PHYSICAL GROWTH, MATURATION, AND AGING

CHAPTER OBJECTIVES

- Describe the course of body growth and aging over the life span
- How the genes play a major role in the course of early:
 - physical
 - growth and
 - development
- Review the influence of extrinsic factors on growth and development and the increasing role of extrinsic factors as individuals proceed through the life span;
- Identify typical patterns of growth while recognising individual differences in the timing of growth, and
- Distinguish between growth and maturation.

- Definitions of motor development and human development
- Elements of developmental change
- Concepts of development, maturation, and growth
- Common terms in motor development
- Age periods and stages of human development

INTRODUCTION

- Physical growth and aging are fascinating
- Humans are members of a species:
 - Experiencing many common steps
 - Processes in:
 - Growth & aging

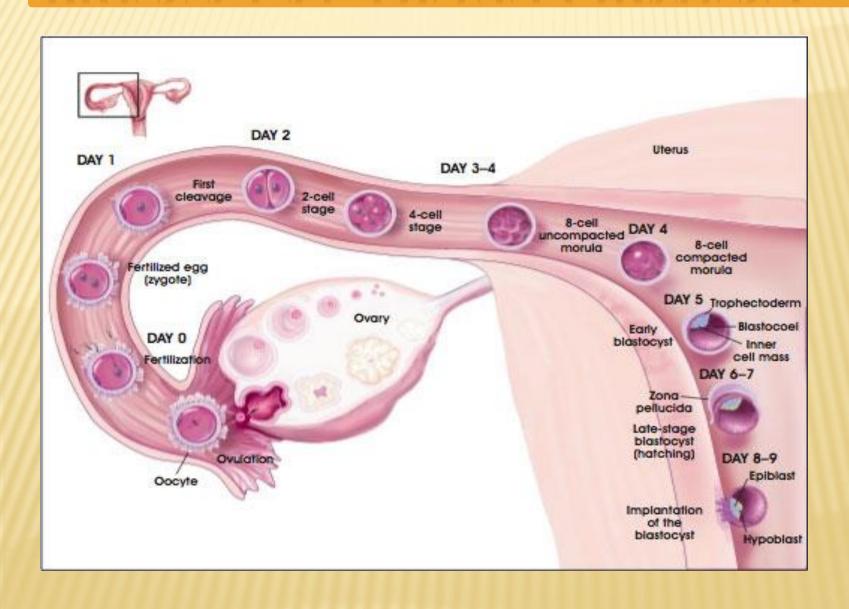
PHYSICAL GROWTH, MATURATION, AND AGING

- PRENATAL DEVELOPMENT
 - Embryonic development
 - Fetal development
 - Fetal nourishment
 - Abnormal prenatal development

POSTNATAL DEVELOPMENT

- Overall growth
- Gender
- Height
- Weight
- Physiological maturation
- Extrinsic influences on postnatal growth

PRENATAL DEVELOPMENT



PRENATAL DEVELOPMENT

- Growth process begins:
 - Ovum & spermatozoon fuse in fertilization
- Genes determine:
 - the normal aspects of development
 - inherited abnormal development.
- Extrinsic factors:
 - environment (amniotic sac in the uterus)
 - nutrients (delivered to the fetus via the placenta)

PRENATAL GROWTH

- Prenatal growth is divided into 2 phase:
 - Embryonic phase:
 - Form conception to 8 weeks
 - Fetal growth:
 - From 8 weeks to birth

PRENATAL DEVELOPMENT

- * Germinal Period
- Embryonic Period
- * Fetal Period

- Humans have 23 pairs of chromosomes = 46.
- Through a process called meiosis
- each sex cell divided into
 - + two 'daughter' sex cells and
 - + only one chromosome from each of the 23 pairs migrates to each daughter cell.
- When fertilization occurs:
 - both parents donates a set of 23 chromosomes
 - reestablishing the total of 46 chromosomes

GERMINAL PERIOD

- Conception:
 - + Implantation of fertilized egg
- × Cell division

EMBRYONIC STAGE

- Stage from 2-9 wks after conception
 - Organs begin to form and function
 - Develops heart, nervous system, stomach, esophagus, ovaries or testes
 - Develop eyes, ears, nose, jaw, mouth lips
 - By end have tiny arms w/ elbows, hands, fingers
 - Legs have knees, ankles, toes

