

# [Epilepsy a common neurological disease nursing essay](https://assignbuster.com/epilepsy-a-common-neurological-disease-nursing-essay/)

Epilepsy as defined by Epilepsy Action Australia is, “ a disruption of the normal electrochemical activity of the brain that results in seizures. Under certain circumstances anyone can have a seizure”. (Epilepsy Foundation Victoria, 2011, http://www. epilepsy. org. au/about-epilepsy/understanding-epilepsy/what-epilepsy). Epilepsy a common neurological disease, although epilepsy cannot be cured it can be managed through medications. (Epilepsy Foundation Of Victoria, 2011) At 13 years of age Thomas is classified as an early adolescent, during this stage Thomas will go through a variety of changes in but not limited to, growth, cognition, identity, relationships (both with parents and peers), and psychosocial and psychos changes, (Hockenberry, M. J, Wilson, D, 2011). Epilepsy and or frequent hospitalisation can cause impact on these things as well as, his family, financial implications within the family, and have an effect on his siblings and parents relationships. These impacts can be managed through an array of health promotion strategies, support groups and education especially in the area of medications for Thomas. Although Thomas and his family are frequent visitors to the hospital, codes of conduct codes of ethics, and competency standards must always be followed in a professional manner by the nurse. (ANMC, code of ethics, 2008) (ANMC, code of conduct, 2008).

At the age of 13 Thomas is classified as an early adolescent. Development wise Thomas should be experiencing changes in physical, social, psychosocial, psychosexual and cognitive development. Physically Thomas will continue to see change in his growth, at the age of 14 is the fastest period of growth in males, during the ages of 10-18 years of age, the average Australian male will double his weight and grow to around 178cm tall, (Berman, A, Kozier, B, Erb, G. L, 2008), Cognitive development for Thomas will encompass Piaget’s formal operations stage, the key feature of this stage is that Thomas will be to think beyond the present and beyond the world of reality. This new way of thought requires things such as logic, organisation, and consistency (Berman, A, Kozier, B, Erb, G. L, 2008). Along with this Thomas will also have an increased capacity to absorb and use new information; this information can be used in decision making, communication with family and general interactions with those around them (Berman, A, Kozier, B, Erb, G. L, 2008). Socially Thomas should be spending more time with friends and peers rather than parents or family, by spending more time with friends and peers changes in behaviour, communication, lifestyle, risk factors and choices will made. Family life also play an important role in choice in the peer group to which Thomas will associate with, this choice in peer group may have either a positive or negative impact on the overall social behaviour of Thomas (Hockenberry, M. J, Wilson, D, 2011). At 13 Thomas should be able to communicate effectively, ask comprehensive questions and able to have a detailed conversation with the people around him (Goodacre, Slattery, Upton, 2008), although not at the legal age of consent, Thomas should be able to be involved in medical choices and aware of what is happening at the present time and in the future. According to Berman, A, Kozier, B, Erb, G. L, 2008, Volume 1, page 401, Erikson (1963), the psychosocial task of an adolescent is the establishment of identity. The establishment of one’s identity is formed by forming groups or ‘ cliques’ that are usually made up of people that are the same excluding, different, skin colour, background and religion just to name a few, as well as this Thomas will need to establish self concept, accepting both the personal strengths and weaknesses, (Berman, A, Kozier, B, Erb, G. L, 2008), (Hockenberry, M. J, Wilson, D, 2011) Thomas may experience difficulty in doing this due to the dramatic changes in body function and structure. A stage in psychosocial development is the development of autonomy, as defined by (Hockenberry, M. J, Wilson, D, 2011), pg. 747, ‘ becoming an autonomous, self-governing person is another of the fundamental psychosocial tasks of adolescence’. During this stage Thomas will go through stages of emotional, behavioural and cognitive autonomy, during the phase of the emotional component of autonomy, Thomas will gain an aspect of independence related to changes in close relationships. Throughout the phase of the behavioural component of autonomy Thomas will gain the ability to make decisions and follow through on them, and lastly during the cognitive of autonomy Thomas will gain a less of concrete thinking approach and will develop into thinking more abstractly. (Hockenberry, M. J, Wilson, D, 2011). In means of psychosexual development Thomas will be at the end of the fourth phase, latency , as Thomas is 13 years of age, he will be coming to the end of this phase, it is during this phase that Thomas may repress his sexual urges, and will associate with members of the same sex most of the time. (Berman, A, Kozier, B, Erb, G. L, 2008), Together these forms of development will shape Thomas into an individual member of society, these forms of development can and will be affected by various situations, for Thomas the main two that will show the greatest impact on his development are, frequent hospital visits and suffering from epilepsy.

