

0.05). It was of great significantly difference on the living habits and food consumption choice, such as eating food two hours before bedtime, having pressure to learning, introvert, eating vegetables infrequently and drinking carbonated drinks often, among the overweight and obesity students group and control group ($P < 0.05$). Multiple variables Logistic regression analysis showed that the BMI of parents, birth weight, and bad eating habits were the risky factors of the secondary school students in overweight and obesity, while doing exercise was the protective factor.

Conclusion: The BMI of parents and the birth weight of students were significantly correlated with the BMI of the students. The overall prevalence of overweight and obesity of the students in the study was significantly lower than the average of the nation, but overweight and obesity among the adolescents are nutritional problems, which should be emphasised by all sectors of society.

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IRON STATUS AT BIRTH IN TERM SMALL-FOR-GESTATIONAL AGE INFANTS

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Objectives: To determine body iron stores at birth in term small-for-gestational age (SGA) infants as compared to appropriate-for-gestational age (AGA) infants.

Design: Prospective cohort study

Setting: Level III neonatal unit

Patients: Mother infant pairs with gestation of ≥ 37 weeks and birth weight of at least 1.5 kg were enrolled. Asymmetric SGA infants were taken as cases and gestation matched AGA infants as controls. Maternal and cord blood samples and infant blood samples during follow up were obtained for measurement of various iron indices.

Outcomes: Primary- cord serum ferritin at birth, Secondary- proportion of infants with 'low' ferritin, serum ferritin in followup, and correlation among maternal and neonatal iron indices - Hb, serum Iron and total Iron binding capacity (TIBC).

Results: There were 50 SGA and 50 AGA mother-infant pairs. Cord serum ferritin levels were less in

SGA group as compared to AGA group [median (IQR): 68 (30,136) vs. 141 (63,259), $p=0.007$]. The proportion of infants with 'low' cord ferritin (defined as $< 40 \mu\text{g/L}$) were more in SGA group [17 (34%) vs. 9 (18%) in AGA group, $p= 0.05$]. Other iron indices were similar in both the groups. There was no correlation among various maternal and neonatal cord iron parameters. The serum ferritin levels at 28 ± 3 days of age were also less in SGA group with a trend towards significance ($p=0.06$).

Conclusions: Term asymmetric SGA infants have lesser total iron stores as compared to gestation matched AGA infants at birth.

Implications: SGA infants need iron supplementation starting from early infancy.

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MANAGEMENT AND PREVALENCE OF OBESITY IN BOSNIAN CHILDREN

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Background-aims: Childhood obesity is often the result of an interplay between many genetic and environmental factors. Obese children can develop serious health problems, such as diabetes and heart disease, often carrying these conditions into an obese adulthood. Obese children become targets of early and systematic discrimination.

Methods: We retrospectively examined the medical charts of all children who were between the ages of three and twelve years and presented to the physicians with pediatrician-diagnosed obesity in calendar years 2008-2009. For laboratory and radiographic evaluations of childhood obesity, the degree of investigation depends on the BMI, physical and historical findings, and the presence of risk factors.

Results: The prevalence of obesity in children has steadily risen during recent years in Bosnia and Herzegovina. Our reports have reached epidemic levels, with approximately 14 percent of Bosnian