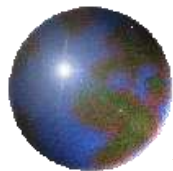




*ΠΡΟΛΗΠΤΙΚΗ ΠΑΙΔΙΑΤΡΙΚΗ ΣΤΗΝ
ΚΟΙΝΟΤΗΤΑ:
ΔΕΝ ΕΙΝΑΙ ΜΟΝΟ ΟΙ
ΕΜΒΟΛΙΑΣΜΟΙ*

Καραγκιόζογλου-Λαμπούδη Θωμάη
Παιδογαστρεντερολόγος
Καθηγήτρια Κλινικής Διατροφής, Τμήμα Διατροφής/Διαιτολογίας
ΑΤΕΙΘ



Έναρξη
νόσου

Διάγνωση

Μη νόσος

Ασυμπτωματική Νόσος

Κλινική διαδρομή

Πρωτογενής

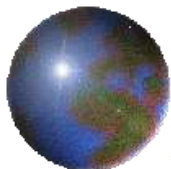
Δευτερογενής

Τριτογενής

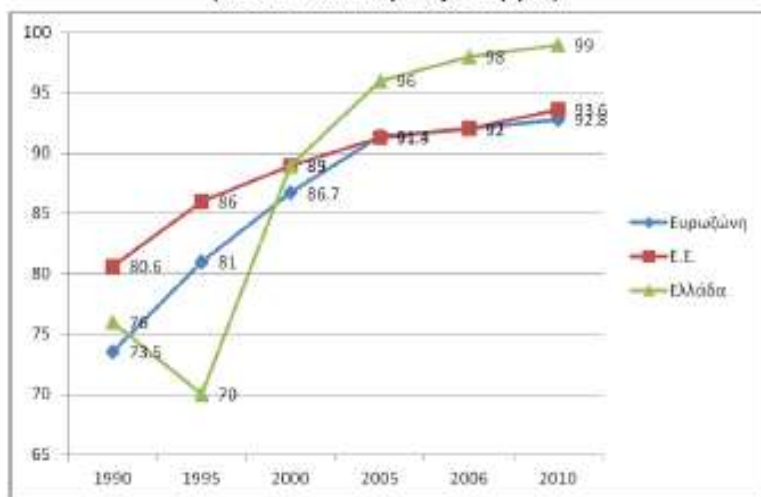
Παράγοντες
κινδύνου

Έγκαιρη διάγνωση
& θεραπεία

Μείωση επιπλοκών-
αναπηριών

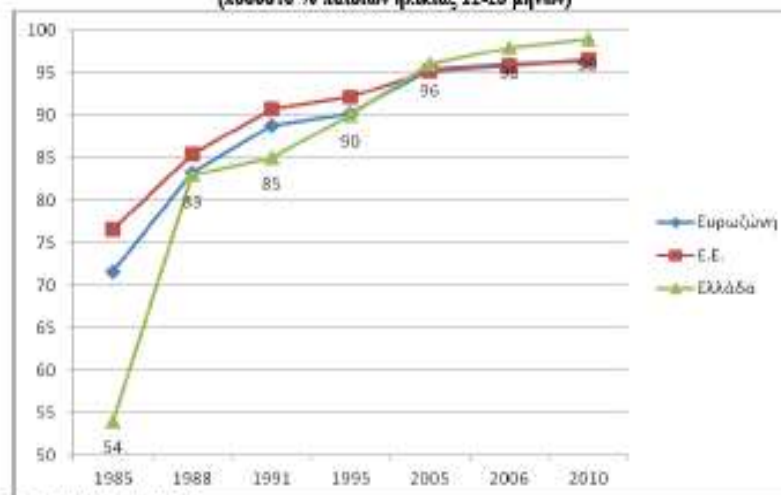


Ανοσοποίηση (εμβολιασμός) για Παρά
(ποσοστό % παιδιών ηλικίας 12-23 μηνών)

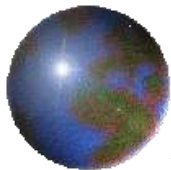


Πηγή: World Bank, 2012⁸⁸

Ανοσοποίηση (εμβολιασμός⁸⁶) για διφθερίτιδα, τέτανο, κοκκύτη (DPT)
(ποσοστό % παιδιών ηλικίας 12-23 μηνών)