EMRYONIC PERIOD

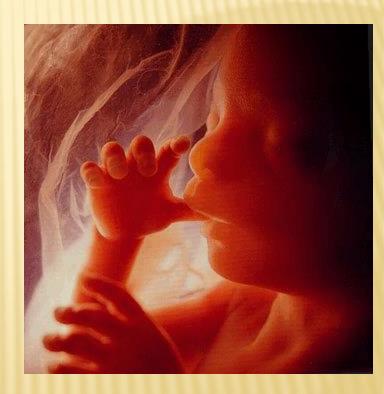
EMBRYONIC STAGE



- The zygote (sex cell)=
 - + result from the fusion of the sperm and egg.
- The zygote has to then divide into many copies of the cell that will eventually lead to the formation of the human.
- * These cells are all the same with no difference.
- Mitosis
 - + is the process by which new cells are generated.
- Meiosis is the process by which gametes/sex cells are generated for reproduction.

FETAL STAGE

- 7 month period of prenatal development, spanning 9 weeks from conception to birth
 - Begins to look distinctly human
 - Organs grow and start to function
 - By 3 months: can kick, make fist, turn head,
 open mouth, swallow, frown

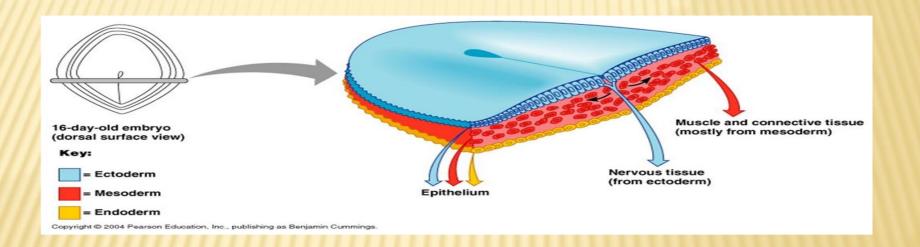


- In 6th month: eyelids open, has tastebuds, well-developed grasp, can breathe regularly as long as 24 hrs. at a time
 - Could potentially survive premature birth by end of 6th month
- Organ systems typically functional by end of 7th month
- 8th & 9th month: respond to light & touch, hear outside sounds
 - Can also learn respond differently to sound of mother (faster heartbeat) and stranger (slower heartbeat)

EMBRYONIC PERIOD: 2ND - 8TH WEEK

- + Implantation embryo is recognizable as a human fetus
- + Cell differentiation
- + The zygote cell that has divided into many cells form a disk with 3 layers.
- Here the cells become different or specific according to their location in the disk to form an organized human

- Ectoderm (outer layer) Nervous system & skin
- Mesoderm (middle layer) bone, muscles, lymph glands, heart, blood vessels
- Endoderm (inner layer) Digestion, breathing organs

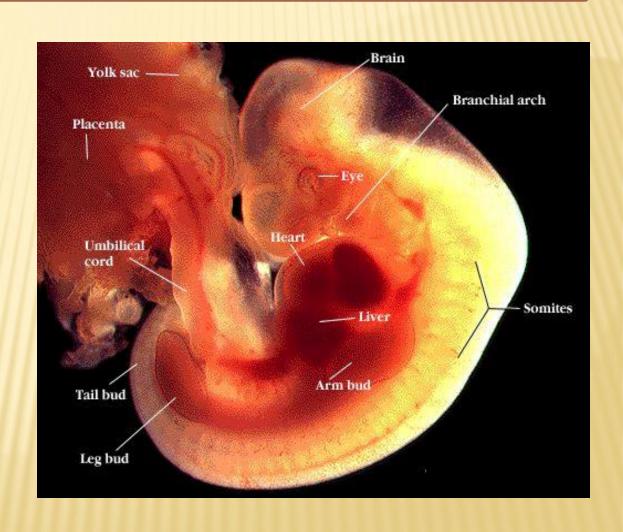


EMBRYONIC DEVELOPMENT

- Development begins with the fusion of an ovum and spermatozoan.
- Genetic information:
 - × hair
 - ×eye color
 - ×height,
 - *skeletal structure contained in the deoxyribonucleic acid (DNA).

