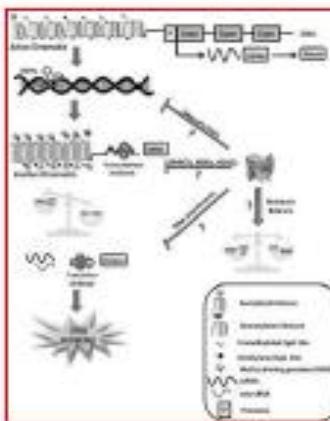
Metabolismo



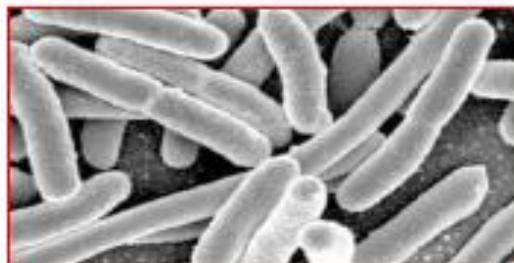
Structural changes



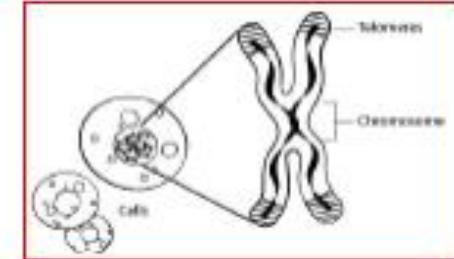
Epigenetics



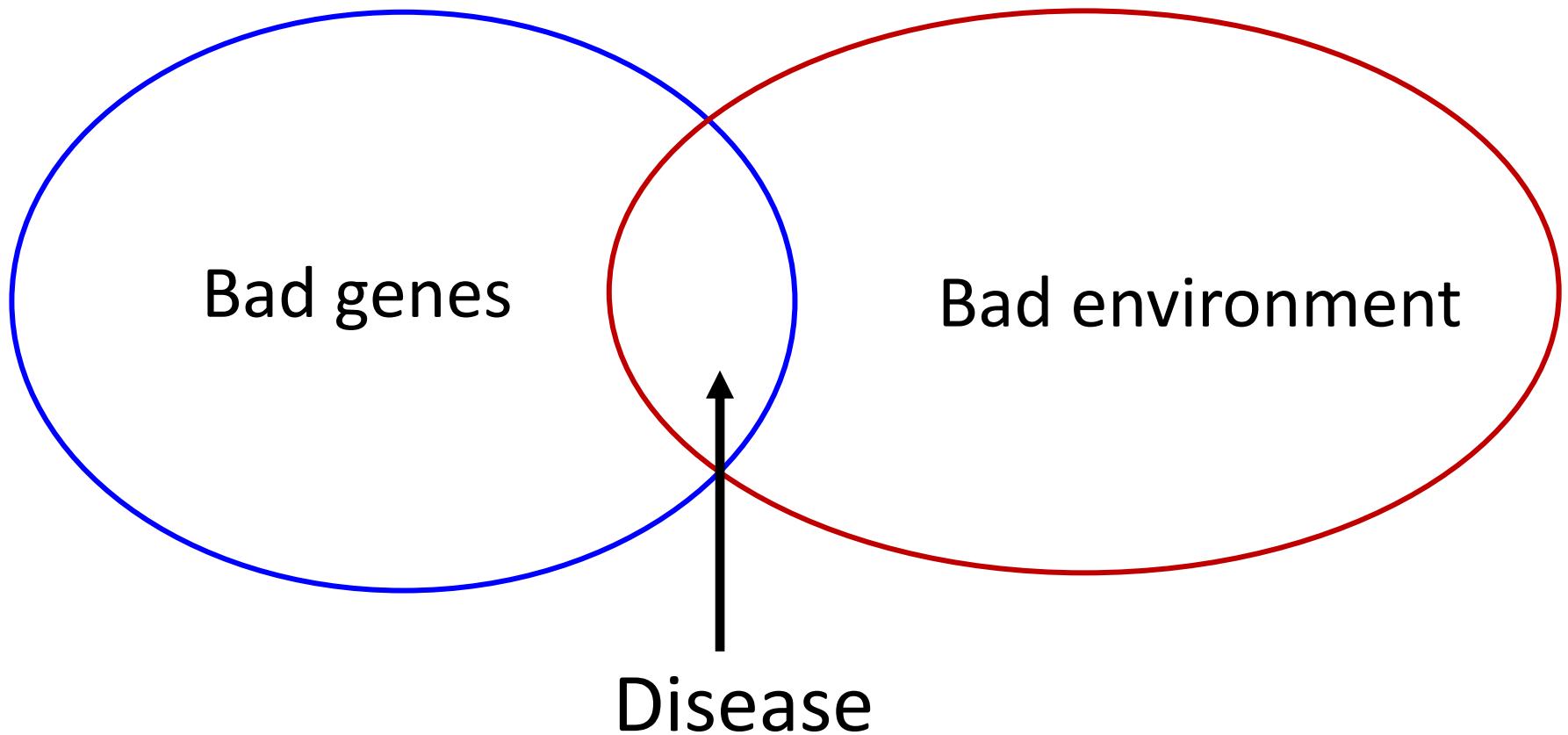
Microbiome



Cellular ageing



Gene: Environment interaction



Potential environmental epigenetic regulators

- animal models

- Maternal care & stress
- Endocrine disruptors
- Folate and micronutrients
- Multiple dietary compounds
- Assisted reproduction
 - superovulation and/or embryo culturing
- Alcohol exposure
- Smoking
- Pollution/heavy metals/particulates
- Many others emerging



Vitamin
B2

Vitamin
B6

Vitamin
B12

Choline

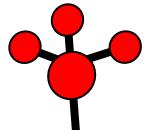
Folate

Diet

one carbon
donors

SAM-e

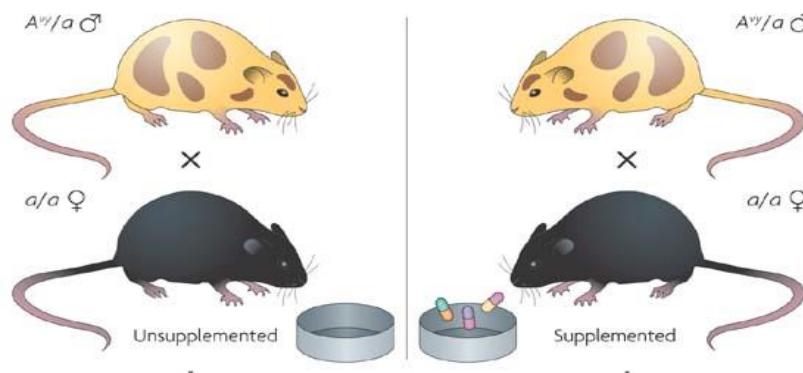
primary methyl donor
in all eukaryotes



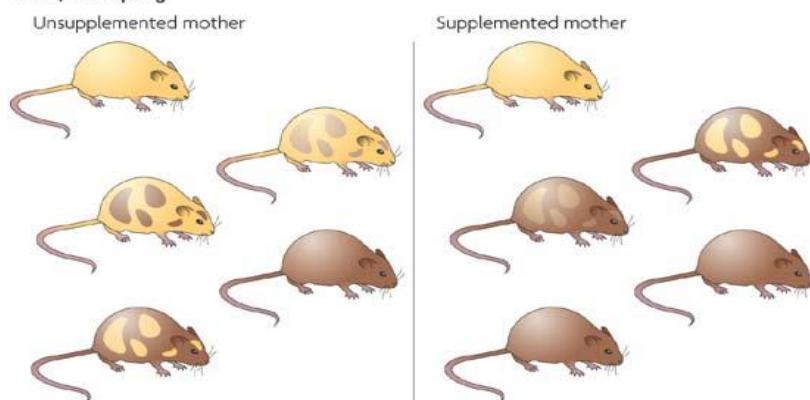
Addition of methyl group to DNA

Maternal diet and the neonatal epigenome – a focus on folate

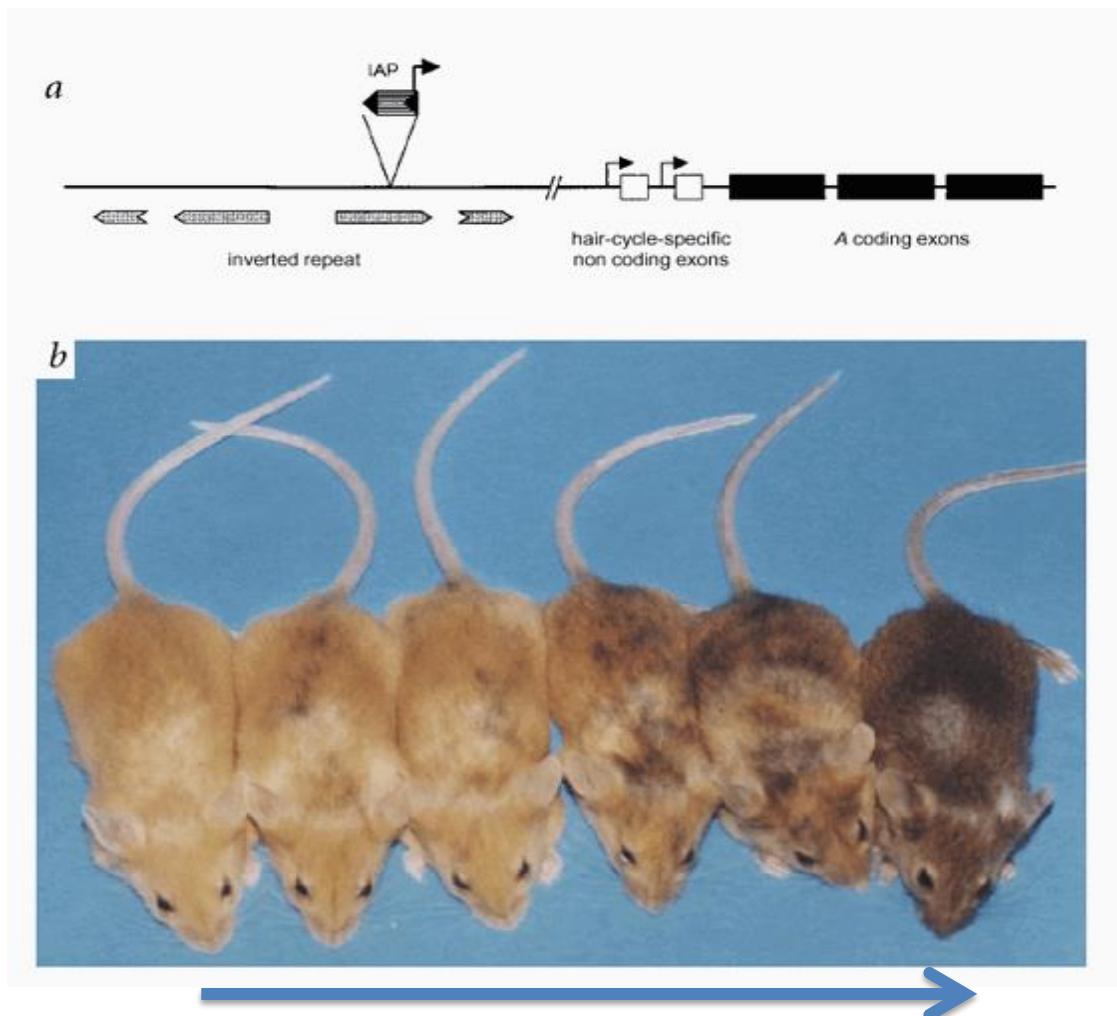
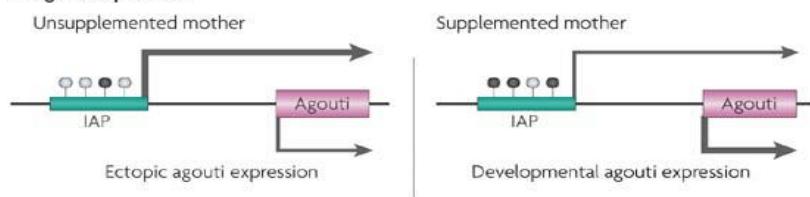
a Dietary supplementation during pregnancy



b $A^{y/y}$ / a offspring



c Agouti expression



Increasing dietary methyl donors

Wolff GL, et al. FASEB J. 1998; 12: 950

Environment Special:
The oceans – why 70%
of our planet is in danger

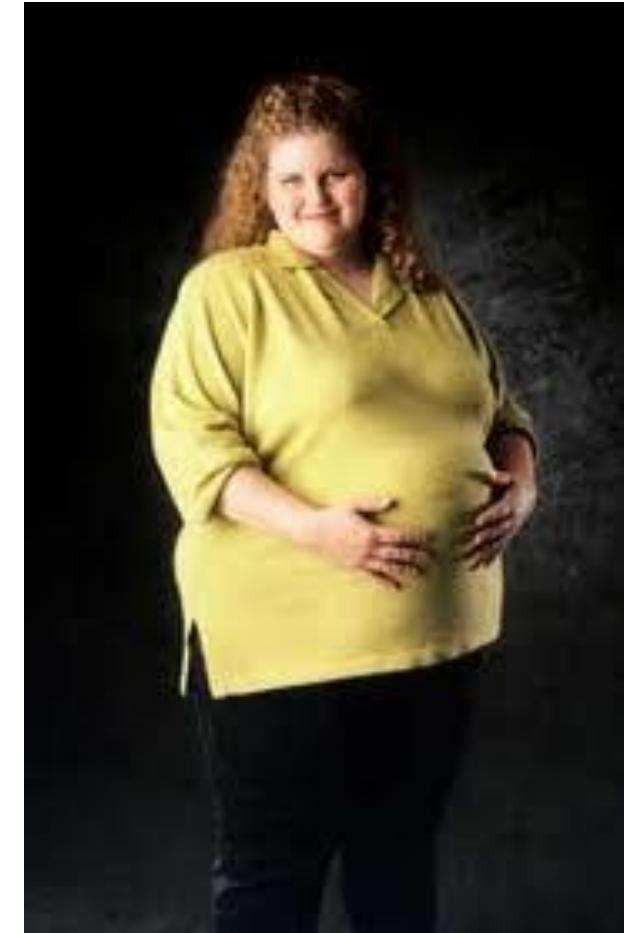
The Facebook Moment
The secret history of
social networking

