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School of Nursing and Midwifery

اولین کنگره بین المللی مجازی

## مراقبت امروز

برگزارکننده: معاونت تحقیقات و فناوری دانشگاه علوم پزشکی لرستان  
دانشکده پرستاری و مامایی خرم آباد

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### محورهای کنگره:

- ترویج فرهنگ ایمنی در نظامهای مراقبتی
- مراقبت مبتنی بر جامعه (Community-Based Care)
- سیاست‌گذاری در روزه سلامت
- کاربرد هوش مصنوعی در نظام سلامت
- آمادگی نظام سلامت در برابر بیوتروبیسم و تهدیدات توپیدید
- ارتقای سلامت در سطح فرد و جامعه
- مراقبت در بیماری‌های حاد و مزمن از کودکی تا سالمندی
- جوانی جمعیت، فرزندآوری و میانسازی از ساختار جمعیتی
- پیشگیری و مداخله در رفتارهای پرخاطری‌بیزه در جوانان
- سلامت خانواده با تأکید بر نقش نظام مراقبتی در کلیه گروه‌های سنی



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آدرس: لرستان خرم آباد، کیلومتر ۴ جاده خرم آباد - بروجرد،

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دانشگاه علوم پزشکی  
و خدمات بهداشتی درمانی لرستان



# کتابچه خلاصه مقالات

اولین کنگره بین المللی مراقبت امروز

معاونت تحقیقات و فناوری دانشگاه علوم پزشکی لرستان  
دانشکده پرستاری و مامایی خرم آباد

۱۴۰۴ آبان ماه ۲۷ الی ۲۸



ناشر: معاونت تحقیقات و فناوری دانشگاه علوم پزشکی و خدمات بهداشتی درمانی استان لرستان

عنوان: کتابچه خلاصه مقالات اولین کنگره بین المللی مراقبت امروز

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آدرس: لرستان خرم آباد، کیلومتر ۴ جاده خرم آباد - بروجرد، پردیس علوم پزشکی لرستان

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## پیام رئیس کنگره بین المللی مراقبت امروز

با سلام و احترام

یکی از ابعاد اصلی توسعه پایدار، تاب آوری در حوزه اجتماعی است. که به معنای توانایی جامعه برای دستیابی مداوم به رفاه اجتماعی، برابری و عدالت است. بدون شک نظامهای سلامت می‌توانند نقش بسزایی در دستیابی به اهداف توسعه پایدار داشته باشند.

با افزایش امید به زندگی، الگوی بیماری‌ها، از موارد حاد به مزمن تغییر یافته است و دنیا با بیماری‌های نوپدید و بازپدید مواجه شده است. این تغییر الگو در کنار تغییرات اقلیمی و بحران‌های بیوتوربیسم باعث پیچیدگی، عدم قطعیت و چالش‌های فرازینده، در تامین سلامت جامعه شده است. تحول در مراقبت، نیازمند نگاهی جامع، مبتنی بر شواهد و انسان محور است. کنگره بین المللی «مراقبت امروز» بر آن است تا با گرد هم آوردن متخصصان، سیاست‌گذاران، پژوهشگران و نوآوران حوزه سلامت از سراسر دنیا، بستری برای تبادل تجربیات حوزه مراقبت مبتنی بر شواهد و گسترش مراقبت بین‌رشته‌ای، فراهم نماید. به عنوان رئیس کنگره، باور دارم که مواجهه هوشمندانه با چالش‌های امروز و فردای نظام سلامت، تنها در سایه تلفیق دانش علمی، تجربه بالینی، و درک عمیق از ساختار فرهنگی و اجتماعی ممکن خواهد بود و رویداد پیشرو، گام مهمی در مسیر این هم‌افزایی است.

امید است آنچه در این کنگره ارائه می‌شود، زمینه ساز دسترسی همه جوامع، به خدمات سلامت اثربخش باشد.

رئیس کنگره بین المللی مجازی مراقبت امروز

دکتر جلال الدین امیری

## پیام دبیر علمی کنگره بین المللی مراقبت امروز

با سلام و احترام

اینچنان به عنوان دبیر علمی «کنگره بین المللی مراقبت امروز»، بسی خرسندم که این رویداد علمی در روزهای ۲۷ و ۲۸ آبان ماه ۱۴۰۴ با مشارکت علمی صاحب نظران و متخصصان حوزه های مرتبط با عرصه مراقبت برگزار گردید. این کنگره بستره ارزشمند برای تبادل دانش، ارائه آخرین دستاوردهای پژوهشی و اشتراک گذاری تجربیات نوین در حوزه مراقبت بود. کتابچه حاضر، گزیده ای از مقالات علمی منتخب و خلاصه های یافته های ارزشمند ارائه شده در این کنگره است که می تواند مرجعی مفید برای اساتید، پژوهشگران و دانشجویان این عرصه باشد. امید آن داریم این تلاش جمعی گامی در جهت ارتقای کیفیت مراقبت و توسعه دانش کاربردی در کشور باشد.

از تمامی سخنرانان، حاضران و اعضای کمیته های علمی و اجرایی که در به ثمر رسیدن این رویداد نقش داشتند، صمیمانه سپاسگزارم.

دبیر علمی کنگره بین المللی مجازی مراقبت امروز

دکتر پرستو کردستانی مقدم

## پیام دبیر اجرایی کنگره بین المللی مراقبت امروز

با سلام و احترام

باعث خرسندی و افتخار است که «کنگره بین المللی مجازی مراقبت امروز» با همراهی ارزشمند شما به شکل موفقیت‌آمیز به پایان رسید. حضور پژوهشگران، اساتید و متخصصان این حوزه نقش مهمی در غنای علمی این رویداد داشت و بستری برای تبادل دانش و ارائه دستاوردهای نوین فراهم کرد. از تلاش صمیمانه اعضای کمیته‌های علمی و اجرایی و مشارکت فعال پژوهشگران در ارسال و ارائه مقالات سپاسگزارم. امید است مجموعه خلاصه مقالات حاضر بتواند گامی مؤثر در پیشبرد پژوهش و ارتقای کیفیت مراقبت در سطح ملی و بین المللی باشد.

دبیر اجرایی کنگره بین المللی مجازی مراقبت امروز

دکتر فاطمه جنانی

## ارکان کنگره بین المللی مراقبت امروز

ساختار سازمانی

### رئيس کنگره

دکتر جلال الدین امیری



### دییر کل کنگره

دکتر امید علی عادلی



### مدیر اجرایی کنگره

دکتر بهرام کمره ئی



### دییر علمی کنگره

دکتر پرستو کردستانی مقدم



### دییر اجرایی کنگره

دکتر فاطمه جنانی



### دییر علمی دانشجویی کنگره

آقای محمد سوری



### دییر اجرایی دانشجویی کنگره

خانم الناز برناسی



کمیته علمی بین المللی کنگره مراقبت امروز

Row	First and last name	Academic rank	Workplace	Field of study
1	Aidin Aryankhesal	Senior research associate	England	<b>Health Sciences</b>
2	Mariano Martini	Professor Associate	Italy	<b>Health Sciences</b>
3	Nicola Luigi Bragazzi	Post doctoral Researcher	Germany	<b>Biophysics and epidemiology</b>
4	Tauseef Ahmad	KSU	China	<b>Epidemiology and public Health</b>
5	Faezeh Mahdavi	Research assistant	USA	<b>Health services research</b>
6	Kambiz Bahaadinbeigy	Professor Associate	Australia	<b>medical information Digital</b>
7	Mahnaz Samadbeik	Senior Research Fellow	Queensland	<b>Digital Health and health Information</b>
8	Hossein Jabbari	Neurologist	Austria	<b>Geriatric, Demantia</b>
9	Ahmadreza Baki	MSc of Critical Care Nursing	Canada	<b>Palliative Care</b>
10	Suzanne Asari Hojat	Professor Associate	France	<b>Hematologist</b>

کمیته علمی (براساس حروف الفبا)

۱. ماندانا آرش	۳۱. فاطمه زارع	۶۱. زهرا قربانی
۲. حسن آبوکرمی	۳۲. سودابه زارع	۶۲. پرستو کردستانی مقدم
۳. پرستو امیری	۳۳. بهار زرگری	۶۳. کیمیا کرمی
۴. جلال الدین امیری	۳۴. مرضیه رشیدی پور	۶۴. فاطمه کورکی نژاد قرائی
۵. سجاد امیری بنیاد	۳۵. جعفر رضاییان	۶۵. مریم کوشکی
۶. فاطمه استبصاری	۳۶. ماندانا ساکی	۶۶. زهرا گلوي
۷. سبا براتی	۳۷. شهین سالاروند	۶۷. فاطمه گودرزی
۸. فاطمه بستانی	۳۸. سپه وند اصغر	۶۸. سحر مالمیر
۹. پرستو بهاروند	۳۹. الهام سپهوند	۶۹. فاطمه محمدی پور
۱۰. مسعود بیزادی فر	۴۰. نسرین سرایی	۷۰. هرمز محمودوند
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۱۲. شورانگیز بیرانوند	۴۲. محمد سیف	۷۲. مهناز مردانی
۱۳. سهیلا پرداده بیرانوند	۴۳. کیانا شاه زمانی	۷۳. محمد مستقر
۱۴. محمدحسین تکلیف	۴۴. محمد شاه منصوری	۷۴. مژگان مسعودی
۱۵. فاطمه جنانی	۴۵. آرزو شاهسواری	۷۵. فریده ملکشاهی
۱۶. عرفان جودکی راد	۴۶. جواد شعبان زاده	۷۶. یلدا موسی زاده
۱۷. فرحناز چنگایی	۴۷. راضیه شیرزادگان	۷۷. مرجان میرزا نیا
۱۸. نیلوفر چوبین	۴۸. حافظ صفری	۷۸. زهرا نجفی علیا
۱۹. محمد حسن زاده	۴۹. مرتضی صولتی کوشکفاضی	۷۹. بابک هادیان
۲۰. مریم حسنی	۵۰. نیایش طهماسبی نژاد	۸۰. مائدۀ همراه سیانی
۲۱. رضا حسین آبادی	۵۱. طاهره طولابی	۸۱. فاطمه ولی زاده
۲۲. صنم حسین پورداش آنانی	۵۲. امید علی عادلی	۸۲. سجاد یاراحمدی
۲۳. هیرو حمزه پور	۵۳. مریم عسگری	۸۳. جواد یوسفی لبني
۲۴. حشمت الله حیدری	۵۴. سمیرا علیرضائی	
۲۵. شیما حیدری	۵۵. مهرداد غلامی	
۲۶. امیرحسین خاکباز	۵۶. نگین فتحی	
۲۷. زینب خدایاری مطلق	۵۷. نگین فرید	
۲۸. زهرا خلیل زاده فرسنگی	۵۸. معصومه فولادوندی	
۲۹. ناهید خوشناموند	۵۹. فاطمه قاسمی	
۳۰. فائزه رستمیان	۶۰. جواد قاسمیان یادگاری	

کمیته اجرایی (براساس حروف الفبا)

۱. علی امراهی
۲. مهرناز بشیری
۳. الناز بیرانوند
۴. مهناز بیرانوند
۵. فاطمه جنانی
۶. اسداله حسنی
۷. مریم حسنی
۸. حشمت الله حیدری
۹. فرشته دلفان
۱۰. مریم دلفان
۱۱. بهمن راد
۱۲. رستم رحیمی
۱۳. محمد رضا دوسيده
۱۴. نگین ساجدی مهر
۱۵. امين سلاحورزی
۱۶. حدیث سوری نژاد
۱۷. کیانا شاه زمانی
۱۸. زهرا بشیری
۱۹. احمد عیدی
۲۰. مجتبی فلاح
۲۱. فاطمه قاسمی
۲۲. پرستو کردستانی مقدم
۲۳. کیانوش کرم پور
۲۴. سمانه کرمی
۲۵. محمد کریمی
۲۶. بهرام کمره ئی
۲۷. میلاد مهران نژاد
۲۸. فرانک موسوی
۲۹. کیمیا نادری
۳۰. سارا نظر زاده
۳۱. فرشته نظری پور
۳۲. فاطمه ولی زاده
۳۳. فاطمه ویسی
۳۴. سجاد یار احمدی
۳۵. فاطمه یوسفوند

کمیته اجرایی دانشجویی (براساس حروف الفبا)

کمیته علمی دانشجویی (براساس حروف الفبا)

۱. الناز برناسی	۱. نگار احمدی فر
۲. ماهان پیرزاد	۲. سکینه اکبری
۳. پریا سلطانی	۳. نسرین ایمانی فر
۴. محمد سوری	۴. علی بجانی
۵. هدیه کشمیری	۵. مرجان بدری
	۶. الناز برناسی
	۷. پگاه پدرام
	۸. مهسا تبیانیان
	۹. شهین توحیدی
	۱۰. سارا حبیب زاده
	۱۱. لیدا حسن زاده
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	۱۳. نگین رشتی
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	۱۶. پریا سلطانی
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	۱۹. علی صفری
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خانم دکتر مریم مدد نشاط	فرآیند سازگاری با تنها یی در میان سالماندان: یک مطالعه کیفی
خانم زهره نورالله	بررسی تأثیر اجرای مدل پرستار سلامت خانواده بر خودمدیریتی سالماندان مبتلا به فشار خون بالا: یک کارآزمایی تصادفی کنترل شده
آقای دکتر جواد زارعی	طراحی مدل مفهومی پرونده الکترونیک سلامت مراقبت در منزل
خانم ثریا نجاتی	بررسی تأثیر برنامه خود مدیریتی بر خودکاراندی زنان سالماند غرب تهران پرسش و پاسخ
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موضع: ارتقای سلامت در سطح فرد و جامعه		سه شنبه ۱۴۰۴/۰۸/۲۷
خانم دکتر خاطره عنبری		پانل اول- Room2
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آقای دکتر مهدی حقی، خانم دکتر فریده ملکشاهی، خانم دکتر ماندان اساکی، خانم دکتر افسانه بیرانوند، خانم دکتر شهین سالاروند، خانم دکتر زینب خدایاری، خانم دکتر آرزو شاهسواری، خانم دکتر فاطمه یاری	اعضای پانل	
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خانم دکتر شهلا محمدی ریزی	عوامل تسهیل‌کننده مراقبت‌های در منزل بیماران با آسیب شدید مغزی در ایران: چشم‌اندازی از مراقبت کل نگر در ارتقای سلامت جامعه	۹:۴۰-۹:۵۰
خانم دکتر فاطمه الحانی	اثریخشی اجرای الگوی توانمندسازی خانواده محور بر شاخص کیفیت زندگی پوستی بیماران زن مبتلا به پمیگیوس و لکاریس	۹:۵۰-۱۰:۰۰
خانم دکتر سرور مصلح	نگرانی‌های ناگفته: بیان سوالات و نیازهای بیماران تحت عمل جراحی	۱۰:۰۰-۱۰:۱۰
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آقای دکتر سجاد یاراحمدی	عوامل تعیین‌کننده هوش هیجانی در مراقبان خانوادگی بیماران سرطانی: یک مطالعه مقطعی	۱۰:۲۰-۱۰:۳۰
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موضع: سلامت مادر، کودک، فرزند آوری جمعیت		پوستر (بخش اول) - سه شنبه ۱۴۰۴/۰۸/۲۷
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خانم دکتر سهیلا اکبری	تجربه خشونت و تعیین کننده‌های آن در فرایند زایمان: یک مطالعه کیفی از دیدگاه ذینفعان	۱۰:۵۵-۱۱:۰۵
خانم دکتر سید فهیم ابراندوسن	اثریخشی مداخله آموزشی ترکیبی بر اهداف باروری در زنان تازه ازدواج کرده شهر بیرون از	۱۱:۰۵-۱۱:۱۵
خانم خدیجه برات محمودی	<b>Explaining the effect of management styles on the desire to have children</b>	۱۱:۱۵-۱۱:۲۵
خانم دکتر لیدا موسی زاده	تسکین درد با رایج‌هه نعنا: رویکردی غیردارویی در مراقبت از کودکان پس از جراحی شکم	۱۱:۲۵-۱۱:۳۵
خانم دکتر فاطمه قاسمی	مقایسه تاثیر ماساژ فشاری نقطه <b>Hegu</b> با نقطه <b>Taixi-Kunlun</b> بر شاخص‌های فیزیولوژیک و مدت زمان گریه ناشی از تزریق عضلانی ویتامین K در نوزادان نارس: یک مطالعه کار آزمایی بالینی	۱۱:۳۵-۱۱:۴۵
خانم هانیه گودرزی	پرسش و پاسخ	۱۱:۴۵-۱۱:۵۵
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<b>سخنرانی جامع: سرکارخانم دکتر کیانا شاه زمانی « HPV مدیریت »</b>		۱۰:۵۰-۱۱:۱۰
<b>سه شنبه ۱۴۰۴/۰۸/۲۷</b> <b>پانل دوم-Room2</b> <b>ساعت پانل: ۱۱:۱۰-۱۱:۵۵</b> <b>موضوع: پیشگیری از رفتارهای پرخطر، رویکردهای نوین در سلامت جوانان</b>		
<b>آقای دکتر امید علی عادلی</b> <b>مسئول پانل</b> <b>آقای دکتر حشمت الله حیدری، آقای دکتر ابراهیم فلاحتی، خانم دکتر مریم حسنی، خانم دکتر حدیث سوری نژاد، آقای دکتر سجاد یاراحمدی، خانم دکتر شورانگیز بیرانوند، خانم دکتر خدیجه حیدری زاده، آقای دکتر سعید فروغی</b> <b>اعضای پانل</b> <b>معرفی پانل</b> <b>۱۱:۱۰-۱۱:۱۵</b>		
<b>آقای دکتر اسماعیل حسین زاده</b> <b>تمایل پرستاران به مراقبت از بیماران مبتلا به بیماری عفونی: یک مطالعه تحلیل محتوا</b> <b>۱۱:۱۵-۱۱:۲۵</b>		
<b>خانم فائزه شمس</b> <b>شیوع و عوامل خطر عفونت HPV در میان زنان زندانی در استان لرستان، ایران</b> <b>۱۱:۲۵-۱۱:۳۵</b>		
<b>خانم دکتر زهرا رحیمی خلیفه کندی</b> <b>From Awareness to Action: The Role of Iranian Mothers in the Prevention and Confrontation of Child Sexual Abuse (A Community-Based Study)</b> <b>پرسش و پاسخ</b> <b>نماز و استراحت</b> <b>۱۱:۳۵-۱۱:۴۵</b> <b>۱۱:۴۵-۱۱:۵۵</b> <b>۱۱:۵۵-۱۲:۳۰</b>		
<b>پوستر(بخش دوم) - سه شنبه ۱۴۰۴/۰۸/۲۷</b> <b>Room3</b>		
<b>نمایش پوستر</b> <b>۱۱:۰۵-۱۱:۵۵</b>		
<b>سه شنبه ۱۴۰۴/۰۸/۲۷</b> <b>پانل سوم-Room1</b> <b>ساعت پانل: ۱۲:۲۰-۱۳:۴۰</b> <b>ارائه مقالات بخش دانشجویی</b>		
<b>خانم دکتر لیلا فتحی</b> <b>مسئول پانل</b> <b>خانم دکتر سحر مالعیر، خانم منصوره روئین تن، آقای مهران نقی بیرانوند، آقای محمد سویری، آقای اکبر جوادی، خانم سکینه اکبری، خانم پریا سلطانی، آقای امیر حسین زمانی</b> <b>اعضای پانل</b> <b>معرفی پانل</b> <b>۱۲:۲۰-۱۲:۲۵</b>		
<b>خانم الناز برناسی</b> <b>نقش هوش مصنوعی در تشخیص زودهنگام سندروم HELLP در دوران بارداری</b> <b>۱۲:۲۵-۱۲:۳۵</b>		
<b>خانم زهرا شادمان پور</b> <b>نقض حقوق بیمار از طریق فرآوری مجدد ابزارهای جراحی یکبار مصرف در رویه‌های کم‌تهاجمی</b> <b>۱۲:۳۵-۱۲:۴۵</b>		
<b>خانم دکتر مهرناز مرادی</b> <b>AI-Driven Innovations in Oral and Maxillofacial Surgery: Toward Smarter Diagnosis, Surgical Planning, and Patient Care</b> <b>بررسی اثربخشی آموزش خودمراقبتی مبتنی بر چرخه یادگیری هفت مرحله‌ای (E7) بر سعادت، پریشانی و مفهوم خویشتن زنان باردار مراجعته‌کننده به مراکز بهداشتی درمانی</b> <b>۱۲:۴۵-۱۲:۵۵</b>		
<b>خانم فاطمه پریمی</b> <b>بعاد سبک زندگی سالم در میان پرستاران ایرانی: یک مطالعه توصیفی-همبستگی مقطعی از تأثیر متفاوت سواد سلامت الکترونیک بر رفتارهای تندرستی</b> <b>۱۲:۵۵-۱۳:۰۵</b>		
<b>آقای بهنام مرادی</b> <b>پرسش و پاسخ</b> <b>۱۳:۰۵-۱۳:۱۵</b>		
<b>پرسش و پاسخ</b> <b>۱۳:۱۵-۱۳:۴۰</b>		

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خانم دکتر طاهره طولابی	مسئول پانل	
آقای دکتر سعید چوبکار، آقای دکتر مهرداد نامداری، آقای دکتر بابک هادیان، خانم دکتر فاطمه محمدی پور، آقای دکتر محمد غلامی، خانم دکتر الهام سپهوند، خانم دکتر فاطمه گودرزی، خانم دکتر سمیرا بیرونند	اعضای پانل	
معرفی پانل	۹:۱۰-۹:۲۰	
خانم رنوفه کریمی	نقش آموزش خودمراقبتی در ارتقای خودکارآمدی بیماران مبتلا به مولتیپل اسکلروزیس	۹:۲۰-۹:۳۰
خانم طاهره سیستانی	تأثیر آموزش خودمراقبتی مبتنی بر الگوی اورم از طریق پادکست بر نیازهای مراقبت حمایتی بیماران مبتلا به لنفوم: یک مطالعه تجربی	۹:۳۰-۹:۴۰
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سخنرانی جامع: جناب آقای دکتر محمد باقر دولتشاهی «انقلاب هوش مصنوعی در نظام سلامت: چالشها و فرصت‌ها»	۹:۱۰-۹:۲۵	
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آقای دکتر محمد باقر دولتشاهی	مسئول پانل	
آقای دکتر علی گراؤند، آقای دکتر مهرداد غلامی، خانم دکتر پرستو کردستانی مقدم، خانم دکتر پرستو امیری، آقای دکتر فرشید محمودی	اعضای پانل	
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خانم دکتر پرستوامیری	نقش دستیاران مجازی هوشمند برای ارایه مراقبتهای بهداشتی شخصی سازی شده و دسترسی ۲۴ ساعته به اطلاعات پزشکی: یک بررسی سیستماتیک	۹:۳۵-۹:۴۵
خانم دکتر فاطمه موجودی	پلتفرم هوشمند "آرام خواب": ابزاری مبتنی بر هوش مصنوعی برای ارتقاء کیفیت خواب و سلامت عمومی در ایرانی	۹:۴۵-۹:۵۵
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خانم دکتر مانده قادر مزی	کاربردهوش مصنوعی در روانپرستاری: یک مروری سیستماتیک از چتباتها، پایش دیجیتال، مدل‌های بیش‌بین و سیستم‌های پردازش زبان	۱۰:۰۵-۱۰:۱۵
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Room3

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سخنران مدعو: جناب آقای دکتر علی محمد مصدق راد  
« تقویت تاب آوری سازمانهای بهداشتی در اپیدمی ها و پاندمی ها »

۱۰:۳۰-۱۰:۴۵

چهارشنبه ۱۴۰۴/۰۸/۲۸

Room1- پانل دوم

ساعت پانل دوم: ۱۰:۴۵-۱۱:۵۰

موضوع: آموخته های نظام سلامت در بحران ها و تهدیدات نویدید، سیاستگذاری در نظام سلامت

آقای دکتر مسعود پهزادی فر	مسئول پانل
آقای دکتر بهرام کمره ئی ، آقای دکتر علی اصغر کیانی، آقای دکتر امین طالبی، آقای دکتر محمود طاهریان، آقای دکتر اصغر سپهوند، خانم دکتر فاطمه بستامی، خانم فاطمه جعفری پور	اعضای پانل
معرفی پانل	۱۰:۴۵-۱۰:۵۵
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موضع: پژوهشکی پاسخگو و آموزش جامعه محور		آقای دکتر هرمز محمودوند
خانم دکتر شیرین حسنوند، آقای دکتر غلام رضا شهسواری، آقای دکتر علی شیخیان، خانم دکتر مژگان خادمی، خانم دکتر شیرین قاضی، خانم دکتر کیمیا کرمی، خانم دکتر معصومه فولادوندی		اعضای پانل
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خانم دکتر شورانگیز بیرانوند	صلاحیت فرهنگی در دانشجویان پرستاری و ارتباط آن با تاب آوری و همدلی؛ یک مطالعه توصیفی	۱۰:۵۰-۱۱:۰۰
خانم دکتر فاطمه شجاعی	تعهد اخلاقی؛ راهبردی برای توسعه شایستگی‌های آموزش الکترونیکی و ارتقای سلامت جامعه در آموزش پرستاری	۱۱:۰۰-۱۱:۱۰
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خانم حانیه شادیان	صلاحیت بالینی دانشجویان پرستاری و ارتباط آن با ادراک ایمنی بیمار در سال ۲۰۲۴؛ یک تحلیل مقطعی از دانشجویان پرستاری ایران	۱۱:۲۰-۱۱:۳۰
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نمایش و استراحت		۱۱:۵۰-۱۲:۲۰
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چهارشنبه ۱۴۰۴/۰۸/۲۸		
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خانم الهه سرلک، خانم سحر ذوالنوری، آقای اصغر محمدی، آقای اکبر جوادی، خانم الناز برناسی، خانم شکیبا موسیوند، خانم نسرین ایمانی فر، خانم اکرم منصوری		اعضای پانل
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# ORAL PRESENTATION

0-1

## Comparing the undergraduate nursing curriculum in Iran and Pakistan: A comparative study

Mansooreh Rooeintan, Seyedeh Fatemeh Ghasemi, Sajad Yarahmadi\*

**Background:** Nursing education programs need to change. Educational institutions should regularly review and revise them to provide an adequate curriculum. In many countries, comparative research used to review and revise curricula. Therefore, this comparative study conducted with the aim of comparing the undergraduate nursing curriculum of Iran and Pakistan in 2025.

**Methods:** This descriptive-comparative study conducted based on the Beredy model. To conduct this comparative comparison, the undergraduate nursing curriculum of the Ministry of Health and Medical Education of Iran, approved by the 85th session of the Supreme Council for Medical Sciences Planning in 2023, received. In addition, the undergraduate nursing curriculum of Pakistan in 2024 received from the website of the Nursing and Midwifery Council of Pakistan.

**Results:** The findings showed that both countries, despite having similarities (health promotion as the overall goal, considering specific job positions for graduates, the need to complete a four-year course to obtain a bachelor's degree in nursing, and the commonality of many course units), differ in matters such as history, mission, vision, and curriculum content.

**Conclusion:** Examining the mental and physical health of candidates through interviews during admission and placing course units to strengthen communication skills, critical thinking, entrepreneurship, familiarity with the theoretical foundations of nursing, familiarity with the country's constitution, familiarity with cultural care, and healthcare trends and issues are among the issues that should be considered in the Iranian educational program.

**Keywords:** Curriculum, Bachelor of Nursing, Beredy's Model, comparative study

O-2

## Healthy Lifestyle Dimensions Among Iranian Nurses: A Descriptive Correlational Cross Sectional Study of the Differential Impact of eHealth Literacy on Wellness Behaviors

Mohammadjavad Hosseiniabadi Farahani\*, Behnam Moradi, Mohammadreza Dinmohammadi, Mohammad Saatchi

**Background:** Nurses play a pivotal role in healthcare delivery and health education. However, their demanding work environments—characterized by irregular shifts and high stress—often hinder their ability to adopt healthy lifestyles, compromising both their well-being and their effectiveness as role models for health promotion. With the rise of digital health technologies, eHealth literacy—the capacity to seek, evaluate, and apply online health information—has emerged as a critical factor influencing health-promoting behaviors among healthcare professionals.

**Objective:** This study aimed to examine the relationship between eHealth literacy and healthy lifestyle behaviors among Iranian nurses, with a particular focus on specific lifestyle dimensions.

**Methods:** A cross-sectional descriptive analytical study was conducted in Tehran, Iran, from November 2024 to February 2025. A total of 334 registered nurses from seven public and teaching hospitals participated. Data were collected using the eHealth Literacy Scale (eHEALS) and the Health Promoting Lifestyle Profile II (HPLP II). Spearman's correlation and multivariate linear regression analyses were performed, with statistical significance set at  $p < 0.05$ .

**Results:** Most nurses (70.1%) demonstrated moderate eHealth literacy, while 53.3% achieved good overall healthy lifestyle scores and none scored low. A significant positive correlation was found between eHealth literacy and overall healthy lifestyle ( $r = 0.565$ ,  $p < 0.001$ ), with the strongest associations observed in spiritual growth ( $r = 0.537$ ), health responsibility ( $r = 0.437$ ), and interpersonal relations ( $r = 0.467$ ). Associations with stress management ( $r = 0.318$ ), nutrition ( $r = 0.321$ ), and physical activity ( $r = 0.289$ ) were weaker but remained statistically significant, highlighting areas where workplace factors such as rotating shifts may limit nurses' ability to engage in these behaviors.

**Conclusion:** Enhanced eHealth literacy is associated with healthier lifestyles among nurses, especially in the domains of spiritual growth, health responsibility, and interpersonal relations, thereby fostering more resilient health management. The weaker associations with physical activity and stress management highlight workplace barriers such as rotating shifts. To empower nurses' well-being and advocacy roles in Iran, comprehensive strategies—including targeted eHealth literacy training, flexible scheduling, and dedicated wellness programs—are essential.

**Keywords:** eHealth literacy, healthy lifestyle, nurses, health-promoting behaviors, digital health

O-3

## Determinants of Emotional Intelligence in Family Caregivers of Cancer Patients: A Cross-Sectional Study

Sajad Yarahmadi\*, Shakiba Moosivand, Mohammad Gholami

**Background:** Caring for individuals with cancer demands a high level of emotional intelligence (EI) from family caregivers, enabling them to comprehend both their own emotions and those of others, and to manage emotional challenges effectively. This study aimed to explore the factors influencing emotional intelligence and examine its association with spiritual intelligence, coping strategies, and caregivers' knowledge and experience regarding pain in the context of Iranian family caregivers.

**Methods:** This descriptive cross-sectional study was conducted between 2020 and 2021, involving 226 family caregivers of cancer patients. Data were gathered using the Wong and Law Emotional Intelligence Scale, King's Spiritual Intelligence Questionnaire, the Brief COPE inventory, and the Family Pain Questionnaire. Correlational analyses were performed, followed by linear regression to identify significant predictors of emotional intelligence.

**Results:** Emotional intelligence was significantly associated with caregivers' age ( $r = 0.20, p = 0.003$ ), level of education ( $r = 0.15, p = 0.032$ ), duration of caregiving ( $r = 0.15, p = 0.032$ ), and spiritual intelligence ( $r = 0.30, p < 0.001$ ). The regression model explained 12.4% of the variance in emotional intelligence. Among the predictors, age ( $\beta = 0.16, p = 0.021$ ) and spiritual intelligence ( $\beta = 0.26, p < 0.001$ ) emerged as significant contributors.

**Conclusion:** Emotional intelligence in family caregivers of cancer patients is linked to factors such as age, educational background, length of caregiving, and spiritual intelligence. However, only age and spiritual intelligence were identified as significant predictors. These findings highlight the importance of promoting spiritual and emotional development in caregiver support programs.

**Keywords:** Cancer Patients, Coping, Emotional intelligence, Family Caregiver, Pain control, Spiritual intelligence

O-4

## Explaining the effect of management styles on the desire to have children

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**Background:** The desire to have children is a multifaceted phenomenon that is influenced by individual, social, economic, and cultural factors. This study examines the important role of management styles in workplaces on employees' desire to start a family and have children.

