

Cognition, health-related quality of life and psychosocial functioning after GH/GnRHa treatment in young adults born SGA

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Conclusion

Combined GH/GnRHa treatment has no long-term negative effects on cognition, HRQoL, self-perception and problem behaviour in early adulthood, compared to GH treatment only.

Background

Children born small for gestational age (SGA) with a poor adult height expectation benefit from treatment with growth hormone (GH) and additional 2 years of gonadotropin-releasing hormone analogue (GnRHa).

As both SGA birth and GnRHa-treatment might negatively influence cognition, HRQoL and psychosocial functioning, we assessed these outcomes at adult height (AH).

Objective

To compare cognitive functioning and HRQoL at AH attainment in subjects born SGA treated with GH, either with additional 2 years of GnRHa treatment after onset of puberty (GH/GnRHa), or with GH treatment only (GH)¹.

Methods

Study groups: GH/GnRHa (n=69) vs GH (n=67)

Questionnaires at adult height

- Cognitive functioning (WAIS)
- Health-related quality of life (TAAQOL)
- Self –perception (CBSA)
- Problem behaviour (ABCL/CBCL)

Clinical characteristics

Clinical characteristics were similar in both groups.

Clinical characteristics								
	GH/GnRHa	GH						
	Means (SD)	Means (SD)	p-value					
Male/Female	24/37	22/16	0.072					
Gestational age	37.76 (3.27)	37.64 (2.82)	0.847					
Birth weight (SDS)	-1.99 (0.89)	-1.83 (0.99)	0.410					
Birth length (SDS)	-2.72 (1.04)	-2.47 (0.95)	0.289					
Height at start GH	-3.07 (0.65)	-3.06 (0.55)	0.930					
Adult height SDS	-1.70 (0.79)	-1.45 (0.86)	0.184					

Table 1: Clinical characteristics

¹Lem, van der Kaay et al. *JCEM* 2012

Results

Cognitive functioning at adult height									
	GH/GnRHa		GH						
	Means (SD)	SD-scores	Means (SD)	SD-scores	p-value				
Verbal	96.31 (14.09)	-0.25 (0.94)	92.87 (10.52)	-0.48 (0.70)	0.198				
Performance	97.15 (13.63)	-0.19 (0.91)	94.21 (12.12)	-0.39 (0.81)	0.280				
Total	96.33 (13.47)	-0.24 (0.90)	92.47 (10.38)	-0.51 (0.69)	0.135				

Table 2: Mean (SD) cognitive functioning at adult height in GH/GnRHa and GH groups. SD-scores: Standard deviation scores for reference population.

Health-related quality of life at adult height								
	GH/GnRHa	GH	GH/GnRHa vs. GH	References	All groups			
	Means (SD)	Means (SD)	p-value	Means (SD)	p-value			
Gross motor function	95.23 (12.43)	95.42 (9.28)	0.660	96.46 (9.54)	0.735			
Fine motor function	99.19 (2.72)	98.33 (6.34)	0.755	98.60 (6.78)	0.771			
Cognitive function	78.42 (21.29)	82.76 (18.04)	0.422	87.86 (18.46)	0.002			
Sleep	74.42 (27.10)	74.78 (22.99)	0.904	82.95 (17.88)	0.159			
Pain	81.25 (18.69)	79.53 (21.96)	0.989	86.95 (14.75)	0.129			
Social function	93.06 (11.24)	92.86 (11.12)	0.592	91.66 (13.52)	0.876			
Daily activities	90.45 (12.05)	88.61 (17.09)	0.784	85.23 (19.34)	0.566			
Vitality	71.13 (18.21)	69.54 (15.55)	0.418	69.34 (19.57)	0.763			
Positive emotion	76.63 (19.00)	66.39 (25.47)	0.039	74.34 (18.42)	0.093			
Depressive emotion	85.89 (16.27)	83.15 (19.64)	0.539	82.61 (15.22)	0.237			

Table 3: Mean (SD) health-related quality of life in GH/GnRHa, GH group and reference population. Bold p-scores indicate significance.

83.91 (19.15)

0.066

89.32 (14.23)

0.176

Cognitive functioning:

Aggressive emotion

IQ scores between normal ranges.

92.00 (10.54)

- Intelligence quotient scores were similar in GH/GnRHa and GH-group (96.33 vs. 92.47).
- After correcting for the difference in socioeconomic status, the two groups did not differ in IQ-scores.

Health-related quality of life

- GH/GnRHa-group had a significantly lower perception of cognitive functioning.
- HRQoL was similar between both groups for all other categories.

Self-perception & Problem behaviour

 Self-perception and problem behaviour were similar in the GH/GnRHa and GH-group.

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