

#### Transition times.

Supporting the child and adolescent's transitions in Pediatric condition

2<sup>nd</sup> S.I.P.Ped. International Conference

November 7 - 9, 2019

Palermo, Sicily ,Villa Magnisi, Ordine dei Medici Chirurghi e Odontoiatri









**2**nd International Meeting SIPP

7-9 Nov. 2019, Palermo Developmental transitions of children with congenital heart disease: from childhood to middle adulthood

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# Developmental challenges CONHD

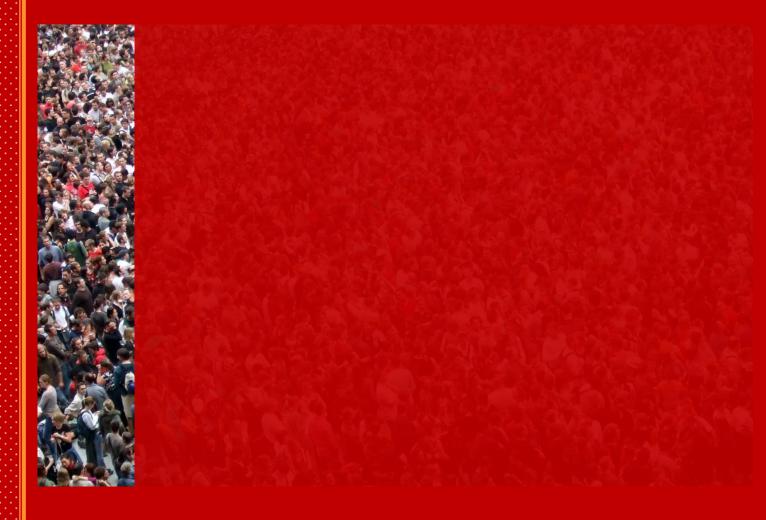
Developmental Tasks	Consequences ConHD
Infancy	
Attachment/ sense of trust	Hospitalization/life threatening surgery
Sensorimotor experiences	Restricted movements/exhausted
Deprived nurturing	Parental stress, grief Overprotection
Toddlerhood	
Develop autonomy	Dependency on parent
Locomotor/language skills	Limited opportunity
Sensorimotor/ Preoperational thought	Painful experiences Pampering/less limit setting

# Developmental challenges CONHD

Preschool	
Master self-care skills	Limited opportunities
Begin peer relationships	Play with younger kids
Sense of body image	Pain, "different"
Magical thinking	Guilt (I am punished)
School Age	
Sense of accomplishment	Limited opportunities : - school absences /gym - tired
Form peer relationships	
Concrete operations thinking	-misunderstanding limitations/ treatment

## Developmental challenges CONHD

#### **Adolescence** Personal /sexual identity Feeling different Less able to compete Autonomy Dependency on family; limitations job/career Limited opportunities Sexual relationships Fear rejection/scars Anticonception/heredity "Why me"? Future/life Abstract thinking expectancy Health care/Transition



