

7th Global Experts Meeting on
Nursing and Nursing Practice
&
4th World Congress on
Neonatology and Perinatology
December 09-10, 2019 | Barcelona, Spain

Scientific Tracks &
Abstracts



Appearance validation of the general test for the Evaluation of Development (EVADE) for children and adolescents between 6 and 14 years old

Ana María

Universidad de Costa Rica, Costa Rica

Introduction: The General Test for the Evaluation of Development (EVADE) for children and adolescents between 6 and 14 years old is the only national screening tool that values the children and adolescent's development. This article presents the results obtained after submitting the test, the handbook and the standardized materials to the appearance validation process.

Methodology: An exploratory descriptive study was completed, with a quantitative-qualitative methodology. A sample of 730 girls, boys and adolescents between 6 and 14 years of age was defined for the application of the test; the expert judgment technique was used. The analysis of the data was carried out through a psychometric analysis of the items, and by the triangulation method.

Results: From the 730 participants included, 44.5% were from rural areas (n= 325) and 55.4% from urban areas (n= 405), by sex, they were valued n=378 (51.7%) girls and n=352 (48.2%) boys. The level of difficulty and the coefficient of discriminative effectiveness for the items were calculated, which together with the experts' findings resulted in 22 modifications of items, and creation of 4 new items at the cognitive and language areas; also, the qualification was changed by areas, therefore the manual was improved, and new materials were created.

Conclusions: The research provides a validated screening test for child and adolescent population, which was included in the Public Policy of integral care for the Costa Rican child population. However, it is recommended subsequent validation processes in order to improve specific areas like motor and socio affective.

Biography

Ana María Quezada Ugalde from Costa Rica has completed her master's degree in Pediatric Nursing from University of Costa Rica. She is currently working as a Nursing College Professor (2011- Present), Researcher in the Nursing Research Program (2012 - Present), Master of Nursing Program Professor, (2016- Present) at Nursing School, University of Costa Rica. She is also the Professor of the "Programa de Formación de Asistente Técnico en Atención Primaria" (2012 - Present) FUNDACION-UCR. Costa Rica and Pediatric Nurse (2015- Present) at Own Child Development Early Stimulation Center. She has experienced many projects and publication on Child Development Evaluation. Her research interest are Pediatric nursing care, child neurodevelopment, evaluation of child development, child development disorders, adolescence.

ana.QUEZADAU GALDE@ucr.ac.cr

Acute Coronary Syndrome: Nurse's practice in prehospital procedures

Michał Czapla

Wrocław Medical University, Poland

The Emergency Medical System is one of the most important elements of the healthcare system because it is essential for the citizens' sense of security. A medical rescue team (EMT) assists patients in cases of immediate danger to their health and life. The differences between the medical emergency system in Poland and the rest of the world are visible in relation to the types of EMTs, their crews, the education system and competence. In EMTs in Poland one can work as a nurse if they have a bachelor's degree with the appropriate specialization: emergency nursing, anesthesia of intensive care, surgery, cardiology and pediatrics. The major of Paramedics also takes place at the level of a 3-year bachelor studies programme.

The competence of a paramedic and nurses are the same under these circumstances. However, in the case of Acute Coronary Syndromes (ACS) in the prehospital period, the nurse is required to conduct an interview and perform an electrocardiogram. Additionally, in a case where there is a shred of doubt about whether a given ECG result indicates ACS, the nurse has the option to perform a transmission ECG to the invasive cardiology center. With a reasonable suspicion of ACS, the nurse has at their disposal medications such as acetylsalicylic acid, morphine, nitroglycerin, heparin and oxygen. After performing an ECG transmission and after consulting a physician who will evaluate them, they can use clopidogrel or ticagrelor. Therefore, the nurse must follow the guidelines of the European Resuscitation Council and the European Cardiac Society for the treatment of ACS in pre-hospital care.

