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URINARY INCONTINENCE, LOWER URINARY TRACT SYMPTOM AND QUALITY OF LIFE IN CHILDREN AND THEIR PARENTS. A REVIEW OF LITERATURE

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Background and aims: Urinary incontinence (UI) and Lower Urinary Tract Symptoms (LUTS) are common conditions in children and this often can have a marked impact on daily activities and quality of life (QoL). The aims of this review is to summarize the literature on QoL of children with UI and LUTS and their parents, and to identify factors that decrease QoL in affected children. **Methods:** The CINAHL, PubMed, and ISI Web of Knowledge,

Methods: The CINAHL, PubMed, and ISI Web of Knowledge, Proquest were searched for publication until December 2012, to identify the QOL perception's in children, adolescents and their parents, using combination of different keywords.

Results: The literature data suggest that both patients and their families suffer of this conditions. Worse a child's symptoms are the greater the impact on the child and family. Self-esteem and mental health were the two most affected domains in children with UI. And enuresis profoundly affects child's and parent's life socially, emotionally, and behaviorally.

Conclusions: UI and LUTS significantly impair the quality of life in both children and teenager, and also have the negative effects on the parent's life. Early correct recognition of symptoms and treatment may improve health related quality of life in this population.

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POWER INJECTABLE PICCS IN PEDIATRIC INTENSIVE CARE UNIT: A RETROSPECTIVE STUDY

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Background: Peripherally inserted central catheters (PICC) have many advantages in pediatric intensive care unit (PICU), particularly in children with coagulation abnormalities or at high risk for infection. Some disadvantages of standard PICCs (low flow rates; poor resistance to trauma and to high pressure infusion) have been overcome by power injectable polyurethane PICCs (PI-PICC).

Method: We have reviewed our experience with PI-PICC, with special regard to early and late complications. All PI-PICC were positioned in the deep veins of the arm by ultrasound guidance; tip position was verified by the intra-cavitary EKG method. **Results:** In 18 months, we inserted 50 open-ended PI-PICC (thirty-

Results: In 18 months, we inserted 50 open-ended PI-PICC (thirtyseven 5Fr double lumen + three 4Fr double lumen + nine 4Fr single lumen + one 3Fr single lumen). All insertions were successful, with minimal complications (two local hematomas; two cases of repeated puncture before success; one malposition, in a patient with difficult reading of the EKG due to artefacts). We reported no catheter-related bacteremia, no symptomatic venous thrombosis, and no accidental removal of the PICC. Lumen occlusions occurred rarely, and they were all overcome by simple flushing. All PI-PICCs had a good clinical performance (high flow infusion; easy monitoring of central venous pressure; contrast medium infusion for CT scan).

Conclusion: In PICU, PI-PICC are an ideal double/single lumen central line for any type of infusion, for hemodynamic monitoring and for high pressure injection of contrast medium. PI-PICC positioning by ultrasound guidance and EKG-guidance is 100 % successful and completely safe even in severely ill children.

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NEWBORNS WEIGHT LOSS IN ROOMING-IN CARE

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Significant newborn's weight loss may lead caregiver for offering other milk to complement feeding, plus breast milk, as intervention. If nurses identify predictors of weight loss, they can perform early interventions to prevent this.

Objective: to evaluate factors related to weight loss of healthy newborns at a public teaching hospital, in Brazil.

Methods: A cross-sectional study, with 455 mothers and their babies, at Rooming-in care. Descriptive analysis was performed, with the intersection of variables of interest, using Chi square and Fisher's Exact Test (significance level 5 %).

Results: Newborns with birth weight loss over 10 and 8 % were 6.4 and 26.2 %, respectively. Majority of women were adult, multiparous, with partner, studied up to high school and presented at least one comorbidity related to lactogenesis II failure. Prevalence of induced labor and cesarean section was 43.7 %. Have reported milk letdown within 48 h, 15.6 % of women; 47 % have had nipple trauma and 11 % used some device (silicone nipple or shell). The middle-weight of the neonates was 3,237 g (min. 2,151–4,520 g max); 37.4 % suffered some kind of tocotraumatism; 30 % were kept in skin-to-skin contact with mother and 15.1 % presented poor sucking. Variables with possible association with greater weight loss: number of deliveries (p < 0.003), type of delivery (p < 0.000), use of devices (p < 0.029), birth trauma (p < 0.018) and small for gestational age newborns (p < 0.06).

Conclusions: Weight loss greater than expected may be related of delivery health care aspects, as well as maternal and newborn characteristics.

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SKIN CONDUCTANCE MONITORING IN THE CARE OF (PRETERM) NEWBORNS; A STUDY OF THE LITERATURE

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