

**Role of Family Physician in Providing
Comprehensive Care for Preschool Child**

Essay

Submitted for Partial Fulfillment of Requirements for the M.Sc
Degree in Family Medicine

BY

Inas Talaat Abdel Hamed

M.B, B.Ch

Supervised By

Dr. Mohammed Ibrahim Sheta

Professor of Internal Medicine
Head of Family Medicine Department
Faculty of Medicine.
Cairo University

Dr. Maha Mohammed Ghobashi

Professor of Puplic Health and
Community Medicine
Faculty of Medicine.
Cairo University

Dr. lamiaa Mohammed Mohsin

Professor of Pediatric
Faculty of Medicine.
Cairo University

Family Medicine Department

Faculty of Medicine

Cairo University

2008

بسم الله الرحمن الرحيم

(قالوا سبحانك لا علم لنا إلا ما علمتنا إنك أنت العليم الحكيم)

صدق الله العظيم

سورة البقرة

الاية ٣٢

Acknowledgement

*First of all, I would like to thank **God** for his grace and mercy and for giving me the effort to complete this work.*

*I wish to express my grateful thanks and deepest gratitude to my professor **Dr. MOHAMED SHETA**, professor of Internal Medicine and Head of Family Medicine Department; Cairo University, for his supervision and effort during preparation and completion of the present work.*

*I'd like to express my deepest gratitude and greatest respect to **Dr. MAHA GHOBASHI**, Professor of Public Health, Cairo University, for her extreme help and support, I'd also like to thank her for guiding me constructively and patiently.*

*I'd like to express my sincere thanks to **Dr. LAMIAA MOHSIN**, Professor of Pediatric Medicine, Cairo University, for her continuous guidance, encouragement and completing this work to whom I will always be indebted.*

*I am immensely indebted to **my family members**, who have readily and patiently offered me the valuable assistance and guidance that sweetly sustained, and greatly enriched my modest endeavors and enlightened my horizon.*

Abstract

Family physician provides continuing comprehensive care to both well and sick child in the context of family and community. Well child visit should include child's age-appropriate immunizations, growth monitoring, developmental assessment, screening tests, nutritional care and health education .Care for the sick child includes comprehensive assessment and management. The most common child's health problems are covered by a special care program called the Integrated Management of Childhood Illness (IMCI).

Key words: preschool- child care- sick child- IMCI.

List of Tables

Page

<u>Table 1:</u>	8
Summary of types of childhood morbidity and causes of mortality.	
<u>Table 2 :</u>	15
Proposed schedule of routine well child care visits.	
<u>Table 3 :</u>	18
Developmental milestones (1 month – 5 years).	
<u>Table 4:</u>	27
National compulsory vaccination schedule for communicable diseases targeting infancy and pre-school children.	
<u>Table 5:</u>	34
Recommended childhood prevention screening.	
<u>Table 6:</u>	42
Tips for preventing obesity.	
<u>Table 7:</u>	66
Description of interventions and coverage of the components of IMCI strategy in the six Analytic Review (AR) countries.	
<u>Table 8:</u>	67
Health system, access, and utilization of health care in the six AR countries.	
<u>Table 9:</u>	68
Chronology of IMCI activities in the six AR countries.	

<u>Table 10:</u>	69
-------------------------------	-----------

**The adaptation process and perception of case management guidelines in the six
AR countries.**

List of Figures

Page

Figure 1:..... 54

Global distribution of cause-specific mortality among children under five years.

Figure 2:.....64

Child (1 yr < 5) years mortality rate 1982-2001 in Egypt.

List of Abbreviations

A/L/C: Auditory/Linguistic/Cognitive.
AAFP: American Academy of Family Physicians.
AR: Analytic Review.
AAP: American Academy of Pediatrics.
ARI: Acute Respiratory Infection.
BMI: Body Mass Index.
CDC: Center of Disease Control.
CDD: Control of Diarrheal diseases
CHD: Child Health and Development
CPI: Client-Provider Interaction.
DDST-II: Denver Developmental Screening Test-II.
DPT: Diphtheria, Pertussis and Tetanus.
EDHS: Egyptian Demographic and Health Survey.
EPI: Expanded Programme of Immunization.
FM: Fine Motor.
GM: Gross Motor.
HIV: Human Immunodeficiency Virus.
HSR: Health Sector Reform.
IMCI: Integrated Management of Childhood Illness.
IMR: Infant mortality rate.
LBW: Low Birth Weight.
MCH: Maternal and Child Health.
MMR: Measles Mumps and Rubella.
MOHP: Ministry of Health and Population.
NHBPEP: National High Blood Pressure Education Program.
OPV: Oral Polio Vaccine.
ORT: Oral Rehydration Therapy.

PHC: Primary Health Care.

PS: Personal/Social.

SD: Standard Deviation.

TB: Tuberculosis.

TV: Television.

UNICEF: United Nations Children's Fund.

USPSTF: United State Preventive Services Task Force.

VIS: Visual.

WHO: World Health Organization.

List of Important Definitions

Anticipatory guidance: An opportunity for the primary care physician to share information and suggestions for parenting that enhance good parent/child interactions and facilitate health promotion (**American Academy of Pediatrics (AAP), 2006**).

At-risk approach: There is standard care for all individuals, and more care to those in need according to the need (**Kamel, 2005**).

Child mortality: The probability of dying between the first and fifth birthday (**El-Zanaty and Way, 2005**).

Growth chart: It is present in the family folder; the child health record is a standard deviation chart showing the range between two lines presenting -2 SD and +2 SD, where weight is plotted against age (annexes 1 to 6) (**Diabetic endocrine and metabolic pediatric unit, 2002**).

Health: State of complete physical, mental, social and spiritual wellbeing and not merely absence of disease or infirmity.

Health Promotion: Health promotion is the science and art of helping people change their lifestyle to move toward a state of optimal health.

Optimal health is defined as a balance of physical, emotion, social, spiritual and intellectual health (**O'Donnell, 1989**).

Infant: The infant is the child in the first year of life (from birth to less than 12 months old (**Kamel, 2005**).

Infant mortality: The probability of dying during the first year of life(**El-Zanaty and Way, 2005**).

Stunted child: Percent of under five children with height measurement is low by more than two standard deviation (SD) compared to the WHO reference value for height for age (**Kamel, 2005**).

Under five Child: The child in the age from birth to less than completed five years old (**Kamel, 2005**).

Under-five mortality: The probability of dying before the fifth birthday (**El-Zanaty and Way, 2005**).

Underweight child: Percent of under five children with body weight measurement is low by more than two SD compared to the WHO reference value for weight for age (**Kamel, 2005**).

Wasted child: Percent of under five children with weight measurement is low by more than two SD compared to the WHO reference value for weight - for-height (**Kamel, 2005**).

.

Attached Documents

Page

Annex 1:95

Weight-for-age percentiles: Egyptian boys, two to 21 years.

Annex 2:96

Stature-for-age percentiles: Egyptian boys, two to 21 years.

Annex 3:.....97

Body mass index-for-age percentiles: Egyptian boys, two to 21 years.

Annex 4:98

Weight-for-age percentiles: Egyptian girls, two to 21 years.

Annex 5: 99

Stature-for-age percentiles: Egyptian girls, two to 21 years.

Annex 6:.....100

Body mass index-for-age percentiles: Egyptian girls, two to 21 years.

Annex 7:101

Blood pressure levels for the 90th and 95th percentiles of blood pressure for girls age one to 8 years by percentiles of height.

Page

Annex 8:102

Blood pressure levels for the 90th and 95th percentiles of blood pressure for boys age one to 8 years by percentiles of height.

Annex 9:103

Tuberculosis (TB) Screening for children in high-risk populations (high-risk questionnaire).

List of Contents

	Page
• Acknowledgement.....	I
• Abstract.....	II
• List of tables.....	III
• List of figures.....	V
• List of abbreviations.....	VI
• List of important definitions	VIII
• Attached documents.....	X
• Introduction.....	1
• Aim of work	2
• <u>Early childhood development: the global challenge</u>	3
• <u>Child health status in Egypt</u>	4
Targets.....	4
Current situation and trends.....	5
Factors contributing to the under five health problems.....	6
Child health programmes in Egypt.....	9
• <u>Well child care</u>	10
Essential of well child care.....	11
Components of child health programme.....	11
- Registration and record keeping.....	11
- History taking and periodic physical examination.....	12
- Tracking of growth parameters.....	15

	Page
- Developmental assessment	17
- Administration of recommended immunizations.....	24
- Relevant screening tests	28
- Nutrition care.....	35
- Health education	42
- Management of sick children (IMCI)	52
- Referral as needed.....	52
- Out-reach programme.....	52
- Social care	52
• <u>Integrated Management of Childhood Illness (IMCI)</u>	52
Definition of IMCI.....	57
Components of IMCI	58
Benefits of the IMCI strategy.....	59
Principles of IMCI clinical guideline	60
IMCI in the community.....	60
Rationale for adopting IMCI strategy in Egypt.....	62
• Role of family physician in providing comprehensive care for preschool child.....	70
• Conclusions and recommendations.....	72
• References.....	74
• Summary.....	94
• Arabic summary.	