



Texting Adolescent Clients

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Text messaging may be a useful communication tool for adolescent clients receiving contraception injections, according to a study published online in the *Journal of Adolescent Health*. The study was conducted in Baltimore and included 100 participants ages 13 to 21 who were receiving contraception via injection every 3 months and followed over 9 months. One-half of the participants received standard automated calls on their home phones reminding them of their upcoming appointment, while the other half received personalized daily text messages starting 3 days prior to their monthly appointment, asking them to text back their responses. In addition, the text group also received periodic texts with tips on condom use to prevent sexually transmitted infections (STIs), suggestions for maintaining healthy weight and messages urging them to call their nurse with any questions or concerns. Overall, 87 percent of participants showed up for the first of three injections, 77 percent completed the second cycle and 69 percent came to clinic for the third and final injection. Because all participants received personal phone calls from a nurse, the study was not equipped to measure differences in show-up rates between those who received standard phone call reminders and those who got text messages. However, adolescents who received text-message reminders were more likely to show up for their injections on time than their peers who got traditional reminders—68 percent compared with 56 percent for first appointment and 68 percent compared with 62 percent for second appointments. The differences between the two groups, however, dissipated by the third appointment.

Cancer Screening

Many adults in the United States aren't getting the recommended screening tests for colorectal, breast and cervical cancers, according to data published in the Centers for Disease Control and Prevention's (CDC) *Morbidity and Mortality Weekly Report*. For 2013, screening for these types of cancers either fell behind previous rates or showed no improvement. Among adults in the age groups recommended for screening, about one in five women reported not being up-to-date with cervical cancer screening, about one in four women reported not being up-to-date with breast cancer screening and about two in five adults reported not being up-to-date with colorectal cancer screening. The full report, "Cancer Screening Test Use—United States, 2013," can be found at www.cdc.gov/mmwr.



Delayed Cord Clamping

Delayed clamping of the umbilical cord to help prevent iron deficiency in infancy was associated with improved scores in fine motor and social skills in children at age 4, particularly in boys, although it was not associated with any effect on overall IQ or behavior compared with children whose cords were clamped seconds after delivery, according to an article published online by *JAMA Pediatrics*. Swedish researchers conducted a follow-up of a randomized clinical trial to assess the long-term effects of delayed cord clamping on neurodevelopment in children at age 4. The authors assessed 263 children (about 69 percent of the original study population) based on IQ tests, as well as development

and behavior using other assessments and questionnaires. Delayed cord clamping (141 children in follow-up) was greater than or equal to 3 minutes after delivery and early cord clamping (122 children in follow-up) was less than or equal to 10 seconds after delivery. The authors found no difference between the two groups for full-scale IQ, according to the study results. However, the proportion of children with an immature pencil grip was lower in the delayed cord clamping group and that group had higher scores in personal-social and fine motor skill assessments. There were no differences between the groups for girls in any of the assessments. However, boys who had delayed cord clamping had higher average scores in several tasks involving fine motor function and personal-social domains, the results show.

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General Surgery During Pregnancy

Pregnant women who undergo general surgical procedures appear to have no significant difference in postoperative complications compared with women who are not pregnant, according to a report published online in *JAMA Surgery*. Researchers analyzed data from the American College of Surgeons' National Surgical Quality Improvement Program from 2006 through 2011. The study included 2,764 pregnant women and 516,705 women who were not pregnant. Researchers compared rates of 30-day postoperative mortality, overall morbidity (illness) and 21 postoperative complications. Pregnant women were more likely to undergo surgery as an inpatient (75 percent vs. 59.7 percent) and more likely to undergo an emergency operation (50.5 percent vs. 13.2 percent). There was no significant difference in 30-day mortality rates between pregnant (0.4 percent) and nonpregnant (0.3 percent) women or in the overall morbidity rate in pregnant women (6.6 percent) compared with nonpregnant women (7.4 percent). There also were no significant differences when rates of the 21 complications were compared. In statistical analyses, pregnant women were matched with nonpregnant women to standardize baseline differences between them. The authors note their study is observational, which means only associations, and not causation, can be drawn from these results, and they also point out a lack of data on fetal outcomes.

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