

TRACKING OF BMI IN 3-15 YEAR OLD DUTCH, TURKISH, MOROCCAN AND SOUTH ASIAN CHILDREN: HISTORICAL COHORT STUDY

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Tracking

1. longitudinal development and the maintenance of a relative position or ranking over time (looking forward)
2. the ability to predict subsequent measures from previous measures (looking backward)

2.

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Population The Hague (Den Haag)

Youth 0-19, by ethnic group in %, 2013:

Dutch	43
Turkish	12
Moroccan	10
Surinamese	9
Dutch Antillean	2
Other non-western	10
Western	14

What is known about tracking of BMI?

- Consistent relation between current BMI (class) and BMI at previous age (except during infancy)
- stronger relation when intervals are shorter and at an older age
- Many studies conducted with populations born before the obesity epidemic.
- Stronger relationships in current era?

Objectives

- to determine the degree of tracking of BMI and BMI status in Dutch, Turkish, Moroccan and (Surinamese) South Asian children between 3 and 15 years of age living in the Netherlands
- to determine tracking patterns of thin, normal weight and overweight adolescents at age 13-15 years



Methods

- Routine data,
- Standard Preventive Health Assessments: 3-4, 5-6, 7-10 and 13-15 years
- From Youth Health Care digital records
- Cohort born 1994-1997, measured 1997-2013
- Measured at ages 3-15 years
- by trained YHC professionals
- Background data from health record



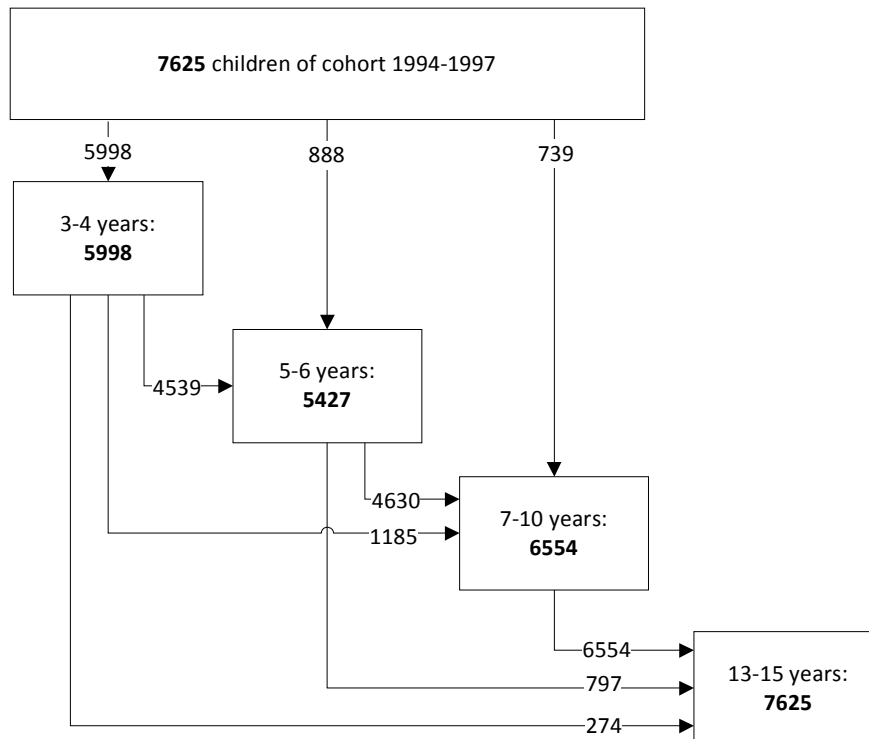
Methods: BMI references and cut-offs

- Universal BMI reference/ cut-offs (Cole, IJPO 2012):
relation BMI and body fat (associated diseases) is similar across ethnic groups
 - BMI < 17 thinness (II and II)
 - BMI ≥ 17 & < 25 normal weight
 - BMI ≥ 25 overweight
- South Asian specific reference/ cut-offs (de Wilde, PLOS ONE 2013)
 - BMI < 15 thinness
 - BMI ≥ 15 & < 23 normal weight
 - BMI ≥ 23 overweight



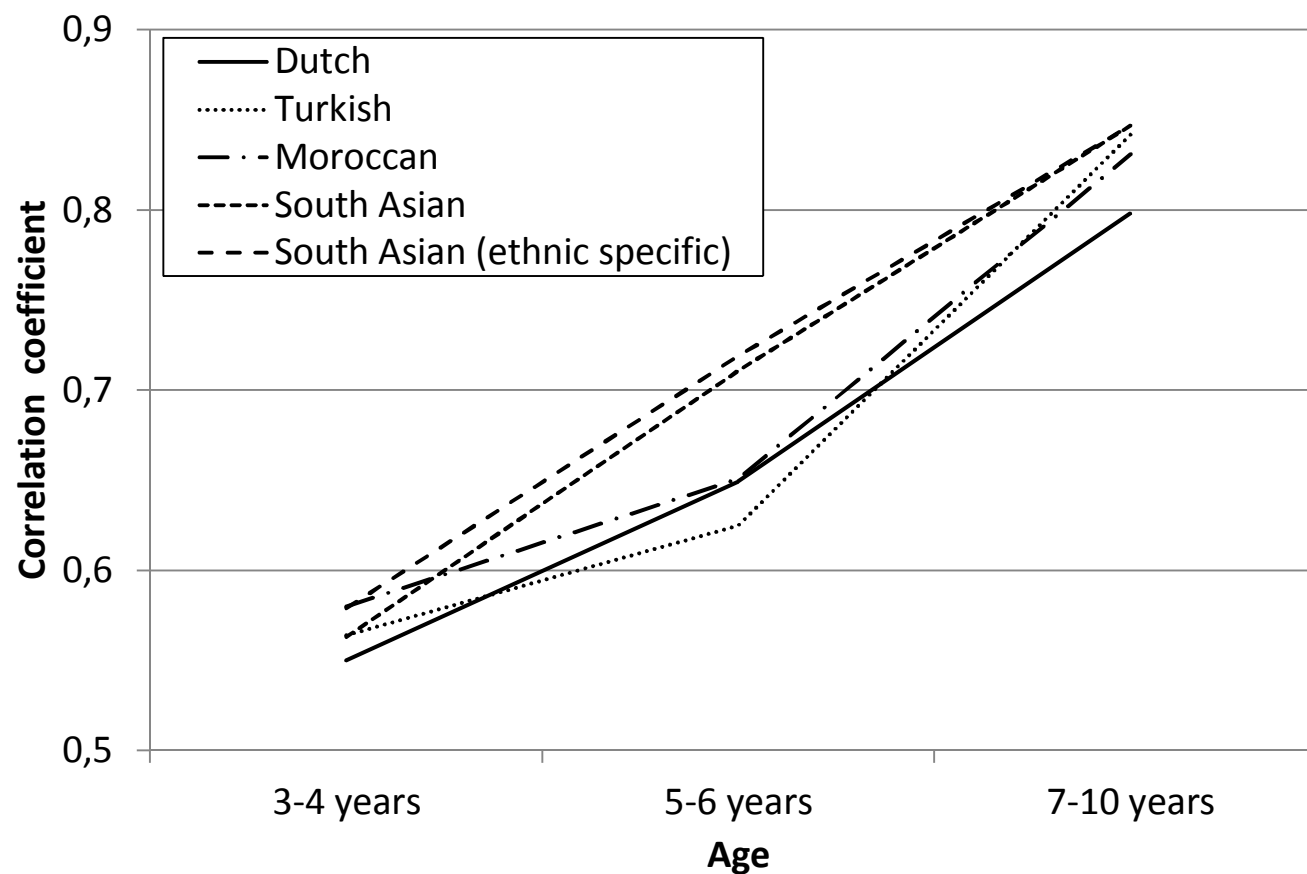
Results: Number of assessments at different ages

