

July 11, 2022

QUALITY ARTICLES: TEEN NUTRITION AND ANNUAL PHYSICAL, POST-PARTUM CARE FOR HIGH RISK MOTHERS, ANXIETY & DEPRESSION SCREENING, AND TEEN VACCINATIONS



Teen Nutrition and Annual Physical

Annual physical for adolescent is important to assess their development. Pediatricians should assess adolescent development related to hormonal changes, behavior and emotional stressors, nutrition and exercise, hygiene, sleep patterns, safety, and vaccinations. This article will focus on adolescent physical assessment related to nutrition. Adolescent nutrition has gained attention in the past years due to ever increasing adolescent obesity from lack of physical activity and poor nutrition. Unfortunately, some physicians are not comfortable in discussing weight issues with teenagers. In addition, pediatricians are limited to the time spent with the adolescent patients to discuss sensitive topics such as obesity.

Obese adolescents have low self-esteem and are prone to being teased and bullied by their peers. Some are prone to depression or anger issues. A professional team approach

headed by the pediatrician is necessary to provide a well-rounded plan of care that will yield a positive result for the adolescent. The treatment plan should focus on open discussion with the family and the adolescent to ensure cooperation of both parties. Focus on lifestyle issues rather than calorie count. To build self-esteem and gain cooperation, allow the adolescent to voice his/her preference related to the treatment plan. Parents play an important role by modeling proper eating habits and participating in physical activities. Incorporating behavioral therapy to allow the adolescent to voice his/her anxiety in a safe environment and provide appetite awareness training. Despite achieving the goal, therapy should continue until the adolescent is able to manage his weight on his own. Visits to the pediatrician to monitor the adolescent's health and weight should continue according to the pediatrician prescribed visit frequency.

Post-Partum Care for High-Risk Mothers

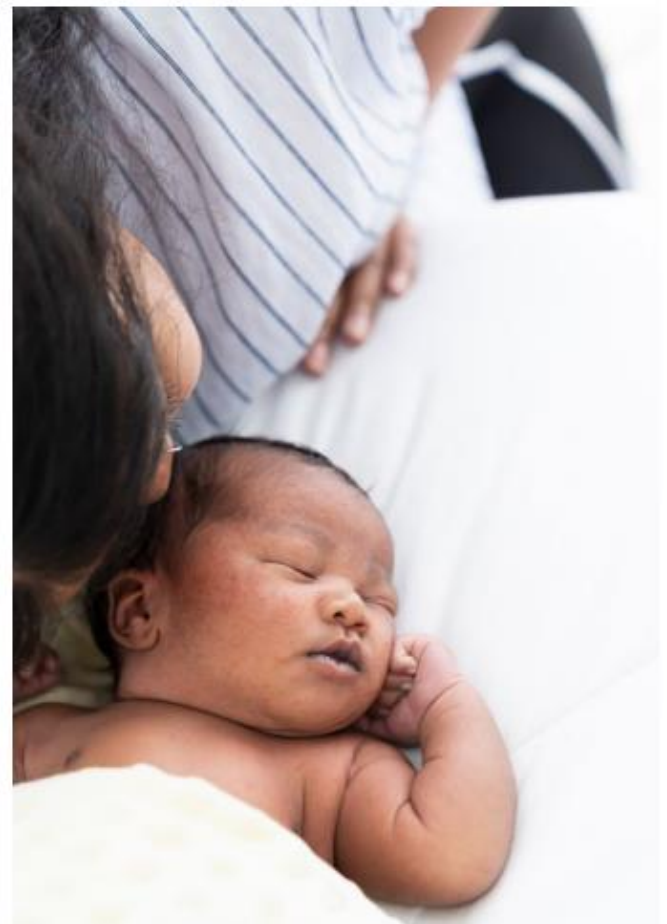
Maternal care for high risk postpartum patients is difficult and complex. High-risk postpartum patients often come from low income households, minorities and residing in rural communities that have limited access to specialists and medical services. Those limitations lead to multiple chronic medical conditions causing higher morbidity and mortality post-delivery.

Obstetricians and/or family physicians must be pro-active in preventing complications during and after pregnancies. To achieve optimal postpartum health, physicians must educate patients to schedule more frequent visits to the doctor leading to early detection of possible complications before and after delivery. Besides screening for health issues that can complicate the pregnancy and delay postpartum recovery, physicians should screen for social determinants that can also lead to stress and depression such as:

- Food insecurity
- Lack of access to transportation
- Safe and clean housing
- Financial insecurity
- Violence and/or abuse
- Lack of education on how to properly care for the newborn baby

Physicians have the responsibility to refer patients to appropriate social services that can assist in providing the social and financial support for both mother and baby. Those referrals can lead to access nondinical and community-based services such as, affordable day care for the baby

and mother support groups. Referral to a home visiting nurse is also helpful to monitor the high-risk mother and baby's health conditions, provide on hand education as needed and ensure both mother and baby are committing to the required clinical appointments. The visiting nurse can also facilitate continued communication with the primary physician to report the mother and baby's health conditions that may require intervention from other health specialists. In addition, creating postpartum care plans can also assist in a smooth transition from postpartum care to well-woman care.