Thomas’s epilepsy and frequent hospitalisations can impact these changes in development drastically. Although his development will suffer the effects so will his family life, including relationships, financial matters, impact on his siblings and will show strain in his school attendance. The areas of development that are more likely to be affected by Thomas’s frequent visits to hospital are physical, social, and cognitive development. Physical change and development is significantly influenced by the following, nutrition, medical care, illness, both physical and emotional environments, family size and the culture of the child. In the social aspect of his development, changes for this stage are shaped by the social environment to which the changes took place (Hockenberry, M. J, Wilson, D, 2011, page 752), environments such as family, peer groups, school, work and community and society all play a fundamental role in the social development of Thomas (Berman, A, Kozier, B, Erb, G. L, 2008). The potential impact to social development of Thomas can be seen in each of the environments. Peer groups play a large part in developing a child socially, most behaviours, communication and lifestyle choices are formed by the peers around them (Hockenberry, M. J, Wilson, D, 2011). For Thomas this will be impacted, due to frequent visits to the hospital the time spent with friends will decrease this leading to a decreased social life and poor social development may be seen, such as not being able to communicate effectively with peers his own age, and the use appropriate behaviours (Hockenberry, M. J, Wilson, D, 2011), . Although peer groups are fundamental for social development they can also play an important role in health promotion (Berman, A, Kozier, B, Erb, G. L, 2008). At the age of 13 Thomas’s cognitive development is based around Piaget’s formal operations stage of cognitive development (Berman, A, Kozier, B, Erb, G. L, 2008), based on abstract thinking and absorb information to use later on, impact can be seen by not being interact or socialize with peers, thus creating a decreased ability to perform the tasks such as abstract thinking, this not only showing an impact in Thomas’s cognitive development but will also show in his social and communication ways as well. (Berman, A, Kozier, B, Erb, G. L, 2008) As well as cognitive impacting communication areas such as extensive periods away from school, being around people you would not normally associate with; can all show signs of harbouring communication for Thomas. School attendances will not only cause a noticeable change with communication but also education will suffer; self concept and worth will also decrease due to lack of time spent at school. As mentioned above peer groups play an extremely important role in the communication methods of a person of Thomas’s age. (Hockenberry, M. J, Wilson, D, 2011), School is the one place where most children interact with the group of friends; this is where they learn the acceptable methods of communication, lifestyle choices, behaviours including risk taking. (Goodacre, Slattery, Upton, 2008), Not only is school important for social and educational means for Thomas it is also the place he will learn who he is, developing a sense of self, and working toward this. (Goodacre, Slattery, Upton, 2008),

