



RESULTS

Part (I): General characteristics of the study sample.

Table(1): Percentage distribution of sociodemographic characteristics of mothers (n=100).

sociodemographic characteristics of mothers	NO	%
Age		
- < 20yrs	•	•
-20 < 40 yrs	97.	98.
- 40 and more	٧.٠	٧.٠
Mean \pm SD 20.7 \pm 0.256		-
Education		
- Illiterate	٤٨.٠	٤٨.٠
- Read and write	٨.٠	٨.٠
- Moderate	٣٩.٠	٣٩.٠
- High education	٥.٠	٥.٠
Occupation		
- Not working	9 £ . •	9 ٤.٠
- Working	٦.٠	٦.٠
Number of family members		
- 3individuals	۲٦.٠	۲٦.٠
- 3 < 6	٦٨.٠	٦٨.٠
- 6 and more	٦.٠	٦.٠
Residence		
- Rural	۸٧.٠	۸٧.٠
- Urban	13.	13.0

Table (1): Shows sociodemographic characteristics of mothers of children with NS. It was found that the majority of mothers aged 20-< 40 years the mean age was 20.7 ± 0.256 Years, nearly half percentage (48%) of mothers were illiterate and not working. Regarding to their residence it was observed that 87% from rural areas and 12% from urban area.





Table (2): Sociodemographic characteristic of the children with nephrotic syndrome (n=100).

Child characteristics	NO	%
Age		
- 4 < 6yrs	46.0	46.0
- 6 < 8 yrs	23.0	23.0
- 8-10 yrs	31.0	31.0
Mean \pm SD 4.85 \pm 0.868		
Sex		
- Male	71.0	71.0
- Female	29.0	29.0
Arranged of child between his siblings		
- 1st	۲۸.٠	28.0
- 2nd	٣٥.٠	35.0
- 3rd	۲۲.۰	22.0
- 4 th and more	10.	15.0
Mean ± SD 2.24 ± 1.026		

Table (2): shows sociodemographic characteristic of the children with nephrotic syndrome. It was found that mean age of children was 4.85 ± 0.868 and 71% of them were male.





Part(II): Mothers knowledge about nephrotic syndrome.

Table (3): Percentage distribution of mothers knowledge about nephrotic syndrome (n=100).

Items	Mothers knowledge			
Items	Don't	know	Incomplete Answer	
	NO	%	NO	%
Definition	74.0	74.0	26.0	26.0
Causes	52.0	52.0	48.0	48.0
Sign and symptoms	2.0	2.0	98.0	98.0
Complications	93.0	93.0	7.0	7.0

Table (3): Illustrates mothers knowledge about nephrotic syndrome. It was found that about three quarters of mothers (74%) don't know the definition of NS and the majority of them (98%) had incomplete answer about signs and symptoms. While the majority of them (93%) don't know the complications of the disease.





Fig. (1): Percentage distribution of mothers knowledge about source of nephrotic syndrome

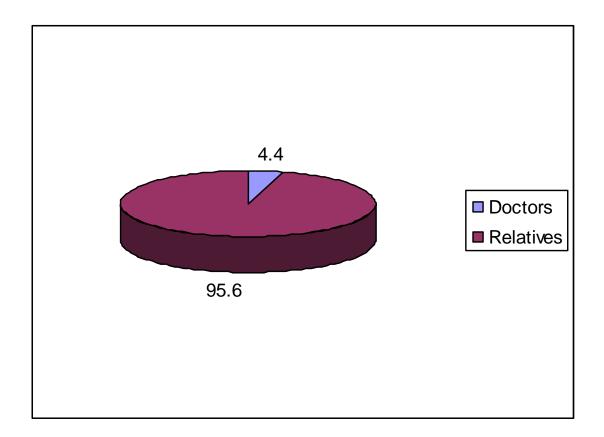


Fig. (1): Displays percentage distribution of mothers knowledge about source of nephrotic syndrome. It was found that the majority (95.6%) of mothers seek their information from doctor. While, (4.4%) from relatives.





