

Gordos (2009): Obesity in Films and Its Use in Education

¹María Teresa Icart Isern, ²María del Carmen Icart Isern

¹Departamento de Enfermería de Salud Pública, Salud Mental y Materno-infantil. Universidad de Barcelona (Spain).

²Área Básica de Salud "Sant Josep". Instituto Catalán de la Salud. Barcelona (Spain).

Correspondence: María Teresa Icart Isern. Escuela de Enfermería. Universidad de Barcelona. Feixa Llarga s/n. L'Hospitalet de Llobregat. 08907. Barcelona (Spain).

e-mail: mticart@ub.edu

Received 21 October 2009; accepted 2 January 2020

Summary

This paper analyses the characteristics of the six obese characters in *Gordos* (2009) by Daniel Sánchez Arévalo. This is an ensemble film that revolves around a therapy group, in which the most important theme is the need for participants to understand the feelings and emotions they hide behind their obesity. First, we discuss the prevalence of this chronic, complex and multifactorial disease, which the WHO has declared an epidemic of the 21st century. Next, the most important features of the main characters are analysed as well as their evolution throughout the film. We then summarise the decisive factors and the characters' clinical and medical treatments, and describe some aspects of the filming. Finally, the potential use of *Gordos* in education is discussed.

Keywords: Obesity, Psychotherapy, Sexuality, Nutrition, Teaching.

Technical details

Title: *Gordos*

Country: Spain

Year: 2009

Director: Daniel Sánchez Arévalo

Music: Pascal Gaigne

Photography: Juan Carlos Gómez

Film editor: David Pinillos and Nacho Ruiz Capillas.

Screenwriter: Daniel Sánchez Arévalo

Cast: Antonio de la Torre (Enrique), Roberto Enríquez (Abel), Verónica Sánchez (Paula), Raúl Arévalo (Alex), Leticia Herrero (Sofía), Fernando Albizu (Andrés), María Morales (Leonor), Pilar Castro (Pilar), Adam Jezierski (Luís), Marta Marín (Nuria) and Teté Delgado (Beatriz).

Color: Color

Runtime: 120 minutes

Genre: Comedy

Production Companies: Filmanova and Tesela Producciones Cinematográficas.

Synopsis: *Gordos*, is an ensemble film that narrates five stories that turn around the obesity, with a common nexus: a therapy group. It is a place where the characters are going to find the causes of their disease, the reasons that impel: to eat, to keep little rewarding personal relationships and to flee from its realities. *Gordos*, combines drama and comedy, is light and deep, it conciliates bitterness and sweetness. But, mainly it shows the existing contradictions in the beliefs, values, feelings and behaviours of his characters.

<http://www.imdb.com/title/tt1166810>

<http://www.gordoslapelicula.com>

Obesity: a pandemic of the 21st Century

Obesity is one of the largest social health problems that society faces today. In May 2004, the 57th World Health Assembly declared obesity an epidemic of the 21st century. In Spain, a strategy for nutrition, physical activity, obesity and health (NAOS) was approved around the same time¹. NAOS is the basis of the Comprehensive Plan for Obesity, Nutrition and Physical Activity that has been designed by the Spanish Ministry of Health and Consumer Affairs².

In Europe, the prevalence of obesity is three times higher than it was twenty years ago. If appropriate action is not taken, it is believed that 150 million adults (20% of the population) and 15 million children and adolescents (10% of the population) will be obese in the WHO European Region by 2010³.

Spain is not immune to this trend. According to the Spanish National Health Survey (ENS, 2006), 37.8% and 15.6% of Spanish adults are overweight and obese respectively⁴. Specifically, obesity and overweight affect 15.5% and 39.2 %, respectively, of Spaniards aged from 25 to 64. In the population over 65 years old, 35% suffer from obesity and 44% are overweight⁵. This is a worrying situation, particularly if we consider that in the last 20 years, obesity in children (from 6 to 12 years) has increased from 5 to 16%^{6,7}.

