ANTHROPOMETRIC AND CLINICAL SITUATION IN TWO GROUPS OF YOUNG ADULTS BORN SMALL FOR GESTATIONAL AGE (A GROUP WITH CATCH-UP AND ANOTHER WITHOUT CATCH-UP AND TREATED WITH GROWTH HORMONE)

INTRODUCTION

Children Small for Gestational Age (SGA) are known to have lower neurocognitive development and an increased cardiovascular risk in adulthood. 10% of SGA don't usually do the catch-up and if they meet criteria they have indication to follow Growth Hormone (GH) treatment.

MATERIAL AND METHODS:

Data were collected from a sample of 61 adults born SGA (treated and not treated with GH). Informed consent was obtained by phone, as well as clinical-analytical data that were contrasted with the clinical history.

*Exclusion criteria: prematurity, multiple parity and syndromes

					RESU	
	CATCH-UP GROUP			NO CATCH-UP GROUP		
	31 adults (15	female)		30 adults (15	female)	
Age (years)	27,5 (23-32)			22,8 (18-30)		
Newborn anthropometry (SDS	WB: -3,0 [-4,		-Student -3,1, p<0,001 2 -1,27 a -0,47).	WB: -2 [-3,8	WB: -2 [-3,8- (-0,4)]	
	LB: -3,2,[-4,		-Student -4,3 p<0,03, C -1,1 a -0,24).	LB: -2,37 [-5,55-(-1,9]		
	CATCH-UP GROUP		ANALISIS	S NO CATCH	NO CATCH-UP GROUP	
Final height (cm) 16	오 60,8 (152-174)	ර ි 169,7 (160-18	T-Student (9 p<0,001 9) (IC 0,4-1,3	¥	♂ 167(160- 170,5)	
Final height- Target height (FH – TH) SDS	-0,31 SDS (-2,7- 1,54)		No signifea difference			
	No				For 6,7 years (1,5-12,5)	

CONCLUSIONS

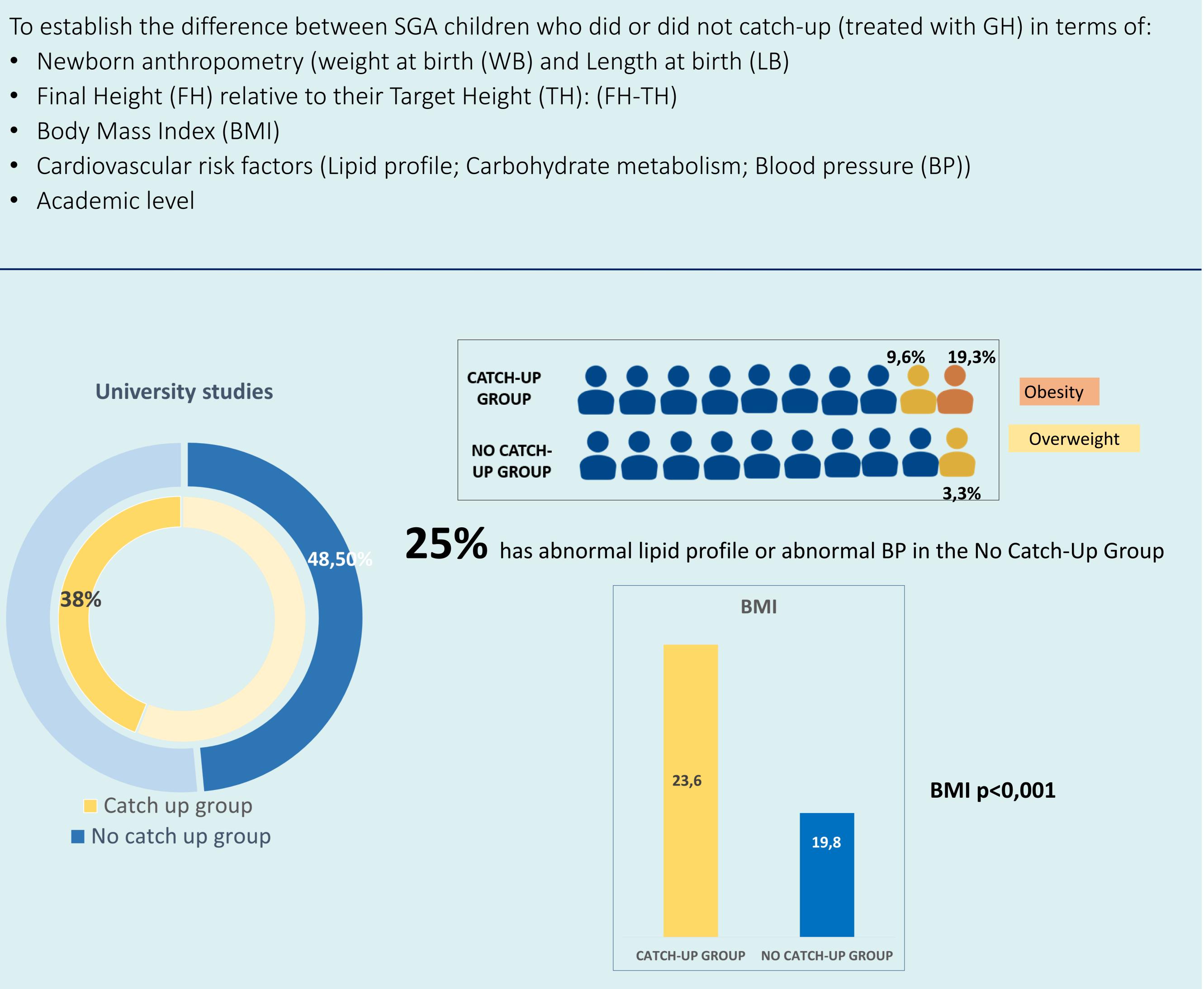
- Both groups reach similar academic levels
- There are no differences between the two groups in FH-TH.

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• Anthropometric data at birth (WB and LB) are lower in the catch up group whereas the final size is larger.

• BMI is higher in those who did catch-up and they seem to present higher cardiovascular risk.

OBJECTIVES:





P2-203