

Small for  
Gestational Age



**Knowledge**  
to grow by

Models throughout are used for illustrative purposes only.



## Introduction

Too short, too tall, or just right? From birth, your health care provider has tracked your child's progress, graphing height, weight, and head size as points on a chart.

Your child's growth curve is consistently below average. Your doctor has explained that your son or daughter has short stature related to birth size being small for gestational age, or SGA. There are lots of reasons for slow growth. In this brochure, you will get answers to some of your questions about your child's development. You will also get information on what you can do to help your child, so that you can make informed decisions now and in the future.

## Small for gestational age (SGA)

### What is gestational age?

**Gestational age** refers to how many weeks the **fetus** has been growing inside the mother's womb. It is based on the first date of the mother's last menstrual period. Ultrasounds during pregnancy measuring the head, abdomen, and thigh bone also help to determine gestational age.

Most babies are born after 38 to 42 weeks of gestation. Right after birth, your doctor checked your child's weight and length, and compared it with the weight and length expected for his or her gestational age. Most babies have a birth length and weight close to what is expected, but some are larger or heavier than expected, and some are smaller or lighter.

Your doctor may also have looked at other things, such as your baby's head size, the condition of skin and hair, reflexes, muscle tone, posture, and other signs, to determine your baby's developmental gestational age. This assessment describes the age which your baby actually looks and acts. For example, although your baby may have been born after 39 weeks, he or she may look and act more like a baby born after only 35 weeks.



Both of these age assessments are important because together they provide valuable information that can directly affect the medical treatment plan for your baby.

### What is SGA?

If you are told that your child is small for gestational age (SGA), it means that his or her birth weight and/or length was below the 2.3rd **percentile**. This means that your child is smaller than roughly 97% of all other babies at that gestational age.

Your doctor is able to compare your child's growth with national averages. When your health care provider sees a consistent trend, he or she can look for other signs of SGA.

About 91,000 children born in the United States each year are born SGA and may be shorter and lighter than normal, whether or not they are premature or full-term infants. Most children born SGA catch up, but those with no **catch-up growth** by ages 2 to 4 years may need more attention from an **endocrinologist**, a doctor who specializes in hormone-related disorders.

### Why does SGA happen?

Most of the time, we don't know why a child is born SGA. When we can locate a cause, some common reasons are issues with the fetus, including a genetic defect; problems with the **placenta**; or mother's health issues such as heart disease, malnutrition, or drug, alcohol, or cigarette use.

Most children born SGA have a normal amount of growth hormone, but some may have less growth hormone than the average child.

### Predicting your child's height Genetic factors

Blue eyes or brown, light hair or dark, short or tall—our **genes** play an essential role in determining our **characteristics**, including individual color, size, and shape. If smaller-than-average height runs in your family, then it is more likely that your child will be small. Your doctor may say your child has familial short stature.

Although some babies are small because of genetics, others are small because of fetal growth problems, while in others the cause is unknown.



## Evaluating and diagnosing SGA

### Hand X-ray

The doctor may take an X-ray of your child's non-dominant hand because it shows his or her bone age and can help predict your child's final adult height. Bone age is more important than actual age in years because it can help to show if your child still has room for catch-up growth.

### Taking action: treatment of SGA

Depending on the results of your child's evaluation tests, your doctor may recommend certain treatments. These treatments may help children with SGA have catch-up growth. Your doctor can give you more information about treatment options and what to expect for your child. If treatment is recommended, it is important for your child to continue treatment as prescribed by your doctor.

## Insurance

### Questions about coverage

If your child is prescribed treatment, you may have questions about insurance coverage. There are programs that may help you get the assistance you need. In many cases, assistance is just a phone call away. Pharmaceutical manufacturers and your pharmacy may be able to answer your questions about insurance coverage and reimbursement, and may be able to help you find additional coverage to ensure that your child's treatment continues as prescribed.

### Getting help

With your permission, your doctor may contact the pharmaceutical manufacturer so that you can get help with completing insurance paperwork. The doctor may submit a Statement of Medical Necessity, a recent growth chart (if applicable), and any available insurance information.

### Manufacturers' assistance programs

If your doctor has prescribed a treatment option for your child but you are unable to resolve insurance reimbursement issues, the pharmaceutical manufacturer may be able to provide treatment free of charge on a short-term basis. The manufacturer may also help find assistance from other patient and not-for-profit support organizations.

***Use these lines for questions you may have for your doctor, and notes from your conversation.***

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### **ADDITIONAL RESOURCES**

**You can also find information and support from these organizations:**

#### **Human Growth Foundation**

997 Glen Cove Avenue, Suite 5  
Glen Head, NY 11545  
Tel: 1-800-451-6434

[hgfound.org](http://hgfound.org) | [hgf1@hgfound.org](mailto:hgf1@hgfound.org)

#### **The MAGIC Foundation®**

6645 W. North Avenue  
Oak Park, IL 60302  
Tel: 1-800-3MAGIC3 (362-4423)

[magicfoundation.org](http://magicfoundation.org)

#### **Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)**

National Institutes of Health, DHHS  
31 Center Drive, Bldg. 31  
Rm. 2A32  
Bethesda, MD 20892-2425  
Tel: 1-800-370-2943

[nichd.nih.gov](http://nichd.nih.gov)

## GLOSSARY

**Here are definitions for some words in this brochure that may be new to you. If there are other words that you need to understand better, your child's doctor or nurse can help you.**

### Catch-up growth

Catch-up growth means the ability to catch up to the average height of normal children. Most children born SGA will have their catch-up growth by ages 2 to 4 years, but some do not.

### Characteristic

A distinguishing trait, quality, or property.

### Endocrinologist

A specially trained doctor who diagnoses and treats diseases of glands and hormone imbalances.

### Fetus

A developing human from 2 months of gestation to birth.

### Genes

The functional units on a chromosome that transmit characteristics from parents to their children. Short pieces of DNA tell the body how to build a specific protein. There are approximately 30,000 genes in each cell of the human body. The combination of all genes makes up the blueprint for the human body and its functions. A person's genetic makeup is called a genotype.

### Gestational age

The time measured from the first day of a woman's last menstrual cycle to the current date. It is measured in weeks. A normal pregnancy can range from 38 to 42 weeks. Gestational age can be determined before or when the baby is born.

### Percentile

A measurement that tells how much of a group is equal to or below it. For example, a percentile score of 95 is a score equal to or better than 95% of other scores.

### Placenta

The placenta grows around the fetus during pregnancy and stays connected to the wall of the uterus. It provides the fetus with nourishment and secretes hormones that help regulate and maintain the pregnancy.

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