Common Growth of Children with CdLS

Children are often assessed by their weight and height on growth charts that show the average growth rate for typical children. Since children with CdLS are often compared to a typical child’s growth rate, many are incorrectly diagnosed with “failure to thrive,” a condition that focuses primarily on weight gain. Often, parents also consider placing the child on a high-calorie formula or food supplement and/or increasing the number of feedings per day to spur growth. Presently, there is no clear-cut evidence that either have long-term benefits.

What medical professionals unfamiliar with CdLS do not recognize is that although children with CdLS gain weight slowly, their growth is usually in proportion to their height throughout their lives.

To better educate parents of children with CdLS and their health care providers, CdLS Foundation Medical Director Antonie D. Kline, M.D., and her colleagues developed gender-specific growth charts based on research and data collected over many years.

On the following pages you will find the female growth charts.

• Height for Females, birth to 36 months
• Weight for Females, birth to 36 months
• Height for Females, 2 to 18 years
• Weight for Females, 2 to 18 years
• Head circumference for Females, birth to 18 years
Fig. 2. Height (mean ± 1.645 S.D., dashed lines) in females with BDLS from birth to 36 months compared with normal females (solid lines).
Weight for Females, birth to 36 months

Fig. 4. Weight (mean ± 1.645 S.D., dashed lines) in females with BDLS from birth to 36 months compared with normal females (solid lines).
Fig. 6. Height (mean ± 1.645 S.D., dashed lines) in females with BDLS from 2 to 18 years compared with normal females (solid lines).
Figure 8. Weight (mean ± 1.645 S.D., dashed lines) in females with BDLS from 2 to 18 years compared to normal females (solid lines).
Figure 10. Head circumference (mean ± 2.05 S.D., dashed lines) in females with BDLS from birth to 18 years compared to normal females (solid lines).