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Nursing approaches in children with celiac: A systematic review

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Celiac disease (CD) is an autoimmune enteropathy in individuals with genetic predisposition and it is caused by the ingestion of gluten containing foods. Gluten is a protein found in wheat, barley, oats and rye. CD is a life-long disease in children and adults. In studies, the incidence of CD is increasing all over the world, reported to be 0.05% to 0.1%. In Turkey, the incidence of CD was found to be 0.9% in a study including 1000 healthy children aged 2-18 years. In this context, the aim of this paper is to present clinical examinations and symptoms of celiac in children and to determine nursing approaches to facilitate the adaptation of children to their conditions. To reach related articles between 2009-2019, keywords such as Child (child), celiac, nurse (nurse), gluten were searched on Pubmed, Scholar Google, Science Direct, Turkish Medline, ULAKBIM, Clinical Key, YOK TEZ. A total of 1000 articles on celiac disease and nursing management in children aged 2-18 years were reached and 10 articles conforming to the study were included. The studies on the subject were seen to be quite limited in the literature. According to the studies, most frequent symptoms include chronic diarrhea (60%), abdominal distention (59.5%), weight loss (58.5%), abdominal pain (55%), vomiting (51.4), growth retardation (48.6%), iron deficiency, anemia (45.7%), loss of appetite (32.9%), short stature (17.1). However, diabetic diarrhea, abdominal distention, anorexia, etc. are becoming less common in nurslings. With public screenings the number of asymptomatic cases (81.4%) was found to be higher than that of symptomatic cases. This is due to the diagnosis of patients with very mild symptoms due to serological tests. Gluten-free diet, which is the only treatment of CD, remains important. In this regard, it falls primarily to the pediatric nurses working in primary health care to determine the early signs of CD symptoms and to initiate and maintain appropriate treatment. The fact that gastrointestinal findings are at the forefront in the complaints leading to CD suggests that the awareness of other clinical findings should be increased. In addition, prolongation of the complaint period and the negative effect of late diagnosis age affects the growth negatively, which makes early diagnosis important once again. There are important duties for nurses, family members and other health professionals in determining the signs and symptoms of CD. Nurses should be able to provide effective counseling services to celiac patients, to be able to do so they should understand and manage the biological aspects of the disease and the emotional and social problems that cause in children. It should be kept in mind that treatment involving restrictions in daily life may be difficult to maintain in the long term and may affect quality of life. The perception that the gluten-free diet should be followed is an important finding, and therefore, pediatric nurses should improve the behavior of children with celiac disease, improve their compliance and commitment to treatment.