

# Rapid BMI gain during later infant accelerates skeletal maturationat prepubertal obese children

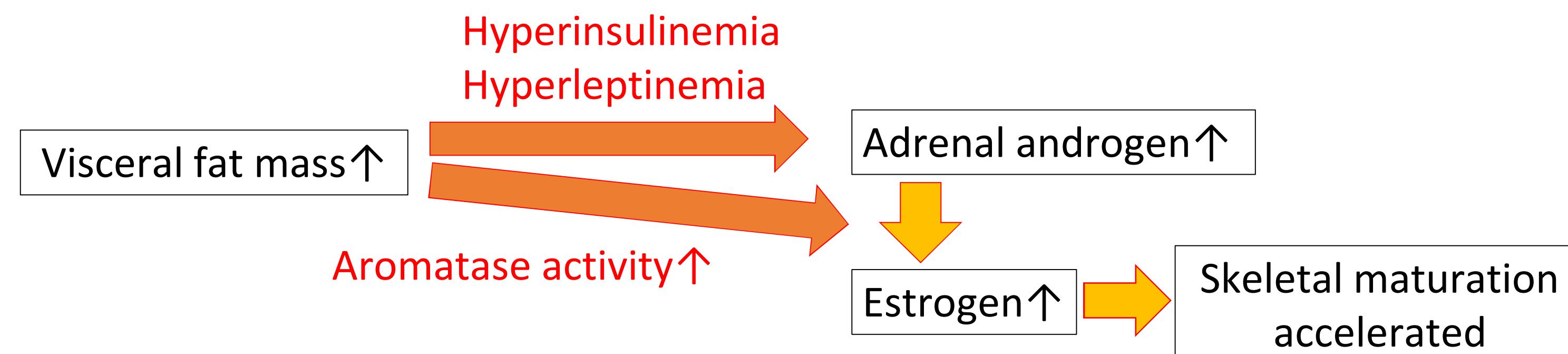
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## INTRODUCTION & OBJECTIVES

The aim of this study was to reveal the increase of BMI during later infant related with skeletal maturation in prepubertal obese boys.



## SUBJECTS and METHODS

**Subjects:** 63 Japanese 10-years old obese boys

**Measurements:** Height, weight, BMI, Bone age (BA)

BA of left hand-wrist radiographs was assessed using RUS score of the Japanese-standardized Tanner-Whitehouse 2 method.

Weight and length or height at birth, 1.5, 3 and 6 year old were obtained from maternal and child health handbook or school health check-up card.

**Statistical analysis** (JMP 9.0.0):

1) Regression analysis between relative BA and BMI or  $\Delta$ BMI

Dependent variables: relative BA

Simple liner regression: independent variables : BMI or  $\Delta$ BMI

Multiple liner regression: independent variables : Model 1 or 2

2) Logistics regression analysis: Odd's ratio of relative BA  $\geq 2$  yo

Model 1	BMI	BMI (birth)	BMI (1.5yrs)	BMI (3yrs)	BMI (6yrs)	BMI (10yrs)
Model 2	$\Delta$ BMI		$\Delta$ BMI (1.5 to 3 yrs)	$\Delta$ BMI (3 to 6 yrs)	$\Delta$ BMI (6 to 10yrs)	

