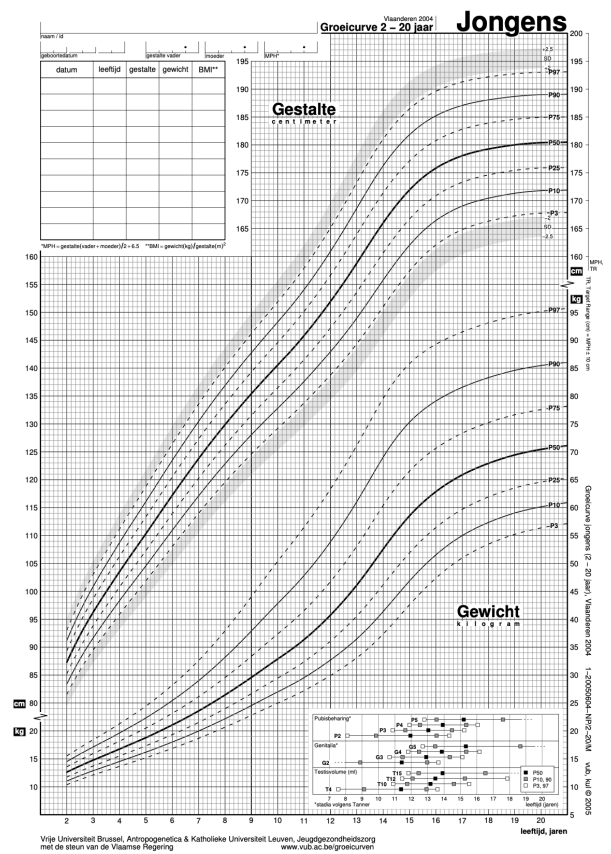
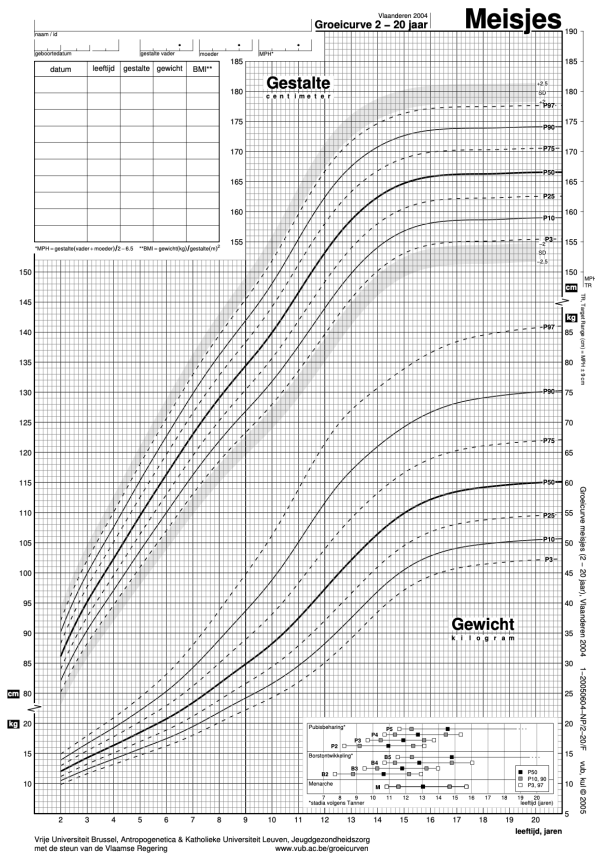


Hulpmiddelen bij klinisch onderzoek - kinderen met obesitas

Hulpmiddel 1: Interpretatie gewicht kinderen



Hulpmiddel 2: Checklist klinisch onderzoek

Assessment/Test	When is it indicated?
Assessment of relevant family history: obesity, bariatric surgery, cardiovascular and metabolic risk factors, OSAS, NAFLD, cirrhosis, hormonal/reproductive alterations	Always
Assessment of personal history: pregnancy events, birth weight/length, neonatal feeding, major illnesses	Always
Complete physical examination of the child, including: BMI calculation, physical findings associated with genetic forms of obesity, blood pressure, acanthosis nigricans and skin tags, extreme acne and hirsutism (in pubertal girls), tenderness and motion of knee/leg/foot, peripheral edema and thyroid examination	Always
Laboratory investigations: magnesium, calcium, alkaline phosphatase, liver and kidney function, glycemia, lipid profile, proteins and electrophoresis, complete blood count, cortisoluria, thyroid function	Always
Fundoscopic examination for pseudotumor cerebri	If suspicion of pseudotumor cerebri
Basic assessment of diet and eating habits	Always
Basic assessment of lifestyle (physical activity, sleep, screen time)	Always
Basic assessment of psychosocial factors and well-being	Always
Assessment of the child's history for psychiatric disorders and use of antipsychotic drugs	Always
Relevant genetic test ^a	If extreme obesity by age <5 years with specific clinical features of genetic forms of obesity
Fasting glucose test and/or OGTT ^{b, c}	If abnormal findings in plasma glucose levels
ALT and AST testing	If obesity (with or without additional risk factors) If overweight with additional risk factors
Free and total testosterone and sex hormone binding globulin	If suspicion of PCOS
Nocturnal polysomnography (if not available: overnight oximetry)	If positive history/suspicion of OSAS
Complete psychiatric/psychosocial assessment	If positive history/suspicion of psychiatric/psychological/psychosocial disorder

Hulpmiddel 3: Drempelwaarden verhoogd cardiovasculair risico

Bloedonderzoek

Leeftijd	Triglyceriden	HDL cholesterol	Nuchtere glucose
6 tot 10 jaar	Verder onderzoek dient plaats te vinden als er sprake is van een familiegeschiedenis met metabool syndroom, diabetes type 2, dyslipidemie, hart- en vaatziekten, hypertensie en/of obesitas		
10 tot 16 jaar	≥ 1,7 mmol/L	<1,03 mmol/L	≥ 110 mg/dl
16+ jaar	≥ 1,7 mmol/L	<1,03 mmol/L (man) <1,29 mmol/L (vrouw)	≥ 110 mg/dl

Normaalwaarden voor vrij T4 en TSH volgens de richtlijn van het betreffende laboratorium.

Bloeddruk

Leeftijd	Screeningsdrempelwaarde
< 1 jaar	110/65 mmHg
1-6 jaar	115/75 mmHg
6-10 jaar	125/85 mmHg
11-18 jaar	140/90 mmHg

Uit: Nederlandse Richtlijn NVK 2020, bijlage proeftuin 's Hertogenbosch
En Duodecim Medical Publications (2017). Overgewicht en obesitas bij kinderen – buitenlandse richtlijn in 2019
aangepast aan de Belgische zorgcontext. Beschikbaar via www.ebnet.be