

**NURSING CARE FOR
CHILDREN WITH
EPILEPSY: INTEGRATIVE
LITERATURE REVIEW**

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Abstract: General Purpose: Understanding the nursing team's care possibilities for children diagnosed with epilepsy. **Specific objectives:** Describe the difficulties and/or barriers in caring for children with epilepsy; describe successful practices in nursing care for children with epilepsy; understand the repercussions of epilepsy from the perspective of diagnosed children. **Method:** This is an integrative literature review, consisting of a search in the PUBMED database in the period between January and May 2022. Using the descriptors: child, epilepsy and nursing. Original articles available in full *online* format, in Portuguese and English, published in the last eighteen years, were included. The content of the articles was analyzed based on thematic analysis. **Results:** 418 articles were identified by reading the title and abstract. After reading the full text and applying the inclusion criteria, 18 articles were pre-selected. After a more careful reading, considering the purpose of the study, 8 articles were selected for analysis. **Conclusion:** It was concluded that nursing care for children who have epilepsy and are undergoing treatment or are still in the process of discovering the pathology, is not always properly prepared to deal with the feelings and emotions of children and their families, so this This work brought foundations where one can observe the ideal paths to be followed so that the journey in front of the pathology process is more peaceful physically and emotionally for the child, and at the same time the family has support from the multidisciplinary team.

Keywords: Child, epilepsy and nursing.

INTRODUCTION

Epilepsy is a chronic disorder of the central nervous system whose main characteristic is the manifestation of recurrent and spontaneous epileptic seizures. It is the most prevalent severe neurological condition in the

world, affecting 1% to 2% of the population. (OLIVEIRA et.al, 2007).

Epileptic seizure (EC) is the clinical expression of abnormal, excessive, synchronous discharge of neurons located basically in the cerebral cortex. This paroxysmal activity is intermittent and usually self-limiting, lasting from seconds to a few minutes; when prolonged or recurrent it is characterized as status epilepticus (PE). (DA SILVA et.al, 2013).

Epilepsy means the repetition of two or more unprovoked EC. The term "unprovoked" indicates that the EC was not caused by fever, traumatic brain injury, electrolyte disturbances, or concomitant illness. Provoked convulsive crises are those that occur in the presence of a defined stimulus, recurring only if the acute cause remains, not characterizing epilepsy. (DA SILVA et.al, 2013).

It is a neurological condition that appears more commonly in early childhood, impacting the individual's development throughout the development of the individual, due to the manifestation/experience of this condition and specific support needs, in addition to the respective influence on family dynamics. (RENARDIN et.al, 2019).

This disease can trigger different effects on the affected people, at a neurological, school, family and social level, and can cause serious illnesses if there is no adequate intervention in this area. (RENARDIN et.al, 2019).

At the same time, family members tend to adopt attitudes that limit the child's social life, due to concern about the risk of injuries, imposing stricter restrictions on daily activities. These attitudes, often reinforced by social beliefs and lack of information, result in a situation in which children with epilepsy experience greater social isolation and difficulty in social and school relationships. Esteem, as well as the ability to enjoy the overall health benefits. (RENARDIN et.al, 2019).

Patient education aims to impart knowledge, attitude and skills to patients and their families. The doctor who makes the diagnosis organizes the treatment and explains how to use the drugs. The first intervention is important in crises and the patient's caregivers must be adequately informed by the team members. The most suitable for this issue are the nurses who deal with the patient. Nurses play a key role in ensuring the best health conditions for epileptic patients. Patient education includes information about the disease, learning self-management skills, and discussing treatment options. It is very important to assess life-threatening factors in a child affected by a seizure, especially to determine whether the seizure affects breathing or not. Because all attempts to be applied to the child will depend on the condition of impressionability of the child's breath. Information about crisis monitoring, the importance of regular medication use, what to do once control is achieved, and the effects of interrupting the medication regimen must be provided by well-educated nurses. (UNALP et.al, 2020).

In view of the above, this article sought to answer the idealized care of nurses towards children affected by the disease, how this role must be played, the multiprofessional relationships and the family's relationship with the nurse about the care that must be directed to the child, according to your day-to-day needs.(RENARDIN et.al, 2019).

METHODOLOGY

This research consists of an integrative literature review study. Considering the concept, bibliographical research is developed seeking to analyze, synthesize, and interpret a given topic from the selection of previous scientific works on the same research topic, in order to substantiate and support a study (CARDOSO, et.al, 2010).