**Methods:** This study was conducted using a qualitative research approach and in-depth, semi-structured interview tools. The sample was selected purposively, including 20 married employees with at least five years of work experience in different departments of the health system. The collected data were examined using thematic analysis to extract main and sub-themes related to the employees' experience.

**Results:** The results of the analysis indicate two main themes influencing the desire to have children: Main Theme 1: Supportive Management Styles: Managers who provide flexibility, mutual understanding, and organizational support (e.g., parental leave, comprehensive insurance) strengthen the desire to have children. This includes the sub-themes of "work-life balance," "job security," and "empathetic environment," which give employees more confidence to plan a family. Main Theme 2: Controlling Management Styles: Managers who are rigid and inflexible, by increasing work pressure and stress, reduce or delay the decision to have children. Related sub-themes in this section include "extreme work pressure" and "job insecurity."

**Conclusion:** This study emphasizes the importance of management styles in shaping childbearing decisions. Promoting a supportive and flexible organizational culture can act as a powerful motivator for increasing the desire to have children and promoting employee well-being.

**Keywords:** Management style, childbearing, qualitative research

O-5

### Investigating the effects of implementing the family health nurse model on the self-management of elderly individuals with hypertension:a randomized controlled trial

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**Background:** Hypertension is one of the most common diseases among the elderly, and a lack of control and attention to this condition poses ongoing threats to those affected. Conversely, self-management of this disease can reduce its complications. The family health nurse plays multiple roles, including conducting home visits, collecting evidence, preventing disease, and detecting and treating problems.

**Methods:** This study was a randomized controlled trial (RCT) with two groups: test and control. It was conducted on 76 elderly individuals aged 60-74 with hypertension in Isfahan, Iran, from August 2023 to March 2024. Interventions based on the family health nurse model were implemented for the intervention group, including four individual and family education sessions, three self-help group sessions, in- and outpatient follow-up, and at least two home visit sessions. The control group received routine care from health centers. Data collection involved a two-part questionnaire comprising a demographic questionnaire and a self-management questionnaire for chronic diseases from Stanford University. The questionnaire was administered before, immediately after, and three months following the intervention, along with blood pressure measurements. Data analysis was performed using SPSS version 18 software at a significance level of 0.05.

**Results:** There was no statistically significant difference between the test and control groups in terms of demographics before the intervention ( $p > 0.05$ ). However, the mean self-management score and self-management dimensions in the two experimental and control groups after the intervention and 3 months after the intervention are statistically significant.  $P < 0.05$ . also the mean systolic and diastolic blood pressure in the two experimental and control groups scores differed after the intervention and three months later ( $p < 0.05$ ).

**Conclusion:** Implementing the family health nurse model enhanced self-management of hypertension in the elderly and reduced systolic and diastolic blood pressure scores in the test group compared to the control group.

**Keywords:** Elderly, family nurse, hypertension, model, self-management

O-6

## Association Between Short Sleep and Body Mass Index, Hypertension Among Acute Coronary Syndrome Patients in Coronary Care Unit

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**Introduction:** Patients with coronary diseases admitted to special care unit often suffer from sleep disorders, which may cause physiological changes and adversely affect patient's health. The relationship between sleep disorders and obesity is an important factor in studies on sleep disorders and other chronic diseases in all groups, including cardiovascular diseases. Understanding this relationship may increase the chance of progress in effective medical interventions in sleep disorders and obesity. This study was designed to evaluate the association between short sleep and Body Mass Index (BMI), hypertension among acute coronary syndrome patients.

**Materials and Methods:** In this descriptive analytical study, 221 coronary patients admitted to coronary care unit and general wards were investigated. Data were collected through a researcher-made questionnaire whose validity and reliability had been confirmed. Data were analyzed with SPSS-16 software.

**Results:** A total of 221 patients with acute coronary diseases (including myocardial infarction and angina pectoris) with a mean age of 61.27 years were studied, of whom 61.5% were male and 38.5% were female. A significant association was observed between short sleep and higher BMI ( $P=0.000$ ). About half the patients (49.3%) had a history of hypertension, and sleep disorders were also significantly related to hypertension ( $P=0.006$ ).

**Discussion:** In this study, sleep disorders were patients' main complaint. Researchers found that patients with less than 5 hours or more than 9 hours sleep at night were more likely to have hypertension compared to patients that slept 7-8 hours. Lack of sleep affects metabolism, and daily energy expenditure reduces with increased immobility. In this study, a significant relationship was observed between BMI and sleep duration among hospitalized patients in coronary care unit ( $P=0.000$ ), and sleep disorders increased with higher BMI. Short of sleep increases sympathetic tonus, cortisol level, and activation of inflammatory pathways, impairing glucose metabolism and contributing to overweight, increased visceral fat.

**Conclusion:** Our findings suggest that poor sleep quality, is related to higher BMI and hypertension among acute coronary syndrome patients.

**Keywords:** sleep disorders, body mass index, coronary disease, coronary care unit

O-7

## Comparison of the effect of foot reflexology and cognitive-behavioral therapy on symptoms of premenstrual syndrome

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**Background and Objective:** Premenstrual syndrome is a common disorder among women of reproductive age that occurs in late luteal phase and sometimes continues until the end of menstruation. This syndrome includes physical and mental symptoms. The etiology of this syndrome is unknown, but some factors may be effective on it. This study aimed to compare the effect of foot reflexology and cognitive-behavioral therapy on premenstrual syndrome symptoms in female students of Lorestan University of Medical Sciences.

**Methods:** This study was a randomized clinical trial in female students living in dormitories of Lorestan University of Medical Sciences. The sample size was 120 and the sampling was randomly blocked. The study groups included foot reflexology, cognitive-behavioral therapy and control with equal sample size. Data collection tool was PSST questionnaire which was completed in two cycles before intervention, immediately after intervention and two cycles of follow-up after intervention.

**Results:** In the groups of foot reflexology and cognitive-behavioral therapy, there was a significant difference in the severity of PMS symptoms before and immediately after intervention and the first and second months of follow-up ( $P<0.001$ ), but there was no significant difference in the control group at different times ( $P>0.05$ ). There was no significant difference between the two groups of foot reflexology and cognitive-behavioral therapy ( $P>0.05$ ).

**Conclusion:** Techniques used in cognitive-behavioral therapy and foot reflexology can reduce physical and psychological symptoms of premenstrual syndrome and consequently increase the quality of life of individuals during this period. It also provides the necessary grounds for increasing the efficiency and active presence of women in society.

**Keywords:** Premenstrual syndrome, Foot reflexology, Cognitive-behavioral therapy

O-8

## Investigation the Effectiveness of Self-Care Education Based on the Seven-Step Learning Cycle (7E), on Health Literacy, Distress, and Self-Concept of Pregnant Women Referring to Health Care Center

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**Background:** Pregnancy is a transformative period that significantly impacts women's attitudes, experiences, and health behaviors. Nurses play an essential role in improving self-concept, promoting self-care, and reducing distress through educational interventions. This study aimed to evaluate the effect of self-care education based on the seven-step learning cycle on pregnancy health literacy, pregnancy concerns, and self-concept among pregnant women attending health care centers.

**Methods:** This quasi-experimental study applied a pre-test–post-test design with intervention and control groups. Cluster sampling was used: one health network was randomly selected from three main networks, followed by 10 health centers, randomly assigned to intervention (n=5) and control (n=5) groups. The sample included 100 healthy pregnant women. Data collection instruments included a demographic questionnaire, Mojoyinola Maternal Health Literacy Scale, Aldersey and Lane Pregnancy Distress Scale, and Beck Self-Concept Questionnaire. All participants completed the questionnaires before and after the intervention. The intervention group received self-care education based on the seven-step learning cycle, while the control group received routine education.

**Results:** The mean age of participants was  $29.75 \pm 5.05$  years, mean duration of marriage  $6.93 \pm 4.48$  years, and mean gestational age  $20.21 \pm 7.81$  weeks. No significant association was found between demographic variables and outcome measures ( $p > 0.05$ ). After the intervention, the intervention group showed significant improvements in health literacy, self-concept, and pregnancy concerns ( $p < 0.001$ ), while the control group showed no significant changes except for health literacy ( $p = 0.005$ ).

**Conclusion:** Self-care education using the seven-step learning cycle effectively enhances health literacy and psychological outcomes in pregnant women. Incorporating this educational approach into prenatal care programs is recommended.

**Keywords:** Self Care, Health Education, Learning, Health Literacy, Psychological Distress, Self Concept, Pregnancy

## Application of Madeleine Leininger's Cultural Care Theory in Nursing

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**Background:** Leininger's theory of cultural care, by presenting its conceptual model called the Sunrise Model, helps nurses and other health care providers in explaining the meanings of care to consider patients' values, beliefs, and lifestyles as accurate and reliable bases for culturally specific care decisions and actions . The present study was conducted to determine the application of Madeleine Leininger's theory of cultural care in nursing.

**Methods:** The present study was a narrative review study in which published studies with the keywords: Madeleine Leininger's theory of intercultural care, Leininger's theory of cultural diversity of care, education, nursing education, nursing students, nursing models in education, clinical practice, nursing care were obtained by searching the databases PubMed, SID, ProQuest, ISC, Ovid, Science Direct, CINAHL, MagIran, and Google Scholar between 1978 and 2025.

**Results:** The findings of this study were divided into four parts: the application of Madeleine Leininger's cultural care theory in 1) nursing education 2) nursing practice 3) nursing research and 4) nursing management. In the field of nursing education, Leininger's cultural care leads to the provision of higher quality nursing care, the development of intercultural communication skills, the promotion of critical thinking and clinical decision-making, and the reduction of prejudice and discrimination. In the field of nursing practice, the implementation of culturally competent care protects and promotes patients' rights and leads to the improvement of patients with substance abuse and the improvement of the quality of life of the elderly, the disabled and patients with arthritis . It also leads to the reduction of stress in immigrant patients, the increase of satisfaction in immigrant women, the improvement of blood sugar control in diabetic patients and the increase of trust in the health system and the follow-up of preventive and curative care in minority populations. In the field of nursing research; nursing researchers can collect more accurate and meaningful data from different cultures by considering cultural factors (developing culturally sensitive research tools) . In the field of nursing management, using a cultural care network leads to improved leadership and management, improved communication and collaboration, and the development of culturally sensitive policies and procedure.

**Conclusion:** Malin Leininger's theory of cultural care is a valuable concept and a practical tool for improving the quality of nursing care. Applying this theory in nursing increases the cultural competencies of nurses, improves health messages, and promotes social justice in the health system. Therefore, by applying this theory, not only does patient trust increase, but trust in the health system is also strengthened, paving the way for achieving optimal health for all societies.

**Keywords:** Care, cultural care, Madeleine Leininger, nursing .

O-10

## Applications of Artificial Intelligence in Psychiatric Nursing: A Systematic Review of Chatbots, Digital Phenotyping, Predictive Models, and Large Language Models

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**Background:** Psychiatric care is being transformed by artificial intelligence (AI). Psychiatric nurses utilize the tools of chatbots, digital phenotyping, predictive models, and large language models (LLMs) in assessment, monitoring, and intervention in psychiatric care practice. The article aims to systematically review the evidence of the use of applications of AI in the practice of psychiatric care with a focus on efficacy, predictive accuracy, clinical integration, and ethical.

**Methods:** Consistent with PRISMA 2020 guidelines, PubMed, PMC, JMIR, Nature Digital Medicine, and BMC databases were searched for studies in the timeframe from 2018–2025. Keywords utilized included "artificial intelligence", "psychiatric nursing", "mental health", "chatbot", "digital phenotyping", "predictive model", and "large language model". Two reviewers worked independently to screen studies and extract the data. Risk-of-bias was assessed using ROB-2, ROBINS-I, and AMSTAR-2.

**Results:** There were thirty-five included studies: 10 RCTs, 12 observational studies, and 13 systematic reviews/meta-analyses. Chatbots had small to moderate efficacy in reducing depressive and anxious symptoms. Digital phenotyping had high predictive ability for symptom monitoring. Machine learning models predicted suicidal thoughts with moderate to high specificity, and LLMs such as ChatGPT and Claude are promising for the delivery of psycho education and therapeutic support but with limited clinical assessment.

**Conclusion:** AI applications in psychiatric nursing are promising adjuncts for symptom monitoring, patient engagement, and suicide prevention. Future research should prioritize clinical validation, ethical oversight, workflow integration, and long-term outcomes.

**Keywords:** Psychiatric nursing, chatbots, predictive modeling, digital phenotyping, mental health, large language models, artificial intelligence.

O-11

## Care Process in Iranian Nursing Homes: A Grounded Theory Study

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**Introduction:** The need and use of long-term care services for older people has increased with their rising population and there is little information about the state of serving in nursing homes. This study aimed to identify the caring process in Iranian nursing homes.

**Methods:** This qualitative study was conducted in three Iranian nursing homes using grounded theory approach. The participants included 28 individuals (14 older people and 14 caregivers). The data were collected using unstructured interviews up to data saturation, and analyzed by constant comparative method.

**Results:** Fragmented care emerged as the core variable. The main factor for developing the core variable was 'experience-based caring'. Other factors included 'inappropriate structure for care' as contextual factors in the nursing homes environment and 'keeping instead of caring', 'dismal life', and 'up and down of the path' as strategies and consequences.

**Conclusions:** The most common type of care was the routine and unplanned one with focusing on physical aspects. To improve a delivery care system for older people in nursing homes, proposing a care plan with focus on an integrated model of care in nursing homes, provision of instructions for treatment, as well as supervision and training caregivers to provide better care are necessary.

**Keywords:** Aging, Nursing homes, Long-term care, Grounded theory

O-12

## Exploring Iranian Nurses' Experiences in Managing the COVID-19 Crisis: Lessons Learned and Practical Strategies

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**Introduction and Objective:** The COVID-19 pandemic posed unprecedented challenges to Iran's healthcare system, with nurses at the forefront of care delivery. This study aimed to analyze Iranian nurses' experiences in clinical and organizational management of the pandemic and identify key lessons to enhance health system resilience.

**Methods:** A qualitative study with an interpretive-phenomenological approach was conducted through in-depth semi-structured interviews with 20 nurses (12 women, 8 men, mean age 35 years) working in COVID-19 wards in university hospitals in Tehran and Isfahan from 2019 to 2023. Purposive sampling included nurses with at least one year of experience in COVID-19 wards; exclusion criteria included unwillingness to participate. Data were analyzed using Graneheim and Lundman's qualitative content analysis. Internal hospital reports and Ministry of Health guidelines (2020–2022) served as supplementary data.

**Results:** Nurses responded to the crisis by developing locally adapted protocols for ICU bed management, managing limited resources (personal protective equipment and hospital beds), and implementing intensive in-person training. Similar to WHO reports (2020), major challenges included equipment shortages, psychological burnout, and human resource mismanagement. Opportunities identified included developing structured training programs and clinical data registry applications.

**Conclusion:** Strengthening human resource infrastructure, standardizing care protocols, and developing data registry systems can enhance health system resilience. These findings align with the congress theme of health policy and can inform national strategies for future crises.

**Keywords:** COVID-19, nursing, crisis nursing, crisis management, lessons learned, health system resilience, pandemic

## Facilitators of Home Care in Patients with Severe Traumatic Brain Injury in Iran: A Holistic Care Perspective for Promoting Community Health

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**Background:** Home care is essential for patients with severe traumatic brain injury (TBI), supporting recovery and long-term well-being. Identifying facilitators that enhance home care can improve patient outcomes, reduce caregiver burden, and promote community health. Examining these facilitators in Iran through a holistic care perspective provides insights for effective care planning.

**Methods:** This qualitative content analysis study explored facilitators of home care in patients with severe TBI in Iran. Data were collected through 25 semi-structured interviews, including 15 family caregivers responsible for daily home care and 10 healthcare professionals from multidisciplinary teams (physicians, nurses, rehabilitation specialists, and social workers) involved in post-discharge care. Purposeful sampling ensured variation in age, gender, clinical experience, and care context. Transcripts were coded and analyzed inductively to identify main categories and subcategories of facilitators. Findings were complemented by a literature review for data triangulation.

**Results:** Three main categories of facilitators were identified. *Organizational facilitators* included support from some insurance programs, charitable health centers, short-term home follow-up, hospital social workers, and spiritual counseling. *Individual facilitators* comprised caregivers' prior experience in patient care. *Family facilitators* encompassed caregivers' commitment and families' positive attitudes toward home care. Collectively, these factors improved the quality, continuity, and effectiveness of home care.

**Conclusion:** Organizational, individual, and family-level facilitators play a key role in enabling effective home care for patients with severe TBI in Iran. Integrating these facilitators into holistic care programs can strengthen patient recovery, empower families, and promote community health.

**Keywords:** Severe traumatic brain injury; Home care; Facilitators; Family caregivers; Holistic care; Iran

O-14

## Epidemiology of multiple sclerosis in Asian women: Increased disease burden in women 1990-2021 and age-geographic pattern

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**Background:** multiple sclerosis (MS) is a chronic inflammatory, demyelinating, and neurodegenerative disease of the central nervous system (CNS), the epidemiology of which is rapidly changing due to changing economic conditions and lifestyles in countries.

**Methods:** The present study is a population-based study utilizing data from the Global Burden of Disease Study 2021 to examine MS among women in Asian countries. The study analyzed age-standardized rates (ASR) for disability-adjusted life years (DALYs), years of life lost (YLL), years lived with disability (YLD), and annual percentage change (APC) across different countries. Trends for all indicators were assessed from 1990 to 2021. Additionally, the relationship between the sociodemographic index (SDI) and the burden of MS in women was evaluated using Pearson correlation analysis.

**Results:** The percentage change in the DALY index between 1990 and 2021 was increasing in all Asian countries (except Azerbaijan (-1.23%), Kazakhstan (-24.56%), Korea (-17.5%), Singapore (-34.9%), Tajikistan (-62.4%), Uzbekistan (-11.83%) and Turkmenistan (-18.01%). The results of the study showed that there is a positive and significant correlation between the YLD index and the SDI index ( $r=293.$ ,  $p<0.05$ ), while the correlation between the DALY index and YLL was not significantly associated with SDI ( $P<0.05$ ).

**Conclusion:** Spatial studies identified an uneven distribution of the disease in the Middle East region with a peak burden in the fourth decade of life (35-39 years). These observations highlight the need to adopt intelligent management strategies, based on the epidemiological characteristics and socio-cultural context of each country.

**Key Words:** Multiple Sclerosis, Sociodemographic Index, Disability-Adjusted Life Years, Asian Women

O-15

## The Role of Self-Care Education in Improving Self-Efficacy of Patients with Multiple Sclerosis.

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**Background:** Self-care education has been recognized as a useful strategy to minimize complications of chronic illnesses such as multiple sclerosis, which often undermines patients' self-efficacy. This study aimed to investigate the impact of nurse-led self-care training on the self-efficacy of individuals with multiple sclerosis.

**Methods:** A randomized clinical trial with a pre-test/post-test design was conducted. The study population included members of the Iranian Multiple Sclerosis Association, from which 90 patients were selected and randomly assigned to intervention and control groups (45 participants each) using a random number table. At baseline, both groups completed demographic questionnaires and Sherer's self-efficacy scale. The intervention group received a structured self-care empowerment program. Eight weeks later, both groups were reassessed using the self-efficacy questionnaire. Data were analyzed with SPSS version 22.

**Results:** At baseline, no statistically significant difference was found between the intervention ( $60.27 \pm 8.63$ ) and control ( $59.07 \pm 6.84$ ) groups in terms of self-efficacy scores ( $p > 0.05$ ). However, following the intervention, this difference became statistically significant, with mean scores of  $63.73 \pm 6.97$  in the intervention group and  $59.21 \pm 6.23$  in the control group ( $p = 0.004$ ).

**Conclusion:** Nurse-delivered self-care education can serve as an effective approach to enhance self-efficacy in patients with multiple sclerosis.

**Keywords:** Multiple sclerosis, self-care, self-efficacy

O-16

## Investigate the trend of stillbirth rate in Lorestan province from 2020 to 2024: A descriptive study

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**Background:** Perinatal mortality rate, which includes intrauterine mortality rate, is considered a key indicator of public health and is considered a sensitive and important indicator of the quality of prenatal health care systems. This study aimed to investigate the trend of stillbirth rate in Lorestan province from 2020 to 2024.

**Methods:** This study is a descriptive study that was conducted using women's health record information from the first of April 2020 to the end of March 2024 in the SIB system. Descriptive and analytical statistics were used in data analysis.

**Results:** The number of registered live births in Lorestan Province has decreased from 25,560 in 2020 to 21,772 in 2024, indicating a decreasing trend in the number of births. On the other hand, from 2020 to 2024, the intrauterine death rate in Lorestan Province has decreased in the following years, after a slight increase in 2021, from 9.5 per thousand live births in 2020 to 9.7 per thousand in 2021, 9.2 per thousand in 2022 and 8.6 per thousand in 2023, reached to 7.8 per thousand births in 2024.

**Conclusion:** The results of this study show that after a slight increase in stillbirths in 2020, which was probably influenced by the Covid-19 pandemic, there has been a decrease in the number of stillbirths since 2021. Although this rate is higher than the national average, but its declining trend could be a sign of improved prenatal care, which could have a significant impact on the birth rate and improving fertility indicators in the country.

**Keywords:** Stillbirth, intrauterine death, rate

O-17

## Effect of self-care education through tele-nursing on death anxiety of the elderly during Covid-19

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**Background:** The COVID-19 pandemic has had a profound impact on the elderly, with death anxiety emerging as a major psychological challenge. Spirituality, as a core dimension of belief systems, can play a critical role in promoting mental health and quality of life in this population. This study aimed to evaluate the effect of psychological and spiritual self-care training delivered through tele-nursing on death anxiety among elderly individuals attending community health centers in Gonabad, Iran, during the COVID-19 pandemic.

**Methods:** This semi-experimental study included 52 eligible elderly participants ( $\geq 60$  years) who met the criteria of cognitive, speech, and hearing health and the ability to make phone calls. Participants were randomly assigned to intervention and control groups. The intervention group received one in-person training session followed by 12 structured telephone follow-ups (twice weekly in the first month and weekly in the second month), while the control group received routine care. Data were collected using a demographic questionnaire and Templer's Death Anxiety Scale at baseline and post-intervention. Statistical analyses were performed with chi-square and independent t-tests in SPSS, with a significance level of  $p < 0.05$ .

**Results:** Pre-intervention death anxiety scores showed no significant difference between groups (intervention:  $49.19 \pm 11.04$ ; control:  $45.92 \pm 9.38$ ). Post-intervention, death anxiety significantly decreased in the intervention group ( $36.62 \pm 8.49$ ) compared with the control group ( $42.31 \pm 9.76$ ) ( $p < 0.001$ ).

**Conclusion:** Psychological and spiritual self-care training via tele-nursing effectively reduced death anxiety in elderly individuals during the COVID-19 pandemic. This low-cost, non-pharmacological intervention may be recommended to enhance psychological well-being in community-dwelling older adults.

**Keywords:** mental self-care, spiritual, telenursing, death anxiety, elderly, covid-19

## O-18

تأثیر آموزش خودمراقبتی مبتنی بر الگوی اورم از طریق پادکست بر نیازهای مراقبت حمایتی بیماران مبتلا به لنفوم: یک مطالعه تجربی

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**زمینه و هدف:** لنفوم شایع ترین بدخیمی لنفوئیدی است و در بین ده سلطان شایع در سطح جهان قرار دارد. مراقبت از خود یک مفهوم حیاتی برای بیماران مبتلا به لنفوم است و با چهار ویژگی کلیدی تعریف می شود: آموزش، تعامل، خودکنترلی و خوداتکایی. نشان داده شده است که مدل مراقبت از خود اورم به طور مؤثر آگاهی از مراقبت از خود را در بیماران مبتلا به بیماری های مزمن، به ویژه سرطان، افزایش می دهد. پادکست ها، به عنوان ابزار آموزشی، میتوانند کیفیت مراقبت از خود را بهبود بخشیده و حس تعلق به جامعه را در بین بیماران ترویج دهند. مطالعات قبلی نشان داده اند که پادکست ها در مقایسه با روش های سنتی، اثربخشی آموزشی بالاتری ارائه می دهند. این مطالعه با هدف بررسی تأثیر آموزش مراقبت از خود مبتنی بر اورم از طریق پادکست بر نیازهای مراقبت حمایتی در بیماران مبتلا به لنفوم مراجعه کننده به مراکز درمان سرطان در کرمان انجام شد.

**روش ها:** این مطالعه تجربی بر روی ۵۰ بیمار مبتلا به لنفوم که در مراکز درمان سرطان در کرمان تحت درمان بودند، انجام شد. شرکت کنندگان با استفاده از نمونه گیری تصادفی ساده انتخاب و به دو گروه تقسیم شدند: گروه مداخله (۲۵ نفر) و گروه کنترل (۲۵ نفر). مداخله شامل ۱۸ فایل صوتی آموزشی مبتنی بر پادکست بود که بر اساس مدل خود مراقبتی اورم تهیه شده بود و در اختیار شرکت کنندگان گروه مداخله قرار گرفت. داده ها با استفاده از مقیاس نیازهای مراقبت حمایتی (ZOKH-SCNS29) جمع آوری شد. توانایی های مراقبت از خود بیماران قبل از مداخله و یک ماه پس از آن در هر دو گروه ارزیابی شد. تجزیه و تحلیل داده ها با استفاده از نرم افزار SPSS-22 انجام شد.

**یافته ها:** میانگین سنی شرکت کنندگان در گروه کنترل  $11,10 \pm 41,0$  سال و میانگین سنی بیماران در گروه مداخله  $11,57 \pm 40,64$  سال بود. نیازهای مراقبت حمایتی قبل و بعد از مداخله در هر دو گروه مقایسه شد. نتایج نشان داد که تفاوت آماری معنی داری در سطح نیازهای مراقبت حمایتی بین گروه های مداخله و کنترل قبل از مداخله وجود ندارد ( $p-value > 0.05$ ). با این حال، پس از مداخله، تفاوت آماری معنی داری مشاهده شد ( $p < 0.05$ ), که نشان دهنده اثربخشی مداخله آموزشی است.

**نتیجه گیری:** استفاده از مدل خودمراقبتی اورم از طریق آموزش مبتنی بر پادکست، قابلیت های خودمراقبتی بیماران مبتلا به لنفوم را به طور قابل توجهی بهبود بخشید. بنابراین، این مدل می تواند در برنامه های آموزشی معمول در بخش های شیمی درمانی ادغام شود. از آنجایی که هیچ مطالعه قبلی در ایران تأثیر آموزش خودمراقبتی مبتنی بر پادکست را بر نیازهای مراقبت حمایتی بیماران لنفوم بررسی نکرده است، یافته های این مطالعه پایه و اساس ارزشمندی را برای تحقیقات آینده فراهم میکند. مطالعات بعدی می توانند تأثیر آموزش مبتنی بر پادکست را بر سایر متغیرهای مرتبط با کیفیت زندگی در بیماران مبتلا به لنفوم بررسی کنند.

**کلمات کلیدی:** سرطان، خودمراقبتی اورم، آموزش، پادکست، نیازهای مراقبت حمایتی، لنفوم

O-19

## The Impact of Artificial Intelligence-Based Education on the Quality of Nursing Care for Stroke Patients at Ali Ibn Abi Talib (AS) Hospital in Zahedan, 2025

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**Background:** Stroke is one of the leading causes of disability worldwide, and the quality of nursing care significantly affects patient outcomes. However, traditional educational methods are often insufficient in providing nurses with modern skills and personalized training. This study aims to evaluate the impact of Artificial Intelligence-based education on improving the quality of nursing care for stroke patients.

**Methods:** This quasi-experimental study was conducted with 120 nurses working at Ali Ibn Abi Talib Hospital in Zahedan. Nurses were randomly assigned to either the intervention or control group. The intervention group received AI-based interactive modules, including virtual simulations, interactive quizzes, and personalized feedback based on their performance. The control group received standard face-to-face training. Pre- and three-month post-intervention assessments were conducted using validated tools, including the Quality of Nursing Care Questionnaire (QNCQ) and the Stroke Patient Care Index (SPCI). Data analysis was performed using relevant statistical tests in SPSS version 26.

**Results:** The findings showed that AI-based education significantly improved the quality of nursing care for stroke patients ( $p < 0.001$ ). Furthermore, a significant difference in nursing care quality was observed between the intervention and control groups before and after the intervention ( $p < 0.001$ ).

**Conclusion:** AI-based education is a scalable and effective solution recommended for use in training programs at healthcare facilities. Additionally, integrating AI technologies into similar educational systems is essential for optimizing clinical outcomes and reducing the caregiving burden.

**Keywords:** Artificial Intelligence, Nursing Education, Stroke

O-20

## Unspoken Concerns: Unveiling the Preoperative Questions and Needs of Surgical Patients

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**Background:** Surgery is a stressful process for patients, who often have insufficient information about their procedures. These patients have numerous questions, and medical staff should be aware of these concerns to provide the best possible answers. This study aimed to examine the questions and needs of patients who are candidates for surgery before their operations.

**Methods:** This qualitative content analysis study was conducted in 2024 in teaching hospitals in Isfahan and Ahvaz. Participants included 14 surgical patients selected through purposive sampling. Data were collected using in-depth, semi-structured individual interviews, and sampling continued until data saturation was achieved. The data were analyzed using the conventional content analysis method proposed by Graneheim and Lundman.

**Results:** The participants were 14 surgical patients. After data analysis, four main categories and 18 sub-categories were extracted: questions regarding preoperative care (medication type and use before surgery, alternative surgical methods, pre-surgery tests, preoperative diet, NPO duration, and surgery start time), surgical procedure ( reason for surgery, surgical steps, surgery complications, and surgery duration), postoperative care (recovery time, rehabilitation and return to work, and home care activities), anesthesia (type of anesthesia, anesthesia complications, and alternative anesthesia methods), and communications barriers.

**Conclusion:** Surgical patients have various questions and needs that should be identified and communicated to doctors and nurses to provide better services aimed at improving patient health. Furthermore, appropriate communication with patients can reduce their anxiety, accelerate recovery, and enhance patient engagement and participation in their care.

**Keywords:** Questions, Needs, Surgical Patients, Preoperative Care

O-21

## Violation of Patient Rights through Reprocessing of Single-Use Surgical Instruments in Minimally Invasive Procedures

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**Background:** The global surge in minimally invasive surgeries has increased the demand for reprocessing single-use surgical devices. In Iran, economic constraints and limited access due to international sanctions have made the reuse of such instruments common in both governmental and private healthcare centers. However, comprehensive protocols ensuring safe reprocessing remain largely absent or poorly implemented, while existing general recommendations suffer from weak supervision and operational follow-up. This research investigates the ethical and legal challenges faced by operating room staff concerning the hidden reuse of single-use devices and its economic consequences for patients.

**Methods:** Employing a qualitative content analysis, semi-structured interviews were conducted with 35 operating room professionals who had direct involvement in minimally invasive operations where reused laparoscopic instruments were applied.

**Results:** The findings were organized into two central themes: obstacles and perceived advantages. Obstacles involved threats to patient safety linked to revenue-driven policies, inadequate sterilization methods, and elevated risks of surgical site infections. Perceived advantages encompassed easing financial strain on health systems, broader patient access through cost-sharing, mitigation of shortages caused by sanctions and limited local production, and potential ecological benefits.

**Conclusion:** Protecting patient rights requires the establishment and strict enforcement of standardized reprocessing procedures, provision of appropriate sterilization facilities, and transparent disclosure to patients regarding the reuse of single-use surgical tools.

**Keywords:** Patient rights, Minimally invasive surgery, Surgical instrument reuse, Reprocessing.

O-22

## The role of intelligent virtual assistants for providing personalized healthcare and 24/7 access to medical information: A systematic review

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**Background:** Today, intelligent virtual assistants (VAs) have been widely embraced as one of the emerging innovations in digital health, as they enable personalized care and 24/7 access to medical information. These technologies, relying on artificial intelligence, lead to improved patient self-care, improved management of chronic diseases, and increased patient interaction with the health system. The objective of this systematic review is to examine the role, effectiveness, and limitations of intelligent VAs in providing personalized healthcare and continuous access to medical information.

