



## MEDIA RELEASE

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### **Body Mass Index (BMI) of Australian children not routinely measured and measurements often inaccurate: new study**

A new study has found many GP's do not regularly calculate Body Mass Index (BMI) in children, and when they do measure height and weight often the equipment is imprecise and therefore their assessment is inaccurate. The study by researcher Ms Bibi Gerner and colleagues from the Murdoch Childrens Research Institute's Centre for Community Child Health, at Melbourne's Royal Children's Hospital, is in the latest edition of the Journal of Paediatrics and Child Health (JPCH), the peer reviewed journal of the Paediatrics Division of The Royal Australasian College of Physicians (RACP).

"We found that current practice by general practitioners falls well short of the 2003 National Health and Medical Research Council guidelines recommending bi-annual measuring of all children in the primary care setting. We also found variability of equipment used to measure height (stadiometers) and weight (scales) which could lead to serious misclassification of many children's weight status," Ms Gerner said.

Thirty-four general practitioners from 29 primary care family medical practices in Melbourne were involved in the study. The GP's completed a questionnaire regarding their routine practice for 5–10 year old children and perceived role in managing childhood overweight and obesity. Practice audits in 2002 assessed the accuracy and accessibility of equipment.

"The study found only 44% of GP's regularly weighed children and only 38% regularly measured children. Only one of the GP's regularly calculated children's BMI. Equipment to measure height undermeasured slightly. Scales were less accurate and on average weights of 20kg and 80kg were recorded as 19.7kg and 79.2kg respectively," Ms Gerner said.

Despite these shortcomings, general practitioners generally felt they played a key role in managing overweight in children. Most participants said they felt very or quite comfortable (80%) and competent (71%) broaching the issue of a child's weight, and very or quite comfortable (97%) and competent (88%) discussing the child's weight.

"The current system assumes that general practitioners routinely weigh and measure children, that their equipment is accessible and accurate, and that they can and do calculate and interpret BMI. Unfortunately, we discovered this is not the case, and very few children are regularly measured against the BMI standards."

The inaccuracy of the equipment audited across these practices could result in misclassification of a child's weight status and possibly to inappropriate weight management advice. The results suggest it may be advisable to develop national guidelines regarding specifications and maintenance of equipment in doctors' surgeries, over and above the current national standards which simply specify that all general practices should be equipped with "scales" and "height measurement devices".



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"Whilst the 2003 NHMRC recommendations may have lead to improved assessment for overweight children since this study, our results suggest it would take a large practice shift to meet current recommendations. We conclude that considerable research and translation efforts are needed to support general practitioners in the effective identification and management of child overweight and obesity," Ms Gerner said.

*The RACP is responsible for training, educating and representing over 9,000 physicians in Australia and New Zealand. The RACP represents 25 medical specialties including paediatrics, public health and occupational medicine. Physicians are often called specialists and are doctors who have completed an extra six years or more of training after their initial medical training and choose to specialise in a particular area of medicine.*

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