



ORIGINAL ARTICLE

Infectious diseases and use of health care resources in children less than 2 years-old who attend kindergarten^{☆,☆☆}



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KEYWORDS

Kindergarten;
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Consumer health resources

Abstract

Introduction and objectives: Parents often ask paediatricians for advice about the best way to care for their children. There are discrepancies in the literature on this subject. The objective of this study is to evaluate the influence of attending kindergartens at the risk of acute infections and the use of health care resources in children less than 24 months.

Population and methods: A prospective longitudinal study was conducted on two cohorts of children aged 0–24 months (born between 1 January and 30 September 2010), who were grouped according to whether they attended kindergarten or not, and were usually seen in 33 paediatric clinics of the Principality of Asturias Public Health Service.

Results and conclusions: A total of 975 children were studied, of whom 43.7% attended a kindergarten at 24 months. Attending kindergarten increases the risk of pneumonia by 131%, recurrent

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wheezing by 69%, bronchitis by 57%, and otitis media by 64%. Early exposure to kindergarten increases the risk of pneumonia from 2.31 to 2.81, and the mean emergency room visits from 1 to 2.3.

The mean antibiotic cycle is 1.7 in children who do not go to kindergarten, 3.4 if started within the first 6 months, and 2 if they start at 18 months.

Care attendance is a factor of risk of infectious diseases increases if they attend at an early age.

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PALABRAS CLAVE

Guarderías;
Lactantes;
Infecciones agudas;
Consumo de
fármacos;
Consumo recursos
sanitarios

Enfermedad infecciosa y consumo de recursos sanitarios en menores de 2 años que acuden a guarderías

Resumen

Introducción y objetivos: Los padres con frecuencia solicitan a los pediatras consejo acerca del mejor sistema para el cuidado de sus hijos. En la literatura existen discrepancias al respecto.

El objetivo de este estudio es evaluar la influencia de la asistencia a la guardería sobre el riesgo de infecciones agudas y la utilización de recursos sanitarios en los niños menores de 24 meses. *Población y métodos:* Estudio longitudinal prospectivo de 2 cohortes de niños de 0–24 meses que se diferencian por la asistencia o no a la guardería, nacidos entre el 1 de enero y el 30 de septiembre de 2010 y que acuden habitualmente a las consultas de 33 pediatras del Servicio Público de Salud del Principado de Asturias.

Resultados y conclusiones: Se estudiaron 975 niños. A los 24 meses acuden a la guardería el 43,7%. Asistir a guardería incrementa el riesgo de padecer neumonía en un 131%, el de sibilancias recurrentes en un 69%, el de bronquitis un 57% y el de otitis media en un 64%. La exposición temprana a la guardería incrementa el riesgo de neumonías de 2,31 a 2,81 y la media de visitas a urgencias desde 1 a 2,3.

La media de ciclos de antibióticos es de 1,7 para los que no van a la guardería, de 3,4 si la iniciaron en los 6 primeros meses y de 2 si comienzan a partir de los 18 meses.

La asistencia a guarderías es un factor de riesgo de padecer enfermedades infecciosas que aumenta si asisten desde edades tempranas.

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Introduction

Women and mothers have traditionally adopted the main role in the rearing of their children. At present, in our country, childbirth gives rise to new circumstances in which most citizens require the help of specialised services to take care of their young.¹ The maternity leave period in Spain lasts 16 weeks,² while it lasts 68 weeks in Sweden.³ The law allows working mothers to devote 1 h a day to breastfeeding for 9 months. Thus, child care centres become a social need and demand. According to population surveys, in 2010, 25.01% of women employed out of the home in Spain reported engaging specialised services for the care of their children.⁴

Child care attendance does have an influence on children's health. A literature review published in 2007⁵ concluded that child care attendance was associated with a significant increase in acute infectious disease in childhood, which also has an impact on society and the immediate household environment.⁶ Furthermore, it has economic consequences through increased health care costs and the cost associated with parental absences from work.⁷

In recent years, there has been social debate about the best way to care for children during early childhood. Some studies have been published in support of the psychosocial benefits of attending child care centres, although these benefits have not been proven in populations that are not at psychosocial risk.⁸ In this context, families often ask the paediatrician about the best way to care for their children. Learning the actual facts will better guide decision-making on this subject while taking into account the circumstances of the household and the health status of each child.

Objectives

- To assess the influence of child care attendance on the risk of acute infection, use of pharmacological agents and use of health resources in children younger than 24 months. To establish the influence of other factors.
- To assess whether the "child care exposure time" factor increases the incidence of infectious diseases and the use of pharmacological agents.

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