



### Items of interest to Health Visitors July 2019

If anyone would an in depth search of any topic related to health visiting please contact us  
[hantshealthcarelibrary@nhs.net](mailto:hantshealthcarelibrary@nhs.net)

Sources Searched CASPAR, CHIMAT, NHS Evidence, HDAS, SCIE, King's Fund  
All hyperlinks in the document were accessed 30<sup>th</sup> July 2019

#### **Accident Prevention: Child home accidents (Institute of Health Promotion and Education (IHPE))**

Unintentional injuries in and around the home are a leading cause of preventable death for children under five years and are a major cause of serious disability and ill health. There are evidence-based approaches available to prevent many unintentional injuries to children.

<https://ihpe.org.uk/wp-content/uploads/2019/06/Postion-statement-Child-Home-Accidents-24th-June-2019.pdf>

#### **Child Health: Asthma**

**NICE, the British Thoracic Society (BTS) and Scottish Intercollegiate Guideline Network (SIGN)** have announced that future UK-wide guidance for the diagnosis and management of chronic asthma in adults, young people and children will be produced jointly by the three organisations. The Guideline will support health professionals in making accurate diagnoses and providing effective treatments to control the condition and prevent acute asthma attacks.

<https://www.nice.org.uk/news/article/nice-british-thoracic-society-bts-and-scottish-intercollegiate-guidelines-network-sign-to-produce-joint-guideline-on-chronic-asthma-as-part-of-broader-asthma-pathway>

#### **Child Health: Newborn screening for rare conditions**

A report from the charity **Genetic Alliance** calls for better screening and more use of technology to improve the early identification of rare diseases.

<https://www.geneticalliance.org.uk/wp-content/uploads/2019/07/newborn-screening-patient-charter-for-member-endorsement.pdf>

#### **Government policy: Children's Funeral Fund for England**

This briefing paper from the **House of Commons Library** deals with the establishment of a fund that will pay the fees charged by burial and cremation authorities, and some associated expenses, in respect of the funeral in England of a child under the age of 18.

<https://researchbriefings.files.parliament.uk/documents/CBP-8610/CBP-8610.pdf>

#### **Government policy: Early Intervention**

This **House of Commons Library** briefing analyses early intervention policies aimed at parents and children from conception to age five, covering health, education, social development and financial benefits. This paper also looks at broader arguments around early intervention as a policy approach.

<https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7647>

**Government policy: A home-visiting programme for disadvantaged young children: final report for the feasibility study (Institute for Fiscal Studies July 2019)**

This study looked at the evidence on the factors that contribute to previous successful home-visiting programmes and examined local priorities and existing services to evaluate the need for a new early childhood intervention in England. It looks at how to measure the benefits of the intervention for children, families and the public purse.

[https://www.ifs.org.uk/uploads/R159\\_A\\_home-visiting\\_programme\\_for\\_disadvantaged\\_young\\_children.pdf](https://www.ifs.org.uk/uploads/R159_A_home-visiting_programme_for_disadvantaged_young_children.pdf)

**Mental Health: Pregnancy and Post-birth Wellbeing Plan.**

**Tommy's** have launched a digital version of the NICE-approved Pregnancy and Post-birth Wellbeing Plan. The new digital tool, created in partnership with the Institute of Health Visitors (IHV), the National Childbirth Trust (NCT), Netmums, Public Health England (PHE) and the Royal College of Midwives (RCM) is called: Your Baby's Mum: A wellbeing plan for pregnancy and post-birth. The resource, and accompanying Your Baby's Mum campaign, is designed to help all pregnant women to think and talk about their mental wellbeing in the pregnancy and post-birth period, and to plan early for support and self-care after the birth. The tool is suitable and available for all pregnant women and can be completed at any point in pregnancy. The tool will help pregnant women make a plan for their mental wellbeing and it will offer extra support to those who need it during pregnancy. It has a tailored route for women who have suffered a previous pregnancy loss or premature birth, which acknowledges the extra anxiety this can cause.

<https://www.tommys.org/our-organisation/about-us/charity-news/new-wellbeing-resource-pregnancy-and-post-birth>

**Nutrition: Commercial infant and baby food and drink: evidence review**

A report setting out the evidence for action on food and drink product ranges targeted at babies and young children, and PHE's advice to government.

