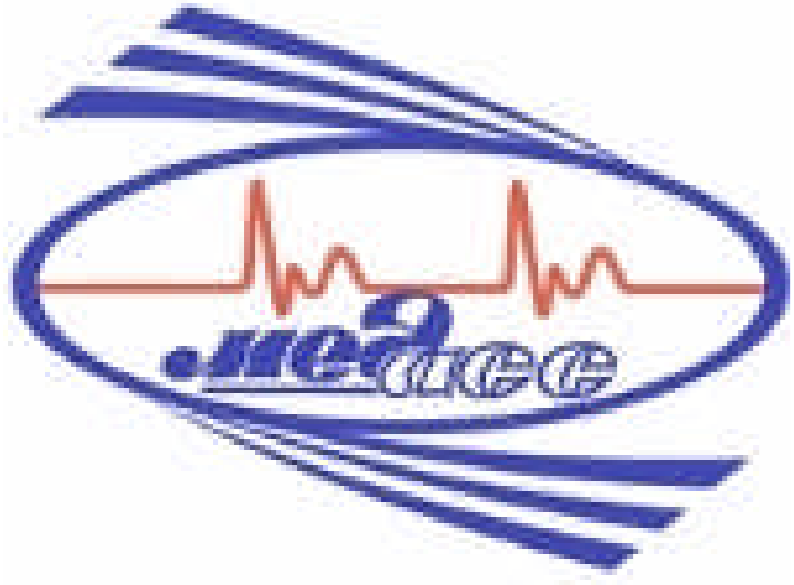


# Bioelectric Impedance Phase Angle and Body Composition in Russian Children Aged 10–16 Years: Reference Values and Correlations

E.G. Martirosov<sup>1</sup>, I.A. Khomyakova<sup>2</sup>, D.V. Nikolaev<sup>3</sup>, S.V. Pushkin<sup>3</sup>,  
T.F. Romanova<sup>1</sup>, M.M. Semenov<sup>1</sup>, and S.G. Rudnev<sup>4</sup>  
<sup>1</sup>Moscow Committee of Sports, Moscow, Russia  
<sup>2</sup>Institute and Museum of Anthropology, Moscow State University, Moscow, Russia  
<sup>3</sup>Scientific Research Centre “Medass”, Moscow, Russia  
<sup>4</sup>Institute of Numerical Mathematics, Russian Academy of Sciences, Moscow, Russia



## Abstract

We describe the results of anthropological study of healthy Russian children which included both anthropometry and bioimpedance analysis of body composition (n=946). The whole-body impedance was measured according to a conventional tetrapolar scheme using BIA analyzer ABC-01 “Medass” (SRC Medass, Russia). We report a normal ranges for phase angle and BIA body composition parameters, such as absolute and relative contents of fat (FM, %FM) and fat-free mass (FFM) for boys and girls depending on age. FFM was assessed using Houtkooper equation. The obtained estimates of body composition were compared with those derived from skinfold anthropometry using Slaughter, Deurenberg, Matiegka, and other equations. Also, the results of correlation and factor analysis of phase angle and BIA body composition with various anthropometric indexes are discussed.

**Keywords:** phase angle, body composition, children

## 1. Introduction

Bioelectrical impedance analysis is a noninvasive and portable method widely used in health-related studies. Along with indirect estimates of body composition relying upon population-specific equations, there is growing interest for direct use of BIA reactance and resistance measurements in epidemiological and clinical investigations [1, 2]. Phase angle, which is calculated as an arc tangent of the reactance to resistance ratio multiplied by a constant to convert radians to degrees [3, 4], was shown to be a useful nutritional indicator in children [5] and a significant prognostic factor of clinical outcome in various conditions such as liver cirrhosis, AIDS, and critical illness [2, 6].

There are many reports concerning measurements of phase angle and BIA body composition in children from a number of countries and study groups [6-8]. The aim of this study was to describe population reference values of phase angle and BIA body composition in Russian children aged 10–16 years and to compare the obtained estimates with various anthropometric predictions.