Fig. (2): Percentage distribution of mothers knowledge about Pattern of follow up

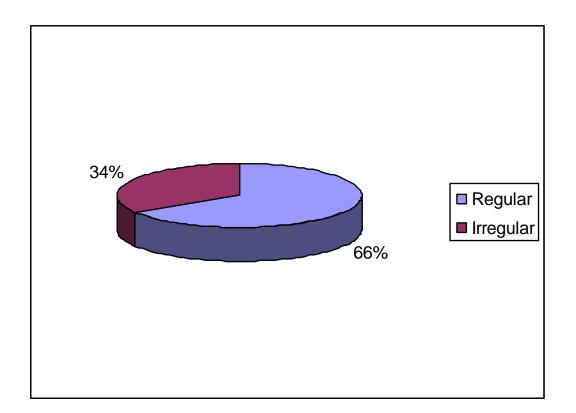
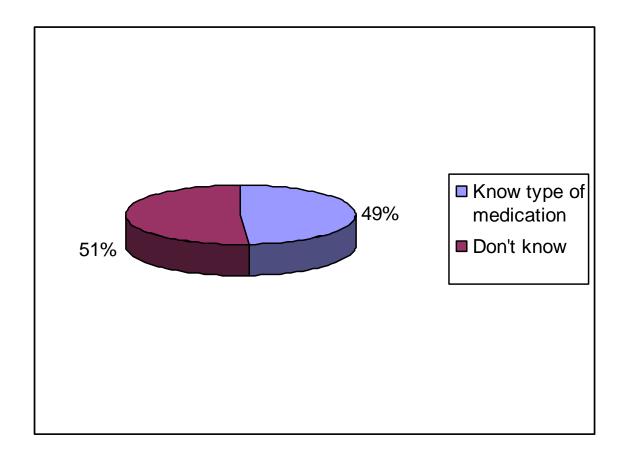


Fig. (2): It was observed that two thirds of mothers (66%) did regular follow up for their children .While, 34% did irregular follow up.





Fig. (3): Percentage distribution of mothers knowledge about type of child's medications



This figure displays percentage distribution of mothers knowledge about type of child medications. It was detected that half of mothers (51%) don't know the type of child medication .While, 49% know the type of medications .





Table(4): Percentage distribution of mothers knowledge about child nutrition.(n=100)

•		Frequency	
Items	NO	%	
Importance of nutrition			
- Given energy for ability to mobility and activity	٩.٠	٩.٠	
- Repair the tissue	17.•	١٦.٠	
- Prevention from disease	۲۳.۰	۲۳.۰	
- Don't know	٥٢.٠	٥٢.٠	
Healthy nutrition for child with NS			
- Avoid salt in food	19.0	19.0	
- Adequate amount of protein	۲۸.۰	۲۸.۰	
- Eating foods rish in fiber and vegetables, fruits	٤.٠	٤.٠	
- Don't know	٤٩.٠	٤٩.٠	
Number of meals/ day			
- Three meals	٨٩.٠	۸٩.٠	
- Five meals	١٠.٠	١٠.٠	
- Don't know	١.٠	١.٠	
Eating habits child			
- Alone	٤٢.٠	٤٢.٠	
- Prefer to eat With friends	٥٨.٠	٥٨.٠	

Table (4): Demonstrates mothers knowledge about child nutrition .It was found that (52%) of mothers don't know the importance of child nutrition, (49%) don't know the healthy nutrition for their children with nephrotic syndrome and 89% of them added that their children have 3 meals daily and 58% of children prefer to eat with their friends.





Table(5): percentage distribution of mothers knowledge about child's exercise.(n=100)

T /	Frequ	Frequency	
Items	NO	%	
Importance of sports for child			
- Decrease of stress	2.0	2.0	
- Help the body is vitality	2.0	2.0	
- Improve vitality and activity	23.0	23.0	
- Improve psychological status	3.0	3.0	
- Don't know	70.0	70.0	
Type of practice			
- Walk	48.0	48.0	
- Move of extremities (lower and upper)	52.0	52.0	
Rate of practice			
- Daily	48.0	48.0	
- Day by day	11.0	11.0	
- Twice a week	12.0	12.0	
- Weekly	29.0	29.0	
Period each practice			
- < 15 minutes	4.0	4.0	
- for 15 – 30 minutes	11.0	11.0	
- 30 – 45 minutes	35.0	35.0	
- > 45 minutes	50.0	50.0	

Table (5):Shows Mothers knowledge about child's exercise. It was detected that (70%) of mothers don't know the importance of sport to their children and it was found that (52%) of children can move their lower and upper extremities, and they are practiced daily (48%),(50%) practice this sport for 45 minutes.





