Obesity was diagnosed in 13.8% of schoolchildren. We used the package «STATISTICA v.7.0 » to conduct our analysis according to the scale proposed by International Diabetes Federation (2007). Data was analyzed using the statistical package «STATISTICA v.7.0 ».

Results Obesity was diagnosed in 13.8% of schoolchildren. We have identified the following relationships between age, gender, and obesity. According to the gender, obesity was found to be more common among boys (15.8%) than girls (11.5%; p < 0.001). The largest number of obese girls were detected in III gr. (9.5%; p = 0.002) and especially in III gr. (15.1%; p < 0.001). The largest number of obese boys were detected in I gr. (9.3%; p = 0.004) and especially in IV gr. (17.4%; p = 0.01) and in III gr. (15.6%; p = 0.007). Similarly, obese girls in IV gr. were less (3.6%) than in I gr. (9.3%; p = 0.004), in II gr. (9.5%; p = 0.002) and especially in III gr. (15.1%; p < 0.001). The largest number of obese girls were detected in III group, compare to II and I groups (p < 0.001). The largest number of obese girls were detected in III gr. (9.5%; p = 0.002) and especially in III gr. (15.1%; p < 0.001). The largest number of obese boys were detected in I gr. (9.3%; p = 0.004) and especially in IV gr. (17.4%; p = 0.01) and in III gr. (15.6%; p = 0.007). Similarly, obese girls in IV gr. were less (3.6%) than in I gr. (9.3%; p = 0.004), in II gr. (9.5%; p = 0.002) and especially in III gr. (15.1%; p < 0.001). The largest number of obese girls were detected in III group, compare to II and I groups (p < 0.001).

Conclusion In obese adolescents, disordered eating attitudes and behaviors could be associated with anxiety and depressive symptoms. Thus, all adolescents with obesity should be screened for their eating attitudes and behaviors and also for their emotional health.

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Introduction The upward steady trend in the prevalence of obesity in the pediatric population during the last decades is a significant medical and social problem. The purpose of this study is to evaluate the efficacy of distance follow-up on decreasing of body mass index compared to traditional management in obese adolescents.

Methods After a traditional intensive period consisting in a weekly family-based multidisciplinary intervention for two months, patients are randomized in the two arms, traditional (group 1) or distance follow-up (group 2).

Traditional follow-up based on face-to-face multidisciplinary consultations every three months.

The distance monitoring based on a mobile application dedicated to food behaviour change and physical activity, with weekly self-monitoring' goal setting, physical activity and healthy eating support’ and monthly weight assessment, moreover pre-programmed feedbacks ‘motivational strategies’ are included.

Only anonymous data were collected After one year of follow up, adolescents were evaluated for weight loss, compliance and quality of life, the two groups were compared.

All adolescents (more than 11 years) attending our unit for obesity care, were invited to be include the trial. Exclusion criteria were mental disability, syndromic obesity, bariatric surgery or no French speaking.

Results 91 adolescents (42 boys) were enrolled in this trial, 79 patients were randomized (14% loss of follow-up during the intensive care).

Mean age was 12.8±2.3 years, mean of Body Mass Index (BMI) was 30.8±4.08 corresponding to 3.9±0.7 Z-score BMI.

The loss of follow up at one year was 9% in the two groups (after 4 months on average).

The group ‘1’ had a mean of 4 hours/patient/year of face to face visits while the group ‘2’ had a mean of 0.5 hour/patient/year of distant chat.

After one year of follow-up the success rate (decreasing of BMI Z-score more than 0.5 points) was 21% in the group 1 and 30% in the group 2, 66.7% and 65% of adolescents stabilized their BMI Z-score in the two groups respectively.

Obesity is a chronic disease that needs a strong and long term follow-up; the addition of new technologies for distant monitoring can be helpful to promote healthy lifestyle in obese adolescents and can support them to have more autonomy and fewer appointments with professionals.

Nevertheless, despite an intensive program of care with a multidisciplinary dedicated team, the impact on weight loss still modest, and our future efforts must focus on improving individual results.