<https://www.gov.uk/government/publications/commercial-infant-and-baby-food-and-drink-evidence-review>

**Nutrition: Ending inappropriate promotion of commercially available complementary foods for infants and young children between 6 and 36 months in Europe.**

In 2016, the World Health Assembly approved **WHO** guidance on ending the inappropriate promotion of foods for infants and young children through resolution WHA69.9. The aims of the guidance are to protect breastfeeding, prevent obesity and chronic diseases, promote a healthy diet, and ensure caregivers receive clear and accurate information on infant and young child feeding.

This discussion paper outlines the first steps in developing a nutrient profile model for commercially available complementary foods marketed as suitable for infants and young children (6–36 months).

[http://www.euro.who.int/\\_data/assets/pdf\\_file/0004/406453/Ending\\_Final\\_3June2019.pdf](http://www.euro.who.int/_data/assets/pdf_file/0004/406453/Ending_Final_3June2019.pdf)

**Nutrition: Health on the Shelf**

The **Royal Society for Public Health (RSPH)** and Slimming World have worked in partnership to research the impact that supermarkets are having on the UK's obesity epidemic. The aim is to raise awareness of how supermarkets can be part of a solution to support people to lead healthier lives through their marketing and sales tactics, and by encouraging customers to choose healthy food and drink purchases.

<https://www.rsph.org.uk/uploads/assets/uploaded/5ec3d502-2e94-47c0-ad1bbe1d4a74218c.pdf?>

**Staff Development: New website for general practice nurses**

Community nursing charity the Queen’s Nursing Institute (QNI) has launched a website for general practice nurses, which is describes as an online repository of educational and clinical resources.

<https://gpnen.org.uk/>

**Vaccination: 20 million children miss out on lifesaving measles, diphtheria and tetanus vaccines in 2018**

20 million children worldwide – more than 1 in 10 – missed lifesaving vaccines such as measles, diphtheria and tetanus in 2018, according to new data from **WHO and UNICEF**. Most unvaccinated children live in the poorest countries, and are disproportionately in fragile or conflict-affected states. It is thought that an outbreak of disease such as measles, points to communities that are missing vaccines due to access, costs or, in some places, complacency.

<https://www.unicef.org.uk/press-releases/20-million-children-miss-out-on-lifesaving-measles-diphtheria-and-tetanus-vaccines-in-2018/>

**Vaccination: 'Worry is contagious': the vaccine-hesitant parents putting children at risk**

An article from the **Guardian** that argues that, parents who are unsure about vaccination are one of the top 10 threats to global health this year, more so than committed anti-vaxxers. It asks what is behind this crisis of confidence.

<https://www.theguardian.com/society/2019/jul/13/vaccines-hesitant-parents-threat-to-global-health?>

**Journal News**

Register for an NHS OpenAthens account [at https://openathens.nice.org.uk/](https://openathens.nice.org.uk/) for online access to the latest issue of

**Journal of Health Visiting**

Volume: 7, Number: 7

And many other journals and online resources such as [BMJ Best Practice](#)

**Article abstracts that may be of interest**

if the full text is required please contact

<mailto:hantshealthcarelibrary@nhs.net>

**Clinical onset of atopic eczema: Results from two nationally representative British birth cohorts followed through mid-life**

Abuabara K.et al ; *The Journal of allergy and clinical immunology*; Jun 2019

Atopic eczema onset is described primarily in early childhood; the frequency and characteristics of adult-onset disease remain controversial. OBJECTIVE(S): To determine the proportion of individuals who report atopic eczema symptoms between birth and mid adulthood, and to examine demographic, immunologic, and genetic factors associated with period of symptom onset.