Table (6): Percentage distribution of mothers knowledge about the importance of Rest and sleep (n=100)

•	Frequency		
Items	NO	%	
Importance of rest and sleep			
- To control child pain	٤.٠	٤.٠	
- Sense of rest	٣١.٠	٣١.٠	
- Prevent complication	١.٠	١.٠	
- Don't know	78.+	78. •	
Time of rest and sleep			
- Morning	٤.٠	٤.٠	
- Afternoon	٦.٠	٦.٠	
- Evening	9 • . •	9+.+	
Duration of sleep period / day			
- One hour	٩.٠	٩.٠	
- Two hours	٤٤.٠	٤٤.٠	
- Three hours	٤٧.٠	٤٧.٠	

Table (6):present mothers knowledge about the importance of rest and sleep. It was observed that (64%) of mothers don't know the importance of rest and sleep for their children ,the majority of them (90%) reported that their children had rest and sleep at the evening. The period of their sleep ranged between 3 hours 47% and 2 hours 44%.





Table (7): Total score of Mothers knowledge.

Total score of mothers' knowledge	NO	%
Poor	55	55.0
Average	22	22.0
Good	23	23.0
Total	100	100.0

Table (7): present total score of mothers knowledge. It was revealed that more than half of mothers (55%) had poor knowledge .While, 23% had good knowledge and 22% had average knowledge about care of children with NS.





Part(III): Mothers practice for children with nephrotic syndrome

Table (8): Percentage distribution of mothers practice regarding child's skin care (n=100)

n=100

Items	Mothers practice			
ittiis	Not don't		Incomplete practice	
	NO	%	NO	%
Technique of skin care	11.0	11.0	89.0	89.0
Importance of skin care	63.0	63.0	37.0	37.0
Methods to Prevent infection	78.0	78.0	22.0	22.0

Table (8): shows mothers practice for child skin care. It was found that, the majority of mothers (89%) reported incomplete practice regarding technique of skin care, while slightly more than three quarters (78%) don't know how to prevent infection about two thirds of them (63%) don't know the importance of skin care.





Table (9): Mothers practice of urine analysis and child weight (n=100)

Items	Frequency		
Items	NO	%	
Urine analysis			
- Daily	۲.٠	۲.٠	
- Weekly	٤.٠	٤.٠	
- At the time of follow up visit	9 5	9 %. •	
Measure child's weight			
- Weekly	٤.٠	٤.٠	
- Monthly	۲.٠	۲.٠	
- At the time of follow up visit	9 8	9 8	

Table (9): Demonstrates mothers practice of urine analysis and measure child weight. It was found that the majority of them (94%) did urine analysis and measure child's weight at the time of follow up visit.





Table (10): Percentage distribution of mothers practice regarding daily activities of their children (n=100)

Items	Frequency	
Mothers practice	NO	%
Importance of personal hygiene		
- Sense of rest and self confidence	9.0	9.0
- Protect him from infection	46.0	46.0
- Don't know	45.0	45.0
Type of bathing		
- Partial bathing	98.0	98.0
- Complete bathing	2.0	2.0
Bathing of child		
- Once weekly	54.0	54.0
- Twice weekly	26.0	26.0
- Three time or more /week	20.0	20.0
Dental health :Brushing of teeth		
- Once / day	61.0	61.0
- Twice/ day	13.0	13.0
- Three times/ day	25.0	25.0
- Don't practice	1.0	1.0
Media of washing the teeth		
- Brush	17.0	17.0
- washing	81.0	81.0
- Sewak	1.0	1.0
- Don't practice	1.0	1.0

Table (10): Shows mothers practice regarding daily activities of their children. It was observed that (46%) of mothers reported that the importance of personal hygiene for their children was to protect him from infection and the majority of them (98%) provide partial bath for their children (54%) of them bathing their children once weekly, and did brushing by using washing the teeth (81%).