**Methods:** This systematic review was conducted following PRISMA guidelines. A comprehensive search was performed in PubMed, Scopus, and Web of Science for studies published between 2015 and 2025, using keywords related to “Intelligent Virtual Assistants” and “Personalized Healthcare.” Full-text English articles were included, while duplicates, non-relevant studies, and articles without full text were excluded. Screening was conducted in two stages (title/abstract followed by full-text review) by two researchers.

**Results:** Intelligent VAs have been involved in various areas including chronic disease management, mental health, health counseling, and answering medical inquiries, with significant positive feedback and widespread acceptance among users. These assistants, utilizing machine learning algorithms, have facilitated personalized care and immediate access to information. However, challenges such as privacy issues, accuracy of responses, and heterogeneous user coverage have been observed.

**Conclusions:** Intelligent VAs have significant potential to transform healthcare systems by delivering personalized health services and providing 24/7 access to medical information, thereby playing an effective role in improving care quality. Future studies should focus on optimizing performance, enhancing data security, and addressing current limitations.

**Keywords:** chatbot; conversational agent; virtual assistant; personalized healthcare; personalized medicine; digital health

## Prevalence and Risk Factors of HPV Infection among Female Prisoners in Lorestan Province, Iran

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**Background:** Human papillomavirus (HPV) is the most common sexually transmitted infection worldwide and a primary cause of cervical cancer. Incarcerated women have multiple sexual and behavioral risk factors, and previous studies report HPV prevalence of 27–46% in correctional settings. However, data from Iran are limited, underscoring the need to study HPV burden in female prisoners.

**Methods:** We performed a cross-sectional study in 2023 among female inmates in Lorestan Province, Iran. Sixty-one women from Gel Sefid rehabilitation center and Khorramabad central prison were enrolled. Vaginal specimens were collected by cytobrush and stored at  $-70^{\circ}\text{C}$ . DNA was extracted and HPV was detected by nested PCR (using MY09/MY11 and GP5/GP6 primers); genotypes were identified using a real-time PCR assay.

**Results:** Of 61 participants (mean age  $\approx 38$  years), 26 (43.3%) were HPV-positive. Among HPV-positive women, 61.5% harbored low-risk types, 23.1% probable high-risk, and 15.4% high-risk genotypes. The most frequent genotypes were HPV-6 and HPV-11 (both low-risk). HIV infection was significantly associated with HPV: all 5 HIV-positive inmates were HPV-positive versus 38.2% of HIV-negative inmates ( $p=0.012$ ).

**Conclusion:** HPV infection was very common among female prisoners in this cohort, underscoring an important public health issue. Low-risk types, especially HPV-6 and HPV-11, were the most frequent, highlighting the necessity for intervention strategies tailored by genotype risk. Enhanced healthcare access and targeted prevention programs are needed to reduce the burden of HPV-related diseases in this vulnerable population.

**Keywords:** Human papillomavirus, cervical cancer, female prisoners

O-24

## Relieving Pain with Peppermint Aroma: A Non-Pharmacological Approach to Postoperative Care in Children

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**Introduction and Aim:** Aromatherapy as one of the approaches of complementary and alternative medicine has received special attention in recent years. This non-pharmacological method can play an effective role in improving the treatment process of patients by creating relaxation and reducing physical and mental tensions. In children, pain after abdominal surgery is a common problem that, in addition to causing discomfort to the patient, also delays the recovery process. Given the need for low-risk and non-invasive methods to reduce pain in this age group, this study was designed and implemented with the aim of investigating the effect of aromatherapy with peppermint essential oil on the severity of pain after abdominal surgery in children aged 6 to 12 years.

**Materials and Methods:** This study is a randomized clinical trial that was conducted in 2025 on 66 children aged 6 to 12 years Ali Asghar Children's Hospital affiliated with Iran University of Medical Sciences. Participants were randomly assigned to two groups: intervention group (receiving peppermint aromatherapy) and control group (receiving normal saline soaked pad). The patients' pain intensity was measured at different time intervals after surgery using the Flack Pain Behavioral Response Scale. After collecting the data, they were analyzed using SPSS version 26 software and using the chi-square, one-way ANOVA, repeated measures ANOVA, and independent t-test statistical tests.

**Results:** The results showed that the mean pain intensity in the intervention group that received aromatherapy with peppermint essential oil was significantly lower than the control group ( $P<0.01$ ). Statistical analyses also indicated that there was no significant difference between the two groups in terms of demographic characteristics such as age, gender, and medical diagnosis ( $P>0.05$ ). These findings indicate a significant and positive effect of peppermint on reducing pain after abdominal surgery in children.

**Conclusion:** The findings of the present study showed that aromatherapy with peppermint essential oil can effectively reduce the severity of pain after abdominal surgery in children. This method is simple, non-invasive, low-cost, and has no serious side effects, and can be used as a therapeutic supplement alongside pharmacological methods. The use of peppermint in pediatric surgical wards is recommended to improve the quality of care and reduce patient suffering. Further studies with a larger sample size are also recommended to confirm the results and investigate long-term effects.

**Keyword:** Aroma, Children, Pain, operative, Peppermint

O-25

## Designing a conceptual model for a Homecare Electronic Health Record

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**Background:** During the COVID-19 pandemic in Iran, the provision of home care services gained significant attention. Following the pandemic, factors such as population aging, the projected increase in chronic diseases, and the demand for faster access to services have further driven the growth in demand for home-based care. One of the key prerequisites for ensuring the delivery of high-quality, safe, and continuous care in this sector is the existence of an electronic health record. The present study aims to propose a conceptual model for an electronic health record specifically designed for home care.

**Methods:** This study is an applied research project conducted in four stages. First, a comprehensive review was undertaken to examine the structure and content of existing home care electronic health records worldwide. Second, the guidelines and documentation of Iran's Electronic Health Record project, known as SEPAS, were analyzed. Third, targeted interviews were conducted with experts in the field of electronic health records and/or professionals familiar with home care. In the fourth stage, a conceptual model for a home care electronic health record was proposed, tailored to the structure of Iran's healthcare system.

**Results:** The Home-Based Electronic Health Record must be designed as a module integrated with the core National Electronic Health Record system (SEPAS). Its essential functionalities were to include a dynamic, patient-centered care plan; the electronic documentation of clinical events; an alert and reminder system; adherence to standardized clinical terminologies; interoperability; the generation of a care summary at the end of each care episode; and robust security with advanced access controls.

**Conclusion:** The model presented in this study can assist the Ministry of Health in formulating policies to develop a home care electronic health record system.

**Keywords:** Homecare, Electronic Health Record, Software Design

O-26

## The role of artificial intelligence in early diagnosis of HELLP syndrome during pregnancy

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**Background:** HELLP syndrome, characterized by hemolysis, elevated liver enzymes, and low platelets, is a life-threatening pregnancy complication often linked to preeclampsia. Early diagnosis is critical but challenging due to variable presentation. Artificial intelligence (AI), particularly machine learning (ML), shows promise in enhancing early detection by analyzing complex datasets. This systematic review assesses AI's efficacy, limitations, and potential for clinical integration in diagnosing HELLP syndrome.

**Methods:** A systematic review of literature from 2015 to 2025 was conducted across PubMed, Scopus, and Embase, using keywords like "artificial intelligence," "machine learning," "HELLP syndrome," and "early diagnosis." From 100 studies, 25 met inclusion criteria: 15 focused on AI for HELLP syndrome diagnosis and 10 on AI in obstetric-related conditions. studies with quantitative or qualitative outcomes were included; non-AI or non-HELLP-specific studies were excluded.

**Results:** AI, including neural networks and random forests, improved early HELLP syndrome diagnosis, with hybrid models using microRNA biomarkers showing superior accuracy. However, barriers in organizational support, provider training, patient data variability, and clinical integration limited outcomes. Inadequate AI training, poor data standardization, and small sample sizes hindered scalability, while inconsistent validation protocols and lack of long-term evaluation posed challenges.

**Conclusion:** AI offers transformative potential for early HELLP syndrome diagnosis, enhancing risk stratification and timely interventions. Standardized model development, diverse datasets, and real-world integration studies are needed to overcome barriers and ensure clinical adoption, bridging the gap between research and obstetric practice.

**Keywords:** HELLP syndrome, artificial intelligence, machine learning, early diagnosis, pregnancy

O-27

## The Effectiveness of a Blended Educational Intervention on Fertility Goals in Newly Married Women in Birjand

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**Background:** In recent decades, the age structure of Iran's population has undergone significant changes, with negative consequences for the structure of society. The aim of this study was to evaluate the impact of a blended educational intervention on fertility goals among newly married women in Birjand City.

**Methods:** This study was conducted as a randomized controlled field trial in 2023 on 90 newly married women in Birjand city. Individuals were selected according to the inclusion criteria and randomly assigned to the intervention and control groups. The intervention group received 8 blended-learning sessions with their spouses. Demographic and fertility information questionnaires were completed before, immediately after, and 3 months post-intervention. The data were analyzed using SPSS\_V26 software and by chi-square, Fisher's exact test, independent t-test, Mann-Whitney, Friedman, ANOVA statistical tests at a significance level of 0.05.

**Results:** The desired number of children after the intervention showed a significant increase in the intervention group ( $P<0.05$ ), but no significant change was observed in the control group ( $P<0.05$ ). Comparison of the frequency distribution of the time interval to first pregnancy for women in the intervention group showed a significant improvement immediately and 3 months after the intervention compared to before the intervention ( $P<0.05$ ).

**Conclusion:** The results showed that Blended learning can reduce the time interval until first conception and increase the desired number of children in the women studied. Education and awareness-raising such as holding workshops and using the media, creating a support network, and post-marriage counseling can have an impact on fertility goals.

**Keywords:** Fertility, childbearing, educational intervention, blended learning

O-28

## Comparative evaluation of pressure massage at Hegu point versus Kunlun–Taixi pressure points on physiological parameters and crying duration induced by intramuscular vitamin K injection in premature infants: A clinical trial study

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**Background:** Intramuscular injections represent a painful procedure for premature infants. This study aimed to compare the effects of pressure massage at Hegu point versus Kunlun–Taixi pressure points on pulse rate, arterial oxygen saturation, and crying duration following intramuscular injection of vitamin K in premature infants.

**Methods:** A randomized, single-blind clinical trial was conducted on 100 premature infants admitted to the neonatal intensive care unit between 2020 and 2021. Participants were selected through convenience sampling and then randomly assigned into four groups of 25 individuals each: Hegu point massage, Kunlun–Taixi points simultaneous massage, placebo and control. Prior to the vitamin K injection, the intervention groups received targeted pressure point massage, the placebo group received nasal tip massages, and the control group received standard care. Pulse rate, arterial oxygen saturation, and crying duration were recorded before, during and after the intramuscular injection using a pulse oximeter and chronometer. Data were analyzed using two-way repeated measures analysis of variance in SPSS software version 24.

**Results:** Significant differences were observed in average pulse rate ( $P=0.013$ ) and average arterial oxygen saturation ( $P=0.028$ ). The group receiving simultaneous massage at Kunlun–Taixi points exhibited the lowest mean pulse rates during ( $149.24\pm7.78$ ) and after ( $144.16\pm8.64$ ) the injection, as well as the highest mean arterial oxygen saturation percentages during ( $88.36\pm9.37$ ) and after ( $88.04\pm8.33$ ) the injection.

**Conclusion:** Simultaneous massage of Kunlun–Taixi pressure points reduced changes in pulse rate and arterial oxygen saturation induced by intramuscular injection in premature infants. It is recommended to use this simple and low priced method to reduce the physiological responses to injection-related pain in premature newborns.

Clinical trial registry: IRCT20210630051743N1

**Keywords:** acupressure, premature babies, crying, intramuscular injection

## Caring Requirements of Spinal Cord Injury Patients

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**Background:** The global incidence of spinal cord injuries (SCI) is rising. Patients with SCI and their families face numerous challenges throughout the disease trajectory. Identifying the care needs of these patients can facilitate the care process. This study aimed to explore stakeholders' perceptions of the requirements for community-based care for SCI patients.

**Methods:** This qualitative study, conducted in Iran from April 2021 to December 2022, employed conventional content analysis. Participants included SCI patients, family caregivers, and home-based care providers, selected via purposive sampling. Data were collected through 12 in-depth interviews and analyzed using the Lundman and Graneheim approach.

**Results:** Analysis of the data yielded 815 primary codes, categorized into three main themes: Home-Based Care Requirements (e.g., leveraging family care capacity, ensuring care continuity in the patient's familiar environment, necessity of home modifications)- Comprehensive Care Necessities (e.g., documentation of all care activities, early intervention, physical care, psychological support, financial assistance, and follow-up care) and Palliative Care Imperatives (e.g., prioritizing quality of life over life extension, family-centered care, considering euthanasia rights, preparing families for bereavement).

**Conclusion:** SCI patients should receive care in community settings by family members under the supervision of formal caregivers. Palliative care must be integrated from the time of injury through end-of-life stages.

**Keywords:** Spinal Cord Injury Patients, Community-Based Care, Qualitative Study

O-30

## Inter-Sectoral Collaboration: An Imperative for Community-Based Palliative Care in Terminal Cancer

Heshmatolah Heydari\*, Seyedeh Zahra Hosseini

**Background:** Cancer patients face diverse needs across physical, psychological, social, spiritual, and economic dimensions. The World Health Organization (WHO) recognizes palliative care as a core component of healthcare systems worldwide. Social participation plays a critical role in such care. Given the rising global cancer burden and the importance of social collaboration in improving patients' quality of life, this study aimed to explore healthcare providers' perceptions of the necessity for inter-sectoral collaboration in delivering community-based palliative care to terminal cancer patients.

**Methods:** This qualitative study, conducted in Iran at 2018, employed conventional content analysis. Participants included home-based palliative care providers for terminal cancer patients, selected via purposive sampling. Data were collected through 17 in-depth interviews and one focus group session, analyzed using the Lundman and Graneheim approach.

**Results:** Data analysis yielded 511 primary codes, with one major theme identified as "deficiencies in social participation." Subthemes included fragmented services, lack of comprehensive care, insufficient infrastructure, limited public awareness, and inadequate inter-organizational cooperation.

**Conclusion:** Significant challenges exist in providing end-of-life care to cancer patients, though opportunities for improvement remain. Policymakers must develop infrastructure for comprehensive community-based care to address these gaps.

**Keywords:** Palliative care, community-based care, social participation, cancer patients, end-of-life stage

O-31

## Maternal and Neonatal Outcomes Associated With COVID-19 Infection: A Case-Control Study

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**Background and aims:** Pregnant women are a high-risk group requiring special attention during the COVID-19 pandemic. This study aimed to compare maternal and neonatal outcomes between pregnant women with and without COVID-19.

**Methods:** A total of 210 hospitalized pregnant women and their newborns were evaluated at Hajar hospital, Shahrekord, Iran, between July 16, 2022, and March 20, 2023. The case group included 70 women with confirmed COVID-19, while the control group consisted of 140 COVID-negative women matched by age and parity. Data on maternal history, pregnancy complications, and neonatal outcomes were extracted and analyzed using t-tests, Chi-square, and Fisher's exact tests in SPSS 22 ( $P<0.05$ ).

**Results:** Adverse maternal outcomes were significantly more common in the case group, including preeclampsia ( $P=0.03$ ), preterm labor ( $P=0.002$ ), fetal distress ( $P=0.01$ ), reduced fetal movements ( $P=0.01$ ), and cesarean delivery ( $P<0.001$ ). Neonates born to infected mothers had lower birth weight ( $2881\pm314$  g vs.  $3088\pm384$  g,  $P<0.001$ ) and higher rates of respiratory distress (18.6% vs. 2.9%,  $P<0.001$ ), neonatal intensive care unit admission (15.7% vs. 2.9%,  $P=0.001$ ), gastrointestinal issues (8.6% vs. 0%,  $P=0.001$ ), feeding problems (14.3% vs. 4.3%,  $P=0.01$ ), neonatal fever (17.1% vs. 0%,  $P<0.001$ ), and positive polymerase chain reaction (17.1% vs. 0%,  $P<0.001$ ). Eventually, the non-reactive non-stress test was more prevalent in the case group (18.6%,  $P<0.001$ ).

**Conclusion:** COVID-19 infection during pregnancy was associated with increased maternal and neonatal complications, highlighting the need for enhanced monitoring and care.

**Keywords:** Pregnancy, Neonatal, Outcomes, Maternal, COVID-19

O-32

## "Aram Khaab" Smart Platform: An AI-Powered Tool to Enhance Sleep Quality and Public Health in the Iranian Society

Fatemeh Mojoudi\*

**Abstract:** Poor sleep quality has become a serious public health challenge, with a significant negative impact on productivity and physical and mental health. In Iran, the prevalence of sleep issues is rising due to lifestyle changes. Existing solutions often lack deep analysis, cultural localization, and a cost-effective economic model. The "Aram Khaab" project is a smart platform that addresses this gap using artificial intelligence. It utilizes smartphone sensors to track sleep phases and leverages AI to intelligently analyze multi-dimensional user data—including habits and stress levels—to identify hidden patterns and predict potential problems. The system provides personalized, actionable recommendations for improving sleep quality. "Aram Khaab" is expected to lead to significant improvements in sleep quality indicators. These include enhanced quality and speed of sleep onset, increased deep sleep percentage, and reduced daytime fatigue. From a public health perspective, the platform serves as a preventive tool, helping to lower the burden of sleep-related diseases. Its localized approach, freemium model, and lack of need for expensive hardware ensure widespread accessibility for Iranian users. "Aram Khaab" is a comprehensive and intelligent solution that empowers users to actively manage and improve their sleep. It serves as a smart companion for enhancing personal well-being, elevating work productivity, and boosting social vitality. The platform has the potential to become a leading digital health brand in the region.

**Keywords:** Artificial Intelligence, Digital Health, Sleep Monitoring, Personalized Sleep Management, Preventive Health, Sleep Hygiene.

O-33

## The effect of self-management program on self-efficacy of elderly women in West Tehran

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**Introduction:** The need to pay attention to the elderly is considered very important due to the increase in their number, on the other hand, in this period of life, the health of the elderly is threatened due to the weakness of the immune system and chronic diseases. It is possible to bring the elderly to maximum independence and health improvement with the self-management program, which is one of the rehabilitation methods and the patient plays the main role in it. Therefore, the purpose of this study is to determine the effect of the self-management program on the self-efficacy of the elderly.

**Methodology:** This research is a semi-randomized experimental study in which 68 elderly women who referred to neighborhood health centers were included in the study and were randomly assigned to two intervention and control groups. First, demographic and self-efficacy questionnaires were completed by all samples. Then the intervention group participated in the self-management program which included 8 two-hour training sessions. After the end of the intervention, telephone follow-up was done. One month after the end of the intervention, the self-efficacy questionnaire was completed again by two groups. For data analysis, chisquare, Fisher's exact, independent t test and analysis of covariance were used with SPSS version 16 software.

**Findings:** According to the findings of the research, before the intervention, there was no statistically significant difference between the two groups in terms of demographic characteristics and self-efficacy ( $p=0.94$ ). While one month after the intervention, the statistical difference between the two groups was significant ( $p<0.001$ ).

**Conclusion:** According to the research findings, the self-management program has been effective on the self-efficacy of the elderly.

O-34

### Adaptation Processes to Loneliness Among Older Adults: A Qualitative Study

Maryam Madinishat\*, Ali Safdari, Efat Sadeghian, Mojtaba Tayebi

**Background and Aim:** Loneliness among older adults represents a significant yet underexplored psychosocial challenge within Iran's cultural context. This study (2024) investigates how Iranian older adults adapt to experiences of loneliness.

**Methods:** A qualitative grounded theory approach was employed with 33 participants (18 women and 15 men), recruited through purposive and theoretical sampling from twoday care centers for older adults in [Masked for review], Iran. Data were collected using unstructured and semi-structured interviews, supplemented by field notes, and analyzed in accordance with Strauss and Corbin's (2015) methodology.

**Findings:** The primary concern of loneliness was conceptualized as "Aging Longing: The Yearning for Companionship and Emotional Bonds," manifesting at three levels: (1) interpersonal—a craving for intimate companionship; (2) intrapersonal—emotional and physical suffering accompanied by mental turmoil due to loneliness; and (3) social—encompassing experiences of loneliness stemming from disconnection from family networks and environmental constraints. Participants employed three adaptive strategies: "Inner Flourishing" (accepting loneliness and discovering joy in solitude), "Revitalizing Social Networks" (strengthening communal and personal ties), and "Emotional Transformation" (alleviating distress and fostering self-reinvention). Together, these strategies culminated in the overarching category of "Reconstructing the Meaning of Life."

**Conclusion:** Loneliness in older adults poses emotional challenges, but they can adapt through three mechanisms: Inner Flourishing, which involves purposeful activities; Revitalizing Social Networks, aimed at rebuilding social connections; and Emotional Transformation, which emphasizes coping strategies. This suggests that loneliness can lead to both distress and personal growth, highlighting the need for interventions that support emotional needs and promote meaningful engagement.

**Keywords:** Loneliness, Older adults, Adaptation, Grounded Theory, Qualitative Study.

O-35

## Cultural Competence of Nursing Students and its Relationship with Resilience and Empathy: A Descriptive Study

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**Abstract:** Cultural competence refers to the ability to provide effective, safe, and high-quality care to clients from diverse cultural backgrounds, while considering various aspects of their culture during care delivery. The aim of this study was to determine the level of cultural competence and its relationship with empathy and resilience among third-year nursing students. This descriptive-correlational study included 100 third- and fourth-year nursing students, selected through a census sampling method based on inclusion criteria. The data collection tools included a demographic form, the Cultural Competence Questionnaire, the Jefferson Scale of Empathy, and the Connor-Davidson Resilience Scale, all completed via self-report. Descriptive statistics, the correlation between variables, and linear regression were used to analyze the data. No significant correlation was observed between cultural competence with gender, age groups, academic semester, experience of cultural care and empathy. However, it was significantly correlation with previous cultural diversity training and resilience. Multivariate regression analysis indicated that cultural competence significantly influenced resilience ( $p = 0.001$ ,  $t = 5.11$ ), explaining 28% of its variance, but had no significant effect on empathy ( $p = 0.72$ ,  $t = 0.35$ ). The findings revealed that cultural competence ( $\beta = 0.622$ ,  $p < 0.001$ ) could predict resilience, but had no effect on empathy ( $\beta = 0.018$ ,  $p = 0.72$ ). It is recommended that future research further explore the relationships among these variables. Additionally, nursing administrators and instructors should also incorporate cultural competency models in the undergraduate nursing curriculum to enhance cultural competency in nursing students.

**Keywords:** Cultural competence, Empathy, Psychological resilience, Nursing students

## Enhancing the Quality of Nursing Clinical Competency Examination: An Action Research Study

Parya Soltani\*, Kimia Karami, Sougand Nasirizadeh

**Background:** Given the critical importance of clinical education and, consequently, clinical evaluation, the Objective Structured Clinical Examination (OSCE) is widely used to assess undergraduate nursing students' clinical competency by simulating real-life situations. The quality of OSCE is therefore essential for evaluating students' ability to integrate clinical knowledge, technical skills, and communication with patients. This study aimed to improve the quality of the nursing clinical competency examination using an action research approach with a mixed-methods design.

**Methods:** In the qualitative phase, strengths and weaknesses of the OSCE were identified. Fourteen members of the examination committee (faculty and clinical instructors) and 11 nursing students with prior OSCE experience were selected through purposive sampling. Data were collected via focus group discussions and analyzed using Graneheim and Lundman's content analysis to identify facilitating and inhibiting factors. In the quantitative phase, based on qualitative findings, several modifications were implemented in the design and execution of the OSCE. Subsequently, 45 nursing students and 14 faculty/instructors (n=59) participated in an evaluation of these changes. Data were collected using a researcher-developed satisfaction checklist derived from qualitative findings and analyzed using descriptive (mean, SD, frequency) and inferential statistics with SPSS.

**Results:** In the qualitative phase, analysis of 13 interviews yielded 100 initial codes, categorized into five subcategories and three main *themes*: *inefficiency of educational management, supportive learning environment, and student inquiry*. Findings highlighted the importance of educational management, learning environment, and students' individual characteristics in enhancing clinical competency. In the quantitative phase, mean satisfaction scores were  $28\pm3.1\%$  for students,  $33\pm2.8\%$  for examiners, and  $45\pm3.25\%$  for experts, indicating overall moderate satisfaction, although students reported significantly lower satisfaction compared to other groups.

**Conclusion:** The study demonstrated that the quality and effectiveness of OSCE are influenced by multiple factors, including station design, physical environment, student preparedness, and standardization of the assessment process. Providing adequate opportunities for practice, simulation-based training, and harmonization among examiners can help reduce anxiety and improve student satisfaction. Adopting a comprehensive approach with iterative modifications through action research may enhance fairness, satisfaction, and ultimately clinical competency among nursing students.

**Keywords:** Clinical competency, Nursing students, Action research, OSCE, Evaluation

O-37

## The relationship between leadership styles and psychological job indicators in intensive care unite nurses (Iran, 2024)

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**Background:** Intensive care unit (ICU) nurses face high occupational stress. Evidence on how leadership styles affect resilience, professional ethics, and emotional exhaustion in Iranian teaching hospitals remains limited, necessitating context-specific investigation.

**Objective:** To assess the relationship between leadership styles and psychological job indicators among ICU nurses.

**Methods:** This descriptive-analytical cross-sectional study employed census sampling and included 215 ICU nurses from teaching hospitals affiliated with Lorestan University of Medical Sciences, Iran (2024). Data were collected through the Hersey and Blanchard Leadership Style Questionnaire, the Connor-Davidson Resilience Scale, the Caduzier Professional Ethics Questionnaire, and the Emotional Exhaustion subscale of the Maslach Burnout Inventory. Statistical analyses included independent t-tests, Pearson correlations, and multivariate regression models, adjusted for demographic variables.

**Results:** The predominant leadership style was “participating” (36%). Mean scores showed relatively high resilience ( $68.53 \pm 9.19$ ) and professional ethics ( $63.14 \pm 4.25$ ), with elevated emotional exhaustion ( $68.35 \pm 8.41$ ). Regression analysis indicated that resilience ( $\beta = 0.119$ ,  $p = 0.011$ ) and professional ethics ( $\beta = 0.091$ ,  $p = 0.034$ ) were significantly related to leadership style, whereas emotional exhaustion was not ( $p > 0.05$ ). Leadership styles differed significantly by gender ( $p = 0.049$ ), marital status ( $p = 0.009$ ), and job position ( $p = 0.017$ ).

**Conclusions:** Participative leadership styles may enhance resilience and professional ethics among ICU nurses, even in high-stress settings. Strengthening supportive leadership within healthcare organizations could help build psychological resources, foster ethical practice, and improve care quality.

**Keywords:** Leadership; Resilience; Ethics; Professional; Psychological; emotional exhaustion; nurses

O-38

### Experiences of Violence and its Determinants in the Childbirth Process: A Qualitative Study from the Stakeholders' Perspective

Javad Yousefi Labani, Seyed Fahim Irandoust\*, , Niloufar Moradi, Mitra Faghihi, Elham Hamezadeh

**Background:** Violence during childbirth is a significant yet understudied issue. Identifying its forms and determinants is crucial for developing effective interventions. This study aimed to explore women's experiences of violence and its determinants during the childbirth process.

**Methods:** A qualitative design with a conventional content analysis approach was employed. Participants included 34 women who had experienced violence during childbirth in two western provinces of Iran (Lorestan and Kermanshah), along with nine key informants, including midwives, nurses, and obstetricians. Participants were selected through purposive and snowball sampling, and data were collected through in-person semi-structured interviews. Data were analyzed using the Graneheim and Lundman approach in MAXQDA 2018, and Guba and Lincoln's criteria ensured study trustworthiness.

**Results:** Two main categories and 22 subcategories emerged. The main categories included determinants of mistreatment and violence (inadequate staff education, workload pressure, normalization of violent behaviors, lack of supervision, women's unfamiliarity with childbirth, hospital and maternal conditions, socioeconomic status, and lack of supportive companions) and experiences of violence and mistreatment (verbal, physical, and medical abuse, labeling, administrative violence, inappropriate environment, neglect, discrimination, and lack of compassionate care).

**Conclusion:** Violence during childbirth is a multidimensional and deeply rooted phenomenon shaped by individual, organizational, and structural factors. Multi-level interventions—such as staff training based on respect and patient rights, improving maternity environments, ensuring supportive companions, strengthening supervision, and integrating women's cultural and experiential perspectives into maternal health policies—are essential to prevent and reduce childbirth-related violence.

**Keywords:** Violence during childbirth; Women's experiences; Mistreatment in maternity care; Determinants of violence; Qualitative content analysis

O-39

### Perception of futile care and the reasons behind providing it for the patients at end-of life stages from the care providers' perspective

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**Background:** The concept of medical futility has exposed the medical staff to many complicated conflicts. Through identifying some of these conflicts, it will be possible to have control over such situations and make plans for managing them better. The present study was conducted to determine the perception of futile care and the reasons behind it among the patients at end-of-life stages from care providers' perspective.

**Methods:** This research is an analytical descriptive study conducted in Dezful, Iran, on 308 care providers including physicians, nurses, and medical and nursing interns, in 2022. The data collection tools included 3 areas: demographic variables, perception of futile care, and reasons behind futile care.

**Results:** The mean score of perception of futile care was  $103.20 \pm 32.89$  and the mean scores of the reasons behind providing futile care,  $118.03 \pm 26.09$ . A significant correlation was observed between the mean scores of the questionnaire for perception of futile care and the reasons behind providing futile care among end-of-life patients ( $P$ -value = 0.000,  $r$  = 0.465).

**Conclusion:** Based on the findings, almost half of the care providers had a moderate perception of futile care and the reasons behind it. The reasons mentioned by the participants, as well as the positive relationship between perception level and education level, point out the need for training courses to increase familiarity with the concept of futile care and change care providers' perspectives and attitudes towards end-of-life care.

**Keywords:** Futile care, Chronic patients, End-of-life patients

O-40

### Ethical values in Iranian aged care: a qualitative study

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**Background:** Ethical values are the basis of the behavior and performance of professional care staff. This study aimed to identify inter-professional ethical values in aged care.

**Methods:** This qualitative thematic content analysis study was conducted in Khorramabad, Iran, from September 2018 to June 2019, and 36 core members of the aged care team (including 24 nurses, 5 physicians, 3 physiotherapists, and 4 social workers) were selected through the purposive sampling method and interviewed in depth. The data were analyzed using the directed content analysis and the method of Zhang and Wildemuth.

**Results:** Four main themes of providing professional care, preserving the integrity of the aged, observing the dignity of the aged, establishing human relationship, along with 21 subthemes including Providing professional care, Knowledge and skills, Commitment and working conscience, Promoting collaborative care, Justice, Beneficence, Preserving integrity , Promoting social interaction, Promoting peace and comfort, Preserving safety, Observing dignity , Respect , Positive attitude toward old age , Observing autonomy , Preserving privacy and confidentiality , Preserving and promoting independence , Establishing human relationship , Gaining confidence and trust , Honesty, Compassion and kindness , Patience and Altruism were extracted as ethical values in aged care.

**Conclusion:** Ethical aged care is shaped by the unique characteristics of older adults. Beyond general professional ethics, it emphasizes values such as promoting social interaction, peace and comfort, independence, autonomy, and collaborative care, with a strong focus on human relationships and communication.

**Keywords:** Elderly, Ethical values, Inter-professional care

O-41

### The Effect of Family-centered Empowerment Model on dermatology quality of life index (DLQI) for Female patients with Pemphigus Vulgaris

Fatemeh Alhani\*, Maryam Ghasemi, Mohammad Gholami, Maryam Daneshpajouh

**Background:** Healthy and radiant skin is very important for a person to feel good physically, mentally and emotionally. Pemphigus is a group of rare, autoimmune, potentially fatal, intraepidermal blistering, chronic and recurrent diseases that affect the skin and mucous membranes. Empowerment of chronic patients is a way to improve their quality of life. This study was conducted to assess the effect of implementing a family-centered empowerment model (FCEM) on the specific quality of life of skin patients with pemphigus vulgaris.

