

“How can nurses best care for the emotional needs of adolescents with Inflammatory Bowel Disease during hospital admission?”

How does one cope with being diagnosed with a chronic illness, such as Inflammatory Bowel Disease (IBD), during adolescence? It is a life-long disease that has no cure, with harsh treatments such as multiple surgeries and excessive medications. As nurses, I believe we need to give this age group a lot of support during hospital admissions making sure their emotional needs are being met.

WHAT IS IBD?

Inflammatory Bowel Disease is an autoimmune disease, which mostly affects the gastrointestinal tract with inflammation and ulcers. It is of unknown cause, and has no cure (Ministry of Health [MoH], 2015).



This illness has long-term physical and psychological affects on individuals. It is typically diagnosed in early adolescence, this age can already be a time of emotional challenge and the diagnosis of a chronic illness can have a large impact (Mackner, et al., 2013).

IBD IN NEW ZEALAND

New Zealand is known to have one of the highest rates of IBD in the world. “There are approximately 15,000 people in New Zealand affected by Inflammatory Bowel Disease” (Ministry of Health [MoH], 2015).

The reported incidence of CD in 2009 was:

- 16 per 100,000 – New Zealand
 - 14 per 100,000 – Canada
 - 1-3 per 100,000 – Southern Europe/South Africa
- (World Gastroenterology Organisation [WGO], 2009).

REVIEW OF THE LITERATURE

Review of the literature showed that adolescents with IBD are more likely to:

- Have a higher risk of developing depression and anxiety problems
- Have lower self-esteem and difficulties in social situations
- Be unlikely to comply with their treatment plan without encouragement, due to their depressive symptoms
- Have a lower health-related quality of life

(Gray, et al., 2012; Cunningham, et al., 2007; Reigada, et al., 2011).

RECOMMENDATIONS

In conclusion, being a teenager with a chronic illness is not easy. They have experiences unlike their healthy peers. After conducting a literature review, I have some recommendations for nurses working with adolescents with IBD below:

- To reduce the negative impact on their life and promote normality, nurses can encourage friends to visit, and for the adolescent to do schoolwork while in hospital,
- Nurses should focus on wellness rather than illness, and maintain a positive attitude to increase positive behaviour in adolescents,
- Encouraging the adolescent to take control of their illness, such as starting a journal to track their diet, activity and relapse periods, can benefit the teenager to prepare them for transition from paediatric to adult services, and manage their illness themselves,
- aswell as allowing the teenager to be actively part of their care, and having individualized care plans, appropriate for their age.

I believe nurses need to be more aware of the emotional needs of these teenagers in order to care holistically for them, as they require support that nurses can provide during admission.

References:

- Cunningham, C., Drotar, D., Palermo, T., McGowan, K., Arendt, R. (2007). Health-Related Quality of Life in Children and Adolescents With Inflammatory Bowel Disease. *Children's Healthcare*, 36 (1), 29-43. Retrieved from: CINAHL.
- Gray, W. N., Denson, L. A., Baldassano, R. N., & Hommel, K. A. (2012). Treatment Adherence in Adolescents With Inflammatory Bowel Disease: The Collective Impact of Barriers to Adherence and Anxiety/Depressive Symptoms. *Journal of Pediatric Psychology*, 37(3), 282-291. doi:10.1093/jpepsy/jsr092
- Ministry of Health [MoH]. (2015). Inflammatory Bowel Disease. Retrieved from: www.health.govt.nz/your-health/conditions-and-treatments/disease-and-illnesses/inflammatory-bowel-disease
- Mackner, L., Greenley, R., Szigethy, E., Herzer, M., Deer, K. & Hommel, K. (2013). Psychosocial issues in Pediatric Inflammatory Bowel Disease: A clinical report of the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition. *Journal of Pediatric Gastroenterology Nursing*, 56(4), 449-458. Retrieved from: PMC
- Reigada, L. C., Bruzzese, J., Benkov, K. J., Levy, J., Waxman, A. R., Petkova, E., & Warner, C. M. (2011). Illness-specific anxiety: Implications for functioning and utilization of medical services in adolescents with inflammatory bowel disease. *Journal For Specialists In Pediatric Nursing*, 16(3), 207-215. Retrieved from: CINAHL
- World Gastroenterology Organisation [WGO]. (2009). Inflammatory Bowel Disease: a global perspective. Retrieved from: www.worldgastroenterology.org/assets/downloads/en/pdf/guidelines/21_inflammatory_bowel_disease.pdf

BN607: Professional Nursing

Assignment 2: Poster Rationale

Adolescents with Inflammatory Bowel Disease (IBD) are at greater risk of developing internalising disorders such as depression and anxiety, have a lower health-related quality of life, lower self esteem and are less likely to be compliant with medication and/or treatment (Gray, et al., 2012; Cunningham, et al., 2007; Reigada, et al., 2011). I believe nurses can best support these individuals by being positive, focusing on wellness, promoting normality, encouraging the adolescent to be in control and having individualised care plans appropriate to their age and stage of illness.

I chose a poster as means to distribute my evidence, as I would like to raise awareness about IBD and the emotional affects it has on the adolescent. Adolescents with chronic illness utilise a range of health services such as general practices, medical wards, surgical wards, and potentially mental health services. A nurse in any setting will at some stage look after an adolescent with a chronic illness such as IBD during their career. Therefore, I feel that the best people to educate are future nurses so that they are aware of this issue when they start their career.

References:

- Cunningham, C., Drotar, D., Palermo, T., McGowan, K., Arendt, R. (2007). Health-Related Quality of Life in Children and Adolescents With Inflammatory Bowel Disease. *Children's Healthcare*, 36 (1), 29-43. Retrieved from: CINAHL.
- Gray, W. N., Denson, L. A., Baldassano, R. N., & Hommel, K. A. (2012). Treatment Adherence in Adolescents With Inflammatory Bowel Disease: The Collective Impact of Barriers to Adherence and Anxiety/Depressive Symptoms. *Journal of Pediatric Psychology*, 37(3), 282–291. doi:10.1093/jpepsy/jsr092
- Reigada, L. C., Bruzzese, J., Benkov, K. J., Levy, J., Waxman, A. R., Petkova, E., & Warner, C. M. (2011). Illness-specific anxiety: Implications for functioning and utilization of medical services in adolescents with inflammatory bowel disease. *Journal For Specialists In Pediatric Nursing*, 16(3), 207-215. doi:10.1111/j.1744-6155.2011.00292.x

PECOT/PICOT

Topic interested in –

“Emotional needs of adolescents with IBD”

PECOT/PICOT category	Information relating to question	Explanation
P – Population	Adolescents between the age of 12-17, who have Inflammatory Bowel Disease (IBD), including Crohn's Disease, Ulcerative Colitis or Unspecified IBD	IBD is most typically diagnosed in this age group
I/E – Intervention/ Exposure	Adolescents who have been diagnosed with IBD at 12 years or older	Adolescence can be hard to cope with, without a chronic illness.
C – Control/Comparison	Healthy adolescents	As compared to adolescents with illness
O - Outcome	Nurses have better understanding of emotional needs of adolescents with IBD	To provide holistic care that meets adolescent's expectations and those of their parents.
T -Time	During hospital admissions	

PICO/T (Whitehead, 2013).

Restructured Question:

“How can nurses best care for the emotional needs of adolescents with Inflammatory Bowel Disease during hospital admission?”