

Approach to a child with Rickets



Dr Jyoti Singhal
Consultant Pediatric Nephrologist
KEM Hospital, Pune



Introduction

- Disease of growing bones

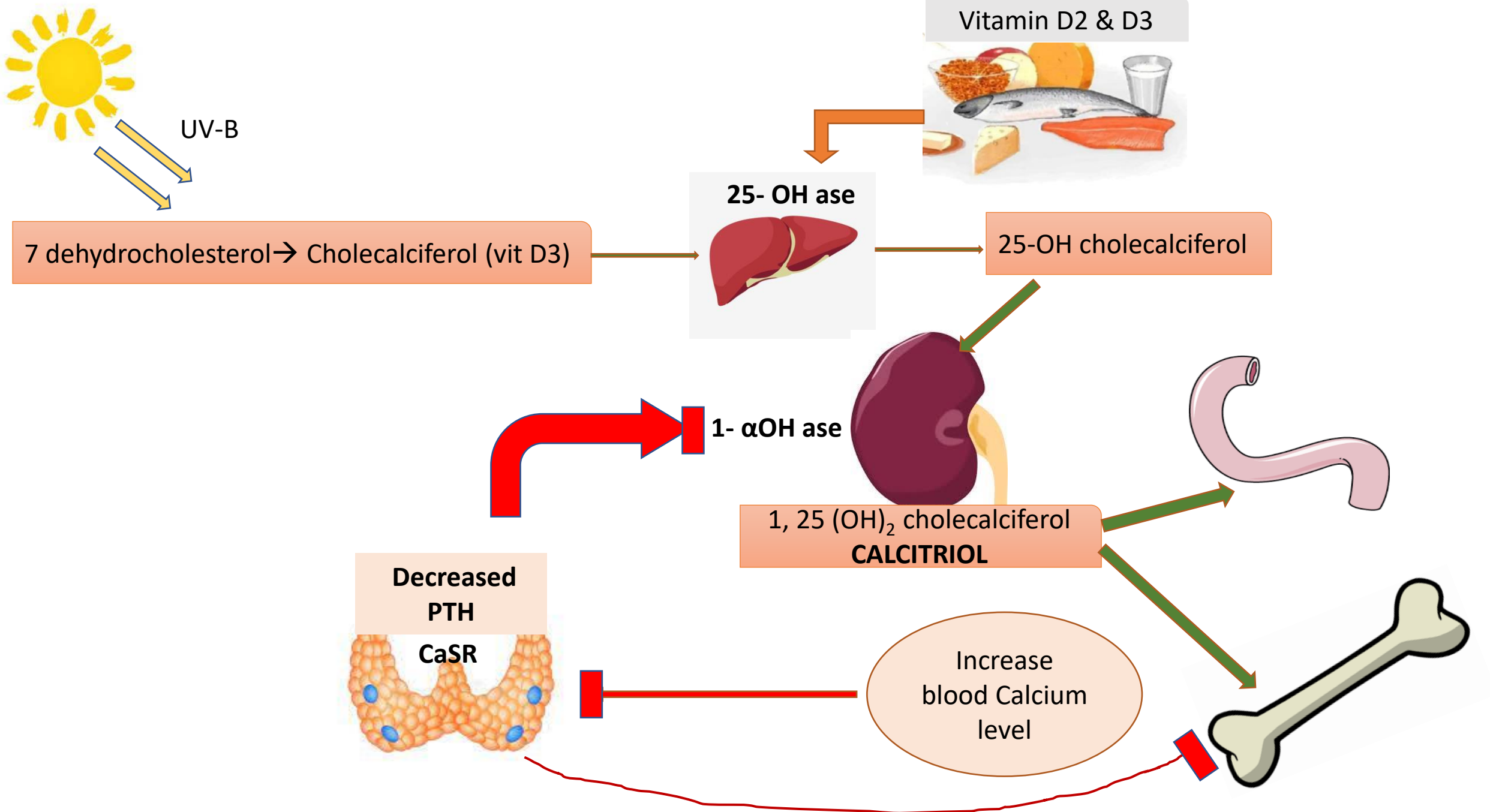
Defective mineralisation of growth plates