EMBRYONIC PERIOD

- + 28 days
- + 5mm in length
- + Primitive heart
- + Simple kidneys
- + A liver
- + A digestive tract
- + Simple eyes, ears, nose



FROM 4 TO 6 WEEKS... LOOK AT THE DIFFERENCE!





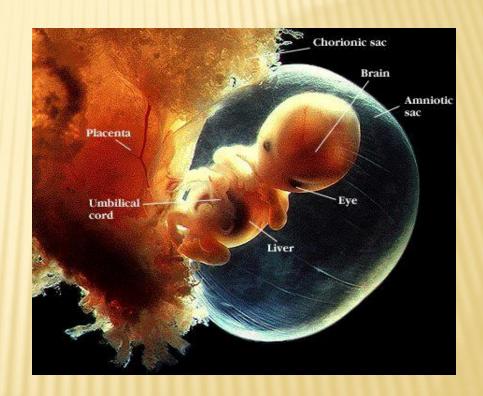
Copyright © 2010 Pearson Education, Inc., publishing as Benjamin Cummings

EMBRYONIC PERIOD

- + Vulnerable to viral diseases
 - × Rubella
 - ×German measles

FETAL PERIOD: 8TH WEEK - BIRTH

- ★ End of 2nd month
- × 2.54cm in length
- × 18.7 grams



- + Fetus: has all essential features for recognition as a human
- + Rapid, uniform, progressive growth
- + Unification & integration of organs

Period of dividing zygote, implantation		Embryonic Period (in weeks)						Fetal Period (in weeks)—Full Term			
1	2	3	4	5	6	7	8	9	16	20–36	38
Usually not susceptible to teratogens		Central nervous system	Indicates common site Eye Heart Eye Teeth				e of action of Ear	l Brain			
⊘		Heart	Arr	13.45	Ear	Palate	External g	enitals	N. C.		
630	*								Central nervous system		
		Gray. Pink						Post de arrest	Heart		ini sar no
								anting ra	Upp	er limbs	Sand e
									Eye	S	
			= highly : Somewhat	sensitive Sensitive				no di the p	Low	l ver limbs l	lesenti a l mounts
									Tee	th	
					v nio z				Pala	ate	1,000d
									Ext	ernal genita	ils
						USY 2500			Ear	arrang nila	(0.19A =
Prenata	l Death	Major Structural Abnormalities						Physiological Defects and Minor Structural Abnormalities			

