

Dear Dr Ladher

**BMJ.2016.036037; "It's time to talk"**

Thank you for providing editor and peer reviewer comments, and offering us an opportunity to revise our paper. We are pleased to submit a revision, and as requested, provide a point-by-point response below.

**Editorial comments:** *"Editors felt that your paper covered a timely and important topic. However, we wondered how much the Analysis in its current form adds to previous work and moves things forward. We thought that the article could further advance the debate and have a stronger message/impact by using the government's obesity plan as more of a peg. The article is critical of the plan at the outset, but could maintain greater focus on this and use it to provide a narrative thrust, for example by exploring the reasons (political and otherwise) why the plan has fallen short and then describe how the available evidence (e.g. that discussed in the ECHO report and at the St George's meeting) could be used to tackle those issues. We would suggest reframing the discussion in this direction."*

**Author response:** We have reframed our paper along these lines, drawing attention to the areas where the UK plan has fallen short, and discussing how the situation could be redressed.

Reviewer 1

**Reviewer comment:** *I ask you to consider that the issue of concern to us might not be obesity per se, but poor health and impaired quality of life, brought about by the metabolic dysfunction resulting from two main causative factors, obesity and physical inactivity.*

**Author response:** We do not disagree and have discussed the importance of physical activity.

Reviewer 2

**Reviewer comment:** *"It's time to talk is a title that does not much focus on the specific content of the commentary. It is to consider that the title should be informative to attract all readers that might be interested"*

**Author response:** We have changed the title to "It's time to talk about child obesity"

**Reviewer comment:** *The commentary is quite lengthy and may profit of making it shorter for the sake of clarity and sharpness. Especially the paragraphs on "how have we got ourselves here"...*

**Author response:** We have restructured and shortened the paper and removed this subheading.

**Reviewer comment:** *Direct measures in children and young people of physiology or fitness (line 25, p3) does not fit into the paragraph. It is an important point, but is probably not needed here.*

**Author response:** We have removed this point.

**Reviewer comment:** *In the third paragraph, the examples of community pharmacists, health visitors, social workers and dentists seem to be too specific. Such examples tend to dilute the message. There is on the other hand no mention of our childcare, kindergarten and school system where all children are reached at one point*

**Author response:** We have included mention of the important potential role of nursery and school teachers in the last paragraph of the section “What’s the problem with the UK Government Plan for Action?”

**Reviewer comment:** *Top down resources AND regulations are needed*

**Author response:** Agree and have incorporated; please see penultimate paragraph.

**Reviewer comment:** *Although I’m a true believer in the relevance of early childhood development, I feel that scientists from the broader childhood obesity community should be part of the proposed alliance. F.i. I miss the scientists from the lancet series on obesity 2015, and any link to this important scientific series 2011 and 2015.*

**Author response:** Agree; please see last paragraph.

**Reviewer comment:** *Box 2 suggested roles of a Global Alliance Against Childhood Obesity These points are without doubt extremely important. I miss the notion throughout the box that the major action should mainly focus on primary prevention of obesity. For the public and the scientific reader this is not always evident.*

**Author response:** Agree; see bullet points 1 and 3 in Box 2

**Reviewer comment:** *In the box 2, the focus on preconception and infancy is very dominant and appears a bit like a “mafia approach”, perhaps a bit on the expense of the focus on children themselves that will constitute the society of tomorrow. This dominance may be contraproductive...*

**Author response:** We feel the points in Box 2 are well balanced. We have earlier argued that a major necessity is recognition of the contribution of periconceptual, intrauterine, and infancy factors in initiating obesity trajectories.