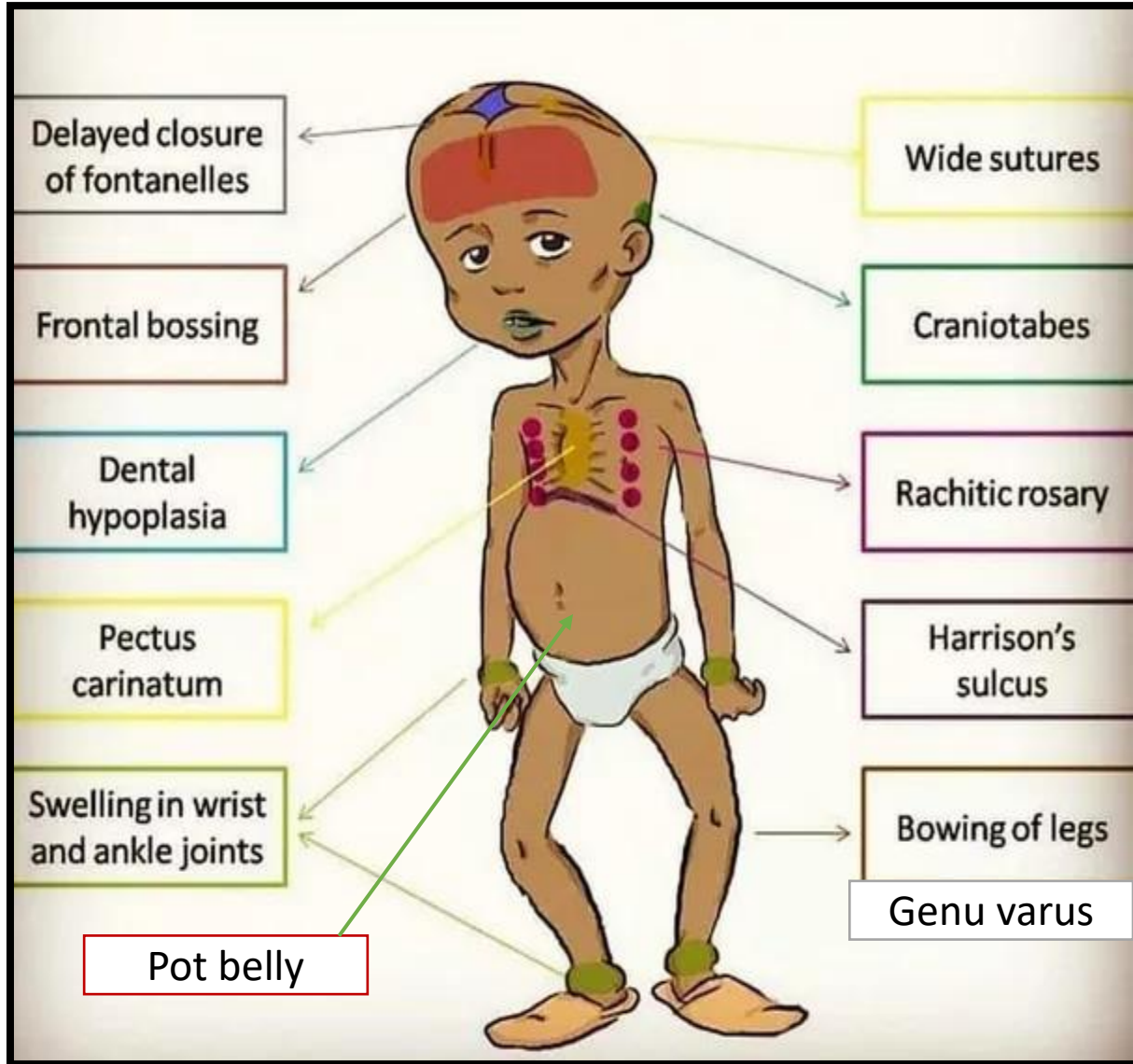
Softening of bones



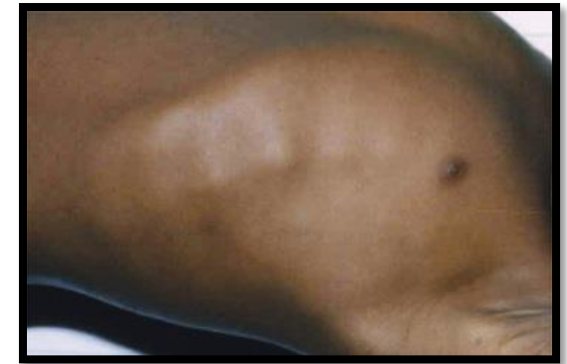
Widening at joints



Presentation



