Endocrinologists have a role in moderating adverse metabolic consequences of early over feeding of children born SGA
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Method:
Observation of growth parameters, weight distribution and metabolic parameters of 4 PEG fed children, aged 2-4 years with a history of IUGR, referred to an endocrine service for slow linear growth

Results:
Severe central adiposity, buffalo hump and accelerated weight gain far exceeding increase in linear growth
Glucose, insulin, lipids, liver function remained in normal ranges

Conclusions:
Extreme caution should be undertaken before PEG feeding of IUGR infants and young children is considered.
Careful monitoring is required to prevent onset of features of early metabolic syndrome.
Ongoing surveillance is essential as children with rapid weight gain are those at greatest future and long heart disease and stroke.
It is a responsibility of endocrinologists to adequately inform their colleagues of cautions and special needs of IUGR children

References
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