To diagnose obesity, the international criterion that is accepted from 2 years of age is the Body Mass Index (BMI or Quetelet Index). This is defined as the weight in kilograms divided by the square of height in square centimetres ($BMI = \text{Weight (kg)} / \text{Height [cm]}^2$). People with scores over 25 are considered overweight and those with scores over 30 are considered obese. Therefore, the index takes into consideration different degrees⁵.

Although the causes of overweight and obesity are multifactorial, these conditions are always characterized by an excess of fat deposits in the organism, which is the consequence of expending less energy than that provided by food⁸. In this respect, obesity can be qualified as primary (the energy contribution is higher than the expense), secondary (this includes neuroendocrine obesity and that caused by some drugs) and obesity tied to genetic, behavioural and environmental factors. Some of the determinants can be seen in the characters in *Gordos* (Figure 1).

Although there is a discrepancy in the psychological determinants of obesity, all health professionals agree that overweight and obesity increase general morbidity and mortality. Obesity is a risk factor for some car-



Figure 1: The main character of *Gordos*.

diovascular diseases (arterial hypertension, dyslipemia, ischemic cardiopathy, etc.). It is also associated with endocrine disorders (diabetes mellitus, hypogonadism, etc.), respiratory problems (sleep apnea, hypoventilation, etc.), digestive (gastroesophageal reflux, biliary lithiasis, constipation, haemorrhoids, etc.), kidney and dermatologic diseases. Furthermore, obesity has been related to different types of cancer (cervix, breast, ovary, prostate, colon and rectum, etc.), problems during pregnancy, a higher surgical risk and a cause of premature death⁹. It therefore increases health care expenses¹⁰.

Psychopathological, behavioural and environmental factors must be kept in mind in obesity treatment, as they can be altered easily, unlike genetics. In addition, treatments include authorized drugs (under medical supervision), homeopathic medicines, magisterial formulae and other products (pseudo-drugs)¹¹⁻¹⁴. Bariatric surgery is reserved for special cases when other therapies have failed. Nevertheless, it is most important to prevent people from becoming overweight and to promote healthy habits: a balanced diet and regular physical exercise.

With regard to psychotherapy, the most significant achievements are to maintain the weight loss that is attained through various methods. The advantages of group therapy over individual therapy include: less resources are required, since one therapist can treat more patients in less time; the exchange of experiences is facilitated among patients; and the acceptance of rules that allow patients to control harmful behaviour (stuffing and nibbling, etc.) is reinforced^{11,15,16}.

Gordos and other movies about fat people

The filming of *Gordos* took more than eight months, which was the time needed for the actors to gain and lose weight. Antonio de la Torre (Enrique) put on and

then lost 33 kilos. Leticia Herrero (Sofia) lost 25 kg; she hopes she will not put them on again. The whole process was carried out under the supervision of a nutritionist and an endocrinologist, who appear in the credits¹⁷.

The movie cost 3.5 million euros and different formats were used to shoot it, including recording with a mobile phone and a digital camera. According to Daniel Sánchez Arévalo, the director, *Gordos* mixes different genres: melodrama (the story of the therapist), comedy (the couple of catholic fiancés) and ludicrous tragedy (a homosexual who ends up marrying the widow of his associate who he murdered for love)¹⁷. Obesity is the layer that covers the main characters, under which they hide their contradictions.

In fact, *Gordos* is a metaphor for all that we swallow, for everything that fattens us and makes our life heavier. It is an ensemble piece that presents obesity in an almost beautiful way (it includes nudes), with an aesthetic that is far removed from the grotesque and from any morality. *Gordos* reflects a society in which appearance prevails and characters are masks created to protect people from themselves and from others.

Other movies related to obesity include: *Hairspray* (2007) by Adam Shankman, *Real Women Have Curves* (2002) by Patricia Cardoso¹⁸, *Bridget Jones's Diary* (2001) by Sharon Maguire, *The Nutty Professor* (1996) by Tom Shadyac, *What's Eating Gilbert Grape?* (1993) by Lasse Hallström and *Léolo* (1992) by Jean-Claude Lauzon. Depending on the genre, each of these films approaches obesity from a different perspective.