Biography

Michał Czapla, Ph.D., MBA is a paramedic and dietitian and an assistant professor of public health and health management. Member of the European Public Health Association (EUPHA), the European Society of Cardiology - Association of Cardiovascular Nursing & Allied Professions (ACNAP).

michal.czapla@umed.wroc.pl

Microarray testing for symmetrical intrauterine growth retardation

Hakem Nazdaf

Alwakra Hospital Hamad Medical Corporation, Qatar

Background: Intrauterine growth restriction (IUGR) is the most common risk factor associated with perinatal mortality after excluding congenital anomalies 1. IUGR refers to a fetus that has failed to achieve its genetically determined growth potential and affects up to 7–10% of pregnancies 2. Fetal growth restriction is associated with an increase in perinatal mortality and morbidity. This is because of a high incidence of intrauterine fetal demise, intrapartum fetal morbidity, and operative deliveries. Neonates affected by IUGR suffer from respiratory difficulties, polycythemia, hypoglycemia, intraventricular hemorrhage, and hypothermia 3,4,5.

Objective: 1. Primary objectives: to evaluate the results of Microarray in symmetrical IUGR babies. 2. Secondary objectives: to compare between microarray positive babies and negative babies regarding: gestation age, weight, Apgar score, need and indications for NICU admission as well as length of NICU of stay.

Result: Between Jan 2016 and December 2017 total 10,695 babies were born. Among that 578 babies were IUGR (501 asymmetric and 77 symmetric IUGR). Total 71 babies were taken in our analysis after excluding 3 down syndrome and 3 babies part of multiple pregnancy. Microarray test had positive findings in 14/71 (19.7%). There were copy number changes of unknown significance in 8/71 (11.2%)

Conclusion: Most of the microarray test results were copy number changes of unknown significance which is comparatively much higher than reported prevalence. Microarray positive IUGR had comparable NICU admissions to negative result group but their duration of stay, initial lower apgar scores and thrombocytopenia was significantly higher. This may be because, even copy number changes has unknown significance, they may have some clinical effect which is not known till now and may need further studies and long term follow up for those cases.

Keywords: Intrauterine growth restriction (IUGR), Chromosomal microarray analysis (CMA), Neonatal intensive care unit (NICU)

Abbreviations and Acronyms: Intrauterine growth restriction (IUGR), Chromosomal microarray analysis (CMA), Copy-number variants (CNVs), Toxoplasmosis, rubella, cytomegalovirus, rubella (TORCH), Neonatal intensive care unit (NICU), variant of uncertain significance (VUS).

Biography

Hakem Nazdaf is a Professor at Department of Pediatrics, Hamad Medical Corporation, Al Wakra Hospital, Qatar.

Ksalameh@hamad.qa

Mobile phones: Children (7-12 years) having fun with the mobile phone and its positive influence on their development. Nurses promoting positives uses of the mobile phone to support children's development

Karen Ina Moyse

Harmony Tree International, China

Children (7-12 years) love their mobile phones. Media and research sources frequently demonstrate parents' and professionals' concerns about children using them. Yet there are occasions where mobiles are vital for children's safety and development. Without mobile phones children would not be able to enjoy many of the freedoms they experience today; helping them to discover new environments and social relationships. New play experiences can emerge with support of the mobile phone. Further, new friendships can be created and nurtured by communicating with friends via the mobile. Rather than parental concerns being the focus, parental support through the establishment of reasonable and negotiated ground rules, can help mobiles become a valuable resource within children's lives. Parents and children working together to help children use mobiles safely and competently to support their development, is important. This paper will explore some of the positive aspects of children using mobiles with particular focus on children's outdoor play and parents' support.

As a practitioner, formulating a positive understanding about children's use of these devices has been developed through researching children's (7-12 years) views and parents' views for many years. Interviewing children themselves has been vital. Nurses can have a role in promoting the positive uses of mobile phones to support children's development.

