

ANTHROPOMETRY IN CHILDREN WITH MILD TO MODERATE CHRONIC RENAL FAILURE**L. Todorovska¹, E. Sahpasova²**

*¹Department of Physiology and Anthropology ²Department of Pediatric Nephrology,
Medical Faculty Skopje, Macedonia
dano@mol.com.mk*

Anthropometry is important method in assessment of growth, physical development and nutritional status in children. In cross-sectional study we compared anthropometric characteristics between 20 children (age 10.5 ± 3.0) with mild to moderate chronic renal failure (CRF) and 20 healthy controls (HC) (age 10.6 ± 3.4). Following anthropometric parameters were investigated (according to IBP and according to the recommendations of WHO): weight; height; BMI; sitting height; arm and leg length; knee height; upper arm, forearm, thigh and calf circumferences; eight skin-fold thickness; muscle, fat and bone body components (according to Mateigka). Mean height, leg length and knee height were significantly lower in children with CRF (132.6 ± 5.7 , 57.3 ± 4.1 and 34.5 ± 1.9 cm) compared with HC (136.6 ± 5.2 , 61.0 ± 3.3 and 38.2 ± 1.6 cm, respectively). In our children with CRF parameters of muscle body component were more affected, compared with parameters of fat body component. Skin-fold thickness of the extremities were more compromised, compared to those of the trunk. Our results support significant difference in anthropometric characteristics between healthy children and children with mild to moderate CRF, who show a reduction in proportionality of the linear growth and soft tissues between trunk and extremities.