The documentary *Super Size Me* (2004) by Morgan Spurlock (Figure 2) deserves special comment. It illustrates the impact on health of a diet based on food from the fast food chain McDonalds. It is an allegation, with interviews and comments, against fast food and sedentarism. It is based on the experience of Morgan Spurlock, the film's director, producer and main character, who ate only McDonalds food for one month. Spurlock underwent medical check-ups at the beginning, during, and at the end of the experiment. He gained 11 kg in one month and his blood pressure, cholesterol levels, uric acid and transaminases increased. He also presented symptoms of fatigue, weakness, depression and irritability, which alternated with phases of enthusiasm and satisfaction following the meals. This suggests that the composition of the food may cause addiction.

Gordos: six cases of obesity and a case of overweight

Gordos revolves around a therapy group led by Abel (Roberto Enríquez) (35-38 years), who is married to Paula (Verónica Sánchez), they have no children. At the

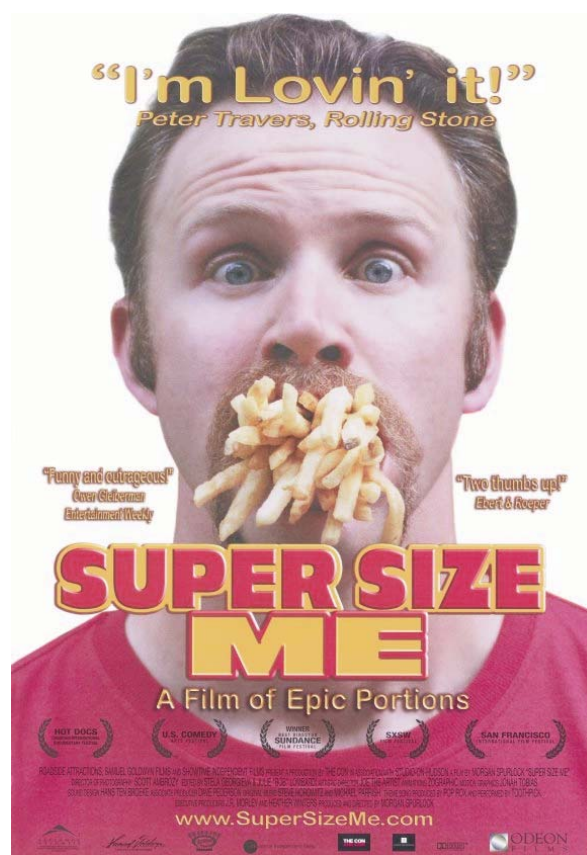


Figure 2: *Super Size Me* (2004) by Morgan Spurlock (American movie poster).

first group meeting, he proposes that everyone attending the therapy should take their clothes off. He is the first to reveal his athletic body. This is the first step in a personal task of introspection through which he claims that his patients will discover and understand what they hide behind their obesity. Some of the participants leave the session. Only Andrés (Fernando Albizu), Leonor (María Morales) and Enrique (Antonio de la Torre) agree to show their naked bodies.

Enrique: a fraud. Enrique is in his forties, he is single and is on a TV program in which he appears as a "nutrition expert". He appears in front of a public of obese people with an enviable body, thanks to the pills *Kiloaway*, with which he claims to have dropped from 105 to 67 kg (Figure 3).

In fact, Enrique's contract stated that he must remain at 67 kg for the next three years, but he was unable to do this. He gained weight, then he was featured in some magazines and TV programs, and *Kiloaway* sales fell. As his anxiety grew, he ate more and gained more weight. Finally, his associate sued him and Enrique lost his possessions and his job.

He decides to start therapy because of his weight gain, his inability to control his violent personality and



Figure 3: Enrique as a “nutrition expert” introduces the pills, *Kiloaway*.

the chaos that rules in his life, including significant alcohol consumption.

In the therapy group, he reveals that he has felt different since his childhood: he was a “lonely chubby boy”, the one who did not like the sport, and soon understood that: “if he was chubby, nobody was going to realize that he was different”. His difference became clear in the Paralympics where, as a volunteer, he assisted an Australian swimmer with no legs and thus discovered and accepted his homosexuality. As a gay man, he feels that he does not fit in with the stereotypes: “Gays are vital, sensitive, tolerant, the avant-garde of society”, he says, but he considers himself: “A fraud, a liar, embittered, violent, a whoremonger and contradictory; the worst queer in history”.