**1990** 

# cohort 1 < 1980</pre>













## cohort 1 < 1980











## **Psychopathology**





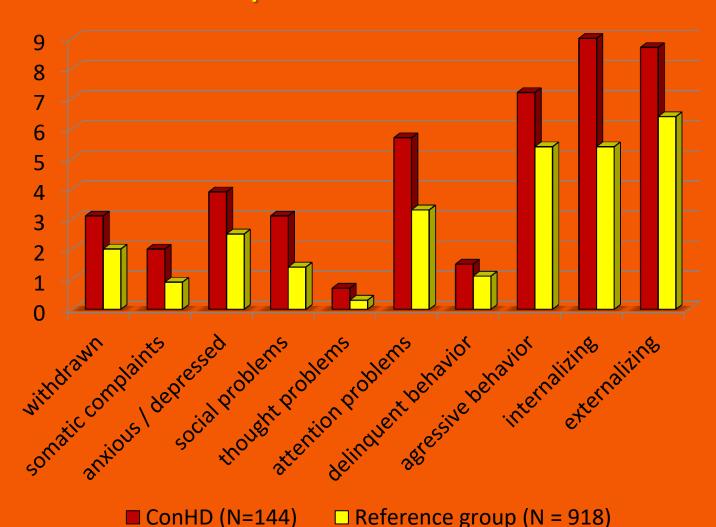




Norm 10%



# CBCL parent report – mean problemscores

















































## Cohort 2 > 1990











# cohort 2> 1990











# cohort 2> 1990



# cohort 2> 1990

## Original Article

### Psychosocial needs of children undergoing an invasive procedure for a CHD and their parents

Eveline M. Levert, Willem A. Helbing, Karolijn Dulfer, Ron T. van Domburg, Elisabeth M. W. J. Utens

Cardiology in the Young (2018), 28, 192–198 © Cambridge University Press, 2017 doi:10.1017/S1047951117001378

## Guidelines

Multidisciplinary family-centred psychosocial care for patients with CHD: consensus recommendations from the AEPC Psychosocial Working Group

Elisabeth M.W.J. Utens, 1,2,\* Edward Callus, 3,\* Eveline M. Levert, Katya De Groote, Frank Casey 5,6,‡

## Interventions: Preschool



## **CHIP-Family**

Van der Mheen et al., Utens, 2019

Cardiology in the Young

cambridge.org/cty

**Original Article** 

CHIP-Family intervention to improve the psychosocial well-being of young children with congenital heart disease and their families: results of a randomised controlled trial

## CHIP-Family for ConHDchildren (4-7 yrs) and families

(McCusker et al. 2012; van der Mheen, BMC Pediatr., 2018)



#### **Children** with CHD:

emotional, behavioral, school, cognitive, social, sport problems

(Karsdorp et al. 2007, Riehle-Colarusso et al. 2015, Spijkerboer et al. 2008, Duppen et al. 2013)

#### **Parents of children with CHD**

Parental functioning important mediator

(Casey et al. 2010; Bellinger et al. 2009)

† psychosocial problems

(McCusker et al. 20120)

## **CHIP-Family group: parents**

#### **Problem prevention therapy**

"my husband doesn't support me", "my child feels different", etc.

#### **General parenting skills**

discipline, communication, motivation...

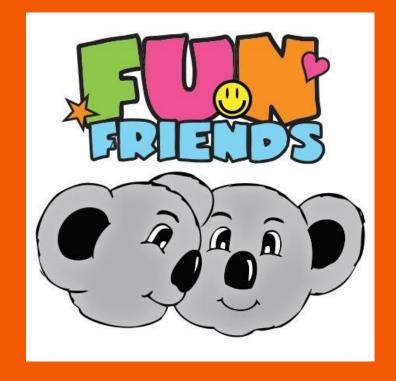
#### **Specific parenting skills**

school absence, medical interventions....

