# PSYCOSOCIAL ASPECTS OF CHILDREN WITH NEPHROTIC SYNDROME

Thesis

Submitted for the partial fulfillment of Master Degree in Pediatrics Presented By

Hassan Saleem Hassan Almosader (M.B.,B.CH)

Supervised By

## PROF.DR. SHERIF GAMIL WALY

Professor of Pediatrics Faculty of Medicine Cairo University

## DR. EIMAN MOHAMED MOUAWAD

Lecturer of Pediatrics Faculty of Medicine Cairo University

## DR. FADIA HASSAN ALI ZYADA

Lecturer of Psychiatry Faculty of Medicine Cairo University

Faculty of Medicine Cairo University 2010





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#### **Abstract**

Nephrotic syndrome is one of the chronic illnesses of childhood that has significant association with behavior problems. Children and adolescents treated with corticosteroids may experience adverse psychological side effects. Parents and siblings of children with nephrotic syndrome are more likely to develop psychosocial problems than those of healthy children. To achieve the desired balance, a better understanding is needed of the complex relationships that exist between the ill child, his family and their social milieu.

#### **Key words**

Nephrotic Syndrome - Psychosocial aspect -Children

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## **List of Abbreviations**

**ACEI:** Angiotensin Converting Enzyme Inhibitors

**ANS:** Acute Nephrotic Syndrome

**ARB:** Angiotensin Receptor Blockers

**CBCL:** Child Behavior Checklist

**CDI:** Child Depression Inventory

**CMI:** Cell-mediated immunity

**CHNS:** Chronic Nephrotic Syndrome

**ESRD:** End Stage Renal Disease

**ESRF:** End Stage Rena Failure

**FCGS:** Focal Segmental Glomerulosclerosis

**GR:** Glucocorticoid Receptor

**HDL**: High Density Lipoprotein

**IQ:** Intelligent Quotient

**ISKDC:** International Study of Kidney Disease

**LDL:** Low Density Lipoprotein

**MBGN:** Membranoproliferative glomerulonephritis

**MCD:** Minimal Change Disease

MCNS: Minimal Change Nephrotic Syndrome

**MMF:** Myophenolate Mofetil

**MPGN:** Mesangioproliferative glomerulonephritis

NS: Statistically Non-significant Difference

**PSS:** Psycho Social Sco

**QOL:** Quality Of Life

SRNS: Steroid Resistant Nephrotic Syndrome

**SRRS:** Social Readjustment Rating Scale

**SSNS:** Steroid Sensitive Nephrotic Syndrome

# INTRODUCTION & AIM OF THE WORK

## **INTRODUCTION**

Chronic illness is defined as a "medically diagnosed ailment with a duration of 6 months or longer, which shows little change or slow progression" (*Williams PD, 1997*).

Between 5% and 40% of children suffer from different types of chronic illnesses (*Sharpe and Rossiter, 2002*).

Among chronic pediatric illness, nephrotic syndrome is a common disorder characterized by alterations of permselectivity at the glomerular capillary wall, resulting in its inability to restrict the urinary loss of protein (*Bagga and Mantan*, 2005).

Estimates on its annual incidence range from 2-7 per 100,000 children, and prevalence from 12-16 per 100,000 (*Eddy and Symons*, 2003).

Most of children require pharmacologic therapy and hospitalization for acute relapses and complications (*Robinson et al, 2003*). Although the majority of them can achieve remission with corticosteroids, most will have a chronically relapsing course (*Soliday et al, 2000*).

It is fact that chronic illness in childhood is associated with an increased risk of psychological difficulties in the child (*Northham A*, **2008**).

Generally, renal disorders have a hard impact on ill children's life style, psychic and physical development. In the last years, even if medical cures allowed those children to live longer and to have a better quality of life, today both, those children and their families have to face a lot of difficulties due to the kind of pathology (Rocella et al, 2005).

Nephrotic syndrome is one of the chronic illnesses of childhood that has significant association with behavior problems. (*Guha et al., 2009*).

This might be, in part, related to steroid-induced psychosis which is one of the serious adverse effects of corticosteroid therapy (Hergüner et al, 2006).

Parents and siblings of children with nephrotic syndrome are more likely to develop psychosocial problems than those of healthy children (John et al.,1980).

## **AIM OF THE WORK**

- To detect the possibility of comorbid psychiatric disorders among acute and chronic nephrotic syndrome.
- Assessment of associated psychosocial stressors on their parents mainly mothers.