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Nonmaleficence in Paediatric Patients With Diarrhoea : A Concept Analysis

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ABSTRACT

Diarrhoea is still a world health problem, from WHO data diarrhoea is the number one cause of death of toddlers Proper handling will minimise the occurrence of complications that will occur in children with diarrhoea, so the actions taken by nurses must be in accordance with existing procedures and not harm the patient. The purpose of concept analysis in this study was to obtain relevant definitions of non-maleficence in paediatric patients with diarrhoea. The concept analysis method in this study uses Walkers and Avants 2014. Databases that have been obtained from various sources including PUBMED, Google Scholar, by writing the keywords 'Diarrhoea in Children', 'Nonmaleficence', with the year of publication 2010 to 2024 in English or Indonesian. The principle of non-maleficence requires that every action does not harm or harm either physically or psychologically, and applies that the action taken must outweigh the harm received by the patient and not offend. The concept of nonmaleficence used by nurses explaining to the patient's parents with simpler language.



INTRODUCTION

Diarrhoea is still a world health problem, from WHO data diarrhoea is the number one cause of death for children under five, while according to Indonesian health profile data in 2021, it states that diarrhoea is the second cause of death as much as 14%, an increase from 2020, namely 9.8% (World Health Organization, 2024).

In Indonesia, every year children experience diarrhoea 2-8 times with an average of 3.3 times. According to data from the Indonesian Ministry of Health, which shows that 100,000 children under five die each year due to diarrhoea or 273 children under five die each time, 11 children under five die every hour and 1 child dies every 5.5 minutes (Kemenkes RI, 2023).

Diarrhoea is a symptom of infection caused by a number of bacterial, viral, and parasitic organisms, most of which are spread through faecally contaminated water. The most common viral pathogens are rotavirus, norovirus, adenovirus, and astrovirus, while bacteria include Escherichia coli, salmonella sp, shigella spp, and entamoeba spp, rotavirus and E.Coli (Guo et al., 2019; Setyaningsih & Diyono, 2020).

METHOD

The concept analysis method in this study uses Walkers and Avants 2014. Where used to review and clarify concepts that are still ambiguous and describe a phenomenon of experience in patients (Walker & Avant, 2014).

The analysis was carried out using a database that has been obtained from various sources including PUBMED, Google Scholar, by writing the keywords 'Diarrhoea in Children', 'Nonmaleficence', with the year of publication 2010 to 2024 in English or Indonesian.





RESULTS AND DISCUSSION

Phenomenon:

Diarrhoea can cause dehydration and electrolyte disturbances, not only that diarrhoea in children, can also inhibit growth, the occurrence of malnutrition, and impaired cognitive development, diarrhoea not only endangers the long-term physical developmental health of children but can cause a large socio-economic burden. (Li et al., 2021).

Proper handling will minimise the occurrence of complications that will occur in children with diarrhoea, so the actions



taken by nurses must be in accordance with existing procedures and not harm the patient. (Bleil et al., 2024).

Purpose Of Concept Analysis

The purpose of the concept analysis in this study was to obtain a relevant definition of non-maleficence in paediatric patients with diarrhoea.

Determine The Purpose Of Analysis

The purpose of analysing the concept of non-maleficence in nursing is to refine and clarify concepts that are still ambiguous, get an operational definition of nonmaleficence, and get pre-existing instruments or get new instruments in the application of non-maleficence.

Determining the Determination Attribute :

The principle of non-maleficence requires that every action does not cause harm or harm either physically or psychologically, and implies that the action taken must outweigh the harm to the patient and not offend.

Identify Case Model:

A 3-year-old child was admitted to the paediatric ward with a diagnosis of acute diarrhoea, the child's parents reported that An.A had loose and watery stools for the past 5 days, accompanied by vomiting and abdominal pain, the examination results showed that the child's body temperature was 38.5°C, the child appeared dehydrated, An.A mother was a believer in watery medicine. An.A mother is someone who adheres to traditional medicine and has been giving home remedies to her child with a mixture of herbs and spices, there is a belief that the medicine made by her can

cure An.A's diarrhoea. when the lab examination showed that An.A's stool was positive for shigella bacteria, and An.A's stomach looked distended, An. A's mother was reluctant to stop giving traditional medicine. A's mother was reluctant to discontinue the administration of traditional medicine citing concerns about the potential harm or side effects of antibiotics and refused to follow the recommended treatment plan, which included oral rehydration therapy. After discussing the situation with colleagues, the nurse decided to have a gentle and respectful conversation with An.A's mother about the potential risks and benefits of various medications. A's mother about the potential risks and benefits of various treatment options, the nurse explained that she understood the mother's concerns about antibiotics and that evidence-based there was research supporting the use of oral rehydration therapy and antibiotics in treating diarrhoea caused by shigella, the nurse also offered to work with the mother in finding an alternative treatment that was in line with her cultural beliefs and values, after the conversation, An.A's mother agreed to follow the recommended treatment plan, An.A's condition improved significantly over the next few days.

Identifying a Bonderline Case:

A child had diarrhoea for three days the parents were concerned about An. R's condition but were hesitant to take her to a doctor. They believed that diarrhoea was a normal part of childhood problems and their traditional treatment of giving An.R yogurt and honey would cure. The family's decision to refuse medical treatment for An.R. this raises concerns. as a health care provider it is our duty not to put the patient



at risk as a health professional the nurse conducts Health education first to the patient's family about the risks associated with untreated diarrhoea in children such as dehydration. Electrolyte imbalance and potential complications such as sepsis. Explain the importance of medical help in cases of severe diarrhoea, offer culturally sensitive and acceptable alternatives to the family by consulting a doctor or health worker, involve the family in the decisionmaking process by discussing their concerns and goals and ensure that they are aware of the potential and consequences of not seeking medical care. By taking the above steps, it can help family in understanding the importance of seeking medical care for An.R while respecting cultural values and treatment may ultimately lead to a more informed decision-making process that prioritises An.R's wellbeing and safety.

Tabel 1 Definitions Of Non-maleficence		
Author	Definision	Karakter/ attributes
(Motloba, 2019)	Non-maleficence includes the duty not to cause	;
	harm or create a risk of harm, the duty of a doctor	•
	not to commit maleficence in treating a patient	
(Della Croce, 2023)	Do not to harm the patient is stated simply by	Non-maleficence is the
	endorsing a few moral rules.	obligation of every action not to
(Feriadi et al., 2020)	The doctor's obligation not to harm the patient is	cause harm or harm either
	stated simply by endorsing a few moral rules, do not	physically or psychologically,
	kill, do not cause pain or suffering, do not disable,	, and applies that the action taken
	do not offend	must outweigh the harm received
Bejamin D. Pirottw &	The principle that embodies 'do no harm' to take	by the patient and not offend
Benson (2023)	measures and ensure patients are not harmed by the	:
	action	
Basil Varkey (2021)	do no harm by avoiding the provision of ineffective	
	or harmful treatment as determined by whether the	;
	benefits of treatment outweigh the harms.	

Contrary Case Identification;

A 2-year-old boy named An.Z was brought to the emergency department by his parents, the child had diarrhoea that lasted for 5 days, defecation with blood and mucus, and vomiting repeatedly, with the results of the examination of vital signs obtained Body Temperature: 38 °C, Pulse Rate: 120x/min, respiration: 24x/min with the child's weight: 12kg, the doctor and nurse decided to provide therapy to treat dehydration and prevent further complications, the nurse ensured An.Z received fluid therapy to prevent dehydration, and avoid rehydration or excess fluid, monitoring An. Z's vital signs carefully to detect any signs of dehydration. Z carefully detected any signs of complications and electrolyte imbalance, and educated An.Z's parents about the proper use of ORS, the family was involved in reporting changes in An.Z's condition. An.Z's parents seemed worried about the dehydration experienced by An.Z but the parents left all actions to medical personnel, for the recovery of their child.

Defining Empirical References.

The empirical emphasis is on the handling and prevention of diarrhoea, complications that occur, health education, and working in accordance with procedures to provide maximum benefits, with the results of nonmaleficence attributes to diarrhoea patients, 4 instruments were obtained.

Firstly, the KAP (*Mother Knowledge Attitude, And Practices*) survey consists of 20 questions with 9 items of knowledge, 8 items of attitude and 3 items of practice, which aims to collect data on what is known, believed and done in a given situation. what is known, believed and done on a topic (Abdulla et al., 2021).

Second, the provision of integrated management of sick toddlers (IMCI) which consists of the steps of assessment, classification of disease, identification of actions, treatment, counselling, home care, and when to return for follow-up (Thiessen et al., 2015).

Third, the Indonesian Health Survey (SKI 2023) is conducted to assess the achievement of Indonesia's Health Development by conducting home visits with interview, measurement and health examination methods (Ianiro et al., 2018).

Fourth, in assessing dehydration in children, you can use a refractometer dehydration detector in children with diarrhoea to directly measure the refractive index of urine, which plays a very important role in assessing the degree of dehydration in children. And clinical evaluation of dehydration using *Integrated Management of Childhood Illness (IMCI)* (Purwanto et al., 2010).

CONCLUSIONS AND RECOMMENDATIONS

The content of the conclusion is the formulation of the answer to the research objectives, not a summary of the research results. Conclusions are made concisely, clearly and concisely based on results and discussion (maximum 1 page), made in

paragraph form (not numerical), contain research findings as a synthesis between the results of data analysis and the results of the discussion, as well as highlighting new things that are new. contribution to the development of medical science. The thing to note] is the consistency triangle (problems-objectives-conclusions must be consistent).

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