

# **Mother's Care for Children with Nephrotic Syndrome at Home**

**Thesis**

Submitted for Master Degree in Nursing Science  
"Community Health Nursing"

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# **Mother's Care for Children with Nephrotic Syndrome at Home**

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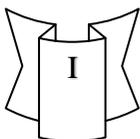
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*Hend Mohamed Husain*

**List of Contents**

<b>Title</b>	<b>Page No.</b>
List of Contents	I
List of Tables	II
List of Figures	IV
List of abbreviations	V
Abstract	VII
Introduction and aim of the study	1
Review of Literature	
Part I. Overview about Nephrotic Syndrome	6
Part II. Health Needs & Problems of Children with Nephrotic Syndrome	28
Part III. Community Health Nurses Role for Mothers toward Children with Nephrotic Syndrome	44
Subjects and Methods	63
Results	73
Discussion	99
Conclusions	112
Recommendations	114
Summary	115
References	125
Appendices	
Arabic Summary	

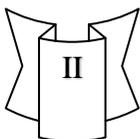


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**List of Tables**

Table No.	Title	Page No.
1	Distribution of children related to their personal characteristics (n = 100)	74
2	Distribution of mothers according to their socio-demographic characteristics (n = 100).	75
3	Distribution of children regard their past medical history (n = 100)	77
4	Distribution of children toward cortisone adverse effects (n = 100)	80
5	Distribution of mothers according to satisfactory score level for knowledge about nephrotic syndrome (n = 100).	82
6	Distribution of mothers stated practices according to done score level (n = 100)	84
7	Distribution of children according to achieved score level of their needs (n = 100)	86
8	Distribution of children according to physical, cognitive, behavioral, and social problems of nephrotic syndrome (n = 100)	87
9	Distribution of the home environment based on mothers reporting (n = 100)	88



**List of Tables (cont.)**

Table No.	Title	Page No.
10	Distribution of children health status related to normal weight, length, vital signs, and laboratory investigation of nephrotic syndrome (n = 100).	91
11	Relation between mother's knowledge about nephrotic syndrome and their socio demographic characteristics (n = 100)	92
12	Relation between mother's practices towards care for their children with nephrotic syndrome and their socio demographic characteristics (n = 100)	95
13	Relation between mothers' knowledge and their practice (n= 100).	97
14	Correlation between mothers' knowledge and their practice level (n= 100)	98



**List of Figures in Literature of Review**

Figure No. No.	Title	Page
1	Anatomy of renal	7

**List of Figures in Results**

Figure No. No.	Title	Page
1	Distribution of mothers according to total score level of knowledge about nephrotic syndrome (n = 100).	83
2	Distribution of mothers stated practices related to total score level (n = 100).	85
3	Distribution of the home environment total score level (n = 100).	90



### **List of Abbreviations**

ASUSH	Ain Shams University Specialized Pediatric Hospital
CCr	Creatinine Clearance
CKD	Chronic Kidney Disease
CK	Chronic Kidney
CMP	Comprehensive Metabolic Panel
CNS	Central Nervous System
CUSPH	Cairo University Specialized Pediatric Hospital
DMCH	Dhaka Medical College Hospital
EPO	Erythropoietin
EUC	Electrolytes, Urea, Creatinine
GFR	Glomerular Filtration Rate
IFRNS	Infrequent Relapse Ns
IGF-1	Insulin-Like Growth Factor
INS	Idiopathic Nephrotic Syndrome
LDL	Low –Density Lipoprotein
MCD	Minimal Change Disease
MGN	Membranous Glomerulonephritis
MPGN	Membranoproliferative Glomerulonephritis
NPHS1	Nephrin Precursor Home Sapiens 1



**List of Abbreviations (cont.)**

NPHS2	Nephrin Precursor Home Sapiens 2
NS	Nephrotic Syndrome
QoL	Quality Of Life
RPGN	Rapidly Progressive Glomerulonephritis
RTI	Respiratory Tract Infection
SDNS	Steroid-Dependent Nephrotic Syndrome
SRNS	Steroid-Resistant Nephrotic Syndrome
SSNS	Steroid-Sensitive Nephrotic Syndrome
UTI	Urinary Tract Infection
VLDL	Very Low –Density Lipoprotein



## **Mother's Care for Children with Nephrotic Syndrome at Home**

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**Hend Mohamed Husain, Seham Guirguis Ragheb, Shimaa Fathy Mikky**