- 25 604 measurements

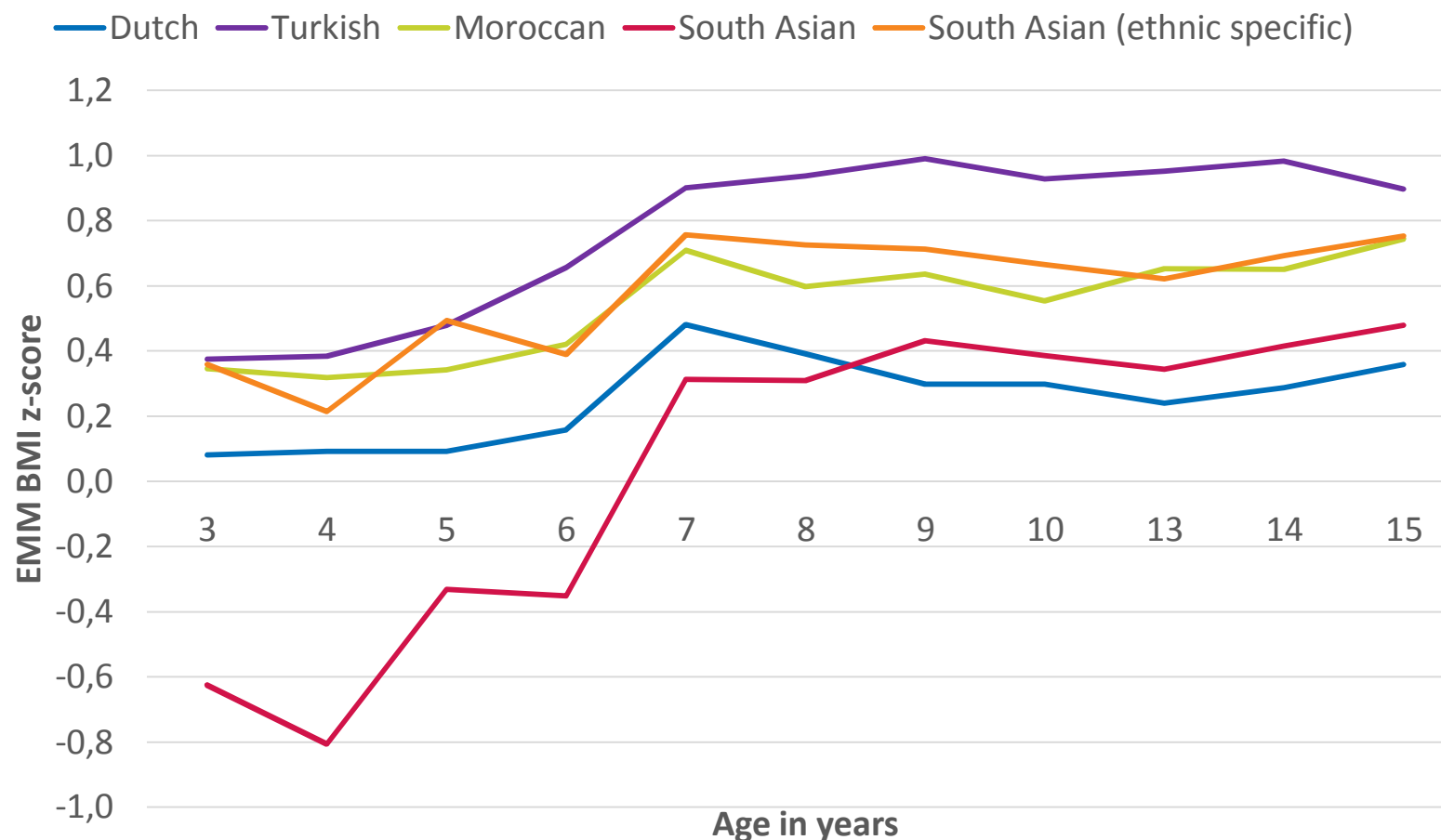


Ethnicity	N	%
Dutch	4528	59
Turkish	1289	17
Moroccan	958	13
South Asian	850	11

Correlation BMI z-score at 13-15 years of age

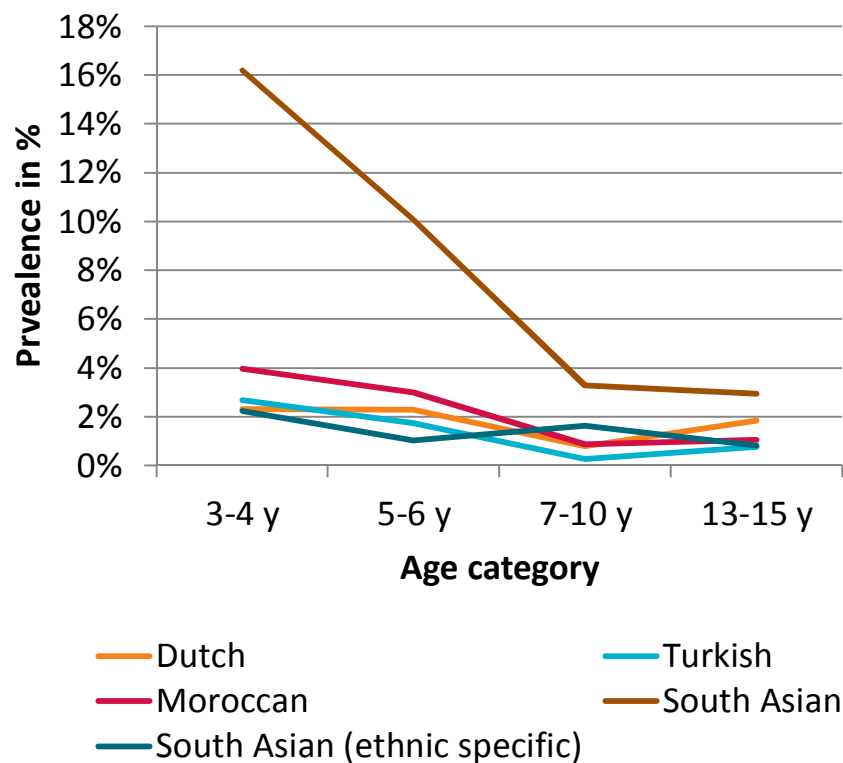


Estimated marginal mean BMI z-score cohort 1994-1997 by ethnic group

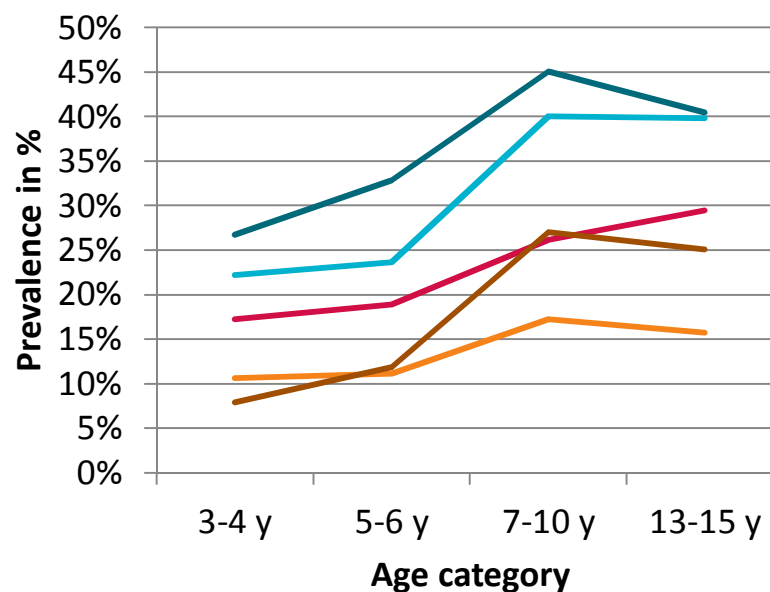


Thinness and overweight prevalence by ethnic group and age

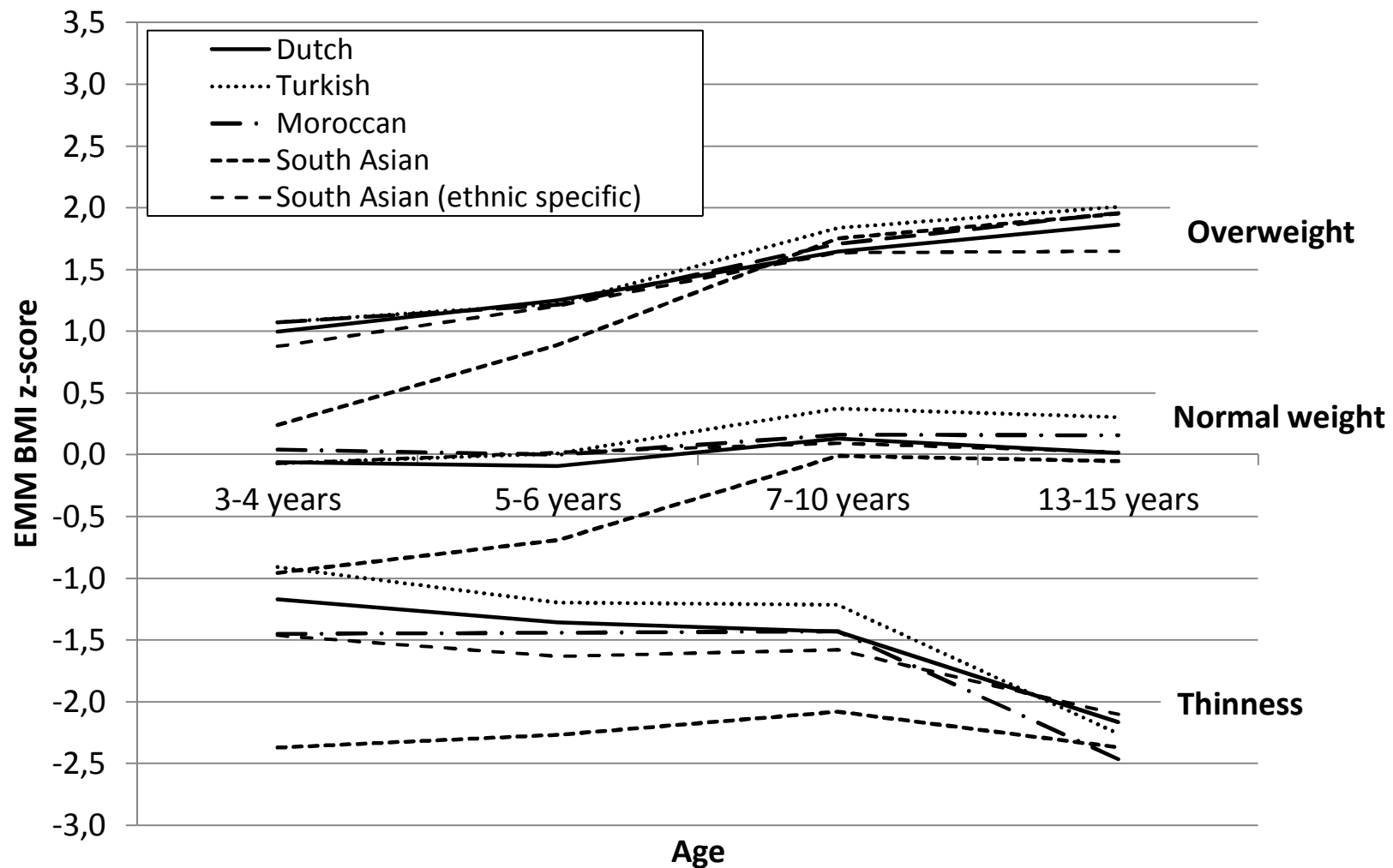
Thinness



Overweight (incl obesity)



Tracking by weight status in 13-15 year olds



		The Truth		
		Has the disease	Does not have the disease	
Test Score:	Positive	True Positives (TP) <div>a</div>	False Positives (FP) <div>b</div>	$PPV = \frac{TP}{TP + FP}$
	Negative	<div>c</div> False Negatives (FN)	<div>d</div> True Negatives (TN)	$NPV = \frac{TN}{TN + FN}$
		Sensitivity $\frac{TP}{TP + FN}$ Or, $\frac{a}{a + c}$	Specificity $\frac{TN}{TN + FP}$ $\frac{d}{d + b}$	

Conclusion

- Overweight seems to develop mainly < 3-4y and between 5-6y -> 7-10y after which the prevalence stabilises
- Tracking pattern of BMI (z-score) are largely similar in most ethnic groups, except in South Asian children based on universal reference (inappropriate)
- Sensitivity of previous overweight status increases with age to high
- PV+ of overweight status moderate to high
- Higher sensitivity of thinness mainly in South Asian children but low PV+
- Results from South Asian BMI reference more concordant with other ethnic groups

Discussion

- No measurements <3 y
- Prediction in normal weight children seems impossible with only weight status:
 - What are the determinants?
 - BMI z-score change?
- Overweight during adolescence tracks into adulthood?



More information

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