

Study Between Iron & Bhs in children

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Background: BHS breathing in children, loss of consciousness is associated with decreased venous return to the heart BHS with reduced cardiac output and consequently cerebral perfusion disturbances and loss of consciousness children. The frequent occurrence of severe attacks, with a cry of pain that rebellious children and families of fear in parents and on the other hand due to its similarity to the seizure in the child's relatives creates additional concerns.

Methods: This cross-sectional study was cross-sectional and community for all children ages six months to six years old BHS attack referred to hospital is. Simple random sampling based on census has been referred to neurology clinic in the given period. Data collection tools include the checklist, physical examination and diagnostic tests hematologic indices such as iron, ferritin, serum iron and CBC is bonded. The yardstick for statistical software SPSS / 16, 05 / 0P <significance as it is intended.

Results: In this study, using χ^2 ($\chi^2 = 4/8$ P = 0/3 df = 4) p <0/05 attacks and the type of iron deficiency anemia No significant relationship was observed (95%). Studies with larger samples is recommended in this case. Also in this study, using the Spearman correlation coefficient, between illness and sleep there was no statistically significant relationship with iron deficiency (6/0 = p.)

Conclusion: Although the results of this study revealed no significant association between iron deficiency and BHS, and finally between age and the number of attacks using Pearson's correlation coefficient weak negative correlation was observed (3/0 = p) . 12 / 0- = r showed that the number of attacks decreases with increasing age, however, was not statistically significant.

Final score is based on the parents to ensure that their disease was self-limiting and benign and parents should not worry much about the future of their children's development.

The general conclusion: there is no correlation between iron deficiency and bhs.

Key words:

