





A Nurse-led Parental Eczema Education Programme for Chinese Parents of Children with Eczema: A Randomised Controlled Trial

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Rationale:

What is Eczema?

- Chronic skin disorder.
- Not infectious but flare up repeatedly, ? Incurable.
- -Eczema is estimated to be affecting more than 160,000 children (from age 0 to 14), 30% of Hong Kong children.

Methods:

A Summary of the Evaluation of the PEE Programme

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Key project materials

Educational booklet (67 pages)	Demonstration videos x2 (10 minutes)	Group sharing (through online platform)
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A nurse-led Parental Eczema Education is the way out of childhood eczema in Hong Kong





Take a picture to download the abstract









Take a picture to download the measuring tools

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Nothing to declare

Results:

Comparison of demographic data between the control and intervention groups (n=136)

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Characteristics	Control (n=68)	Intervention (n=68)	P-value
Parent participants' characteristics			
Age (years) [age range from 26 to 50 years]	37.7±4.6	37.6 ± 5.0	†0.957
Relationship			
Father	4 (2.9)	3 (2.2)	#0.698
Mother	64 (47.1)	65 (47.8)	
Ethnicity			
Hong Kong, China	54 (39.7)	53 (39.0)	#0.834
Mainland China	14 (10.3)	15 (11.0)	
Educational level			
≤ Secondary school	24 (17.6)	36 (26.5)	#0.038
> Secondary school	44 (32.4)	32 (23.5)	
Occupation			
With Full-time job	38 (27.9)	36 (26.5)	#0.731
Without Full-time job	30 (22.1)	32 (23.5)	
Child participants' characteristics			
Age (months) [age range from 5 months to 143 months]	73.5 ± 40.3	65.9 ± 44.0	†0.294
Gender			
Male	37 (27.2)	41 (30.1)	#0.488
Female	31 (22.8)	27 (19.9)	
Age of onset (months) [age range from 0.5 month to 108 months]	11.9±19.4	8.3 ± 12.4	†0.195
Severity category by SCORAD			
Moderate (25-50)	47 (34.6)	33 (24.3)	#0.015
Severe (>50)	21 (15.4)	35 (25.7)	
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Results expressed in number (percentage) or mean (standard deviation). ** Analysed by †independent t test or #Pearson χ^2 test as appropriate.

Generalised estimating equation (GEE) models for the comparison of the disease severity, parental self-efficacy, treatment adherence and quality of life of family members across time between the control and intervention groups

	B (95% CI)	p-value
Total score of SCORAD		
Group	9.05 (4.02, 14.07)	< 0.001
T1	-3.51 (-6.19, -0.83)	0.010
Group*T1	-16.98 (-21.04 , -12.92)	< 0.001

	B (95% CI)	p-value
Skin hydration		
Group	-2.08 (-5.47, 1.31)	0.229
T1	-1.59 (-3.26, 0.09)	0.064
Group*T1	7.50 (4.85, 10.16)	< 0.001
TEWL		
Group	1.64 (-0.11, 3.17)	0.035
T1	-0.30 (-1.13, 0.54)	0.487
Group*T1	-1.57 (-3.11, -0.04)	0.045
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Extra doctor's		

Extra doctor's		
consultation		
Group	0.44(0.10, 0.77)	0.011
T1	-0.32 (-0.54, -0.10)	0.004
Group*T1	-0.56 (-0.90, -0.21)	0.001

	B (95% CI)	p-varue
Total score of C-PASECI		
Group	-4.03 (-13.75, 5.69)	0.416
T1	3.19 (-0.71, 7.08)	0.109
Group*T1	29.39 (22.64, 36.14)	< 0.001

	B (95% CI)	p-value
Total score of C-PETS		
Group	0.86 (-1.30, 3.03)	0.436
T1	-0.66 (-1.58, 0.26)	0.162
Group*T1	-4.93 (-6.51, -3.35)	< 0.001
	B (95% CI)	p-value
Total score of C-FDLQI		
Group	4.11 (2.47, 5.76)	< 0.001
T1	-0.82 (-1.46, -0.18)	0.012
Group*T1	-3.55 (-4.56, -2.54)	< 0.001

Only the model estimates of regression coefficients (B) of the dummy variables for the group with 95% confidence interval (CI) [Group: 0=Control; 1=Intervention], time points [T0=baseline and T1=after intervention]; time points and group interaction terms (Group*T0 and Group*T1) are shown for the GEE model.

C-FDLQI= Family Dermatology Life Quality Index in Chinese version; C-PASECI = Parental Self-Efficacy with Eczema Care Index in Chinese version; C-PETS= Chinese version of the Problematic Experiences of Therapy Scale version; GEE= generalised estimating equation; SCORAD=SCORing Atopic Dermatitis; TEWL=Trans-epidermal water loss

Conclusions:

Over 90% of the parents were satisfied with the programme. The study supports that a nurse-led parental education programme that provided evidence-based information and encouraged peer support could improve health outcomes in children with eczema and their parents.