**Methods:** This clinical controlled trial study was conducted by Purposive sampling 72 female patients with Pemphigus Vulgaris. Through random allocation was divided into two groups: intervention and control. The family-centered empowerment model (FCEM) in executive steps (perceived threat, promoting self-efficacy, increasing self-esteem and evaluation) was run for 8 sessions for the intervention group and after 6 weeks, was compared with the control group. Data were collected by demographic and dermatology quality of life index (DLQI) questionnaires. Data analyzed by statistical software SPSS V.24, Chi square, independent and paired t-test. The rate ( $P < 0.05$ ) was considered significant.

**Results:** Findings showed dermatology quality of life index (DLQI) of patients were similar in both groups before the intervention ( $p > 0.05$ ), but after the intervention findings showed significant differences only in the intervention group ( $P \leq 0.001$ ).

**Conclusion:** Family-centered empowerment is an effective intervention can be useful for promoting patient's dermatology quality of life.

**Keywords:** Pemphigus Vulgaris, dermatology quality of life index, Family-centered empowerment model, Nurse

## From Awareness to Action: The Role of Iranian Mothers in the Prevention and Confrontation of Child Sexual Abuse (A Community-Based Study)

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**Background:** Child abuse in the long term leads to a wide range of health problems including depression, anxiety, substance abuse, suicide attempts, and sexually transmitted infections. As the most important individual in child care, mothers play a significant role in children's health. The present study aimed to investigate the level of awareness, attitude, and practice of mothers of elementary school children regarding child sexual abuse.

**Methods:** This cross-sectional study was conducted in 2024 on 314 mothers with children aged 6-12 years. Samples were selected using cluster sampling. Data were collected using a demographic questionnaire and the Chen Child Sexual Abuse Questionnaire. Data analysis was performed using SPSS version 18 with a significance level of  $p < 0.05$ .

**Results:** The mean age of participating mothers was  $35.22 \pm 5.1$  years. The study findings showed a positive and significant correlation between awareness of child sexual abuse and attitude towards it ( $r=0.363$ ,  $p<0.001$ ). Furthermore, a positive and significant correlation was observed between awareness of child sexual abuse and practice ( $r=0.424$ ,  $p<0.001$ ). According to the results, there was a significant relationship between mother's occupation and mother's attitude towards child sexual abuse ( $p<0.037$ ). Father's education level ( $p<0.033$ ) and father's occupation ( $p<0.005$ ) also showed a significant relationship with awareness of child sexual abuse. The study findings indicate a significant relationship between housing type and mothers' awareness ( $p<0.001$ ) and practice ( $p<0.001$ ) regarding child sexual abuse.

**Conclusion:** Based on the present study and the positive and significant correlation of awareness of child sexual abuse with the attitude and practice of participating mothers, as well as their relationship with demographic variables, it can be concluded that child sexual abuse is influenced by the economic, social, and cultural conditions of each society. Therefore, paying attention to the level of awareness and literacy of mothers, and emphasizing education for mothers as influential individuals on children, can be key effective factors in reducing the incidence of child sexual abuse. Hence, in designing effective programs and interventions in this field, and in policymaking, the mother should be considered as an influential factor.

**Keywords:** Awareness, Attitude, Practice, Child Sexual Abuse, Mothers

O-43

### Nursing in an oncology ward with intertwined roles: A focused ethnographic study

**Hadisheh Monadi Ziarat\*, Marzieh Ownegh, Naimeh Seyedfatemi, Marjan Mardani Hamuleh, Mansoureh Ashghali Farahani, Abuali Vodadeh**

**Purpose:** Characteristics of nursing care in the oncology ward depend on this ward's specific context. This study aimed to investigate the nursing care in the oncology ward regarding the culture of this ward.

**Methods:** This qualitative study was conducted in an oncology ward using a focused ethnographic approach. The whole nursing team of the selected ward (N=16) participated in the study through purposeful sampling. Three methods of observation, interview, and field documents were used for data collection. Data were analyzed by Spradley's (1980) ethnographic method.

**Findings:** 'Nursing in the oncology ward with intertwined roles' emerged as the main theme. This theme included the following subthemes: 'Robin Hood nurse,' 'a secretive nurse,' 'a negligent nurse,' 'a snitching nurse,' 'a complaining nurse,' 'an apathetic senior nurse,' 'a stigmatized training nurse' 'a brazen-bodied nurse,' 'a compassionate nurse,' 'a moonlighting nurse,' and 'a drug bartender.'

**Conclusions:** This study provided a deep cultural insight into nursing care in the oncology ward, considering the particular culture of this ward and emphasizing the intertwined roles of nurses. These roles are on a spectrum, with positive roles, such as compassion, on one side and negative roles, such as negligence, on the other.

**Implications for nursing practice:** The results of this study can be provided to nursing managers; therefore, by being aware of nurses' roles considering the specific subculture of the oncology ward, they can provide psychological interventions to improve the mental health of reluctant and complaining nurses and ethics-based training for secretive, negligent, and snitching nurses to provide quality care to the patient.

**Keywords:** caring, ethnography research, nursing, nursing care, oncology

## Ethical Commitment: A Strategy for Developing E-Learning Competencies and Promoting Community Health in Nursing Education

Fatemeh Alhani\*, Fatemeh Shojaei, Fatemeh Zarei, Soleiman Ahmadi

**Background:** The expansion of e-learning in nursing education requires faculty members to possess technological and pedagogical competencies aligned with this transformation. Among the key factors, ethical commitment plays a vital role in guiding professional efforts and enhancing the quality of education. This study aimed to explore the role of ethical commitment in the process of developing nursing faculty's educational competencies and its relationship with promoting individual and community health.

**Methods:** This qualitative study, conducted using conventional content analysis, explored the ethical commitment of nursing faculty members in the process of developing e-learning competencies. Data were collected through semi-structured interviews with 20 faculty members and educational administrators from nine nursing schools across Iran in 2023. Participants were selected using purposive and theoretical sampling, and data were analyzed following the Graneheim and Lundman approach.

**Results:** Data analysis led to the identification of three main categories and ten subcategories. The main categories included: ethical and professional responsibility for developing e-learning competencies, the professional nature of nursing as a driver of continuous professional development, and social responsibility toward community health as a motivator for competency acquisition.

**Conclusion:** Ethical commitment, as an intrinsic and enduring force, facilitates nursing faculty's professional growth and enhances the quality of e-learning. Institutionalizing values such as conscientiousness, fairness, responsibility, and social commitment through professional ethics education, reflective ethical practices, and organizational support can foster the development of educational competencies and ultimately improve community health. Emphasizing these values within educational policies ensures the sustainability of educational quality and the effectiveness of healthcare systems at both individual and societal levels.

**Keywords:** Nursing faculty, ethical commitment, e-learning competency, professional values, social responsibility, community health promotion, qualitative research

O-45

## AI-Driven Innovations in Oral and Maxillofacial Surgery: Toward Smarter Diagnosis, Surgical Planning, and Patient Care

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**Background:** Artificial Intelligence (AI) is rapidly transforming modern healthcare by enhancing diagnostic accuracy, improving clinical decision-making, and supporting personalized treatment. In Oral and Maxillofacial Surgery (OMFS), a specialty that relies heavily on imaging, 3D analysis, and precise surgical execution, AI has emerged as a powerful tool capable of elevating patient care throughout the entire clinical workflow.

**Aim:** This presentation aims to explore current AI-driven innovations in OMFS and demonstrate how these technologies enhance diagnosis, improve surgical planning, and optimize postoperative patient care.

**Methods:** A narrative review of recent literature was conducted focusing on AI applications relevant to OMFS, including deep learning for radiographic interpretation, AI-assisted surgical simulation, outcome prediction, and postoperative monitoring. Representative examples from clinical studies and emerging digital platforms were used to illustrate practical implementation.

**Results:** AI systems have shown high accuracy in detecting mandibular fractures, identifying maxillofacial lesions, and automating cephalometric landmark identification. In surgical planning, AI enables advanced 3D simulation, prediction of soft tissue outcomes, and optimization of implant positioning, reducing variability and improving precision. Postoperatively, AI-based monitoring tools assist in tracking healing, identifying early complications, and enhancing patient compliance through automated alerts and personalized guidance.

**Conclusion:** AI is reshaping OMFS by providing surgeons with smarter diagnostic tools, more predictable planning systems, and continuous postoperative support. As AI technologies evolve, their successful integration will depend on ethical implementation, robust validation, and continued collaboration between clinicians and digital systems. AI will not replace the surgeon — but it will empower the surgeon to deliver safer, more precise, and more personalized care.

O-46

## Sociocultural Factors Influencing Physical Activity in Adolescents: Pathways and Strategies for Promotion

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**Introduction:** Adolescent physical inactivity remains a major global health issue, with many youths failing to meet recommended activity levels. Sociocultural factors—including family influence, peer dynamics, cultural norms, and environmental conditions—play a central role in shaping adolescents' behaviors. This study examines these influences to better understand how they facilitate or hinder physical activity.

**Methods:** This mini-review synthesizes findings from both qualitative and quantitative studies related to adolescent physical activity. The analysis draws on sociocultural and behavioral frameworks to explore how family structures, peer relationships, cultural expectations, and environmental contexts shape physical activity engagement.

**Findings:** The review shows that adolescents' physical activity behaviors are shaped by strong interactions between family support, peer influence, cultural norms, and environmental accessibility. Fathers, mothers and co-participation often act as key motivators, while healthy friendship or peer groups reinforce either active or inactive lifestyles through shared norms and mutual selection. Technology, parental modeling of active lifestyles, self-efficacy, mental health, stigma surrounding weight or body image, school support, cultural expectations regarding gender and sports, along with transitions such as entering high school, influence activity levels. Safe, accessible spaces and familiar social networks further determine whether adolescents feel motivated and confident to be physically active.

**Conclusion:** Adolescent physical activity can be improved by interventions that strengthen peer and family support, align with cultural values, and address environmental and social barriers. Identifying youth who lack supportive networks is essential. Programs grounded in behavioral models such as self-determination and COM-B, and designed to be enjoyable and culturally meaningful, are more likely to promote sustained activity. A socioculturally informed approach, social ecological model and integration of physical activity in communities and healthcare system are crucial for achieving meaningful improvements in adolescent physical activity.

O-47

## A New Model for End-of-Life Care: Bridging Palliative Care and Primary Health in the Community

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**Background:** Terminally ill cancer patients often experience significant pain and suffering at the end of life. Community-based palliative care is recognized for its potential to enhance the quality of life for these patients and facilitate a dignified death. This study aimed to develop an integrated model for incorporating community-based palliative care into the Primary Health Care (PHC) system for this population.

**Methods:** This study is health system research (HSR) that was conducted in three phases from October 2016 to July 2020. In the first phase, dimensions of community-based palliative care were explored in patients with cancer using qualitative methods and conventional content analysis. In the second phase, a scoping review was carried out to complete the collected data from the qualitative phase of the study. Based on the collected data in the first and second phases of the study, a preliminary draft of community-based palliative care was developed for patients with cancer based on the framework of the World Health Organization. Finally, the developed model was validated using the Delphi technique in the third phase of the study.

**Results:** Data analysis indicated that providing community-based care to patients with cancer is influenced by the context of care. According to the developed model, patients are identified as terminally ill, and then are referred to the local comprehensive health center in a reverse manner. After patients' referral, they can receive appropriate healthcare until death by the home care team in relation to the comprehensive health center based on the framework of primary healthcare.

**Conclusion:** This model was developed based on the current Iranian healthcare structure and the needs of terminally ill cancer patients. According to the model, healthcare is provided in a reverse manner from the subspecialty centers to patients' homes in order to provide easy access to palliative care. It is suggested to use this model as a pilot at the regional level.

**Keywords:** Palliative care; Community health care; Advanced cancer; Terminally ill; Home health care

O-48

## Palliative Care for All: Integrating Primary Health Care to Achieve Health Equity in Serious Illness

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**Background:** Inequitable access to quality palliative care constitutes a critical challenge to global health justice. Disparities are particularly pronounced among marginalized groups, such as those in rural locales, ethnic minorities, socioeconomically disadvantaged individuals, and patients with diagnoses other than cancer, who face systemic barriers to specialist palliative care. This scoping review investigates the pivotal role of Primary Health Care (PHC) as a foundational strategy to mitigate these disparities and advance equitable palliative care provision for all individuals with serious illness.

**Methods:** This scoping review was conducted in 2024 based on the Cochrane methodology using the methodological framework of Arksey and O’Malley. The literature relevant to the research question was retrieved by formulating a structured search strategy in international databases, such as Web of Science, Scopus, PubMed/Medline. The keywords used for literature search were “palliative care”, “primary health care”, and “health equity”. Two investigators initially evaluated studies based on the title, abstract, and keywords, followed by full text reviewing. English language articles published between 2010 and 2024 were screened, and qualitative synthesis was used for data analysis.

**Results:** Successful models are characterized by either specialist-PHC co-deployment or community-based, GP/nurse-led care with specialist support. System-level facilitators are paramount, specifically: standardized PHC training in palliative competencies, clear referral pathways, and health information exchange. The review affirms PHC’s pivotal role in ensuring timely, culturally appropriate, and preference-sensitive care, which is associated with decreased acute-care utilization at end-of-life. Conversely, systemic barriers to integration were frequently documented, including fragmented funding, workforce capacity issues (burnout, skill gaps), and regulatory constraints on essential pain management pharmaceuticals.

**Conclusion:** The evidence strongly suggests that a robust PHC system is the most viable platform for achieving population-wide palliative care coverage and redressing inequities.

**Keywords:** palliative care; Primary health care; Health equity

# POSTER PRESENTATION

P-1

## The Role of Artificial Intelligence in Triage and Patient Prioritization in Emergency Departments: A Systematic Review

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**Background:** High patient load and limited capacity force emergency departments (EDs) to manage an increasing number of crises, making human-centered triage systems difficult to implement.

Methods such as the Emergency Severity Index (ESI), which rely on subjective clinical judgment, can lead to delays and variability in classifying patients.

This systematic review discusses how artificial intelligence (AI) is transforming EDs. It shows how AI can help doctors make better decisions and improve patient care using tools like deep learning for real-time prediction.

**Methods:** A systematic search was conducted across PubMed and Google Scholar to identify relevant studies from 2020 to 2025. Original research articles, observational studies, and clinical trials that were specifically concerned with AI-based triage and patient prioritization in EDs were all included within the inclusion criteria.

Only English-language, peer-reviewed studies were included. Data extraction focused on AI models, input variables, performance metrics, operational outcomes, and ethical aspects. In total, thirty-one studies were reviewed.

**Results:** AI-based triage systems were more effective in assessing outcomes than traditional methods, with AUROC values as high as 0.98 and better at finding high-risk patients.

Accuracy increased by 6–11% when structured data (vital signs, EHR) were combined with unstructured clinical notes. AI improved resource allocation, save time, and decreased under-and-over-triage rates. Yet some challenges include: unreliable data quality, algorithmic bias, and a lack of transparency.

**Discussion:** AI has the potential to revolutionize ED triage by increasing accuracy, productivity, and patient safety. Upcoming studies should emphasize real-world trials, workflow adoption, algorithm improvement, and ethical standards.

**Keywords:** Artificial Intelligence, Emergency Department, Triage, Patient Prioritization, Machine Learning, Explainable AI, Algorithmic Bias

P-2

## Risk factors and long-term consequences of brachial plexus injury due to shoulder dystocia in infants: A review of existing studies.

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**Background:** Shoulder dystocia is a serious and unpredictable birth complication that significantly increases the risk of brachial plexus palsy and irreversible neurological damage. Given the substantial burden of this condition and its long-term impact on children's quality of life, thorough investigation is warranted. This review examines the risk factors and long-term consequences of brachial plexus injury caused by shoulder dystocia in infants.

**Methods:** In this narrative review study, the researcher initially searched using the following keywords and phrases such as shoulder dystocia, brachial plexus injury, Prolonged Labor, permanent brachial paralysis, quality of life in children in the scientific databases Google Scholar, Pubmed, and SID from 2020 to 2025. Then, out of the 70 articles found, after removing duplicate articles, books, theses, review articles, and articles in languages other than Persian and English, 45 articles were reviewed.

**Results:** Based on the results, the most important risk factors for irreversible brachial plexus injury due to shoulder dystocia include fetal macrosomia, gestational diabetes, prolonged labor, advanced labor maneuvers, and concomitant clavicle fracture were identified. Its long-term consequences include severe or permanent weakness in the forearm and hand muscles, decreased strength and deformity of the shoulders, permanent brachial plexus paralysis, chronic motor disorders, and permanent need for orthopedic care.

**Conclusion:** According to the results, focusing on clinical management, teaching safe delivery protocols, performing prenatal screenings, and implementing orthopedic follow-up protocols and immediate rehabilitation can improve the quality of life of these children.

**Keywords:** Infants, Brachial Plexus Injury, Shoulder Dystocia, Prolonged Labor

P-3

## Advances in Pediatric Inflammatory Bowel Disease: Integrating Precision, Digital, and Multidisciplinary Care

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**Background:** Pediatric inflammatory bowel disease (PIBD), encompassing Crohn's disease and ulcerative colitis, is increasing worldwide and often presents with extensive, aggressive inflammation compared with adult-onset disease. The chronic nature of PIBD affects growth, education, and psychosocial well-being, highlighting the need for tailored, multidisciplinary approaches. The aim of this study is to review advances in Pediatric Inflammatory Bowel Disease.

**Methods:** A literature review (2020–2025) was conducted across PubMed, Embase, Cochrane, and Scopus using the terms like pediatric, IBD, Inflammatory Bowel Disease, treatment. The related articles were reviewed based on inclusion and exclusion criteria.

**Results:** Emerging data confirm that precision medicine—particularly biologics such as vedolizumab, ustekinumab, and JAK inhibitors—combined with therapeutic drug monitoring, reduces steroid dependence and promotes growth recovery. Nurse-led, multidisciplinary teams enhance adherence, communication, and emotional support, fostering trust among families. Digital health tools, including teleconsultations and mHealth platforms, have expanded equitable access and improved self-management, although occasional screen fatigue is reported. Practical innovations such as home infusions and flexible clinic hours further reduce treatment burden and missed visits. Collectively, integrated precision and supportive care models demonstrate superior outcomes in disease control and quality of life.

**Conclusion:** Combining biologic precision therapy with digital engagement and nurse-led multidisciplinary care represents a transformative model for managing PIBD. Future pragmatic trials and long-term follow-up are essential to validate sustainability, safety, and scalability of these integrated care frameworks.

**Keywords:** Pediatric IBD; Biologic therapies; Digital health; Nurse-led multidisciplinary care; Therapeutic drug monitorin

P-4

## The Role of Digital Health Literacy in Enhancing Patient Engagement and Self-Management: A Scoping Review

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**Background:** Digital health literacy is a critical factor influencing health outcomes, enabling individuals to make informed decisions and actively engage in healthcare. The growing use of digital tools—such as telehealth, mobile apps, and online education—offers new opportunities to promote knowledge and self-management. However, inequalities in access and use persist due to social and structural barriers.

**Methods:** A scoping review was conducted using PubMed and Google Scholar with keywords “digital health literacy,” “eHealth literacy,” “telehealth,” and “patient engagement.” Studies published between 2018 and 2024 were screened, and twenty relevant articles were analyzed based on intervention types, influencing factors, and health outcomes.

**Results:** Digital interventions improved health knowledge, digital competence, and self-management across populations. Parents reported better disease-specific understanding and child health outcomes; adults showed enhanced preventive behaviors and decision-making; and patients with chronic diseases experienced improved adherence and shared decision-making. Nonetheless, digital inequities remain a major challenge.

**Conclusion:** Digital health interventions can strengthen health literacy, empower self-management, and improve overall health outcomes. Future initiatives should focus on equitable access, population-specific adaptation, and integration into routine healthcare.

**Keywords:** Digital Health Literacy; Patient Engagement; Self-Management

P-5

## Patients' Satisfaction with Humane Care in Dialysis Wards of Teaching Hospitals Affiliated to Behbahan Faculty of Medical Sciences

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**Introduction:** Humane care, as one of the fundamental pillars of the nursing profession, plays an important role in improving the experience of patients, especially those with chronic diseases such as renal failure. Due to the continuous treatment process, frequent hospitalizations, and exposure to numerous physical and mental problems, dialysis patients have a greater need to receive care based on empathy, emotional support, and respect.

**Objectives:** Assessing these patients' satisfaction with humane care can help improve the quality of nursing services and identify existing weaknesses in dialysis wards.

**Methods:** This cross-sectional study was conducted in three teaching hospitals affiliated to Behbahan Faculty of Medical Sciences during a period between 2024 and 2025. Sampling was done by census method and after applying the inclusion and exclusion criteria, the final number of participants reached 97 patients. The data collection tool was the Persian version of the Revised Human Caring Scale (RHCS). The data were analyzed with SPSS 23 software using descriptive and inferential statistical tests.

**Results:** The overall mean score of patients' satisfaction with human care was  $4.59 \pm 0.59$ , which indicated a high level of satisfaction. The highest satisfaction scores were related to the dimensions of interdisciplinary collaboration and professional performance, and the lowest scores were related to the dimensions of recognizing physical needs and human resources. A statistically significant relationship was observed between patient satisfaction and demographic variables ( $P < 0.05$ ).

**Conclusion:** The results showed that the level of patient satisfaction with human care is desirable, although there is a need for improvement in some areas such as human resources and recognizing physical needs.

**Keywords:** Humane care, patient satisfaction, hemodialysis, dialysis ward

P-6

## Geriatric Psychiatric Nursing in Iran: A Systematic Review of the Role of Spiritual-Psychological Interventions in Enhancing Quality of Life

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**Introduction:** As Iran's population continues to age, the role of psychiatric nursing in enhancing the quality of life for older adults has become increasingly vital. Spiritual-psychological interventions offer a comprehensive approach that can significantly impact mental health and overall well-being in the elderly population. This study aimed to examine the effectiveness of spiritual-psychological interventions in geriatric psychiatric nursing and their role in improving the quality of life for older adults in Iran.

**Methods:** We conducted a systematic review by searching both Iranian and international databases, including SID, MagIran, PubMed, and Scopus, for articles published between 2012 and 2023. From 196 initially identified articles, 15 studies met our inclusion criteria and were selected for detailed analysis.

**Findings** The results demonstrated that spiritual-psychological interventions were effective in four key areas:

Reducing symptoms of depression and anxiety

Increasing life satisfaction

Enhancing psychological resilience

Strengthening feelings of meaning and purpose in life

**Conclusion:** Integrating spiritual-psychological interventions into geriatric psychiatric nursing can serve as an effective strategy for enhancing the quality of life among older adults in Iran. We recommend providing specialized training for psychiatric nurses and incorporating these interventions into standard care protocols.

**Keywords:** Psychiatric Nursing , Spiritual-Psychological Interventions

P-7

## The Predictive Role of Coping Styles in Post-Traumatic Growth of Older Adults Bereaved by COVID-19

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**Background:** Exposure to grief due to COVID-19 can be followed by psychological trauma among the elderly. However, effective use of coping strategies can lead to post-traumatic growth. Hence, the present study aimed to assess the predictive role of coping styles towards post-traumatic growth in COVID-19-bereaved elderly.

**Methods:** In this cross-sectional study, 63 bereaved older adults (who had lost a nuclear family member) were recruited using simple random sampling. Data were collected using demographic data questionnaires, Tedeschi and Calhoun's Post-Traumatic Growth Inventory (PTGI), and Billings and Moss's Coping Styles Inventory (CMSQ). Data analysis was conducted using independent t-tests, one-way ANOVA, and multivariate linear regression.

**Results:** The posttraumatic growth score averaged  $62.64 \pm 15.33$ , while the emotion-focused and problem-focused coping styles scores averaged  $22.11 \pm 4.79$  and  $14.24 \pm 3.04$ , respectively. Most older adults used the problem-focused strategy (93.7%). The regression analysis showed that problem-focused ( $\beta=0.70$ ,  $p<0.001$ ) and emotion-focused ( $\beta=0.27$ ,  $p=0.007$ ) coping styles were predictors of posttraumatic growth in older bereaved due to COVID-19. Additionally, older who lost their spouse had higher posttraumatic growth ( $\beta=0.29$ ,  $p=0.002$ ).

**Conclusion:** Given the high predictive ability of coping styles (especially the problem-focused style) on posttraumatic growth, a solution-focused approach to crisis would facilitate positive psychological change after loss. In addition, the role of the relationship with the deceased (spouse) similarly illustrates the importance of the quality of lost relationship in determining psychological response. From this, improving coping styles among the elderly can be considered an important strategy in promoting psychological growth.

**Keywords:** Post-Traumatic Growth, Coping Skills, Bereavement, Older Adults, COVID-19

P-8

## Challenges of the New Era in Controlling Adolescents' High-Risk Behaviors

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**Background:** Contemporary adolescents face unprecedented challenges regarding high-risk behaviors. The rapid expansion of digital technologies, shifting communication patterns, and new forms of addiction have complicated traditional prevention and control approaches. This study investigates the effectiveness of preventive strategies and therapeutic interventions in mitigating these behaviors among youth.

**Methods:** The present research is a review study. Data were collected from PubMed, ProQuest, Google Scholar, Ovid, Magiran Library, SID, Science Direct, and Cochrane databases between 2010-2025 using the keywords prevention, high-risk behavior, adolescent, modern challenges, and combined interventions.

**Results:** Data analysis revealed school-based prevention programs were 45% more effective in reducing high-risk behaviors than therapeutic interventions, which showed only a 25% success rate in preventing relapse. Cost-effectiveness analysis demonstrated prevention programs were three times more efficient. Emerging risk factors identified included digital addiction (43%), new psychoactive substances (28%), and digital self-harm (19%).

**Conclusion:** This study demonstrates that "prevention over cure" is an effective, cost-efficient strategy for addressing adolescent risk behaviors. Essential measures include early life skills education, parental support, smart screening systems, and mobile clinics. For affected youth, revised treatment protocols and digital tools are crucial. Success requires integrated, innovative approaches using digital platforms and community programs.

**Keywords:** prevention, high-risk behavior, adolescent, modern challenges, and combined interventions

P-9

## Physical activity, overweight/obesity, and dietary calcium intake in women of reproductive age in Khorramabad, western Iran

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**Background/objective:** Regular physical activity (PA) plays an important role in physical and mental health. This study aims to assess PA profile, overweight/obesity prevalence, and dietary calcium intake in women of reproductive age in Khorramabad, western Iran.

**Methods:** This is a descriptive study with a cross-sectional design. Participants were 417 women at reproductive age (15-49 years) who visited the health centers in Khorramabad, western Iran in 2021. A computer-based food frequency questionnaire was used for measuring calcium intake, and the PA profile was measured using the short form of the international physical activity questionnaire. Collected data were described using descriptive statistics and analyzed using ANOVA and chi-square test in SPSS v.26.

**Results:** The mean BMI was  $28.63 \pm 5.87$  kg/m<sup>2</sup>. Ninety-two women were overweight (22.1%), 92 had obesity class I (22.1%), 72 had obesity class II (17.3%), and 8 had obesity class III (1.9%). Moreover, 190 had a low PA profile (45.6%), 160 had a moderate PA profile (38.4%), and 67 had a high PA profile (16.1%). There was a significant difference in PA profile among women with different BMI ( $p=0.001$ ). The mean total calcium intake was  $905.8 \pm 205.2$  mg/day, below the recommended level (1000 mg/day) and above the estimated average level (800 mg/day). No significant difference in dietary calcium intake was reported among women with different BMI ( $p=0.31$ ).

**Conclusion:** Most of women at reproductive age in Khorramabad city have a low PA profile. The prevalence of overweight and obesity in these women are 22.1% and 41.3%, respectively. They have adequate dietary calcium intake.

**Keywords:** Physical activity, obesity, nutrition, reproductive health, Iran

P-10

## Multidimensional evaluation and analysis of the implementation of “Youthful Population and Protection of the Family” Law in Iran: A review study

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**Background:** Following the approval of the “Family and Youth Protection” law in 1400, this study aimed to comprehensively review previous research on its implementation and to analyze the associated challenges and consequences across social, economic, cultural, legal, and health dimensions.

**Method:** This study was a literature review conducted through a systematic search of Google Scholar, PubMed, and SID databases for studies published between 1400 and 1404. After initial screening, relevant articles were selected and analyzed using qualitative content analysis and synthesis of findings.

**Findings:** The implementation of the Youth Population Law in Iran faces challenges, although financial resources can be an incentive for childbearing, but insufficient financial resources, lack of appropriate insurance coverage, lack of attention to demographic differences between provinces and the role of the father, insufficient financial incentives and support, inappropriate treatment of the target group. Culturally and socially, political attitudes, low institutional trust and qualitative characteristics have affected the policy outcomes. In terms of health, restrictions on healthy reproductive services and lack of access to legal abortion are considered a threat to public health. In addition, policy assessments in the Seventh Development Plan indicate persistent weaknesses in the implementation and lack of comprehensiveness of this program.

**Conclusion:** Overall, the Youth Population Law faces obstacles such as financial shortages, weak coordination, and public distrust. Achieving its goals requires revising incentive structures, promoting local policymaking, enhancing institutional trust, and shifting from birth-centered strategies toward sustainable family support and collective welfare.

**Keywords:** Population youth, childbearing policies, demographic incentives, reproductive health

P-11

## Prevalence of Misophonia and its Relationship with Internet Addiction among Medical Sciences Students in Rafsanjan: A Descriptive-Correlational Study

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**Background and Objective:** The present study was conducted with the aim of determining the prevalence of misophonia and investigating its relationship with Internet addiction among students of Rafsanjan University of Medical Sciences in the academic year 2024.

**Materials and Methods:** This was a descriptive-correlational cross-sectional study. A sample size of 482 students was determined using a stratified-systematic random sampling method. Data were collected using online demographic information questionnaires, the Misophonia Questionnaire (MQ), and the Young Internet Addiction Test (IAT). The data were analyzed using SPSS software (version 27) with descriptive statistics (frequency, mean, and standard deviation) and analytical statistics (Pearson's correlation and Chi-square tests).

**Results:** Out of the 482 students examined, 70.33% reported clinically significant symptoms of misophonia. In addition, 42.53% were at risk of Internet addiction, and 4.15% were found to be addicted to the Internet. The results showed a positive and significant correlation (weak to moderate) between the severity of misophonia symptoms and Internet addiction ( $P<0.001$ ). Internet addiction was significantly higher among students with misophonia ( $P<0.001$ ). Furthermore, the prevalence of misophonia symptoms significantly decreased with age ( $P=0.024$ ), and the prevalence of Internet addiction was significantly higher among male students compared to female students ( $P=0.002$ ).

**Conclusion:** The prevalence of misophonia and Internet addiction is high among medical sciences students in Rafsanjan, and these two phenomena are directly and significantly related to each other. Given the high prevalence of these issues, it seems necessary to design educational and interventional programs for screening, prevention, and treatment of these disorders in the student population.

**Keywords:** Misophonia, Internet addiction, Students, Sound sensitivity

P-12

### The effect of aromatherapy with clove essential on anxiety and pain after cesarean section: A controlled randomized clinical trial

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**Introduction:** Women experience severe and intolerable pain following cesarean delivery, which can lead to excessive anxiety in mothers. Due to the side effects of analgesic drugs, non-pharmacological methods such as aromatherapy have recently gained attention for pain management, and the effect of various essences has been investigated for this purpose. Therefore, this study was conducted with aim to assess the effect of aromatherapy with clove essential oil on anxiety and pain after cesarean delivery.

**Methods:** This controlled clinical trial study with a pretest-posttest design was conducted in 2023 on 72 women candidate for cesarean delivery at Taleghani Hospital in Ilam, Iran. Aromatherapy was performed using normal saline in the control group and clove essential oil in the intervention group. Anxiety and pain levels were assessed using questionnaire. Data were analyzed using SPSS statistical software (version 22) and independent t-tests, repeated measures analysis of variance, and, if necessary, analysis of covariance (ANCOVA).  $P<0.05$  was considered statistically significant.

**Results:** The levels of state and trait anxiety before and 4 hours after the intervention showed no significant difference between the two groups ( $p>0.05$ ). However, at 8 and 12 hours post-intervention, the mean anxiety scores differed significantly between the two groups ( $p<0.001$ ). Additionally, the mean pain scores showed a significant difference between the groups at 4, 8, and 12 hours post-intervention ( $p<0.001$ ).

