**Title:** How to prevent exposure to tobacco smoke among small children: a literature review

**Author:** Arborelius E

**Year:** 2000

**PMID:** 11055320

**Country:** Sweden

**Setting:** Clinical

**Search:** 1989-1999 MEDLINE, PsychLIT, Cochrane Library, Sprilane, Sprilane Project, Patrix, SweMed, Article bibliographies

**Studies:** NR

**Main Study Objective:** Review methods in child healthcare for protecting infants and small children from exposure to tobacco smoke

**Interventions and Studies:**

- **Interventions:** Smoking cessation intervention in antenatal care, Smoking cessation intervention in child healthcare

- **Specific Intervention Examined:** Interventions based on behavioral strategies, such as self-help manuals with counseling and follow-up, have the greatest effect, leading to a doubling in the number of women who stop smoking during pregnancy. Not yet clear whether nicotine replacement therapy should be used during pregnancy to increase the number of smoke-free women. The child healthcare system should give support to women who have stopped smoking during pregnancy in order to prevent relapse, although there is no clear scientific proof of the efficacy of this strategy.

- **Interventions to prevent relapse into smoking:** The following interventions had minimal effects: interventions focusing on information about risk factors; intervention at the time of delivery; intervention focusing on factual information; and interventions involving pediatricians.

**Main Reported Findings by Critical Question:**

- Q10: Interventions based on behavioral strategies, such as self-help manuals with counseling and follow-up, have the greatest effect, leading to a doubling in the number of women who stop smoking during pregnancy.

- Q13: Decisive factors for children not being exposed to passive smoking are a concentration on strengthening the parents' faith in their ability to create a smoke-free environment and on behavioral strategies to achieve this goal, but not primarily on getting the parents to stop smoking.

**Limitations of Studies Reviewed:** Comparison across studies is difficult as interventions and target populations may vary.

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**Title:** The influence of birth weight and intrauterine environment on adiposity and fat distribution in later life

**Author:** Rogers I

**Year:** 2003

**PMID:** 12821960

**Country:** UK

**Search:** Since 1966 MEDLINE, Article bibliographies

**Studies:** NR

**Main Study Objective:** Review the literature on the association between birth weight and BMI and obesity in later life

**Interventions:**

- Pediatric/Young Adults

**Main Reported Findings by Critical Question:**

- Q6: There is good evidence that there is a positive association between birth weight and subsequent BMI and overweight in young adults and children, although this relation is less clear in middle-age subjects. It is uncertain how far these associations are accounted for by changes in lean body mass rather than fat mass. Association between birthweight and BMI is substantially reduced when controlled for parental BMI.

**Limitations of Studies Reviewed:** More studies are needed that relate good measures of lean body mass to birthweight, assess the relation of birthweight and ponderosity in middle-age subjects, and use objective measures of fat distribution (e.g., DEXA scans).