## 2. Materials and methods

Anthropometry was performed in the 946 children (500 boys and 446 girls) aged 10–16 years using standard measurement procedures described in [9-11]. The data were collected cross-sectionally in Moscow schools in 2005. Skinfold thicknesses were measured in 294 males and 140 females (of the 946) by the Lange caliper on the right side of the body under standard pressure (10 g/mm<sup>2</sup>). Body composition parameters were evaluated using Slaughter (S1, S2), Deurenberg (DR), Matiegka (M), and Dezenberg (D1, D2) equations (Table 2). Body density (BD) was converted into percent fat mass (%FM) using Siri equation  $\%FM = (C_1/BD - C_2) \times 100$  with the coefficients  $C_1$  and  $C_2$  depending on age and sex [12]. The whole-body impedance was measured on the right side of the body by the BIA analyzer ABC-01 “Medass” (SRC Medass, Russia) according to a conventional tetrapolar scheme at a constant frequency 50 kHz. Phase angle (PA) was calculated as  $\arctan(X_C/R) \times 180^\circ/\pi$ , where  $X_C$  is the reactance and  $R$  the whole-body electric resistance. Fat-free mass (FFM) was assessed using Houtkooper equation [20] which was validated against 3C model of body composition and is currently recommended for use in children [19]:  $FFM = 0.61 \times (\text{Height}^2/R) + 0.25 \times BM + 1.31$ , where Height is standing height (m), and BM – body mass (kg). Fat mass was calculated as the difference between BM and FFM, and %FM as  $(FM/BM) \times 100$ .

Pairwise comparison was used to compare estimates of percentage fat using Houtkooper and SKF equations. A value of 0.05 was used to define significance. All statistical analyses were performed by using Statistica software (ver.6.0).

**Table 1. Height, Weight, and BMI of the Study Group According to Age and Sex, Mean (SD)**

Age	n	Height, cm	Weight, kg	BMI, kg/m <sup>2</sup>
Boys				
10	52	143.0 (6.3)	37.9 (9.3)	18.4 (3.4)
11	65	147.9 (6.8)	42.0 (9.8)	19.1 (3.4)
12	68	155.2 (7.9)	47.8 (10.6)	19.8 (4.1)
13	82	163.5 (9.2)	53.9 (13.2)	20.0 (3.5)
14	85	169.1 (9.2)	59.4 (11.8)	20.6 (2.8)
15	76	173.1 (8.3)	63.0 (13.3)	20.9 (3.1)
16	72	176.9 (6.8)	67.0 (11.1)	21.4 (3.0)
Girls				
10	41	141.2 (7.0)	33.9 (7.1)	17.0 (3.4)
11	42	148.4 (8.9)	39.2 (9.9)	17.6 (3.0)
12	66	155.2 (8.5)	45.6 (9.8)	18.8 (3.0)
13	81	158.0 (8.8)	49.0 (8.1)	19.8 (4.0)
14	75	161.3 (5.9)	52.1 (10.7)	20.0 (3.4)
15	85	163.2 (5.6)	56.9 (9.8)	21.3 (3.3)
16	56	164.1 (5.6)	57.0 (8.1)	21.1 (2.8)

**Table 2. Anthropometric Prediction Equations for %FM, FM, and Body Density in Children**

	Ref	SKF	Equation
SL1	[13]	2	%FM = 0.735 × S1 + 1.0 (boys)
		2	%FM = 0.610 × S1 + 5.1 (girls)
SL2	[13]	2	%FM = 0.783 × S2 + 1.6 (boys)
		2	%FM = 0.546 × S2 + 9.7 (girls)
DR	[14]	4	BD = 1.1133 – 0.0561 × lgS3 + 1.7 × Age × 10 <sup>-3</sup> (boys)
		4	BD = 1.1187 – 0.0630 × lgS3 + 1.9 × Age × 10 <sup>-3</sup> (girls)
M	[15]	8(7)	FM (kg) = 1.3 × d × S
D1	[16]	1	BF (kg) = 0.38 × BM (kg) + 0.30 × TS (mm) + 0.87 × Sex – 8.61, where Sex = 1(boys), 2(girls)
D2	[16]	0	BF (kg) = 0.56 × BM (kg) – 8.17

SKF – the number of skinfolds measured, S1 – the sum of the triceps and calf skinfold thicknesses (mm), S2 – the sum of the triceps and subscapular skinfold thicknesses (mm), lgS3 – decimal logarithm of the sum of the biceps, triceps, subscapular, and suprailiac skinfold thicknesses (mm), TS – the triceps skinfold thickness, d – average thickness of subcutaneous fat layer (mm) measured at 8 and 7 sites in boys and girls, respectively, according to the scheme by Lutovinova et al [17], and S body surface (m<sup>2</sup>) [18].