**How the
first nine
months
shape
the rest
of your life**

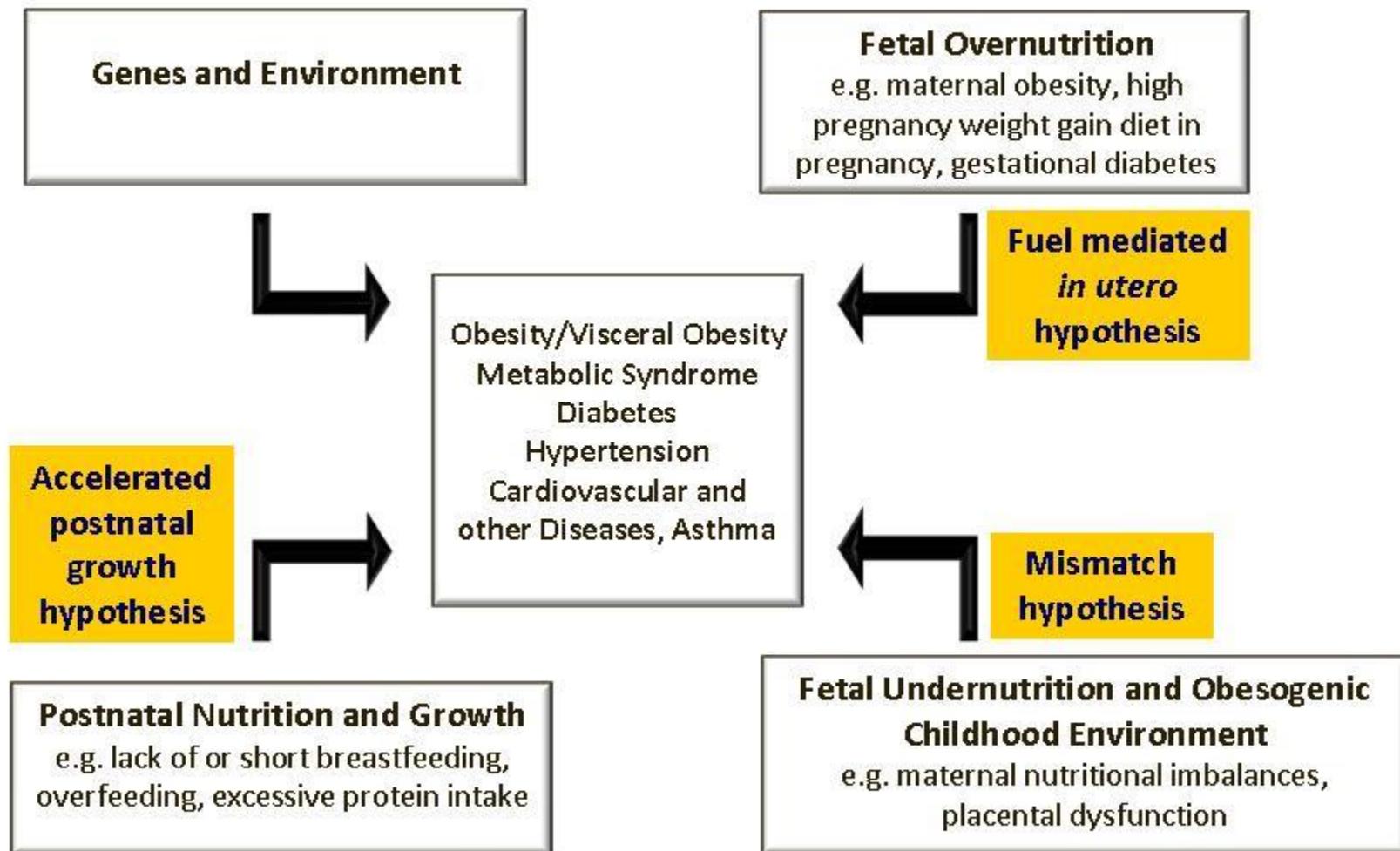
The new science
of fetal origins
BY ANNE MURPHY PAUL



Programación Metabólica Precoz

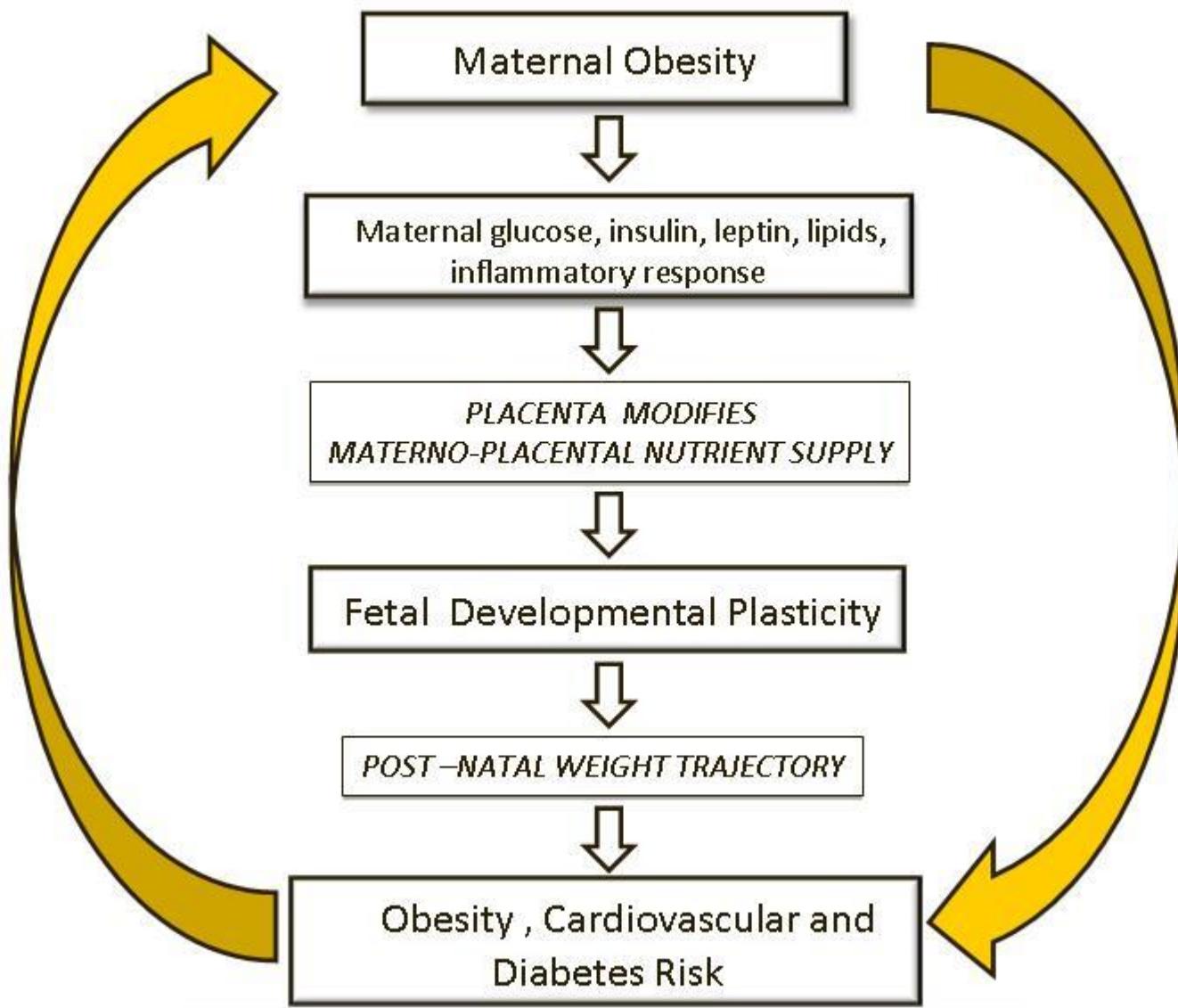


Key Hypotheses

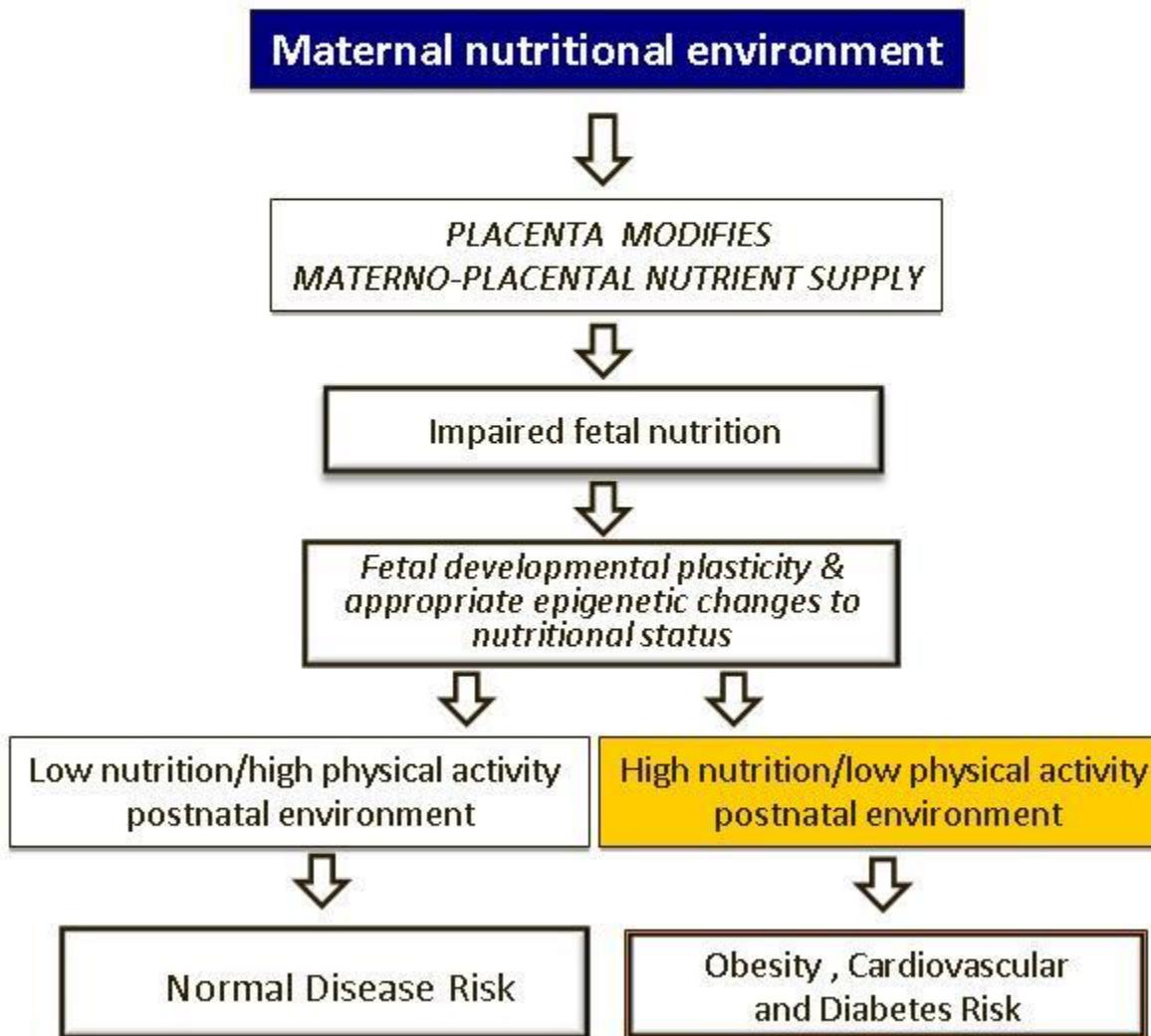


modified from Koletzko et al, Am J Clin Nutr, 2011 Dec;94(6):2036S-2043S.

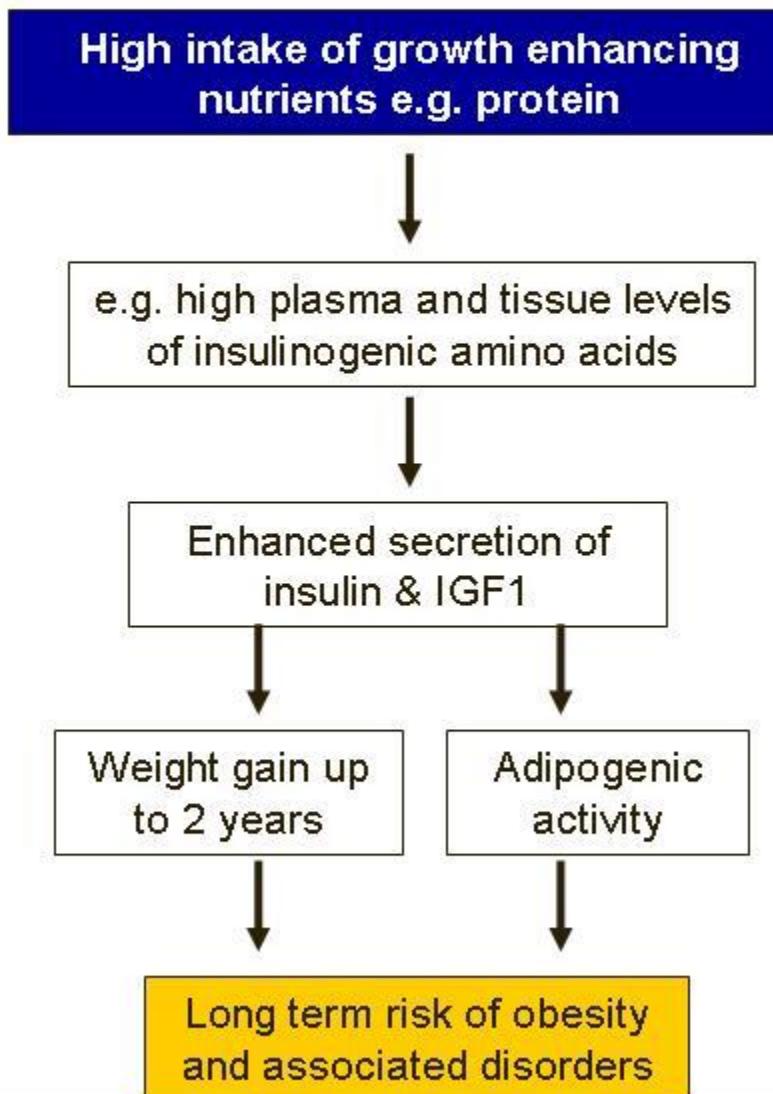
Transgenerational Circle of Obesity



Mismatch between pre- and postnatal Environment

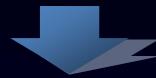


Postnatal accelerated Weight Gain



Consecuencias a largo plazo de un ambiente nutricional “materno-fetal-postnatal” subóptimo (Nature Reviews Endocrinology; Symonds et al 2009)

