

Measurement of health outcomes:

Pubertal Maturation

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Chronological age vs. pubertal development



Pubertal milestones

| Girls | 90%* | |
|----------------------------------|----------------|--|
| Thelarche (first breast budding) | 9-12.5 years | |
| Pubarche (first pubic hair) | 9.5-13.5 years | |
| Menarche (first menstuation) | 11.7-14 years | |

| Boys | 90%* |
|----------------------------------|---------------|
| Gonadarche (testis volume >3 ml) | 10.5-13 years |
| Pubarche (first pubic hair) | 10-15 years |
| Voice break | |

^{*} Based on Danish data on puberty development in healthy children from the general population Lawaetz et al 2015, JCEM 100:1376-1385, Johansen et al 2017, JCEM 102:1001-1008

At 10 -15 years of age variations in lifestyle, exposures, health measures etc......



.... may be more related to pubertal maturation than to age



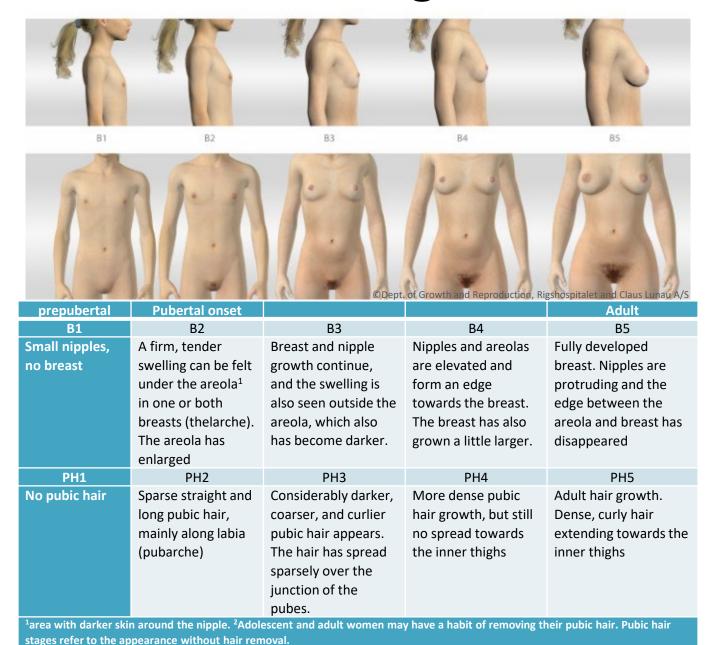
Description of pubertal progression

Marshall & Tanner.

Growth and physiological development during adolescence. Annu Rev Med. 1968;19:283-300.

| Girls | Boys | | | |
|--|------|--|--|--|
| 5 breast stages (B1-B5) 5 genitalia stages (G1-G5) | | | | |
| Girls and Boys | | | | |
| 5 pubic hair stages (PH1-PH5) | | | | |

Pubertal Tanner stages: Female



Pubertal Tanner stages: Male

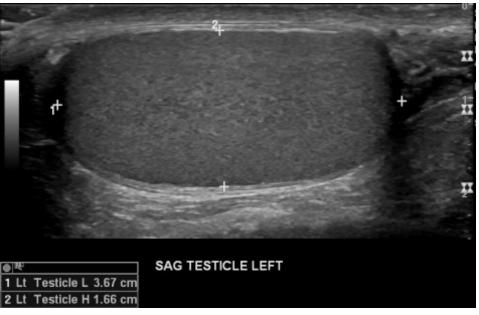


| Prepubertal | Pubertal onset | | | Adult |
|------------------|--|--|---|--|
| G1 | G2 | G3 | G4 | G5 |
| Scrotum, testes, | Initial growth of | Penis has grown in | Penis has grown in | Penis and scrotum |
| and penis as in | scrotum and testes. | length. Scrotum and | both length and | as an adult |
| childhood. | Scrotum has become | testes have grown. | width and the head | |
| Testis volume | redder, thinner and | The skin of the | of the penis has | |
| (TV) ≤ 3 mL | more wrinkled. Penis | scrotum has become | become larger. The | |
| | may have grown a | darker and more | scrotum and testes | |
| | little in length. | wrinkled. | have grown. | |
| | TV > 3 mL. | | | |
| PH1 | PH2 | PH3 | PH4 | PH5 /PH6 |
| No pubic hair | Few straight and long pubic hair, mainly at base of penis (pubarche) | Considerably darker, coarser, and curlier pubic hair appears. Still sparse, mostly located around the base of penis. | More dense, curly, and dark hair. Hair growth is reaching the inner thighs | Dense and curly adult hair growth ¹ . PH6: pubic hair extends upwards to the umbilicus. |

¹Adolescent and adult men may have a habit of removing their pubic hair. Pubic hair stages refer to the appearance without hair removal.

Measurement of testicular volume





Prader orchidometer

Ultra-sound

Examination

Setting up examination site

A location for the physical examination should be set up so that the privacy of the participant is ensured. Thus, as a minimum a separate secluded room where the examination can take place is needed. Optimally, a private changing room, where the participant can undress and safely store their belongings during the examination, should be available in direct connection to the examination room.

Equipment

No specific equipment is needed for assessment of puberty development in girls. For measurement of testicular size in boys a Prader orchidometer is needed.

Safety considerations

In order to avoid risk of abuse as well as risk of being accused of abuse the examiner should be of the same sex as the participant and if this is not possible another person of the same sex as the participant or one of the parents should be in the same room during the examination.

Examination

Girls

The examination should be performed with the participant standing upright

Breast stage: Breast development is evaluated by palpation to distinguish between fat pads and true breast tissue development

Pubic hair development is evaluated by visual inspection

Information on use of oral contraception is often relevant in studies of adolescents and could likewise be obtained during the examination if done discreetly and in confidentiality

Examination

Boys

Measurement of volume of the testes: The individual should be standing upright or lying supine. Testicular volume is estimated by palpation to the nearest 1 ml using Prader's orchidometer. Both testes are measured as they may not be equal in size. Pubertal onset is defined as a testicular volume more than 3 ml in at least one of the testes

Genital stage and pubic hair development are evaluated by visual inspection

Self-assessment of pubertal maturation





Self-assessment vs. Physical examination

Chavarro et al. Validity of Self-assessed sexual maturation against physician assessments and hormone levels. J Pediatr 2017, 186: 172-8

Rasmussen et al. Validity of Self-Assessment of Pubertal Maturation. Pediatrics. 2015, 135:86–93.

Terry et al. Comparison of Clinical, Maternal, and Self Pubertal Assessments: Implications for Health Studies. Pediatrics. 2016, 138:e20154571–e20154571.

Conclusion Self-assessment can be validly used in epidemiologic studies for evaluating sexual maturation in children; however, physician assessment may be necessary for accurate assessment of genitalia development in boys. (J Pediatr 2017;186:172-8).

CONCLUSIONS: Pubertal assessment by the child or the parents is not a reliable measure of exact pubertal staging and should be augmented by a physical examination. However, for large epidemiologic studies self-assessment can be sufficiently accurate for a simple distinction between prepuberty and puberty.

Questions?