## 3. Results and discussion

Tables 3 and 4 show bioelectric parameters and body composition estimates for our group of children according to age and sex. Along with the gradual age-related increasing of height, weight, and body mass index (see Table 1), we observed the same patterns for FFM and FM (Table 4). In males, the resistance decreased significantly across age groups from 651.1 (10 years) to 501.8 Ohms (16 years). The similar trend can be seen in the females' data with the exception of a local maximum for  $R$  at the age of 14 years. The reactance decreased up to 14 and 13 years in boys and girls with the slight and moderate increase thereafter, respectively. In boys, one can see a decline in the percentage fat mass between 11 and 15 years, with an opposite regularity in girls. In both sexes, height and weight were better predictors for fat-free mass, and body mass index – for fat mass (Table 5).

In boys and girls, phase angle increased with an increase in weight, BMI, FFM and TBW. Figure 1 illustrates significant relationship of PA with FFM in boys. Phase angle was significantly inversely associated with the percentage fat in boys (see Table 5) and with the percentage fat-free mass in girls. There was no association between the phase angle and absolute fat mass in boys, as well as between the phase angle and height in girls.

**Table 3. Resistance, Reactance, Phase Angle, and Total Body Water of the Study Group According to Age and Sex, Mean (SD)**

Age	n	R, Ω	X <sub>C</sub> , Ω	PA	TBW, L
Boys					
10	52	651.1 (59.3)	71.8 (7.3)	6.3 (0.6)	23.3 (3.9)
11	65	625.4 (65.7)	69.3 (7.6)	6.3 (0.5)	26.7 (4.1)
12	68	581.9 (71.8)	64.4 (9.8)	6.3 (0.7)	31.2 (4.5)
13	82	555.0 (79.7)	62.3 (7.9)	6.4 (0.6)	35.6 (5.9)
14	85	531.4 (69.5)	61.1 (7.7)	6.6 (0.8)	38.6 (5.9)
15	76	511.5 (56.2)	61.2 (8.2)	6.8 (0.8)	41.0 (5.5)
16	72	501.8 (56.4)	61.2 (6.9)	7.0 (0.8)	42.8 (5.0)
Girls					
10	41	725.0 (89.3)	78.2 (8.7)	6.2 (0.5)	20.7 (3.3)
11	42	667.5 (74.0)	71.9 (9.6)	6.2 (0.5)	24.3 (4.2)
12	66	641.2 (68.8)	67.6 (8.0)	6.0 (0.6)	27.2 (4.1)
13	81	631.1 (66.0)	67.4 (6.6)	6.1 (0.6)	28.3 (3.5)
14	75	637.9 (67.6)	69.9 (7.0)	6.3 (0.5)	29.2 (4.0)
15	85	620.9 (62.5)	69.9 (7.4)	6.4 (0.6)	30.9 (3.5)
16	56	607.4 (64.6)	70.0 (8.3)	6.6 (0.6)	31.4 (2.9)

**Table 4. Absolute and Relative Fat Mass, and Fat-Free Mass of the Study Group as Assessed by BIA According to Age and Sex, Mean (SD)**

Age	n	FM, kg	%FM	FFM, kg	FFM, kg [8]
Boys					
10	52	7.8 (5.3)	18.8 (8.0)	30.2 (4.9)	31.1 (4.1)
11	65	8.5 (5.4)	19.1 (7.1)	33.4 (5.4)	33.8 (4.3)
12	68	8.7 (6.1)	17.2 (8.1)	39.1 (6.8)	36.6 (4.6)
13	82	8.9 (6.4)	15.8 (6.6)	45.0 (9.2)	40.7 (4.9)
14	85	9.6 (5.2)	15.7 (6.1)	49.8 (9.2)	49.5 (5.2)
15	76	9.6 (6.0)	14.5 (5.6)	53.3 (8.8)	55.5 (5.5)
16	72	10.4 (5.1)	15.0 (5.4)	56.6 (7.6)	58.0 (5.8)
Girls					
10	41	7.0 (4.0)	19.6 (8.0)	26.9 (4.4)	29.3 (3.4)
11	42	7.5 (4.6)	17.9 (7.7)	31.7 (6.5)	32.8 (3.6)
12	66	9.6 (4.6)	20.1 (5.8)	36.0 (6.2)	36.1 (3.8)
13	81	11.1 (4.3)	22.0 (5.7)	38.0 (5.1)	38.7 (4.0)
14	75	12.6 (5.6)	23.3 (5.7)	39.5 (5.9)	40.5 (4.1)
15	85	14.9 (5.4)	25.6 (5.1)	42.0 (5.5)	41.7 (4.3)
16	56	14.1 (4.5)	24.3 (4.9)	42.9 (4.7)	42.6 (4.5)