Obesity makes it difficult for him to tie up his shoes. It also makes him drowsy and apathetic. To lose weight, he runs at night, and thus encounters his business associate, Jesús. They have an argument, fight and Jesús falls to the floor unconscious. Enrique, visibly distressed, runs to find help but the effort overwhelms him and he falls down. Both are transferred by ambulance to a hospital, where Enrique is diagnosed of “a mild heart attack” and Jesús with multiple brain injuries, which result in a deep coma.

Then we meet Pilar (Pilar Castro), Jesús’s wife and Enrique’s old classmate. When Enrique is discharged from hospital, Pilar looks after him. Jesús is subsequently asphyxiated by Enrique and dies. At this point, Pilar decides to seduce Enrique. Finally, they marry, but before that Enrique confesses his crime to her, which he attributes to: “the fear of losing you”.

Enrique is the therapy patient who manages to lose most weight on the two occasions that he is weighed. However, this does not prevent him from feeling: “dark brown, almost shit”. Nor does it stop his sarcastic and furious comments towards the two female

patients: Sofia (Leticia Herrero), who he calls “the happy nun”, and Leonor, who he calls “the gluttonous executive”.

Leonor: the unlucky professional. Leonor is between 30 and 35 years old, and works from home as a computer engineer. She has been with Germán, who is also a computer programmer, for ten years, but they have no children. At the first meeting, Leonor undresses while she confesses that until four months ago she was not fat and that she has gained 20 kg. She says that she has suffered from insomnia since she was 10, which gives her more time for everything, including eating. She is ashamed of her body, she says she feels: “ugly, like a disgusting seal”, and does not have a social life (Figure 4). She is in therapy because she wants to lose weight before Germán comes back from the US, where he has gone to work for a year.

However, an unexpected visit from Germán causes a crisis of anxiety that leads her to go to therapy on the wrong day: she will not return to the group again. At the airport, her partner does not recognize her.

In a casual encounter with Abel, the psychotherapist, Leonor confesses that her weight increase was a formula to put an end to the monotony of a relationship that she was unable to conclude. She thought that her obesity would make Germán reject her, because he always “hated fat people”. Leonor explains that she has not lived the life (“it is not possible to spend your whole life with only one man”) and that her relationship was one of dependency.

Suddenly Leonor feels that she is no longer fat, but “light and wild”. As a result, she goes to a bar, where she begins the first of a series of 20 relationships (equal to the number of kilos that she gained) with handsome and married men who will not commit to her. The series includes Abel.



Figure 4: Leonor and its solitude.

Sofia: innocently happy. Sofia is between 24 and 28 years old. She is employed at a shopping centre selling perfume (Figure 5). She then changes her job and becomes a telephonist in a multinational company. In her small box she begins to feel overwhelmed and to snack on all kinds of sweets.

She comes to the therapy group with Alex (Raúl Arévalo), her boyfriend. Both are members of a Christian community and believe they should be virgins when they marry. Like Leonor, she wakes up in the night and eats. Unwillingly, she is dragged away from the first meeting by her fiancé who will not allow her to undress. However, Sofia returns to therapy, where she describes herself as a *“Chubby girl without any complex about it, from a family of eating”*.

Sofia fears she will be rejected by Alex when she undresses in front of him on their wedding night. So she decides to bring the feared moment forward. Alex is reluctant to have sex before marriage, but once they begin, he feels that they are like *“sex junkies”*.

Sofia manages to lose weight on both weigh-ins. She attributes this to her diet (salads), to having an objective (the wedding arrangements) and *“to being more spiritually satisfied”* (having sex). Consequently, she feels satisfied and then she discovers that she is attractive to other men.

Alex is the least happy with Sofia's weight loss. He says that he likes her better with her kilos. He encourages her to eat and reminds her that she belongs *“to a family of eating, like your mother, your grandmother and your aunt”*.

Alex feels jealous. He criticizes her way of dressing and her increasing sexual desire. He decides to postpone their wedding and travel to Senegal, where the Christian community has a mission.