METHOD(S): We conducted a longitudinal study using data from two nationally representative community-based birth cohorts from the United Kingdom: the British Cohort Studies 1958 and 1970. Individuals were followed from birth through age 42-50. The primary outcome was the age period of self-reported atopic eczema symptom onset based on repeated measures of self-reported atopic eczema at each survey wave. RESULT(S): The annual period prevalence of atopic eczema ranged from 5-15% in two cohorts of over 17,000 participants each followed from birth through mid-age. There was no clear trend in prevalence by age, and among adults reporting active atopic eczema during a given year, only 38% had symptom onset reported in childhood. When compared with individuals whose eczema started in childhood, those with adult-onset disease were more likely to

be women, from Scotland or Northern England, of lower childhood socio-economic group, smokers in adulthood, and less likely to have a history of asthma. In a sub-analysis using data from the 1958 cohort only, genetic mutations previously associated with atopic eczema, including filaggrin null mutations, and allergen-specific IgE were more common among those with childhood-onset disease. CONCLUSION(S): Rates of self-reported atopic eczema remain high after childhood, and adult-onset atopic eczema has different risk factor associations than childhood-onset eczema.

### **Exploring health visiting professionals' evaluations of early parent-infant interactions**

Elmer, J. et al *Journal of Reproductive and Infant Psychology*; Jul 2019

Objective: To examine the accuracy of Health Visitors (HVs) evaluations of the quality of parent-infant interactions. Background: HVs have been identified as key professionals in the early identification of difficulties in parent-infant interactions. Method: A sample of 56 HVs, 4 Family Health Nurses (FHNs) and 14 Community Nursery Nurses (CNNs) recruited from two National Health Service (NHS) Trusts, viewed video footage of six early parent-infant interactions which had been categorised as 'sensitive', 'mixed', and 'problematic' using the CARE-Index. Participants evaluated the quality of the parent-infant interactions shown in these videos using the Parent-Infant Interaction Rating Questionnaire (PIIRQ). Results: On average, participants correctly rated the problematic videos as lowest in quality, the mixed as higher in quality than the problematic videos, and the sensitive videos as highest in quality. Interestingly, within the problematic category participants rated the 'unresponsive' pattern of interaction as significantly lower in quality than the 'controlling' interaction. Conclusions: Findings suggest participants were relatively accurate in their evaluations of parent-infant interactions. However, they indicate that participants were more likely to be concerned about unresponsive, as opposed to controlling, interactive behaviours. Recommendations for further research include exploration of potential differences in how health-visiting professionals evaluate particular patterns of parent-infant interactions.

### **'I don't think anybody explained to me how it works': Qualitative study exploring vaccination and primary health service access and uptake amongst Polish and Romanian communities in England**

Bell S. et al ; *BMJ Open*; Jul 2019; vol. 9 (no. 7)

This study explored vaccination attitudes and behaviours among Polish and Romanian communities, and related access to primary healthcare services. Design(s): A qualitative study using in-depth semistructured interviews with Polish and Romanian community members (CMs) and healthcare workers (HCWs) involved in vaccination in areas with large Polish and Romanian communities. CMs discussed their vaccination attitudes and their experiences of accessing vaccinations in England. HCWs shared their experiences in vaccinating Polish and Romanian communities. Setting(s): Recruitment focused on three geographical areas in England with large Polish and Romanian populations (in London, Lincolnshire and Berkshire). Participant(s): 20 Polish and 10 Romanian CMs, and 20 HCWs. Most CMs were mothers or pregnant women and were recruited from London or Lincolnshire. HCWs included practice nurses, health visitors and school nurses recruited from the targeted geographical areas. Result(s): Although most CMs reported vaccinating according to the UK schedule, obstacles to vaccination were highlighted. CMs experienced difficulties navigating and trusting the English primary healthcare system, and challenges in accessing credible vaccination information in Polish and Romanian. CM vaccination expectations, largely built on knowledge and experiences from Poland and Romania, were often unmet. This was driven by differences in vaccination scheduling and service provision in England, such as nurses delivering vaccines instead of doctors. CMs reported lower acceptance of the influenza vaccine, largely due to perceptions around the importance and efficacy of this vaccine. HCWs reported challenges translating and understanding vaccination histories, overcoming verbal communication barriers and ensuring vaccination schedule completeness among families travelling between England and Poland or Romania. Conclusion(s): This study identified vaccination uptake and delivery issues and

recommendations for improvement. HCWs should discuss health service expectations, highlight differences in vaccination scheduling and delivery between countries, and promote greater understanding of the English primary healthcare system in order to encourage vaccination in these communities.