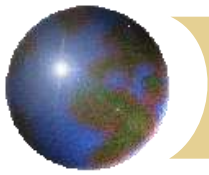


Πηγή: World Bank (2012)⁸⁹



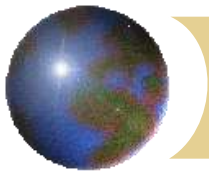
Εθελοντική προσφορά





Προληπτικός έλεγχος

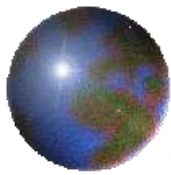
- ✚ Η εκπαίδευση των παιδιάτρων ανταποκρίνεται στις ανάγκες
- ✚ Επιτυχής ο προληπτικός έλεγχος των νεογνών



Προγράμματα προληπτικών ελέγχων

Περιοδικός έλεγχος

- Ιστορικό
- Αδρός αναπτυξιολογικός έλεγχος
- Προληπτικός έλεγχος διαλογής
- Έλεγχος κάλυψη αναγκών
- Βιτ D φθορίωση



Προληπτικός Έλεγχος διαλογής

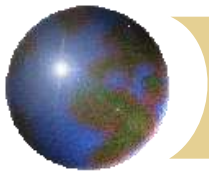
Table 1. Screening Recommendations for School-aged Children and Adolescents

Screening test	USPSTF	AAP
Depression	Recommends for patients 12 to 18 years of age Insufficient evidence to give recommendation for patients seven to 11 years of age ⁸	Annual psychosocial/behavioral assessment ³
Dyslipidemia	Insufficient evidence to give recommendation ⁹	Assess risk at six and eight years of age, and annually beginning at 10 years of age ³
Hearing	No recommendation given beyond newborn period	Assess at five, six, eight, and 10 years of age using audiometry ³
Hypertension	Insufficient evidence to give recommendation ¹⁰	Annually beginning at three years of age ³
Obesity (with counseling)	Recommends in children six years or older ¹¹	Annually ³
Scoliosis	Recommends against ¹²	Not recommended ³
Testicular examination	Recommends against ¹³	Annually beginning at 11 years of age ³
Vision	No recommendation given beyond four years of age	Assess at five, six, eight, 10, and 12 years of age using an age-appropriate visual acuity test (e.g., Snellen chart) ³

NOTE: The AAFP endorses the above USPSTF recommendations. All AAFP clinical recommendations are available at <http://www.aafp.org/online/en/home/clinical/exam.html>.

AAFP = American Academy of Family Physicians; AAP = American Academy of Pediatrics; USPSTF = U.S. Preventive Services Task Force.

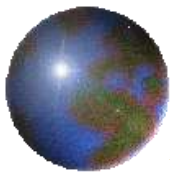
Information from references 3, and 8 through 13.



μεταξύ των λιγότερο προνομιούχων

Προγράμματα προληπτικών ελέγχων
με βοήθεια **ιατρών** και **μη ιατρών** εθελοντών
(άλλοι επαγγελματίες υγείας, εκπαιδευτικοί,
γονείς, μέλη συλλόγων σωματείων)

- μέχρι τώρα αναπτύχθηκαν στη χώρα μας κυρίως για ενήλικες,
- ✚ διεθνώς καλύπτουν αντίστοιχες ανάγκες στον παιδικό πληθυσμό εδώ και δεκαετίες.



Οφθαλμολογικός έλεγχος διαλογής

about:bl... Project... Tenn... X +

http://www.childrenshospital.org/service

WILLIAMS GARELL JR. CHILDREN'S HOSPITAL AT VANDERBILT

Home / A-Z Services / Tennessee Lions Eye Center

Tennessee Lions Eye Center

The Tennessee Lions Eye Center at the [Vanderbilt Eye Institute](#) offers general and specialty eye care for children from birth through 18 years. We know that children — and their eyes — have special needs when it comes to medical care.

In Children's Hospital, we have state-of-the-art operating rooms dedicated to eye patients. These rooms are staffed by pediatric specialists and nurses trained in eye care.

The Eye Center operates an outreach program that provides [free vision screening](#) to identify young children with eye problems. With the volunteer efforts of Lions Club members across Tennessee, we screen more than 30,000 pre-school children each year.

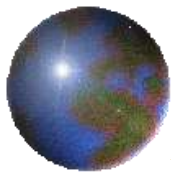
Children who do not have other health problems should have a vision screening at their annual physical. Other screenings may occur in day care or pre-school. If your child is referred from a screening, a doctor experienced in treating children's eyes should evaluate him or her.

Miracle Stories: Reagan Butler

Visit this section for ways to help you and your child prepare for surgery.

Eye Care and Children

Learn more about routine eye care as well as diseases of



Εθελοντισμός στην κοινότητα

Doernbecher residents provide free health sc...