## RESULTS 1

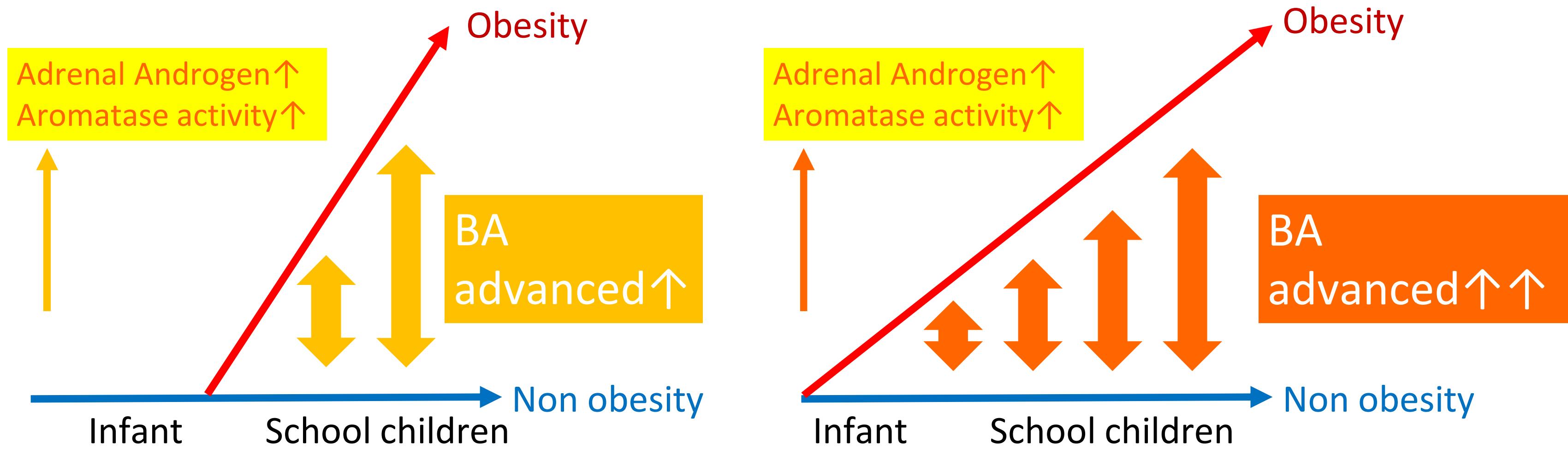
The profiles of the subjects

	Mean	$\pm$ SD	Min	Median	Max
Chronological age yo	10.1	$\pm$ 0.3	9.6	10.2	10.5
Bone age yo	11.8	$\pm$ 1.4	7.7	12.1	14.1
Relative bone age yo	1.7	$\pm$ 1.3	-1.9	2.0	3.7
BH cm	141.4	$\pm$ 6.2	122.4	142.3	153.1
BW kg	51.6	$\pm$ 6.3	38.1	51.2	64.6
BH SD score	1.00	$\pm$ 1.03	-1.96	1.10	3.18
Relative weight %	47.1	$\pm$ 12.9	29.8	44.3	92.6
Birth weight kg	3284	$\pm$ 445	2360	3228	4324
BMI (birth)	13.2	$\pm$ 1.4	10.8	13.0	16.9
BMI (1.5 yo)	17.0	$\pm$ 1.4	14.2	17.1	21.1
BMI (3 yo)	17.5	$\pm$ 2.1	14.2	17.1	25.4
BMI (6 yo)	20.4	$\pm$ 3.0	15.6	20.2	29.3
BMI (10 yo)	25.8	$\pm$ 2.1	22.7	25.2	32.6
$\Delta$ BMI (1.5 to 3 yo)	0.4	$\pm$ 1.7	-2.2	0.1	6.4
$\Delta$ BMI(3 to 6 yo)	3.0	$\pm$ 2.4	-2.5	2.8	7.7
$\Delta$ BMI(6 to 10 yo)	5.3	$\pm$ 2.3	0.0	5.3	9.9

Relative bone age =Bone age - Chronological age

## DISCUSSION

Bone age advanced in childhood obesity would be related to duration and grade of obesity which associates the increase of androgen and activated aromatase activity.