Malnutrición Materna, Diabetes Gestacional, Obesidad Materna

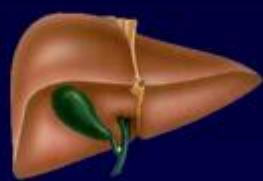


Síndrome Metabólico

Alteración homeostasis glucosa, metabolismo lipídico, biogénesis mitocondrial



ER stress
Hipertrofia



Infiltración Lipídica



Resistencia a la Leptina



Alteraciones
homeostasis glucosa



Infiltración
Lipídica



Resistencia Insulina
Obesidad



Enf. Cardiovasculares
Esteatosis



Desórdenes ingesta
Obesidad



Resistencia Insulina
Diabetes Tipo II

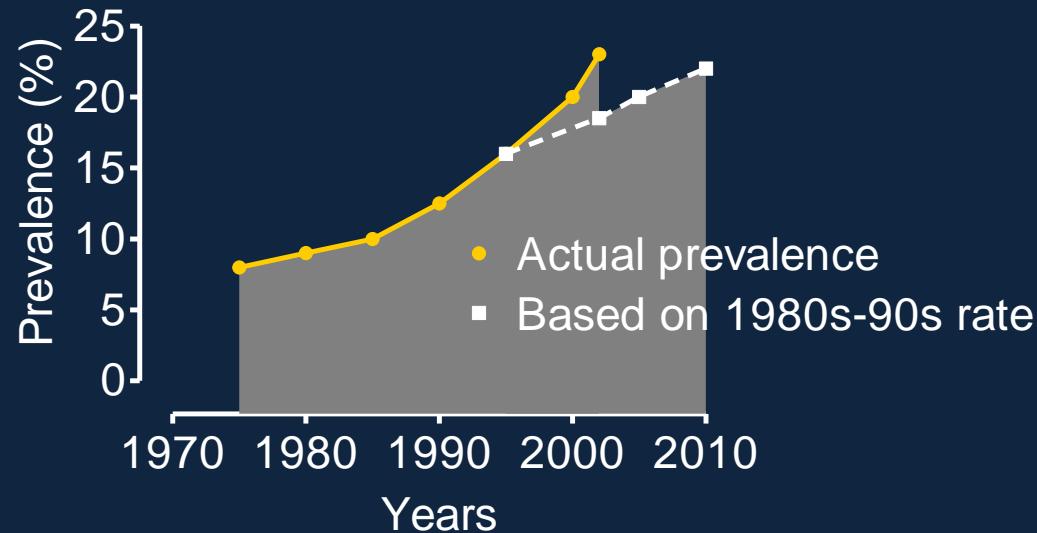
“La oportunidad de optimizar la nutrición en la vida precoz”

Acelerada sin control

EU: 14 M sobrepeso, 3 M obesos

Epidemia mundial:

145 M sobrepeso, 30-45 M obesos



La diabetes tipo II se está produciendo en niños y adolescentes

Hace unos años era una patología propia de individuos por encima de los 50 años!

Causas de la obesidad

- Las “2 más importantes” – exceso de ingesta energética/ reducción del gasto energético
- Las “otras 10” – incluyendo: aumento de la edad materna, aumento de la temperatura ambiental, reducción de los fumadores, aumento del uso de antidepresivos, etc.

Keith *et al* (2006) Int J Obesity 30, 1585-1594



Mother obesity/diabetes determines pathologic phenomena in the mothers and their offspring



MOTHERS

Mortality (*Venous thrombo-embolism,...*)

Morbidity (*Gestational diabetes, pre-eclampsia,...*)

Anesthetic complications

Perinatal complications (*Caesarean section, Haemorrhage,...*)



FETUS & NEONATE

Congenital Defects

Perinatal Death

Placental dysfunction

Still birth

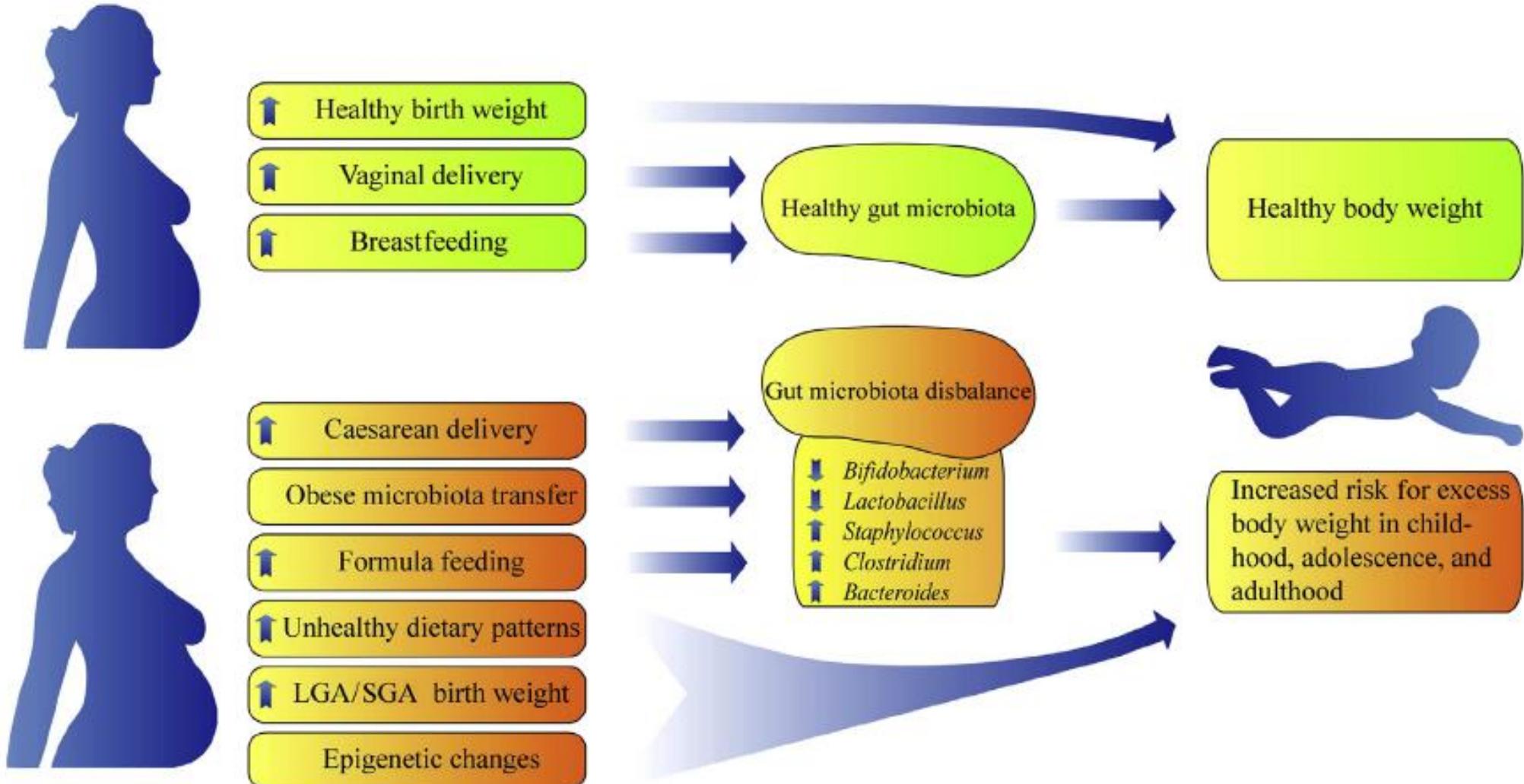
IUGR

Macrosomia

Shoulder dystocia

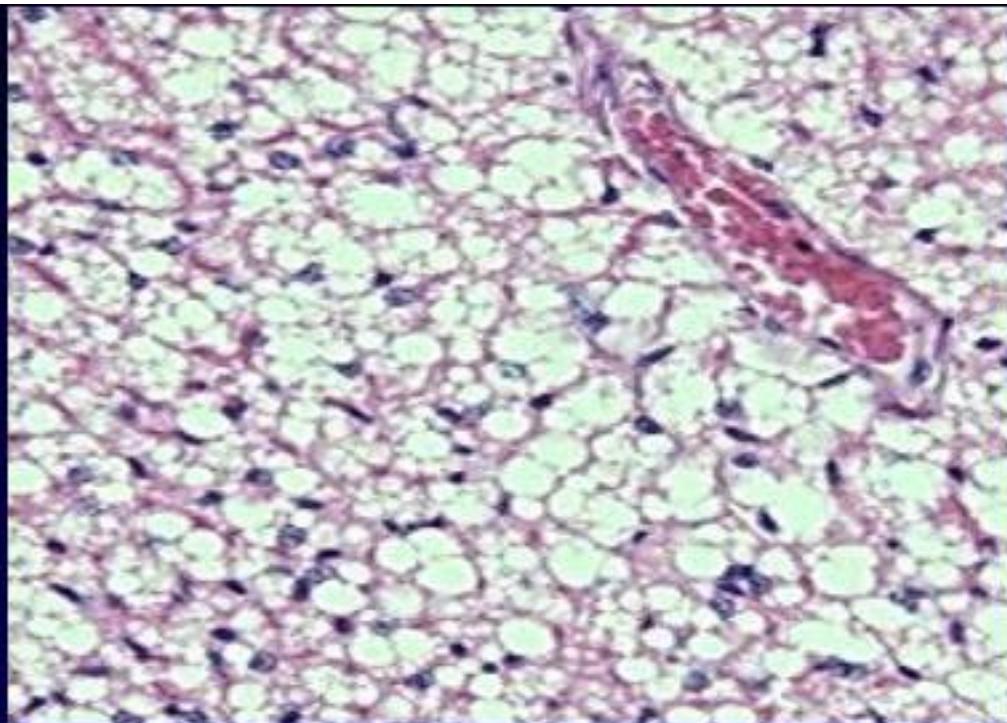


Potential links between mother excess body weight (EBW) during and after pregnancy and elevated risk of EBW in her offspring.