**Table 5. Correlations of Phase Angle and BIA Body Composition with Height, Weight, and BMI**

	PA	FM	%FM	FFM	TBW
Boys (n=500)					
Ht	0.24	0.26	0.16	0.91	0.91
Wt	0.29	0.69	0.27	0.94	0.92
BMI	0.24	0.85	0.59	0.63	0.59
PA	•	N.S.	0.14	0.37	0.35
Girls (n=446)					
Ht	N.S.	0.46	0.25	0.81	0.80
Wt	0.28	0.90	0.68	0.94	0.92
BMI	0.32	0.89	0.77	0.69	0.66
PA	•	0.22	0.13	0.29	0.27

**Table 6. Results of Factor Analysis of Phase Angle with Selected Anthropometric and Body Composition Variables**

Variable	Boys		Girls	
	Factor 1	Factor 2	Factor 1	Factor 2
PA	0.171	0.044	0.084	-0.063
Ht	0.991	0.021	0.133	-0.989
Wt	0.849	-0.401	0.564	-0.658
BMI	0.403	-0.673	0.700	-0.167
FM	0.308	-0.921	0.852	-0.363
%FM	-0.134	-0.982	0.985	-0.123
FFM	0.931	-0.064	0.271	-0.793
Proportion of variance	0.411	0.347	0.372	0.317

**Table 7. Correlations between Anthropometric and BIA Estimates of FM in Boys and Girls (Upper and Lower Parts of the Table, Respectively)**

	H	DR	D1	D2	M	SL1	SL2
H	•	0.98	0.78	0.67	0.83	0.86	0.87
DR	0.99	•	0.88	0.80	0.79	0.88	0.88
D1	0.93	0.96	•	0.97	0.64	0.82	0.79
D2	0.91	0.94	0.97	•	0.45	0.67	0.64
M	0.82	0.80	0.83	0.72	•	0.91	0.93
SL1	0.89	0.90	0.93	0.83	0.91	•	0.97
SL2	0.89	0.90	0.92	0.82	0.92	0.99	•

In boys, Factor 1 accounted for 41.1% of the total variance and had maximal loadings of height, weight, and FFM, reflecting a principal role of *skeletal and muscular traits* in their somatic development. Factor 2 ('adiposity') had maximal (absolute) loadings of %FM, FM, and BMI. In girls, the above factors followed in the reverse order suggesting primary importance of *adiposity traits* (37.2% of the total variance).

Correlations between BIA and skinfold anthropometry estimates of FM were significant ranging between 0.67 and 0.98 (Table 7). The least value was obtained in boys for 'purely' anthropometric equation D2 not relying upon skinfold data (see Table 2).

To test if these strong relationships does in fact indicate the agreement between the measurement techniques (for discussion, see [21]), we calculated the differences between the anthropometric and BIA estimates of fat mass ( $FM_{\text{anthro}} - FM_{\text{BIA}}$ ). The obtained mean values for the combined group of males were 0.5, 0.8, 1.1, 2.5, 7.4, and 15.1 kg for Matiegka (M), Slaughter (S2, S1), Deurenberg (DR), and Dezenberg (D1, D2) equations, respectively. In terms of the percentage fat mass, the mean (SD) scores for males obtained from H, S1, S2, DR and M equations were 15.8% (5.7), 17.5% (7.6), 16.9% (7.4), 20.4% (4.2), and 15.9% (7.8) respectively. The paired sample *t*-test showed that only Matiegka equation had no significant difference with the results of BIA estimates of the %FM. In females, the mean %FM scores obtained from the aforementioned equations, were 20.7% (5.9), 20.6% (7.2), 19.9% (7.1), 25.1% (3.8), and 20.4% (6.7) respectively. The differences between BIA and skinfold anthropometric estimates S1, M, and S2 were insignificant. So, of the anthropometric methods, the best agreement with the results of BIA estimates of the mean %FM was obtained using Matiegka and Slaughter equations. For our study group, Dezenberg equations were inappropriate in both genders.

