

**Table 2-2: Charts/Tables Used to Monitor Growth of Children with Special Health Care Needs<sup>†</sup>**

Growth Chart	Study sample information	Ages	Parameters	Limitations	Use with CDC
NCHS (1977) <sup>17</sup>	20,000 children, 1934-64; NHES and NHANES I; 5 <sup>th</sup> -95 <sup>th</sup> %iles	0-3 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>length/age</li> <li>OFC/age</li> <li>weight/length</li> </ul>	Data is longitudinal for infants and cross-sectional for children	
NCHS (1977) <sup>17</sup>	20,000 children 1934-64; NHES and NHANES I; 5 <sup>th</sup> -95 <sup>th</sup> %iles	2-18 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>height/age</li> <li>weight/height</li> </ul>	Data is cross-sectional for children	
CDC (2000) <sup>1</sup>	Previous data plus NHANES III data; 3 <sup>rd</sup> -97 <sup>th</sup> %iles	0-3 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>length/age</li> <li>OFC/age</li> <li>weight/length</li> </ul>		
CDC (2000) <sup>1</sup>	Previous data plus NHANES III data; 3 <sup>rd</sup> -97 <sup>th</sup> %iles	2-20 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>height/age</li> <li>weight/height (2-6 years)</li> <li>BMI/age</li> </ul>		
Crown-rump <sup>18</sup>	~75 females, 75 males			Longitudinal data	Use with CDC weight/ age
Sitting height <sup>19</sup>	NCHS 1977 population	1-18 years	<ul style="list-style-type: none"> <li>sitting height/age</li> </ul>	Caucasian and African American children only	Use with CDC weight/ age
Knee height <sup>20</sup>	13,821 ambulatory children NHES I,II,III, 1960-70	6-12 years	<ul style="list-style-type: none"> <li>knee height/age</li> </ul>	Use equation for race (85% Caucasian children); Difficult to do	Use with CDC weight/ age
Incremental growth <sup>9</sup>	Children who grew "close" to NCHS 1977	6-36 mos 2-18 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>stature/age</li> </ul>	Caucasian children only	Use with CDC for weight/age, length or height/age, weight/length or height

<sup>†</sup> All charts have sex-specific versions for male and female children (except for Turner syndrome charts).

Growth Chart	Study sample information	Ages	Parameters	Limitations	Use with CDC
Triceps skinfold thickness, upper arm circumference <sup>10</sup>	NCHS 1977 population	2-18 years	<ul style="list-style-type: none"> <li>triceps skinfold/age</li> <li>upper arm circumference/ age</li> <li>upper arm fat area/age</li> </ul>	Use after age 2 years, Caucasian children only	Use with CDC weight/age, length or height/age, weight/length or height, or BMI/age
Mid-arm circumference; triceps skinfold, subscapular skinfold thicknesses <sup>13,14,15</sup>	NCHS 1977 population	2-18 years		Use after age 2 years	Use with CDC weight/age, length or height/age, weight/length or height, or BMI/age
Parent-specific adjustment for length/stature <sup>11</sup>	586 parent-child pairs (Fels data) and 16,000 serial length and height measurements	0-36 mos 3-18 years		Note parent height on chart	Use with CDC weight/age, length or height/age, weight/length or height, or BMI/age
Achondroplasia <sup>22</sup>	189 males, 214 females	0-18 years	<ul style="list-style-type: none"> <li>height/age</li> <li>height velocity/age</li> <li>upper, lower segment lengths/age</li> <li>OFC/age</li> </ul>	Small sample size, especially children over 10 years	Compare to CDC weight/age, length or height/ age; use with CDC for weight/length or height or BMI/age
Cerebral palsy <sup>23</sup>	360 children (males and females), 0-120 months with quadriplegia	0-10 years	<ul style="list-style-type: none"> <li>length/age</li> <li>weight/age</li> <li>weight/length</li> </ul>	Both longitudinal and cross-sectional data, small sample size, for spastic quadriplegia only <sup>†</sup>	Use with CDC weight/age, length or height/age, weight/length or height or BMI/age
Down syndrome <sup>24</sup>	Longitudinal data; 400 males, 300 females; 1960-1986	1-36 mo 2-18 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>length or height/age</li> </ul>	Included children with congenital heart disease, reflects tendency to be overweight	Use with CDC weight/age, length or height/ age, weight/length or height, or BMI/age

<sup>†</sup> These growth charts should be used only with children who have cerebral palsy with spastic quadriplegia and may underestimate the growth for a child with mild cerebral palsy or without spastic quadriplegia. More information about growth and children with cerebral palsy can be found at the North American Growth in Cerebral Palsy Project website: <http://www.people.virginia.edu/~mon-grow/healthcare/home.html>

