

How do your children grow?

March 8 2013

(Medical Xpress)—We know how Mary, Mary, Quite Contrary's garden grows, but what about our kids? From marks on a wall to spending what seems like a fortune on clothes, parents are often fascinated by the growth of their children.

"One of the things parents are most interested in when they come to see me are their kids' stats such as how tall and how much they weigh," said Margaret McMahon, MD, [pediatrician](#) at Loyola University Health System and assistant professor of Pediatrics at Loyola University Chicago Stritch School of Medicine.

For a physician, growth is more than just a change in height. It's an increase in height, weight and other changes the body makes as a child matures into an adult. In the first year of life children change rapidly, on average growing more than 10 inches in length and tripling their [birth weight](#). After that first year the rate of growth slows down dramatically until adolescence.

"Normal growth is not linear. There are times of rapid growth that alternate with times of no growth. It is best to monitor a child's growth over time and we do that using growth curves," McMahon said. "Usually after [infancy](#) a child will follow one channel on the growth curve. If he or she does not follow that curve, further assessment needs to be done."

Though a physician will monitor a child's growth with a growth curve, it's also important for parents to realize that children differ in growth and development during childhood. Parents should avoid comparing a

child's growth with siblings or other children. They also shouldn't place too much importance on one aspect of a child's growth as this could affect a child's self-esteem.

Still, there are times when growth appears to be delayed or accelerated, which requires further evaluation. According to McMahan, assessments usually start with a careful family history and exam, a review of growth curves, family patterns and [bone age](#). Based on those tools a physician can determine if further steps need to be taken, which could include testing and referral to a specialist.

"When growth appears to be delayed or accelerated it's important to do an evaluation to determine if it's a familial pattern, constitutional growth delay or a pathological process," McMahan said.

A constitutional growth delay is when a child follows a normal growth path, but it is significantly below the expected curve based on predictions of growth derived from a mid-parental height calculation and confirmed by bone age.

"Kids with constitutional growth delays usually achieve their genetic growth potential, but at a delayed rate," McMahan said.

A pathologic growth delay occurs when a patient's growth has veered off the growth curve or flattens out.

"Kids with a pathologic growth delay usually have short stature unless the underlying cause can be corrected," McMahan said.

Some factors that might cause this are:

- Genetic potential

- Genetic disorders and syndromes
- Endocrinologic disorders
- Metabolic problems
- Chronic diseases

"If a child is growing appropriately on his or her own individual growth curve, parents can usually be reassured that their child's growing at a normal rate for them," McMahan said.

Provided by Loyola University Health System

Citation: How do your children grow? (2013, March 8) retrieved 27 April 2024 from <https://medicalxpress.com/news/2013-03-children.html>

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