

level, adolescent mother, preterm birth, IUGR, and early age of onset of FTT. Because later cognitive and motor function is affected by malnourishment in infancy, many of these children are below normal in intellectual development with childhood IQ scores significantly lower than peers without a history of malnourishment (Romano, Hartman, Privitera, et al, 2015). In addition, there is a higher likelihood of eating and behavioral issues among children with a history of malnutrition when compared to peers (Romano, Hartman, Privitera, et al, 2015). Such findings indicate that a long-term plan and follow-up care are needed for the optimum development of these children.

Nursing Care Management

Nurses play a critical role in the diagnosis of FTT through their assessment of the child, parents, and family interactions. Knowledge of the characteristics of children with FTT and their families is essential in helping identify these children and hastening the confirmation of a diagnosis (Box 10-3). Accurate assessment of initial weight and height and daily weight, as well as recording of all food intake, is imperative. The nurse documents the child's feeding behavior and the parent-child interaction during feeding, other caregiving activities, and play. Children with growth failure may have a history of difficult feeding, vomiting, sleep disturbance, and excessive irritability. Patterns such as crying during feedings; vomiting; hoarding food in the mouth; ruminating after feeding; refusing to switch from liquids to solids; and displaying aversion behavior, such as turning from food or spitting food, become attention-seeking mechanisms to prolong the attention received at mealtime. In some cases, the child may use feeding as a control mechanism in a poorly organized or chaotic family situation; parents may allow the child to dictate the norms for behavior and feeding because of inexperience with parenting or poor parenting role models. Thus, refusing to eat or only eating high-sugar foods may be the child's norm. In such cases, family therapy is essential to reverse the trend and assist the parents and child in understanding each other's roles.

Box 10-3