

You can obtain 3 CEU's for reading the article "CURRENT PRACTICES AND CHALLENGES OF REGISTERED DIETITIANS IN THE NUTRITIONAL MANAGEMENT OF CHILDREN WITH CEREBRAL PALSY IN SOUTH AFRICA" and answering ALL the accompanying questions with a pass mark of 70% or more.

This article has been accredited for CEU's (ref. no. DT/A01/P00008/2024/00004)

HOW TO EARN YOUR CEUS

- 1) Register at <https://www.mpconsulting.co.za/medical-cpd>.
- 2) Log in.
- 3) Click on the Menu tab
- 4) Select "Journals".
- 5) Go to "South African Journal of Clinical Nutrition".
- 6) Select relevant issue.
- 7) Click "Access"
- 8) Select the CPD questionnaire activity and click on the corresponding article link
- 9) Visit <https://www.tandfonline.com/toc/ojcn20/current> to access the relevant CPD article.
- 10) Answer ALL the accompanying questions in the CPD questionnaire.
- 11) Click "Submit" to obtain your results.

Only online questionnaires will be accepted.

Activity 179

1. The nutritional management of children with CP (cerebral palsy) is important to dietitians because:
 - a) CP causes obesity due to malabsorption of multiple nutrients.
 - b) caregivers are unaware of the nutritional needs of children with CP.
 - c) overnutrition is a known complication of CP, which leads to poor development and health of children with CP.
 - d) children with CP are at risk of malnutrition, faltering growth and nutritional comorbidities.
2. Identify the incorrect statement. To optimise the nutritional management of children with CP dietitians need to:
 - a) provide nutritional management while consulting as part of a multidisciplinary team.
 - b) include feeding history starting from early infancy to assess patients.
 - c) pay minimal attention to non-nutritional problems as these do not contribute to feeding difficulties significantly.
 - d) refer children with CP to the speech therapist when there is oropharyngeal dysfunction.
3. Indicate the incorrect answer:
 - a) South Africa (SA) does not have a unique set of guidelines regarding the nutritional management of children with CP.
 - b) SA registered dietitians (RDs) do not manage children with CP as part of a multidisciplinary team.
 - c) There is a considerable financial burden placed on families of children with CP (as identified by SA RDs).
 - d) The recommend use of low-energy feeds with fibre for immobile patients was followed by less than one-fifth of SA RDs.
4. Rank the implementation by South African RDs of some ESPGHAN guidelines from the highest to the lowest.
 - Guideline 4: the anthropometric guidelines for measuring fat mass.
 - Guideline 6: identify undernutrition based on anthropometry.
 - Guideline 9: include early feeding history as part of assessment.
 - Guideline 19: consider the presence of oropharyngeal dysfunction in all patients with CP even in absence of clinical signs.
 - a) Guidelines 4; 19; 9; 6
 - b) Guidelines 9; 6; 19; 4
 - c) Guidelines 6; 9; 19; 4
 - d) Guidelines 19; 9; 4; 6
5. Which of the following statements is correct according to the findings in this study?
 - a) The public sector RDs mostly estimated micronutrient requirements.
 - b) The micronutrients mostly considered were iron, vitamin D and potassium.
 - c) At least half of the dietitians consistently monitored clinical signs.
 - d) The nutritional assessments during follow-up visits were carried out by a higher percentage of RDs compared with those done during the first assessment.
6. Select the correct answer. The most common challenges faced by SA RDs in managing children with CP were:
 - a) poor caregiver compliance (92.2%), poor networking between SA RDs and other healthcare professionals (HCPs) (77.0%) and difficulty in measuring anthropometry (50.3%).
 - b) poor caregiver compliance (70.3%), networking between SA RDs and other HCPs (75.0%), difficulty in measuring anthropometry (65.4%) and inconsistent follow-up (30.5%).
 - c) poor caregiver compliance (92.2%), poor networking between SA RDs and other HCPs (77.0%), difficulty in measuring anthropometry (65.4%) and inconsistent follow-up (61.5%).
7. Select the correct answer. Poor caregiver compliance was reported by almost all SA RDs, and they held the perception that caregivers faced many challenges, these included:
 - a) lack of financial resources, meals taking too long to consume, lack of suitable equipment to prepare the food and a lack of nutritional knowledge.
 - b) gagging and vomiting, fussy eating and choking during meals.
 - c) A and B
8. Which statement(s) is/are correct: Fat mass and fat-free mass using triceps skinfold thickness (TST) is a more reliable indicator of malnutrition in children with CP because:
 - a) weight and height measurements can be unreliable.
 - b) a shorter stature and reduced lean body mass and low fat mass could result in an incorrect interpretation of a body mass index (BMI) or z-score.
 - c) a shorter stature and reduced lean body mass and high fat mass could result in an incorrect interpretation of a body mass index (BMI) or z-score.
 - d) A and C
 - e) A and B

