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In This Issue:

- The Brain Tumor Foundation of Canada:
The role of facilitators for its support groups.....10**
- Multiple sclerosis in childhood:
Understanding and caring for
children with an “adult” disease15**
- The context, content and consequences
of mothering a child with disabilities.....22**
- What to do about flat heads: Preventing
and treating positional occipital flattening.....29**



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**Canadian Association of Neuroscience Nurses
Association canadienne des infirmières et infirmiers
en sciences neurologiques**



ABSTRACTS**The Brain Tumour Foundation of Canada: The role of facilitators for its support groups**

By Kathleen M. Ellis,

Executive Director, BTFC

The mission of the Brain Tumour Foundation of Canada is to fund brain tumour research, to provide patient and family support services, and to educate the public. The focus of this paper is on the role of support groups. Support groups are an important resource to support individuals with brain tumours and their families. There is an ongoing need for qualified professionals to act as facilitators for these groups. Neuroscience nurses are uniquely qualified for this role.

Multiple sclerosis in childhood: Understanding and caring for children with an “adult” disease

By Jennifer R. Boyd and Lynn J. MacMillan

Multiple sclerosis (MS) is rare in childhood but may occur more frequently than originally believed. In light of the complex nature of MS, the expanding availability of new MS treatments, and the developmental needs of pediatric patients, multidisciplinary care of pediatric patients with MS is a necessity. Our review of MS in childhood aims to increase the awareness of neuroscience nurses about MS in children and adolescents, and to expand the knowledge of pediatric nurses concerning this “adult” disease. Our experience in developing a multidisciplinary pediatric MS clinic that addresses both health and developmental needs of children with MS is presented and discussed. The nurse’s role in the care of these children and their families through assessment, support, education, advocacy, referral and coordination of care is emphasized.

The context, content and consequences of mothering a child with disabilities

By Judy Chisholm

Due to recent advances in biomedical science and technology, infants and children with complex medical needs and disabling conditions are surviving and being cared for at home more than ever before. Sociocultural influences and economic policies place mothers in the home as primary caregivers of children. Their caregiving work is largely invisible. The information provided in this paper is intended to make the work of mothering a child with disabilities more visible while alerting nurses to the impact of this trend on mothers. Strategies to minimize the negative consequences are included.

What to do about flat heads: Preventing and treating positional occipital flattening

By Susan Neufeld and Stephanie Birkett

Across Canada there has been an increasing incidence of positional occipital flattening. This increase appears to be related to the recent change in infant sleep position to supine. In this paper, two patterns of positional occipital

flattening, positional plagiocephaly and positional brachycephaly, are outlined. While there is no evidence of long-term developmental or neurological problems that result from positional occipital flattening, the infant's appearance can be distressing to parents who will then seek treatment. Prevention of positional occipital flattening requires a community approach with timely screening and early intervention should the infant's skull appear flat. Treatment involves repositioning the infant coupled with physiotherapy if there is neck muscle involvement. Should repositioning alone be ineffective, a helmet or headband program may be implemented. Neuroscience nurses can work in partnership with the community to ensure prevention strategies are implemented and timely interventions initiated.