Biography

Karen Ina Moyse has experience both as a Nurse and as a Psychologist. She has worked in the UK nursing sick children and promoting children's health. She led the development of a Children's Minor Illness Nursing service in Derbyshire which was designed to support children and families at home. She has also worked as a lecturer both in the UK and in Hong Kong. Her research as a Psychologist focuses on children's (7-12 years) use of mobile phones. She enjoys writing and has written several articles and a book about promoting children's health. She has recently returned to the UK after living in Hong Kong for several years

bazbuster7@gmail.com

Anthracycline induced early cardiotoxicity in a very young Omani patient with Acute Myeloid Leukemia

Surekha Tony

Oman Medical Association, Oman

Background: Anthracycline-cardiomyopathy is of concern in children treated for acute myeloid leukemia (AML) as it may be progressive and fatal. It can present as early cardiac dysfunction with onset during or after chemotherapy.

Objective: We aim to highlight the risk of early-onset cardiotoxicity with a low cumulative anthracycline dose in a child with AML with concurrent sepsis.

Material and Methods: Two-year old Omani boy with AML-M7 with complex karyotype, baseline echocardiography anatomically normal heart with left ventricular ejection fraction (LVEF) 55-60% was planned for chemotherapy. He was initiated on antibiotics (febrile neutropenia guidelines) for high grade fever. Septic work-up was unremarkable, chemotherapy was initiated in second week. Repeat echocardiography revealed no vegetation and an LVEF of 55%. By end of second week, chemotherapy was continued. After second dose of daunorubicin, patient developed tachycardia, tachypnea, respiratory distress, desaturation with a brief seizure terminating in bradycardia and hypotension requiring resuscitation and ventilation. He had LVEF of 30%, was hypertensive, milrinone, dobutamine were initiated, later shifted to furosemide, spironolactone and captopril; digoxin was added as cardiac function remained depressed. Remainder of daunorubicin was skipped. Post-induction BMA revealed remission. Patient received three more courses of anthracycline-free chemotherapy. Prior to course three chemotherapy, patient had another cardiac arrest. Echocardiography one month later revealed global dyskinesia and LVEF of 40-45%. Patient is on regular cardiac monitoring, currently on furosemide, spironolactone, captopril and digoxin at six months follow-up.

Results: Refer Table 1

Conclusion: We conclude that in presence of other known risk factors for cardiac dysfunction like severe sepsis, there is probably no risk-free dose of anthracycline; decline in cardiac function may occur early in therapy even after a small cumulative dose requiring close monitoring of cardiac status during chemotherapy. Association of other risk factors need to be explored by evaluation of larger cohort of such patients.

	Baseline	For vegetation	1st arrest	Pre 2nd arrest	2nd arrest	Follow-up at 3 months	Follow-up at 6 months
LVIDd	42	42	50	50	48	45	45
LVIDs	30	31	42	39	38	36	35
FS	29	28	14	23	19	21	22
EF	56	55	30	45	37	43	45
MR	Trivial	Trivial	Mild+	Mild	Mild+	Trivial	Trivial
AR	Nil	Nil	Mild	Mild	Mild	Trivial	Trivial

Biography

Surekha Tony graduated in medicine in 1995 and specialized in pediatrics with training in hematology in Bangalore, India. She is staff pediatric haemato-oncologist in the Hematology/Oncology Unit at the Department of Child Health, Sultan Qaboos University Hospital Muscat Oman with an active clinical practice for patients with benign and malignant hematological disorders including bone marrow transplantation. She has particular interest in thalassemia and has worked as principal and co-investigator in clinical trials. She has authored and co-authored numerous abstracts and manuscripts and has been active as invited speaker at national and international conferences. She is actively involved as trainer and examiner for junior-senior clerks and pediatric residents. She is a member of the Oman Medical Association, Oman Society of Hematology and the Oman Medical Specialty Board.

surekhatony@yahoo.com

The effect of acupressure on stroke symptoms: Examples of evidence-based practice

