

Women and Children's

Current Awareness Bulletin

July 2024

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New books available from the Academy Library

Nelson textbook of pediatrics

Edited by Robert M. Kliegman [and six others].. 22nd edition.. 2025.

Why mums don't jump : ending the pelvic floor taboo

Helen Ledwick.. 2023

Paediatric endocrinology and diabetes

Gary Butler and Jeremy Kirk.. 2 edn.. 2020.

Paediatric haematology and oncology

Edited by Simon Bailey and Rod Skinner.. Second edition.. 2022.

Paediatric dermatology

Edited by Susan Lewis-Jones and Ruth Murphy.. 2 edn.. 2020.

Obstetric medicine

Charlotte J. Frise and Sally Collins.. 2020.

Paediatric nephrology.

Lesley Rees, Detlef Bockehauer, Nicholas J.A. Webb, and Marilyn G. Punaro.. 3 ed. /. 2019.

Paediatric gastroenterology, : hepatology, and nutrition

Edited by R. Mark Beattie, Anil Dhawan, John W.L.Puntis, Akshay Batra, and Eirini Kyra.. 2 ed.. 2018.

Paediatric palliative medicine

Richard Hain and Satbir Jassal.. 2 ed.. 2016.

Paediatric respiratory medicine

Jeremy Hull, Julian Forton, and Anne Thomson.. 2 ed.. 2015.

OSH manual of childhood infections : the blue book

Edited by Mike Sharland [and twenty-seven others].. 4 edition.. 2016.

Paediatric rheumatology

Edited by Helen E. Foster and Paul A. Brogan.. 2 ed.. 2018.

Paediatric anaesthesia

Edited by Steve Roberts.. 2 ed.. 2019.

Paediatric surgery

Mark Davenport and Paolo De Coppi.. Second edition.. 2020.

Neurodisability and community child health

Edited by Srinivas Gada.. Second edition.. 2022.

Independent review of gender identity services for children and young people : final report

Hilary Cass. . 2024.

Changing contexts of child health: an assessment of unmet physical, psychological and social needs of children with common chronic childhood illness.

Lingam R. *Archives of Disease in Childhood* 2024;109(6):488-496

Research into the biopsychosocial needs and key health drivers among children living with a common chronic illness (asthma, eczema or constipation) in South London.

A Neglected Generation: Reversing the decline in children's health

The Food Foundation; 2024

The report highlights the increase in obesity and type 2 diabetes driven by calorie dense diets, and the results of poor-quality diets and undernutrition, which are increasingly impacting on children and often paradoxically co-existing with obesity.

Access the report here - foodfoundation.org.uk/publications

The impact of hardship on primary schools and primary and community health care.

Joseph Rowntree Foundation; 2024.

This report asks what impact hardship is having on the delivery of services in primary schools and primary and community health care setting such as GP surgeries.

Access the report here - www.jrf.org.uk/deep-poverty-and-destitution/the-impact-of-hardship-on-primary-schools-and-primary-healthcare

Investigating the air quality surrounding new schools in England: polluted playgrounds and school buildings are a source of avoidable harm.

Mahfouz Y. *Archives of Disease in Childhood* 2024;109(6):483-487.

Research assessing levels of pollutants at the sites of 147 proposed new schools in England and whether pupils are likely to be protected from associated risks. The guidance for school proposals does not include any requirement to assess air quality at the identified site; building regulations also fail to consider poor air quality.

Are crisis responses for children and young people effective?

The Mental Elf; 2024

Beth Cumber summarises the CAMH-Crisis project - a large systematic review exploring crisis response interventions for children and young people, with a focus on effectiveness, lived experiences and service organisation.

Access the article here - www.nationalelfservice.net/populations-and-settings/child-and-adolescent/crisis-responses-children-young-people-effective/

Benefits and harms of antenatal and newborn screening programmes in health economic assessments: the VALENTIA systematic review and qualitative investigation.

Rivero-Arias O. *Health Technology Assessment* 2024;28(25):1-180.

There is no consistency in the selection of benefits and harms used in health economic assessments in this area, suggesting that additional methods guidance is needed. Our proposed thematic framework can be used to guide the development of future health economic assessments evaluating antenatal and newborn screening programmes.

Topical fluoride as a cause of dental fluorosis in children.

