

عنوان مقاله:

Growth and Final Height in Children with Autoimmune Hepatitis; A long term observation

محل انتشار:

مجله بین المللی کودکان, دوره 10, شماره 4 (سال: 1401)

تعداد صفحات اصل مقاله: 15

نویسندگان:

Hanan Fouad - *Pediatrics, Helwan University, Egypt*

Nehal El Koofy - *Pediatrics, Cairo University, Egypt*

Hanaa El Karaksy - *Pediatrics, Cairo University, Egypt*

Marwa Aboelsnoon - *The Medical Department, General Authority for Reconstruction Projects & Agricultural Development, Cairo, Egypt*

Mona Ibrahim - *Department of Clinical and Chemical Pathology, Cairo University, Cairo, Egypt*

Nora Badawi - *Department of Pediatrics, Cairo University, Cairo, Egypt*

خلاصه مقاله:

Background: Abnormal growth in children with autoimmune hepatitis (AIH) is anticipated, either due to hepatic affection or the growth inhibitory effects of corticosteroids. We aimed to describe children's anthropometry with AIH, and study the factors affecting height. Methods: The present observational study investigates the anthropometric measures of ۲۸ children with AIH followed at a university hospital for ۹.۵ ± ۳ years. We calculated the initial AIH score, the Child-Pugh score, and the pediatric end-stage liver disease score (PELD), follow-up anthropometry, and corticosteroid history. We defined abnormal growth as under nutrition (underweight, wasting, stunting), short stature, overweight, and obesity. Results: At AIH diagnosis, children had a mean age of ۷.۴ ± ۳.۱ years, ranging from ۲ to ۱۳.۸; among whom ~۲۰% had ascites, ~۷۹% had jaundice, and ~۸۲% had type ۱ AIH, ~۷۰% had a definite diagnosis of AIH, ~۶۴% were Child-Pugh Score B, ~۶۴% showed severe fibrosis/cirrhosis, and the median PELD score was ۸.۱ (۰.۱-۱۲.۱). At follow-up, their mean age was ۱۵.۹ ± ۱.۶ years, with mean corticosteroid duration of ۷.۱ ± ۳.۱ years, and remission occurred in ۵۰%. We observed a significant improvement in the initial rates of underweight (۴۶.۴% vs. ۱۷.۸%), mainly stunted, and increased rates of overweight/obesity (۱۴.۳% vs. ۳۲.۲%). The final rates of height affection without weight affection were comparable to the initials (۲۸.۶% vs. ۳۲.۱%). Cases with abnormally low final height had significantly more frequent Child-Pugh Score B, higher PELD score, and severe hepatic fibrosis at presentation, with no difference regarding the continuation/ total duration of steroids. Conclusion: the final height in children with AIH is significantly affected by the disease severity at presentation and not the continuation or the duration of corticosteroids use.

Background: Abnormal growth in children with autoimmune hepatitis (AIH) is anticipated, either due to hepatic affection or the growth inhibitory effects of corticosteroids. We aimed to describe children's anthropometry with AIH, and study the factors affecting height. Methods: The present observational study investigates the anthropometric measures of ۲۸ children with AIH followed at a university hospital for ۹.۵ ± ۳ years. We calculated the initial AIH score, the Child-Pugh score, and the pediatric end-stage liver disease score (PELD), follow-up anthropometry, and

corticosteroid history. We defined abnormal growth as under nutrition (underweight, wasting, stunting), short stature, ... overweight, and obesity. Results: At AIH diagnosis, c

کلمات کلیدی:

Autoimmune hepatitis, Corticosteroids, Growth, final height, liver cirrhosis/fibrosis

لینک ثابت مقاله در پایگاه سیویلیکا:

<https://civilica.com/doc/1433465>