Post-Partum Care Plan

Components of a postpartum care plan are (American College of Obstetricians and Gynecologist, May 2018)

Team Member	Role
Family and friends	<ul style="list-style-type: none"> Ensures woman has assistance for infant care, breastfeeding support, care of older children Assists with practical needs such as meals, household chores, and transportation Monitors for signs and symptoms of complications including mental health
Primary maternal care provider (obstetrician-gynecologist, certified nurse midwife, family physician, women's health nurse practitioner)	<ul style="list-style-type: none"> Ensures patient's postpartum needs are assessed and met during the postpartum period and that the comprehensive postpartum visit is completed "First call" for acute concerns during postpartum period Also may provide ongoing routine well-woman care after comprehensive postpartum visit
Infant's health care provider (pediatrician, family physician, pediatrician nurse practitioner)	<ul style="list-style-type: none"> Primary care provider for infant after discharge from maternity care
Primary care provider (also may be the obstetric care provider)	<ul style="list-style-type: none"> May co-manage chronic conditions (hypertension, diabetes, depression) during postpartum period Assumes primary responsibility for ongoing healthcare after comprehensive postpartum visit
Lactation support (professional IBCLC, certified counselors and educators, peer support)	<ul style="list-style-type: none"> Provides anticipatory guidance and support for breastfeeding Co-manages complications with pediatric and maternal care providers
Care coordinator or case manager	Coordinates health and social services among members of postpartum care team
Home visitor (Nurse Family Partnership, Health Start)	Provides home visit services to meet specific needs of mother-Infant dyad after discharge from maternity care
Specialty consultant (maternal-fetal medicine, internal medicine subspecialist, behavioral healthcare provider)	<ul style="list-style-type: none"> Co-manages complex medical problems during postpartum period Provides pre-pregnancy counseling for future pregnancies

Elements	Components
Care team	Name, phone number, and office or clinic address of each member of care team
Postpartum visits	Time, date, and location of postpartum visit(s); phone number to call to schedule or reschedule appointments
Infant feeding plan	Intended method of infant feeding, resources for community support (eg, WIC, Lactation Warm Lines, Mothers' groups), return-to-work resources
Reproductive life plan and commensurate contraception	Desired number of children and timing of next pregnancy Method of contraception, instructions for when to initiate, effectiveness, potential adverse effects, and care team member to contact with questions
Pregnancy complications	Pregnancy complications and recommended follow-up or test results (eg, glucose screening for gestational diabetes, blood pressure check for gestational hypertension), as well as risk reduction recommendations for any future pregnancies
Adverse pregnancy outcomes associated with ASCVD	Adverse pregnancy outcomes associated with ASCVD will need baseline ASCVD risk assessment, as well as discussion of need for ongoing annual assessment and need for ASCVD prevention over lifetime
Mental health	Anticipatory guidance regarding signs and symptoms of perinatal depression or anxiety; management recommendations for women with anxiety, depression, or other psychiatric issues identified during pregnancy or in the postpartum period
Postpartum problems	Recommendations for management of postpartum problems (eg, pelvic floor exercises for stress urinary incontinence, water-based lubricant or dyspareunia)
Chronic health conditions	Treatment plan for ongoing physical and mental health conditions and the care team member responsible for follow-up



Anxiety & Depression Screening

Patients may not know they are anxious or depressed when they come into a Primary Care Physician's office. Often times, they will come in for physical symptoms that may be caused by anxiety and depression. Some of these symptoms may be: weight gain/loss, back pain, sleeping issues, lack of energy, and headaches. With the change in lifestyle caused by the Covid-19 Pandemic, rates of depression in adults has continued to increase. According to the Centers for Disease Control and Prevention, adults with symptoms of anxiety or depressive disorder increased from 36.4% to 41.5% from August 2020 to February 2021 (CDC, 2021). Despite the prevalence of depression among adults, depression goes undiagnosed in primary care settings about half the time (American Psychiatric Association, 2021).

What can we do to improve?

- Utilize Community Health Choice's Primary Care Provider Toolkit for guidelines and screening tools for anxiety and depression
- Ask patients specific questions about their mental health
- Provide accessible learning materials about anxiety and depression disorders to patients
- Bridge the gap between primary care and specialty care depending on patient needs
- Screen members for depression and/or anxiety at their annual physicals

Primary Care Physician Coordination

- Must screen, evaluate, refer and/or treat any behavioral health problems and disorders, including anxiety and depression
- May provide behavioral health services within the scope of the practice
- Must maintain patient confidentiality of Behavioral Health information

SCREENING TOOLS

Anxiety:

- GAD-7 (Generalized Anxiety Disorder)

Depression

- The Beck Depression Inventory (BDI)
- BDI interactive Tool
- The Hamilton Depression Scale (HAM-D)
- Patient Health Questionnaire-9 (PHQ-9)

Teen Vaccinations

Providers have the responsibility to inform parents and teens the importance of immunization by presenting evidence-based information about vaccine safety, and potential side effects. There are various ways Providers can influence teen vaccinations:

- Refer teens to vaccine centers with programs geared to relate concerns with vaccinations.
- Brochures are also instrumental in providing information that can encourage teens to obtain their vaccinations.
- Provider office send reminders to parents required vaccinations as it comes due and specific information of each vaccine.
- Providers can also refer both teens and parents to websites discussing vaccine issues, questions and answers and other vaccine resources.
- Websites:
 - Vaccinate Your Family
https://vaccinateyourfamily.org/which-vaccines-does-my-family-need/preteens-teens/?gclid=CjwKCAjwk_WVBhBZEiwAUHQcmfcCrB-j9fMsUkbTqAAAn_dVpqs1wo09SfrSy1jPPv3ocoiO27pG-hoC1TUQAvD_BwE
 - American Academy of Pediatrics
<https://www.aap.org/en/patient-care/immunizations/>