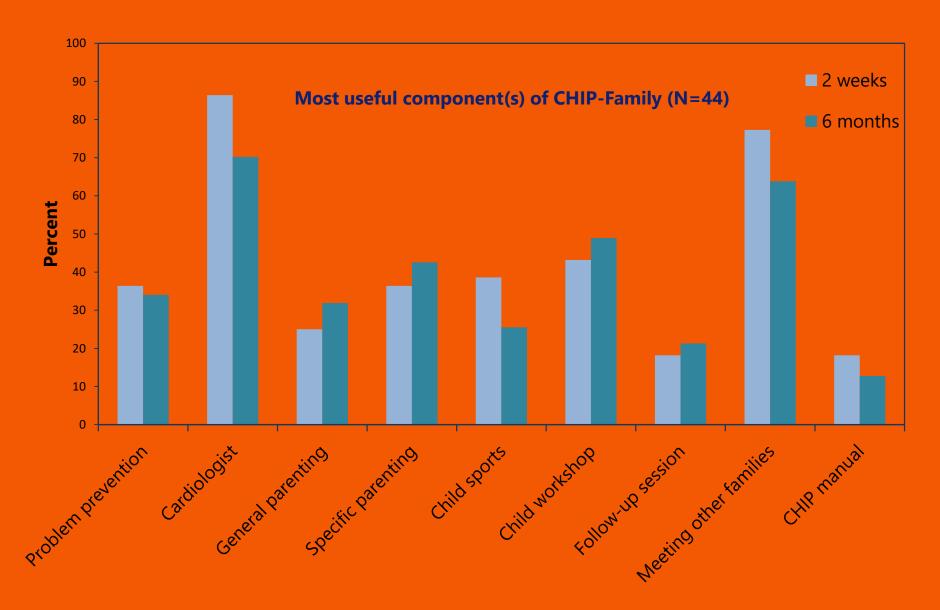
## **CHIP-Family group: 4-7 years**

- CBT Fun FRIENDS protocol Pahl & Barrett, 2010
- Thoughts feelings behavior



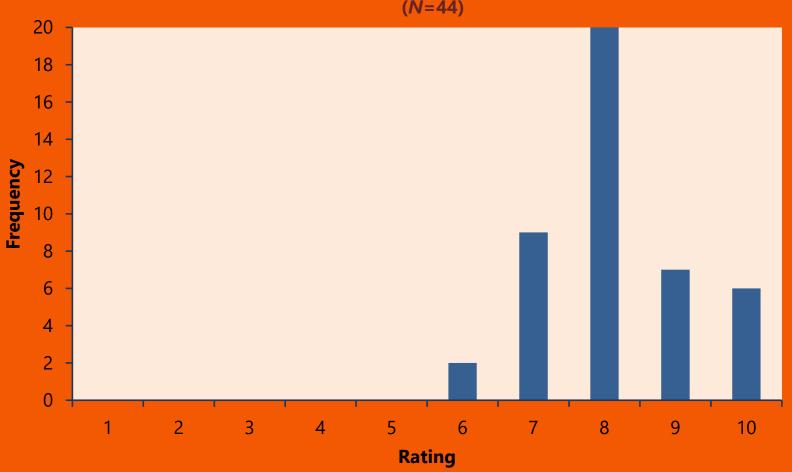


## **CHIP-Family:** social validity



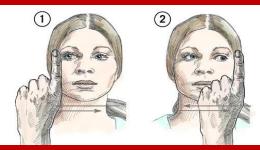
## CHIP-Family Mheen et al. Cardiol in the Young 2019

## Would you recommend CHIP-Family to other families? (N=44)



# Interventions: School





EUROPEAN JOURNAL OF PSYCHOTRAUMATOLOGY 2018, VOL. 9, 1536287 https://doi.org/10.1080/20008198.2018.1536287



PSYCHOTRAUMATOLOGY
NOTE: June of the Endownder's file Residence (PRESIDENCE)



STUDY PROTOCOL

**3** OPEN ACCESS



Eye movement desensitization and reprocessing (EMDR) in children and adolescents with subthreshold PTSD after medically related trauma: design of a randomized controlled trial

Meentken et al. 2018



Hospital admission/medical procedure (Schreier et al, 2005, Bronner et al., 2008)

Clinical PTSD → 10%

Subtreshold PTSD = elevated symptoms → 35 %!

underestimated  $\rightarrow$  functional impairment/distress!

(Ziegler et al, Pediatrics 2005; Carrion et al., JAACAP, 2012)

If untreated: anxiety/depression, long-term psychiatric morbidity, dropout from school/work, medical consumption ↑, adherence ↓, unfavorable medical outcomes (Stallard,2006; Cohen et al, 2004, Cart et al, 2012),

Secondary prevention. RCT: EMDR vs CAU, ConHD 6-12 yrs.



