TITLE: Hospital-Based Support for Parents of Chronically Ill Children: Clinical Evidence

DATE: 05 March 2014

RESEARCH QUESTION

What is the clinical evidence regarding optimal interventions to provide hospital-based support for parents of chronically ill children?

KEY MESSAGE

One randomized controlled trial and six non-randomized studies were identified regarding optimal interventions to provide hospital-based support for parents of chronically ill children.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2014, Issue 2), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2009 and February 20, 2014.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, and non-randomized studies.

One randomized controlled trial (RCT) and six non-randomized studies were identified regarding optimal interventions to provide hospital-based support for parents of chronically ill children. No

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health technology assessments, systematic reviews, or meta-analyses were identified. Additional references of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

One RCT\(^1\) and two non-randomized studies\(^2,4\) were conducted at a children's hospital in Iceland. The RCT incorporated a family nursing program, but the other studies did not specify who provided the therapeutic intervention, which consisted of one or two therapeutic conversations with families of children with chronic illnesses. The RCT reported that parents receiving the intervention experienced significantly higher family support. The non-randomized studies reported that mothers experienced significantly higher family support and ability to problem-solve, but these differences were not reported by the fathers.

A non-randomized study published by the Agency for Healthcare Research and Quality (AHRQ)\(^3\) described a hospital day program for families of children and adolescents with chronic medical issues. A multidisciplinary team provided daily support for the patients (including medical evaluation, schooling, and group therapy) and socializing group activities that also included parents and families. The program highlighted lifestyle choices and incorporation of the family into the child's care. The day program lasted an average of 18 days (5 days per week), and outcomes included positive effects on quality of life, emotional symptoms, and family beliefs about illness.

Three non-randomized studies\(^5-7\) were based on parental interviews. A non-randomized study\(^5\) involving parents of children with brain tumours concluded that early anticipatory guidance was needed for the families. Another study\(^6\) of parents of children with cancer stated that physicians should provide high-quality medical and prognostic information in order to facilitate peace of mind and trust of the parents. The third study,\(^7\) also involving parents of children with cancer, indicated that a multidisciplinary team should be incorporated, giving clear and honest information throughout the course of the illness, as well as actively consulting with parents regarding their child's care. It also concluded that the hospital care should be linked with community services.
REFERENCES SUMMARIZED

Health Technology Assessments
No literature identified.

Systematic Reviews and Meta-analyses
No literature identified.

Randomized Controlled Trials


Non-Randomized Studies


APPENDIX – FURTHER INFORMATION:

Non-Randomized Studies – additional considerations


Review Articles


Additional References
