

Assessment of General Characteristics of Children according to Anorexia Status



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Outline

Introduction /Aim

Material /Methods

Result

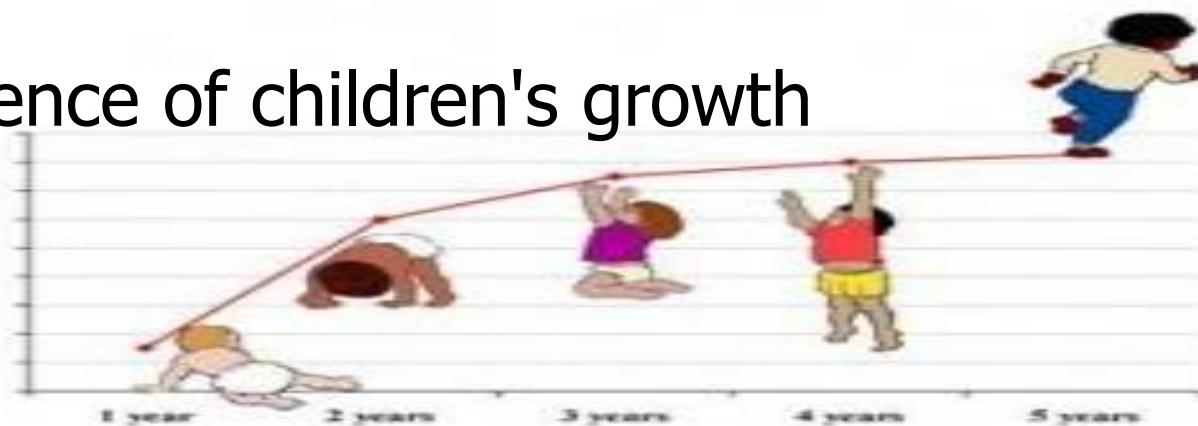
Conclusions

Loss of appetite

The unwillingness to eat



Influence of children's growth



Nutrition influences the growth and development of the child



Organic causes of inappropriate eating behavior

-  **Malabsorption**
-  **Gastroesophageal reflux**
-  **Vomiting and diarrhea due to gastroenteritis**
-  **Oral-motor anatomical defects**
-  **Dysphagia, High Palate**
-  **Chronic diseases**
-  **Macroglossia, Malocclusion**
-  **Metabolic diseases**
-  **Gastric motility disorders**

Assessing inappropriate eating behaviors

Development



Nutrition



Family history



Aim of the study



Determination of general socio-demographic and disease symptoms of children who applied to polyclinic with complaints of loss of appetite

contribute to the training activities for this purpose 7

Material –methods

n-198

Had not acute infection and
gastrointestinal system disease

Had at least one-month loss of appetite

Volunteered to participate between
01.02.2015-01.08.2015

Material –methods

Weight /Height and Relative weight measurements of patients according to age

Three categorizations were made according to the 3-day diet list and Evaluation of the questionnaire forms

SPSS Windows 21.0

Questionnaire Form

56 Questions

İŞTAHSIZLIK BİLGİ ANKET FORMU

ANKETE KATILANIN İŞTAHSIZ ÇOCUĞUN:

1- ADI SOYADI:

2- DOĞUM TARİHİ- YAŞI:

3- GEST. YAŞ: a. Prematüre(<37 hf) b. Term

4- CİNSİYET: a. Kız b. Erkek

5- DOĞUM AĞIRLIĞI: a. <2500 gr b. 2500- 4000 c. >4000 gr

6- İLETİŞİM NO:

7- OTURDUĞU YER: a.Şehir merkezi b. Köy

8- AİLENİN AYLIK GELİRİ: a. 1000 tl ve altı b. 1000-2000 tl arası c. 2000-3000 tl arası d. 3000 tl üstü