**Lead-based paints and children's PVC toys are potential sources of domestic lead poisoning - A review**

Njati S.Y.& Maguta M.M. *Environmental Pollution*; Jun 2019 ; p. 1091-1105

Control of lead (Pb) both in paints and children's PVC toys is vital to safeguard mankind from this dangerous heavy metal. Lead (Pb) both in paints and children's Polyvinyl chloride (PVC) toys is a major public health concern which has attracted attention of the international community. Concentrations of Pb both in lead-based paints and children's PVC toys have been assessed through various studies across the globe. Therefore, the purpose of this article was to summarize the results reported in these studies and provide some comprehension on their implications to human health for law enforcement as well as for awareness raising to the general public. Highlights on identified gaps have been provided to pave ways for further research interventions in order to establish comprehensive information on the subject. Regardless of regulatory limits on the content of lead, both in paints and children's PVC toys existing in different countries in the world, some of the reviewed articles have revealed significant levels of lead in these two items far above the permissible limits. High lead levels in paints have been recorded in China (116,200 ppm), Cameroon (500,000 ppm), South Africa (189,000 ppm), Tanzania (120,862.1 ppm), Uganda (150,000 ppm), Thailand (505,716 ppm) and Brazil (170,258.4 ppm) just to mention a few. Lead poisoning cases in children have been reported in several countries including France, Morocco, South Africa and United States. Countries where high levels of lead in children's PVC toys have been recounted include; China (860,000 ppm), South Africa (145,000 ppm), United States (22,550 ppm), Thailand (4,486.11 ppm), Palestine (6,036 ppm) and India (2,104 ppm). Awareness raising among parents is vital to impart them with knowledge on the matter so that they can take strenuous measures to protect their children from lead poisoning emanating from playing with toys and paint dust. Law enforcement on phasing out lead-based paints and control of lead content in children's PVC toys worldwide is also highly recommended.

**Prevention and treatment of childhood and adolescent obesity: a systematic review of meta-analyses.**

Psaltopoulou, T. et al; *World journal of pediatrics* : WJP; Jul 2019

The goal of this systematic review is to synthesize the published meta-analyses assessing the role of nutritional, behavioral and physical activity factors/interventions on the prevention or treatment of pediatric and adolescent obesity. METHODS An online search was conducted in PubMed (end-of-search: September 30, 2015); English-language meta-analyses pooling observational and/or interventional studies examining weight-related indices on children and adolescents were included. RESULTS Sixty-six meta-analyses corresponding to more than 900,000 children and adolescents were retrieved. The majority of meta-analyses included interventional studies most of which referred to mixed or combined interventions, including components such as diet, physical activity and sedentary behavior reduction. Discrepancies between meta-analyses on observational and interventional studies were noted. Combined interventions including physical activity and nutritional modifications seemed to represent the most effective means for tackling childhood obesity. CONCLUSIONS Synthesis of interventional or observational evidence may yield discrepant results. The combination of enhanced physical activity and improved nutrition emerged as a promising intervention in the fight against childhood/adolescent obesity. However, further research is needed about the most effective multidimensional prevention strategy.

**Screen time and childhood overweight/obesity: A systematic review and meta-analysis.**

Fang K et al; *Child: care, health and development*; Jul 2019

**BACKGROUND:** Controlling childhood overweight/obesity would help early prevention on children from getting chronic noncommunicable diseases, exposing to screen for long periods may increase the risk of overweight/obesity due to lack of physical activity and tend to intake too much energy, and the relationship between screen time and overweight/obesity is inconsistent. Thus, the object of the present study was to estimate the relationship between screen time and overweight/obesity in children (<18 years) by systematically review prevalence studies. **METHODS:** We collected data from relevant studies published up to May 2019 using predefined inclusion/exclusion criteria. And all the literatures were searched in PubMed, ScienceDirect, Embase, and Web of Science. **RESULTS:** A total of 16 studies met the criteria and were included in the meta-analysis. When compared with the screen time <2 hr/day, an increased overweight/obesity risk among children was shown in the screen time  $\geq 2$  hr/day (OR = 1.67; 95% CI [1.48, 1.88],  $P < .0001$ ). The subgroup analysis showed a positive association between the different types of screen time and overweight/obesity among children. **CONCLUSION:** Based on our study, increasing screen time could be a risk factor for being overweight/obesity in children and adolescents.