When Abel visits Sofia, she admits that: *“It is difficult not to be a fat woman”*, that this desire can turn into an obsession. She states that as a fat woman she feels more comfortable; so it is the others who have the problem. She says that she accepted herself more as a fat woman. Finally, she confesses that she liked being thin, but that she has put on weight to hide her five-month pregnancy. In tears, she declares: *“Alex would not use condoms because he believed that there was less sin this way”*.

In her dreams, Sofia sees Alex, who tells her about his death in a car accident. He confesses his jealousy and anger towards her, whom he describes as an angel whose wings he wanted to cut. With affection, he calms



Figure 5: Sofia selling perfume.

her, reassures her that everything will be fine, and clearly mentions the son that she is expecting. Sofia turns out to be walking towards the altar where Alex is waiting for her, with the music of Senegal in the background.

Andrés: a fat person with no complexes. Andrés is about 50 years old. He is married and works as a forensic scientist. He shares his family home with his wife Beatriz (45-50 years old) and their twins, Nuria (Marta Marín) and Luis (Adam Jezierski) (16 years old). Apart from Luis, all of the family are obese.

Andrés goes to therapy because he worries about his health, since his family has a history of premature deaths associated with obesity. He explains that his great-grandfather, grandfather, father and older brother, *“were happy, optimistic, lovers of the good life and of small daily pleasures and they died before they were fifty years old”*. He is similar to his relatives and since his fiftieth birthday is approaching, he fears he will come to the same end.

His obesity has determined his current job (forensic scientist), as he cannot chase criminals and it is even difficult for him to bend over to pick up evidence (for example, an engagement ring) when a corpse is removed. Although he has frequent and enjoyable sex with his wife, Beatriz, he is concerned about the effect that his *“tummy”* may have during intercourse.

In any case, Andrés defines himself as a nice, happy fat man. In spite of being the most obese in the group, he says he feels *“light”* and *“pink as a pig”*. When he is weighed, he has always gained weight, a situation that he approaches with resignation (*“not dead, I slim”*). Before therapy, he had tried the *Kiloaway* pills. He remembers that they gave him diarrhoea and made him irritable, but he did not lose weight.

He takes advantage of any opportunity, particularly during family meals, to cram food into those who are

with him (he gives spoonfuls of cake to his wife), in an act full of apparent affection. However, he confesses that he does this to minimize the guilt he feels about his enormous appetite (Figure 6).



Figure 6: The obese family having lunch.

His world of apparent happiness collapses when the results of a DNA test make him doubt whether Nuria is his daughter. This leads him to confess in the therapy group that the children are: *"intruders, agitators ..."*.

Beatriz: she does not confess that she is obese.

Beatriz is in her forties. She is an obese housewife who accepts Andrés's attentions, in the form of mouthfuls, with pleasure. At their children's birthday, she encourages Nuria to eat another piece of cake and gives her a device to shape her figure, which works by placing electrodes on the *"softest parts"* (Figure 7).

Beatriz refuses to reveal Nuria's real father, she decides: *"To carry on carrying the load of an error that I have paid for all my life"*, which she describes as a *"shit of a life"*. Like her husband, she bears the insolence of



Figure 7: Nuria with the electrodes' device for losing weight.

her son, Luis, with resignation, as well as her obesity and that of her husband and daughter.

Nuria: the impotent adolescent. Nuria is 16 years old and is obese like her parents. She is the victim of her brother (the only thin one in the family), who harasses and insults her, calling her, *"obese"*. Nuria also silently suffers the mockery of her high school classmates. This mockery reaches its peak during the end of course dance, at which classmates insult her and throw drinks over her. The *"chubby boy in the class"* participates in this cruel act, which was orchestrated by her brother. Before he leaves her in the middle of the dance floor, he confesses that this was the only way that they would leave him in peace.

Nuria, who is usually an outstanding student, fails in all subjects except physical education. It is then that she looks for *"political asylum"* at Paula's house. Paula is her physical education teacher and Abel's partner. She is pregnant and must rest to avoid a risk of miscarriage (Figure 8). Nuria makes a deal: if Paula helps her with her homework, she will do the shopping, tidy up and clean the house. From now on, whenever she comes to Paula's house she brings pizza and sweets. Paula tells her that she must learn to control her meals and that merits a speech: *"I am fat, I am given a complex and society excludes me"*.

Nuria eventually takes revenge on everyone, particularly her brother. She presents the results of her school project to the class, according to which a DNA test carried out on a sample of Luis's hair proves that they are not brother and sister. Therefore, because he is the only thin one in the family, she concludes that he must have been adopted. In the end, it is Nuria who was the product of her mother's infidelity.

Paula: not really obese. Paula (28-32 years) is a physical education teacher and happily married to Abel, the therapist. Paula is thin but, because of a risk of miscarriage, she must rest. She gradually gains weight, beyond that which would normally correspond to the pregnancy. In a pregnancy check up, hyperglycemia is detected, which could affect the future baby. Consequently, the doctor advises her to eat a balanced diet.

Her increase in weight due to the pregnancy, although it is normal and temporary, does not fit in with Abel's plans, and he rejects Paula. In a group therapy session, Paula pops into the room and expresses her disappointment and pain in the face of what she feels is his abandonment. The couple will not be able to forgive each other, even after the birth of their daughter, at which point Paula gets her figure back.



Figure 8: Paula and Nuria, measuring their diameters.

Determinant factors, clinical aspects and treatment of obesity in *Gordos*

The genetic factors that are associated with obesity are evident in: Andrés, Nuria and Sofia. In addition, the three are victims of a family environment in which eating is rewarded.

Obesity involves a food addiction, in which there is a strong preference for very caloric products with little nutritious content. This is illustrated by: Enrique (chips, chocolates and alcohol), Leonor (ice creams), Sofia (rolls), Andrés (chips and Pantagruelian meals), Beatriz (cake) and Nuria (pizza and sweets).

Although there is no agreement on the relation between obesity and different psychopathologies, it seems that some personality traits might have a certain weight, including: impulsiveness (Enrique, Sofia), dependency and insecurity (Sofia and Nuria), low self-esteem (Enrique, Leonor and Nuria), emotional instability (Enrique, Sofia, Andrés and Beatriz).

It has frequently been considered that obese people are happy, amusing and extroverted. Perhaps this is Andrés's case, at least he defines himself in this way. However, it is not the case of Enrique, who describes himself as a whoremonger, who is cynical, embittered and violent.

Although it is not common, some obese people accept their situation. They eat because they like to eat, they do not want to be deprived of this pleasure (Andrés and Beatriz) and they do not look for treatment until they are concerned about their health (Andrés). However, another group of obese people do not adapt to their situation. They do not like how they look and have symptoms of depression or anxiety (Leonor, Sofia and Nuria) or feelings of guilt (Beatriz).

Nuria is a clear example of the psychological dam-

age that a peer group's mockery (humiliation) can cause in an obese adolescent. In addition, Enrique reports that he was a "chubby child" who was ridiculed by his classmates.

Gordos present few clinical symptoms: Enrique and Andrés have difficulties bending down and running.

The treatments used in *Gordos* are group therapy and *Kiloaway* pills. Abel, as the therapist, tells the group that each one must analyse the causes of their weight and identify in what situations they eat in excess. The answers are varied: situations of stress (Sofia), when he feels attacked (Enrique), when there is nobody around (Leonor), to share the guilt (Andrés). In the therapy, Abel asks questions: how they feel, what colour they see themselves as, how their situation affects their job.

The therapy helps the members of the group to discover the cause of their weight; to undress before themselves. The path is not easy and, like any lifestyle change, it requires motivation and effort, since miracle solutions like *Kiloaway* do not exist. The effects of this pseudo-medicine (vomiting, diarrhoea and irritability) were experienced by Andrés and by Enrique, its advertiser.

The obese in *Gordos* do not use any pharmacological treatments. To lose weight, Enrique runs in the night and, later, he turns to vomiting to counteract the effects of chocolates, champagne and stuffing himself, in a bulimic process that he sums up as: "the food spends little time in me". Nuria hardly attends the physical education classes at high school and Sofia does some exercise at home. In the end, only Enrique, Leonor and Sofia manage to lose weight, while Andrés fails.