## RESULTS 2

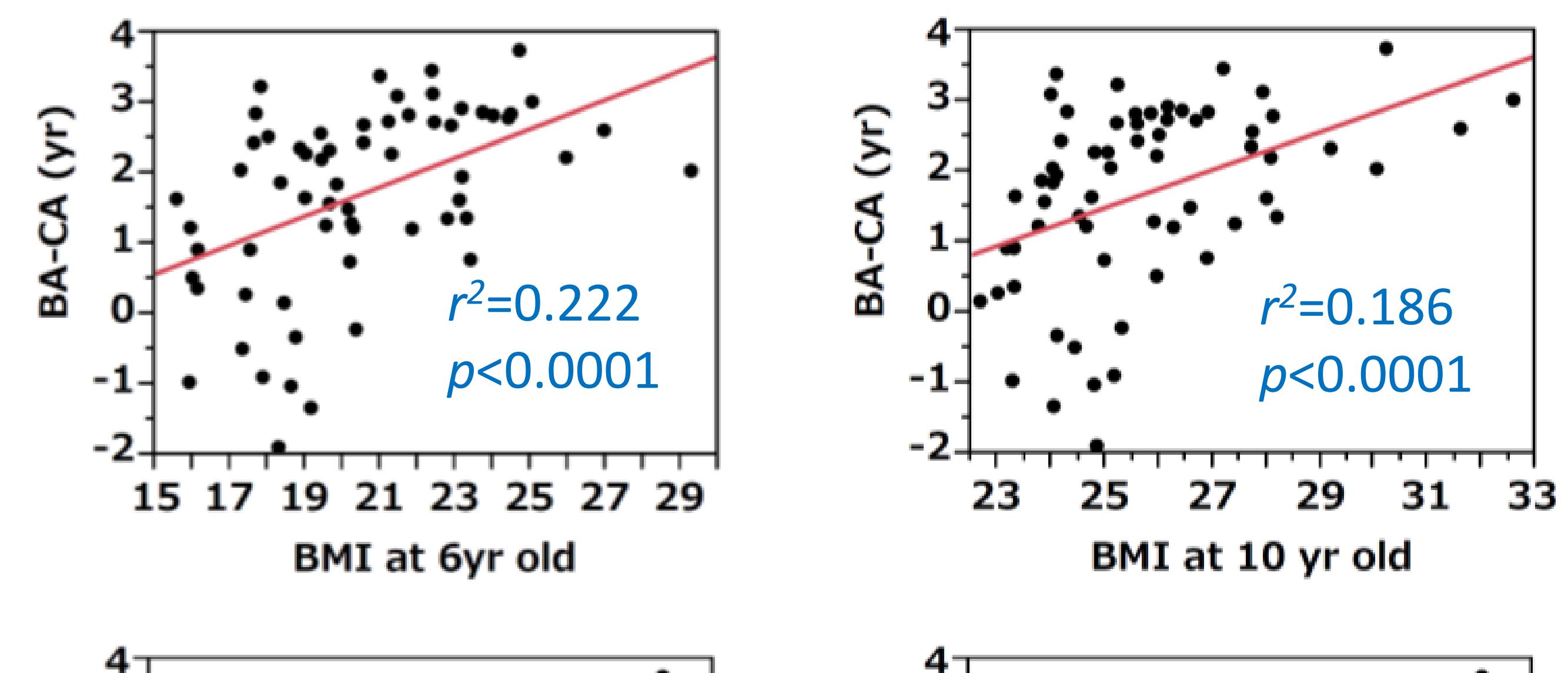
The results of the simple and multiple linear regression analyses of relationship between relative BA and BMI at each age

Independent variables	Simple regression		Multiple regression (model 1)		$R^2$
	$r^2$	p	slope	p	
BMI (birth)	0.017	0.3032	0.049	0.674	
BMI (1.5 yo)	0.001	0.8052	-0.174	0.215	
BMI (3 yo)	0.047	0.0873	0.019	0.858	0.275
BMI (6 yo)	0.223	<0.0001	0.171	0.027	
BMI (10 yo)	0.186	0.0004	0.102	0.309	

The results of the simple and multiple linear regression analyses of relationship between relative BA and  $\Delta$ BMI at each period

Independent variables	Simple regression		Multiple regression (model 2)		$R^2$
	$r^2$	p	slope	p	
$\Delta$ BMI (1.5 to 3yo)	0.087	0.019	0.263	0.007	
$\Delta$ BMI (3 to 6yo)	0.156	0.001	0.246	0.001	0.257
$\Delta$ BMI (6 to 10yo)	0.049	0.081	0.062	0.442	

The scatter graphs of the relationship between relative BA and BMI or  $\Delta$ BMI



Odd's ratio of relative bone age over 2 yo using logistics regression analysis

	Logistics regression analysis				Multiple logistics regression analysis				
	Independent variables	OR	95% CI	$R^2$	p	OR	95% CI	$R^2$	p
$\Delta$ BMI (1.5 to 3 yo) $\geq 0$	1.61	(1.07-2.44)	0.0089	0.0213	1.47	(0.95-2.30)			
$\Delta$ BMI (3 to 6 yo) $\geq 2$	2.18	(1.46-3.29)	0.0248	0.0001	1.99	(1.18-3.40)	0.0313	0.0003	
BMI (6 yo) $\geq 20.0$	1.94	(1.28-2.96)	0.0171	0.0014	1.10	(0.61-1.95)			

## CONCLUSION

Rapid BMI gain and high BMI at later infant period accelerates skeletal maturation in prepubertal obese children. This disorders of bone growth are irreversible and will lead to suboptimal final height and will affect their quality of life.

57<sup>th</sup> ESPE 2018 Meeting  
Disclosure of head presenter's COI  
Name of head presenter, Toru Kikuchi  
In connection with the presentation,  
I disclose COI with the following companies/organizations  
Honorary for lectures: Sanofi k.k., Novo Nordisk A/K