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The Extended Care to the Pediatric Patient in the Transplant of Bone Marrow based on the Integration of Psychological and Psycho-Pedagogical Approaches

BACKGROUND: The child submitted to bone marrow transplant experiences countless hardships inherent to this treatment. During this period, besides facing an unprecedented situation that can be felt as threatening, the child is temporarily deprived of social life, the school routine and daily activities. Such factors may impact struggling to adapt to this new context and preparation of the experiences related to hospitalization.

HYPOTHESIS: The psychological and psychopedagogical assistance in bone marrow transplantation can help pediatric patients to face the situation of illness and its treatment. The integration of knowledge of these two health areas helps the mobilization of creative and unique features of each patient, strengthening the cognitive and emotional aspects according to each stage of infant development.

METHODS: In the Bone Marrow Transplant Unit of Israelita Albert Einstein Hospital, pediatric patient is assessed and monitored by psychology and educational pedagogical service, aiming to provide psycho-emotional support and follow-up in the process of development and learning. In the psychological treatment, the emotional demands generated due to the transplant and the restrictions imposed by its treatment are welcomed and addressed. Through playfulness, children can express themselves and have their feelings exposed in a safe environment. Moreover, this type of therapy allows children to expand their understanding about the treatment and the development of both physical and emotional vulnerability related to this period. The educational psychology service serves to guarantee the rights for children of education and entertainment, restoring bonds with the school and provide a playful daily life for the patient. After the evaluation, an individualized intervention plan is designed with activities that favor the construction of knowledge, ensuring the maintenance of the school bond and contributing to the admission or reintegration into school after the end of treatment. During their stay in the Transplant Unit, the evolution in their treatment is often discussed by the multidisciplinary team in formal and informal environments. Within this context, the psychologist and the psychopedagogical professionals share perceptions regarding the psycho-emotional condition, motivation for learning, involvement in the treatment and expectations to be discharged from the hospital and released from the treatment.

RESULTS: Through the shared expertise of these two professional areas (psychology and educational psychology) is possible to achieve greater assertiveness in the treatment, promoting the contact between children and their full potential, although they are experiencing a situation of intense weakness. In this way, it is possible to promote the rescue of self-esteem, quality of life adapted to the hospital context and foster positive expectations for the next step in the treatment.