Simge Kalav

Akdeniz University, Turkey

Acupressure is one of the known complementary therapy practices all around the world. It is a noninvasive, safe and effective massage technique. In this therapy, the acupuncture points on the meridians carrying energy in the body are pressurized with finger, palm or special stimulation bands. In this way, acupressure opens the blocked energy channels and provides a balanced distribution of the energy in the body. Because of the easy and safe manual therapy, acupressure is exercised by number of people across the globe. It can be used to manage symptoms of some chronic diseases. It may also have positive effects on stroke symptoms. There are a wide range of poststroke problems, including movement and function, mobility, balance, pain, emotional problems, and psychological subjects. Akdeniz University electronic databases center (EBSCO HOST - CINAHL Complete, Science Direct, Pubmed ve Scopus] has been searched in English with the key words “(stroke OR apoplexy OR cerebrovascular accident) AND (acupressure OR shiatsu) AND (randomised controlled trials)” about the published studies without year limitation. There are some studies in the literature examining the effect of acupressure on stroke symptoms. In these studies, acupressure therapy was performed in total 8 sessions (40 minutes for each session), 12 sessions (20 minutes for each session), 14 sessions (10 minutes for each session), 28 sessions (20 minutes for each session) and 38 sessions (30 minutes for each session). In some studies, acupressure was administered alone, while in some studies it was supported by additional applications. The evidence-based studies showed that acupressure had positive effects on motor function, hemiplegic shoulder pain, depression, and daily living activities in stroke patients. As a result, it can be said that acupressure programmes play an important role on stroke symptoms. However, more research needs to be carried out by health professionals in this area.

Biography

Simge Kalav graduated from health faculty in 2008. She got her master's degree in the field of internal medical nursing in 2011. Her master thesis was about "the relationship between caregiving burden and quality of life in family caregivers of stroke patients". She worked as a nurse in an intensive care unit of a state hospital about 3 years. Her interesting area is stroke self-management and secondary prevention of stroke. Now she has been writing the PhD thesis about ischemic stroke and self-management.

simge.kalav@gmail.com

The effect of aromatherapy on fatigue management in patients receiving Hemodialysis treatment: A systematic review of randomized controlled trials

Sefika Tugba Yangoz

Akdeniz University, Turkey

Fatigue is one of the most common problems in patients receiving hemodialysis treatment. Pharmacological and nonpharmacological treatment methods are used in the management of fatigue. Aromatherapy is one of the non-pharmacological treatment methods.

Aim: To evaluate the effect of aromatherapy on fatigue management in hemodialysis patients in randomized controlled trials.

Method: Systematic searches were conducted in Science Direct, Web of Science, Springer Link, Networked Digital Library of Theses & Dissertations, Ovid, CINAHL, Pubmed, Cochrane Library, Proquest, Council of Higher Education National Thesis Center, ULAKBIM Turkish National Databases for studies published in English and Turkish with “hemodialysis, fatigue, aromatherapy” keywords and 65 articles were reached and the six manuscripts have been included in the systematic review. The review period covered 1992-September 2019. This systematic review was conducted and presented with recommendations from Cochrane guidelines.

Results: Aromatherapy was applied by inhalation in the included studies. Lavender, orange or rosemary was used as essential oil on fatigue management in the included studies. The oil was dropped from 2 to 5 drops on cotton ball or gauze bandage or boiled water. The aromatherapy intervention was performed ranged from 2-30 min, 3-30 session and every day or three times a week. The intervention was applied during or before hemodialysis or before the night time sleep at home. The fatigue was evaluated with valid and reliable measurement tools. As a result of four studies, it was stated that there was a statistically significant decrease in fatigue levels of the patients.

Conclusion: Aromatherapy may help patients receiving hemodialysis treatment to reduce the severity of fatigue. The findings of this systematic review will contribute to the application of effective aromatherapy by nurses or other health professionals and will provide guidance for the development of studies related to the effect of aromatherapy on fatigue in hemodialysis patients.

Biography

Sefika Tugba Yangoz completed her master degree in the field of Internal Medical Nursing in 2013. She worked as a nurse in an intensive care unit of a state hospital about 5 years. She is currently a PhD candidate at the Health Sciences Institute. Her interesting area is hemodialysis and adherence to treatment in the hemodialysis. Now she has been writing the PhD thesis about hemodialysis and adherence to treatment.

tugbayangoz@gmail.com