MEASURED PHYSICAL ACTIVITY IN PEDIATRIC CHRONIC HD PATIENTS FALL SHORT OF RECOMMENDATIONS

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BACKGROUND

- 13% of children with CKD achieve physical activity goals
- Physical activity is measured and recommended in terms of:
 - Frequency, Intensity, Time, Type (FITT principles)
 - Increased time spent at moderate-vigorous physical activity (MVPA) intensities is beneficial to cardiovascular health



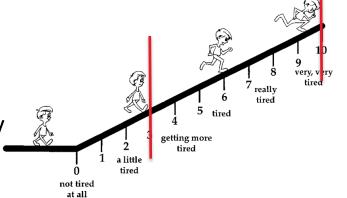


BACKGROUND

- Physical activity guidelines:
 - >6 years of age, 60 minutes of MVPA daily
 - What does that look like for a child?



 Playing tag, movement piece ball sports, skipping rope, climbing, brisk walking speed









BACKGROUND

- Accelerometers: gold standard for physical activity assessment
 - Objective
 - Triaxial: simultaneous acceleration in three directions
 - Not used in pediatric dialysis population



GT3X+, ActiGraph LLC



Hospital



AIM

Describe objective physical activity measures by intensity levels in children on hemodialysis (HD).





METHODS

- Single-center HD unit, 8-18 years of age
- Functional metrics:
 - Handgrip strength
 - 10 meter walk test
 - Leg extension strength test
- Anthropometrics
- Standard laboratory measures
- Physical Activity Questionnaire (PAQ) performed





METHODS

- Accelerometer Wear:
 - Non-dominant wrist
 - 7 days
- Accelerometer Analysis:
 - Valid wear day ≥ 8 hours
 - 15 second epochs
 - Vector magnitude to assess intensities with predefined count cut offs
 - Sedentary: \leq 305 counts/5 seconds \rightarrow \leq 3600/min
 - **Light**: 306-817 counts/5 seconds → 3601-9815/min
 - Moderate-Vigorous: \geq 818 counts/5 seconds \Rightarrow \geq 9816/min

Reported as:

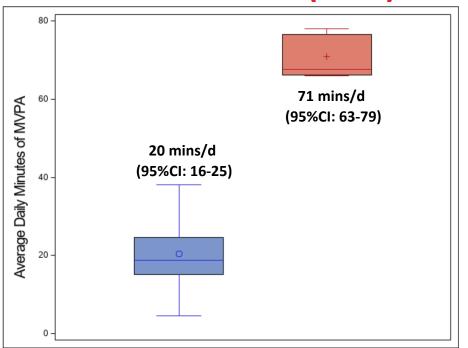
- Average daily time (mins) spent at:
 - Sedentary
 - Light
 - Moderate Vigorous
- Average daily counts/min (CPM)
 - Adjusted for daily wear time



RESULTS

- 21 participants
 - 15 ± 2.9 years, 61.9 % male
- Mean daily Counts Per Minute (CPM): 2,297 ± 777
 - MVPA predicted CPM (p<0.001)
 - MVPA accounts for 84.6% variance
 - Light intensities for 7.6% variance

RESULTS - 23.8% (N=5) MET MVPA GOALS



Intensity	Time (mins/day)
Sedentary	693 ± 59
Light	197 ± 58
MVPA	22 (IQR: 16-38)

Goal Not Met

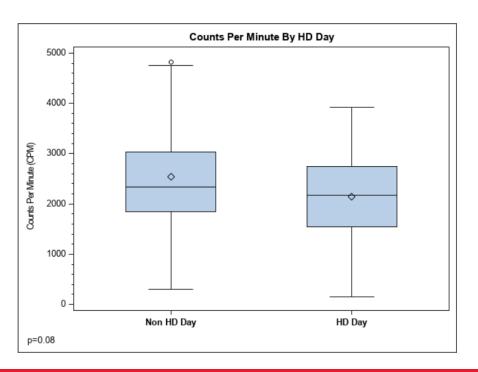
Goal Met



RESULTS

- Age inverse association with:
 - MVPA (r=-0.51, p=0.02)
 - Mean CPM (r=-0.63, p=0.008)
- Leg strength associated with average time spent at:
 - MVPA (r=0.43, p=0.05)
 - Light (r=0.49, p=0.02)
- No association with other measures