According to Mendes; Silveira; Galvão (2008) the success of an integrative review is that the steps to be followed are well delimited, and the researcher sticks to their sequence. In general, for the construction of the integrative review, it is necessary to go through six different stages, similar to the development stages of conventional research. (MENDES, et.al, 2008)

First stage: identification of the theme and selection of the hypothesis or research question. The theme of this study is: Nursing care for children with epilepsy.

Second stage: establishment of criteria for the search in the literature. Considering the impossibility of working with all articles related to the subject, inclusion criteria were established, namely: having been published between 2004 and 2021, being in Portuguese, English or Spanish and meeting the objectives of the study.

Third stage: definition of the information to be extracted from the selected studies. "The reviewer aims at this stage to organize and summarize the information in a concise manner, forming a database that is easy to access and manage" (MENDES, et.al, 2008). Thus, for the evaluation of the works, a classification of the results referring to the objectives of this study was stipulated, namely: literature review, identical articles and articles outside the topic.

Fourth stage: evaluation of included studies. This is the stage where the data obtained through the articles were collected, considering the importance that the author attributed to the subject, statistical data from field research, direct relationship with the proposed objectives, etc. In this work, the data were synthesized within a logic that allowed its interpretation in the most concise way possible, which was carried out in the next step (MENDES, et.al, 2008).

Fifth stage: interpretation of results. The data collected and synthesized in the previous step were critically analyzed, seeking a better understanding through comparison with theoretical knowledge, the identification of conclusions and implications resulting from the integrative review. (MENDES, et.al, 2008).

Sixth step: presentation of the review. The last stage consists of disclosing the results obtained with the whole of the integrative review. A report where results and discussion of the proposed theme are exposed. The survey of articles was carried out in the databases: PubMed. To search the databases, descriptors crossed by the acronyms “and” and “or” were used: children and epilepsy and nursing. (MENDES, et.al, 2008). The inclusion criteria were: article to have been published between the years 2004 to 2021 made available; in full text; in Portuguese, English or Spanish and that respond to the objectives of the study. (MENDES, et.al,2008).

The material retrieved in the searches was initially analyzed by reading the titles, followed by reading the abstracts. Finally, the texts selected in the previous steps were read in full to complete the selection process. (MENDES, et.al, 2008).

After analyzing the articles found and reviewing their selection, it was possible to select 8 articles that fit the purposes of this study. The selection steps are described in detail in the form of a Flowchart. (MENDES, et.al, 2008).

This research did not need to go through the ethics committee since it fits the statement: Resolution n° 510, of April 07, 2016, which defines that research carried out exclusively with scientific texts for review of the scientific literature. As this is not a research with human beings, it will not be necessary to submit it to the Ethics and Research Committee (CEP).

RESULTS AND DISCUSSION

When scanning the databases, 476 studies were identified, of which 418 were excluded because they did not meet the pre-established criteria, reducing the initial number to 21 which, when analyzed according to their titles and abstracts, duplicity, full text, language, the final sample was reached, consisting of 8 studies. In the end, these were arranged in flowchart 1, consisting of four steps: identification, which includes all studies found; the selection, which deals with the studies selected after the first stage, the evaluation, which consists of reading the selected studies and the inclusion, which is the final sample.

In the table below, we will present in a general way the 8 articles selected in this study, in terms of title, author(s) and year. We consider such broad delimitation as important so that there is greater use of the information that will be discussed later.

Category 1 - Difficulties and/or barriers in caring for children with epilepsy.

Publications in this category address the factors that demonstrate the difficulties in caring for children with epilepsy.

According to M. Goodwin et al. (2004) epilepsy is one of the most common chronic neurological conditions, secondary only to headache.

According to Mammas et al. (2020) working with these children is not always the same, due to the different realities encountered. Freedom from seizures is not always possible, which is why the attempt is made to reduce seizures as much as possible so that this child can lead a normal life within their conditions.

Family reports collected by Renardin et al. (2019), cite the lack of safety of children in environments far from their parents, as they are prone to having a crisis without someone