## 4. Conclusion

In this work, we represent the mean values and standard deviations for phase angle and body composition in the 946 Russian children aged 10–16 years according to age and sex. These data can serve as a reference for use in outpatient and clinical practice. Of the anthropometric methods, Matiegka equation in males, as well as S1, M, and S2 equations in females, showed an agreement with BIA estimates of percentage fat mass, but had a significant unidirectional biases with respect to relative fatness.

Since all the equations used in this study for body composition analysis assume constant density of fat-free mass which is known to vary significantly across age, more work has to be done for the validation of these formulae in Russian children against reference models and methods.

## 5. References

- [1] Wells J C K, Williams J E, Fewtrell M et al (2007) A simplified approach to analysing bio-electrical impedance data in epidemiological surveys. *Int J Obes* 31:507–514
- [2] Selberg O, Selberg D (2002) Norms and correlates of bioimpedance phase angle in healthy human subjects, hospitalized patients, and patients with liver cirrhosis. *Eur J Appl Physiol* 86:509–516
- [3] Cole K S (1932) Electric phase angle of cell membranes. *J Gen Physiol* 15:641–649
- [4] Baumgartner R N, Chumlea W C, Roche A F (1988) Bioelectric impedance phase angle and body composition. *Am J Clin Nutr* 48:16–23
- [5] Nagano M, Suita S, Yamanouchi T (2000) The validity of bioelectrical impedance phase angle for nutritional assessment in children. *J Pediatr Surg* 35:1035–1039
- [6] Barbosa-Silva M C G, Barros A J D, Wang J et al (2005) Bioelectrical impedance analysis: population reference values for phase angle by age and sex. *Am J Clin Nutr* 82:49–52
- [7] Bosty-Westphal A, Danielzik S, Dorhofer R-P et al (2006) Phase angle from bioelectrical impedance analysis: population reference values by age, sex, and body mass index. *J Parenter Enteral Nutr* 30:309–316
- [8] Van der Sluis I M, Ridder M A J, Boot A M et al (2002) Reference data for bone density and body composition measured with dual-energy x ray absorptiometry in white children and young adults. *Arch Dis Child* 87:341–347
- [9] Martirosov E G (1982) Methods of investigation in sports anthropology. Physical Culture and Sports, Moscow (in Russian)
- [10] Lohman T G, Roche A F, Martorell R (1988) Anthropometric standardization reference manual. Human Kinetics, Champaign, IL
- [11] Martirosov E G, Nikolaev D V, Rudnev S G (2006) Technologies and methods of human body composition assessment. Nauka, Moscow (in Russian)
- [12] Lohman T G (1989) Assessment of body composition in children. *Pediatr Exerc Sci* 1:19–30
- [13] Slaughter M H, Lohman T G, Boileau R A et al (1988) Skinfold equations for estimation of body fatness in children and youth. *Hum Biol* 60:709–723
- [14] Deurenberg P, Pieters J J L, Hautvast J G A (1990) The assessment of the body fat percentage by skinfold thickness measurements in childhood and young adolescence. *Br J Nutr* 63:293–303
- [15] Matiegka J (1921) The testing of physical efficiency. *Am J Phys Anthropol* 4:223–230
- [16] Dezenberg C V, Nagy T R, Gower B A et al (1999) Predicting body composition from anthropometry in pre-adolescent children. *Int J Obes* 23:253–259
- [17] Lutovinova N Yu, Utkina M I, Chetev V P (1970) Methodological issues relating the studies of subcutaneous fat variations. *Vopr Antropol* 36:32–54 (in Russian)
- [18] DuBois D, DuBois E F (1989) A formula to estimate the approximate surface area if height and weight be known. 1916. *Nutrition* 5: 303–311
- [19] Heyward V H, Wagner D R (2004) Applied body composition assessment. Human Kinetics, Champaign, IL
- [20] Houtkooper L B, Going S B, Lohman T G et al (1992) Bioelectrical impedance estimation of fat-free body mass in children and youth: a cross-validation study. *J Appl Physiol* 72:366–373
- [21] Williams C A, Bale P (1998) Bias and limits of agreement between hydrodensitometry, bioelectrical impedance and skinfold calipers measures of percentage body fat. *Eur J Appl Physiol* 77:271–277

For further information, please, contact [rudnev@im.ras.ru](mailto:rudnev@im.ras.ru) (Sergey Rudnev)