

Factors Predisposing to Hospitalism in Early Childhood: Systematic review.

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Introduction

Early childhood is the most important evolutionary stage of human beings, since the experiences that children live in these years are fundamental for their later development¹. During its development, the child faces events that raise demands that are difficult to meet, such as illness and hospitalization². Hospitalization is a stressful event for the child due to the convergence of situations that generate emotional and behavioral alteration that favors living as a negative experience³. Several international studies show that about 50% of hospitalized children have anxious or depressive symptoms during their hospital stay⁴. In this context, the concept of hospitalism is generated and defined as the set of physical and psychic disorders that children present as a result of prolonged hospitalization⁵.

Consequently, the objective of this research is to analyze the factors that predispose to hospitalization in early childhood at national and international level, based on a systematic search.

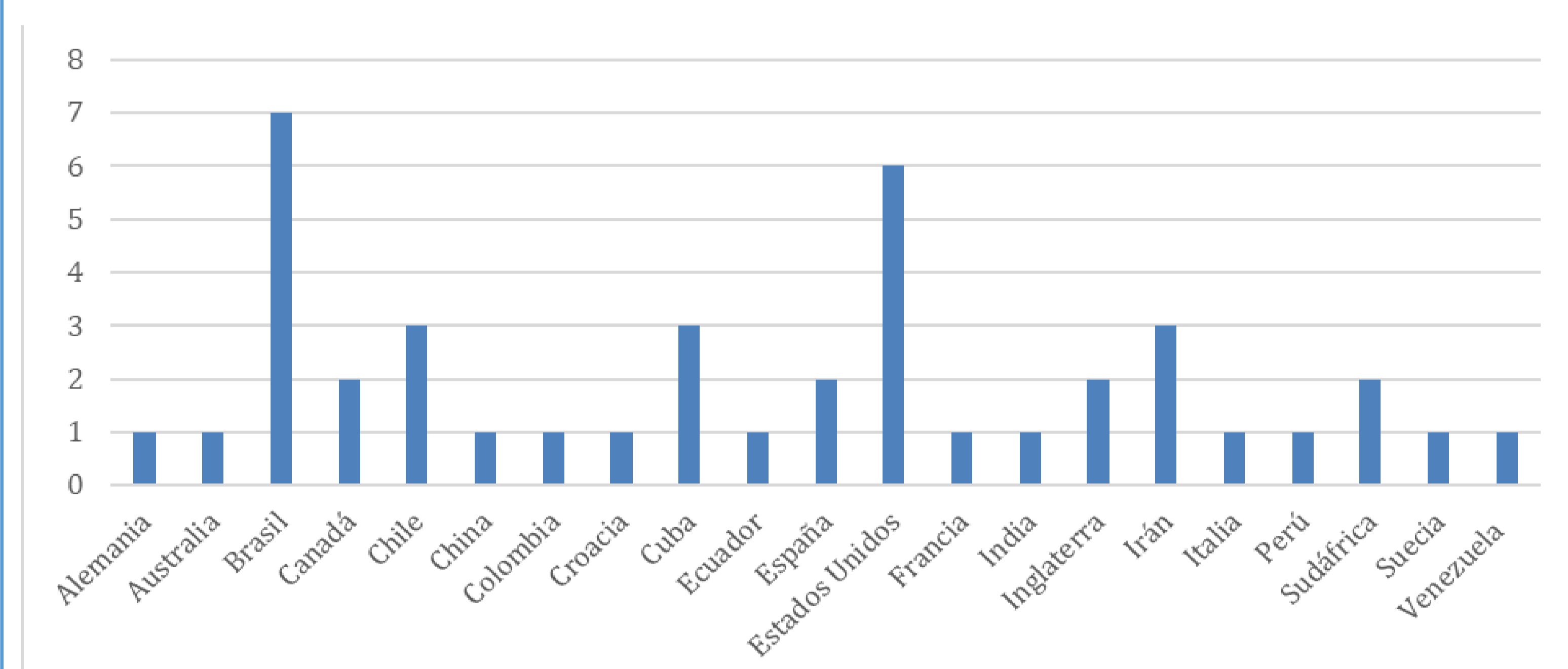
Results

Regarding the years of publication, 21% correspond to the years 1990-2000, 37% to the years 2001-2010, and 42% to the years 2011-2018. According to the continent and country of origin of the 42 articles, these correspond to 2% of Oceania (Australia), Africa 5% (South Africa), Asia 12% (China, India, and Iran), Europe 21% (Germany, Croatia, Spain, France, England, Italy, and Sweden), North America 26% (Canada, Cuba, and the United States), and South America, with the largest amount, at 33% (Brazil, Chile, Colombia, Ecuador, Peru, and Venezuela) (Graph N° 1).

Seven (7) categories of macro-factors that predispose to early childhood hospitalization and 58 microfactors that were mostly: 1 Hospital environment (unknown environment and presence of strangers), 2. Pain (fear of invasive medical procedures) are identified through evidence) 3 Separation of the near circle (distance from the family environment), 4 Personal factors (psychic characterization), 5 Separation of the mother-child binomial (relationship with the mother and stimulation), 6 Time, frequency and previous experiences (frequency and time of hospitalization, previous hospitalization experience.), and 7 Anxiety of parents (fears and concerns of parents, overprotective attitudes of parents).

Graphic

Graphic N°1– Number of items per country.