The use of *Gordos* in education

Gordos deals with the following themes: lifestyles (overeating, sedentarism), sexuality (homosexuality, promiscuousness, religious repression), violence (school and family harassment), psychotherapy (effectiveness of group therapy, decision-making, self-esteem, fear), among others.

It could be used for teaching in the new degree qualifications (medicine, psychology, dietetics and nutrition, sociology, pharmacy, nursing, etc.) and in postgraduate courses linked to health promotion and education. *Gordos* is suitable for school health programs (for people over 13 years old) and for associations linked to obesity.

Gordos fits into different educational goals, including:

- Identify the importance of the genetic, social, biological and psychological factors associated with obesity.

- Identify and understand the role of eating in the maintenance of a good physical and psychological balance.
- Analyse personal responsibility in situations and lifestyle decisions that may lead to obesity.
- Recognize the habits and inappropriate behaviour of Gordos's characters and analyse how they should change them.

In terms of the use of films in teaching¹⁹, *Gordos* has a "plot character", since the story is focused on obesity. Educators²⁰ could use this film as a first class resource for analysing the problem of obesity, which is an indicator of the excesses and ambiguities of our society in the information and communication era.

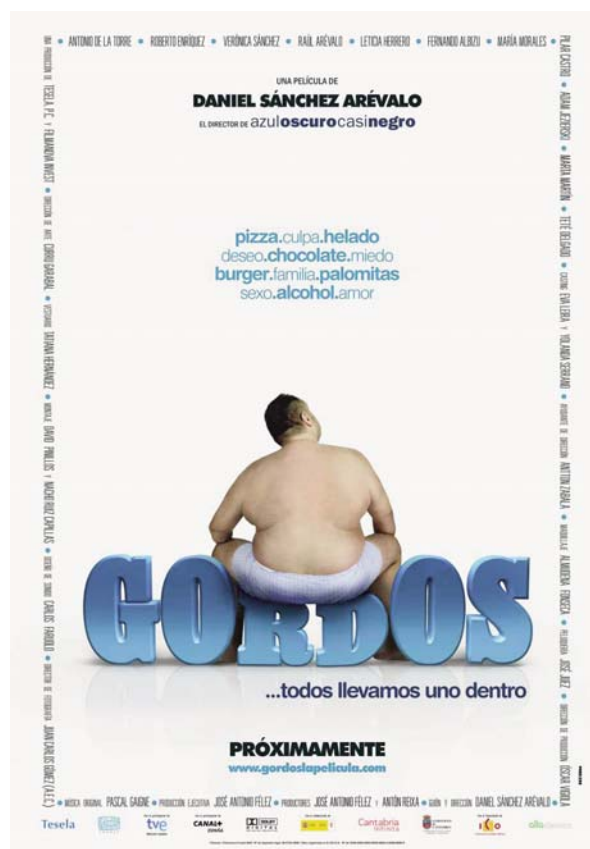
Acknowledgement

To Elisa Madera Carreño for the paper review and for its comments, critical appraisal and contributions, as psychologist in education.

Translation by the authors.

