PARENTAL PHOTOGRAPHIC MONITORING OF ASCITES

Arch Dis Child

Abstract G361 Figure 2
Clinical improvement via photography

Aims Primary Chylous Ascites is a rare cause of abdominal dis- tension in infants. Our patient had six weeks of intravenous octreotide and total parenteral nutrition followed by medium chain triglyceride formula feeding. We describe his monitoring by girth measurement and parental photography.

Methods A four week old boy who presented with worsening abdominal distension and discomfort had ultrasound confirmed ascites. At paracentesis, 100 ml of chyrous fluid was aspirated. His clinical course was monitored by serial girth measurement and parental photography using a modern mobile telephone.

Results Variability in abdominal circumference measurements (Figure 1) made detection of clinical improvement more difficult than it was with serial photography (Figure 2). His mother found the photographs helpful in monitoring her son’s progress.

Conclusion This superiority of parental photography over formalised girth measurement monitoring in our patient mandates critical review of these techniques. Informal parental photography has been used in assessment of dermatological conditions and inguinal hernias. Inter-observer variability in measurements of abdominal circumference is recognised. Parental photography may increase parents’ perceived involvement in their child’s care in such chronic treatment and promote a family centred approach. We speculate that measurements from technical photographs as employed in sports biomechanical studies will be the most sensitive tool for clinical assessment of ascites.

REFERENCES
2. Kawaguchi AL. Inguinal hernias can be accurately diagnosed using the parent’s digital photographs when the physical examination is nondiagnostic. J Pediatr Surg. 2009;44:2327–2329

CHILD NUTRITION: A “NEED TO FEED” FUTURE DOCTORS

Aims Parents may ask doctors working in a range of specialties for advice on childhood nutrition. The Department of Health states that all doctors working with children should engage in health promotion. Ensuring the provision of high quality information may help prevent obesity and optimise the health of children and young people.

As many doctors may have limited postgraduate exposure to paediatrics, medical school is an ideal time to learn about the importance of childhood nutrition. We decided to explore the knowledge, skills and attitudes of medical students about providing guidance on childhood nutrition.

Methods We sent a survey to all medical students undertaking their paediatric placement at one teaching hospital between October 2012–13. We asked the students whether they felt comfortable advising about breastfeeding, infant and toddler nutrition, obesity, food allergies and infant weighing schedules. We also enquired from them about maternal alcohol consumption during breastfeeding and about a crying baby whose mother was struggling to breastfeed.

We collected data using software from SurveyMonkey™ and analysed it using Microsoft Excel™.

Results 82 students were asked to fill in the survey. 47(57%) responded. 32(68%) felt uncomfortable advising about breastfeeding and toddler nutrition. Despite this, 33(70%) felt they would advise a mother struggling with breastfeeding rather than referring her to the health visitor. 32(68%) and 26(55%) thought that with help they could provide information about obesity and food allergies respectively. Regarding maternal alcohol consumption whilst breastfeeding 27(57%) knew the appropriate advice about drinking minimally or in moderation.