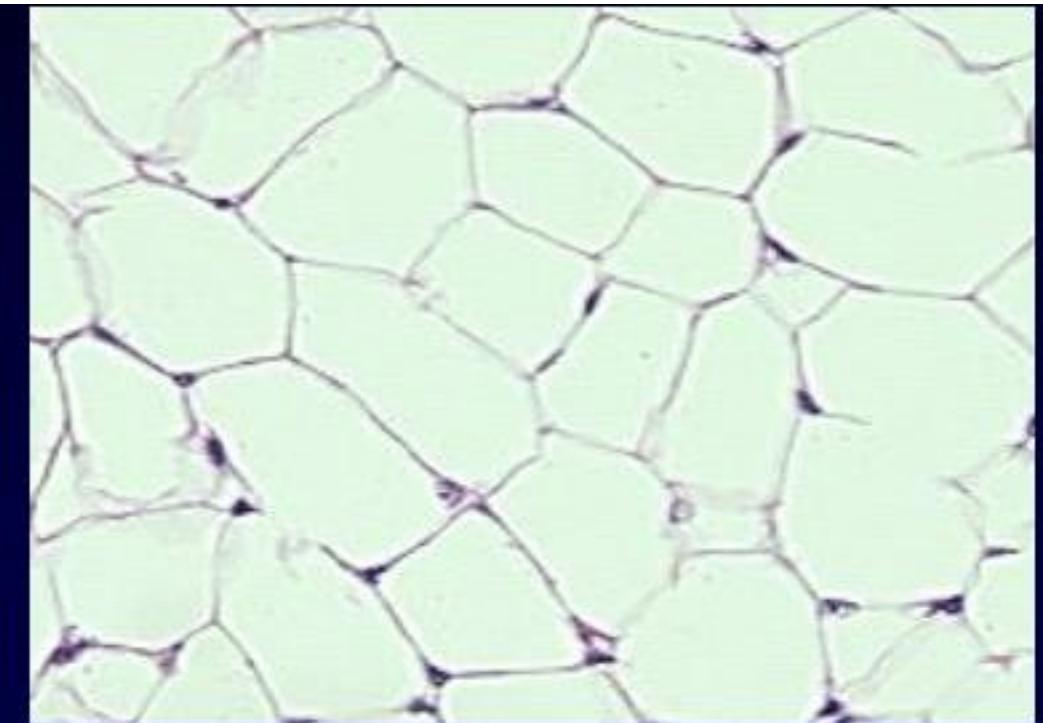


Adipose tissue composition

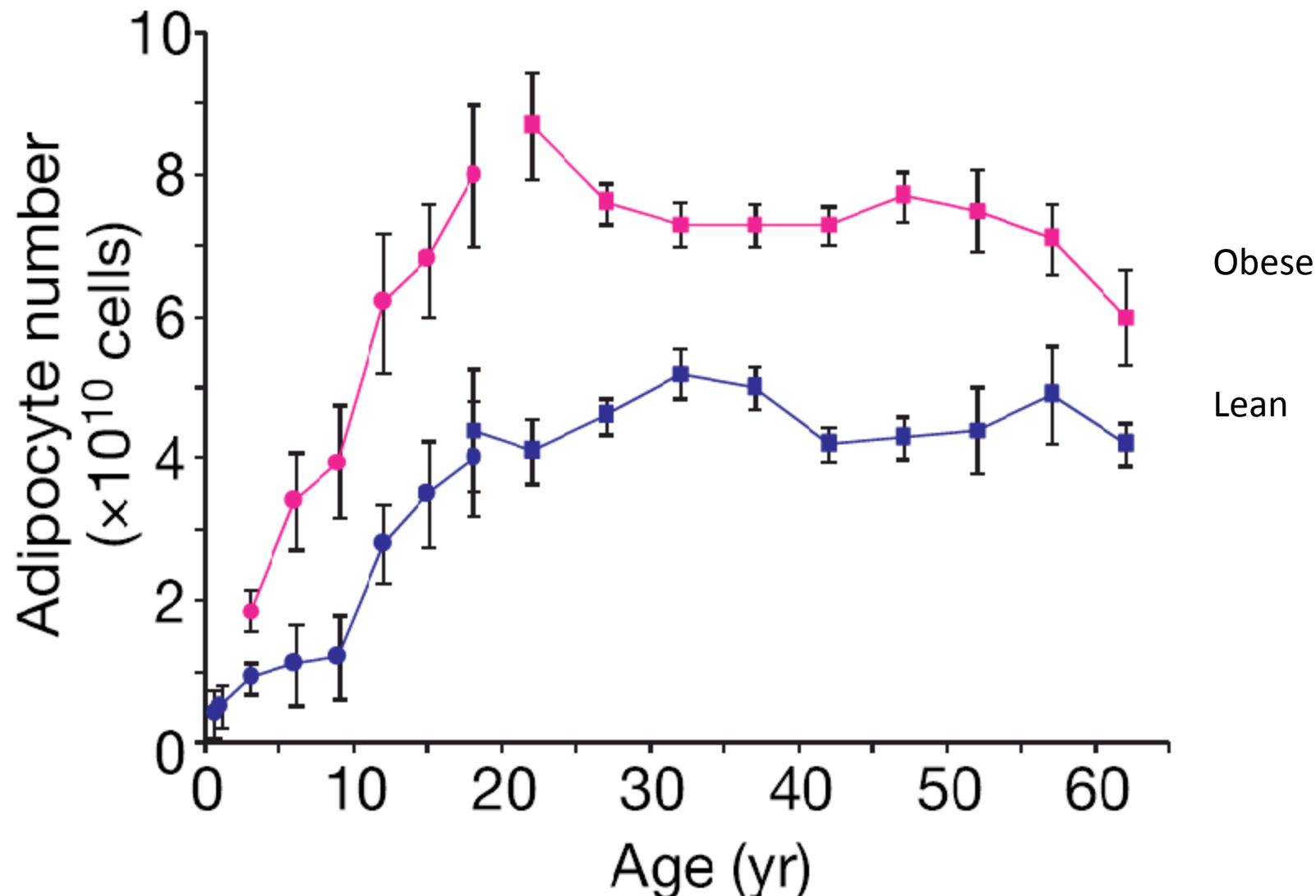
Brown adipose tissue



White adipose tissue



Fat cell number through the life cycle



\uparrow Birthweight \rightarrow \uparrow adult BMI in Danish conscripts aged 18-26 years

Adjusted for gestational age, birth length, maternal factors
Sorensen et al., BMJ 1997.



PERIODOS CRITICOS DE RIESGO DE OBESIDAD

**ETAPA FETAL DE
DESARROLLO DEL
TEJIDO ADIPOSO**

**14% DE LOS LACTANTES
CON SOBREPESO SERÁN
ADULTOS OBESOS**

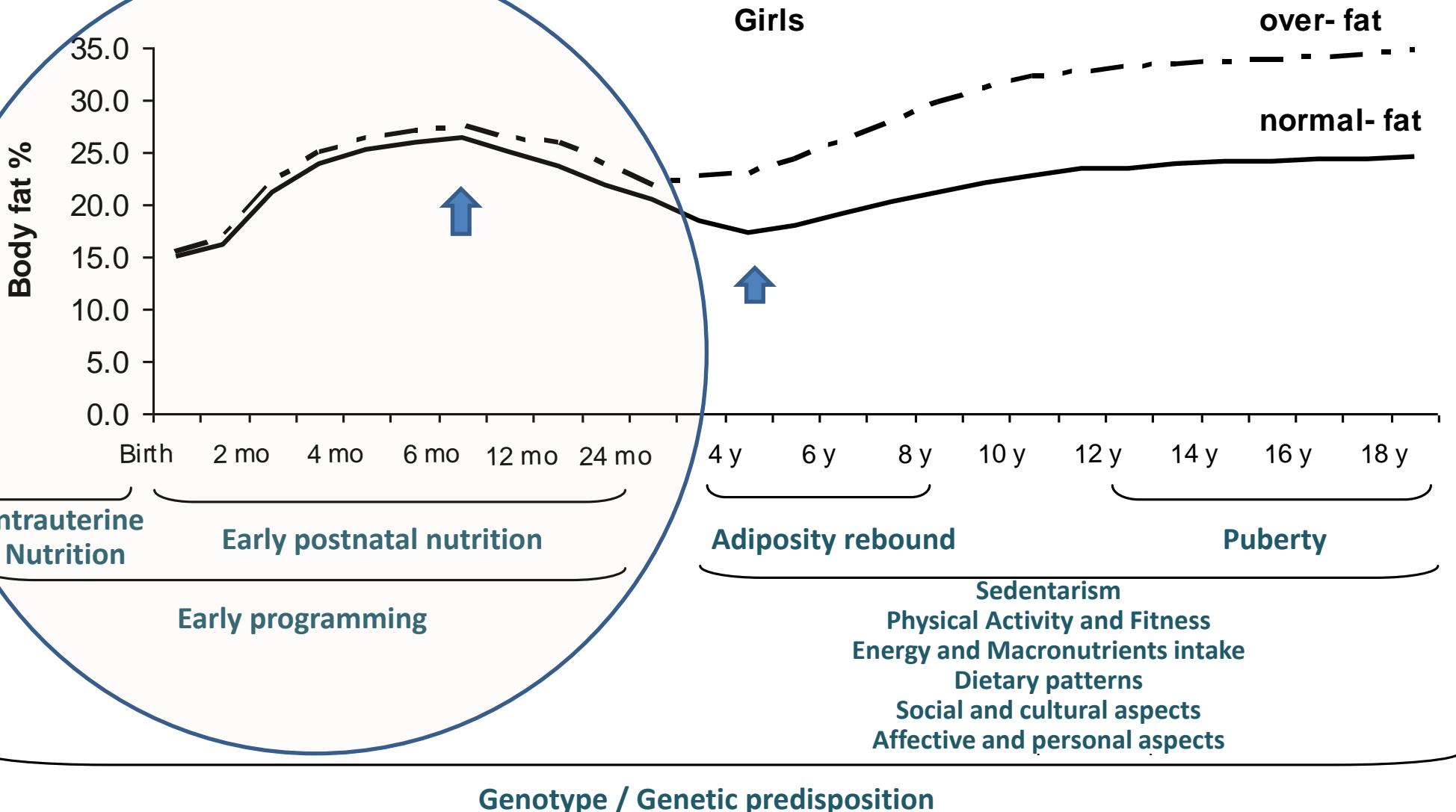
**40% DE LOS NIÑOS
OBESOS A LOS 6-7 AÑOS
SERÁN ADULTOS OBESOS**

**60% DE LOS ESCOLARES
PREPUBERES OBESOS
SERÁN ADULTOS OBESOS**

**80% DE LOS
ADOLESCENTES OBESOS
SERÁN ADULTOS OBESOS**



Factors influencing obesity development along childhood

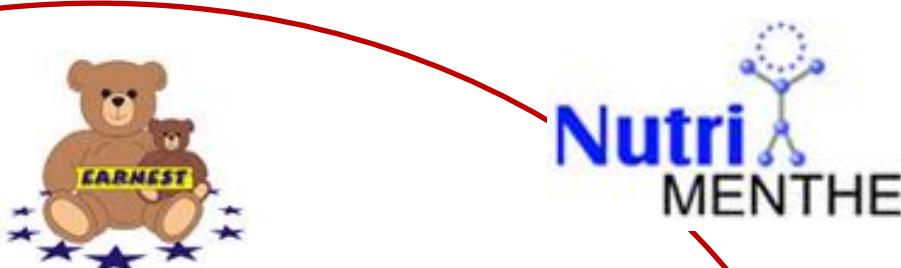




- Nutraceuticals for a healthier life -



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Cohort studies analyzing epigenetic influences and the persistence of such signatures

GUSTO study (Asia)

Danish Cohort

Early Nutrition Project (Europe)

Nutritional intervention studies in obese pregnant women

Limit Trial (Australia)

Upbeat Study (UK)

Nigo-Health (Spain)

Rolo Study (Ireland)

>470.000 pregnant women and their offspring



EARLY NUTRITION

- Evidence that **diet and lifestyle modifications during pregnancy** can reduce the increased risk of obesity in offspring of obese pregnant women helping to break an intergenerational cycle of obesity and related disorders.
- Evidence that **excessive weight gain in pregnancy and/or rapid early infant weight gain** leads to later obesity will help to formulate policies to reverse the increasing rates of childhood obesity and co-morbidities.
- Evidence that **dietary modifications in infancy**, in particular relating to breastfeeding and complementary feeding practices, as well as novel compositional approaches to infant formula, can reduce the risk of obesity and related disorders in offspring.

Nutrición Precoz: 10 recomendaciones para la planificación familiar

EarlyNutrition Priority Recommendations

**Preconcepción, Embarazo,
Lactancia al pecho & Lactante**



Project No. 289346



EARLYNUTRITION
Long-term effects of early nutrition on later health

www.project-earlynutrition.eu/recommendations



*A healthy weight
before conception
gives your baby the
best possible chance
of lifelong health!*



EARLY NUTRITION

Long-term effects of early nutrition on later health
www.project-earlynutrition.eu/recommendations



Project No. 289346



*Don't eat for two, but think for two!
Eat a healthy diet and only
increase your dietary energy intake
in late pregnancy by no more
than 10 %, which is about
180 – 200 calories.*



EARLY NUTRITION

Long-term effects of early nutrition on later health
www.project-earlynutrition.eu/recommendations



Project No. 289346



Project No. 289346



*Breastfeeding women
should eat a balanced diet!*



EARLY NUTRITION

Long-term effects of early nutrition on later health
www.project-earlynutrition.eu/recommendations



*No cow's milk
in the first year
of life!*



EARLYNUTRITION

Long-term effects of early nutrition on later health
www.project-earlynutrition.eu/recommendations



Project No. 289346



- 5000 students all over the world
- In English, and translated into Chinese and Arabian, and comming in Spanish!



Early programming of gut microbiota-brain axis

Cristina Campoy, Prof. MD.

Department of Paediatrics. School of Medicine

EURISTIKOS Excellence Centre for Paediatric Research

Institute of Neurosciences. Health Sciences Technological Park

University of Granada. Spain

3rd Annual meeting of the MyNewGut project

22-23 August 2017, Cork, Ireland

Grant Agreement no: 613979

www.mynewgut.eu



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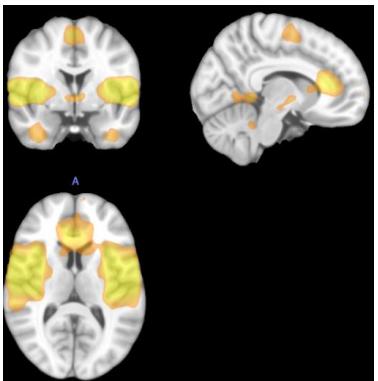
EURISTIKOS
CENTRO DE EXCELENCIA DE INVESTIGACIÓN PEDIÁTRICA

cimcyc

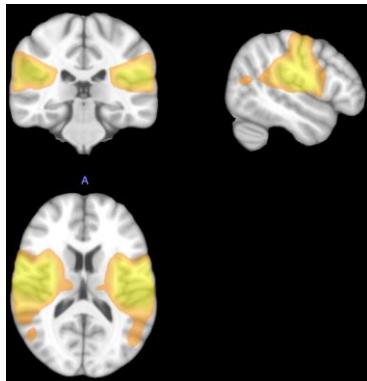


www.mynewgut.eu

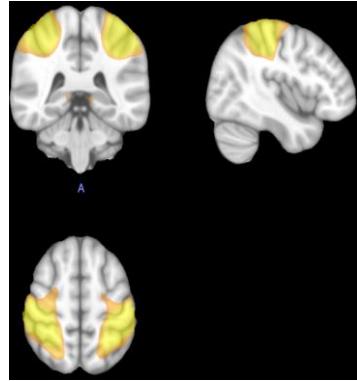
Brain Networks Studied



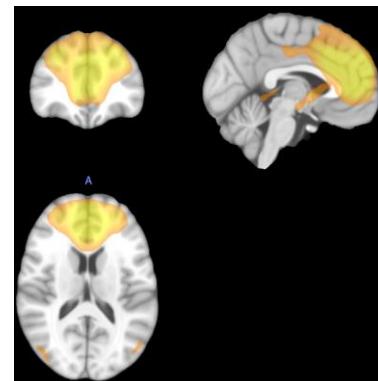
**Salience Network
(Attention)**



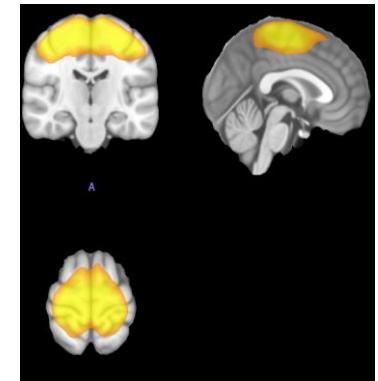
Auditory Network



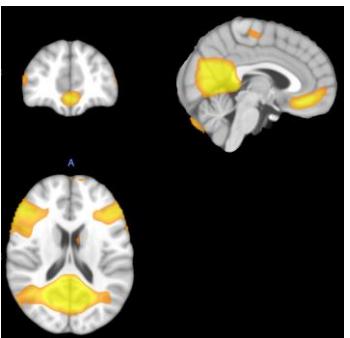
**Somatosensorial
Network**



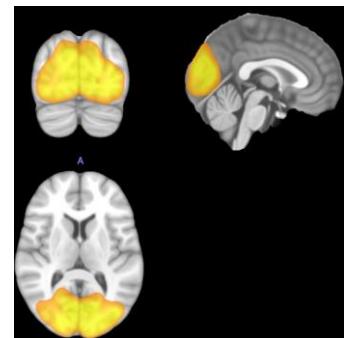
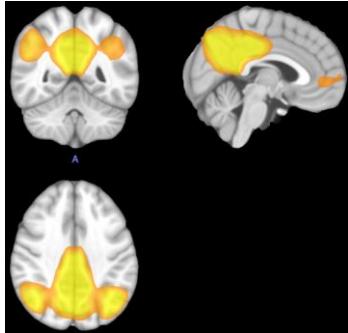
**Executive Control
Network**