Section 1 – Determination of Nutrition Status

<b>Growth Chart</b>	<b>Study sample information</b>	<b>Ages</b>	<b>Parameters</b>	<b>Limitations</b>	<b>Use with CDC</b>
Noonan syndrome <sup>25</sup>	64 males, 48 females	0-20 years	<ul style="list-style-type: none"> <li>height/age</li> </ul>	Small sample size	Compare to CDC; use CDC for weight/ age, length or height/age, weight/length or height or BMI/age
Prader Willi syndrome <sup>26</sup>	56 males, 36 females	3-24 years	<ul style="list-style-type: none"> <li>height/age</li> </ul>	Longitudinal and cross-sectional data, small sample size	Compare to CDC; use CDC for weight/ age, weight/ height, BMI/age
Turner syndrome <sup>27</sup>	366 females; pooled data; no hormone treatment	2-19 years	<ul style="list-style-type: none"> <li>height/age</li> </ul>	Small sample size, unequal age distribution	Use with CDC for weight/age, height/ age, weight/height, BMI/age
Williams syndrome <sup>28</sup>	61 females, 47 males	0 to 18 years	<ul style="list-style-type: none"> <li>weight/age</li> <li>height/age</li> <li>OFC/age</li> </ul>	Retrospective and cross-sectional data, small sample size	Use with CDC for weight/length or height, BMI/age

1. Kuczmarski RJ, Ogden CL, Grummer-Strawn LM, et al. CDC growth charts: United States. *Advance Data from Vital and Health Statistics*; no. 314. Hyattsville Maryland: National Center for Health Statistics. 2000. Available at <http://www.cdc.gov/growthcharts/>. Accessed October 30, 2000.
9. Roche AF, Himes JH. Incremental growth charts. *Am J Clin Nutr*. 1980;33:2041-2052.
11. Himes JH, Roche AF, Thissen D, Moore WM. Parent-specific adjustments for evaluation of recumbent length and stature of children. *Pediatrics*. 1985;75(2): 304-313.
13. Frisancho AR. New norms of upper limb fat and muscle areas for assessment of nutritional status. *Am J Clin Nutr*. 1981;34:2540-2545.
14. Gurney JM, Jelliffe DB. Arm anthropometry in nutritional assessment: a nomogram for rapid calculation of muscle circumference and cross-sectional muscle and fat areas. *Am J Clin Nutr*. 1973; 26:912-915.
15. Tanner JM, Whitehouse RH. Revised standards for triceps and subscapular skinfolds in British children. *Arch Dis Child*. 1975;50:142-145.
17. Hamill PV, Drizd TA, Johnson CL, Reed RB, Roche AF, Moor WM. Physical growth: National Center for Health Statistics percentiles. *Am J Clin Nutr*. 1979;32(3):607-629.
18. McCammon RW, ed. *Human Growth and Development*. Springfield, IL: Charles C Thomas; 1970.
19. Hamill PV, et al. Body weight, stature, and sitting height. *US Vital and Health Statistics, Series 11, #126*; Publication No. HSM 73-1606. Washington DC: US Government Printing Office; 1973.
20. Chumlea WC, Guo SS, Steinbaugh ML. Prediction of stature from knee height for black and white adults and children with application to mobility-impaired or handicapped persons. *J Am Diet Assoc*, 1994; 94(12):1385-1388.
21. Johnson CL, et al. Basic data on anthropometric measurement and angular measurements of the hip and knee joints for selected age groups, 1-74 years of age, United States, 1971-1975. *US Vital and Health Statistics, Series 11, #219*; Publication No. PHS 81-1669. Washington DC: US Government Printing Office; 1981.
22. Horton WA, Rotter JI, Rimoin DL, Scott CI, Hall JG. Standard growth curves for achondroplasia. *J Pediatr*. 1978;93(3):435-438.
23. Krick J, Murphy-Miller P, Zeger S, Wright E. Pattern of growth in children with cerebral palsy. *J Am Diet Assoc*. 1996;96(7):680-685.
24. Cronk C, Crocker AC, Pueschel SM, Shea AM, Zackai E, Pickens G, Reed RB. Growth charts for children with Down syndrome: 1 month to 18 years of age. *Pediatrics*. 1988;81(1):102-110.
25. Witt DR, et al. Growth curves for height in Noonan syndrome. *Clin Genet*. 1986; 30:150-153.
26. Holm V. In: Greenswag LR, Alexander RC. *Management of Prader-Willi Syndrome, 2<sup>nd</sup> ed*. New York: Springer-Verlag; 1995.
27. Ranke MB, Pfluger H, Rosendahl W, Stubbe P, Enders H, Bierich JR, Majewski F. Turner syndrome: spontaneous growth in 150 cases and review of the literature. *Eur J Pediatr*. 1983;141(2):81-88.
28. Morris CA, Demsey SA, Leonard CO, Dilts C, Blackburn BL. Natural history of Williams syndrome: physical characteristics. *J Pediatr*. 1988;113(2):318-326.