9- ANNE YAŞI: a. 20 yaş altı b. 20-30 yaş c. 30-40 yaş d. 40 yaş üstü

10-KAÇ KARDEŞ: a. 1 b. 2 c. 3 d. 4 e. > 5

11-ANNE ÇALIŞIYOR: HAYIRSA 12. SORUYA GEÇİNİZ.

a. Evet b. Hayır

12-ANNENİN İŞYERİNİN EVİNE UZAKLIĞI:

a. 1-15 dk b. 16-30 dk c. 31-45 dk d. 45-60 dk e. > 60 dk

13-ANNE MESLEĞİNDE GECE MESAİSİ VAR MI (SAAT 16'DAN SONRA)?

a. Evet b. Hayır

14-AİLE YAPISI a. Çekirdek aile b. Geniş Aile

15-ANNENİN EĞİTİM DÜZEYİ:

a. Okuma-Yazma bilmiyor b. İlköğretim mezunu
Üniversite mezunu c. Lisans mezunu d. İmam Hatip Mezunu

16-BABANIN EĞİTİM DÜZEYİ:

a. Okuma-Yazma bilmiyor b. İlköğretimmezunu
Üniversite mezunu c. Lisans mezunu d. İmam Hatip Mezunu

17- ANNE BABA AİRI Mİ (İŞTAHSIZ OLAN ÇOCUĞUN)?

a. Evet b. Hayır

18-AİLEDE ORGANİK DİJİTAL GADGETLER KULLANIMI:

- General personnel information
- Family history
- Loss of appetite and other symptoms history
- Feeding habits

a. Evet b. Hayır

19-KAÇИНСИ ÇOCUK? a. 1 b. 2 c. 3 d. 4 e. >5

20-İŞTAHSIZLIK İÇİN AİLE ÖYKÜSÜ VAR MI (DİĞER KARDEŞLER, ANNE VEYA BABADA- ŞİMDİ VEYA ÖNCESİNDE-)?

a. Evet b. Hayır

21-AİLE ÖYKÜSÜ VARSA, KİMDE? a.Kardeş b. Anne veya baba c. Hepsi

22- İŞTAHSIZLIK NE ZAMANDAN BERİ VAR?

a. Doğumdan itibaren b. 2-7 ay arası c. 7 ay-3 yaş arası d. >3 yaş (SÜRESİ)

23- KİLO KAYBI VAR MI? a. Evet b. Hayır

24- KABİZLIK VAR MI? a. Evet b. Hayır

25- KUSMA VAR MI? a. Evet b. Hayır

26- ÇOCUK KENDİSİ BESLENEBİLİYOR MU? a. Evet b. Hayır

27- KAÇ YAŞINDAN BERİ KENDİ BESLENEBİLİYOR?

a. 3 yaş altı b. 3 yaş üstü

28- ÇOCUĞUN BAKIMI VE BESLENMESİ KİM TARAFINDAN SAĞLANIYOR?

a. Anne b. Baba c. Anneanne/ Babaanne d. Bakıcı e. Diğer (belirtiniz)

29- BESLENME SAATLERİ DÜZENLİ Mİ? a. Evet b. Hayır

30- GÜNDE KAÇ ÖĞÜN BESLENİYOR? a. 2 öğün düzenli b. En az 3 öğün düzenli

c. 1-2 öğün düzensiz d. En az 3 öğün düzensiz

31- ACIKMA SÜRESİ NE KADAR?

a. Hiç açılmıyor b. 0-3 saat kadar c. 3-5 saat arası d. 5 saat üstü

32- BİR OGÜNDE BESLENME SÜRESİ NE KADAR?

a. <15 dk b. 15-30 dk arası c. >30 dk

33- YEMEK ARALARINDA ATIŞTIRMA ALIŞKANLIĞI VAR MI?

a. Evet b. Hayır

34- YEMEK ARALARINDA ATIŞTIRMA SIKLIĞI NE KADAR?

a. 1-2 kez

Three categorizations

real appetite = insufficient calorie intake

normal appetite= adequate and balanced calorie intake

selective appetite = adequate-calorie intake but unbalanced diet

Chi-square analysis: Whether the other characteristics of the children changed according to the loss of appetite.

