

18th International Conference on

Nursing & Healthcare

December 05-07, 2016 Dallas, USA

The impact of child life support for children undergoing radiation therapy

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Problem: Central nervous system (CNS) tumors are the most commonly diagnosed solid tumor in childhood, accounting for nearly 20% of all pediatric cancers. Radiation therapy is an effective treatment modality for many CNS tumors; however, this treatment may produce significant physical and psychosocial stress for both the child and parent. Many pediatric healthcare institutions use intervention programs delivered by certified child life specialists (CCLS) to provide psychosocial support and thereby promote successful coping in children and families facing a variety of stressful illnesses and procedures. The purpose was to examine the relationship between play-based procedural preparation and support intervention and use of sedation in children with central nervous system (CNS) tumors during radiation therapy. The secondary objective was to analyze the cost-effectiveness of the intervention compared to costs associated with daily sedation.

Methodology: A retrospective chart review was conducted for inclusion. Outcome measures included the total number of radiation treatments received, the number of treatments received with and without sedation, and the type and duration of interventions, which consisted of developmentally appropriate play, education, preparation, and distraction provided by a certified child life specialist.

Findings: The results of univariate analyses showed that age, tumor location, and total number and duration of interventions were significantly associated with sedation use. The results of multivariate analyses showed that, after adjustment for age and tumor location, a significant relationship was found between the total number and duration of the interventions and sedation use. The implementation of a play-based procedural preparation and support intervention provided by a certified child life specialist significantly reduced healthcare costs by decreasing the necessity of daily sedation.

Conclusions: Support interventions provided by child life specialists significantly decreased both sedation use and the cost associated with daily sedation during cranial radiation therapy in children with CNS tumors.

Biography

Shawna Grissom is the director of the Child Life program at St. Jude Children's Research Hospital. She holds a master's degree from the University of North Texas. She has presented her work on the impact of child life support at regional and national conferences. She serves as the chair-elect and member for the Association of Child Life Professional's Professional Development and Board Nominating committees.

Amy Kennedy is a Lead Child Life specialist in the Child Life program at St. Jude Children's Research Hospital. She is responsible for providing Child Life services to the patients and families in the Radiation Oncology Clinic. She was recently awarded the national clinical excellence award within the field of child life recognizing her exemplary skills and dedication to the field. Amy assists in research and presents her work nationally.

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