Table (11): Percentage distribution of mothers practice toward the management of their child problem (n=100)

Items	Frequency	
Mothers Management when:	NO	%
child refuse of taken treatment		
- Sit with child and talk with him without anger	09.*	09.
- Use pattern of reward	10.	10.+
- Consultation of treated doctor	11.•	11.•
- Don't do any action	10.+	10.+
occurrence side effect of Treatment		
- Talk the doctor	٨٤.٠	٨٤.٠
- Stop treatment	١.٠	١.٠
- Don't do any action	10.	10.
Child got Sign for consultation		
- Edema	٣٨.٠	٣٨.٠
- Over weight	٥.٠	٥.٠
- Not respond for corticosteroid	4.0	4.0
- Diarrhea and vomiting	12.	18.0
- Pain, change in color of arm	٧.٠	٧.٠
- Don't know	٣٠.٠	٣٠.٠
Time of doctor consultation		
- Same the day of disease	٤٩.٠	٤٩.٠
- Second day	٥٠.٠	٥٠.٠
- Third day	١.٠	١.٠

Table (11): shows mothers practice toward management of their children problems. It was revealed that more than half (59%) of mothers pointed out that they sit with the child and talk with him without anger when he refuses to take treatment .While ,majority the (84%) talk to the doctor during occurrence of side effects of treatment ,and 38% of them consult doctor when their children got edema .Also half (50%) of them visit doctor at the occurrence of edema at the second day.Acorrding to Research question the analysis used to answer this question in this table.





Table (12): Percentage distribution of mothers practice for child with nephrotic syndrome about elimination problems and action taken (n=100).

•	Frequency		
Items	NO	%	
Elimination problem			
- Constipation	۲٥.٠	۲٥.٠	
- Diarrhea	٥٥.٠	٥٥.٠	
- Incontinence	۲۰.۰	۲۰.۰	
Reaction Regarding problem			
- Seek doctor advice	90.	90.	
- Don't know	٥.٠	٥.٠	

Table (12): Present mothers practice for their children with nephrotic syndrome when they got problems and action taken. It was detected that more than half of children (55%) had diarrhea and 25% had constipation and 20% incontinence. Regarding mothers practice toward solving of these problems, most of them (95%) seek doctor advice.





Table (13): Total score of mothers practice.

Total score of Mothers' practice	NO	%
Satisfactory	71.0	71.0
Unsatisfactory	29.0	29.0
Total	100	100.0

Table (13): shows total score of mothers practice. It was observed that nearly three quarters of mothers 71% had satisfactory practice .While, 29% has unsatisfactory practice regarding care provided for their children with NS.





Part (IV): QOL of children with nephrotic syndrome.

Table (14): Percentage distribution of mothers knowledge about quality of life of their children (n=100)

Variables Items of quality of life	No	%
Definition of QOL		
-Have a good health	3	3.0
-Feeling of satisfaction with what your child achieve	0	0.0
- Don't know	97	97.0
Factors affecting child's QOL on child		
-Afraid making sport or activity	7	7.0
-Low self steam	1	1.0
- Isolation	2	2.0
-Afraid of any interaction with others	3	3.0
- Tacking treatment	5	5.0
- Ability to attendance to go school	1	1.0
- Nutrition	4	4.0
- Don't know	77	77.0
Problems affecting QOL		
-Anemia	3	3.0
-Delayed education	10	10.0
-School absence	6	6.0
-Don't know	81	81
How to improve Child's QOL		
-Dietary system	3	3.0
- Sportily system	1	1.0
-Encourage child to expresses feelings	2	2.0
-Good health care	5	5.0
-Infection control	1	1.0
-Don't know	88	88.0

Table (14): Shows mothers knowledge about QOL of their children with NS . It was observed that, most of mothers (97%) don't know the definition of QOL ,(88%) of them don't know how to improve their children QOL and 77% don't know the factors affecting the QOL of their children .





Table (15): QOL of the children with NS. (physical, social, psychological aspects).

QOL aspects	QOL aspects Yes		No		
	No	%	No	%	
Physical aspects:					
Exercises					
- your child cant walk alone	100	100.0	0	0.00	
- your child cant practice exercise	52	52.0	48	48.0	
- Does your child feel tired from least effort (such as climbing stairs)	40	40.0	60	60.0	
- Does your child play for long periods with his colleagues	62	62.0	38	38.0	
Nutrition					
- Can your child eat alone	42	42.0	58	58.0	
-Is your child's meals commensurate with the nature of the disease	51	51.0	49	49.0	
- Is your child eat more than three meals per day		10.0	90	90.0	
Rest and sleep					
- Does yourchild take long periods of sleep	65	65.0	35	35.0	
- Does your child feel comfortable during sleep		47.0	53	53.0	
Social Aspects					
- Can your child deal with members of his family	22	22.0	78	78.0	
- Is your child relationship with his companions affected by the nature of his disease	81	81.0	19	19.0	
Psychological Aspects					
-Does your child feel isolated from his friends		40.0	60	60.0	
- Is your child afraid of the interaction with the other	28	28.0	72	72.0	
- Does your child have low self-esteem	40	40.0	60	60.0	

