

Body Mass Index and Gait in Children Ages 9-14

Katie Cage, John Gannaway,
Bonnie Pack

Objective

- Compare temporospatial gait characteristics and anthropomorphic measures of children ages 9-14, who are considered overweight for age with children who have a typical weight for age

Rationale

- Obesity is now an epidemic, carrying over from childhood into adulthood
- Causes orthopedic complications:
 - Slipped capital femoral epiphysis
 - Avascular necrosis of the femoral head
 - Rotational and angular deformities of long bones of lower extremities

Previous Studies

- Compared groups of children who are overweight and non-overweight at fast, normal, and slow speeds
- Assessed:
 - Double Support
 - Cadence
 - Velocity
 - Relative Velocity
 - Cycle Duration
 - Stance Time
 - Swing Time
 - Single Support
 - Step Length
 - Stride Length

Previous findings in children classified as overweight^{1,2,3}

- Double Support was increased
- Cadence was decreased
- Velocity was decreased
- Relative Velocity was decreased
- Cycle Duration was increased

Referenced from:

1. Hills AP, Parker AW. Locomotor Characteristics of Obese Children. *Child Care Health Dev.* 1992;18:29-34
2. Hills AP, Parker AW. Gait Characteristics of Obese Children. *Arch Phys Med Rehabil.* 1991;72:403-407
3. McGraw B, McClenaghan BA, Williams HG, Dickerson J, Ward DS. Gait and postural stability in obese and nonobese prepubertal boys. *Arch Phys Med Rehabil.* 2000;81:484-489

Inclusion Criteria

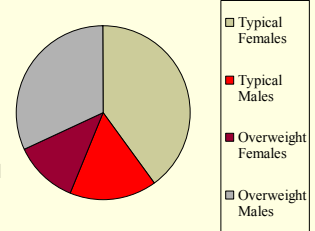
- Between ages of 7-14
- No history of heart problems (i.e. pacemaker)
- No history of any LE surgeries or gait impairments
- Total of 27 children
 - Two were not used 2° incomplete data and inconsistent data

Sample

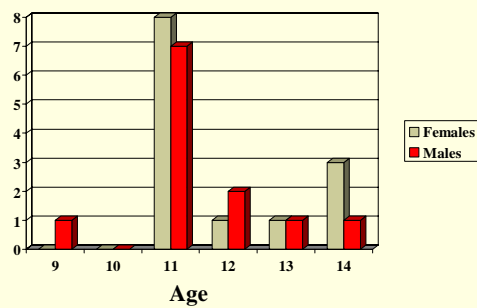
- Sample of convenience of children with unimpaired gait from:
 - David-Brainerd Christian School
 - East Lake Community Center after-school program
 - Other
- Data set consisted of 25 children
 - 13 Girls
 - 12 Boys

Sample

- Typical
 - 14 were below the 95th percentile
 - 4 males
 - 10 females
- Overweight
 - 11 were at/above the 95th percentile of BMI for age and gender
 - 8 males
 - 3 females



Sample



Method

- Obtained approval from UTC IRB
- Obtained informed consent and questionnaire
- Obtained appropriate permission prior to entering facilities

Method

- Objective information obtained through:
 - Tape measure assessments
 - Goniometric measures
 - Skinfold calipers – Slim Guide
 - Tanita® TBF-300A
 - GAITRite®
 - CDC charts

Tools Utilized

- GAITRite®
 - Portable 4.6mx0.9m mat
 - Active measurement area of 3.7mx0.6m
 - Used 2m before & after
 - Measures
 - Step length
 - Stride length
 - Heel-to-heel BOS
 - Single support time
 - Double support time
 - Walking speed
 - Step time



www.biometrics.nl/html/Images/GTxx.GIF

Tools Utilized

- **Skinfold Caliper**
 - Triceps
 - Subscapular
 - Medial Calf
- **Tanita®**
 - Weight & BMI
- **CDC BMI Charts**
(Normalized for age and gender)
 - [Boys 2-20 years](#)
 - [Girls 2-20 years](#)



www.morleyathletic.com/images/M15451.jpg

Tools Utilized

- **Goniometer**
 - Hip flexion/extension
 - Knee flexion/extension
 - Hindfoot varus/valgus
 - Ankle plantarflexion/dorsiflexion
- **Measuring Tape**
 - Child's height
 - Leg Lengths



www.yogatherapycenter.org/images/goniometer.jpg

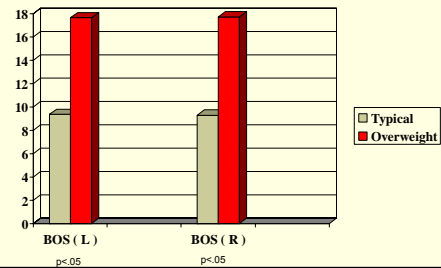
Method

- Instructed participant to empty bladder
- Gathered body composition
- Ambulate* across GAITRite®
 - Self-selected (3 trials)
 - Slower (3 trials)
 - Faster (3 trials)

*Originally, we had planned to use an electric metronome to standardize fast and slow speeds...