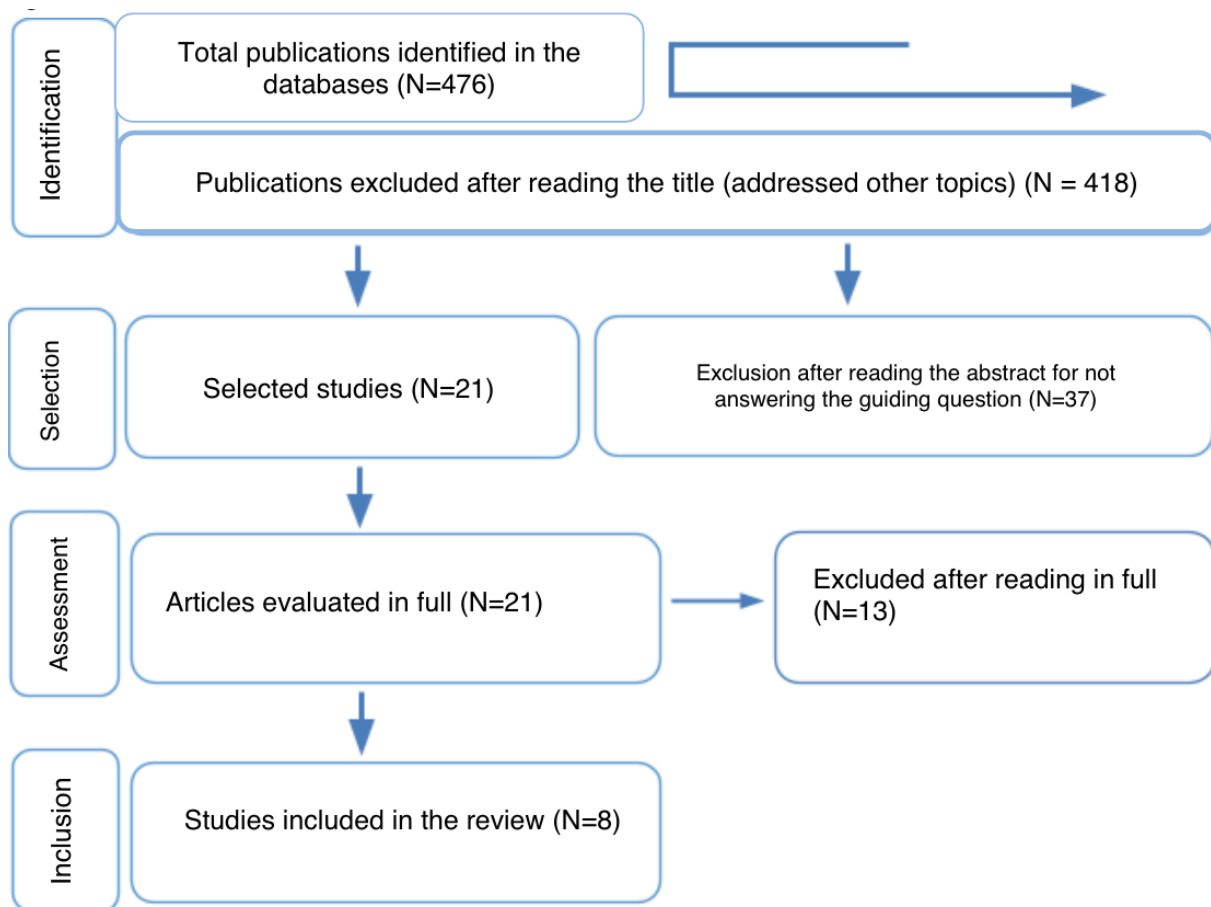


Figure 1. PubMed database search results.

N°	TITLE	AUTHORS	YEAR
1	The challenge of paediatric epilepsy nursing: An interview with Mrs. Jenny O'Brien, paediatric epilepsy nursing specialist at the Wirral University Teaching Hospital, UK.	MAMMAS, Ioannis N.; SPANDIDOS, Demetrios A.	2020.
2	Nursing approaches in pediatric epilepsy and ketogenic diet treatment.	ÜNALP, Aycan et al.	2020.
3	Supporting and empowering people with epilepsy: contribution of the Epilepsy Specialist Nurses	HIGGINS, Agnes et al.	2019.
4	Epilepsy bearing children: viewpoint and familyhood	RENARDIN, Délis et al	2019.
5	Development of an epilepsy nursing communication tool: improving the quality of interactions between nurses and patients with seizures	BUELOW, Janice; MILLER, Wendy; FISHMAN, Jesse	2018.
6	The management of epilepsy in children and adults.	PERUCCA, Piero; SCHEFFER, Ingrid E.; KILEY, Michelle.	2018.
7	Epilepsy in children.	GUERRINI, Renzo.	2006.
8	The role of the clinical nurse specialist in epilepsy: A national survey.	GOODWIN, M. et al.	2004.

Table 1. Articles selected for discussion.

they know nearby. A daily difficulty for these children is also the affected learning, due to the interruptions when there are crises, even mild ones, during classes and explanations. It was also pointed out that it is difficult to enter into conflict with the child, as any slight irritation can trigger a crisis, making imposing rules and scolding when necessary, a delicate task. One of the mothers also reports that the night period is always complicated, the fear of sleeping and something happening to the child is great, so there is sleep deprivation on the part of those who take care of these children.