References

1. World Health Organization [Internet]. Fifty-Seventh World Health Assembly. Global strategy on diet, physical activity and health. Geneva, 17-22 May 2004. [cited 2009 September 25]. p 38-55. Available from: http://apps.who.int/gb/ebwha/pdf_files/WHAS7/A57_R17-en.pdf
2. Ministerio de Sanidad y Consumo. Situación actual y tendencia en España. [cited 2009 September 25]. Available from: <http://www.msc.es/eu/campanas/campanas06/obesidadInfant3.htm>
3. World Health Organization. Obesity: preventing and managing the global epidemic. Report of a WHO consultation. Technical report series 894. Geneva: WHO Press: 2000.
4. Gutiérrez-Fisac JL, Regidor E, Banegas JR, Rodríguez Artalejo F. Prevalencia de obesidad en la población adulta española: 14 años de incremento continuado. *Med Clin (Barc)*. 2005;124(5):196-197.
5. Aranceta-Bartrina J, Serra-Majem L, Foz-Sala M, Moreno-Esteban B y Grupo Colaborativo SEEDO. Prevalencia de obesidad en España. *Med Clin (Barc)*. 2005;125(12):460-466.
6. Albañil Ballesteros MR, Sánchez Martín M, de la Torre Verdú M, Olivas Domínguez A, Sánchez Méndez MY, Sanz Cuesta T. Prevalencia de obesidad a los 14 años en cuatro consultas de atención primaria. Evolución desde los dos años. *An Pediatr (Barc)* 2005;63(1):39-44
7. Carrascosa Lezcano A. Obesidad durante la infancia y adolescencia. Una pandemia que demanda nuestra atención. *Med Clin (Barc)*. 2006;126(18):693-694.
8. Lama More RA, Alonso Franch A, Gil-Campos M et al. Obesidad infantil. Recomendaciones del Comité de Nutrición de la Asociación Española de Pediatría. Parte I. Prevención. Detección precoz. Papel del pediatra. *An Pediatr (Barc)*. 2006;65(6):607-615
9. Gutiérrez-Fisac JL, Royo-Bordonada MA, Rodríguez-Artalejo F. Riesgos asociados a la dieta occidental y al sedentarismo: la epidemia de obesidad. *Gac Sanit*. 2006;20(Supl 1):48-54. Available from: <http://sespas.es/informe2006/p2-1.pdf>
10. Oliva J, González L, Labeagac JM, C Álvarez Dardet. Salud pública, economía y obesidad: el bueno, el feo y el malo. *Gac Sanit*. 2008;22(6):507-510. Available from: <http://scielo.isciii.es/pdf/gsv22n6/editorial.pdf>
11. Valtueña JA. El reto de la obesidad. Estrategias de respuesta. *O F F A R*



Spanish movie poster.

- M. 2008; 27 (8):33-35. Available from: http://www.elsevier.es/watermark/ctl_servlet?_f=10&pident_articulo=13126065&pident_usuario=0&pident_revista=4&fichero=4v27n08a13126065pdf001.pdf&ty=105&accion=L&origen=doymafarma&web=www.doymafarma.com&lan=es
12. Barbany Cahiz M, Foz Sala M. Tratamiento farmacológico de la obesidad. *Jano*. 2005; 68(1563): 1455-61. Available from: <http://www.jano.es/ficheros/sumarios/1/68/1563/33/1v68n1563a13074719pdf001.pdf>
13. Castillo Talavera A. Manual de obesidad para farmacéuticos: dietética y farmacología. Madrid: Abbott Laboratorios; 2003
14. Fernández Aguado C. Obesidad y sobrepeso. *Productos milagro. Aula de la farmacia*. 2006:9-18
15. Bonet Serra B, Quintaner Rioja A, Sentchordí Montane L, Lindo Gutarra D, Pérez-Lescurre Picarzo J y Martínez Orgado J. Terapia de grupo para el tratamiento de la obesidad infantil. *An Pediatr (Barc)*. 2007; 67(1):51-6
16. Correas J, García V. Obesidad y psicopatología. *Aula de la farmacia*. 2008; 8-14
17. Entrevista con Daniel Sánchez Arévalo: La obesidad es la epidemia de la sociedad capitalista civilizada. *La Gran Ilusión*. Septiembre de 2009; nº 43.
18. Moratal Ibáñez LM, Pinotti LV, Witriw AM. Adolescence and the Risk of Stereotypes: *Real Women Have Curves* (2002). *J Med Mov*. [Internet]. 2008 [cited 2009 September 25]; 4(4): 161-168. [8 p.] Available from: http://revistamedicinacine.usal.es/dmdocuments/adolescencia_ing.pdf
19. García Sánchez JE, Trujillano Martín I, García Sánchez E. Medicine and cinema, why? *J Med Mov*. [Internet]. 2005 [cited 2009 September 25]; 1: 1-2. [2 p.] Available from: http://revistamedicinacine.usal.es/dmdocuments/ed_ing_1.pdf
20. Icart MT, ACOPI. Metodología de la investigación y cine comercial: claves de una experiencia docente. *Educación Médica*. 2008; 11(2):13-18. Available from: <http://scielo.isciii.es/pdf/edu/v11n1/original1.pdf>