**Conclusion:** Aromatherapy with clove essential oil can effectively reduce anxiety and pain after cesarean section.

**Keywords:** Anxiety, Aromatherapy, Cesarean section, Clove, Pain

P-13

## The Role of Artificial Intelligence in Pregnancy and Childbirth Care: A systematic Review

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**Background:** Artificial intelligence (AI) has emerged as a transformative tool in modern healthcare. In maternal and neonatal care, AI technologies provide new opportunities for predicting complications, improving decision-making, and enhancing the quality of care during pregnancy and childbirth. This systematic review aimed to summarize the applications, benefits, and challenges of AI in obstetric and midwifery practice

**Methods:** A systematic search was conducted in PubMed, Scopus, ScienceDirect, Google Scholar, MAGIran, and SID using both Persian and English keywords for studies published between 2020 and 2025. The keywords included “artificial intelligence,” “Midwifery,” “Maternal Health” “machine learning,” “pregnancy,” “maternal care,” and “childbirth.” Articles focusing on the application of AI in screening, diagnosis, monitoring, and clinical decision support were included. Data were analyzed using thematic synthesis.

**Results:** Out of 187 identified studies, 42 met the inclusion criteria. AI demonstrated high accuracy in predicting preeclampsia, gestational diabetes, and preterm birth. Machine learning models supported personalized risk assessment, while image-based AI tools improved fetal anomaly detection. However, limited clinical integration, ethical concerns, and data privacy issues remained key challenges

**Conclusion:** AI holds strong potential to revolutionize pregnancy and childbirth care by enabling early detection and precision-based interventions. Despite promising evidence, further multidisciplinary research and ethical frameworks are needed to ensure safe, equitable, and effective use of AI in midwifery practice.

**Keywords:** Artificial Intelligence, Pregnancy, Childbirth, Midwifery, Maternal Health, maternal care, machine learning

P-14

## The Impact of Digital Health Interventions on the Prevention of Risky Behaviors in Youth: A Systematic Review

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**Introduction:** Reducing risky behaviors among youth is of great importance, and digital health interventions have been recognized as an effective tool for preventing these behaviors. This study examined the impact of such interventions on the prevention of risky behaviors among young people.

**Methods:** The present study was conducted using a systematic review method, and by searching databases including Civilica, SID, Scopus, PubMed, as well as the Google Scholar search engine, with the keywords: Prevention, Health Interventions, Youth, Digital Health, Risky Behaviors, during the years 2014 to 2024.

**Findings:** The results of various studies showed that digital health interventions can significantly reduce risky behaviors among youth, especially risky sexual behaviors and drug use. These interventions include personalized mobile applications, social networks, websites, and video games, which are designed and implemented with the active participation of young people and parents. The effectiveness of these interventions is mainly achieved through increasing knowledge, strengthening decision-making skills, providing immediate feedback, creating motivation for behavior change, and offering practical training opportunities for choosing healthy behaviors. In addition, easy accessibility, flexibility in use, cost reduction, and the possibility of utilization without time and place limitations lead to increased acceptance, interaction, and continuous use of these interventions.

**Conclusion:** Considering the impact of digital health interventions on improving the knowledge and attitudes of young people, the development of personalized digital interventions with key effective features, and the use of mobile applications as complementary preventive tools to promote healthy behaviors and increase youth access to preventive resources, should be prioritized.

**Keywords:** Prevention, Health Interventions, Youth, Digital Health, Risky Behaviors

P-15

## The Role of Nurses in Strengthening Community-Based Care: A Key Strategy for Health Promotion and Health Equity

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**Background:** Demographic transitions, the growing burden of chronic diseases, and limited health system resources have highlighted the importance of expanding community-based care more than ever before. Nurses, as an integral part of the health team, play a pivotal role in delivering comprehensive, continuous, and accessible services at the community level. Strengthening the role of nurses in community-based care can lead to improved health outcomes, reduced health inequities, and enhanced health system efficiency. This study aims to elucidate the role of nurses in enhancing community-based care and to identify strategies for strengthening community health nursing within the Iranian health system.

**Methods:** This descriptive systematic review was conducted through a comprehensive search of PubMed, Scopus, SID, and Magiran databases from 2010 to 2025. Keywords such as “Community-based nursing,” “Primary health care,” and “Health equity” were used. Relevant studies were screened based on inclusion criteria and quality, and then analyzed through content analysis.

**Results:** Findings revealed that active participation of nurses in community health education, disease screening, chronic disease management, post-discharge follow-up, and local policy-making contributes to higher patient satisfaction, reduced unnecessary hospital visits, and improved health equity indicators. Empowering nurses, redefining job descriptions, and providing policy-level support are essential requirements for successful implementation of community-based care.

**Conclusion:** Expanding the role of nurses in community-based care is not only a key approach to improving individual and community health but also an effective strategy for reducing health disparities and increasing health system resilience. Special attention to professional education, legal support, and structural integration of community health nursing is crucial to achieving these goals.

**Keywords:** Community-Based Nursing, Community-Based Care, Health Promotion, Health Equity, Health System

P-16

## The Silent Crisis: A Scoping Review of Self-Neglect's Role in Chronic Disease Management Among Older Adults

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**Background:** Elder self-neglect is a pervasive yet often overlooked issue that significantly complicates the management of chronic diseases in older adults. Despite its high prevalence and serious consequences, the specific relationship between self-neglect and chronic disease management remains insufficiently explored, necessitating a comprehensive mapping of the existing evidence.

**Methods:** This scoping review followed the Arksey and O'Malley methodological framework (2005). Systematic searches were conducted in PubMed, Scopus, and Web of Science for studies published in English or Persian up to 2025. After screening 1,032 records, 39 studies met the inclusion criteria for final analysis. Data were charted and synthesized to identify key themes.

**Results:** The prevalence of self-neglect among older adults ranged from 18% to 37%. Key risk factors included cognitive impairment, social isolation, depression, and low socioeconomic status. Self-neglect was strongly associated with poor management of various chronic conditions including hypertension, diabetes, cardiovascular diseases, and chronic lung disease-leading to reduced medication adherence, poor dietary habits, delayed healthcare seeking, and increased hospitalizations. A significant gap was identified in standardized screening tools and tailored interventions.

**Conclusion:** Elder self-neglect critically impairs the management of chronic diseases, resulting in worse health outcomes and increased healthcare use. Implementing routine screening and developing multidisciplinary, person-centered care models are essential. Future research must focus on creating effective interventions and raising awareness to empower older adults and support healthy aging.

**Keywords:** Self-Neglect, Chronic Disease, Management, Older Adults

P-17

## New cases and age-standardized rates of gastrointestinal cancers in Lorestan province, western Iran, in 2019: A population-based study

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**Background/objective:** Gastrointestinal (GI) cancers are among the common cancers worldwide, including Iran. Considering the changes in the incidence of cancers over time and the lack of an epidemiological survey of the incidence of GI cancers in Lorestan province, west of Iran, this study aims to investigate the number of new cases and age-standardized incident rates (ASIR) of GI cancers in this province in 2019.

**Methods:** The data on GI cancers, including colorectal cancer (CRC), gastric cancer (GC), esophageal cancer (EC), and small intestine cancer, in Lorestan province were extracted from the Iranian National Population-Based Cancer Registry for 2019, along with demographic and clinical information at the time of diagnosis according to the International Classification of Diseases for Oncology, 3rd edition, 1st revision (ICD-O-3.1). The ASIR was calculated based on sex and city. The incidence rate ratio (IRR) test was performed to examine the significance of differences in the ASIR values based on sex and city.

**Results:** There were 514 new cases of GI cancers in the province (52% in men and 42% in women), including 267 cases of GC, 174 cases of CRC, 62 cases of EC, and only 11 new cases of small intestine cancer. These cancers were more common in people aged >60 years. Most of the patients with GI cancers were from urban areas (66%) with an undetermined cancer grade (75.3%) and malignant behavior (100%) at the time of diagnosis. The basis of diagnosis for most GI cancers was histology (88%). Overall, the ASIR of GI cancers in Lorestan province was 31.9 per 100,000 population (37.6 in men and 26.5 in women). The ASIRs for GC, CRC, and EC were 16.6, 10.4, and 4.1, respectively. The GI cancers were more common in Dorud city (ASIR= 57.9) followed by Delfan (ASIR= 37.5) and Khorramabad (ASIR= 34) cities.

**Conclusion:** In 2019, GC was the most common GI cancer in Lorestan province (in both men and women), followed by CRC and EC. Targeted early screening in selected high-risk cities of the province should be strongly considered. Educational programs should be used to raise people's awareness of these regions, considering the adverse effects of unhealthy lifestyles and eating habits on the occurrence of these cancers.

**Keywords:** Gastrointestinal cancers, incidence, epidemiology, Iran

P-18

## The Impact of Orem's Self-Care Deficit Theory on Improving Asthma Symptoms in Children: An integrative Review

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**Background:** Asthma is a common chronic respiratory disease in children. Orem's Self-Care Deficit Theory, with its emphasis on self-care, may be effective in its management. This review aims to evaluate the impact of interventions based on Orem's model on asthma symptoms in children.

**Methods:** A search was conducted in Google Scholar, PubMed and Magiran for English and Persian articles published between 2013-2025. Of the 435 identified articles, after removing duplicates and screening based on title and abstract, 68 articles were selected for full-text evaluation. Inclusion criteria were interventional studies on children with asthma reporting outcomes related to asthma symptoms and interventions based on Orem's model. Studies with irrelevant populations, unrelated interventions, and low quality were excluded. After eliminating duplicates and maintaining ethical standards to avoid biases, the final analysis comprised 18 selected studies.

**Results:** The findings of the selected studies demonstrated that interventions based on Orem's Self-Care Deficit Theory significantly led to the improvement of asthma symptoms in children, including a reduction in the frequency and severity of attacks, improved pulmonary function, and enhanced health-related quality of life. These interventions also resulted in increased knowledge and self-care skills in children and their parents.

**Conclusion:** The application of Orem's Self-Care Deficit Theory as a management approach can be effective in improving asthma symptoms in children. Emphasizing self-care and empowering patients and families through targeted education contributes to better disease control. Future studies with stronger designs are recommended.

**Keywords:** Orem's Self-Care Deficit Theory, Self-Care, Asthma, Children, Symptoms

P-19

## Brain Lesion Monitoring in Patients with Tuberous Sclerosis Complex Using MRI: A One-Year Follow-Up Study at Mousavi Hospital, Zanjan (2022–2024)

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**Background:** Tuberous Sclerosis Complex (TSC) is a rare multisystem genetic disorder characterized by the formation of benign tumors in the central nervous system (CNS) and other organs. Brain involvement, including cortical tubers, subependymal nodules (SENs), and subependymal giant cell astrocytomas (SEGAs), is highly prevalent and can lead to seizures, cognitive delay, and obstructive hydrocephalus. Magnetic resonance imaging (MRI) is the gold standard for diagnosis and follow-up.

**Objective:** This study aimed to evaluate the MRI characteristics of brain lesions in children diagnosed with TSC and to monitor changes over a one-year follow-up period at Ayatollah Mousavi Hospital, Zanjan, Iran (2022–2024).

**Methods:** A retrospective descriptive-analytical study was conducted on 23 pediatric patients with definite TSC who underwent at least two brain MRI examinations separated by a minimum interval of 12 months. MRI sequences included T1-weighted, T2-weighted, FLAIR, DWI, and contrast-enhanced T1 images. Lesion type, number, size, location, and progression were recorded. Correlations with clinical features and pharmacological treatment (e.g., Everolimus) were analyzed.

**Results:** Cortical tubers were observed in 91% of patients, predominantly in the frontal and parietal lobes. SENs were present in 73%, and SEGA in 8.7% of patients. White matter abnormalities were detected in 78% of cases. During follow-up, minor progression of cortical tubers occurred in 17.4% of patients, while SEGA lesions remained stable, particularly in patients receiving Everolimus. The number of cortical tubers was significantly associated with cognitive delay, and larger nodules or SEGA with frequent seizures. White matter abnormalities showed no significant change.

**Conclusion:** MRI is a sensitive, non-invasive tool for monitoring CNS lesions in pediatric TSC. Regular imaging facilitates early detection of lesion progression, guides therapeutic decisions, and supports individualized patient care. Pharmacological therapy with mTOR inhibitors appears to stabilize lesion growth and may reduce neurological morbidity. Comprehensive, multidisciplinary follow-up is essential for optimizing outcomes.

**Keywords:** Tuberous Sclerosis Complex, MRI, Cortical Tubers, Subependymal Nodules, SEGA, Pediatric Neurology, Everolimus, Follow-up

P-20

## Safe cultural environment in the nurses' cultural care of medical tourists in Iran: A qualitative study (Content analysis)

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**Background:** Medical tourism is a new concept in modern medicine. It refers to patients who travel abroad for medical treatment. Medical tourists have a different cultural and social background than their care providers. This study was conducted with the aim of explaining safe acceptance in the nurses' cultural care of medical tourists in Iran.

**Methods:** Methods and Materials: In this qualitative study, 28 semi-structured interviews were conducted with nurses, patients, patients' companions and physicals, who had been selected by purposeful sampling method in 2021-2022. The interviews were recorded and transcribed, and then were analyzed by conventional content analysis. • Approval was obtained from the Ethics Committee of Tehran Islamic Azad University of Medical Sciences (IR.IAU.TMU.REC.1399.575).

**Results:** In this study, a main theme of " Safe cultural environment " and 4 categories of "Justice in Care", "Cultural Sensitivity in Privacy", "Respecting Cultural Authenticity in Care Delivery", and "Gender Consistency in Care" were resulted from data analysis.

**Conclusion:** Results of present study show that Safe cultural environment in cultural care is a key and important factor in medical tourism. Iranian nurses are aware of the factors that affect cultural care and Safe cultural environment of medical tourists, and they take necessary measures to achieve Safe cultural environment.

**Keywords:** Content analysis, Medical tourism, Cultural care, Nurses, Safe culture

P-21

## The Effect of Family-Based Mindfulness Care Interventions on Sleep Quality and Mental Health of Nurses: A Systematic Review

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**Background:** Nurses often face sleep disturbances and psychological distress due to irregular work hours and high occupational stress. Mindfulness-based interventions are recognized as psychological approaches that reduce stress and anxiety and improve sleep quality. However, the effects of \*family-based\* mindfulness interventions among nurses have not been comprehensively reviewed. This systematic review aimed to evaluate the impact of family-based mindfulness interventions on nurses' sleep quality and mental health.

**Methods:** A comprehensive search was conducted in PubMed, Scopus, Web of Science, CINAHL, and PsycINFO from inception to March 2025 using the keywords "mindfulness interventions," "nurses," "sleep quality," "mental health," "family-based," and "systematic review." Eligible studies included randomized controlled or quasi-experimental designs that examined family-based mindfulness interventions among nurses and reported outcomes related to sleep quality or mental health. Study quality was assessed independently by two reviewers using the Cochrane Risk of Bias Tool (version 2). Due to heterogeneity, a narrative synthesis was applied to analyze findings.

**Results:** Twelve studies involving 980 participants were included. Intervention durations ranged from 6 to 12 weeks. Eight studies reported significant improvement in sleep quality, with a mean reduction of 2.3 points in the Pittsburgh Sleep Quality Index. Nine studies showed significant reductions in stress, anxiety, and depression scores, with mean decreases of 1.8 and 1.5 points, respectively.

**Conclusion:** Family-based mindfulness interventions effectively improve sleep quality and mental health among nurses. Incorporating family support in mindfulness programs may enhance nurses' well-being and occupational resilience. Further rigorous studies are recommended.

**Keywords:** Mindfulness interventions, Nurses, Sleep quality, Mental health, Family-based, Systematic review

P-22

## The Role of Spiritual Self-Care and Self-Compassion in Predicting Post-Traumatic Stress Disorder Among ICU Nurses in Educational Hospitals Affiliated with Lorestan University of Medical Sciences

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**Background:** ICU nurses are routinely exposed to psychologically taxing events that elevate risk of post-traumatic stress disorder (PTSD). This study examined whether spiritual well-being and self-compassion function as protective factors.

**Methods:** We conducted a cross-sectional, descriptive-analytical census in the ICUs of teaching hospitals affiliated with Lorestan University of Medical Sciences. Data were collected via secure online survey 2022-2023. After exclusions, the analytic sample was 165 nurses. Measures included demographics, the Watson PTSD Inventory, the Spiritual Well-Being Scale (SWBS), and the Self-Compassion Scale (SCS-SF). Analyses used descriptive statistics, Pearson correlations, and stepwise multivariable linear regression ( $\alpha = .05$ ).

**Results:** Mean scores indicated moderate spiritual well-being ( $M = 89.54$ ,  $SD = 10.63$ ), relatively low self-compassion ( $M = 32.48$ ,  $SD = 5.63$ ), and moderate PTSD symptoms ( $M = 65.71$ ,  $SD = 9.35$ ). PTSD correlated negatively with spiritual well-being and total self-compassion ( $r = -.41$  and  $-.36$ ;  $p < .001$ ) and positively with over-identification and isolation ( $r = .59$  and  $.37$ ;  $p < .001$ ). In stepwise regression, predictors entered in the following order: over-identification ( $\Delta R^2 = .42$ ), spiritual well-being ( $\Delta R^2 = .09$ ), total self-compassion ( $\Delta R^2 = .07$ ), and isolation ( $\Delta R^2 = .07$ ). The final model explained 65% of the variance in PTSD ( $R^2 = .65$ ; adjusted  $R^2 = .641$ ) and was significant overall,  $F(4,160) = 74.29$ ,  $p < .001$ .

**Conclusions:** Spiritual well-being and self-compassion appear to buffer PTSD among ICU nurses, whereas over-identification and isolation are linked to greater symptom severity. Interventions that strengthen these resources may improve mental health and work life.

**Keywords:** post-traumatic stress disorder; spiritual well-being; self-compassion; intensive care; nursing.

P-23

## Exploring the Experiences of Healthy Individuals during Home Quarantine in Iran's COVID-19 Response (2020)

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**Background:** The widespread outbreak of COVID-19 in 2020 led to the implementation of home quarantine policies for healthy individuals across many regions of Iran. This sudden and mandatory experience had diverse psychological, social, and behavioral impacts, the exploration of which may inform crisis management in future public health emergencies.

**Objective:** This qualitative study aimed to explore and explain the lived experiences of healthy individuals subjected to home quarantine during the COVID-19 pandemic.

**Methods:** Conducted in 2020, this research employed a conventional content analysis approach. Twenty-five healthy residents of Kerman Province were purposefully selected. Data were collected through semi-structured interviews and analyzed following the Graneheim and Lundman method.

**Results:** Data analysis revealed four main themes: "Immersion in Mental Turmoil," "Efforts toward Adaptation," "Enhancement of Hygiene Practices," and "Attitudes toward Infected Individuals." Participants reported experiencing contradictory emotions, fear, obsessive thoughts, and social isolation, yet also noted spiritual growth, improved hygiene behaviors, and reevaluation of social relationships.

**Conclusion:** Although home quarantine presented significant psychological and social challenges, it also offered opportunities for self-care, resilience building, and raising health awareness. These findings can guide policymakers in designing supportive interventions for future public health crises.

**Keywords:** Quarantine, Experiences, COVID-19

P-24

## Prevalence of Psychological Distress Based on Demographic and Anthropometric Characteristics in the Dena Cohort Population: A Population-Based Study

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**Background:** Psychological distress is defined as a state of heightened stress and emotional strain, encompassing symptoms such as anxiety, depression, hopelessness, and worry. Treatment follow-up in affected individuals is often low. Therefore, this study aimed to determine the prevalence of psychological distress according to demographic and anthropometric characteristics in the Dena cohort population (southwestern Iran).

**Methods:** This population-based study was conducted in 2025 using data from the Dena Cohort located in Sisakht, Southwest Iran. A total of 1,499 individuals aged 30–70 years who participated in the re-evaluation phase and completed the relevant questionnaire were included in the analysis. Psychological distress was assessed using the 10-item Kessler Psychological Distress Scale (K10). Demographic data included age, sex, marital status, and place of residence, while anthropometric indices comprised body mass index (BMI), waist-to-hip ratio (WHR), and wrist circumference. Statistical analyses were performed using mean and standard deviation, chi-square test, Fisher's exact test, and ordinal logistic regression with SPSS software version 16. A significance level of  $p < 0.05$  was considered.

**Results:** The findings revealed that 68.4% of the study population reported no psychological distress, while 14.5% experienced mild distress, 7.9% moderate distress, and 9.2% severe distress. Psychological distress was significantly more prevalent among women ( $p = 0.001$ ). Severe distress was nearly twice as common in rural compared to urban populations ( $p < 0.001$ ). No statistically significant differences were observed across age, marital status, BMI, educational level, or other anthropometric indices ( $p > 0.05$ ). Ordinal regression analysis indicated that women (OR = 1.62; 95% CI: 1.28–2.05), rural residents (OR = 1.48; 95% CI: 1.12–1.97), illiterate individuals (OR = 1.68; 95% CI: 1.18–2.39), and those with higher WHR (OR = 1.95; 95% CI: 1.26–3.01) and larger wrist circumference (OR = 1.09; 95% CI: 1.01–1.18) were more likely to experience higher levels of psychological distress ( $p < 0.05$ ).

**Conclusion:** The results of this study highlight a considerable prevalence of psychological distress, particularly among women and rural populations. Health authorities and healthcare networks may use these findings to identify related risk factors and implement appropriate interventions for at-risk groups.

**Keywords:** Psychological Distress, Demography, Anthropometry, Prevalence

P-25

## The Role of Gut Microbiome in Regulating Tryptophan-Kynurene Pathway Metabolism and Its Impact on Depressive Disorders in Young Adults: A Systematic Review

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**Background:** Depressive disorders in young adults, aged 18-30, pose a significant challenge in nursing practice, often disrupting education, relationships, and future health. Emerging evidence points to the gut-brain axis as a key player, where the gut microbiome influences mood through metabolic pathways. Specifically, the microbiome regulates tryptophan metabolism via the kynurene pathway, producing neuroactive compounds that can either protect against or contribute to depression. Imbalances, like increased kynurene or quinolinic acid, may heighten inflammation and reduce serotonin, worsening symptoms. This review examines how gut bacteria shape this pathway and its effects on depression, offering insights for holistic nursing interventions like diet or probiotics.

**Methods:** Guided by PRISMA guidelines, we searched peer-reviewed databases for articles from 2022 to 2025 using terms such as "gut microbiome", "tryptophan-kynurene pathway," "depression," and "young adults." Inclusion focused on human studies with validated depression measures (e.g., Beck Depression Inventory), microbiome analysis (e.g., 16S rRNA), and kynurene metabolites. Exclusions included animal models, non-English papers, or studies on other age groups. Independent reviewers screened abstracts and full texts, extracting data on microbial diversity, metabolite levels, and clinical outcomes. Quality was assessed via the Newcastle-Ottawa Scale and Cochrane tools.

**Results:** Of 987 records, 25 studies qualified: 15 observational, 8 interventional, and 2 cohorts, involving ~1,800 participants. Dysbiosis, with lower diversity and higher Firmicutes/Bacteroidetes ratios, linked to elevated kynurene/tryptophan ratios and neurotoxic metabolites, correlating with depressive severity. In young adults, reduced *Bifidobacterium* and *Lactobacillus* associated with quinolinic acid buildup, promoting neuroinflammation and low serotonin. Probiotic trials (e.g., *Lactobacillus* strains over 8 weeks) improved microbiome balance, lowered kynurene, and eased symptoms in 70% of cases, via enhanced gut barrier and reduced inflammation. Limitations included small samples and dietary confounders.

**Conclusion:** Gut microbiome alterations disrupt kynurene metabolism, fueling depression in young adults. Nursing strategies targeting microbiota could complement traditional care, but robust trials are essential for evidence-based practice.

**Keywords:** Gut microbiome, kynurene pathway, depression, young adults, gut-brain axis

P-26

## The relationship between compassion fatigue and missed nursing care among emergency nurses: A cross-sectional study

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**Background:** Emergency nurses are frequently exposed to high-acuity cases, unpredictable clinical demands, and emotionally intense situations. Such conditions can lead to compassion fatigue (CF), a psychological response to sustained caregiving stress. At the same time, missed nursing care (MNC), defined as the omission or delay of necessary care, has been identified as a key threat to patient safety and a marker of nursing performance. Although both CF and MNC have been widely studied separately, little is known about their interrelationship in Iranian emergency settings. This study aimed to examine the association between CF and MNC among emergency nurses.

**Methods:** A cross-sectional, multi-center design was implemented between December 2023 and March 2024 in four teaching hospitals affiliated with Hamadan University of Medical Sciences. A total of 162 emergency nurses were recruited using a multi-stage sampling strategy. Eligibility required full-time employment in the emergency department and at least one year of clinical experience. Data were gathered via three tools: a demographic questionnaire, the Professional Quality of Life Scale (ProQOL-5; CF subscale), and the MISSCARE survey (Section A). The ProQOL-5 assessed CF on a five-point Likert scale, while the MISSCARE tool evaluated the frequency of missed care events. Data analysis employed descriptive statistics, Pearson's correlation, and multiple regression in SPSS version 25.

**Results:** Participants had a mean age of  $32.9 \pm 7.6$  years; 63.6% were female, and 84.6% held a bachelor's degree. The average CF score was  $40.96 \pm 4.87$ , and the mean MNC score was  $45.80 \pm 7.43$ . Correlation testing showed a significant negative relationship between CF and MNC ( $r = -0.462$ ,  $p < 0.001$ ). Regression analysis further identified CF and education level as significant predictors of MNC ( $p < 0.05$ ). Specifically, higher CF scores were associated with fewer reported omissions in care, while nurses with advanced education reported more instances of missed care.

**Conclusion:** Compassion fatigue and missed nursing care represent intertwined challenges in the emergency nursing environment. The findings suggest that nurses experiencing higher levels of CF may demonstrate increased vigilance, leading to lower rates of reported care omissions. However, this pattern highlights a paradox that warrants further investigation, particularly through longitudinal studies. Interventions that address CF—such as resilience-building programs, peer support systems, and workload management—are essential to safeguard both staff well-being and patient safety.

**Keywords:** Compassion Fatigue, Missed Nursing Care, Professional Quality of Life, Emergency Nurses, Patient Safety

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## Motivational Strategies for Learning among Undergraduate Nursing Students: A Descriptive and Analytical Study

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**Background:** Motivation and learning strategies play a pivotal role in the academic and clinical performance of nursing students. Understanding how motivational beliefs and self-regulated learning strategies interact can help design effective educational interventions.

**Objective:** This study aimed to examine the relationship between motivational strategies and learning strategies among undergraduate nursing students.

**Methods:** A descriptive-analytical cross-sectional study was conducted among 102 eighth-semester undergraduate nursing students from Lorestan University of Medical Sciences, Iran. Data were collected using the Motivated Strategies for Learning Questionnaire (MSLQ) and analyzed using Pearson correlation and multiple regression analysis.

**Results:** A significant positive correlation was found between total motivation and all learning strategy subscales (except for help seeking). Self-efficacy and intrinsic goal orientation were significant predictors of learning strategy use, particularly metacognitive self-regulation and time management. Conversely, time management and metacognitive regulation also predicted higher motivation scores.

**Conclusion:** Motivation and learning strategies are closely interconnected. Nursing educators should prioritize developing students' self-efficacy, intrinsic motivation, and metacognitive skills through learner-centered teaching methods to enhance academic performance and clinical competence.

**Keywords:** Motivation, Learning Strategies, Nursing Education, Self-efficacy, Metacognition, Undergraduate Nursing Students

P-28

## The effects of blended learning on nursing students' cultural competence and empathy: A quasi-experimental study

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**Background:** Along with the recent trend of globalization, it is necessary for nursing students to have high cultural competence to provide nursing care services to patients with diverse cultural backgrounds. The purposes of this study were to examine the effects of blended learning on nursing students' cultural competence and empathy.

**Material & Methods:** In this pretest-post-test quasi-experimental study with control, 65 senior third-year undergraduate nursing students in Khorramabad in 2023. Nursing School were blocked randomization assigned to intervention (n=30) and control (n=35) groups. Intervention group completed the educational course comprised three parts (face-to-face lecture, sharing personal experiences as part of storytelling, and case-based learning), and was conducted once weekly for three weeks, with each session lasting 2 h. The outcomes, including cultural competence and empathy, were measured using the Perang and Watson's (2012) Cultural Capacity Scale and the Jefferson Scale of Empathy Health Profession Students before and two weeks after the intervention. The data were analyzed using descriptive statistics, independent t-test, paired t test and ANCOVA analysis with Stata-17 software.

**Results:** Most of the participants were single (95%), male (54%) and sixth semester of the bachelor of nursing (56%) program. The between-group analysis of covariance showed, a statistically significant difference between the changes in the mean scores all subscales of cultural competence and cultural competence total score ( $F=22.19$ ,  $P < 0.001$ , mean difference and standard deviation  $14.96 \pm 9.31$ ). No significant difference was found for the changes in the mean scores of all subscales and the empathy total score in two groups ( $F=1.19$ ,  $P=0.31$  mean difference and standard deviation  $-2.45 \pm 14.36$ ).

**Conclusion:** The findings of this study indicated that the blended learning program may be effective in improving cultural competence among nursing. It is recommended that nursing program managers incorporate multicultural educational programs into curricula they use.

**Keywords:** blended learning, cultural competence, empathy, nursing students

P-29

## The Effect of a Mobile-Based Palliative Care Application on the Mental Health of Women with a History of Miscarriage

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**Introduction and Objective:** While childbirth is a joyful and fulfilling event in a woman's life, miscarriage represents a traumatic experience with profound psychological consequences. It significantly increases the risk of developing various mental health disorders. This study aimed to investigate the effect of a mobile-based palliative care application on the mental health of women with a history of miscarriage.

**Methods:** This quasi-experimental study was conducted on 36 eligible women in 2023 at comprehensive health centers in Shahrekord, Iran. Participants were randomly assigned to intervention and control groups. The intervention group received the mobile-based palliative care application in addition to routine care for four weeks, while the control group received only routine care. Data were collected using a demographic checklist and the Goldberg and Hillier General Health Questionnaire (GHQ). Mental health was assessed at three time points: before the intervention, immediately after, and one-month post-intervention. Data were analyzed using SPSS version 21. The study was approved by the Ethics Committee of Shahrekord University of Medical Sciences (Ethics Code: IR.SKUMS.REC.1402.010).

**Results:** The two groups were comparable in terms of demographic characteristics. Independent t-test results indicated no significant difference between the groups before the intervention; however, immediately after and one month following the intervention, the intervention group showed a significantly greater improvement in overall mental health scores compared to the control group ( $p < 0.001$ ). Repeated measures analysis also revealed a significant reduction in mental health scores over time in both groups, with a more pronounced decrease in the intervention group ( $p < 0.001$  for the intervention group and  $p = 0.04$  for the control group).

**Conclusion:** The findings suggest that a mobile-based palliative care application can effectively improve the mental health of women with a history of miscarriage.

**Keywords:** mHealth, Palliative Care, Mobile Application, Mental Health, Miscarriage

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## Comparing the Effectiveness of L-carnitine Supplementation and Mental Mantras in Improving the Performance of Long-Distance Runners

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**Background:** Improving the performance of long-distance runners requires simultaneous attention to physiological and psychological factors. Supplements can be effective in improving athletic performance, and on the other hand, using mental mantras during exercise can enhance the athlete's focus, motivation, and performance. The aim of this study was to compare the effectiveness of L-carnitine supplementation and mental mantras on the performance of long-distance runners in Kermanshah city, 2024.

**Methods:** This study was conducted as a quasi-experimental study with a pre-test & post-test design with a control group. The sample consisted of 30 male Long-distance runners who were randomly divided into three groups of 10 receiving L-carnitine (2 grams daily for 2 weeks), mantra practice (reciting selected mantras during running training sessions), and a control group. Performance was assessed by measuring the time taken to complete a 5-kilometer distance under standardized conditions, measured before and after the intervention. Data were analyzed using mixed-design ANOVA in SPSS version 26.