Not only will Thomas alone be affected by the recurrent hospital visits, things such as family including relationships within it, siblings, and financial matters may also start to see an impact occurring from this. For parents having a child with a serious illness can create mixed emotions such as, a feeling of helplessness, distressed, worry, anger and apprehensive (AWCH, 2011). These feelings are likely to become escalated when having to deal with multiple hospital admissions, particularly that of a recent ICU stay. For Thomas’s parents the strain of hospitals and epilepsy has caused some issues, these are work, relationships and still trying to give attention to their daughter Lucy. Due to the number of admissions Thomas has had since being diagnosed at 2 and ½ his mum has stopped working, this creating more pressure on Thomas’s father to bring home a satisfactory wage to cover expenses including that of hospital trips and medications, but as the general means of living as well. Lucy is 5 years of age and requires a far amount of attention from both mum and dad and Thomas, to insure that Lucy grows up happy and reaches all her milestones on time, (Goodacre, Slattery, Upton, 2008). due to the amount of time taken up with medical admissions and doctor visits, Lucy is sent to day care or placed in the care of baby sitters, a potential for impact on this is no sense of routine which may affect Lucy in other ways such as development. As a lot of time is spent at the hospital with Thomas his parents are rarely together, this lessening the time that they can spend working and fulfilling the needs of their own relationship, placing strain on their relationship. (Hockenberry, M. J, Wilson, D, 2011)

Although there are a lot of impacts on Thomas’s development, family life, his little sister Lucy, school and communication, if not all of these impacts can be reduced by a variety of health promotion strategies, (Hockenberry, M. J, Wilson, D, 2011). The main reason Thomas is so frequently admitted to the hospital is because of poor seizure management, the most recent and serious was after suffering a seizure in the bath and nearly drowning. The Royal Children’s Hospital in Melbourne offers a program called ‘ the children’s epilepsy program’ the aim of the program is to raise awareness, support, provide up to date knowledge and information to parents, care givers, teachers and family (RCH, Children’s epilepsy program, 2010),. The epilepsy foundation of Victoria as made a seizure management plan which is online, as Thomas is old enough and wants to be involved in his medical choices he could do this plan with a parent, this fixing the reoccurring issue of poor seizure management which results in numerous hospital visits. The epilepsy foundation of Victoria also have a section called ‘ epilepsy and your lifestyle?’ which then has sections for different ages, there is one specifically for adolescents that is perfect for Thomas, it goes through medications, triggers and the stigma associated with the disease, along with both of these useful tools the foundation also offer respite camps, for the whole family, this would be perfect for Thomas and his family. (Epilepsy foundation of Victoria 2011). Along with these forms of health promotion, prior to hospital discharge referrals should be made to an epilepsy educator (if available) where they can help management of seizures and help Thomas become compliant with his medications, social worker to give guidance and help with the impact on the family life due to Thomas’s illness and frequent admissions, if any community groups for parents that have a child who suffers and disease, to gain insight and guidance and help on how to manage not only the child but keeping the family unit running.

Although Thomas’s family is very familiar to the nurse, professional boundaries and professional standards must be kept, along with code of conduct and ethics as well (ANMC, 2008). In the case of Thomas, the role the nurse will play not only for the required treatment and nursing care of Thomas but also has to be there for the family, provide support and guidance in areas, support in the forms of health promotion, and strategies to help Thomas manage his epilepsy. All of these things must be done in a professional matter that abides by codes of conduct and ethics. Professional issues that may arise are things such as mandatory reporting of frequent hospital visits, home life being not compliant with medications and the possibility of the issue about Thomas not being supervised where needed. (ANMC, 2008). Nurse becoming too familiar and not keeping that professional boundary with the family, this can severely impact the care given, and cause a breach in code of ethics and conduct set by the Australian Nursing and midwifery Council. (ANMC, 2008)

In summary, through a variety of support and health promotion measures, Thomas and his family will be able to overcome the issues that have impacted them through the frequent hospitalisation and Thomas’s epilepsy, family, all aspects of Thomas’s development (physical, social, psychosocial, psychosexual, cognitive), relationships and schooling. Support services, groups and education, will enable Thomas to be able to become compliant with his medication this hopefully leading to a lesser number of hospital admissions and on a less frequent basis. For the nurse maintaining professional and ethical standards are a must as well as following the codes of conduct, it is important that the professional boundaries are maintained and aren’t crossed. This leading to safe nursing care and a good outcome for Thomas and his family.

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