

One Year Screening Program for Stature Deviations - Strategy and Outcome



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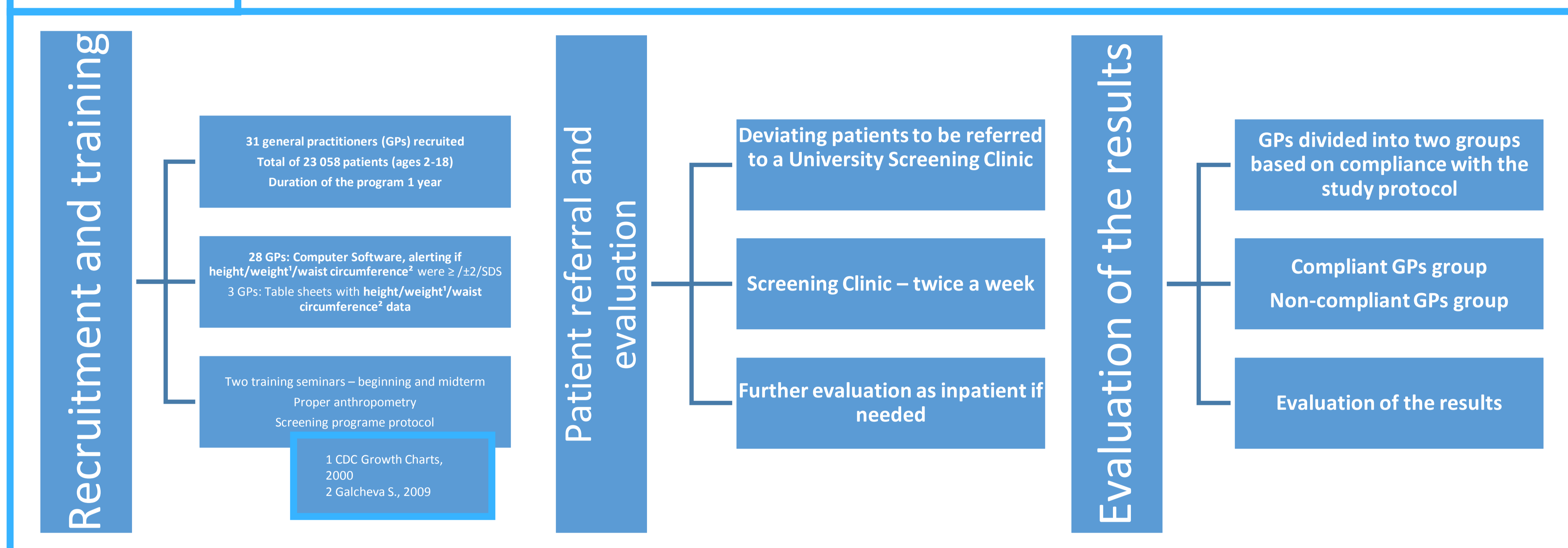
Background:

Many children still miss the early recognition of their stature problems due to inefficient screening strategies.

Objective and hypotheses:

To assess stature deviations referral through recruiting general practitioners (GPs) and providing them with tools for easier anthropometric data assessment and enhanced access to the Paediatric Endocrinologist.

Methods:



Results:

24 478 health check visits with anthropometric measurements

- A total of 81 short children found
 - 0.35% of all participants
 - 11.7% of the expected*
- *expected 3% of the population – 734 short children

Short children found in the Compliant vs the Non-compliant GPs groups

	Compliant GPs group	Non-compliant GPs group
Health-check visits	11423	13055
Short children	70	11
Previously investigated for short stature	8	3
% of expected	21.8%	2.97%
Evaluated at the University Screening Clinic	30	2

University Screening clinic assessment

- 39.5% (32 children) of the 81 found short showed up
- Compliance GPs group
 - 30 children
 - 42% of those found to be short
- Non-compliance GPs group
 - 2 children
 - 18.2% of those found to be short

Full anthropometric data, available for 2552 health-check visits**

	Children with deviations	Boys	Girls	% of investigated
Short stature	28	20	8	1.09%
Tall stature	204	103	101	7.99%
Tall stature + obesity	82	42	40	3.21%
Tall stature without obesity	122	62	60	4.78%
Overweight/obese	180	52	71	7.05%
Increased WC	233	108	125	9.13%

** all visits in the Compliant GPs group

Additional evaluation as inpatient

- 12 children referred
- 9 children showed up
 - 4 with constitutional delay of growth and puberty
 - 3 with syndromic short stature
 - 2 with GH deficiency

Percentage of the newly diagnosed children with short stature was higher in the Compliant GPs group. Only 39.5% of all the newly found short children showed up for evaluation.

Additional 2 children from the studied group were not referred by their GPs and came to the Clinic through self-found information.

Conclusion: This screening strategy proved as inefficient. The large share of non-attendance and assessment refusal shows that future strategies with media advertising might prove more beneficial. The tendency towards tall stature might be due to the use of growth curves for a foreign population, underlining the importance of introduction of local anthropometric data. Our data supports the worldwide tendency towards increased weight and waist circumference.

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