The Goal The aim of this study was to examine the effectiveness of structured education about breast-feeding using a sample of high-school students. The results presented in this study are part of the results of wider research, currently on-going, into the influence of structured education on breast-feeding on changes to the intentions, knowledge and attitudes of pupils and students.

Methods The study was longitudinal, quasi-experimental, and approved by the Ministry of Science and Education of the Republic of Croatia. The experimental group consisted of 30 students from the Medical High School in Bjelovar, and the control group consisted of 30 other students from the same school. The experimental group took a structured educational course on breast-feeding, and the control group did not. The attitudes, intentions and knowledge of the subjects were measured using a validated BIAKQ questionnaire. In both groups the questionnaire was conducted twice, with a two-week interval. The outcomes measured were the changes to the total results of the BIAKQ questionnaire and the subscales of the questionnaire. In processing the results, the following statistical procedures were used: presentation of the results by frequencies, percentages, arithmetic means and standard deviations, analysis of outliers and the normality of distribution of the results (Skewness and Kurtosis z values, Histogram, Q-Q diagram, Box diagram, Kolmogorov-Smirnov and Shapiro-Wilk tests), analysis of the differences between the results (t-test or the Mann-Whitney test and Wilcoxon test), and correlations are presented using Spearman's correlation coefficient.

Results Before the educational course, in relation to intentions, attitudes, knowledge and the overall results of the questionnaire, there were no significant differences between the control and experimental groups. After the experimental group had taken the educational course, the subjects achieved better results in comparison to the control group in terms of their intentions ($ME=38.03$, $SD=5.71$, $MK=35.27$, $SD=5.41$, $t(58)=1.76$, $p=0.08$), attitudes ($MdnE=35.52$, $MdnK=25.48$, $U=299.5$, $p=0.03$), knowledge ($MdnE=35.97$, $MdnK=25.03$, $U=286.0$, $p=0.01$) and the total results of the questionnaire ($MdnE=35.23$, $MdnK=25.77$, $U=308.0$, $p=0.04$). The results of the subjects in the experimental group after the course were also better in relation to their own results before the course, in terms of their intentions ($M=4.40$, $SD=5.61$, $t(29)=4.30$, $p=0.00$), attitudes ($M=13.40$, $SD=15.37$, $t(29)=4.77$, $p=0.00$), knowledge ($MdnPos=8.85$, $MdnNeg=9.5$, $Z=-1.883$, $p=0.06$) and total results ($MdnPos=15.69$, $MdnNeg=9.0$, $Z=-4.121$, $p=0.00$). The greatest correlation in the total results of the questionnaire after the course were shown by attitudes ($r=0.99$, $p=0.00$), and the smallest by knowledge, before ($r=0.39$, $p=0.04$) and after ($r=0.29$, $p=0.12$) the educational course.

Conclusion The results confirm statistically significantly improved attitudes, intentions and knowledge regarding breast-feeding in the experimental group after taking the educational course. Earlier research by the author and research by other authors confirm that education that only brings about changes in knowledge does not necessarily also lead to changes in attitudes and intentions. Only a well-designed and structured model of education, with a multi-dimensional approach can lead to changes in attitudes and intentions, which are important predictors of behaviour. Further research is needed to define more precisely the age at which education gives the best results.

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A CASE REPORT OF NEUROFIBROMATOSIS TYPE 1 IN TWO BROTHERS. PRIMARY PEDIATRIC HEALTH CARE OF A CHILD WITH A CHRONIC CONDITION IN CROATIA

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Introduction Neurofibromatosis Type 1 (NF1) or von Recklinghausen disease is an autosomal dominant genetic disease characterized by variability of its clinical expression of sick members of the same family. In a National Institutes of Health (NIH) consensus development conference regarding NF1, seven criteria were demarcated, of which two or more are required to establish the diagnosis of NF1. Some features of NF1 can be present at birth, but most manifestations emerge with age. Various manifestations and complications are associated with the age of the patient.

Case Description In this case, a mother and two male children have NF1. The diagnosis of NF1 in the first child was suspected based on café au lait macules at 6 months of age. At the same time, a clinical diagnosis was made in a 28-year-old mother. Child1, a male, 7 years old, has multiple café au lait macules, axillary and inguinal freckling, subcutaneous neurofibromas, Lisch nodules, multiple T2-hyperintensities on brain magnetic resonance imaging (MRI) in the basal ganglia, cerebellum. He has macrocephaly, cognitive problems, attention deficit, sideropenic anaemia. MLPA analysis (Multiplex Ligation-dependent Probe Amplification test with SALSA MLPA kit P245-B1) showed no change in the number of copies of the genome. Child2, a male, aged 4 years and 3 months, with the presence of multiple café au lait spots diffuse all over the body of different sizes and axillary freckles. Brain MRI shows hyperintensities in the basal ganglia, globus pallidus and cerebellum. He has constipation, no sphincter control, sideropenic anaemia, fine motor skills difficulties. Both children have speech articulation difficulties. Child1 attends school according to an individual program. Child2 does not attend kindergarten, is not included in the early intervention program. 34-year-old mother, a housewife, has an unrecognized NF1. During puberty, she had skin problems, spots and neurofibromas, itching. The family live in a house in the countryside, no car, no internet access. Public transport to the school, kindergarten and the nearest town is not organized. There are no speech therapists near the place of residence.

Conclusion Health surveillance of children with NF1 in primary pediatric care requires knowledge of clinical criteria and the various manifestations of the disease that may occur with age. NF1 is a multisystem disorder that requires multidisciplinary follow-up. Primary paediatrician takes on the role of coordinator. It is necessary to know the ability of the family to meet the intense rhythm of diagnostic and therapeutic interventions.

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CAN BENIGN AFEBRILE CONVULSIONS ASSOCIATED WITH MILD GASTROENTERITIS BE PREVENTED BY VACCINATION?

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Background Convulsions during mild viral gastroenteritis (CwG) represent a clinically recognized entity of benign