Still according to the report of parents and relatives responsible for the care of these children in Renardin et al. (2019), there is great prejudice on the part of society, where, if a crisis happens in public, there is no help from people who are nearby, as they are afraid to get close, this makes the disease process even worse. more painful for those who care.

Another difficulty reported by caregivers of this child is not knowing exactly how to explain how and why the crisis happened, and having this awareness can help reduce crises, and this becomes frustrating for caregivers, not being able to identify in fact how crises are coming. Higgins et al. (2019).

Category 2 - Successful practices in nursing care for children with epilepsy.

Epilepsy nurses have an almost transdisciplinary function, knowing what each one does and what each one can contribute. Because of their knowledge of how the epilepsy system works, they are able to facilitate communication between physicians and caregivers (family members). Higgins et al. (2019).

According to Mrs. Jennifer O'Brien, one of the UK's pioneering specialists in pediatric epilepsy nursing, nursing has a

mission with children who suffer from the condition, which is to enable them and their families to live a life closer to normal, ensuring so that all those involved in the child's care are well informed about how the child's epilepsy works and can promote the child's safety and integration in society. Mammass et al.(2020).

Corroborating this information, article 8 brings the fundamental role of nurses in assisting children with epilepsy with increasing access to specialized services, improving communication between health professionals and also promoting the multidisciplinary follow-up of these patients.

Concluding the reasoning about the importance of nursing in the care of children with epilepsy, article 3 brings support and training on the part of nurses towards family members, a way of psychosocial care, teaching them to listen, understand, reassure and motivate their children, as well as receiving the same care from the nursing team, in order to balance the emotional state of this family.

Category 3 - Children's perceptions about the illness/treatment of epilepsy.

Article 5 brings a table where some of the difficulties perceived by patients were collected. In one of its categories, it is asked about what possibly triggers the crises, as an answer we have: lack of sleep, anxiety, stress when going through routine situations and even when these children get sick, they usually feel more prone to evolve for convulsive seizures.

The book Epilepsy and quality of life by Marly de Albuquerque was used as support material for the study, and brought important and crucial points where the child has an important impact on their psychic/cognitive development and on their family relationships. The child feels irritated at the

beginning of the treatment, but does not know how to explain that this is due to the side effects of the drug treatment.

Still according to the literature, the affected child feels limited socially and in leisure time because he knows that depending on the activity he is involved in, he may be at risk of a crisis in front of his peers. This is repeated in the school environment and in educational insertion.

The book also has the opinion of other authors such as (Curral and Palha, 1996) where they highlight epilepsy in childhood through the eyes of the little ones, as a disease that affects their friendships, their family relationships, they feel different in relation to their own behaviors, and feel incapable of carrying out simple and routine activities for fear of going through a crisis in the social environment in which they are inserted.

In agreement with the facts presented so far, article 4 shows that children suffer after the diagnosis, as parents start to “prevent” them from carrying out activities that were previously common in their routines. In sequence, it is reported that children suffer from the stigmas of society, of course in their words, but when an adult analyzes the situation from the outside, he soon perceives society with a prejudiced look.

Recognizing all the points presented above in article 4 and other search sources, considering both the children’s perspective and that of the family, nursing is able to provide the necessary support so that this child, despite its limitations, can lead a life calm within the possibilities shown to her.

CONCLUSION

Based on the information presented, it is possible to notice that the emotional impact faced by children who are diagnosed with epilepsy and live with the disease, is not restricted to the hospital environment,

the child suffers the consequences of the pathology, whatever the environment. That is why the role of nurses after this diagnosis becomes so important, where they cannot be restricted to hospital care, needing to be able to develop comprehensive care for this child, so that they are prepared within their reality, to be able to deal with in the best way with the disease and its treatment in their daily lives.

In addition to caring for the child, it was described that the nurse also needs to be prepared to help with the patient’s family, which can also negatively interfere with the treatment if they do not know how to deal with routine situations that may destabilize this child. This care can be extended to other members of the multidisciplinary team, it is up to the nurse to note the need individually, as each patient and their families have a way of facing the process.

The study was able to cover the subject in a limited way, due to the inopportune chance to seek knowledge in the field, due to the COVID-19 pandemic.

Therefore, it was perceived that family care, together with nursing care for the child, plays a fundamental role in how the patient will deal with the health-disease process, and can positively interfere in their daily lives and bring better conditions for their lives. the child who lives with epilepsy and drug treatment, which often takes time to stabilize. This process, being worked within the ideal proposed for each reality, can bring more comfort to the life of the child and their family members, so it is up to the nurse to be prepared to condition and apply the ideals within the reality of each patient.

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