Table (15): Present the QOL of children with NS (Physical, social, Psychological aspect). It was found that the majority of children can walk alone, (90%) eat more than three meals per day . while, about two thirds of the children (65%) take long periods of sleep. Regarding to their social aspect the majority of them their relationship with their companions is affected by the nature of the disease (81%) and (28%) of





them afraid to do interaction with others and (40%)of them have low self –esteem.

Table (16): school achievement of child with NS.

n=54

Items	Yes		No		
	No	%	No	%	
- Can your child go to school alone	54	100	0	0.0	
-Is the nature of the disease cause in the absence of from the school	20	37	34	63	
-Is there a lack in academic achievement for your child	25	46.30	29	53.70	

Table (16): School achievement of child with NS. It was found that all of the children participated in the studs go to school alone and 37% absence from school as the nature of the disease and nearly half (46.30%) had lack in academic achievement.





Table (17): Total score of QOL of children with NS.

Total score QOL	NO	0/0
Low quality of life	53	53.0
Moderate quality of life	19	19.0
High quality of life	28	28.0
Total	100	100.0

Table (17):shows total score of QOL of children with NS . It was detected that, more than half of children (53%) had low QOL . While (28%) had high QOL .





Table (18): relationship between total score of mothers' knowledge about QOL of their children and their sociodemographic characteristics

	Total knowledge score			Total	X 2	P value
	Poor	Average	Good	Total	A Z	P value
Age						
- 20>40 yrs	50	21	22	93		. 0.05
- > 40 yrs	5	1	1	7	52.82	>0.05
Education						
- Illiterate	22	12	14	48		
- Read and write	5	1	2	8	35.32	< 0.05
- Moderate	23	9	7	39		
- High education	5	0	0	5		
Occupation						
- No working	49	22	23	94	56.30	< 0.05
- working	6	0	0	6		
Residence						
- Rural	46	21	20	87	54.14	>0.05
- urban	9	1	3	13		
Age of child						
- 4-6 Yrs	24	10	12	46	20.04	₂ 0.05
- 6<8Yrs	6	7	10	23	38.04	< 0.05
- 8-10 Yrs	25	5	1	31		

Table (18): shows the relation between total score of mothers knowledge about QOL of their children and their sociodemographic characteristics. It





was found that there was statistically significant relation between education ,occupation and, age of child and their QOL P(<0.05).

Table (19): Relationship between total score of mothers practice and their sociodemographic characteristics .(n= 100)

Mothers	Total pr	Total X 2		value	
characteristics	satisfactory	y unsatisfactory 1 Otal		A Z	value
Age					
- 20<40 yrs	66	27	93	56.32	< 0.001
- > 40 yrs	5	2	7	30.32	
Education					
- Illiterate	34	14	48		
- Read and write	6	2	8		
- Moderate	26	13	39	38.92	< 0.001
- High education	5	0.0	5		
Occupation					
- No working	66	28	9 £		< 0.001
- working	5	1	٦	59.80	<0.001
Residence					
- Rural	62	25	87		< 0.001
- urban	9	4	13	37.12	<0.001
Age of child					
- 4-6 Yrs	32	14	46		
- 6<8Yrs	13	10	23	9.46	>0.05
- 8-10Yrs	26	5	31		

Table (19): Shows the relation between total score of mothers practice and their sociodemographic characteristics. It was detected that a highly statistically significant difference between age of mothers





,education,occupation,residence and care provided to their children (P<0.001).

Table (20): Correlation between total knowledge, total practice, total quality of life & mothers sociodemographic characteristics(n=100).

Variables	r	p	
Total knowledge &Total practice	0.512	< 0.001	
Total knowledge& Total quality of life score	0.244	< 0.05	
Total practice& Total quality of life score	0.249	< 0.05	

Table (20): Shows correlation between total knowledge ,total practice and total quality of life and mothers sociodemographic characteristics. It was found that there was statistically significant relation .