Wong MCM. *Cochrane Database of Systematic Reviews* 2024;6:CD007693.

This is an update of a review first published in 2010. Use of topical fluoride has become more common over time. Excessive fluoride consumption from topical fluorides in young children could potentially lead to dental fluorosis in permanent teeth.

Discrimination during childbirth among black birthing people predicts postpartum care utilisation.

Minoeee S. *Evidence-Based Nursing* 2024;27(3):89.

Raising awareness among healthcare staff is integral to improving the existing communication problems and racial stereotyping.

Perception of black people regarding discrimination may be explored in greater depth using qualitative research methodologies.

Improving healthcare transition for young people with cancer: factors fundamental to the quality improvement journey.

Potter E. *British Journal of Nursing* 2024;33(13):622-629.

Young people receiving cancer treatment in the South Thames Children's, Teenagers' and Young Adults' Cancer Operational Delivery Network usually receive care across two or more NHS trusts, meaning transition into adult services can be challenging. This study aimed to develop a planned, co-ordinated approach to transition across the network that meets National Institute for Health and Care Excellence guidance recommendations for transition and the cancer service specifications.

Listen to mums: ending the postcode lottery on perinatal care.

All-Party Parliamentary Group on Birth Trauma (APPG Birth Trauma); 2024.

The APPG for Birth Trauma set up an inquiry to investigate the reasons why women experience birth trauma. The picture that emerged was of a maternity system in which poor care is all too frequently tolerated as normal, and women are treated as an inconvenience. This report makes a set of recommendations that aim to address these problems and work

towards a maternity system that is woman-centred and where poor care is the exception rather than the rule.

Access the report here - www.theo-clarke.org.uk/birth-trauma

1. Assessment and treatment of mental health conditions in children and adolescents: A systematic scoping review of how virtual reality environments have been used

Authors: Blanco, Dana;Roberts, Rachel M.;Gannoni, Anne and Cook, Steve

Publication Date: /07// ,2024

Journal: Clinical Child Psychology & Psychiatry 29(3), pp. 1070-1086

Abstract: Background: There is growing interest in the use of virtual reality environments (VREs) in psychological treatment and assessment. Most research has focused on the application of VREs in adult psychological disorders with fewer studies focusing on its applicability with children and adolescents. A systematic scoping review was undertaken of research assessing how VREs have been used in the treatment and assessment of childhood mental health disorders to provide an overview of the current state of the literature and identify future research directions. Method: Systematic searches of online databases were conducted in PsycInfo, PubMed, Embase, Scopus, and Web of Science. Results: Eleven studies met eligibility criteria and were included in this review, with the majority focusing on VRE interventions for anxiety-related disorders. There is also emerging support for VRE deep breathing training for anxiety, VRE assisted treatment of internet gaming disorder and anorexia nervosa, and VRE assessment of body image evaluation in anorexia nervosa. Most studies were pilot and feasibility studies with only three randomised-controlled trials (RCT). Conclusions: The current literature shows some promise for the use of VRE assessments and interventions of childhood mental health problems, particularly for anxiety-related disorders such as social anxiety and specific phobias. However, high-quality RCTs are now needed to establish effectiveness of VREs in this population, and how it compares to existing evidence-based approaches, given its promise to improve both engagement and outcomes.

2. "A very difficult conversation": Challenges and opportunities for improvement in pediatric oncology clinician communication about late effects

Authors: Carpenter, Kendall;Revette, Anna C.;Scavotto, Madison;Mack, Jennifer W. and Greenzang, Katie A.

