

LETTERS

Sugary drinks and pediatric health: reflections from a tertiary care hospital

Extensive research has shown the negative effects of the consumption of sugary drinks. Although the effects of high intake of sugary drinks are far reaching and include health, social and economic burdens, what is missing from the discussion by Riediger and Bombak¹ is the consideration of the further inequity and additional economic burden that inevitably arises from the evolving poor health outcomes among pediatric patients.

Although the authors acknowledge the link between sugary drinks and obesity, they minimize the other associated chronic diseases and do not discuss how these diseases lead to greater health disparity. The authors also fail to account for how the disproportionate burden of disease among people with low incomes affects an individual's quality of life. The growing rates of chronic disease burden our publicly funded health care system, which will be burdened additionally by an aging population and increasing rates of chronic disease among children at younger and younger ages.

Working with vulnerable populations in a pediatric tertiary care hospital, we observe first hand the effects of unhealthy diets, including consumption of sugary drinks, and the resulting chronic disease they cause in our patients. If the current level of consumption of sugary drinks continues or trends upward, it is estimated that more than 2 million new cases of obesity, almost 1 million cases of type 2 diabetes, more than 100 000 cases of cancer and almost 300 000 cases of cardiovascular disease will develop over the next 25 years.²

A vulnerable subset of the pediatric population, youth and adolescents are among the highest consumers of sugary drinks.² Research shows that as many as 80% or more of youth have consumed at least one sugar-sweetened beverage in the previous day, whereas more than 40% have

consumed three or more.³ This consumption represents 7%–8% of daily energy intake within this age group and puts youth and adolescents well over the recommended daily limits for sugar intake, increasing their risk for numerous metabolic conditions.^{4,5}

Canadian youth have disposable income and are making a lot of their own decisions — the primary challenge is their difficulty assessing the long-term health consequences of their decisions.⁶ This group and other low-income individuals are the most price-sensitive consumers. The taxation of tobacco and alcohol arose out of a need to reduce consumption. Although consumption and use of tobacco and alcohol may still occur, it is in lower quantities, reducing the overall risk to the population. Canada should be able to do the same for sugary drinks, with the same long-term benefits.

As clinicians, our aim is to diagnose and treat all patients who come through the doors of our medical practice. Although we aim additionally to educate our patients about their overall health and risk reduction, we know education can go only so far. Although taxation on sugary drinks and food voucher programs have not been federally implemented in Canada, certain jurisdictions in British Columbia and the Maritimes have provided such supports, with individuals noting increased fruit and vegetable intake, improved ease of making healthy food choices and greater accessibility to healthy food options.^{7,8} Preliminary research has shown that programs that subsidize fruits and vegetables for patients with diabetes have led to improved control of diabetes and reductions in the need for medication.⁹ Population-based policy interventions, including taxation of sugary drinks, will lead not only to reduced consumption of these harmful products, but also a reduction in their negative health consequences.

It is time for Canada to take a stand and introduce a tax on sugary drinks. Leveraging such revenues to make healthy eating more affordable has additional benefits of

increasing protective health factors. Overall, these complementary measures will reduce the burden of chronic disease and improve population health. Our hope is that children in Canada benefit from these actions sooner rather than later.

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