

Impact of Educational program on the management of chronic suppurative otitis media among children

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Abstract:

Background. Chronic suppurative otitis media (CSOM) remains one of the most common childhood chronic infectious diseases worldwide, affecting diverse racial and cultural groups in both developing and industrialized countries. Aim of the Study. This study aimed to assess the impact of educational program on the management of children with CSOM. Subjects and Methods. An experimental study design was used. This study included 100 children of both sexes of 2 years and less of age with CSOM. Those children were divided into 3 groups: group I: it involved 50 children with CSOM (naive) who received the designed educational program; control group: it involved 50 children who were under the traditional treatment and failed to respond; group II: those children in the control group were given the educational program and followed up in the same way as group I and considered as group II. Tools of the Study. Tool I is a structured questionnaire interview sheet for mothers. It consists of four parts: (1) personal and sociodemographic characteristics of child and (2) data about risk factors of otitis media (3) assessment of maternal practice about care of children with suppurative otitis medi (4) diagnostic criteria for suppurative otitis media. Tool II is the educational program: an educational program was developed by the researchers based on the knowledge and practices needs. This study was carried out through a period of 9 months starting from September 2013 to May 2014. The educational program was implemented for mothers of children with CSOM in the form of 5 scheduled sessions at the time of diagnosis, after one week, 1, 3, and 6 months. Results. There were significant differences between children who received the educational program and control group regarding the response to treatment after one and 3 months. The percentages of complete cure increased progressively 32%, 60%, and 84% after 1, 3, and 6 months in group I while they were 24%, 44%, and 64% in group II, respectively. Cure (dry perforation) was 64%, 36%, and 12% among children of group I after 1, 3, and 6 months while it was 64%, 44%, and 24% in group II, respectively. The percentages of compliance to the educational program improved with time in both groups: 44%, 64%, and 80% in group I and 32%, 48%, and 56% in group II after 1, 3, and 6 months, respectively. The percentages of cure were statistically significantly higher among children with complete compliance with the educational program in both groups in comparison to those with incomplete compliance (P =0.000 for both). Conclusions. From this study we can conclude that the majority of children with CSOM had one or more risk factors for occurrence of the disease; the educational program is effective for management of CSOM (whether cure or complete cure); the higher the compliance of mothers with the program the higher the response rate; regular followup and explanation of the importance of the program played an important role in the compliance with the program.

Keywords:

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