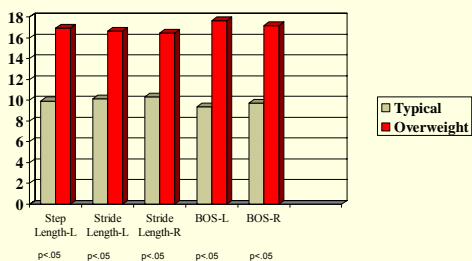
Results

- Mann-Whitney U
 - Mean Ranks for Slower Speed



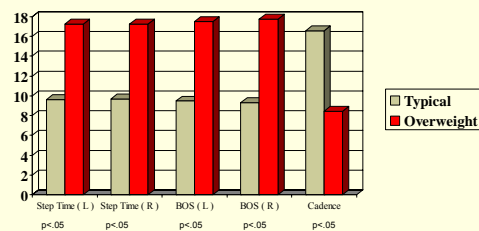
Results

- Mann-Whitney U
 - Mean Ranks for Self-Selected Speed

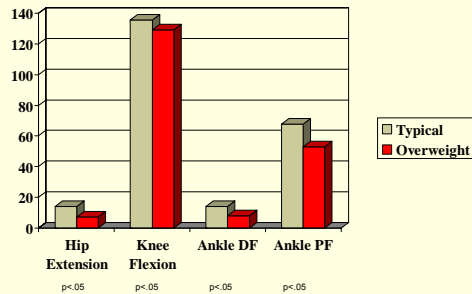


Results

- Mann-Whitney U
 - Mean Ranks for Faster Speed



Comparison of Mean ROM



Possible Explanations

- ↑ BOS in overweight children at all speeds
 - ↑ leg girth, ↑ pelvic width
- ↑ Step time in overweight children at fast speed
 - Deconditioned
- ↑ Step length and stride length in overweight children at self-selected speed
 - Adaptation to keep up with peers

Comparison of Studies

	Hills AP & Parker AW ¹	Hills AP & Parker AW ²	McGraw, et al. ³	This Study
Stride Length				↑ (at self-selected speed)
Step Length				↑ (left at self-selected speed)
Double Support		↑	↑	
Cadence	↓	↓		↓ (at faster speed)
Velocity	↓			
Relative Velocity	↓	↓		NT
BOS				↑
Step Time				↑ (at faster speed)

■ Our findings do not completely correlate with previous studies

Possible sources of discrepancy

- Leg length measurements (intra-rater reliability)
- Child's gait pattern at differing speeds
 - Peer observation
- Tanita® – control of variables
- Sample size
- Sample distribution
- Some other studies solely used males
- This study had a wider age range of subjects

Future Research

- Larger sample of participants
- Better age/gender-matched distribution of participants
- Explain differences in temporospatial gait parameters
- Development of a gait maturity index that accounts for differences in height and age

Reference List

- Hills AP, Parker AW. Electromyography of Walking in Obese Children. *Electromyogr Clin Neurophysiol*. 1993;33:225-233
- McGraw B, McClenaghan BA, Williams HG, et al. Gait and Postural Stability in Obese and Nonobese Pre-pubertal Boys. *Arch Phys Rehabil*. 2000;81:484-489
- Hills AP, Parker AW. Gait Characteristics of Obese Children. *Arch Phys Rehabil*. 1991;72:403-407
- Hills AP, Parker AW. Locomotor Characteristics of Obese Children. *Child Care Health and Development*. 1992;18:29-34
- Hills AP, Parker AW. Gait Characteristics of Obese Pre-pubertal Children: Effects of Diet and Exercise on Parameters. *International Journal of Rehabilitation Research*. 1991;14:348-349
- Goss FL, Robertson RJ, Dube J, Rutkowski J, Andriacchi J, Lenz B, et al. Does exercise testing affect the bioelectrical impedance assessment of body composition in children? *Ped Ex Sci* 2003 May;15(2):216-222.
- Jebb SA, Cole TJ, Doman D, Murgatroyd PR, Prentice AM. Evaluation of the novel Tanita body fat analyzer to measure body composition by comparison with a four-compartment model. *British Journal of Nutrition*. 2000;83:115-122.
- Ying-Tai W, Nielson DH, Cassidy SL, Cook JS, Janz KF, Hansen JR. Cross-validation of bioelectrical impedance analysis of body composition in children and adolescence. *Phys Ther*. 1993;73:320-329.
- Utter AC, Nieman DC, Ward AN, Butterworth DE. Use of the leg-to-leg bioelectrical impedance method in assessing body composition change in obese women. *Am J Clin Nutr*. 1999;69:603-607.
- Lu K, Quach B, Tong TK, Lau P. Validation of leg-to-leg bio-impedance analysis for assessing composition in obese Chinese children. *J Ex Sci Fit* 2003;1:97-103.

Questions?



And we're done!