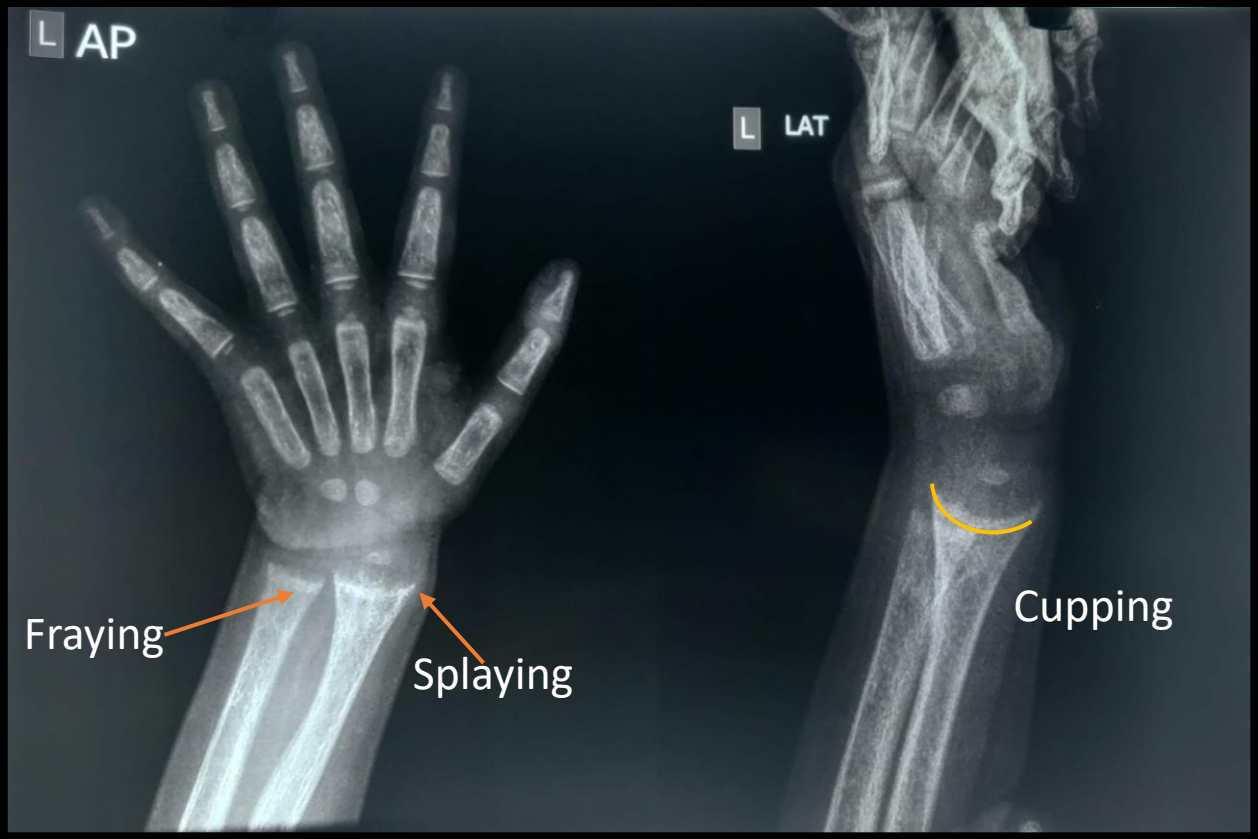
Genu valgum



Rachitic rosary

- ### Hypocalcemic symptoms
- Tetany
 - Seizures
 - Stridor due to laryngeal spasm

