



What is a Paediatric Endocrinologist?

A Paediatric Endocrinologist may treat your child if your child has problems with:

- Diabetes
- Puberty
- Growth
- other disorders related to hormones and the glands that produce them.

A Paediatric Endocrinologist has undergone specialized training in paediatric conditions related to growth and development. Hormonal problems are often present for life and Paediatric Endocrinologists deal with hormone disorders at all stages of childhood and the teenage years.

It goes without saying that children are not just small adults, but are growing individuals who have special needs related to growth and development. Hormone problems affecting growth or sexual development can have significant effects on a child's physical, mental and emotional well-being.

What types of treatment does a Paediatric Endocrinologist provide?

A Paediatric Endocrinologist will diagnose, treat and manage hormonal disorders including the following: -

- Diabetes
- Obesity
- Problems with Vitamin D (rickets)
- Growth problems, such as short stature
- Early or delayed puberty
- Enlarged thyroid gland (goiter)
- Underactive or overactive thyroid gland



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Let's talk more about Childhood Obesity

One of the most common questions parents have. It seems like a simple one, but it's not always easy to answer is "What's the right weight for my child?" and how many of us can answer this.

Obesity and overweight is an international pandemic A number of factors contribute to a child becoming overweight:

- Diet habits
- lack of exercise
- genetics
- or a combination of these can be involved.
- an endocrine problem
- a result of some medicines.

Body Mass Index or BMI for short, is a formula that health professionals use to estimate how much body fat someone has. The BMI formula uses height and weight measurements to calculate a BMI number. Though the formula is the same for adults and children, figuring out what the BMI number means is a little more complicated for children.

For children, BMI is plotted on a growth chart because what is normal changes with age. Different BMI charts are used for boys and girls as the growth rate and the amount of body fat differs between girls and boys.

Overweight and obese children and teenagers are at risk of developing weight-related health problems, such as:

- Type 2 Diabetes Mellitus
- high cholesterol
- high blood pressure (hypertension).

It is important to remember that overweight teenagers are also more likely to become overweight as adults. Adults who are overweight have a greater chance of serious health conditions, such as heart disease and stroke. Preventing or treating overweight and obesity in children may help protect them from these problems as they get older.

Overweight and obese children are also at risk for:

- bone and joint problems
- shortness of breath that makes exercise, sports, or any physical activity. This can possibly make asthma symptoms worse or lead children to develop asthma.
- restless sleep or breathing problems at night
- a tendency to mature earlier. Overweight kids may be taller and more sexually mature than their peers, raising expectations that they should act as old as they look, not as old as they are.
- Overweight girls may have irregular menstrual cycles and fertility problems in adulthood.
- liver and gallbladder disease

Obese children might have emotional issues to deal with, such as low self-esteem, and may be teased, bullied, or rejected by peers. Children who are unhappy with their weight can be at risk for:

- unhealthy dieting
- eating disorders
- depression
- substance abuse

Whatever the cause of overweight or obesity of your child, the condition requires a careful assessment and intervention because the short, intermediate and long term consequences of obesity are dire.

Growth disorder?

Lately, it seems as though your child is looking up to classmates — literally. The other children in the class have been growing taller and developing into young adults, but your child's growth seems to be lagging behind. Classmates now tower over your child.

You question if something could be wrong? Maybe. maybe not. Some children just grow more slowly than others as their parents did. However, others may have an actual growth disorder, which is any type of problem that prevents kids from meeting realistic expectations of growth, from failure to gain height and weight in young children to short stature or delayed sexual development in teens.

Poor growth in children may be an indicator of an underlying problem, should be investigated and the cause treated as soon as possible. There are many causes of poor growth, some permanent and others transient. Short stature, out of keeping with that of the family, or where the child fails to grow along their growth percentile when plotted on a growth chart, warrants further investigation.

The most common cause of poor growth is genetic short stature where usually one or both parents are short. Constitutional delay in growth is the second most common cause. These are typical "late bloomers" who will show some degree of catch-up growth during puberty. However, if growth or stature is a concern it is best to investigate well before puberty rather than waiting for the pubertal growth spurt that may well not arrive or be inadequate to achieve normal catch-up growth.

Earlier diagnosis and treatment can help some children catch up with peers and increase their final height. If an underlying medical condition is identified, specific treatment may result in improved growth. Growth failure due to hypothyroidism, for example, is usually treated with thyroid hormone replacement pills. Growth hormone injections for children with growth hormone deficiency, Turner syndrome, and chronic kidney failure may help children reach a more normal height. Human growth hormone is generally considered safe and effective, although full treatment may take many years.

The rule of thumb is that the earlier growth concerns are tackled the better the outcome.





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