

($p=0.03$) in the nuclear/cytoplasmic ratio of WTIP expression in CD2AP mutants.

Conclusion: a role for CD2AP in maintenance of the normal differentiated podocyte phenotype. This may be partly mediated through WT1. Our findings have clear implications for a novel role for CD2AP in development and progression of glomerular disease.

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MATERNAL DEPRESSION: IMPLICATION FOR ASTHMA MANAGEMENT IN CHILDREN

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Aim: To identify the relationship between maternal depression, the health and well being of children with asthma, and the role of the pediatric nurse.

Method: Review of the medical and nursing literature.

Results: Adult depression is a leading cause of disease burden throughout the world. In the United States undiagnosed and untreated maternal depression has been found to not only have significant psychological and social implications for the family system, but children of depressed mothers are at risk for serious developmental, behavioral, and emotional problems as well as non-adherence with medical management plans, increased morbidity from chronic conditions such as asthma, poor health care utilization, greater rates of emergency department and sick visits, greater use of inpatient and specialty services, and lower rates of well-child care visits and pediatric preventive practices such as basic safety.

Conclusion: The significance of depression on child and adolescent health mandates that pediatric providers learn more about the incidence, prevalence, associated risk factors, symptomatology and screening tools for maternal depression. If pediatric nurses were more knowledgeable regarding the symptoms of depression they could detect this clinical problem and educate mothers regarding the significance of their mental health on asthma management in children and refer mothers for mental health services.

This presentation will review current literature regarding maternal depression, its incidence, prevalence, associated correlates, and its

implications for child health and asthma management. Suggestions for screening mothers for depression and alterations in health care management plans for their children will be given.

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“ERGOCOACH”, CAN THEY DECLINE PHYSICAL LOAD?

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Background: Dutch law, concerning working circumstances, requires employers to take care of safety, health and welfare of their employees. In 2001 the University Medical Centres in the Netherlands had an agreement to decrease absenteeism and disability of their employees. Better working circumstances will have a positive outcome on motivation and can lead to a higher retirement age, without problems. Measures directly designed to the place of work are the most effective. We therefore trained nurses in the Wilhelmina Children’s Hospital in Utrecht, the Netherlands, in physical load. When certificated they became “ergocoach”.

Aim: Ergocoaches advise their colleagues to create a better posture during work and are responsible for choosing and advising about the right tools needed.

Implications for practice: While working in Neonatal Intensive Care Unit (NICU) nurses often stand or sit in a posture that can cause pain in the neck, shoulder and arm area, also known as Repetitive Strain Injury (RSI). Ergocoaches have made an inventory of the problems on physical load on the NICU and tried to find solutions. They give advice about posture, are consulted in case of reintegration and organize educational sessions. In addition posters, emphasizing correct posture, were developed and spread out.

Most important however, is changing attitude. If nurses notice that a better working position prevents or declines RSI, they will be motivated to change their behavior.

Conclusions: Ergocoaches are value to the team, they deliver an important contribution to prevent and decrease absenteeism and disability.