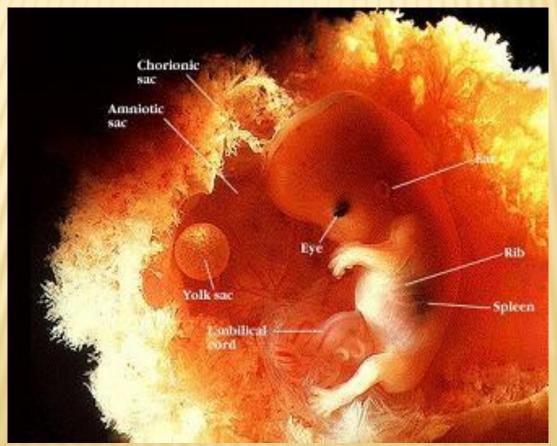
MOTOR BEHAVIOUR BEFORE BIRTH 6 WEEKS

reflex response of mouth



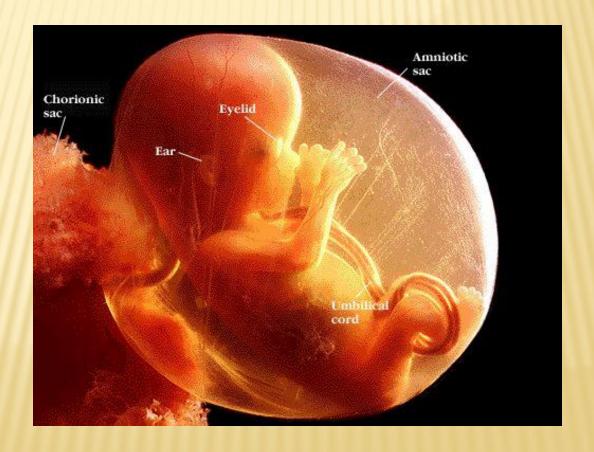
MOTOR BEHAVIOUR BEFORE BIRTH 3 MONTHS

Movements of head, arms, legs, shoulders, elbows, fingers, toes



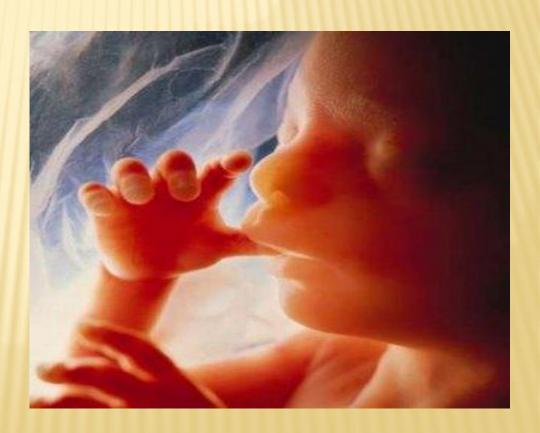
MOTOR BEHAVIOUR BEFORE BIRTH 4 MONTHS

* activity = increased



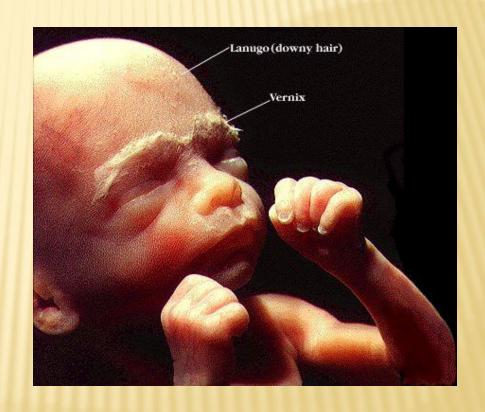
MOTOR BEHAVIOUR BEFORE BIRTH 4 1/2 MONTHS

- x strength = increased
- sharp kicks & pushes



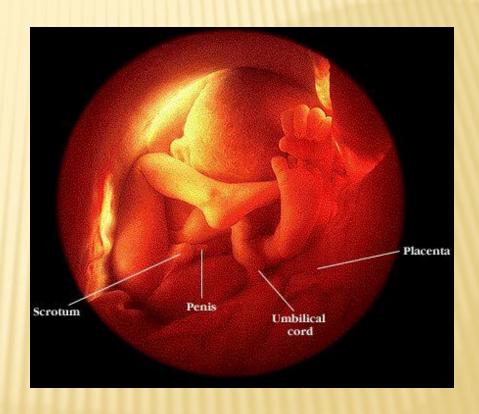
MOTOR BEHAVIOUR BEFORE BIRTH 5 MONTHS

- × Up & down,
- × side to side,
- completely around (somersault)movements



MOTOR BEHAVIOUR BEFORE BIRTH 8-9 MONTHS

Considerable weight
 gain makes space
 confined (completely
 stops moving at 2weeks
 before birth)



WHICH DEVELOPS CONTROL FIRST??

Head

Hands

Legs

Trunk

FETAL DEVELOPMENT



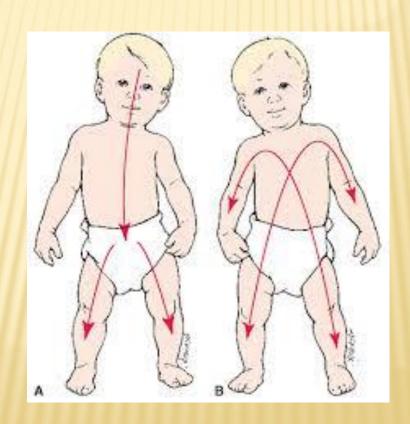
FETAL DEVELOPMENT

- Fetal stage:
 - + 8 weeks to birth
- Characterized by:
 - + Further growth
 - + Cell differentiation
 - + Leading to functional capacity
- Continued growth of organs & tissue occurs in 2 ways:
 - + Hyperplasia & hypertrophy

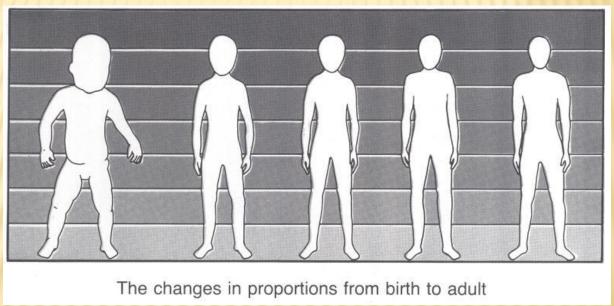
- * Hyperplasia:
 - + An increase in absolute number of cells
- Hypertrophy:
 - + Increase in relative size of individual cell
- Growth tends to proceed in 2 directions:
 - + Cephalocaudal
 - + Proximodistal

Cephalocaudal:

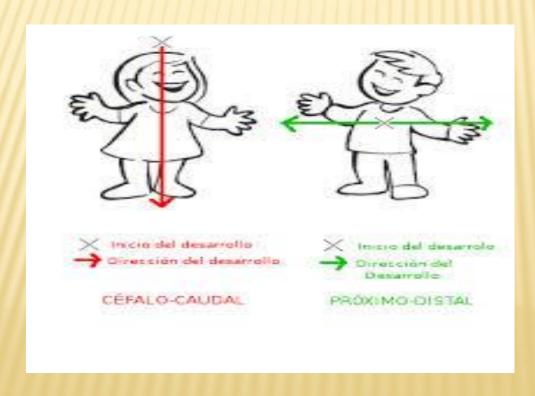
- + head and facial structures grow the fastest
- + then the upper body
- + followed by the slow growing lower body.



- From head to tail (i.e. head to feet)
- x Growth E.g. Head size of infant relative to body.
- × Movement Ability E.g. Toddler learning to walk.

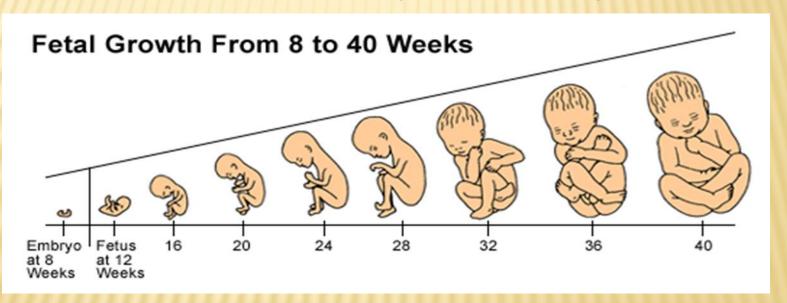


- Proximodistal:
 - the trunk tends to advance,
 - then the nearest parts of the limbs
 - finally the distal parts of the limbs.