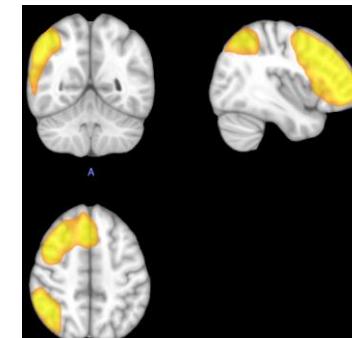
**Motor Network: Motor
Coordination**



Default Mode Network: Ventral Area
(left) **Dorsal Area** (right). Responsible of the brain activity when mind is in resting state

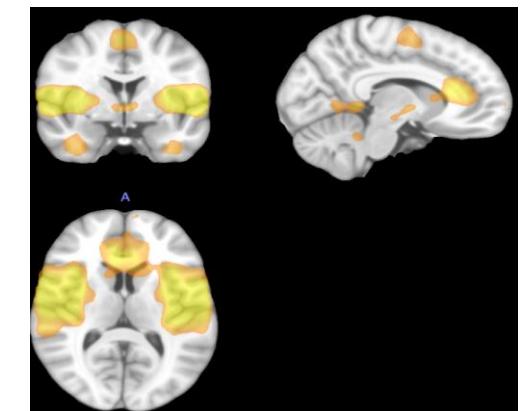
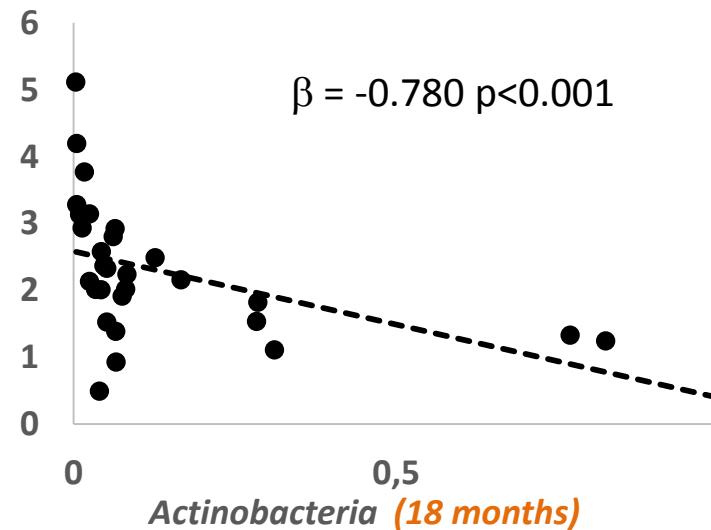
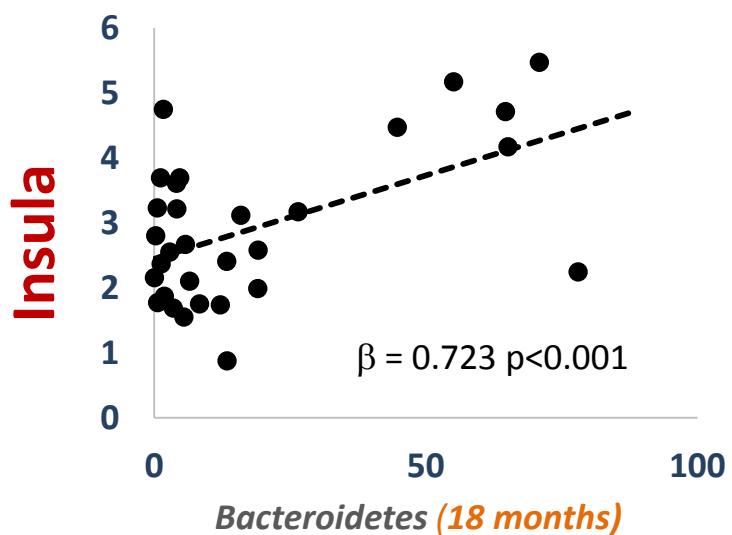
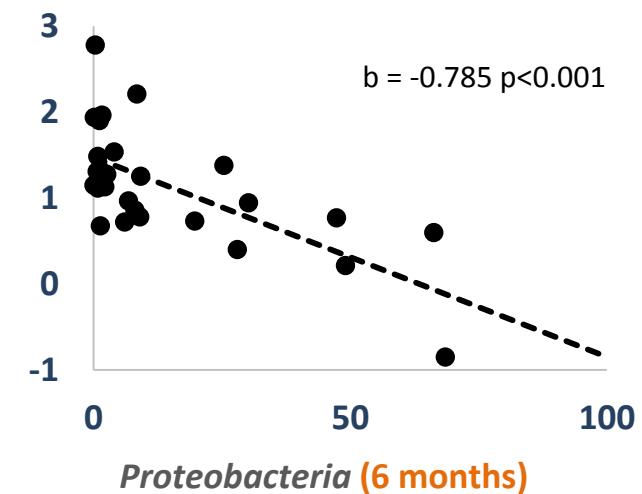
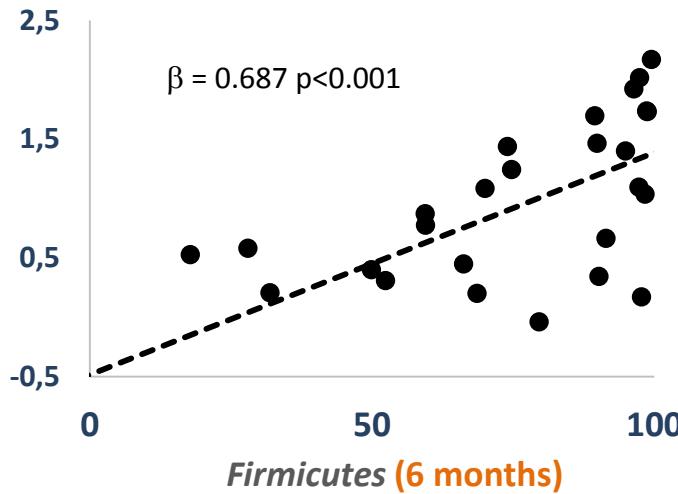
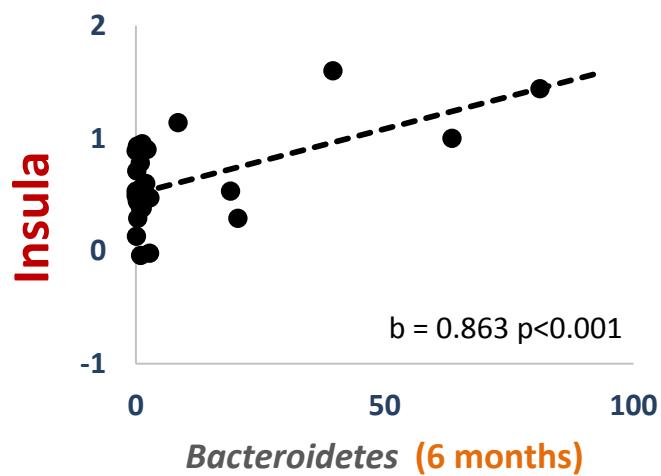


Visual Network

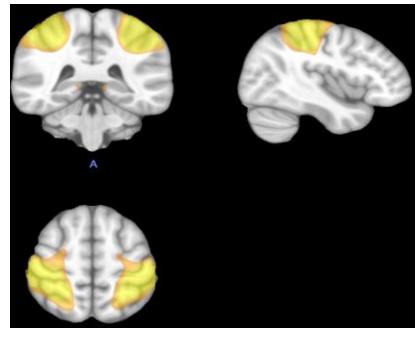


**Fronto-Parietal Attention Network (left
and right)**

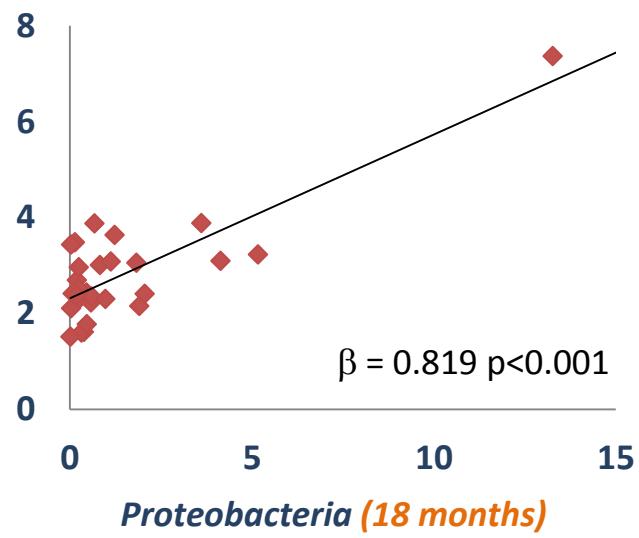
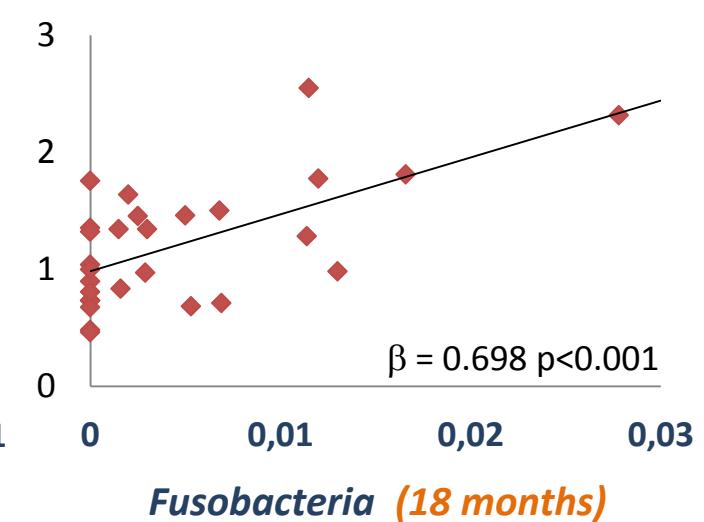
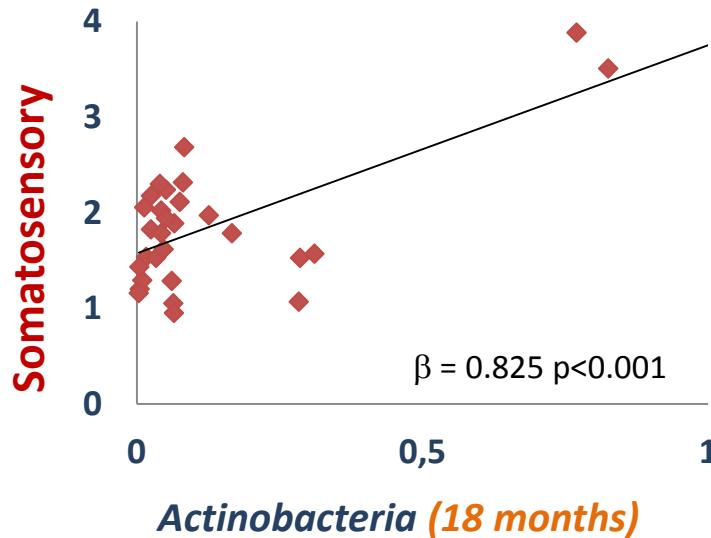
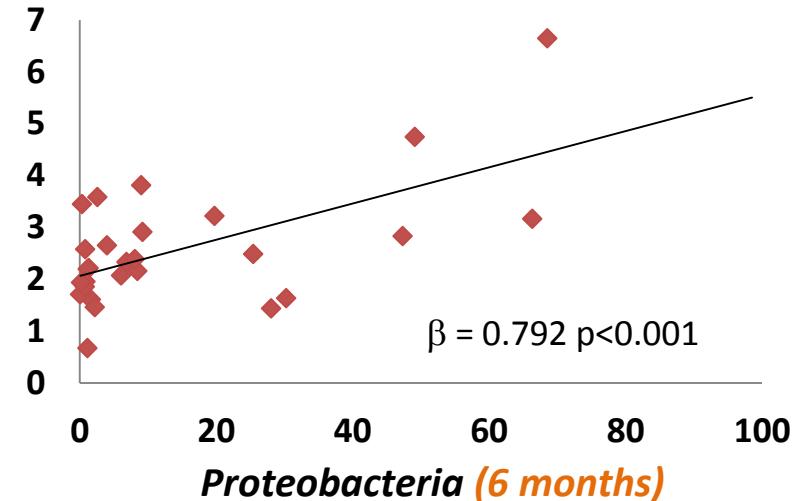
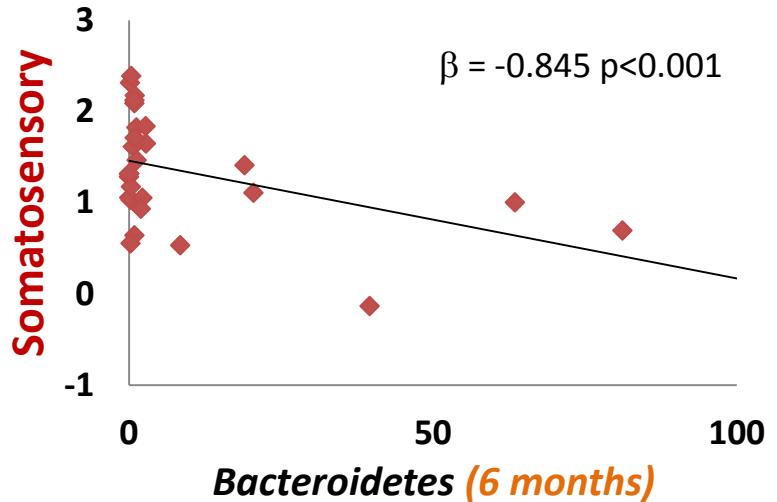
Salience Network (6.5 yrs)