RESULTS – IMPACT OF HD DAY

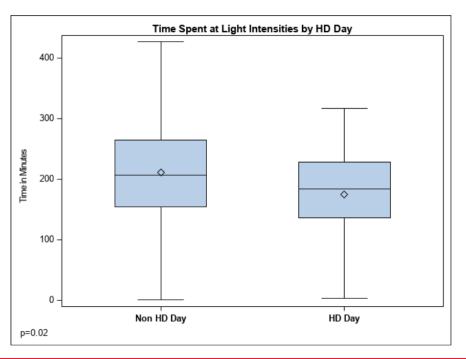


- No effect on daily mean CPM
 - HD day: 2,142 (95%CI: 1897-2388)
 - Non-HD day: 2,547 (95%CI: 2322-2772)





RESULTS – IMPACT OF HD DAY

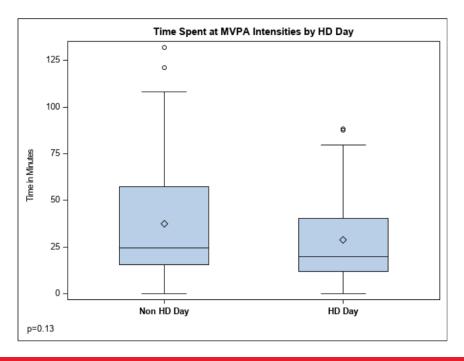


- Time at light intensity but not MVPA differed
- Light (p=0.02):
 - HD day: 175 mins/d (95%CI: 153-197)
 - Non-HD day: 212 mins/d (95%CI: 192-231)





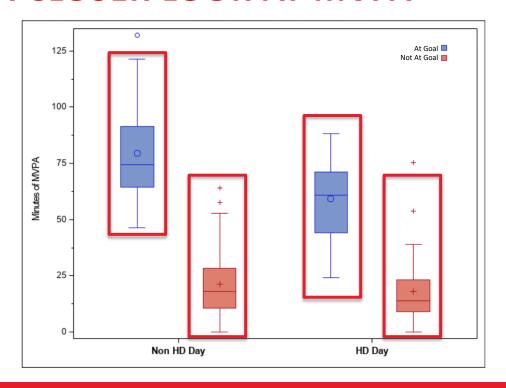
RESULTS – IMPACT OF HD DAY



- MVPA (p=0.13):
 - HD day: 29 mins/d (95%CI: 22-36)
 - Non-HD day: 37 mins/d (95%CI: 31-44)

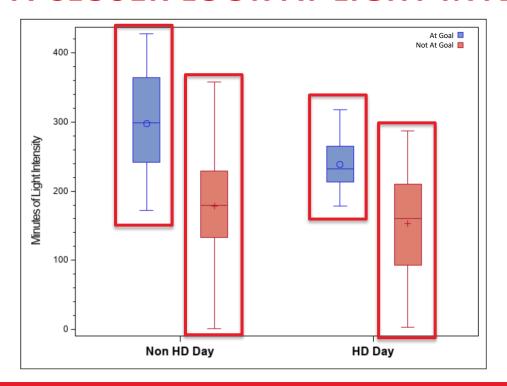


RESULT – A CLOSER LOOK AT MVPA





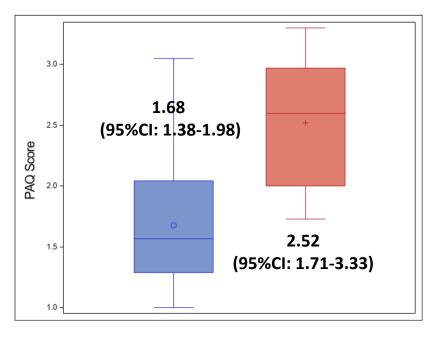
RESULTS – A CLOSER LOOK AT LIGHT INTENSITIES





RESULTS – PAQ SCORE

- Positive associations with:
 - CPM (r=0.54, p=0.01)
 - Time at Light (r=0.6, p<0.01)
 - Time at MVPA (r=0.67, p<0.001)
- MVPA predicted PAQ score (p<0.01)



Goal Not Met

Goal Met





CONCLUSIONS



Few children on HD reach MVPA goals



Activity declines with increasing age



Higher MVPA linked higher leg strength



PAQ score can help identify activity goals



Variation in activity due to HD day



QUESTIONS

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Fig 7. Measuring knee extension using a belt to stabilize the dynamometer. Standard body position of the patient and the device are shown with knees and hips flexed to 90°.