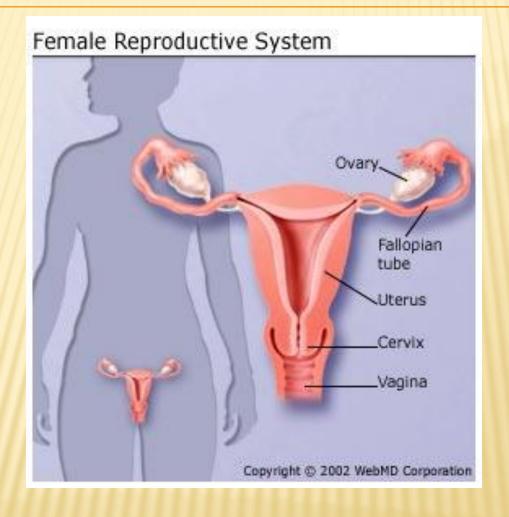


Proximodistal

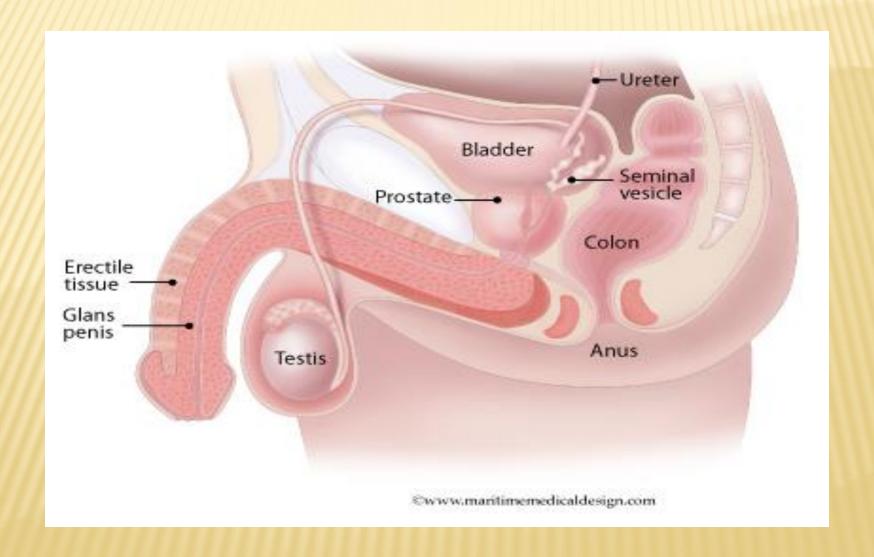
- From those points close to the body's center to those points close to the periphery
- Growth E.g. Prenatal growth
- Movement Ability E.g. Infant acquiring motor skill



FEMALE REPRODUCTIVE SYSTEM



MALE REPRODUCTIVE SYSTEM



FETAL NOURISHMENT

- Many characteristics of fetal environment have potential to affect growth
 - Negatively of Positively
- Nourishment is the extrinsic factor that has the most impact on feta development.

- Fetus is nourished by:
 - + the diffusion of oxygen
 - + nutrients between fetal blood
 - + maternal blood in the placenta

- * Fetus needs:
 - + energy
 - + nutrients
 - + oxygen.
- Good conditions very important in meeting the need of the fetus.
- Less risk of illnesses and infections!

MOVEMENT DIFFERENTIATION AND INTEGRATION

+ Differentiation

- × Progression from gross, immature movement to wellcontrolled, intentional, precise movement
- E.g. Toddler learning to walk



+ Integration

- Motor systems are able to function together as ability progresses
- × E.g. See next slide

How does the child in this picture demonstrate the concept of integration?



OTHER PRENATAL EXTRINSIC FACTORS

x Gross and Fine Movement

+ Gross movement

Movement controlled by the large muscles or muscle groups (e.g. legs)

+ Fine movement

Movement controlled by the small muscles or muscle groups (e.g. hands)





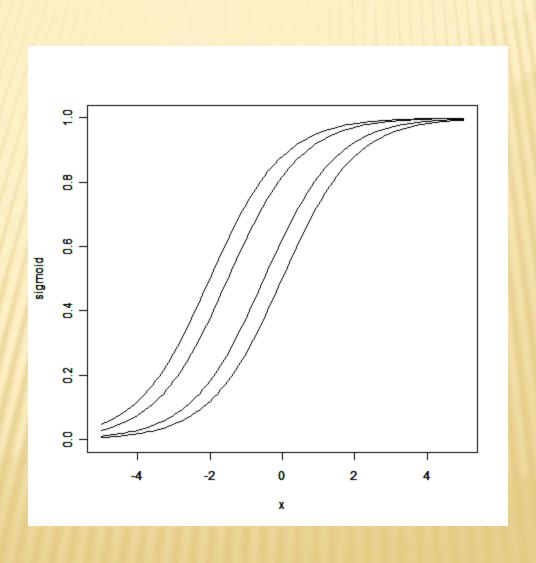


GROSS MOTOR SKILLS

POSTNATAL DEVELOPMENT

- Body growth after birth is continuation of prenatal growth.
- The growth pattern is predictable and consistent but not linear
- There is a rapid growth after birth followed by gradual but steady growth during childhood, rapid growth during adolescence and then leveling off.
- The growth patterns follow an S-shaped curve.
- Sigmoid curve after the Greek letter s.