Results

n-198

6 months – 15 years

01 Feb.- 01 Aug 2015



%40

Gender



%60

Real appetite
%39

Normal appetite
%26

Selective appetite
%35

Results

Loss of Appetite	Real		Normal		Selective		Total		P	
	n	%	n	%	n	%	n	%		
Gender	Male	48	40,3	36	30,3	35	29,4	119	61%	0,085
	Female	30	38	15	19	34	43	79	40%	
Socioeconomic status	Low	41	55,4	13	17,6	20	27	74	38%	0,003
	Average	28	34	21	25,6	33	40,2	82	42%	
Mother working status	High	9	21,4	17	40,5	16	38,1	42	21%	0,04
	Yes	9	23,7	15	39,5	14	36,8	38	19%	
Sequence of birth	No	69	43,1	36	22,5	55	34,4	160	82%	0,428
	1.	41	44,6	20	21,7	31	33,7	92	47%	
Family structure	2.	24	37,5	16	25	24	37,5	64	33%	0,648
	>2.	13	31	15	35,7	14	33,3	42	21%	
Family history about loss of appetite	Core	61	38,6	43	27,2	54	34,2	158	81%	0,515
	Crowded	17	42,5	8	20	15	37,5	40	20%	
Family history about loss of appetite	Not	45	35,7	33	26,2	48	38,1	126	64%	0,425
	Brother/sister	22	42,3	14	26,9	16	30,8	52	27%	
Constipation	Mother/Father	11	55	4	20	5	25	20	10%	0,425
	Yes	26	46,4	12	21,4	18	32,1	56	29%	
Who feeds child	No	52	36,6	39	27,5	51	35,9	142	72%	0,826
	Mother	72	39,8	45	24,9	64	35,4	181	92%	
Behavior disorder	Grandmother	5	28,5	4	30,8	4	30,8	13	7%	0,105
	Carer	1	25	2	50	1	25	4	2%	
Duration of breast feeding	Yes	59	41,3	31	21,7	53	37,1	143	73%	<0,001
	No	19	34,5	20	36,4	16	29,1	55	28%	
Anemia	<6 months	21	36,8	12	21,1	24	42,1	57	29%	<0,001
	6-12 months	32	42,7	21	28	22	29,3	75	38%	
Weight percentile	13-24 months	17	27,8	10	22,2	18	40	45	23%	<0,001
	>24 months	8	28,1	8	38,1	5	23,8	21	11%	
Relative weight	Yes	35	46,1	18	23,7	23	30,3	76	39%	<0,001
	No	43	35,2	33	27	46	37,7	122	62%	
25OH D vit level	<3 p	23	95,8	1	4,2	0	0	24	12%	<0,001
	3-10 p	46	68,7	3	4,5	18	26,9	67	34%	
25OH D vit level	11-50 p	9	11,1	32	39,5	40	49,4	81	41%	<0,001
	>50 p	0	0	15	57,7	11	42,3	26	13%	
25OH D vit level	< %80	48	96	0	0	2	4	50	26%	<0,001
	%80-90	15	29,4	12	23,5	24	47,1	51	26%	
25OH D vit level	%91-110	15	15,5	39	40,2	43	44,3	97	49%	<0,001
	<15 md/dl	41	75,9	3	5,6	10	18,5	54	28%	
25OH D vit level	15-30 mg/dl	34	28,8	33	28	51	43,2	118	60%	<0,001
	>30 mg/dl	3	11,5	15	57,7	8	30,8	26	13%	