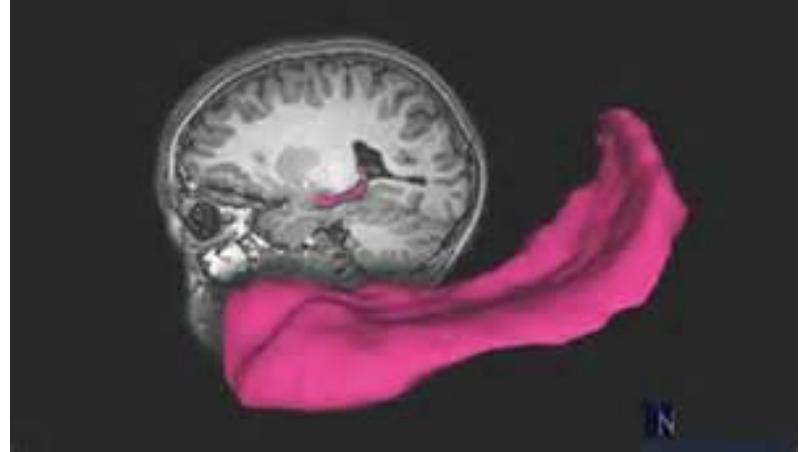


Somatosensorial Network (6.5 yrs)



XPREOBE Follow up



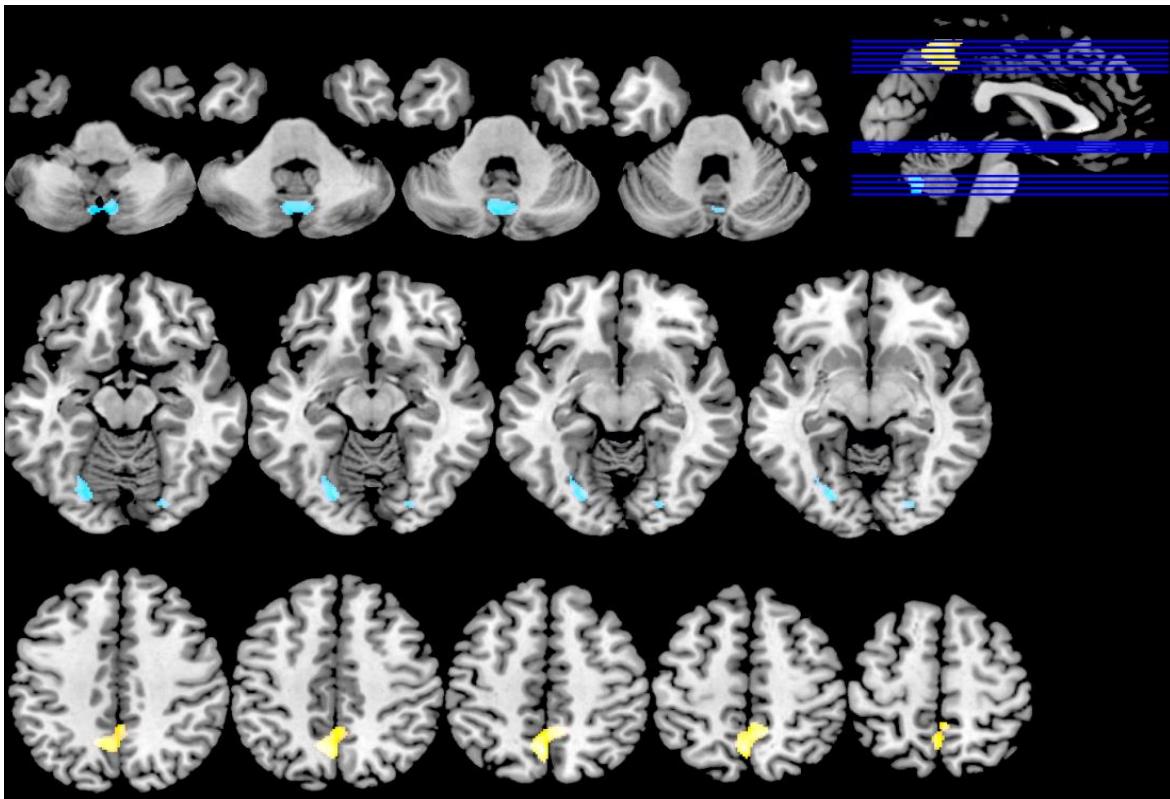


Children brain volumes as a function of Maternal Obesity



VBM results

- Obesity vs. Normal weight



Children born to Normal Weight Mothers showed **larger volumes** than those born to Obese pregnant mothers in a cluster that peaks at the *left Precuneus*, embracing also part of the *right Precuneus* and a small part of *Left Mid Cingulate*

The Obesity group had **larger volumes** in cluster speaking at the *left Fusiform* and *Lingual Gyrus*, and parts of the *left and right cerebellum*.

VBM results

- **Precuneus:**
 - **Restraint eaters** have reduced *Precuneus* vol. (Joos et al., 2011, van der Laan et al. 2016).
 - It is linked to **altered functional connectivity in obeses** (Kullman et al., 2012).
 - It has been involved in *episodic memory retrieval*, *self-awareness*, and *visuo-spatial imagery* (Cavanna & Trimble, 2006).
- **Cerebellum:**
 - **Obese people** (Pannacciulli et al., 2006) and **restraint eaters** have *reduced Cerebellar volumes*, that seem to recover after psychological interventions (Eynde, et al. 2012).
 - It has a role in **feeding and emotion regulation** (Amianto et al., 2013).

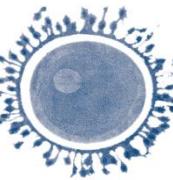


VBM results

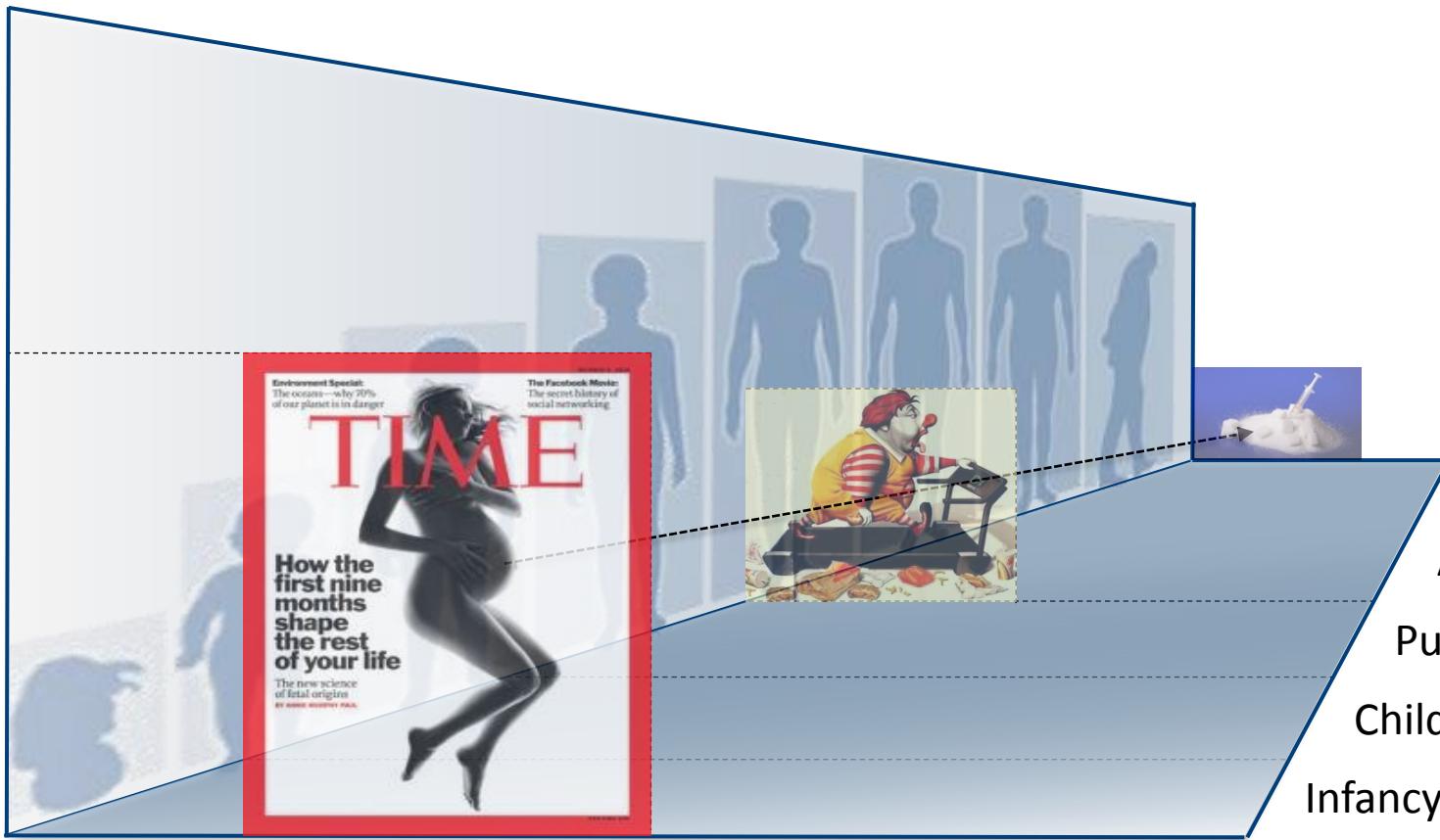
- **Fusiform gyrus:**
 - Has a *negative correlation* with BMI (Taki et al., 2008).
 - It is involved in the *processing of visual information*, and to elicit enhanced responses to high-caloric foods (Killgore et al., 2007, Frank et al., 2010).
 - Its activation after weight-loss programs predicts *less successful weight maintenance* (Murdaugh et al, 2012).
- **Lingual Gyrus:**
 - *Negatively correlated with waist circumference* (Kurth et al, 2013)
 - *Enhanced response to high-caloric foods* (Murdaugh et al., 2012)
- **Middle Temporal:**
 - *Positive correlation with BMI* (Taki et al, 2008).



