



SNS COLLEGE OF NURSING

SARAVANAMPATTI, COIMBATORE-35

DEPARTMENT OF CHILD HEALTH NURSING

COURSE NAME : BSC (NURSING) III

YEAR

SUBJECT:PEDIATRICS

UNIT II: THE HEALTHY CHILD

TOPIC: GROWTH & DEVELOPMENT



INTRODUCTION









1. Heredity is the transmission of

physical characteristics from parents

to children through their genes.

intelligence and aptitudes.

It influences- physical appearance
 such as height, weight, body structe
 the colour of the eye, the texture
 of the hair, and even







2. Environment involves the

physical surroundings and geographical conditions of the place the child lives in, as well his social environment and relationships with family and



 Well-nurtured child does better than a deprived one; the environment children are constantly immersed in contributes to this.





- 3. Sex: It affects the physical growth and development of a chi
 - Boys and girls grow in different ways, especially nearing puberty.
 - Boys tend to be taller
 and physically stronger than girls.







4. Exercise and Health: Children deliberately

engaging in physical activities
knowing it would help them grow.

Exercise here refers to the normal play time and
 sports activities which help the body gain an increase in muscular strength and



put on bone mass





5. Hormones: Their timely functioning is critical for normal physical growth and development in children.



 Imbalances in the functioning of hormone-secreting glands can result in growth defects, obesity, behavioral problems and other diseases.





6. Nutrition: It's a critical factor in growth as everything the boomeds to build and repair itself comes from the food we eat.



 Malnutrition can cause deficiency diseases that adversely affect the growth and development of children





7. Familial Influence: Whether they are raised by their parents, grandparents or foster care, they need basic love, care and courtesy to develop as healthy



The most positive growth is seen when

families invest time, energy and love with child through activities, like reading, playing with them and having deep meaningful conversations

functional individuals.





8. Socio-Economic Status: Children from poorer families may not have access to educational resources and good nutrition to reach their full potential.





9. Maternal nutritional deficiencies: Mal positions, metabolic,

endocrine disturbances.

- Infectious diseases
 (or diseases like rubella, toxoplasmosis, syphilis, herpes)
- Rh incompatibility, smoking, alcohol and intake of certain drugs.







10. Genetic factors:

Actual outcome of growth = genetic potential+

environmental influences.

Mutations- inherited by offspring Genetic studies make use of twin and family data





ASSESSMENT OF GROWTH AND DEVELOPMENT



Assessment of growth:

- Assessment of physical growth can be done by anthropometric measurement and the study of velocity of physical growth.
- •Measurement of different growth parameters is the importance nursing responsibility in child care.



ASSESSMENT OF WEIGHT



- ➤ Weight is one of the best criteria for assessment of growth and a good indicator of health nutritional status of child.
- Among Indian children, weight of the full terms neonate at birth is approximately 2.5kg to 3.5 kg.
- There is about 10% loss weight first week of life, which regains by 10 days of age.



ASSESSMENT OF WEIGHT









ASSESSMENT OF HEIGHT



- Increase in height indicates skeletal growth. Yearly increments in height gradually diminished from birth to maturity.
- At birth average length of a healthy Indian newborn baby is 50 cm.
- It increases to 60cm at 3 months, 70 cm of a 9 month and
 75 cm at 1 year of age.
- Then weight gain is about 25-30 gm per day for 1st 3 month and 400gm/month till one year of age.



ASSESSMENT OF HEIGHT

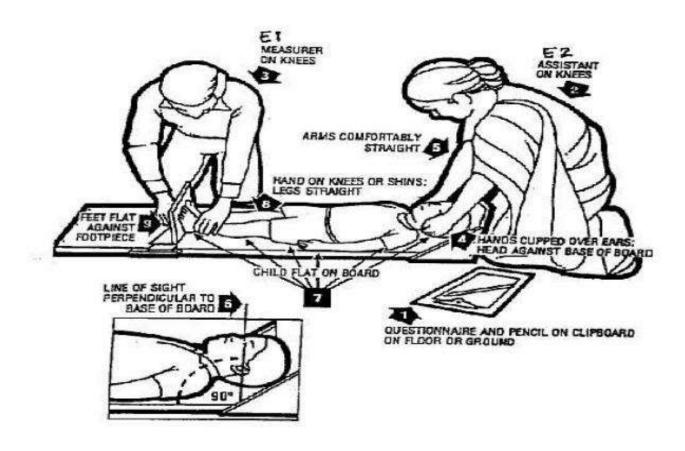






ASSESSMENT OF HEIGHT







ASSESSMENT



- The infants double weight gain their birth weight by 5 month of age, trebled by 1 year, 4th time by 2 years, five times by 3 year ,6 times by 7 year and ten times by ten year.
- Then weight increases rapidly during puberty followed by weight increases to adult size.
- In 2nd year, there is 12cm increase, 3rd year it is 9 cm, 4th year it is 7cm, and in 5th year is 6cm.
- So the child double the birth by 4 to 4.5 years of the age after wards there is about 5cm increase in every year till onset of puberty.



GROWTH AND DEVELOPMENT



It is an important criteria which helps to assess the normal growth or its deviations.

BMI =
$$kg/m^2$$

■BMI remains content up to the age of 5 Years. If the BMI more than kg/m², it indicates obesity

and if it is less than 15 kg/m² it indicates malnutrition.



ASSESSMENT OF BMI



- Underweight = ≤18.5
- Normal weight =18.5 24.9
- Over weight = 25 29.9
- Obesity = BMI of 30 or greater



ASSESSMENT OF HEAD CIRCUMFERENCE



- It is related to brain growth and development of intracranial volume.
 Average head circumference measured about 35cm at birth.
- •At 3 months it is about 40cm, at 6 month 43cm, at 1 year 45cm, at 2 years 48cm, at 7 year50cm and at 12 years of age it is about 52cm, almost same a adult.





ASSESSMENT OF HEAD CIRCUMFERENCE



REFERENCES

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