**Results:** The results showed that both L-carnitine supplementation and mental mantras significantly improved running performance compared to the control group ( $p<0.05$ ). A significant difference was also observed between the two intervention groups in favor of the L-carnitine group ( $p<0.05$ ), but the effect of mental mantras was also significant and clinically meaningful.

**Conclusion:** The findings suggest that both L-carnitine supplementation and mental mantras can be considered effective strategies for enhancing the performance of Long-distance runners. Integrating psychological and nutritional interventions could be a more comprehensive approach to improving athletic performance.

**Keywords:** Carnitine, Dietary Supplements, Psychology, Running, Sports.

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## From evidence to clinic: Designing and presenting a clinical algorithm for nursing care in infants with cleft lip and palate

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**Background:** Cleft lip and palate (CL/P) are among the most common congenital anomalies of the head and neck, creating complex challenges for newborns and their parents from birth. Successful management requires a multidisciplinary team approach in which nurses play a pivotal role in feeding management, complication prevention, and family support. However, a comprehensive, evidence-based guide for the nursing care of these infants has been lacking.

**Methods:** This systematic review was conducted by searching PubMed, CINAHL, Scopus, Web of Science, Google Scholar, SID, and Magiran databases for articles published between 2010 and 2025, using the keywords “Cleft Lip,” “Cleft Palate,” “Nursing Care,” and their Persian equivalents. Studies specifically addressing nursing interventions in the neonatal period were selected and analyzed. The selection process was performed by two independent researchers according to the PRISMA 2020 guidelines.

**Results:** The findings were categorized into four main domains: (1) feeding management, (2) perioperative care, (3) psychosocial support and parent education, (4) long-term complication management. The most frequently reported challenges were the need for psychosocial support and the lack of structured education for parents. For each domain, evidence-based strategies were identified. The developed algorithm presents these strategies as a step-by-step tool to enhance nursing decision-making.

**Conclusion:** This study is the first to synthesize existing evidence into a practical, step-by-step clinical algorithm for the nursing care of infants with CL/P. The proposed algorithm aims to standardize care, improve clinical decision-making, and empower nurses. Future research should evaluate its impact on clinical and psychosocial outcomes across diverse settings.

**Keywords:** Cleft Lip, Cleft Palate, Nursing Care, Infant Feeding, Parent Support, Postoperative Care

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## Challenges of Implementing Artificial Intelligence in Self-Care for Older Adults: A Qualitative Analysis

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**Background:** The global elderly population is growing, making self-care a crucial strategy for maintaining health and independence. While artificial intelligence (AI) offers significant potential to support self-care processes, its integration into the daily lives of older adults faces substantial challenges. This study aimed to investigate these implementation barriers within the Iranian context.

**Methods:** A qualitative content analysis study was conducted. Data were gathered through 20 semi-structured interviews with a purposively selected sample from clinics at Hamadan University of Medical Sciences. Participants included 12 digitally literate adults over 65, two nurses, two IT engineers, and four medical specialists. Theoretical saturation guided sampling. Data were analyzed using the Elo and Kyngäs (2020) approach with MAXQDA software. Trustworthiness ensured via Lincoln and Guba's criteria.

**Results:** Analysis identified three primary challenge categories: (1) Technical & Usability: featuring complex user interfaces and a critical need for continuous, simplified training; (2) Ethical & Privacy: encompassing data security concerns and a lack of algorithmic transparency that erodes trust; and (3) Cultural & Social: including resistance to technology due to a preference for traditional care methods and fears it disrupts family relationships, compounded by infrastructural limitations like unreliable internet.

**Conclusion:** The study concludes that cultural barriers are particularly pivotal in adopting AI for self-care among Iranian older adults. These findings underscore the necessity for culturally-centric AI tool design and integrated policymaking that addresses both social and infrastructural challenges. Overcoming these barriers is essential for the effective integration of AI to enhance the quality of life for elderly.

**Keywords:** Artificial Intelligence, Self-Care, Older Adults, Elderly, Content Analysis, Technology Challenges, Geriatric Nursing

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## A Systematic Review of Camel Milk's Therapeutic Potential, with a Focus on Autism and Gastrointestinal Disorders, within the Global Dairy Landscape

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**Abstract:** This systematic review highlights the therapeutic potential of camel milk, particularly for autism and gastrointestinal disorders, against the backdrop of a global dairy sector dominated by cow's milk. While cow's milk constitutes approximately 80-85% of the total global milk supply, camel milk remains a niche product. Its significantly smaller market share is largely due to production being confined primarily to arid regions. This traditional functional food is enriched with unique bioactive compounds, including immunoglobulins, insulin, and lactoferrin, which contribute to its notable nutritional and immunological benefits. The review not only discusses the distinct physicochemical properties and bioactive elements of camel milk but also conducts a SWOT analysis (identifying Strengths, Weaknesses, Opportunities, and Threats) related to its production and consumption. Ultimately, this study underscores the urgent need to enhance production capabilities and allocate greater research funding to thoroughly investigate camel milk's therapeutic applications, emphasizing its potential to improve health outcomes for individuals with specific medical conditions.

**Keywords:** Autism, Gastrointestinal Disorders, Camel Milk, Therapeutic Potential

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## Integrative Review of Telehealth and Telenursing to Sustain Continuity of Care for Chronic Conditions: Mechanisms, Outcomes and Implementation (2020–2025)

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**Background:** Ensuring continuity and quality of chronic care is increasingly urgent as health systems confront rising long-term conditions and constrained resources. This review synthesizes evidence on telehealth and telenursing to evaluate their necessity, potential to sustain care, and inform scalable, equitable models for contemporary practice to inform policy and clinical decision-making.

**Method:** Searches were conducted in PubMed, Embase, Scopus, Web of Science, CINAHL, Cochrane Library and Google Scholar. Keywords and subject headings included: telehealth, telenursing, remote monitoring, chronic disease, continuity of care, self-management, nurse-led, digital health, telemonitoring, and grey literature searches also.

**Result:** Findings are organized into four domains. (1) Clinical outcomes — tele-interventions consistently improved disease control, reduced symptom burden and diminished reliance on acute services across diabetes, hypertension, respiratory and cardiac patient groups. (2) Patient-centred outcomes — programmes enhanced self-management, adherence and satisfaction. (3) Implementation mechanisms — nurse-led education, remote coaching, structured escalation protocols and integration with clinical workflows underpinned fidelity and acceptability. (4) Barriers and equity — limited device access, digital literacy gaps, connectivity constraints and variable organisational readiness restricted reach and risked widening disparities. These patterns indicate opportunities for targeted policy, training and infrastructure investment to enhance equitable deployment.

**Conclusion:** Telehealth and telenursing demonstrably support chronic-care delivery when embedded in nurse-led, system-integrated models. To realize equitable benefit, stakeholders must prioritise access, workforce training, standardised outcome frameworks and robust implementation research to guide sustainable adoption and assess cost-effectiveness across settings regularly.

**Keywords:** Telehealth; Telenursing; Continuity of Care; Chronic Disease Management; Digital Equity

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## Application of Levine's Conservation Model in the Care of a Patient with Heart Failure: A Case Report

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**Background:** Heart failure is one of the most common chronic cardiovascular disorders, associated with high risks of mortality, rehospitalization, and chronic fatigue. Effective management of energy and preservation of personal and social integrity are critical to improve adaptation and quality of life. Levine's Conservation Model, emphasizing energy conservation and the maintenance of patient integrity, offers a structured framework for individualized, patient-centered nursing care. This study aimed to examine the application of Levine's Conservation Model in the nursing care of a patient with heart failure.

**Methods:** This case report involved a patient with heart failure hospitalized in the Coronary Care Unit (CCU) of Khatam Al-Anbia Hospital, Shushtar. Nursing care was delivered over one month based on Levine's Conservation Model, incorporating trophicognosis, hypothesis formulation, nursing interventions, and ongoing evaluation.

**Results:** The patient demonstrated imbalances in energy conservation, disturbances in structural integrity, and impairments in personal integrity, while also being at risk of disruption in social integrity. Applying Levine's Conservation Model over one month facilitated improvements in conserving energy, restoring structural integrity, and strengthening personal and social integrity.

**Conclusion:** Levine's Conservation Model provides an effective framework for systematic nursing care in patients with heart failure. By focusing on energy conservation and maintaining structural, personal, and social integrity, this model enhances adaptation and improves quality of life. The findings highlight the importance of applying theoretical frameworks in clinical practice to support more targeted, individualized, and holistic nursing interventions.

**Keywords:** Levine's Conservation Model; Heart failure; Case study

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## Machine learning models for predicting hospital readmissions: A systematic review

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**Background:** Hospital readmissions are considered a critical challenge in healthcare systems, leading to increased costs, resource utilization, and adverse patient outcomes. Early prediction of patients at risk of readmission enables timely interventions, improves care quality, and reduces healthcare burden. Recently, machine learning (ML) models have emerged as powerful tools for predicting hospital readmissions by analyzing large-scale clinical, demographic, and behavioral data. This systematic review aims to evaluate the role, effectiveness, and limitations of ML models in predicting hospital readmissions.

**Methods:** This systematic review was conducted according to PRISMA guidelines. Comprehensive searches were performed in PubMed, Scopus, and Web of Science for studies published between 2014 and 2025, using keywords such as “machine learning,” “hospital readmission,” and “predictive modeling.” Eligible studies included peer-reviewed articles in English that applied ML techniques to predict hospital readmissions. Duplicates, irrelevant studies, and papers without full text were excluded. Screening and data extraction were performed independently by two reviewers.

**Results:** The review identified a wide range of ML models, including logistic regression, random forests, support vector machines (SVM), gradient boosting, and deep learning approaches. These models have been applied across diverse patient populations such as heart failure, diabetes, chronic obstructive pulmonary disease (COPD), and surgical patients. Most studies reported moderate to high accuracy, with deep learning and ensemble methods generally outperforming traditional statistical models. However, challenges such as data imbalance, lack of standardization, model interpretability, and variability in electronic health record (EHR) quality remain significant barriers.

**Conclusions:** ML models hold great potential in predicting hospital readmissions and supporting proactive clinical decision-making. By leveraging large-scale health data, these models can assist healthcare providers in identifying high-risk patients and implementing preventive measures. Future research should focus on improving model transparency, addressing data heterogeneity, and integrating predictive models into clinical workflows to enhance their real-world applicability.

**Keywords:** machine learning; hospital readmission; predictive modeling; electronic health records; healthcare analytics

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## The use of telemedicine in family medicine: A scoping review

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**Background:** Given existing evidence regarding its safety, convenience, and cost effectiveness, telemedicine is increasingly becoming an integral component of primary health care worldwide. This study aimed to examine the status of telemedicine utilization within family physician services.

**Methods:** This scoping review was conducted in 2024. A systematic search was performed to identify the scope of applications, advantages, disadvantages, and required infrastructure for telemedicine use in family physician services. The search was conducted in the Web of Science, PubMed, and Scopus databases for the period of 2015–2024. Ultimately, 37 relevant articles were included in the analysis.

**Results:** Telemedicine was employed across four categories of services: preventive care, treatment, patient's monitoring and control, and consultation/administrative matters. The most frequently cited advantages in the literature were enhanced patient access, convenience for both patients and providers, patient safety, and flexibility in service delivery. Four major barriers to the expansion of telemedicine were identified: the inability to conduct physical examinations, communicative and perceptual obstacles, low digital literacy among patients and providers, and potential threats to confidentiality and patient privacy. The essential prerequisites for telemedicine development included communication and internet technologies, communication devices for both patients and providers, technical support for users, and the availability of guidelines and protocols.

**Conclusion:** Given the positive attitude of family physicians toward this technology, the expansion and integration of telemedicine into the family health program should be prioritized as a formal policy by the Ministry of Health. Effective development of telemedicine requires substantial investment in technical, legal, and cultural infrastructure; an imperative policymakers must recognize when designing long-term budget structures and regulatory frameworks.

**Keywords:** Family Physician, Family Medicine, Telemedicine, Virtual Care

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## Explaining experiences about oral health literacy of adolescent girls based on organizational levels, community-level factors, and socio-ecological model policymaking: A qualitative content analysis study

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**Background:** Oral diseases are among the most common chronic diseases with widespread social and economic impacts, and understanding the factors affecting oral health literacy of adolescent girls is important due to its key role in improving health behaviors and reducing these diseases. Therefore, this study aimed to investigate the organizational, social, and policy factors affecting their oral health literacy based on a socio-ecological model.

**Methods:** This qualitative study, with a content-oriented analysis approach, included 45 targeted interviews with individuals in relevant organizations (insurance, Iranian Broadcasting Corporation, University of Medical Sciences, education, etc.), dentists, and policymakers at the Ministry of Health and Ministry of Education levels during the years 2024-2025. Views were collected in-depth through semi-structured face-to-face and telephone interviews and continued until data saturation was reached. The Alou and Kingas deductive analysis model was used to analyze the data.

**Results:** A total of 15 main categories and 65 subcategories were extracted, including topics such as the performance of the Iranian Broadcasting System, the priority of oral health in education, insurance support, interdisciplinary partnership, the role of dentists, community culture and awareness, and ministerial policies. These cases were categorized into three categories: organizational, community factors, and policymaking, based on the socio-ecological model.

**Conclusion:** This study showed that various organizational, social, and policy factors can affect the oral health literacy of adolescent girls. Simultaneous attention to these levels and implementation of comprehensive strategies can improve their oral health literacy and help reduce oral diseases.

**Keywords:** Adolescents, Girls, Oral health literacy, Qualitative study Socio-ecological model

P-39

## Investigating the Relationship Between the Duration of Infertility Treatment and Mental Health as well as Marital Satisfaction Among Infertile Couples

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**Abstract:** This review examines the impact of infertility treatment duration on couples' mental health and marital satisfaction, highlighting that prolonged treatment increases psychological distress and diminishes relationship quality. Integrating psychological counseling into treatment protocols is essential to mitigate stress and enhance overall well-being.

**Background:** Infertility represents a significant life crisis for couples, exerting substantial effects on mental health and marital quality. Globally, infertility affects approximately 10% to 15% of couples, with prevalence rates in Iran estimated between 10.9% and 13.2%. This condition is commonly associated with psychological consequences such as depression, anxiety, and diminished marital satisfaction.

**Methods:** This review analyzed over 20 peer-reviewed articles published between 2015 and 2025. Literature was identified through systematic searches using the keywords "infertility," "treatment duration," and "mental health" in PubMed, Google Scholar, Scopus, ScienceDirect, and the Scientific Information Database (SID).

**Results:** Infertility treatment is often a prolonged and uncertain process that contributes to chronic psychological distress. Extended treatment duration has been consistently linked to elevated stress levels and reduced marital satisfaction. Furthermore, compromised mental health significantly correlates with diminished quality of life and relational well-being. A number of studies highlight the importance of incorporating psychological support alongside medical treatment for infertility.

**Conclusion:** Given the long-term psychological and relational impacts of infertility treatment, it is recommended that couples engage jointly in the therapeutic process. Integrating psychological counseling into infertility care can play a critical role in reducing stress, enhancing mental health, and improving marital satisfaction.

**Keywords:** Infertility, Mental Health, Treatment Duration

P-40

## Machine Learning Approaches for Predicting Postpartum Depression: A Systematic Review

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**Background:** Postpartum depression (PPD) is a significant maternal health challenge, affecting 10–20% of women and leading to impaired bonding, developmental delays, and long-term psychological and socioeconomic burdens. Traditional screening tools often lack cultural sensitivity and fail to capture dynamic prenatal risk factors. This systematic review evaluates machine learning (ML) approaches for predicting PPD.

**Methods:** Following PRISMA guidelines, PubMed, Scopus, Web of Science, and PsycINFO were searched (2010–2024) using terms related to “postpartum depression,” “prediction,” and “machine learning.” Eligible studies applied ML to prenatal or perinatal data for PPD risk assessment. Two reviewers independently screened, extracted data, and assessed quality. Model performance was compared using area under the curve (AUC), accuracy, and interpretability.

**Results:** Eighteen studies met inclusion criteria, with sample sizes ranging from 150 to 9,800 mothers. Random Forest and XGBoost generally outperformed traditional methods, reporting AUC values between 0.82 and 0.90. Support Vector Machines and Logistic Regression showed moderate performance (AUC 0.70–0.78). Across studies, key predictors included prior depression, poor sleep quality, low social support, and acute stressors. Incorporating contextual factors such as socioeconomic status and partner support improved accuracy. However, heterogeneity in diagnostic tools, modest sample sizes, and limited use of biological markers restricted generalizability.

**Conclusion:** ML demonstrates potential for enhancing PPD risk stratification and guiding targeted interventions. Yet, standardized datasets, cultural adaptation, and ethical safeguards are essential. Future work should integrate multimodal data, including biomarkers and digital health metrics, across diverse cohorts to strengthen predictive validity and support equitable clinical translation.

**Keywords:** Postpartum depression, machine learning, prenatal risk factors, predictive modeling, maternal mental health

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## Risk factors the birth of premature infants in western Iran: A matched case-control study

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**Background:** Prematurity is one of the leading causes of infant deaths and also imposes high costs on the healthcare system. Therefore, the present study aimed to determine the risk factors for premature birth.

**Methods:** The present case-control study was conducted on 220 premature infants as the case group and 440 term infants as the control group in hospitals in Khorramabad, Iran, in 2023. Both groups were matched for gender and date of birth. Data were collected using a questionnaire, through interviews with the mother and physician, and through a review of the mother's medical records. Data analysis was performed using Stata 17 software and descriptive statistics and conditional logistic regression test at a significance level of less than 0.05.

**Results:** In multivariable analysis adjusted odds ratio (AOR) was estimated, mother's employment (AOR: 2.85; 95%CI:1.05–7.77), history of abortion (AOR: 2.04; 95%CI: 1.10–3.78), pre-eclampsia (AOR: 11.09; 95%CI: 4.5-27.39), premature rupture of membrane (AOR: 6.76; 95%CI: 3.7-12.34) and placental abruption (AOR: 16.07; 95%CI: 5.45–47.39) were significantly associated with preterm birth of infants, but the relationship between premature birth and maternal age, education level, place of residence, income, use of assisted reproductive techniques, parity, history of stillbirth, history of infertility, history of premature birth, BMI, cervical insufficiency, interpregnancy interval and the number of received prenatal cares at the health centers was not statistically significant.

**Conclusion:** Identifying mothers at risk and regular prenatal care can reduce the birth of premature infants.

**Keywords:** Preterm birth, Premature, infants, Risk Factors

## The Role of Mobile Health Applications in Managing Chronic Diseases among the Elderly: A Systematic Review

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**Background:** Chronic diseases such as diabetes, hypertension, and cardiovascular disorders are highly prevalent among the elderly and represent a growing challenge for healthcare systems worldwide. Effective management of these conditions requires continuous monitoring, patient engagement, and timely access to healthcare services. Recently, mobile health (mHealth) applications have been introduced as innovative digital tools to support self-care, facilitate communication with healthcare providers, and reduce healthcare costs. This systematic review aimed to examine the role, effectiveness, and limitations of mobile health applications in managing chronic diseases among the elderly.

**Methods:** This systematic review was conducted in accordance with PRISMA guidelines. A comprehensive literature search was carried out in PubMed, Scopus, and Web of Science for articles published between 2015 and 2025. Keywords included Elderly, Chronic Disease, mobile health (mHealth), Self-care, and Digital Health. Studies were included if they investigated the use of mobile health applications in chronic disease management among older adults. Duplicate articles, non-relevant studies, and articles without full-text access were excluded. Screening was performed in two stages (title/abstract and full-text review) by two independent researchers.

**Results:** A total of 48 studies met the inclusion criteria. Findings indicated that mobile health applications improved medication adherence, promoted lifestyle changes, increased disease-related knowledge, and reduced hospital readmissions. These applications also enabled remote monitoring of vital signs and allowed healthcare providers to deliver personalized interventions. However, several challenges were identified, including limited digital literacy among older adults, concerns about data privacy and security, unequal access to technology, and a lack of standardized outcome measures for evaluating effectiveness.

**Conclusions:** Mobile health applications play an important role in enhancing chronic disease management among elderly patients by promoting self-care, improving communication with healthcare providers, and reducing healthcare burden. Despite their great potential, further efforts are needed to address barriers related to usability, digital literacy, and data protection. Future research should focus on designing user-friendly applications tailored to elderly populations, implementing digital literacy training, and establishing clear guidelines for data security and ethical use.

**Keywords:** Elderly; Chronic Disease; Mobile Health; Self-care; Digital Health; mHealth

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## Explainable Artificial Intelligence in Breast Cancer Diagnosis: A Systematic Review of Mammography and Ultrasound Imaging

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**Background:** Breast cancer remains the most prevalent malignancy among women globally. Despite advancements in diagnostic imaging, the complexity of interpreting mammography and ultrasound (US) images necessitates the integration of Explainable Artificial Intelligence (XAI) to enhance diagnostic accuracy and clinician trust.

**Methods:** A systematic review was conducted following the PRISMA guidelines. Comprehensive searches were performed in PubMed, IEEE Xplore, Scopus, and Google Scholar for studies published between January 2017 and July 2023. Inclusion criteria encompassed peer-reviewed articles employing XAI techniques in mammography and US imaging for breast cancer diagnosis. Data extraction focused on XAI methodologies, model performance metrics, and interpretability aspects.

**Results:** Out of 14 studies meeting the inclusion criteria, 92.86% identified dataset-related issues as significant research gaps. The SHapley Additive exPlanations (SHAP) method emerged as the predominant model-agnostic XAI technique, predominantly applied to tree-based ensemble machine learning models. Notably, only one study evaluated human confidence in utilizing XAI systems, underscoring the need for further research in this domain.

**Conclusion:** The integration of XAI in breast cancer diagnosis from mammography and US images holds promise for improving diagnostic transparency and clinician confidence. However, addressing dataset limitations and evaluating human factors are crucial for the broader adoption of XAI methodologies in clinical practice.

**Keywords:** Explainable Artificial Intelligence, Breast Cancer Diagnosis, Mammography, Ultrasound Imaging, SHAP

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## The Effect of Breastfeeding on Reducing Pain During Injections or Vaccinations in Infants: A Systematic Review

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**Introduction:** Pain management during vaccination/Injections, as the most common painful procedure in neonates, is of paramount importance. Breastfeeding is recommended as a non-pharmacological method to alleviate pain. Given the gap in research in this area, the present study aimed to investigate the effect of breastfeeding on reducing pain caused by Injections or vaccination.

**Methods:** In this systematic review, a comprehensive search was conducted using keywords “Breastfeeding”, “Pain”, “Injection”, “Vaccination”, “Infants” and other related English terms in databases PubMed, WoS, Scopus, and the Google Scholar. The initial search yielded 20 studies. Inclusion criteria were publications in English with no time Limitation. After removing duplicates, six studies were reviewed. Ethical considerations ensured non-bias in selection-extraction and analysis, with findings reported according to PRISMA guidelines.

**Results:** A review of the studies indicates that most of them were conducted between 2011-2013 in Turkey and Iran, using experimental method. Pain intensity was commonly measured using the Modified Behavioral Pain Scale (MBPS). Breastfeeding is a multi-sensory experience incorporating several pain-relieving techniques such as skin-to-skin contact and distraction of the infant through sucking. As a result, it has been shown to reduce pain intensity and the duration of crying in infants during vaccination or injections compared to control groups ( $p < 0.05$ ). According to three empirical studies, breastfeeding was more effective in reducing pain intensity during injections in infants compared to methods such as massage therapy, skin-to-skin contact (alone), and kangaroo care.

**Conclusion:** Breastfeeding has a significant reduction in pain intensity on during injections or vaccinations in newborns. Future studies should explore its effect on pain from other invasive procedures (e.g., dressing changes).

**Keywords:** Breastfeeding, pain, injection, vaccination, Infant, Newborn.

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## Investigating the Effect of Exercise in Preventing and Reducing Back Pain in Pregnancy: A Systematic Review

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**Background:** Back pain is a common musculoskeletal problem in pregnancy and can lead to a decrease in people's ability and quality of life. It is important to prevent the occurrence and worsening of back pain during pregnancy. Therefore, this systematic review study aimed to investigate the effect of exercises in preventing and reducing back pain during pregnancy.

**Methods:** Using the Persian keywords pregnancy, back pain, exercise, physical activity, aerobics, yoga and pilates and their English equivalents in PubMed, SID, Magiran, Scopus, Elsevier, Wiley Online Library, Web of Sciences and Google Scholar search engine were searched in the period from 2010 to 2023. From 473 articles, 19 were eligible and selected for this study.

**Results:** Several sports interventions were proposed in the reviewed studies, including strength-stretching sports, resistance aerobic sports, yoga, posture correction and pelvic tilt, water sports program, and ball sports. The results showed that the most interventions used in back pain relief were the use of stretching exercises.

**Conclusion:** A comprehensive review of studies showed that although the type of exercise used is different and due to the variety of studies, it seems difficult to compare them, but it can be stated that most of the exercise interventions can lead to improvement and in some cases prevention of back pain in become pregnant. It seems that more research is needed to identify the best exercise methods, as well as the best period to start exercise intervention, in order to optimize the treatment of women's low back pain during pregnancy.

**Keywords:** Pregnancy, Back pain, Exercise, Pelvic girdle pain

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## Designing a Nursing Care Plan Based on a Roy Adaptation Model in a Patient with Diabetes: A Case Study

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**Background:** It's believed that, applying a care plan based on the Roy adaptation model increases adaptive behaviors in the physical and psychological dimensions of patients with chronic diseases, which can help the patient's appropriate psychological adaptation to disease, proper disease control and reduction of complications. Therefore, the aim of this study was to evaluate the clinical application of Roy's adaptation model in a patient with diabetes.

**Methods:** This study was a case study that used the nursing process according to Roy's adaptation model in a patient with diabetes admitted to Endocrinology ward of Razi Hospital in Rasht. Data were collected using observation, interview, and patient documentation, and were analyzed in four dimensions based on the stages of the nursing process in Roy's adaptation model.

**Results:** The client under study is a 31-year-old married woman with a bachelor's degree in physics who has been diagnosed with diabetes for 4 years and has been treated with insulin. She is a high-risk mother, 5 weeks pregnant, who has recently experienced several episodes of hypoglycemia (BS=60) and hyperglycemia (BS=300). Following this condition, the client consulted a doctor who referred her to Hospital for BS adjustment and she was admitted with a diagnosis of diabetes. In this study, after implementing a care plan based on Roy's model, we achieved the desired goals.

**Conclusion:** The nursing process based on nursing models with available facilities is applicable; if a regular system of nursing care delivery based on a known pattern as the nursing process can be set up in a feasible and practical way, the quality and quantity of nursing care can be improved.

**Keywords:** Care plan, Nursing models, Roy adaptation model, Nursing process, Diabetes

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## Evaluating the Effects of Deep Breathing Techniques (Pranayama) on Sleep Quality and Fatigue in Cancer Patients: a Systematic Review

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**Background:** Cancer stands as a major global health threat, with 19.3 million new cases reported annually, often accompanied by significant morbidity. Identifying complementary interventions to improve quality of life indicators in affected patients has become imperative. Evidence indicates that yoga-based interventions may effectively alleviate common cancer-related complications such as anxiety, fatigue, and sleep disturbances. Accordingly, this study was designed to investigate the impact of Pranayama—a fundamental yogic breathing practice—on fatigue and sleep quality in cancer patients.

**Methods:** In this systematic-review, a search was conducted using keywords and synonyms of "deep breathing", "Pranayama", "cancer", "sleep" and "fatigue" in Web-of-Science, Scopus, and PubMed. The initial search yielded 228 studies. English-language papers with no restriction on the type of cancer or intervention duration were included, whereas grey literature was excluded. After duplicates removal and quality evaluation of studies using appropriate tools, seven studies included. Ethical considerations were observed, and the abstract was ultimately drafted based on PRISMA guidelines.

**Results:** A review of predominantly interventional research in cancer patients undergoing chemotherapy in East Asia discovered that Pranayama reduced fatigue significantly. Interventions were varied based on the different protocols from deep breathing to Pranayama, varying greatly in duration and frequency of intervention. In some cases, high-frequency interventions were superior to reducing fatigue. Further, the exercises were associated with improved quality sleep and lung function, and a reduction in drug use in some studies.

**Conclusion:** Pranayama can be an effective adjunct treatment along with main treatments to manage fatigue and improve the quality of life in cancer patients.

**Keywords:** Deep breathing, Pranayama, Cancer, Sleep, Fatigue

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## Does Artificial Intelligence Have Applications in Health Policy-Making? Opportunities and Threats: A Systematic Review

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**Background:** Artificial intelligence (AI) is increasingly used in health policymaking and health systems, offering opportunities to transform data collection, analysis, and decision-making. Nevertheless, concerns persist regarding accuracy, regional applicability, and ethical, legal, and practical implications. This systematic review synthesizes evidence on the roles, potential benefits, limitations, and challenges of AI in health policy development, emergency preparedness, and health care delivery, integrating findings from empirical evaluations and recent literature.

**Methods:** We conducted a systematic search of MEDLINE, Embase, Google Scholar, Scopus, and ScienceDirect. After removing duplicates, studies were first screened based on inclusion and exclusion criteria; then, their quality was assessed using the Mixed Methods Appraisal Tool (MMAT). In total, 10 studies published between 2020 and 2025 were included.

**Results:** AI significantly accelerated policy analysis and healthcare data processing, supporting applications in vaccination policy mapping, emergency preparedness, clinical decision-making, and health system optimization. Ethical and practical barriers included data privacy concerns, algorithmic bias, lack of transparency in AI training, cybersecurity risks, and workforce readiness challenges. Despite these limitations, AI showed potential to enhance evidence-based policymaking, quality assurance, and the development of innovative health agendas with fewer political constraints.

**Conclusion:** AI can complement human expertise in health policymaking and healthcare delivery, but its responsible and context-sensitive implementation requires robust regulatory frameworks, transparency, ethical safeguards, and capacity building. These measures are essential to ensure accuracy, trustworthiness, and equitable integration of AI into global health systems.

**Keywords:** artificial intelligence, health policy, policymaking

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## Application of Artificial Intelligence in Minimally Invasive Surgery: A Review Study

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**Background:** Minimally invasive surgeries (MIS) have significantly transformed surgical approaches by reducing trauma, recovery time, and postoperative complications. The advancement of technologies, particularly artificial intelligence (AI), has played a pivotal role in supporting these surgical procedures. This study aims to review the literature on the application of AI in minimally invasive surgeries.

**Methods:** A comprehensive search of Persian and English studies was conducted in Google Scholar, PubMed, SID, and Noormags using the keywords: "Minimal Invasive Surgery," "Artificial Intelligence," "Laparoscopic Surgery," and "Robotic Surgery" for the period 2018–2025.

**Results:** After screening, a total of 40 studies were included in this review. The findings indicated that AI is applied in three main domains of MIS:

1. Accurate identification of surgical landmarks with a success rate of 70–92%, enhancing precision, reducing errors, and preventing potential complications.
2. AI-based video feedback and assessment systems that contribute to the training and skill development of surgeons.
3. Recognition of critical anatomical structures, facilitating surgical workflow, and aiding decision-making in complex procedures, thereby improving efficiency.

**Conclusion:** The findings suggest that AI can fundamentally transform minimally invasive surgeries by enhancing efficiency and improving the quality of care. Despite these promising results, further extensive studies are required to address implementation barriers as well as ethical and legal challenges.

**Keywords:** Artificial Intelligence, Minimally Invasive Surgery, Laparoscopy, Robotic Surgery

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## Smart Wearable Sensors with Fall Prediction Algorithms: A Proactive Prevention Approach for High-Risk Older Adults

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**Background:** Falls among older adults represent a major public health challenge, often leading to disability, reduced quality of life, and increased healthcare costs. Proactive fall prevention requires early identification of high-risk patterns. This study systematically reviews global evidence on the application of smart wearable sensors integrated with fall prediction algorithms, highlighting current trends, capabilities, and emerging challenges.

**Methods:** Following PRISMA guidelines, a systematic review was conducted through Scopus, Science Direct, Google Scholar, PubMed, and Cochrane Central Register of Trials between 2023 and 2025. Keywords included \*Smart Wearable Sensors, Fall Prediction Algorithms, Proactive Prevention, High-Risk Older Adults, Elderly Falls\* in both English and Persian. Out of 54 retrieved studies, 18 met the inclusion criteria (full-text availability, Original research articles).

**Results:** Evidence indicates that smart wearable sensors combined with machine learning algorithms enable early detection of fall-related risk patterns. Multisensor systems improved predictive accuracy, while certain deep learning models (e.g., BiLSTM) achieved an AUC of approximately 0.88. Nevertheless, heterogeneity of sensors, methodological differences, privacy concerns, user acceptance, and energy consumption remain critical challenges. These issues highlight the need for standardization and large-scale clinical validation.

**Conclusion:** Smart wearable sensors integrated with predictive algorithms offer a promising pathway for proactive fall prevention among high-risk older adults. Successful clinical implementation requires standardized protocols, real-world validation, and enhanced user engagement.

**Keywords:** Smart Wearable Sensors, Fall Prediction Algorithms, Proactive Prevention, High-Risk Older Adults, Elderly Falls

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## The Role of Mobile Applications in Self-Management for Epilepsy: A Systematic Review

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**Background:** Epilepsy is one of the most common chronic neurological disorders. With development of digital technologies, mobile applications have defined as effective tools for enhancing self-care among patients with chronic conditions, including epileptic patients. Given the limited number of systematic reviews in this field, this review study was conducted to determine the role of mobile applications in the self-management of epilepsy.

**Methods:** In this systematic review, comprehensive search was conducted using keywords related to epilepsy, telemedicine, and Self-management in the international databases PubMed/Medline, Scopus, and Web of Science Core Collection. No time restriction was applied. The initial search obtained 49 studies. Inclusion criteria required articles published in English, while review articles and gray literature were excluded. After removing duplicates and appraisal of relevant tools, 15 studies were ultimately analyzed. Ethical considerations, including no bias in selection, extraction, analysis, and classification of evidence, and abstract was reported according to PRISMA guidelines.

**Results:** Based on the studies, epileptic patients exhibited positive perception of mobile applications, but user expectations varied. Patients focused on alerts and documentation, parents on emergency management, and adolescents on medication adherence. Mobile applications could improve seizure control and medication adherence as an effective adjunctive therapy. The studies emphasized the importance of supporting patients' digital health literacy and collaboration between healthcare facilities and social services.

**Conclusion:** Mobile applications, through features such as alerts, education, and medication adherence, can improve patients' self-management. Future researches recommend to evaluate the clinical effectiveness of these applications.

**Keywords:** Epilepsy, Telemedicine, Mobile applications, Self-management

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## Systematic Review and Meta Analysis of Artificial Intelligence Based Diagnostic Algorithms for the Early Detection of Diabetic Retinopathy in Adults with Type 2 Diabetes

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**Background:** Early detection of diabetic retinopathy(DR)is critical for preventing vision loss in adults with type 2 diabetes.Artificial intelligence(AI)based diagnostic algorithms, particularly deep learning and computer vision models applied to retinal fundus imaging, have emerged as promising tools for scalable screening.A comprehensive synthesis of their diagnostic performance,with attention to feasibility in low resource and community-based settings, is essential for guiding implementation.

**Methods:** Following PRISMA guidelines, a systematic search was conducted across PubMed, Embase, Scopus, Web of Science, and the Cochrane Library from inception to July 2025. Studies evaluating AI models for early DR detection in adults with type 2 diabetes using retinal fundus images were included. Data on sensitivity, specificity, and area under the receiver operating characteristic curve (AUC) were extracted. Study quality was assessed with QUADAS 2, and random-effects meta-analysis was performed to pool performance metrics, reporting 95% confidence intervals, heterogeneity ( $I^2$ ), and publication bias.

**Results:** Thirty six studies involving over 1.2 million retinal images met inclusion criteria. Pooled sensitivity was 0.91 (95% CI: 0.89–0.93), specificity 0.88 (95% CI: 0.85–0.90), and AUC 0.95, indicating high diagnostic accuracy. Deep learning convolutional neural networks outperformed traditional machine learning in external validation datasets. Models trained on heterogeneous, real world datasets demonstrated greater generalizability in community screening contexts. Feasibility analyses reported reduced need for specialist graders and cost-effectiveness in low resource programs.

**Conclusion:** AI based algorithms show excellent accuracy for early DR detection and strong potential for integration into large scale,community focused screening,particularly in resource limited environments.Further work on algorithm transparency and regulatory adoption will enhance clinical translation.

**Keywords:** Diabetic Retinopathy, Artificial Intelligence, Deep Learning, Diagnostic Accuracy.

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## Effectiveness of AI Powered Conversational Chatbots for Mental Health Support in Adolescents: Systematic Review

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**Background:** Adolescents face a growing burden of mental health challenges, including depression and anxiety, often exacerbated by limited access to timely support. AI powered conversational chatbots, deployed via interactive text and voice based interfaces, offer scalable, on-demand mental health interventions. These platforms may reduce symptoms, improve mental health literacy, and increase access to counseling, but concerns remain about user engagement, sustained efficacy, and privacy protections.

**Methods:** Following PRISMA guidelines, a systematic search of PubMed, PsycINFO, Embase, Scopus, Web of Science, and the Cochrane Library was conducted from inception to August 2025. Studies were included if they evaluated chatbot interventions targeting adolescents (10–19 years) with outcomes related to depression, anxiety, mental health literacy, counseling access, or engagement metrics. Both randomized and non-randomized studies were eligible. Quality assessment employed the RoB 2 tool for randomized trials and ROBINS-I for observational designs.

**Results:** Eighteen studies (N=8,765 participants) met inclusion criteria. Text based chatbots were most common (72%), with 28% using multimodal approaches. Pooled effect sizes indicated moderate reductions in depressive symptoms (Hedges'  $g = -0.48$ ) and anxiety symptoms ( $g = -0.42$ ), alongside small to moderate improvements in mental health literacy scores ( $g = 0.35$ ). Intervention groups showed a 24% increase in counseling uptake compared with controls. Engagement rates varied, with adherence declining after four weeks. Privacy concerns, particularly around data retention and perceived anonymity, were reported in 39% of qualitative responses.

**Conclusion:** AI powered chatbots are effective in mitigating depressive and anxiety symptoms and improving mental health literacy in adolescents, with additional benefits in enhancing counseling access. Sustained engagement and robust privacy safeguards remain critical for maximizing long-term impact.

**Keywords:** Adolescent Mental Health, Artificial Intelligence, Conversational Agents, Depression, Anxiety, Health Literacy, Counseling Access.

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## Predictive Modeling Approaches Using Artificial Intelligence and Machine Learning for Early Identification of Sepsis in Critically Patients in Intensive Care Units: A Systematic Review

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**Background:** Sepsis remains a leading cause of morbidity and mortality among critically ill patients in intensive care units(ICUs). Early identification is essential to enable timely interventions and improve outcomes. Artificial intelligence (AI) and machine learning (ML) based predictive models, particularly those trained on continuous vital sign streams, laboratory biomarkers, and electronic health record (EHR) data, have shown promise in anticipating sepsis onset before clinical recognition. This review synthesizes evidence on the predictive accuracy, lead time advantage, and clinical impact of these algorithms.

**Methods:** A systematic literature search was conducted across PubMed, Embase, Scopus, Web of Science, and the Cochrane Library from inception to August 2025, following PRISMA guidelines. Eligible studies developed or validated AI/ML models for adult ICU populations, reporting quantitative metrics of predictive performance and clinical impact. Data extraction included model inputs, methodological frameworks, lead time intervals, and clinical outcome measures. Study quality and risk of bias were assessed using the PROBAST tool.

**Results:** Twenty seven studies encompassing over 350,000 ICU patient episodes met inclusion criteria. Multimodal models integrating vital signs, laboratory biomarkers, and EHR data achieved pooled AUROC of 0.89 (95% CI: 0.86–0.92), sensitivity of 0.84, and specificity of 0.81. The average lead time over standard clinical recognition ranged from 4 to 12 hours. Implementation of high performing models demonstrated relative mortality reductions of 10–18% and decreased ICU stays by an average of 0.8 days. Substantial heterogeneity ( $I^2$ : 62%) reflected variability in data sources and outcome definitions.

**Conclusion:** AI/ML predictive models demonstrate strong potential for early sepsis identification in ICUs, particularly multimodal approaches offering meaningful lead time and clinical benefit. Standardization of outcomes, transparent reporting, and prospective validation are needed for widespread adoption.

**Keywords:** Sepsis Prediction, Artificial Intelligence, Machine Learning.

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## Early Detection of Alzheimer's Disease Using Deep Learning on Structural MRI: A Comparative Study with Classical Machine Learning Approaches

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**Background and Objective:** Alzheimer's disease (AD) is the most common neurodegenerative disorder in older adults, and its early diagnosis—particularly at the Mild Cognitive Impairment (MCI) stage—is critical for effective clinical management and improving patients quality of life. However, conventional clinical and imaging approaches have limited accuracy in detecting subtle structural brain alterations. This study aimed to develop a deep learning-based framework for classifying healthy controls, MCI, and AD patients using structural MRI data.

**Methods:** We utilized the OASIS-1 dataset comprising MRI scans of healthy controls, MCI subjects, and AD patients. Preprocessing steps included intensity normalization, spatial normalization, Gaussian noise reduction, and extraction of standardized brain slices. The images were converted into 2D slices and fed into a Convolutional Neural Network (CNN). Transfer learning with pre-trained architectures (VGG16 and ResNet50) was applied to enhance performance. Data were split into training (70%), validation (15%), and testing (15%) sets. To mitigate overfitting, dropout layers and data augmentation techniques were employed. The CNN model's performance was compared against classical machine learning algorithms, including Support Vector Machine (SVM) and Random Forest. Evaluation metrics included accuracy, sensitivity, specificity, and area under the curve (AUC).

**Results:** The proposed CNN model achieved an overall accuracy of 85%, sensitivity of 83%, specificity of 86%, and an AUC of 0.88, outperforming traditional approaches such as SVM and Random Forest.

**Conclusion:** Our findings demonstrate that integrating MRI data with deep learning algorithms provides a reliable and non-invasive tool for early AD detection. The proposed framework has strong potential to support clinical decision-making systems and advance personalized medicine in the context of healthy aging.

**Keywords:** Alzheimer's Disease , Deep Learning , Structural MRI , Mild Cognitive Impairment (MCI)

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## The Impact of Vaccination Policies in Managing Epidemics and Pandemics: A Systematic Review

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**Background:** Epidemics and pandemics pose serious threats to the stability of health systems and community well-being. Health policies, including vaccination, are considered effective tools for managing these crises by reducing disease transmission and protecting population health. Therefore, the present study systematically reviewed the effects of vaccination policies in managing epidemics and pandemics.

**Methods:** This study was conducted as a systematic review through searches in PubMed, Scopus, WOS, SID, and Google Scholar using the keywords epidemic, pandemic, vaccination and vaccination policy during the years 2019 to 2024.

**Results:** Results from various studies showed that health policies played a crucial role in managing pandemics such as the COVID-19 pandemic, which had significant impacts on global health systems, and were able to mitigate its adverse effects. Policies such as mass vaccination and proper management of side effects reduced the burden of infectious diseases with pandemic potential. Moreover, evidence indicated that widespread vaccination can have long-term impacts, including reducing healthcare costs, maintaining quality of life, and preventing the emergence of new waves of disease.

**Conclusion:** Given the effectiveness of vaccination policies in managing epidemics and pandemics, they can serve as valuable guidance for future decision-making in health crises to minimize negative outcomes.

**Keywords:** Epidemic, Pandemic, Vaccination, Vaccination Policy.

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## Prevalence of Methicillin-Resistant Staphylococcus Aureus in Nursing Homes staff: A Systematic Review of Observational Studies

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**Background:** Methicillin-resistant Staphylococcus aureus (MRSA) is a specific strain of Staphylococcus aureus (SA) that makes them resistant to all beta-lactam antibiotics and can cause illness and death in people with weak immune systems, such as the elderly. One of the reasons for the transmission of this infection in elderly living in nursing homes (NHs) is their daily and frequent contact with staff. Therefore, considering the importance of elderly health care, the aim of the present systematic review study was to investigate the prevalence of MRSA in NHs.

**Methods:** This study was conducted according to the PRISMA guidelines and checklist. The keywords "prevalence", "Methicillin Resistant Staphylococcus aureus", "Nursing Home" along with their MeSH synonyms were searched in PubMed, Scopus, and Embase databases. The search was conducted with a time limit from 2015 to 2025.

**Results:** After searching, 511 articles were obtained, after removing duplicate articles and screening based on inclusion and exclusion criteria, 9 articles were selected for data extraction. Of the 9 articles, 6 were cross sectional and 3 were cohort studies. Also, 3 studies were conducted in Taiwan and other studies were conducted in Cyprus, Germany, Italy, Occupied Palestine, Poland, and China. The total number of staff participating in the 9 studies was 1285, and the number of staff with positive MRSA samples was 106 (8.25%).

**Conclusion:** Considering that there were staff with positive samples in all the studies, it is necessary to strengthen supervision and personal hygiene for NHs staff.

**Keywords:** MRSA, Long Term Care Facility, Colonization, Geriatric Care, Staff

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## IoT-Driven Innovation in Endometriosis Care: Bridging Gaps Through Real-Time Monitoring and Personalized Medicine

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**Background:** Endometriosis, a chronic and often underdiagnosed condition, remains difficult to manage due to invasive diagnostics and fragmented care. Integrating the Internet of Things (IoT) enables continuous, non-invasive monitoring of physiological and symptomatic data. This review examines IoT's role in improving diagnosis, personalizing treatment, and predicting recurrence, while highlighting implementation barriers.

**Methods:** A systematic review (2018–2025) was conducted in PubMed, Scopus, and Web of Science using terms such as “IoT,” “endometriosis,” “wearable devices,” and “remote monitoring.” From 152 studies, 28 met inclusion criteria—16 focused on endometriosis and 12 on comparable chronic conditions. Studies were assessed for technological innovation, clinical value, and practical challenges.

**Results:** IoT technologies showed strong potential in endometriosis care. Wearables like the Ava Bracelet achieved 87% accuracy in linking physiological metrics (heart rate variability, temperature, sleep) with pelvic pain, predicting flare-ups before self-reports. Smart patches such as Myant Skiin detected inflammation markers with 82% sensitivity, reducing reliance on invasive diagnostics. Platforms like EndoWatch integrated IoT data and machine learning to predict recurrence two weeks earlier than conventional methods (AUC=0.91). Challenges included data security vulnerabilities (70% of studies), low adherence due to discomfort (40% sustained use), and socioeconomic disparities, with most trials in high-income regions.

**Conclusion:** IoT offers tools for earlier diagnosis and recurrence management in endometriosis. Key priorities are user-friendly, affordable devices, robust encryption and large-scale trials in low- and middle-income countries. Embedding IoT into national health systems and fostering multinational collaborations can refine predictive models and expand equitable access.

**Keywords:** Internet of Things, endometriosis, wearable devices, predictive analytics, remote monitoring

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## The effect of using virtual reality and artificial intelligence to improve clinical self-efficacy and moral distress of midwifery students and gynecological residents

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**Background:** Clinical self-efficacy, the confidence in executing clinical tasks, and moral distress, stemming from ethical conflicts in high-stress midwifery settings, significantly affect midwifery students and female residents. Virtual reality (VR) and artificial intelligence (AI) are increasingly integrated into medical education, offering immersive learning and decision support. This systematic review evaluates their effectiveness in enhancing clinical self-efficacy and reducing moral distress among these groups.

**Methods:** A systematic review of literature from 2016 to 2025 was conducted across PubMed, Scopus, CINAHL, and Embase, using keywords like "virtual reality," "artificial intelligence," "clinical self-efficacy," "moral distress," and "midwifery students." From 150 studies, 45 met inclusion criteria, including 30 focused on VR/AI in midwifery and gynecology training and 15 in comparable clinical education contexts. Peer-reviewed studies with quantitative or qualitative outcomes were included; non-English or non-peer-reviewed studies were excluded.

**Results:** VR and AI interventions significantly improved clinical self-efficacy and reduced moral distress. However, barriers in institutional support, faculty training, student digital literacy, and clinical integration limited effectiveness. Hybrid VR-AI interventions showed the highest impact, with participants reporting increased confidence and reduced distress. Inconsistent protocols and lack of long-term evaluation hindered scalability.

**Conclusion:** VR and AI interventions significantly improved clinical self-efficacy and reduced moral distress. However, barriers in institutional support, faculty training, student digital literacy, and clinical integration limited effectiveness. Hybrid VR-AI interventions showed the highest impact, with participants reporting increased confidence and reduced distress. Inconsistent protocols and lack of long-term evaluation hindered scalability.

**Keywords:** virtual reality, artificial intelligence, clinical self-efficacy, moral distress, midwifery students

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## Artificial intelligence-based monitoring system in detection of bacterial contamination in drinking water: A systematic Review

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**Background:** One of the most dangerous biological contaminants in water resources is *E. coli*. The intentional use of biological agent cause illness or death in humans. Accurate and rapid identification of this microorganism is crucial for providing alternative water sources. This study provides a comprehensive understanding of how AI can support detection of “*Escherichia coli*”.

**Methods:** A systematic review was conducted. The following key concepts, controlled vocabulary terms, and MeSH terms were used: “Artificial intelligence”, “Machine Intelligence”, “Machine Learning”, “Deep Learning”, AI, “Computer Reasoning”, “Drinking water”, “*Escherichia coli*”, “Hydrogen Oxide”, “*Bacillus coli*”, “*E coli*”, and “*Bacterium coli*”. The four databases: PubMed, WOS, Scopus, Science Direct, and Google Scholar search engine were searched on August 2025. Two independent researchers screened the title and abstract. The inclusion criteria for study selection encompassed original studies.

**Results:** 18 studies were identified. Most of the papers were published in 2024. The popular techniques used in the studies were support vector machine and artificial neural network (ANN) models. Also, the technologies: IOT WQM using WSNs, Liquid crystal (LC)-based aptasensor, Ichnaea® a machine-learning software, WaterScope testing kit, Real-time remote monitoring system for OWTS, Tryptophan-like fluorescence sensor, and 2D hotonic crystal biosensor were used. The three top accuracies of the applied methods were as follows: support vector machine (SVM) and multi-wavelength UV-Vis transmission spectra of the bacteria (100%); deep convolutional neural networks(99.7%), and image analysis and machine learning (98.89%).

**Conclusion:** Given that conventional methods take up to 48 hours to detect contamination, utilizing rapid detection methods based on artificial intelligence in crises can significantly reduce the likelihood of poisoning.

**Keywords:** Artificial intelligence, Bacterial Contamination, *Escherichia coli*, Water

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## Calm with the Scent of Rose: An Effective and Safe Complementary Approach to Reducing Postoperative

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**Background and Aim:** Postoperative anxiety is a common problem among children, which may interfere with recovery and reduce cooperation with the healthcare team. Non-pharmacological and safe interventions are needed to manage anxiety in this vulnerable group. Aromatherapy with herbal essences is a complementary method that may provide psychological relaxation. This study aimed to investigate the effect of rose water aromatherapy on anxiety in children aged 6 to 12 years after abdominal surgery.

**Methods:** This randomized clinical trial was conducted in 2024 on 72 children admitted to Ali Asghar Children's Hospital, affiliated with Iran University of Medical Sciences. Participants were randomly assigned into two groups: intervention (rose water aromatherapy) and control (normal saline pad). Aromatherapy was applied at specific time intervals after surgery for the intervention group. Data were collected using a demographic questionnaire and the Hamilton Anxiety Scale, and analyzed with SPSS version 26 using chi-square, one-way ANOVA, repeated measures ANOVA, and independent t-tests.

**Results:** A total of 68 children completed the study. The mean anxiety score in the rose water group was significantly lower than in the control group (P<0.05).

**Conclusion:** Rose water aromatherapy effectively reduced postoperative anxiety in children undergoing abdominal surgery. As a safe, inexpensive, and non-invasive complementary intervention, it can be recommended in pediatric postoperative care. Further studies with larger sample sizes are suggested to confirm these findings and assess long-term outcomes.

**Keywords:** Rose, Postoperative, Calm, anxiety, pediatric

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## The Effect of Care Education Based on Jane Watson's Humanistic Care Theory on Nurses' Caring Behaviors from the Perspective of Mothers of Children Undergoing Surgery

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**Introduction:** Caring behaviors are the core and heart of the nursing profession, and people expect appropriate caring behavior from nurses more than anything else. Humanistic care theory emphasizes the importance of empathetic communication, attention to the human dimensions of the patient. This study aimed to determine the effect of care education based on Jane Watson's humanistic care theory on nurses' caring behaviors from the perspective of mothers of children undergoing surgery.

**Materials and Methods:** This quasi-experimental pre-test-post-test study was conducted on 112 mothers of children who had undergone abdominal surgery in Imam Reza Educational and Medical Center, Kermanshah, Iran. The intervention included a structured training program for 9 nurses on the principles of Jane Watson's theory, through theoretical and workshop and practical training, over a period of 4 weeks. Children received care based on the ten Caritas processes of humanistic care theory before the study was conducted and after the intervention. Nurses' caring behaviors were assessed by the Wolff Caring Behavior Questionnaire before and after the intervention by the mothers of children hospitalized in the ward. The findings were analyzed by independent t-test.

**Results:** The mean and standard deviation of nurses' caring behaviors after the intervention (15.139) 211.05 were significantly higher than before the intervention (19.916) 168.53 ( $p<0.001$ ).

**Conclusion:** Teaching Watson's humanistic care theory and applying it in the clinic by nurses in the pediatric surgery ward improved mothers' views of nurses' caring behaviors. Implementing similar training programs in surgical units and continuous follow-up can improve the quality of care and family satisfaction. Therefore, integrating Watson's theory-based training into nurses' professional development programs is recommended in order to increase human sensitivity and improve families' experience.

**Keywords:** Caring behavior, nursing, parents, humanistic care theory, surgery, children

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## A Review of Artificial Intelligence Applications in Food Image Analysis and Dietary Assessment

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**Background:** Proper nutritional advice plays a key role in disease prevention. Traditional diets are time-consuming and costly. Nowadays, with the advancement of AI, individuals have turned to diet apps that provide personalized meal plans by analyzing user data. The aim of this study is to explore the role of AI in personalized diet design and analyze the challenges and opportunities of this technology in the field of nutrition.

**Methods:** A narrative review was conducted by searching databases (PubMed, Scopus, Google Scholar, Web of Science) using the keywords “artificial intelligence,” “personalized nutrition,” and “recommender systems.” Articles from 2018 to 2025 were reviewed.

**Results:** AI platforms based on image processing (MyFitnessPal, Fastic, HealthifyMe) have high accuracy in food identification. Systems equipped with wearable sensors enable real-time health monitoring and personalized recommendations. AI interventions are up to 25% more effective in improving the management of chronic diseases. Challenges include algorithmic bias, food cultural diversity, and the need for clinical validation.

**Conclusion:** Digital nutrition technologies, with advantages such as cost-effectiveness and high accuracy, are a suitable alternative for nutritional services. Limitations such as information overload, cultural diversity, and privacy concerns exist. Collaboration among health professionals, policymakers, and technology experts is essential to overcome these limitations.

**Keywords:** AI in Nutrition, Personalized Nutrition, Diet Apps, Recommender systems

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## The Psychometric Properties of the Persian Version of the Holistic Nursing Competence Scale

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**Background:** This study was conducted to evaluate the psychometric properties of the Holistic Nursing Competence Scale (HNCS) among Iranian nurses.

**Methods:** This methodological research took place from June 2024 to February 2025, involving 600 nurses employed in hospitals affiliated with Golestan University of Medical Sciences in northeastern Iran. The scale's original version was translated following the model created by Wild et al. The translated version was assessed for initial reliability, face validity, content validity ratio (CVR), content validity index (CVI), construct validity, along with convergent and divergent validity, reliability, and floor and ceiling effects.

**Results:** During the CVI assessment, item 4 was excluded. Exploratory factor analysis (EFA) revealed five factors for the instrument, which cumulatively clarified 77.10% of the overall variance in the HNCS score. Fit indices, (CFI = 0.94, GFI = 0.78, RMSEA = 0.07, RMR = 0.05, and CMIN/DF = 2.85) confirmed the structural model of the scale. Convergent validity was validated, with the average variance extracted (AVE) exceeding 0.5. Divergent validity indices such as maximum shared variance (MSV) < AVE, and average shared variance (ASV) < AVE were also confirmed. The instrument's internal consistency reliability ( $\alpha = 0.80$  and  $\Omega = 0.99$ ) and stability reliability (intraclass correlation coefficient [ICC] = 0.86) were also validated. The floor and ceiling effects were reported and found to be below 15%.

**Conclusion:** The Persian version of the HNCS serves as a valid and reliable tool for evaluating holistic nursing competence among Iranian nurses.

**Keywords:** Holistic Nursing Competence Scale, Nursing, Psychometrics.

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## Study on measuring maternal adjustment during pregnancy in pregnant mothers referring to health centers in Khorramabad in 1403

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**Introduction:** Maternal adjustment during pregnancy is one of the key factors in ensuring the mental and physical health of the mother and fetus. Investigating this issue can be effective in identifying the needs of mothers and improving the quality of health services. The aim of this study is to measure maternal adjustment in pregnant mothers referring to health centers in Khorramabad in 1403.

**Methods:** This descriptive-analytical cross-sectional study was conducted on 273 pregnant mothers referring to health centers in Khorramabad. Sampling was done through convenience and voluntary methods, and the data collection tools included a demographic questionnaire and the Prenatal Self-Evaluation Questionnaire (PSEQ), which measured maternal adjustment in seven dimensions (self- and child-related well-being, pregnancy acceptance, identification with the maternal role, readiness for childbirth, control during childbirth, relationship with mother, and relationship with partner). After collection, the data were analyzed using SPSS version 22 software, and descriptive and inferential statistical tests such as chi-square and independent t-test were used.

**Results:** The mean total score of maternal adjustment was  $353.35 \pm 16.83$ . In some dimensions such as self- and child-related well-being and identification with the maternal role, the mean score was higher than the average, but dimensions such as pregnancy acceptance, readiness for childbirth, and control during childbirth were lower than the average. Statistical analyses showed that the total score of adaptation and its different dimensions were not significantly related to variables such as maternal age, education, fetal age, and fetal sex ( $P>0.05$ ).

**Conclusion:** This study showed that in most dimensions, maternal adaptation is at a desirable level, but some dimensions require educational and supportive interventions. The findings can be the basis for designing health programs to promote the mental and physical health of pregnant mothers. Future research is recommended to address the impact of social, cultural, and economic factors on maternal adaptation and design more appropriate interventions.

**Keywords:** Maternal adaptation, pregnancy, fetal development

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## Study of social support and its related factors in women of reproductive age with childbearing intention referring to health centers in Khorramabad in 2025

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**Introduction:** Declining fertility rates have become a major challenge in Iran. Childbearing intention, as a predictor of reproductive behavior, is influenced by several factors, including social support. This study aimed to determine social support and its related factors in women of reproductive age with childbearing intention referring to health centers in Khorramabad in 2025.

**Materials and Methods:** This cross-sectional descriptive-analytical study was conducted on 109 eligible women who were selected by cluster-random sampling method. Data were collected using a demographic information questionnaire and the short form of Sarason Social Support Questionnaire (SSQ6). Data were analyzed with SPSS software version 25 using independent t-tests, Pearson and Scheffe correlations at a significance level of 0.05.

**Results:** The mean score of the social support network dimension was  $1.57 \pm 2.54$  and the satisfaction dimension was  $0.90 \pm 4.62$ . There was a significant relationship between the occupation of women and their husbands with the social support network score and satisfaction ( $p<0.001$ ). Women with higher education and economic status reported higher scores in satisfaction with social support ( $p<0.01$ ). An inverse and significant relationship was observed between the number of children and the social support network score ( $p<0.001$ ). Also, age and age at marriage had a positive and significant correlation with the score of satisfaction with social support ( $p<0.001$ ).

**Conclusion:** The results showed that social support in women with childbearing intentions is affected by socio-economic and demographic factors. Designing intervention programs aimed at strengthening support networks, especially for low-income and poorly educated women, can be effective in increasing satisfaction with social support and possibly strengthening the intention to have children.

**Keywords:** Social support, childbearing, fertile women

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## The effect of cardiac rehabilitation on return to work and quality of life in coronary artery bypass graft surgery patients; a narrative review.

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**Introduction:** Coronary artery bypass graft surgery is a common treatment for advanced diseases. Return to work and improved quality of life are important indicators of the success of treatment and rehabilitation of these patients. Many patients face challenges after surgery such as reduced physical capacity, chronic fatigue, anxiety, and depression, which directly affect their quality of life and ability to return to work. This narrative review aims to examine the existing evidence on the effects of cardiac rehabilitation on return to work and quality of life of patients after coronary artery bypass graft surgery.

**Methods:** In this narrative review, a systematic search was conducted in the PubMed, Wiley, Web of Science, and Google Scholar databases between 2015 and 2025. Keywords including Cardiac Rehabilitation, Coronary Artery Bypass Graft, Return to Work, Quality of Life, Reintegration to Work were used with the Boolean AND operator. Articles were selected based on inclusion and exclusion criteria.

**Findings:** A review of studies showed that participation in cardiac rehabilitation programs after coronary artery bypass surgery is associated with significant improvements in functional capacity, reduced symptoms of depression and anxiety, and increased motivation for patients to return to work. Most patients participating in these programs were able to return to work within a few months after surgery, while this time was longer and the rate of return was lower in patients without rehabilitation. In addition, cardiac rehabilitation produced significant improvements in physical, psychological, and social dimensions of quality of life.

**Conclusion:** Cardiac rehabilitation is an essential and vital component in the recovery process of patients after coronary artery bypass surgery. Given these benefits, it is recommended that treatment teams, patients, and health policymakers take the importance of these programs seriously and facilitate access to cardiac rehabilitation services for all patients after coronary artery bypass surgery.

**Keywords:** Cardiac rehabilitation, return to work, quality of life, coronary artery bypass

P-68

## Effectiveness of Personal Protective Equipment (PPE) in Reducing Occupational Risk among Healthcare Workers during Pandemics: A Systematic Review

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**Background:** Healthcare workers are at high risk of exposure to infectious agents during pandemics. Personal protective equipment (PPE) is recognized as the primary protective strategy to prevent infection and transmission. The aim of this systematic review was to evaluate the effectiveness of PPE in reducing occupational risks among healthcare workers during pandemics.

**Methods:** A systematic search was conducted in PubMed, Scopus, Web of Science, Embase, Google Scholar, and SID using the keywords PPE, healthcare workers, health personnel, medical staff, pandemic. The search timeframe covered January 1, 2000, to December 31, 2024. Out of 2,134 identified records, 612 duplicates were removed. After title/abstract screening, 186 full-text articles were assessed, and 48 studies that met the inclusion criteria were finally analyzed.

**Results:** Findings indicated that proper use of PPE reduced the risk of pandemic-related infections among healthcare workers by 45% to 88% (average risk reduction: 62%). N95 respirators were more effective than surgical masks, with an additional average reduction of 18% in infection rates. Adherence to donning and doffing protocols and regular training was associated with a 70% reduction in occupational exposure. In contrast, shortages or improper use of PPE increased the risk of infection by up to 2.5 times.

**Conclusion:** Strong evidence indicates that PPE plays a pivotal role in reducing occupational risks among healthcare workers during pandemics. Sustainable supply, continuous training, and strict monitoring of proper use are essential for optimal effectiveness.

**Keywords:** Personal protective equipment; healthcare workers; pandemic; occupational prevention; N95 mask.

P-69

## Comparative Evaluation of Professional Ethics Education in Undergraduate Operating Room Technology in Iran and Selected International Programs

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**Background:** Continuous developments arising from new demands, technological progress, and modern advances in surgical and anesthetic practices have placed surgical teams before diverse ethical dilemmas in the operating room. Offering a short theoretical course alone cannot adequately prepare students to manage these issues. This study sought to compare the undergraduate professional ethics curriculum in operating room technology in Iran with those of selected universities abroad.

**Methods:** This work was conducted as a comparative study using Bereday's four-step approach. Data were collected through a researcher-designed checklist structured around the main elements of a professional ethics curriculum, and the findings were arranged and summarized in tables.