**Background:** The mother engages to develop a comprehensive care plan specific to the needs of the child. The mother seeks to understand the child with respect to health status, abilities, and priorities. **Aim:** This study aim was to a assess mother's care for children with nephrotic syndrome at home. **Design:** Descriptive analytical research design was utilized in this study. **Setting:** The urologic pediatric outpatient clinic in Pediatric Ain Shams University Hospital. **Sampling:** a purposive sample of school age children equal 100 children. **Tools:** interviewing questionnaire consist of children and mothers socio-demographic characteristic, child's past and present medical history, mothers' knowledge and practice about nephrotic syndrome, health needs and problems related to nephrotic syndrome, and home environment assessment. **Results:** concerning mothers stated practices, more than one quarter of mother done a correctly practice related to committee to doctor order in case the child has respiratory infection, and physical activity. Near to one three quarters of mothers' lives in the suitable home environment compared to more than one quarter of them lives in unsuitable home environment. **Conclusion:** the mothers of nephrotic child had poor caring for their children with no statistically significant differences between mothers' care and demographic characteristics of the mothers except number of children in the family and their residence **Recommendation:** Nurses should provide educational classes for the mothers and their children about nephrotic syndrome especially newly diagnosed patients



**Keywords:** Mother's Care, Children, Health problems, Home, Nephrotic Syndrome

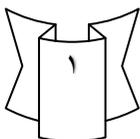


## Introduction

Nephrotic syndrome is a syndrome comprising signs of nephrosis, chiefly protein in the urine, low blood albumin levels, and swelling. It is a component of glomerulonephrosis, in which different degrees of protein in the urine occur. Essentially, loss of protein through the kidneys leads to low protein levels in the blood including low albumin, which causes water to be drawn into soft tissues (**Chen, 2010**).

Nephrotic syndrome has many causes and may either be the result of a glomerular disease that can be either limited to the kidney, called primary nephrotic syndrome (primary glomerulonephrosis), or a condition that affects the kidney and other parts of the body, called secondary nephrotic syndrome (**Pereira, et al., 2014**).

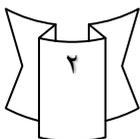
The most common sign is excess fluid in the body due to the serum hypoalbuminemia. Lower serum oncotic pressure causes fluid to accumulate in the interstitial tissues. Sodium and water retention aggravates the edema. This may take several forms: puffiness around the eyes, characteristically in the morning, pitting edema over the legs, fluid in the pleural cavity causing pleural effusion (**Lane and Langman, 2015**).



Mother have a critical role in providing emotional support to their child and should be prepared and encouraged to participate in normal routines (such as feeding, bathing, playing, reading stories, cuddling) while the child is hospitalized. Rooming-in should be encouraged when possible, especially for younger children, to reduce the stress of separation. Mother can learn to support their children by coaching them through procedures using refocusing and relaxation techniques (**Kaba and Moreau, 2010 and wong, 2013**).

Mother of children with nephrotic syndrome are often required to deliver home-based interventions including feeding. They must continuously monitor their child's health, advocate for appropriate health care, be prepared for episodes of infection and other life threatening complications, attend frequent hospital appointments and convey information to health care professionals, mother, relatives and teachers. The ability of mother to manage care can affect the child's personal development and medical management (**Priya and Ellis, 2015**).

The nurse engages the nursing process to develop a comprehensive care plan specific to the needs of the child.



The nurse seeks to understand the individual with respect to health status, abilities, and priorities. The nursing process begins with holistic assessment of the child's physical and psychosocial health. The nurse interprets these cumulative data to identify diagnoses and expected outcomes (**Wong, 2013**).

### **Significance of the study**

Total number of children attended the pediatric urology clinic of Ain Shams University Hospital and the pediatric conservative urology clinic of the pediatric dialysis unit at Ain Shams University Hospital in 2014 were 2397 children .They were divided into 2047 children attended pediatric urology clinic ,and 350children attended pediatric conservative urology clinic chronic kidney disease (**Pediatric Hospital Statistical office, 2014**).

Estimates on the annual incidence of nephrotic syndrome range from 2-7 per 100,000 children, and prevalence from 12-16 per 100,000. Amongst Egyptian children 243 deaths annually are due to nephrotic syndrome, this ranks Egypt as the second country in the world in this regard, preceded only by Japan which tallies up to 447 deaths, the united states follows closely behind Egypt with



153 deaths. There is epidemiological evidence of a higher incidence of nephrotic syndrome in children from south Asia. The condition is primary or idiopathic (INS) in 95 percent cases. An underlying disorder that might be identified in less than 5 percent cases includes systemic lupus erythematosus, HenochSchonleinpurpura, amyloidosis and infection with HIV, parvovirus B19 and hepatitis B and C viruses (**Rutjes, 2010**).

### **Aim of the study**

**The aim of this study was to**

**Assess mother's care for children with nephrotic syndrome at home through:**

1. Assessing the mother's knowledge about nephrotic syndrome.
2. Assessing the mother's practices towards care for their children with nephrotic syndrome.
3. Assessing the health needs and problems of children with nephrotic syndrome.
4. Assessing home environment related to care of child with nephrotic syndrome.