Publication Date: /08// ,2024

Journal: Pediatric Blood & Cancer 71(8), pp. 1-8

3. Physical Activity and Mental Health in Children and Youth: Clinician Perspectives and Practices

Authors: Crichton, Madeline;Bigelow, Hannah and Fenesi, Barbara

Publication Date: /08// ,2024

Journal: Child & Youth Care Forum 53(4), pp. 981-1001

Abstract: Background: Rates of mental health challenges among children and youth are on the rise. Physical activity has been identified as a promising intervention to improve mental health outcomes for youth. Objective: This study aimed to investigate how mental health clinicians perceive and utilize physical activity as a mental health intervention for children and adolescents. Methods: Seventy-four Ontario mental health clinicians (psychologists, psychotherapists, and social workers) were surveyed about their perspectives and practices related to physical activity as part of mental health care for children and adolescents using a mixed-methods approach. Survey respondents were also asked about barriers to including physical activity in care. Results: Although 100% of clinicians agreed that physical activity was beneficial to their own and to their clients' mental health, only 61% reported prescribing physical activity to their clients. Barriers to prescribing physical activity as a treatment option included lack of training, time, and resources. Clinicians who were more physically active themselves were more likely to view physical activity as beneficial for mental health and were less likely to view time as a barrier to discussing and prescribing physical activity in their practice. Many clinicians expressed a need for more training, knowledge, and resources. Conclusions: The results of this study suggest that with improved access to training and resources, clinicians will be well-positioned to leverage the benefits of physical activity for mental health in their practice.

4. Access to legacy-oriented interventions at end of life for pediatric oncology patients: A decedent cohort review

Authors: Daniels, Sarah;Franqui-Rios, Nelson D.;Mothi, Suraj S.;Gaitskill, Elizabeth;Cantrell, Kathryn and Kaye, Erica C.

Publication Date: /08// ,2024

Journal: Pediatric Blood & Cancer 71(8), pp. 1-11

5. Mental illness and sleep disorders among women with gynecological problems

Authors: Merrill, Ray M. and Song, Dajeong

Publication Date: /12// ,2024

Journal: Journal of Psychosomatic Obstetrics and Gynaecology 45(1), pp. 2354330

Abstract: This retrospective cohort study identifies differences between rates of selected mental illnesses and sleep disorders according to eight gynecological problems. Analyses utilize medical claims data for adult employees of a large corporation during 2017-2021. Women with a gynecological problem (most notably pain, endometriosis, pelvic inflammation and bleeding) are significantly more likely to experience mental illness. Several gynecological problems are also significantly associated with sleep disorders. Women with a gynecological

problem (vs. none) are 50% more likely to have a mental health problem and 44% more likely to have a sleep disorder after adjusting for age, marital status, dependent children and year. The largest differences between higher (%) mental illness and sleep disorders appear for hyperplasia (6% vs. 45%), cancer (11% vs. 68%), pelvic inflammation (46% vs. 79%) and pain (79% vs. 43%), respectively. On the other hand, the rate of having one or more gynecological problems ranges from 7.1% for women with no mental illness or sleep disorder to 20.6% for women with schizophrenia. Understanding the association between gynecological problems, mental illness and sleep disorders can help clinicians more effectively identify and treat patients.

6. Utilizing electronic medical records alert to improve documentation of neonatal acute kidney injury

Authors: Nada, Arwa and Bagwell, Amy

Publication Date: /08// ,2024

Journal: Pediatric Nephrology 39(8), pp. 2505-2514

Abstract: Background: Neonatal acute kidney injury (AKI) is a common yet underdiagnosed condition in neonates with significant implications for long-term kidney health. Lack of timely recognition and documentation of AKI contributes to missed opportunities for nephrology consultation and follow-up, potentially leading to adverse outcomes. Methods: We conducted a quality improvement (QI) project to address this by incorporating an automated real-time electronic medical record (EMR)-AKI alert system in the Neonatal Intensive Care Unit (NICU) at Le Bonheur Children's Hospital. Our primary objective was to improve documentation of neonatal AKI (defined as serum creatinine (SCr) > 1.5 mg/dL) by 25% compared to baseline levels. The secondary goal was to increase nephrology consultations and referrals to the neonatal nephrology clinic. We designed an EMR-AKI alert system to trigger for neonates with SCr > 1.5 mg/dL, automatically adding AKI diagnosis to the problem list. This prompted physicians to consult nephrology, refer neonates to the nephrology clinic, and consider medication adjustments. Results: Our results demonstrated a significant improvement in AKI documentation after implementing the EMR-AKI alert, reaching 100% compared with 7% at baseline (p 1.5 mg/dL. Although the increase in nephrology consultations was not statistically significant (p = 0.5), there was a significant increase in referrals to neonatal nephrology clinics (p = 0.005). Conclusions: Integration of an EMR alert system with automated documentation offers an efficient and economical solution for improving neonatal AKI diagnosis and documentation. This approach enhances healthcare provider engagement, streamlines workflows, and supports QI. Widespread adoption of similar approaches can lead to improved patient outcomes and documentation accuracy in neonatal AKI care.

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