### EMDR was superior in reducing...



MEDICAL PHOBIA



**SLEEP PROBLEMS** 



**DEPRESSION** 



#### **Adolescence**

- T Tattoos, piercings and antibiotic prophylaxis
- E Education
- E Exercise
- N Need life long care
- A Access to care and insurance
- G General health
- **E** Employment
- R Relationships
- S Smoking, alcohol and drugs

MEF transition 2019



## Pediatric to Adult Care Transition Tools Congenital Heart Transition Self-Assessment for Pediatric Patients — Six Core Elements of Health Care Transition 2.0

Adapted from the Got Transition Initiative

Please fill out this form to help us see what you already know about your health, using health care and areas that you need to learn more about. If you need help completing this form, please let us know.

Today's D	ate (mm/d	d/yyyy):								
Name (La	Name (Last/First): Date of Birth (mm/dd/yyyy):									
Transitio	Transition and Self-Care Importance and Confidence									
On a scale	On a scale of 0 to 10, please circle the number that best describes how you feel right now									
Please rat	Please rate how confident you feel about taking charge of your heart health care									
0 (Not)	1	2	3	4	5	6	7	8	9	10 (Very)
Please rate how confident you feel moving to adult-focused heart care										
0 (Not)	1	2	3	4	5	6	7	8	9	10 (Very)

My Health			
		I need to learn	



Pediatric to Adult Care Transitions Tools Health Knowledge Assessment — Youth Patients with Congenital Heart Disease

My Health			
Please check the box that applies to you right now.	Yes, I know this	I need to learn more	Not applicable
I understand the long term potential issues associated with my heart condition			
I know why I should take my medications (what they are supposed to do)			
I know what cardiac symptoms require more urgent medical attention			
I know what my typical vital signs should be (heart rate, blood pressure, oxygen saturation) and I have a copy of my electrocardiogram (EKG)			
I wear a medical alert bracelet or tag to indicate my cardiac condition			
I know what kinds of physical activity (exercise) are safest and healthiest for me			
I know what kinds of food (diet) are safest and healthiest for me			
I know about medicines or supplements that could interfere with my heart medications			
I know if and when I should take antibiotics prior to dental procedures			
I know that I should talk to my heart doctor about traveling			
I know that I should talk to my heart doctor before I start having sex			
I understand the impact of high-risk behaviors (tobacco, alcohol, illicit drug use, tattoos, and unprotected sex) on my heart and overall health			
I know how my heart and cardiac care needs might change in the future			
I can explain my heart problem (congenital heart disease) to another person			



#### Pediatric to Adult Care Transitions Tools Medical Summary & Emergency Care Plan for Young Adults with Congenital Heart Disease

Date Completed:		Date Revised:		
Form completed by:				
Contact Information				
Name:		Nickname:		
DOB:		Preferred Language:		
Address:				
Cell #: Home #:		Best Time to Reach:		
Email:		Best Way to Reach:	Text Ph	none Email
Health Insurance Plan:		Group and ID #:		
Cardiologist (1):	Location:			Phone:
Cardiologist (2):	Location:		P	Phone:
Emergency Care Plan				
Emergency Contact:	Relationship:		Phor	ne:
Preferred Emergency Care Location:				
Procedural Antibiotics Recommended (Endocare		es □ No		
Common Emergent Presenting Problems	Suggested Tests		Treatment C	onsiderations
Special Considerations:				
Allergies				
Allergies	Reactions			
Diagnosis and Current Problems				
Problem	Details and Recommend	lations		
Primary Cardiac Diagnosis:				
Secondary Diagnoses:				
□ Pulmonary				
□ Renal				
□ Liver				
□ Neuro-developmental				
□ Genetic				
□ Contraception				
□ Hematologic/Anticoagulation				
Developerin				
□ Psychologic	1			

### Take home message

Development of evidence based psychosocial interventions!! Early prevention and intervention



# Development of evidence based effective interventions!!

### Early psychosocial prevention and intervention



**2**nd International Meeting SIPP

7-9 Nov. 2019, Palermo

## Thank you for your attention!

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