

“I see no hope for the future of our people if they are dependent on the frivolous youth of today, for certainly all youth are reckless beyond words. When I was a boy, we were taught to be discrete and respectful of elders, but the present youth are exceedingly wise and impatient of restraint.”

~attributed to Hesiod (8th century B.C.)

Who is in charge?

Teens, asthma and adherence

Dr Terry (Theresa) Fleming
Rochelle Moss
Department of Paediatrics:
Child and Youth Health



If you have to go to sleep

Both in charge

Give teens time

Explain

Strategise together

'Jess' – 15 Yr old female

- Broken leg + hx asthma
- Poor control of asthma, non-compliance
- Several admissions and courses of prednisone
- Admitted and treated with high dose corticosteroids, medication given regularly – inpatient 2-3weeks
- Symptoms improved
- Medication plan made, provided spacer, community follow up
- Plan for discharge

'Jess' – her view

- Reduced mobility
- Weight gain – worried about stature
- Very low mood
- Missed school
- Can't socialise with friends
- Last thing on Jess's mind...asthma

Adolescent development

Hormonal changes –GH; GnRH – LH,
FSH; DHEA, DHEAS

Changes in arousal, emotion

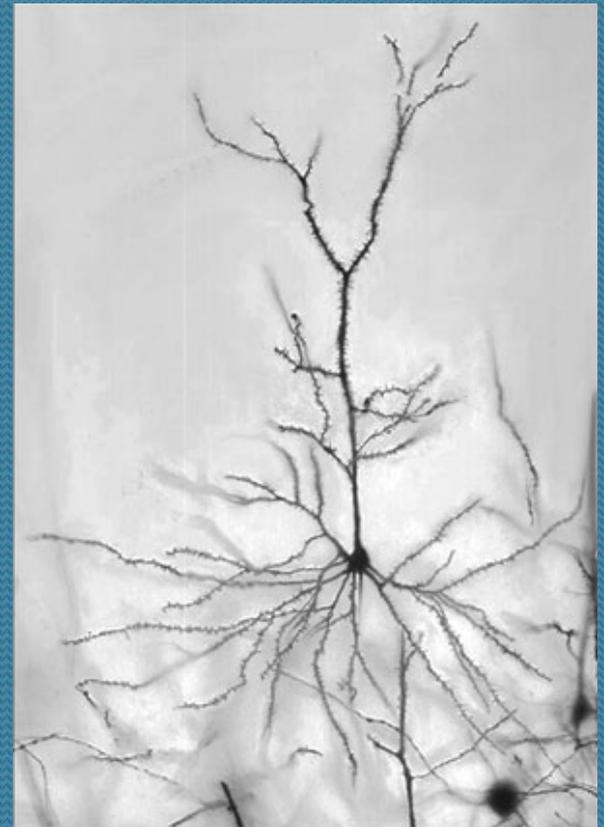
Romantic & sexual feelings

Sensitivity to social status

Exploratory behaviour

Qualitative brain development

- Pruning & myelination
 - Grey matter over production till 11/12
 - Myelination
- Structural development and growth
 - Development of frontal & pre-frontal lobes continues
 - NT migration



Previous concepts of adolescence

- 'Gradual shift from concrete to abstract thinking'
- Newer evidence –
 - Adults do not think logically much of the time,
 - Faster 'better' decision making is often intuitive, 'gist'
 - Decisions affected by mood and social relationships
- Despite conventional wisdom adolescents do not perceive themselves to be invulnerable
 - Typically over rather than under estimate risk
 - Although often see the consequences as not that bad
 - Benefits often seen as more imp than the risk
 - Take more risks than they intend to

* Sloman 1996, Reyna and Farley 2006; Dahl 2008, Steinburg 2010

Hot & cold cognition

- Thinking under conditions of high arousal / strong emotion vs. low arousal, calm conditions
- Adolescents typically good at ‘cold cognition’,
- More ‘task variability’ than adults

- Its not that adolescents *can't* think abstractly but integration of cognitive and emotional responses are among last systems to mature

Changing concepts of adolescence

Many interventions aim to reduce risk by increasing risk perceptions & logical thought

Better:

Graduated increases in responsibility

Environmental support

Info AND gist based reasoning

Relational approach



Asthma skills

Children are normally seen with caregivers, with caregivers take responsibility for management



Most adults are seen on their own and assumed to be self-managing.



Adolescents require an approach which is in between and enables them to take increasing responsibility

Asthma and young people

1. Consultation Time
 - Alone
 - Confidential
 - Give them the full time!!
2. Explain and Clarify – don't assume
3. Strategise together

Consultation

- See young people on their own when possible and with their parents/caregivers
- Give them the whole visit time

- *<http://www.goodfellowunit.org/courses/introduction-headsss-assessment>*

Confidentiality

- Explaining and assuring confidentiality improves information sharing
- Can be as simple as having health privacy information on the wall and providing a brief verbal outline

Clarify and Explain

- Invite them to tell you:
 - what works?
 - what doesn't work? why?
- Offer the young person a chance to ask questions
- Show don't just tell
- Info & (teen centred) gist
- Seek understanding over coercion

Okay, I'll get the doctor to check your dose, now remember to take the preventer twice a day. With the spacer. If you do that and get some rest, eat well, get back to school, wear a seat belt in the car, don't drive with anyone drunk or speeding, lose a little weight, start getting a bit more exercise, don't get too stressed or worry about your body image, keep up with the non-smoking, always use a condom, reduce the binge drinking, come and talk if you are feeling down and start doing smear tests you should be fine.
Good? See you next year.



Strategise together

- Develop a treatment regime with the adolescent
- Individualise the management plan



Both in charge (increasing responsibility)

Give them time

Explain (info & GIST)

Strategise together