

## **Respiratory problems in blind requires more study**

February 7 2014, by Rob Payne



"Very little information exists on the health and well-being of children who become blind during childhood," Ms Crewe says. Credit: Chris and Jenni

A new study by Curtin University, The University of Western Australia and The Association for the Blind of Western Australia has found that hospitalisation rates for blind children are much higher than for their sighted peers.

The findings are drawn from an age and gender-matched cohort of 59 blind and 59 control children born in WA before 2010.

Curtin Centre for Population Health Research expert Julie Crewe says <u>blind children</u> had four times as many hospital admissions and six times longer stays than control children, as well as 40 times more



comorbidities (co-occurring medical conditions).

Most surprisingly, the majority of bed days were linked to respiratory problems.

"We did not anticipate that respiratory problems would incur the most bed days by this cohort, nor that <u>respiratory problems</u> requiring hospitalisation were almost entirely among the blind children," Ms Crewe says.

"[The repiratory problems] affected a third of all the blind children and accounted for a quarter of all days spent in hospital."

While researchers refrained from speculating on the link between <u>respiratory illnesses</u> and <u>childhood blindness</u>, editors Drs William Good and Susan Carden of Clinical & Experimental Ophthalmology say that immune system dysfunction could be part of some blinding conditions or that living arrangements could render affected children more susceptible to infections.

Overall, the cohort combined for 107 separate admissions, accounting for 237 bed days in hospital, with over 90 per cent of admissions and 92 per cent of bed days incurred by blind children.

According to Ms Crewe, this discrepancy reveals a significant public health issue requiring further study, especially in light of earlier studies linking high mortality rates among blind children with pneumonia.

"Very little information exists on the health and well-being of children who become blind during childhood," Ms Crewe says.

"Although data exists on the incidence and prevalence of different types of childhood blindness or vision loss, there is no information on the



health outcomes, hospitalisation characteristics or comorbidities of children who become blind.

"While this may be due to the low prevalence of childhood blindness, it remains a cause of major concern."

Overall, the study found that the most common diagnosis upon presenting at hospital was musculoskeletal problems, including trauma injuries and problems associated with muscle contracture and acquired deformities of limbs.

Drs Good and Carden say these may be associated with orientation and mobility issues leading to falls or abnormal gait adaptations.

**More information:** Crewe, J. M., Lam, G., Clark, A., Spilsbury, K., Mukhtar, A. S., Morlet, N., Morgan, W. H., Crowley, M. and Semmens, J. B. (2013)," Hospitalization rates of children who are blind." *Clinical & Experimental Ophthalmology*, 41: 773–778. doi: 10.1111/ceo.12101

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