FETAL ORIGINS

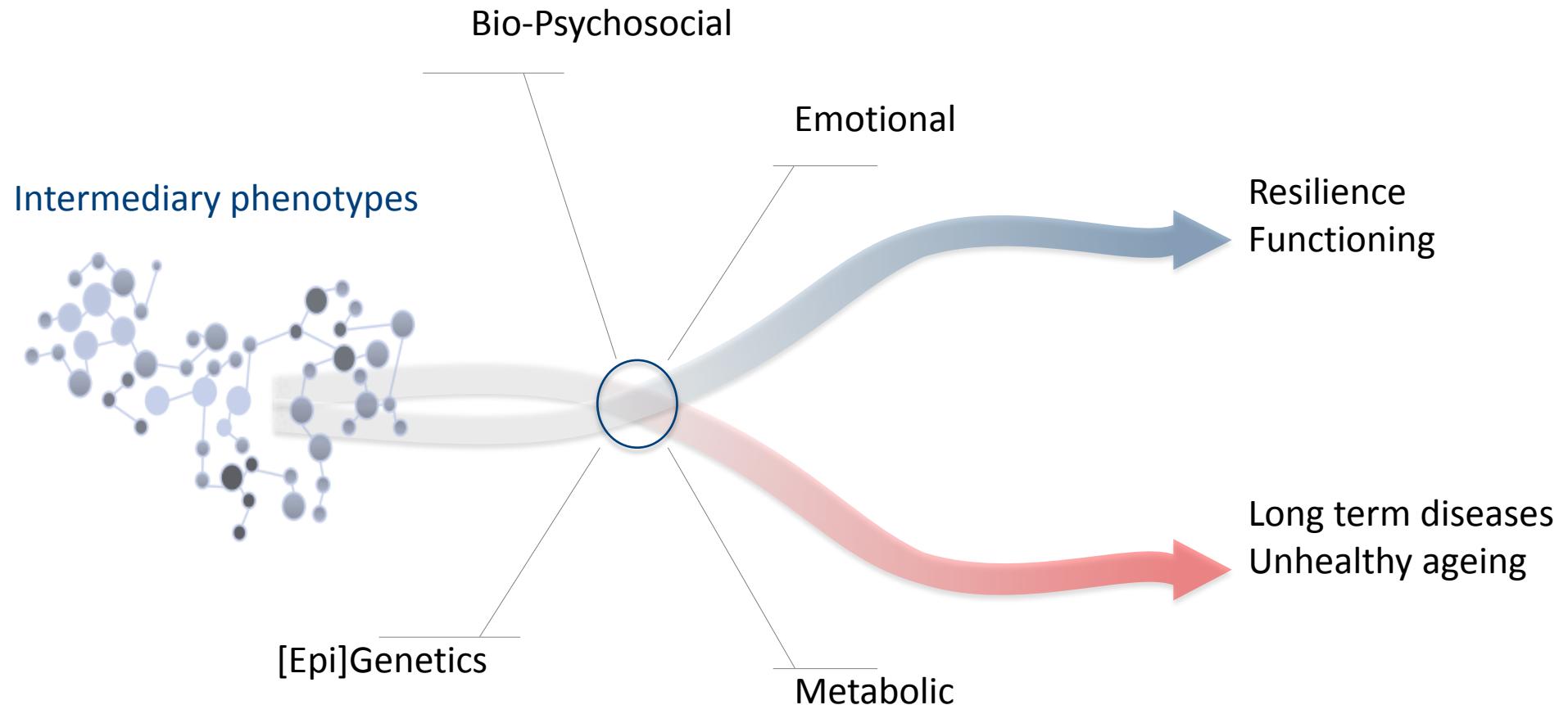


Genes

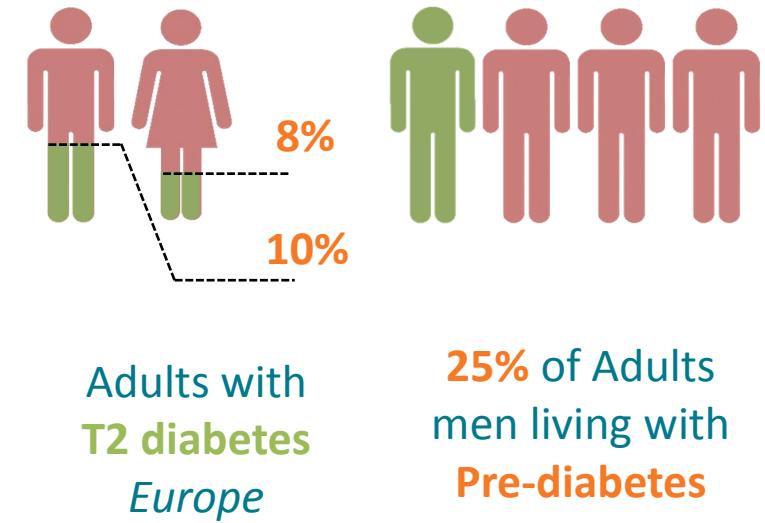
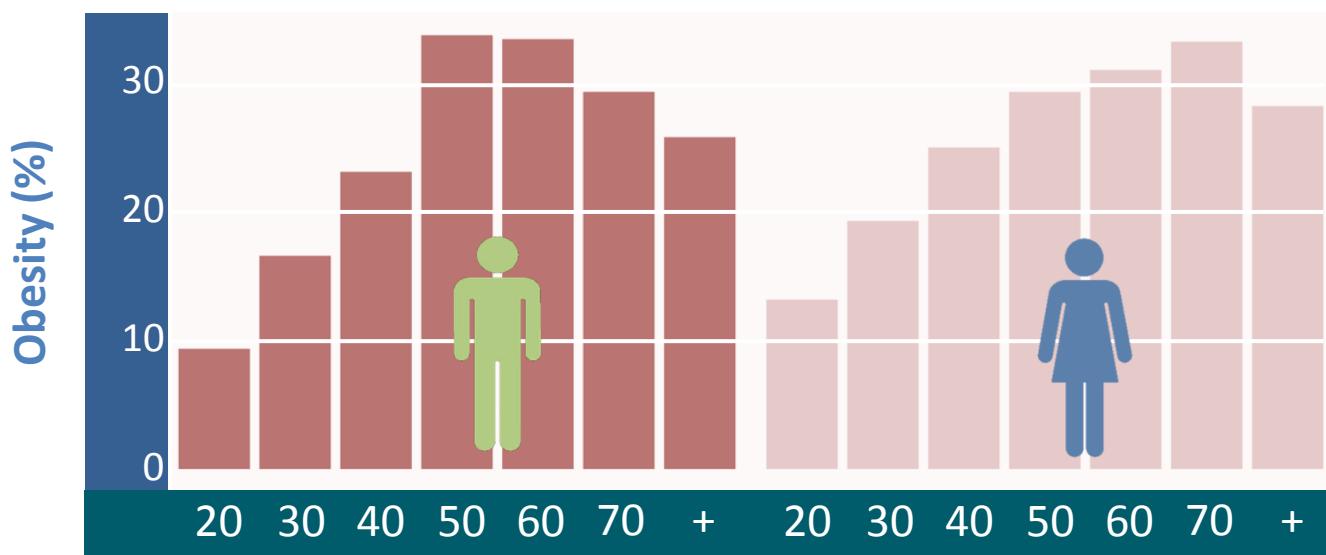


Environment

Life-course determinant of Health

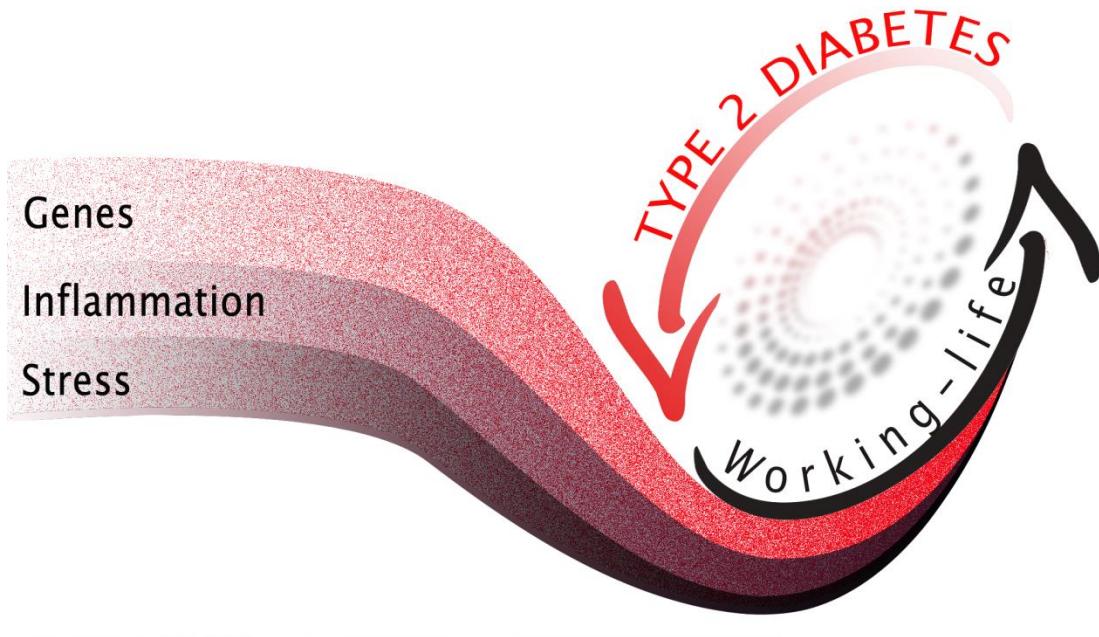


Some basic statistics



Diabetes and aging

bi-directional relation affecting social factors and economy



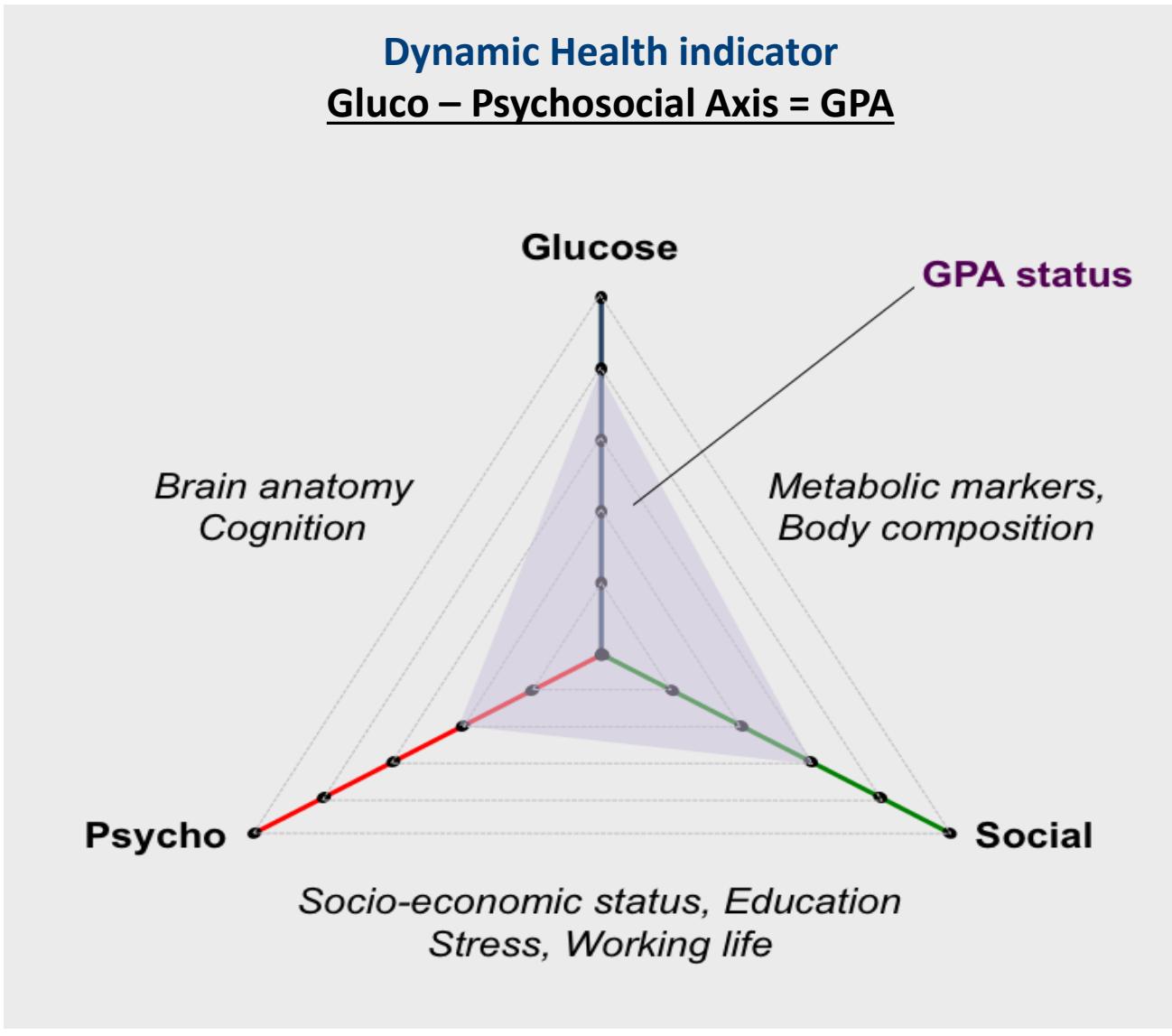
Unhealthy & inactive aging

- ++ Life-long treatment
- + Cognitive decline
- +++ Loss of productivity
- + Early retirement
- ++ Job loss

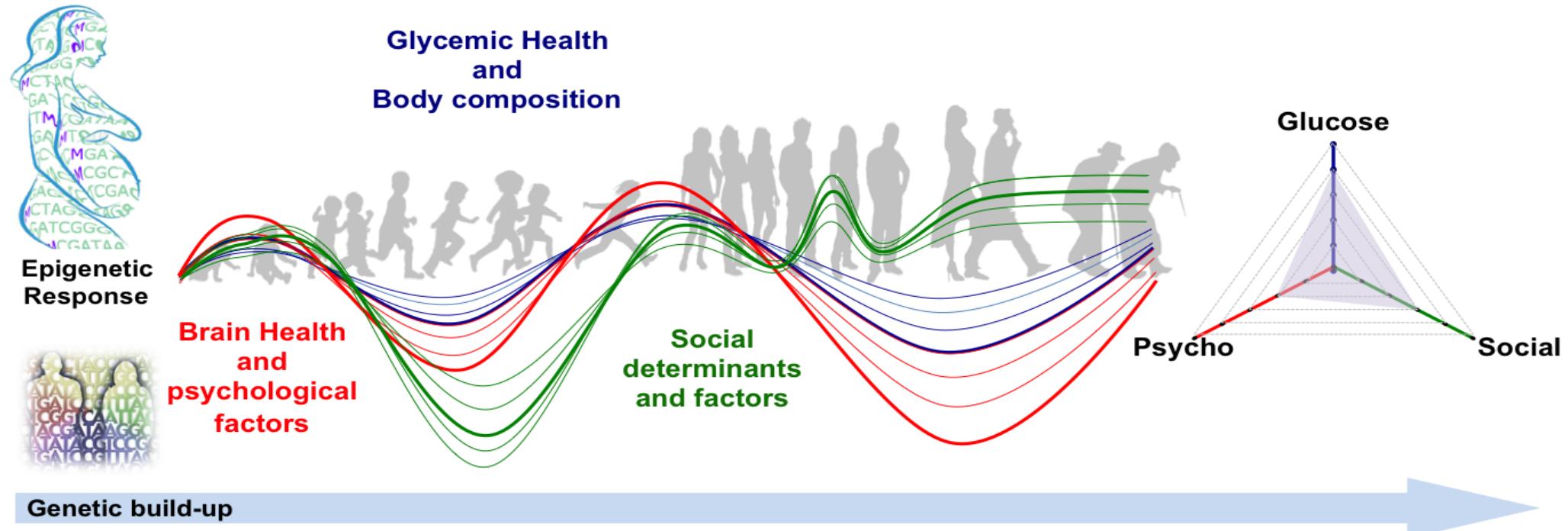
Total cost (US – 2012)

\$176	Healthcare cost
\$69	Loss of productivity
\$245 billions	

DynaHEALTH project – THE GPA



DynaHEALTH



Pathways to unhealthy aging

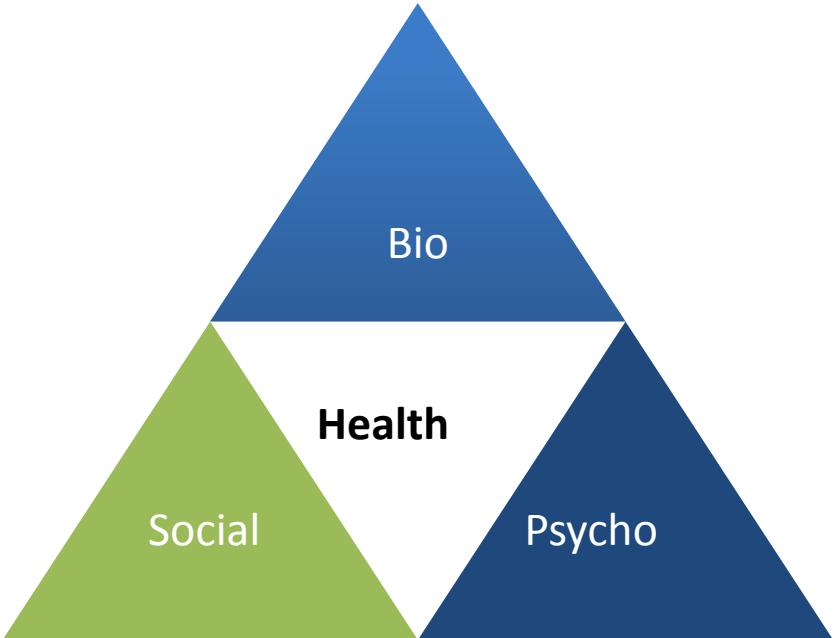
Fetal adversity
 Metabolic
 Psychological
 Social

Childhood response
 Unhealthy early growth
 Impaired cognitive development
 Low social functioning

Adult health pathways
 Obesity and Impaired glucose tolerance
 High risk behavior
 Low employability

Unhealthy and inactive aging
 Obesity and Type 2 diabetes
 Early dementia and cognitive decline
 High social dependency

Rationale

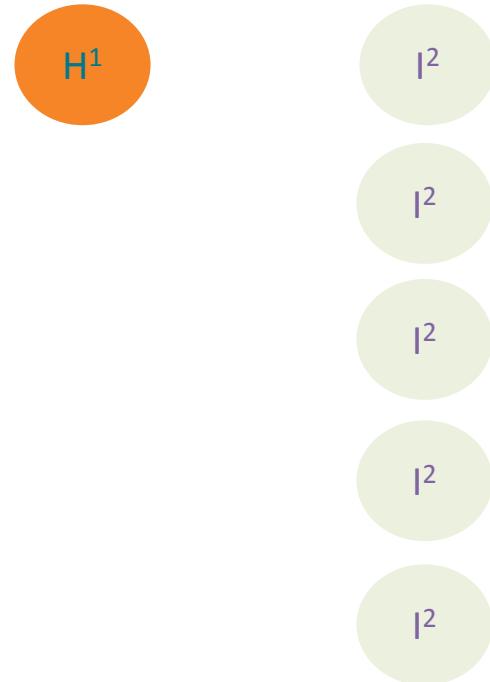


Health¹ and Activity² at all age is a composite and/or the results of the **G.P.A. build-up** and of specific investment (or intervention) made to **influence** it.