p<0,05

Statistical significance

Socioeconomic status 0,003

Mother working status 0,04

Weight percentile <0,001

Relative weight <0,001

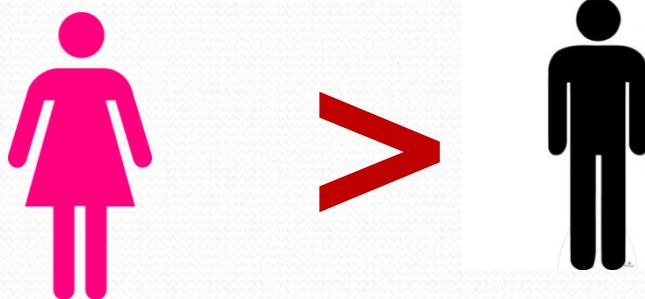
25OH D vit level <0,001

Results

Loss of appetite

Not show a statistically significant change according to sex ($p = 0.085$)

Selective anorexia rate



43% **29.4%**

Results

Loss of appetite changes according to the...

Level of income ($P = 0,003$),

Maternal working status ($P = 0,040$),

Serum 25 OH-D vitamin levels ($P < 0,001$),

Growth development(Weight-Relative weight percentil) ($P < 0,001$)

Results

Loss of appetite found **a higher rate** for:



- Children with lower income levels and
- Those with non-working mothers

Results

Lower rate for children without real appetite

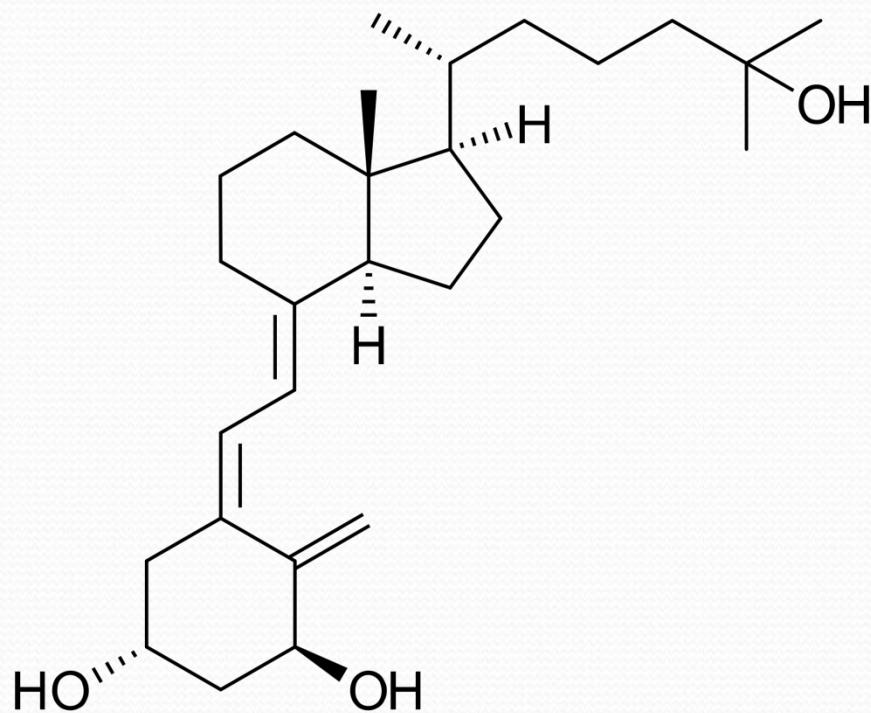


- Lower rate in Body weight percentile
- Lower rate in relative weight values

Results

Higher rate of loss of appetite

- Patients with serum 25OH-Dvitamin levels <15 mg / dL



Results

There is no significant effect of factors such as;

- Family Structure,
- Lack of Appetite in Family
- Who is fed by the individual

($P > 0,05$)

Results

20-35%



Children having loss of
appetite and eating
problems

33-90%



Children with
developmental delay

Conclusions

Loss of appetite is seen also in the group with a percentage between 3 and 10 weight percent and a relative weight between 80 and 90 percent



Conclusions

Patients close to the lower limit of the normal percentage and relative weight loss should be followed closely.

Suggestions in terms of balanced nutrition and nutritional behavior of patients with selective appetite.



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