Tehran University of

Medical Sciences

2	Current Issue
	Browse Issues
P	Search
6	5
2)	About this Journal
1	Instruction to Authors
0	Online Submission
6	Subscription
Č)	Contact Us
6	>
2	RSS Feed

Acta Medica Iranica 2009;47(4) : 341-346

"Catch-up growth of children after renal transplantation - Labafi-Nejad Hospital (1998-2000) "

Otukesh H, Hooman N

Abstract:

Introduction: Children with coronary renal failure had problems with their catch-up growth. The aim of this study was the Assessment of catch-up growth of children after renal transplantation by analyzing the 6 months changes in height deficit and height standard deviation scores (SDS) on age, sex, initial height deficit, initial SDS, graft function, renal failure duration and renal transplantation duration. Methods and Materials: Between 22 September 1998 and 2000, 25 pediatric recipients followed up quarterly for height in the Labafi-Nejad hospital. Data on height submitted at each 6month follow-up were converted into height and SDS. All the results were analyzed by simple and multiple regression and t-test. Results: 68 percents were male and 32 percent were female Mean age at transplantation was 10.39±2.95 SD years. The average duration of renal transplantation was 20.7±8.96 SD months. The aerage of height deficit was 20.7 cm (±10.55 SD) and SDS -3.5 (±1.72 SD) at the time of renal transplantation. The height deficit was more significant in the patients with tubulopathy. Catch-up growth observed at month 12. That was more obvious in females, in patients with tubulopathy disorders, in preemptives and in all three age groups. Simple and stepwise regression analysis showed that at month 12 only initial height deficit (P<0.05) and at month 24, only sex (P<0.05) were independent predictor of improved height post transplantation. Catch-up growth were seen in more student patients and girls. This may be the result of puberty spurt that occur two years sooner in girls than in boys. Conclusion: In this study we concluded that the renal transplantation alone is not sufficient measure for correction of catch-up growth in renal failure children and because of that the other treatments should come under consideration.

Keywords:

Height deficit . Catch-up growth

TUMS ID: 1403

Full Text HTML 🥘 Full Text PDF 🖄 1015 KB

Home - About - Contact Us

TUMS E. Journals 2004-2009 Central Library & Documents Center Tehran University of Medical Sciences

Best view with Internet Explorer 6 or Later at 1024*768 Resolutions