¹ Accumulation of physical and mental disorders throughout life

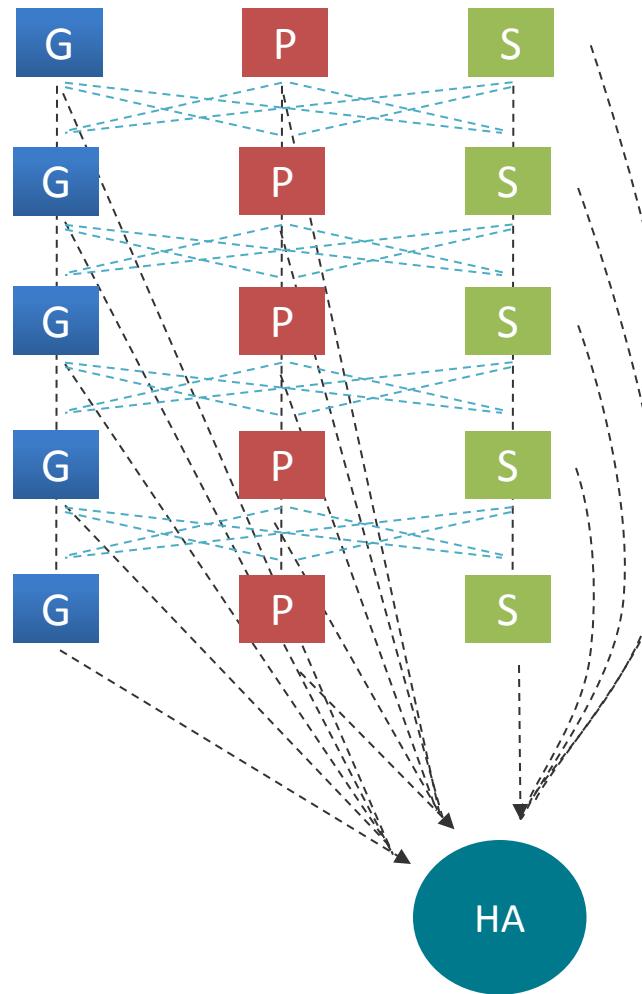
² Social activity according to age (e.g. working, retirement age....)

Life-course framework



¹ H= heritable factors

² I= Investment/intervention

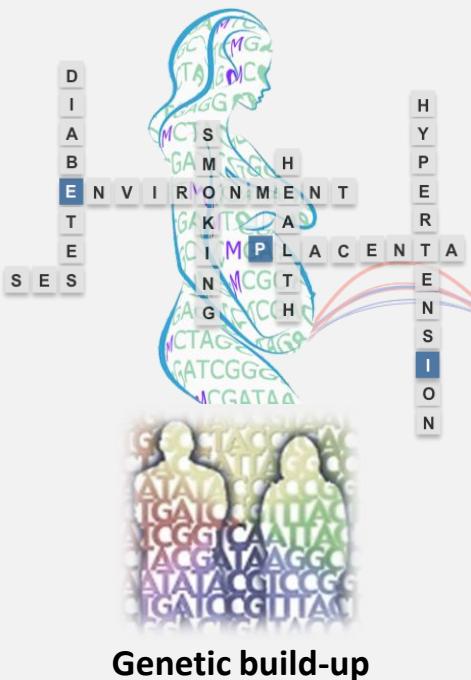


The model works !

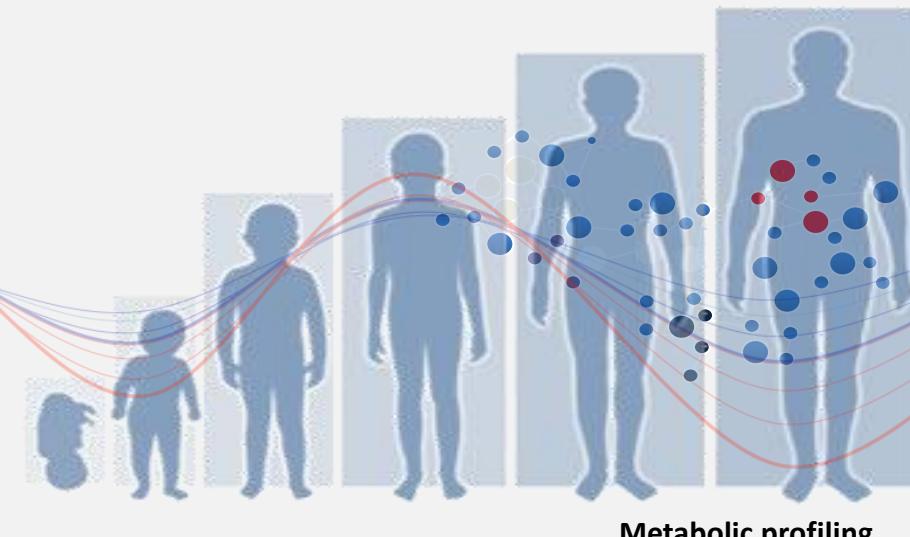


Long path ahead

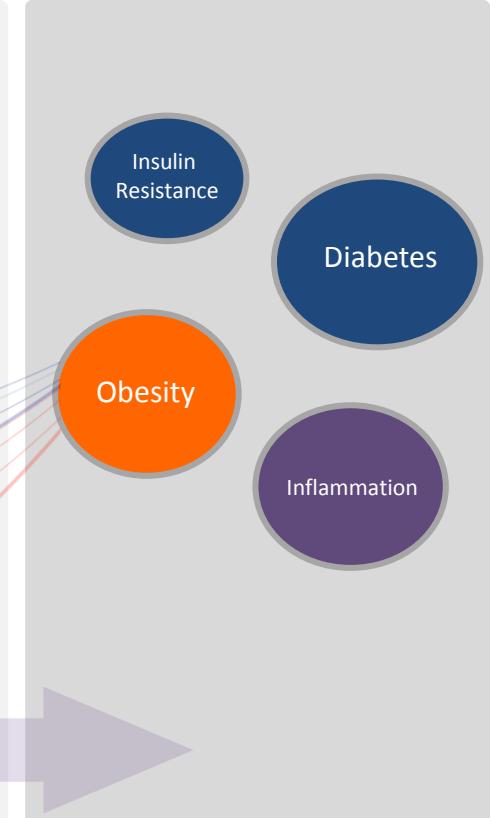
Epigenetic programming



Growth trajectories – weight gain – BMI tracking



CAUSALITY – MEDIATION – PATHWAYS

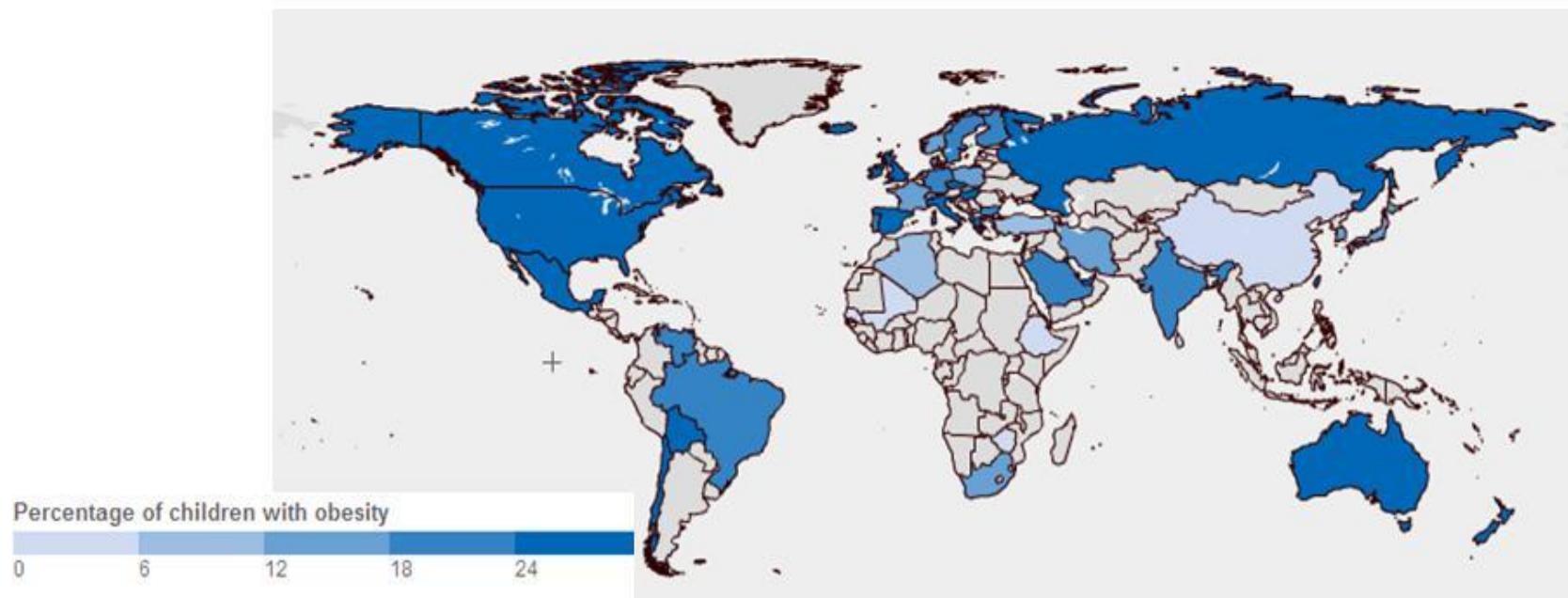


Why Research on Early Nutrition ⇒ Adiposity?



WHO: overweight & obesity = 5th. leading cause for global deaths

- The growing obesity propels an upsurge of non communicable diseases e.g. diabetes, hypertension and cardiovascular diseases
- Globally, 44% of the diabetes burden, 23% of the ischaemic heart disease burden and between 7% and 41% of certain cancer burdens are attributable to overweight and obesity.



La alimentación precoz programa la salud a largo plazo. Evidencias:

- ❖ Riesgo cardiovascular
 - ❖ Riesgo de alergia e infección
 - ❖ Enfermedades autoinmunes
(e.g. diabetes T1, enf. intestinal inflamatoria crónica, enfermedad celíaca,...)
 - ❖ Función neurológica
 - ❖ Salud ósea
 - ❖ Obesidad
- Koletzko et al (ed.) Adv Exp Med Biol 2005;569:1-237*
& 2009;646:1-196



Interventions to Promote Healthy Eating Habits:
Evaluation and Recommendations



i Family is funded by the EC FP7 Project No. 266044 building on



Los primeros 1.000 días

¿Por qué son tan importantes?

Porque en España,
casi la mitad* de niños
y niñas padecen
sobrepeso u obesidad



Por eso, recuerda que en los primeros 1.000 días de tu bebé
(embarazo, lactancia y los 2 primeros años):

la alimentación, la actividad física y otros hábitos saludables son claves para el desarrollo neurológico,
del sistema inmune y su crecimiento.

270 días

Embarazo



Lleva una alimentación saludable
En el embarazo contribuye al control de tu peso y el de tu bebé.
Come pensando en los 2 (pero no comes por 2!)

Cuida que la alimentación sea segura durante tu embarazo
Informate mucho en la fruta y la ensalada y dilete aconsejar

Realiza una actividad física moderada
Píndale piéno en la fruta y la ensalada y dilete aconsejar



¡Importante!: no te cansas. Debes poder mantener una conversación mientras se realiza la actividad.



Di adiós a los hábitos nocivos

En estos 1.000 días, la alimentación de la madre y del bebé (a partir de los 6 meses) debe ser siempre variada, equilibrada y en cantidades adecuadas:



Alimentos frescos y de temporada
(frutas, verduras, cereales, legumbres, pescados...)



Alimentos con altos contenidos en sal, azúcares y grasas

↓
¡Consulta el etiquetado nutricional!

Y para la sed: agua

365 días

Primer año de vida

1/6 MESES



6/12 MESES

Lactancia materna exclusiva durante los primeros 6 meses de vida de tu bebé

es la mejor prevención. Le aporta las primeras defensas frente a enfermedades infecciosas, reduciendo el riesgo

de obesidad y otras enfermedades crónicas en el futuro.

La lactancia materna beneficia a los dos favorece la salud del bebé, creando un vínculo afectivo y disminuyendo el riesgo de diabetes tipo 2,

cáncer de ovario y cáncer de mama de la mujer.

Si se utilizan otros alimentos para lactantes y niños de corta edad (siempre por recomendación de los profesionales sanitarios),

lee en la etiqueta nutricional el contenido de azúcares, sal y grasas.

El mantenimiento de la lactancia materna es una labor de todos: la familia, los amigos y el entorno laboral.

La Organización Mundial de la Salud (OMS) y otros organismos nacionales e internacionales recomiendan que los lactantes sean amamantados en exclusiva durante los primeros seis meses y junto con otros alimentos complementarios hasta los dos años de edad o más.

A partir de los 6 meses de edad, las necesidades nutricionales de un bebé aumentan para facilitar su rápido crecimiento y desarrollo.

Los bebés deben experimentar con una amplia variedad de sabores y alimentos saludables y nutritivos y adecuados: sigue los consejos de tu pediatra para la introducción de alimentos durante esta etapa.

365 días

Segundo año de vida

Es muy importante que le incorpores a la mesa familiar y al ocio activo.

Porque de forma divertida aprenderá y adquirirá hábitos saludables. No olvides que lo que aprende hoy le beneficiará mañana y perdurará a lo largo de toda su vida.





www.earlynutrition.org
www.mynewgut.eu
www.dynahealth.eu

THANK YOU VERY MUCH FOR YOUR ATTENTION!!