SIGMOID CURVE



POSTNATAL DEVELOPMENT

- The timing of individual's spurts and steady growth periods is likely to vary from average.
- This is called the universality and specificity principles.

GENDER

- Gender differences are minimal in childhood.
- Boys slightly taller than girls.
- Girls tend to mature at a faster pace than boys throughout childhood.
- Girls begin their growth spurts when they are about 9 years old.
- Age at takeoff.
- Boys begin their growth spurt at about 11 years.
- One third will initiate it even earlier or later.

HEIGHT

- Follows sigmoid pattern of growth.
- On average, girls reach peak height velocity at 11.5-12.0.
- Boys reach their peak height velocity at 13-5-14.0.
- Boys taller than girls.

WEIGHT

- Follows sigmoid pattern of growth.
- Susceptible to extrinsic factors.
- Growing 'up' first and then filling 'out'.

RELATIVE GROWTH

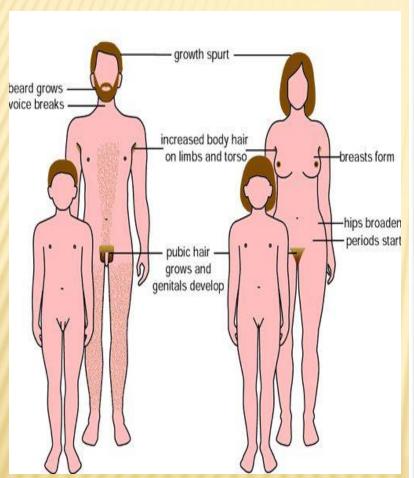
- Follows sigmoid pattern of growth.
- Specific body parts, tissues and organs have differential rates of growth
- Proportions changes throughout life.
- Body proportions at birth reflect the cephalocaudal and proximodistal direction of prenatal growth.
- Newborn has a form quite different from that of an adult.
- Boys and girls have similar proportions in childhood.

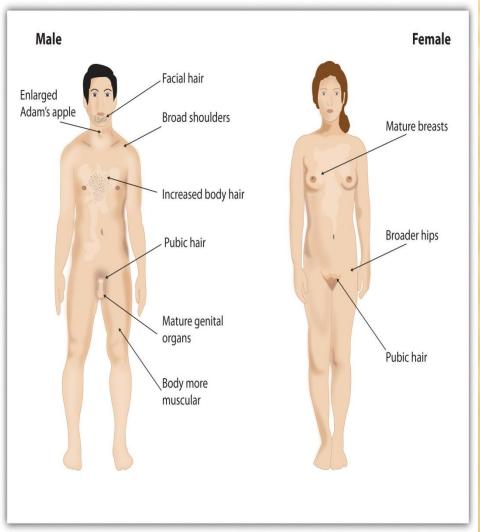
- In girls, shoulder and hip breadth increase at about the same rate.
- Boys increase shoulder breadth in relation to hip.
- * This has implications for skill performance: balance.
- Tissues and organs grow differently.
- 80% of the brain weight is achieved by 4 yrs.

PHYSIOLOGICAL MATURATION

- Tissues grow without an increase in size.
- Physiological maturation: developmental process leading to a state of full function.
- Chronological age, growth in body size and physiological maturation are related.
- However, they can proceed with their own timing.
- Secondary sex characteristics: aspects of form or structure appropriate to male or females, often used to assess physiological maturity in adolescents.

SECONDARY SEX CHARACTERISTICS





- Secondary sex characteristics appear at a younger age in girls and boys who are early maturers.
- Girls mature earlier than boys.
- The breasts enlarge, pubic hair appears, menarche and a first menstrual cycle appear.
- Average age of menarche is 12.5-13.0.
- In boys, testes and scrotum grow in size, and pubic hair appears.
- More mature individuals likely to be stronger and more coordinated than those who are less mature at the same chronological age.