Radiology of Rickets

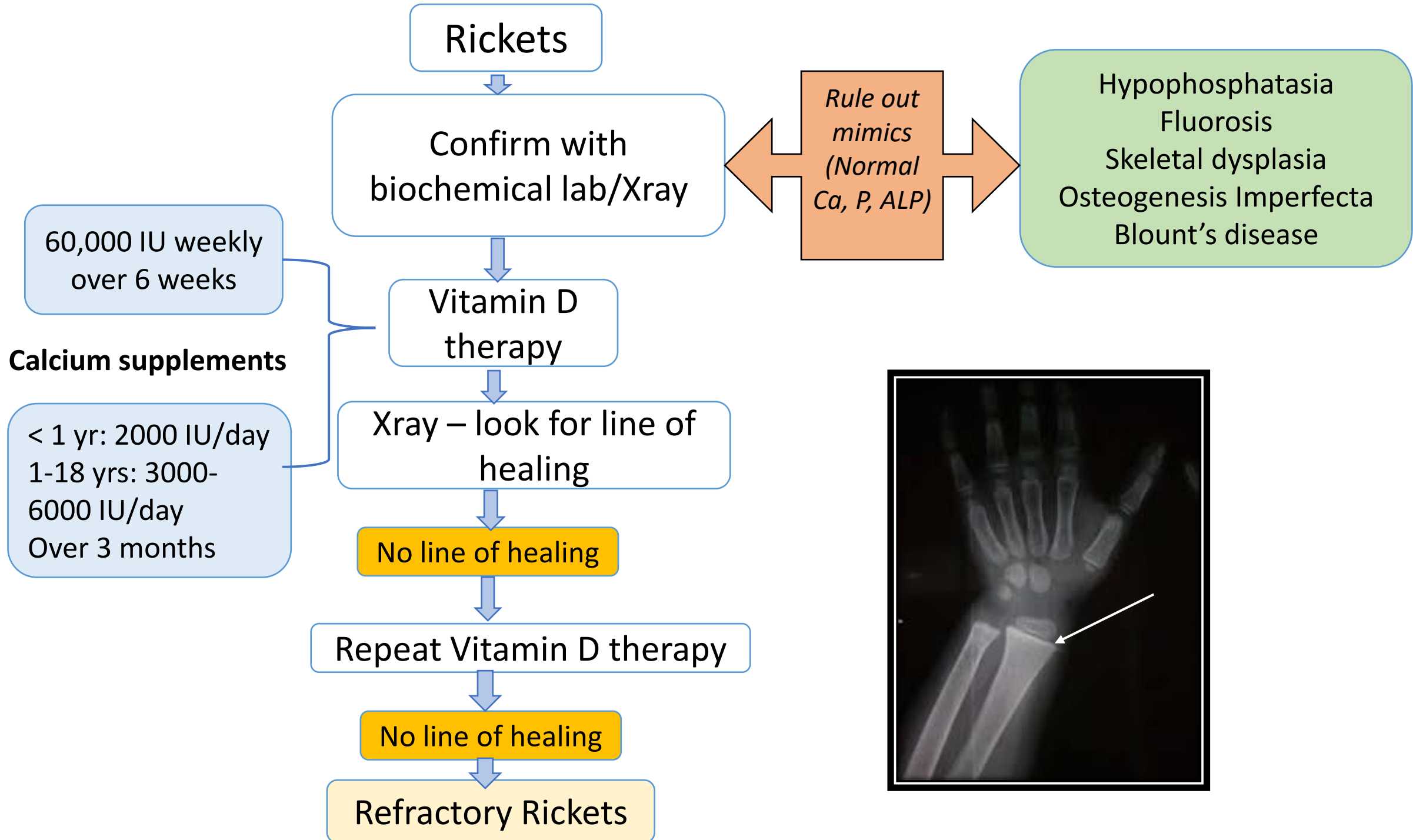


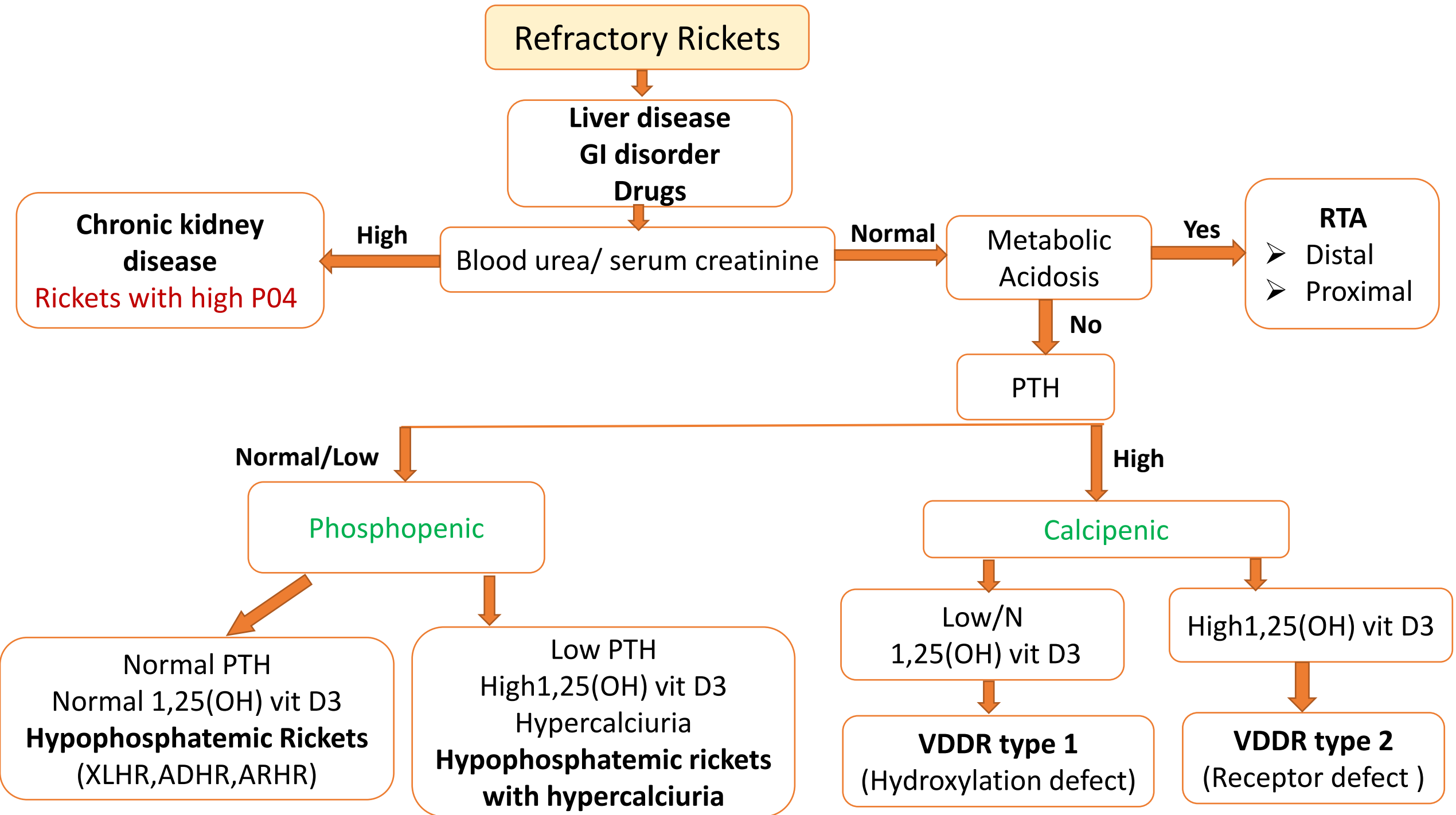
Pointers towards non-nutritional Rickets



- Polyuria/polydipsia
- Nocturia
- Family history of bony deformity
- Infants with severe deformities

- Severe failure to thrive
- Pallor
- Hypertension
- Predominant lower limbs involvement
- Alopecia





Key points

- Document calcium,phosphorus & ALP abnormality to confirm rickets
- Rickets with high phosphorus is seen only in CKD
- Severe failure to thrive with rickets suggest non-nutritional cause



Thank You