You can obtain 3 CEU's for reading the article "CURRENT PRACTICES AND CHALLENGES OF REGISTERED DIETITIANS IN THE NUTRITIONAL MANAGEMENT OF CHILDREN WITH CEREBRAL PALSY IN SOUTH AFRICA" and answering ALL the accompanying questions with a pass mark of 70% or more.

This article has been accredited for CEU's (ref. no. DT/A01/P00008/2024/00004)

HOW TO EARN YOUR CEUS

- 1) Register at <https://www.mpconsulting.co.za/medical-cpd>.
- 2) Log in.
- 3) Click on the Menu tab
- 4) Select "Journals".
- 5) Go to "South African Journal of Clinical Nutrition".
- 6) Select relevant issue.
- 7) Click "Access"
- 8) Select the CPD questionnaire activity and click on the corresponding article link
- 9) Visit <https://www.tandfonline.com/toc/ojcn20/current> to access the relevant CPD article.
- 10) Answer ALL the accompanying questions in the CPD questionnaire.
- 11) Click "Submit" to obtain your results.

Only online questionnaires will be accepted.

9. The ESPGHAN guideline recommend the following red flags to identify undernutrition:
 - a) physical signs of undernutrition and faltering weight.
 - b) weight-for-age z-score < 2 and TST < 10th centile for age and sex.
 - c) physical signs of undernutrition, weight-for-age z-score < 2, and mid-upper arm fat or muscle area < 10th centile and faltering weight.
 - d) physical signs of undernutrition, weight-for-age z-score < 2, TST < 10th centile for age and sex, mid-upper arm fat or muscle area < 10th centile and faltering weight.
10. Which of the following statements are correct?
 - A: ESPGHAN recommends using standard growth charts like the WHO growth curves.
 - B: ESPGHAN recommends using CP-specific growth charts.
 - C: The majority of dietitians in this study complied with ESPGHAN guidelines for growth chart use.
 - D: In this study dietitians used a combination of growth charts to assess their patients.
 - a) A, B and C
 - b) B and C
 - c) A and D
 - d) A and C
11. Which of the following statements are incorrect:
 - a) 2.6% of SA RDs did not determine anthropometry in children with CP after 3 months.
 - b) 45% of SA RDs monitored clinical signs of malnutrition of children with CP at the first evaluation.
 - c) 77% of SA RDs experienced poor networking with other HCPs when managing children with CP.
 - d) 59% of SA RDs perceived that caregivers struggle with lack of nutritional knowledge pertaining to their children with CP.
12. Six out of 10 SA RDs prescribed protein according to DRIs, while less than half increased protein requirements in accordance with the ESPGHAN guidelines, which recommend an increase in the presence of pressure ulcers and when the energy requirement is reduced.
 - a) True
 - b) False
13. In South Africa, registered dietitians in the public and private sectors manage children with CP significantly differently from each other.
 - a) True
 - b) False
14. The ESPGHAN guideline to initiate enteral feeding only when oral feeding is unsafe, nutritionally inadequate, stressful and prolonged was observed by almost all SA RDs.
 - a) True
 - b) False
15. Three out of four children with CP are affected by constipation. Choose the correct statement.
 - a) The ESPGHAN guideline provides detailed dietary interventions to prevent constipation in children with CP.
 - b) The majority of SA RDs (80%) do not follow the ESPGHAN guidelines' approach to treating constipation.
 - c) Half the SA RDs prescribes probiotics in the treatment of constipation according to the ESPGHAN guideline.
 - d) The ESPGHAN guidelines' approach to treating constipation is the same as for neurotypical children.