**DOERNBECHER CHILDREN'S HOSPITAL**
Oregon Health & Science University

Healthy Families

Blog Home | About Doernbecher | Blog authors

Search This Blog

Doernbecher residents provide free health screenings to children in low-income families

As part of our training curriculum, pediatric residents at OHSU Doernbecher Children's Hospital choose a special interest group (SIG) in which to participate. These groups allow us the opportunity to pursue other interests that may fall outside the everyday responsibilities of residency.

Last month our global health SIG held a health fair for the **Neighborhood House Early Head Start program**. Neighborhood House, a nonprofit social service organization, provides supportive services to more than 18,000 low-income families in the greater Portland area.

This event marks a great collaboration with Neighborhood House, OHSU and other area services and nonprofit organizations. Volunteers comprising general pediatricians, pediatric dentists, medical students, nurses and other volunteer organizations provided free health and dental screenings as well as lead screening to about 30 children.

With the help of the **OHSU Doernbecher Tom Sargent Children's Safety Center**, we were able to arrange car seat installation appointments as well as offer valuable education regarding safety measures aimed at preventing childhood injuries.

In addition, we were able to provide each child with an age-appropriate book thanks to the **Reach Out and Read program** and local donations. Our medical student volunteers read to children waiting for their appointments and met with parents to discuss the importance of early literacy.

This is our second year partnering with Neighborhood House, and to date, we have provided health screenings and secure important follow-up for more than 80 children. While many of these children and families are assigned medical providers, obstacles to access, such as transportation limitations and language barriers, prevent many children from seeking regular health screenings.

As we move forward, our SIG hopes to broaden our partnership with Neighborhood House, providing more preventive health education and help to reduce some of the barriers impeding the families from establishing a regular medical home.

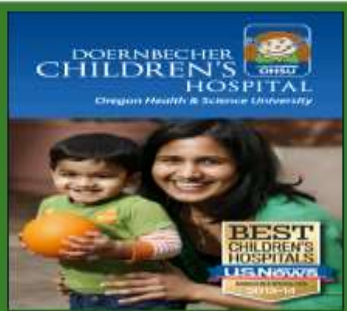
Jeffrey Meyrowitz, M.D.
Third-Year Resident in Pediatrics
OHSU Doernbecher Children's Hospital



OHSU Doernbecher residents provide free health screenings



Jeffrey Meyrowitz, M.D., third-year resident in pediatrics, OHSU Doernbecher Children's Hospital



DOERNBECHER CHILDREN'S HOSPITAL
Oregon Health & Science University

BEST CHILDREN'S HOSPITALS
US NEWS & WORLD REPORT

Doernbecher Children's Hospital

[READ MORE](#)

Doernbecher Resources

Contact Doernbecher:
Find a Doernbecher Doctor
Make a Gift
Visit our web site: Doernbecher.com

Follow Doernbecher

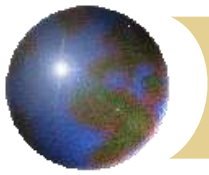
[Follow us on Facebook](#)
[Follow us on Pinterest](#)
[Follow us on Twitter](#)
[Follow us on YouTube](#)

Recent Posts

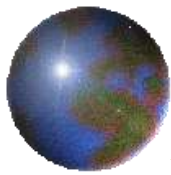
Doernbecher Freestyle fan Favorite No. 3 to be released Aug. 17
Doernbecher Freestyle fan Favorite No. 5 to be released Aug. 3
Doernbecher sees increase in injuries from teen texting and driving

[MORE POSTS](#)

Recent Comments



- ✚ Εργαλεία διαλογής (screening tools) εύκολα στη χρήση και την αξιολόγηση από μη ιατρικό προσωπικό.
- ✚ Κάλυψη αναγκών καταγραφής προετοιμασίας και επικοινωνίας



Προληπτικός Έλεγχος διαλογής

Table 1. Screening Recommendations for School-aged Children and Adolescents

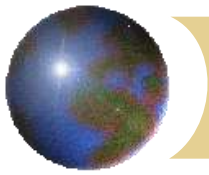
Screening test	USPSTF	AAP
Depression	Recommends for patients 12 to 18 years of age Insufficient evidence to give recommendation for patients seven to 11 years of age ⁸	Annual psychosocial/behavioral assessment ³
Dyslipidemia	Insufficient evidence to give recommendation ⁹	Assess risk at six and eight years of age, and annually beginning at 10 years of age ³
Hearing	No recommendation given beyond newborn period	Assess at five, six, eight, and 10 years of age using audiometry ³
Hypertension	Insufficient evidence to give recommendation ¹⁰	Annually beginning at three years of age ³
Obesity (with counseling)	Recommends in children six years or older ¹¹	Annually ³
Scoliosis	Recommends against ¹²	Not recommended ³
Testicular examination	Recommends against ¹³	Annually beginning at 11 years of age ³
Vision	No recommendation given beyond four years of age	Assess at five, six, eight, 10, and 12 years of age using an age-appropriate visual acuity test (e.g., Snellen chart) ³

NOTE: The AAFP endorses the above USPSTF recommendations. All AAFP clinical recommendations are available at <http://www.aafp.org/online/en/home/clinical/exam.html>.

AAFP = American Academy of Family Physicians; AAP = American Academy of Pediatrics; USPSTF = U.S. Preventive Services Task Force.

Information from references 3, and 8 through 13.

Riley M afp 2011



Ο ρόλος του παιδιάτρου

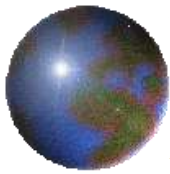
- ✚ να οργανώσει
- ✚ να εκπαιδεύσει
- ✚ να επιβλέψει ομάδες εθελοντών

Προκειμένου να τηρούνται πρότυπα

- ✚ ασφάλειας,
- ✚ αξιοπιστίας,
- ✚ καταγραφής
- ✚ εμπιστευτικότητας όπως προβλέπεται για κάθε ιατρική πράξη.

Η ανάδειξη χορηγών των προγραμμάτων, όπου χρειάζονται, μπορεί ν'αποτελεί μια πρόσθετη φροντίδα του.

Επιπλέον ανάλογα με τα αποτελέσματα του προσυμπτωματικού ελέγχου ο παιδίατρος θα μπορούσε να δρομολογεί την οριστική διάγνωση (ενημέρωση σχετικά με τις επιλογές , παραπομπή σε διαγνωστικά κέντρα).



Hindawi Publishing Corporation
Journal of Obesity
Volume 2013, Article ID 732579, 7 pages
<http://dx.doi.org/10.1155/2013/732579>

Clinical Study

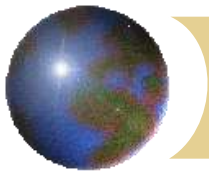
Individual-, Family-, Community-, and Policy-Level Impact of a School-Based Cardiovascular Risk Detection Screening Program for Children in Underserved, Rural Areas: The CARDIAC Project

Lesley Cottrell,¹ Collin John,¹ Emily Murphy,² Christa L. Lilly,³ Susan K. Ritchie,¹
Eloise Elliott,⁴ Valerie Minor,⁵ and William A. Neal¹

**80.000 παιδιά σε 15
χρόνια**

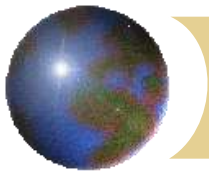
- Βάρος
- Υψος
- ΑΠ
- έλεγχο για μελανίζουσα ακάνθωση
- Λιπιδαιμικό προφίλ καθολικό

Παραπομπή



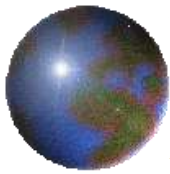
Με τη συμμετοχή Εθελοντών

- ✚ Ενδυναμώνονται οι δεσμοί μεταξύ των μελών της κοινότητας
- ✚ Ενισχύεται η αυτοεκτίμηση των μελών από τη συμμετοχή σε κάτι σημαντικό
- ✚ Κατανοείται η σπουδαιότητα του εγχειρήματος
- ✚ Ευαισθητοποιείται η κοινότητα σε θέματα πρόληψης
- ✚ Καλλιεργείται στην πράξη υπεύθυνη στάση στα θέματα υγείας η αίσθηση ότι παίρνουν την υγεία στα χέρια τους



Θέματα στρατηγικού σχεδιασμού όπως:

- ✚ **Ποιο screening; Επιλογές βασισμένες σε επιδημιολογικά δεδομένα του τόπου**
- ✚ **Καθολικό (γενικευμένο) screening vs επιλεκτικό (σε παιδιά που ανήκουν σε ομάδες υψηλού κινδύνου) ;**
- ✚ **Έλεγχος για μεμονωμένα νοσήματα vs εφαρμογή περισσότερων από μιας δοκιμασιών για διάφορα νοσήματα;**
- ✚ **Κεντρικός σχεδιασμός vs τοπικές πρωτοβουλίες ;**
- ✚ **Έμφαση στην καταγραφή vs έμφαση στην επικοινωνία με την οικογένεια σχετικά με τα αποτελέσματα;**



Συχνότητα 1:154
Screening for coeliac disease in
preschool Greek children: the
feasibility
study of a community-based project
 Karagiozoglou-Lampoudi T 2013