Methodology

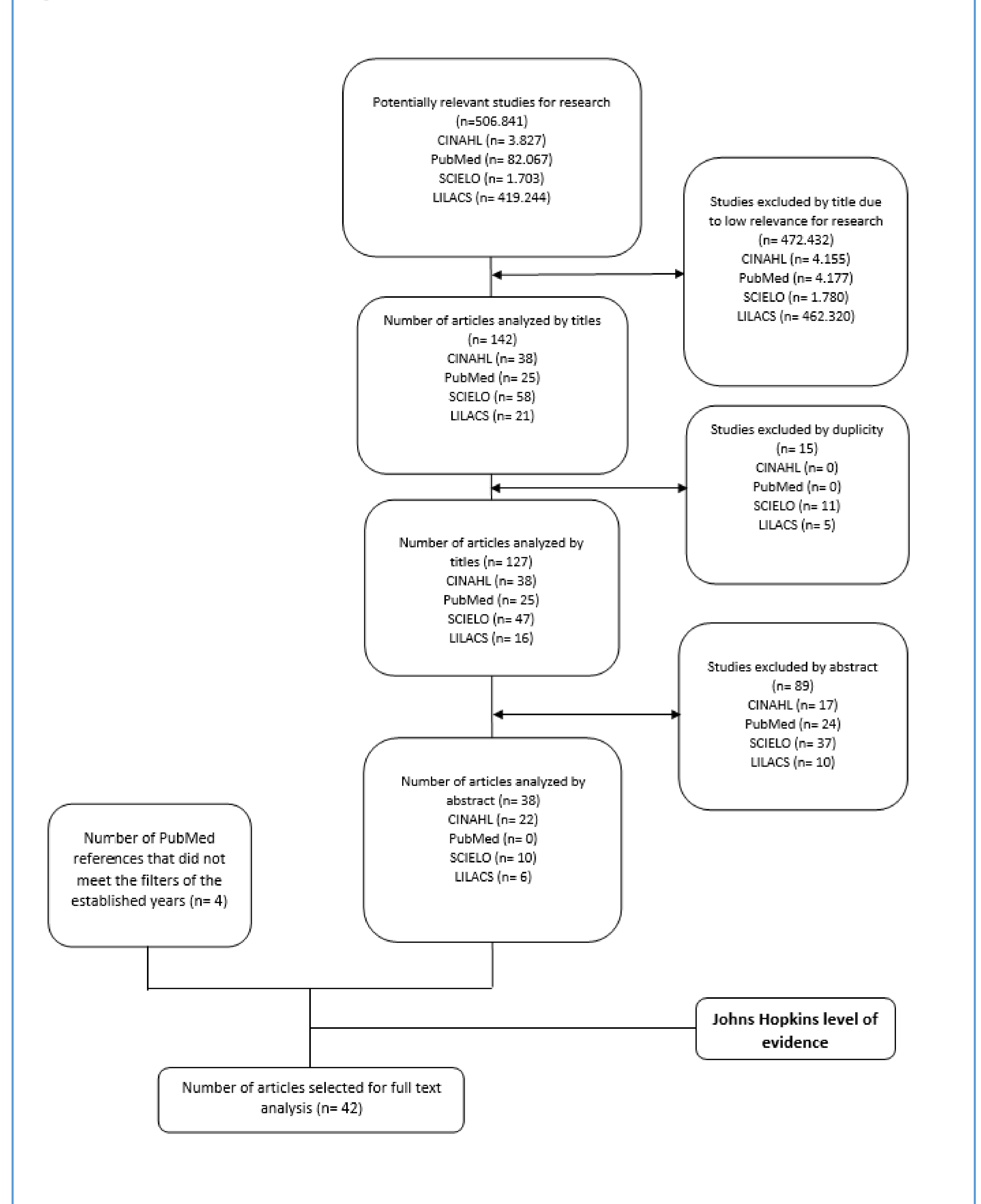
Methodology: A systematic review was carried out in the databases: EBSCO (CINAHL), SciELO, PubMed and Lilacs with the following search strategy: publications with abstract and full text, published between 1990 and 2018, in English and Spanish, using the descriptors with boolean operators AND, OR. The search equations were: [Hospitalism], [Hospitalism OR child hospitalization], [Hospitalism AND child], [Hospitalism AND child AND psychological well-being], [Hospitalism AND child AND psychological well-being AND pediatrics], [Hospitalism AND child AND psychological well-being AND pediatrics AND stress].

Inclusion criteria: Free access articles from UNAB platform. with level of evidence I, II and III; and quality A and B according to Hopkins.

Exclusion criteria: Opinion articles, thesis and essays, which correspond to quality level C of Hopkins. A total of 506,841 articles were found, of which 42 were selected for analysis, 50% of which correspond to Hopkins level I evidence for quality analysis of the review guidelines (Figure 1).

Figura

Fig. N°1– Flowchart for article selection.



Conclusions

Hospitalization is a stressful event that involves the biopsychosocial deterioration of the child causing a set of problems such as hospitalism. It is essential to generate future strategies that help prevent hospitalism, focus on children's strengths and well-being, while promoting their optimal development and minimizing the adverse effects of stressful situations or environments when promoting Child care and health. It is necessary, then, for the nursing professional to identify this syndrome and determine the factors that predispose it, in order to provide quality health care to pediatric patients. Perform the work led by the hospital management that is integrated and multidisciplinary with the health team to lessen its impact and optimize decision-making, in order to promote the association and communication between the treating teams, patients and parents based on evidence and clinical experiences.

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