**Results:** In many international universities, professional ethics is embedded throughout the educational program. The curricula typically include subjects such as communication skills, law and ethics, foundations of medical ethics, and professional responsibility. Learning goals are distributed across cognitive, affective, and psychomotor dimensions. Instructional strategies extend beyond lectures to include narrative methods, case-based learning, simulations, and group interactions. Student evaluation combines written exams with approaches such as project work, reflective portfolios, documentation of experiences, and direct observation.

**Conclusion:** Compared with global models, the delivery of professional ethics education in operating room programs in Iran shows major limitations in curriculum design, pedagogical approaches, and assessment tools. Therefore, a comprehensive revision and reform of the national curriculum framework is essential to strengthen ethics training in this field.

**Keywords:** Professional ethics, Operating room, Curriculum, Comparative analysis.

P-70

## The Effect of Family-Centered Education on Post-Discharge Care Quality in Stroke Patients

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**Background:** Stroke patients often face multiple challenges after hospital discharge. This study aimed to review the existing evidence on the impact of family-centered education on the post-discharge care of stroke patients.

**Methods:** This study is a systematic review by assessing and collecting multiple articles. Databases searched were Science Direct, SID, PubMed, and we used Google Scholar search engine. The keywords have been chosen by MESH. Only studies published from 2015 onward were included to ensure the review reflects recent advancements. 28 studies were obtained, and 17 duplicate and irrelevant articles were removed. This left us with 11 studies.

**Results:** Studies showed that the implementation of a family-centered empowerment program-including education, psychological support, telephone follow-ups, and home visits - in elderly stroke patients led to improved self-efficacy, reduced depression, and enhanced quality of life. Moreover, this model had positive effects on caregivers, increasing their self-efficacy, reducing caregiving burden, and strengthening their perceived social support also they were able to participate more effectively in practical skills of care and rehabilitation.

**Conclusion:** According to the results family-centered education is an effective approach to improving the quality of post-discharge care in stroke patients that not only promote patients' self-care, but also reduce caregiver burden and enhance the entire family's quality of life. Therefore, the integration of this approach into discharge planning and post-stroke care programs is recommended.

**Keywords:** Stroke , Post-Discharge Care , Family-Centered Education

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## The effect of self-management training on performance of elderly patients with knee osteoarthritis

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**Introduction:** Osteoarthritis is a common disease, and one of the most important causes of disability in the elderly, with impaired performance as a prominent symptom. This study was conducted to assess the effect of self-management on performance of elderly patients with knee osteoarthritis attending an orthopedic clinic.

**Methods:** In this quasiexperimental study, 88 patients with osteoarthritis of the knee were selected by convenient sampling, intervention (44 patients) and control (44 patients) groups. Initially, performance of patients was measured using WOMAC inventory. Then, the intervention group received one 70-minute session of training program per week over 4 weeks. Next, they were given the opportunity to practice the program at home for 4 more weeks. Afterwards, performance of both groups was assessed and compared. Data collected were analyzed in SPSS-18 using Chi-square and independent t-test.

**Results:** No significant difference was found between the two groups in mean performance before intervention( $p>0.05$ ), but after intervention, mean performance in the intervention group was significantly higher compared to the control group ( $P<0.05$ ). Moreover, results showed a significant improvement in mean performance of patients in the intervention group before and after intervention ( $P<0.05$ ). However, no significant difference was observed in the mean performance before and after intervention in the control group ( $P>0.05$ ).

**Conclusion:** Results obtained showed improved performance in patients with osteoarthritis of the knee due to self-management training program. By using appropriate diet and pain relief methods, along with exercise, patients will be able to better tolerate exercise movements, and thus improve their performance.

**Keywords:** Self-management, Performance, Osteoarthritis of the knee, Elderly

P-72

## Investigating the Challenges and Supports in Maintaining Patient Safety from the Perspectives of Nurses.

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**Background:** Patient safety in psychiatric wards involves unique challenges that require specialized protocols to address risks such as self-harm and aggression. Nurses play a crucial role in ensuring safety while balancing patient autonomy and recovery. This study, conducted in Qazvin City, Iran, explores nurses' perspectives on the barriers and facilitators of patient safety, filling a gap in context-specific qualitative research.

**Methods:** A descriptive qualitative design was used, following the COREQ checklist, with semi-structured interviews conducted in three psychiatric wards at 22 Bahman Teaching Hospital in Qazvin City, Iran. Nineteen registered nurses with at least one year of psychiatric experience participated, ensuring diversity in experience and gender. Data were collected using an interview guide focused on safety perceptions and improvement strategies, and thematic analysis with NVivo 12 identified key themes, bolstered by member checking and reflexive journaling.

**Results:** Four themes emerged: (1) Perceptions of patient safety, emphasizing physical, emotional, and cultural dimensions; (2) barriers, including staffing shortages, inadequate training, patient-related challenges (e.g., aggression, substance use), and environmental constraints (e.g., poor ward design); (3) facilitators, such as effective communication, teamwork, supportive management, and comprehensive training; and (4) strategies, including improving staffing, enhancing training, modifying environments, and implementing evidence-based protocols. Nurses highlighted emotional safety and cultural competence as critical to reducing incidents and fostering trust.

**Conclusion:** Patient safety in psychiatric wards is shaped by various systemic, environmental, and relational factors. Addressing challenges like understaffing and training gaps, while promoting effective communication and teamwork, can improve safety outcomes. Context-specific strategies, such as tailored protocols and ward redesign, are vital for creating safe therapeutic environments, offering valuable insights for policymakers and clinicians to enhance psychiatric care safety.

**Keywords:** Patient Safety, Psychiatric Nursing, Mental Health

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## The effect of acupressure on urinary incontinence severity in older women with urinary incontinence: A randomized, single-blind, controlled trial

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**Background:** Background: Urinary incontinence is one of the problems that can affect different aspects of the older 's lives and decrease their quality of life. Acupressure is recommended as a non-invasive method in the management of genitourinary system problems. The purpose of The present study is determine the effect of acupressure on urinary incontinence severity in older women with urinary incontinence in Qazvin, Iran, in 2024

**Methods:** This randomized, single-blind, controlled clinical trial included 82 women over 65, all members of two adult daycare centers. Participants were randomly assigned to an intervention or a control group. In the intervention group, participants received acupressure 12 times, targeting ten acupoints associated with urinary incontinence symptom control. The control group did not receive any interventions except routine care. Three assessment tools were used: the ATM questionnaire for evaluating mental status, the QUID questionnaire for diagnosing urinary incontinence, and the PRAFAB questionnaire for assessing urinary incontinence severity. Data were analyzed using descriptive and analytical statistical tests and SPSS software.

**Results:** Results showed no significant differences in demographic variables or urinary incontinence severity between the two groups baseline ( $p$ -value > 0.05). Immediately and one month post intervention, the total score and the scores of all items of urinary incontinence severity were lower in the intervention group than in the control group, and the difference between the two groups was statistically significant ( $p$ -value<0.05).

**Conclusion:** Acupressure appears to be effective in urinary incontinence severity in older women. Further studies are recommended to confirm these findings.

**Keywords:** Acupressure, Aged, Urinary incontinence, Women

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## Barriers and Facilitators to Timely Help-Seeking among Stroke Patients: A Grounded Theory Approach

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**Background:** Timely help-seeking after the onset of stroke symptoms is critical for effective treatment, yet many patients delay calling emergency medical services. Understanding the barriers and facilitators influencing these decisions can inform interventions to improve stroke outcomes.

**Objective:** This study aimed to explore the factors affecting help-seeking behaviors among stroke patients and to develop a conceptual understanding of their decision-making processes.

**Methods:** Using a qualitative grounded theory approach, semi-structured interviews were conducted with acute stroke survivors recruited from a tertiary care hospital in Tehran, Iran. Data were analyzed through constant comparative analysis, and theoretical saturation was achieved. Strategies to enhance rigor, including member checking and peer debriefing, were applied to ensure trustworthiness.

**Results:** Analysis revealed two overarching categories: barriers including misinterpretation of symptoms, emotional shock, reliance on self-care or family consultation, and perceived access difficulties, and facilitators such as previous stroke knowledge, family encouragement, and recognition of symptom severity. A core category, navigating uncertainty under threat, captured how patients balanced fear, knowledge, and social influence when deciding whether to seek immediate care.

**Conclusion:** Stroke patients' help-seeking behaviors are shaped by a dynamic interplay of cognitive, emotional, and social factors. Tailored educational programs and family-oriented interventions may reduce.

**Keywords:** Emergency Medical Services, Cerebral Infarction, Stroke

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## Perceived Needs of Hospitalized COVID-19 Patients in Iran: A Qualitative Study

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**Background:** The global spread of COVID-19, its serious complications, and high mortality rates have made this disease one of humanity's major challenges in the current century. Now that the pandemic has subsided, reviewing patients' perceived needs could help health system managers better plan comprehensive services for future pandemics and crisis situations. This study aimed to explain the perceived needs of COVID-19 patients with hospitalization experience in Iran

**Methods:** This exploratory qualitative study (2021-2022) involved 20 COVID-19 patients with hospitalization experience. Purposive sampling with maximum variation was conducted in COVID-19 referral hospitals in Isfahan, Iran. Data were collected through semi-structured in-depth interviews and analyzed using conventional content analysis.

**Results:** The perceived needs comprised two main categories: Educational Needs and supportive needs. In the educational domain, these patients urgently required comprehensive disease-specific education and self-care training. Regarding support needs, they strongly emphasized the necessity for multidimensional assistance encompassing social, psychological, spiritual, and economic support.

**Conclusion:** The lived experiences revealed that pandemics impose extensive multidimensional needs. The healthcare system must proactively anticipate diverse individual needs and promptly implement effective interventions to address them, thereby mitigating adverse public health consequences.

**Keywords:** Covid-19, patients, needs assessment

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## When technology accompanies the family: The effectiveness of video calls on improving the mental health of parents of hospitalized premature infants

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**Introduction:** The mental health of parents of premature infants hospitalized in the neonatal intensive care unit is affected by anxiety, depression, feelings of isolation, and distress. Family mental health is a critical component of family-centered care because the mental state of parents affects the parent-infant bond, caregiving behaviors, and long-term developmental outcomes of the child. This quasi-experimental study investigated whether short, scheduled video calls between parents and NICU staff (and/or the infant) can reduce symptoms of post-traumatic stress disorder (PTSD) in parents of premature infants by enhancing perceived social support.

**Materials and Methods:** This quasi-experimental study conducted in 2022 at Shahid Rahimi Hospital, Khorramabad. Participants were parents of hospitalized premature infants using consecutive non-probability sampling. 64 parents were assigned to the control group and 56 parents were assigned to the intervention group. The intervention group received a scheduled 15-minute daily video call; the control group received usual ward care without scheduled video communication. The instruments included a demographic questionnaire, a multidimensional scale of perceived social support, and a posttraumatic stress disorder checklist completed by parents before and two months after the intervention. Paired and independent t-tests were used to compare groups before and after the intervention.

**Results:** There were no statistically significant differences between groups in terms of infant and parent demographic characteristics ( $p>0.05$ ). After controlling for baseline scores, ANCOVA showed the following: Significant increase in perceived social support in the intervention group compared to the control group ( $p = 0.001$ ). Significant decrease in PTSD scores in the intervention group compared to the control group ( $p = 0.001$ ).

**Conclusion:** Findings showed that a low-cost intervention—scheduled daily 15-minute video calls—significantly improved parental perceived social support and reduced PTSD symptoms two months after initiation. Therefore, scheduled video meetings can be adopted as a complement to in-person meetings, especially during periods of limited access (e.g., infection outbreaks).

**Keywords:** Telenursing, mental health, Intensive Care, Newborn, Parents

P-77

## Investigating the prevalence of burnout and physical-psychological fatigue of nurses involved with covid-19 in Qazvin city

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**Background:** The covid-19 epidemic has put a lot of physical and emotional pressure on nurses, which can disrupt the quality of services provided to patients and the quality of life of nurses themselves, so the purpose of this study was to investigate the prevalence of burnout and physical-psychological fatigue of nurses involved with covid-19

**Methods:** The current research was a descriptive-analytical study that was conducted cross-sectionally in 1401 in the hospitals affiliated to Qazvin University of Medical Sciences. 300 nurses were selected based on the inclusion criteria and available sampling method. Statistical data was collected from Through the Maslach burnout questionnaire and the MFI fatigue measurement questionnaire, they were analyzed using descriptive statistics, Spearman's correlation test, independent t test, one-way analysis of variance and with the help of SPSS version 26

**Results:** Spearman's correlation test showed that there is a statistically significant relationship between burnout and fatigue variables ( $P<0.001$ ). Also, this test showed that there is a statistically significant relationship between work experience and burnout variables ( $p=0.001$ ) and fatigue ( $p=0.010$ ). The results of the independent t-test showed that there is a statistically significant difference between the variable of work experience in the covid department with the variable of exhaustion ( $p=0.012$ ) and fatigue ( $p=0.030$ ). Also, the ANOVA test showed that there is a statistically significant relationship between the variable of education level and There is no job burnout variable ( $p=0.493$ ) and fatigue ( $p=0.157$ ) as well as employment status variable with job burnout variable ( $p=0.084$ ) and fatigue ( $p=0.067$ ).

**Conclusion:** It is necessary to pay special attention to the factors affecting burnout and fatigue of nurses, and considering the adverse consequences of burnout and fatigue, it is necessary to take organizational measures to address this issue in nurses and improve their overall health and well-being.

**Keywords:** Exhaustion, fatigue, nurses, covid-19

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## Evaluation of social skills training programs in reducing aggressive behaviors among secondary school students

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**Background:** Aggressive behaviors, including verbal and physical aggression, are common psychological problems among secondary school students. These difficulties negatively affect academic performance, interpersonal relationships, and may even increase the risk of engaging in problematic or risky behaviors. Preventive and therapeutic approaches such as social skills training (SST) aim to reduce aggression by reinforcing anger management, conflict resolution, empathy, and communication abilities. Considering the rising trend of aggression among Iranian adolescents, the implementation of effective, structured, and evidence-based interventions appears increasingly essential. This study examined the effectiveness of SST programs in decreasing aggression among secondary school students.

**Methods:** In a randomized controlled trial, 120 students aged 15–17 years with a history of aggression (measured by the Buss-Perry Aggression Questionnaire) were recruited from four high schools in Kashan. Participants were randomly divided into intervention (n=60) and control (n=60) groups. The intervention group attended 10 weekly 90-minute SST sessions over 8 weeks, which focused on anger management, problem-solving skills, and effective communication. Pre- and post-intervention measures of aggression were obtained through the questionnaire and semi-structured interviews. Data were analyzed using ANOVA to compare outcomes.

**Results:** Students in the intervention group showed significantly lower verbal ( $p<0.01$ ) and physical aggression ( $p<0.05$ ) than controls. Social skills, particularly empathy, cooperation, and self-control, improved substantially following training.

**Conclusions:** SST interventions can be a valuable and successful approach for reducing aggressive behaviors in students. It is recommended that such structured programs be incorporated into school curricula, and further long-term studies be conducted to examine their sustained impact on adolescents.

**Keywords:** aggression, students, social skill training

P-79

## A Review of effectiveness of educational interventions on the moral intelligences of school age children

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**Background:** Moral intelligence, as a fundamental component of personality development and ethical behavior in children, plays a crucial role in shaping future generations. Amid rapid social changes and the growing need to nurture moral values among students, effective educational interventions in this domain have gained increasing importance. This study aims to evaluate the effectiveness of educational programs designed to enhance moral intelligence in children aged 6–12 years, with the goal of identifying optimal strategies for school implementation.

**Methods:** A systematic review was conducted through an extensive search of reputable databases, including PubMed, ERIC, PsycINFO, and Google Scholar, covering publications from 2005 to 2024. Inclusion criteria comprised empirical, peer-reviewed studies focusing on children aged 6–12 years and assessing the effects of educational interventions on moral intelligence. Following a rigorous screening and quality appraisal process, 11 studies were selected for comparative analysis. Extracted data included intervention type and duration, sample characteristics, assessment instruments, and key outcomes.

**Results:** Findings indicated that comprehensive educational approaches—such as character education, social-emotional learning, and values instruction—significantly improved children's moral intelligence. Innovative teaching methods, including play-based learning and storytelling, were also effective. Active teacher engagement and cultural adaptation of programs were identified as critical factors for success.

**Conclusion:** Given the crucial role of moral intelligence in fostering responsible social behavior, integrating such educational programs into school curricula is essential. Leveraging modern technologies and artificial intelligence can enable personalized, engaging interventions. Empowering educators and respecting cultural and social values are vital to sustaining program efficacy. Future research should explore family and community roles in promoting moral intelligence to build comprehensive ethical education frameworks.

**Keywords:** Moral Intelligence, Educational Interventions, School Age Children, Social Emotional Learning

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## Challenges and opportunities for health policymaking in the face of emerging threats and bioterrorism; a systematic review

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**Introduction:** Bioterrorism is considered the most significant type of terrorism and represents a major challenge for governments and health systems, as it directly impacts public health and social security. With the emergence of new threats, public health is faced with complex challenges and opportunities that must be addressed through effective policymaking. For this reason, the present study systematically reviewed health policymaking challenges and opportunities in confronting emerging threats and bioterrorism.

**Materials and Methods:** This study was conducted using a systematic review method. Searches were performed in databases including PubMed, Scopus, SID, Civilica, and Google Scholar, using keywords such as “health policymaking,” “emerging threats,” and “bioterrorism.” Articles published between 2014 and 2024 were included.

**Findings:** Bioterrorism, involving the use of biological agents such as viruses, bacteria, and toxins, as well as the emergence of new diseases and drug resistance, poses serious challenges for health systems. These include unequal distribution of healthcare services, concentration of services in capital cities, limited access to comprehensive healthcare, lack of intersectoral collaboration, and insufficient research capacity. Such challenges place public health systems under severe pressure and highlight the vulnerabilities in healthcare policymaking.

**Conclusion:** Given the challenges and opportunities of health policymaking in facing emerging threats and bioterrorism, it is recommended that consistent national and international laws and policies be developed to strengthen preparedness and response against bioterrorism.

**Keywords:** Health policymaking, emerging threats, bioterrorism, public health, challenges

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## Digital Nursing and the Smart Operating Room: A Systematic Review of Opportunities and Challenges of Artificial Intelligence

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**Background:** Artificial intelligence (AI) is transforming perioperative care by enabling smart operating rooms (ORs) and advancing digital nursing practices. While AI offers opportunities to enhance clinical decision-making, reduce errors, and improve workflow efficiency, challenges remain in implementation, ethical concerns, and workforce adaptation. This systematic review aimed to identify the opportunities and challenges of AI adoption in OR nursing practice.

**Methods:** A systematic search was conducted in PubMed, Scopus, Web of Science, and CINAHL from January 2000 to June 2025 using the keywords “artificial intelligence,” “digital nursing,” “operating room,” and “perioperative care.” Studies focusing on AI applications in ORs and their impact on nursing roles were included; non-English publications and non-clinical studies were excluded. Risk of bias was assessed using the Joanna Briggs Institute (JBI) checklist. Results were synthesized narratively, with thematic analysis to identify opportunities and barriers.

**Results:** Out of 1,045 records screened, 38 studies involving 9,600 participants met inclusion criteria. Key opportunities included AI-assisted surgical navigation, predictive analytics for perioperative complications, and automation of intraoperative monitoring. Reported benefits included a 27% reduction in error rates (95% CI, 0.71–0.84) and improved workflow efficiency in 21 studies. Challenges included limited nurse training in AI technologies, ethical concerns over data privacy, and resistance to organizational change.

**Conclusion:** AI has significant potential to support digital nursing and enable smart ORs. However, addressing barriers such as training, ethical frameworks, and system integration is essential. Future strategies should focus on empowering perioperative nurses as key stakeholders in AI-driven innovation.

**Keywords:** Artificial Intelligence; Digital Nursing; Operating Room; Patient Safety; Perioperative Care

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## Preventing Surgical Errors and Promoting a Culture of Safety in the Operating Room: A Systematic Review of the Role of Nurses in Risk Management and Error Reporting

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**Background:** Patient safety in the operating room (OR) is critical, yet surgical errors remain a leading cause of preventable harm. Nurses, as frontline providers, play a pivotal role in fostering a culture of safety through active risk management and error reporting. This systematic review aimed to evaluate the contribution of OR nurses to error prevention strategies, risk reduction, and the promotion of safety culture.

**Methods:** We conducted a systematic search of PubMed, Scopus, Web of Science, and CINAHL from January 2000 to June 2025 using keywords: “operating room,” “nursing,” “surgical errors,” “safety culture,” “risk management,” and “error reporting.” Inclusion criteria were peer-reviewed studies addressing nurses’ role in OR safety; exclusion criteria were non-English articles and non-clinical settings. Risk of bias was assessed using the Joanna Briggs Institute (JBI) checklists. Data were extracted and synthesized narratively and, where possible, meta-analyses were performed.

**Results:** From 1,273 records screened, 42 studies involving 11,450 participants were included. The majority were observational or quasi-experimental designs. Across studies, nurse-led interventions reduced wrong-site surgery by 23% (95% CI, 0.68–0.89) and increased compliance with surgical safety checklists by 34% (95% CI, 1.21–1.49). Error reporting rates improved significantly in 17 studies following educational and feedback interventions.

**Conclusion:** Nurses in the OR are central to promoting safety culture and reducing surgical errors through risk management and error reporting. Strengthening nurse-led safety interventions and fostering non-punitive reporting environments may substantially enhance perioperative patient outcomes.

**Keywords:** Error Reporting; Nursing; Operating Room; Patient Safety; Risk Management

P-83

### Suggested foods based on the temperament (mizaj) of infertile women: a qualitative content analysis based on Persian Medicine texts

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**Background:** Infertility, affecting approximately 17.5% of the global adult population, is a multifaceted issue influenced by lifestyle and dietary factors. Persian Medicine, as a complementary approach, emphasizes the role of individualized dietary and lifestyle modifications based on temperament (mizaj) in addressing infertility. This study aimed to identify and categorize dietary recommendations for infertile women according to their temperaments, as outlined in authoritative PM texts.

**Materials and methods:** A qualitative summative content analysis was conducted using eight key PM texts—including Qanun Fi Teb and Exir Azam from the 9th to 18th centuries—alongside electronic databases such as Scopus, PubMed, Web of Science, and Google Scholar were searched.

**Findings:** Foods were categorized based on four compound temperaments—cold and dry, cold and wet, warm and dry, and warm and wet—and subcategories such as fruits, vegetables, nuts, meats, and medicinal plants. The analysis highlighted the central role of warming, nutrient-dense foods in improving reproductive health, particularly for cold temperaments. Foods such as lamb, eggs, chickpeas, milk with cinnamon or ginger, and onions were frequently recommended. Conversely, cooling foods like cucumber and lettuce were advised for warm temperaments to achieve balance.

**Results:** The findings underscore PM's tailored dietary strategies for enhancing fertility by aligning food recommendations with individual temperaments. This approach offers a complementary pathway to modern infertility treatments by addressing underlying imbalances through personalized nutrition.

**Keywords:** Food, Temperament, Persian medicine, Infertility, Female

P-84

## Application of Watson's Humanistic Care Theory to Anxiety in a Woman with Hodgkin Lymphoma: A Case Study

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**Background and Objective:** Hodgkin lymphoma is a rare malignancy of the lymphatic system that, in addition to posing a physical threat, produces considerable psychological effects such as anxiety in patients. Nursing based on theoretical models plays a key role in addressing these needs. Watson's theory of human caring, with its emphasis on human connection, empathy, and dignity, can be an effective tool in reducing anxiety in patients with chronic illnesses. The aim of this study was to determine the effect of implementing this theory on the anxiety level of a woman with Hodgkin lymphoma.

**Methods:** This research is a qualitative case study conducted on a 47-year-old patient with stage III Hodgkin lymphoma. Data were collected using semi-structured interviews, direct observation, note-taking, and the Beck Anxiety Inventory. Nursing interventions were implemented over three weeks based on Watson's ten carative factors. Data were analyzed using thematic analysis.

**Findings:** After the interventions, the patient's anxiety score decreased from 44 (severe anxiety) to 12 (mild anxiety). The patient experienced improvements in sleep, appetite, psychological calm, and participation in treatment. Qualitative analysis indicated the formation of an effective therapeutic relationship, increased hope, acceptance of the illness, and enhancement of the patient's spirituality.

**Conclusion:** Implementation of nursing care based on Watson's theory of human caring led to reduced anxiety and improved the patient's psychosocial-spiritual status. These findings demonstrate the clinical applicability of this theory in the care of cancer patients and the necessity of incorporating it into nursing education programs.

**Keywords:** Watson's theory of human caring, anxiety, humanistic nursing, Hodgkin lymphoma, spiritual care

P-85

## Family-Centered Care in Children with Chronic Illnesses: A Review of Global Models and Localization Challenges

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**Background:** Chronic childhood illnesses affect not only the child but also the entire family system. Parents and caregivers face substantial psychological, social, and financial burdens alongside the child's physical challenges. In this context, Family-Centered Care (FCC) has emerged as an innovative approach that regards the family not merely as a companion but as a key partner in the care process. FCC shifts the focus from a disease-oriented model to one that prioritizes the needs, values, and lived experiences of both the child and the family. This study aimed to review global FCC models in the management of chronic childhood illnesses and to explore the challenges of adapting this approach within the Iranian healthcare context.

**Methods:** A systematic search was conducted according to the PRISMA guidelines across the PubMed, Scopus, Web of Science, and SID databases from 2010 to 2025. The keywords "Family-Centered Care," "Chronic Childhood Illness," "Nursing," and their Persian equivalents were used. Out of 534 retrieved articles, 35 met the inclusion criteria and were analyzed through content analysis.

**Results:** Global FCC models emphasize mutual respect, shared decision-making, transparent communication, and parental empowerment. Reported outcomes include improved child quality of life, higher family satisfaction, better treatment adherence, and reduced parental stress. In Iran, limited human and financial resources, high nursing workload, cultural factors, and the absence of formal guidelines remain the main barriers to implementation.

**Conclusion:** FCC represents a transformative perspective that places the child and family at the center of care. Successful localization in Iran requires cultural adaptation, nurse education, supportive policies, and the use of innovative technologies to enhance the quality of care for children with chronic illnesses.

**Keywords:** Family-Centered Care, Chronic Diseases, Children, Nursing, Localization, Quality of Care

P-86

## A Comparative Study on the Effect of Teaching Methods of Demonstration Activities, Storytelling and Common Activities on gross motor skills of Preschool Children in Boroojerd city

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**Background:** Due to the different methods of teaching in the way of playing in preschools, in the present study, we try to compare the impact of different game methods on the gross – motor skills of preschool students.

**Methods:** In this semi experimental study, 72 children from pre-schools were selected with using multistage cluster sampling. They were randomly assigned to three groups of 24. The data collecting tool was the Ulrich's motor development questionnaire. The duration of the intervention was 8 weeks and each week, three one hour sessions. Data analyze was done with using of SPSS19, paired t-test, tukey test and ANOVA.

**Results:** There was a significant difference in the mean of displacement score, before and after the intervention in the demonstration activities group and common activities ( $P<0.001$ ). The difference in mean of object control score before and after the intervention was significant in all three groups ( $P<0.05$ ). Also, there was a significant difference between the mean score of the demonstration activities group and story telling and also demonstration activities group and the common activities in the displacement subscale ( $P<0.001$ ). In the subscale of object control, there was a significant difference between the mean of the demonstration activities and the story telling and also story telling and the common activities ( $P<0.05$ ).

**Conclusion:** Due to the excellence of the method of demonstration activities in the promotion of gross-motor skills sub-scales, it is suggested that in preschool centers, teaching methods such as demonstration be used for teaching.

**Keywords:** Story telling, Demonstration Activities, gross motor skills, Preschool Children.

P-87

## The role of artificial intelligence in improving the health of girls during puberty: with a preventive and individual approach

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**Background:** Introduction: The educational needs of adolescents during puberty are very important and paying attention to them can ensure the health of the future generation. Artificial intelligence is considered as a revolutionary solution in prevention, education and health management that offers a unique solution. This study was conducted to investigate the applications of artificial intelligence in prevention, education and health management of puberty.

**Methods:** A search was conducted with the keywords "Artificial Intelligence" AND "adolescent health" "machine learning" AND "menstrual health" · "chatbot" AND "sexual education" · "digital health" AND "teenage mental health" · "AI" AND "women's health" (AND "Puberty of girls") in Google, Google Scholar, PubMed and with the keywords "Artificial Intelligence" AND "Girls' Health" AND "Puberty of Girls" in Iranian databases such as SID or Magiran between 2018 and 2025. DeepSeek artificial intelligence was also used to collect information.

**Results:** Integrating wearable data (such as smartwatches) with artificial intelligence to monitor sleep patterns, physical activity, and heart rate, which creates a fully customized diet and exercise plan based on individuals' personal data, or with specific recommendations to improve sleep quality and manage stress. Several global apps were found that address this area to some extent, but none of them are fully specialized and comprehensively focused on girls' puberty. These include popular women's health apps such as Flo, Clue, and Eve by Glow. Period trackers and women's health apps like Flo are among the most popular examples, which can predict PMS symptoms, ovulation, and your period. Clue is also more scientific and data-driven. The Eve by Glow app has a more social and friendly approach, with a community of users who can talk about various issues. Some Persian apps, such as "Everything About Puberty" and "The Puberty Period (Banafsheh Software Group)," although they provide useful information about puberty to teens, are not personalized and only provide general educational information to teens.

**Conclusion:** Educational and counseling platforms that answer girls' private and often embarrassing questions about puberty (menstruation, body changes, emotions) confidentially and without judgment. It seems that the development of native Persian-language applications in line with current science should be considered by designers and policymakers in the fields of health and technology.

**Keywords:** Artificial intelligence, puberty in girls, preventive, personal

P-88

## Epidemiological study of hypertension and some related factors in adults living in Abadan in 2019

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**Background:** Hypertension is the main risk factor for premature death and disability worldwide.

**Objectives:** The aim of the present study was to determine the prevalence of hypertension and some related factors in adults living in Abadan.

**Method:** This is a cross-sectional analytical study that was conducted on 1767 men and women over the age of 18 who referred to specialized clinics of Taleghani, Shahid Beheshti and Naftshahr hospitals of Abadan in 2019. Data collection was completed by a questionnaire including demographic and clinical characteristics. Collected data was analyzed using descriptive and analytical statistics in SPSS-25.

**Results:** The prevalence of hypertension was 17.4% (n=307 individuals) and demographic variables of sex, age, weight, height, waist circumference, pelvic circumference, income level, employment, type of occupation, level of education, previous medical history, family history of hypertension, smoking, coffee use were significantly associated with hypertension ( $P<0.05$ ), but there was no relationship between hypertension with marital status, place of residence, hours of sleep, activity status, tea and alcohol ( $P>0.05$ ).

**Conclusion:** According to the findings, the role of education in relation to healthy nutrition, increasing physical activity, lifestyle modification, timely diagnosis and treatment of cardiovascular disease and promoting public awareness can play an important role in the prevention and control of hypertension.

**Keywords:** Hypertension, Prevalence, Adults, Nursing

P-89

## Strategies for Ensuring Reproductive Health for Vulnerable Adolescent Girls: A Qualitative Study

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**Background:** Vulnerable adolescents are a social group that, due to factors such as poverty, disability, discrimination, exposure to violence, and physical, sexual, and psychological abuse by peers or adults within the family, school, or community, are at a higher risk of engaging in risky behaviors. Engaging in threatening behaviors poses a risk to various dimensions of adolescent reproductive health. This study aims to explore strategies for ensuring reproductive health for vulnerable adolescent girls.

**Methods:** In this qualitative study, 22 service providers, decision-makers, and policymakers in the field of adolescent health were purposefully included in the study. Strategies were extracted through semi-structured individual interviews and conventional content analysis.

**Results:** Strategies for ensuring reproductive health in vulnerable adolescent girls were categorized into two main categories and six subcategories, including:

1. Improving infrastructure for access to reproductive and sexual health specifically for vulnerable adolescents (screening for vulnerability in adolescents, ensuring access to reproductive and sexual health services for vulnerable adolescents, preparing the health system to accept vulnerable adolescents, and empowering adolescents to overcome reproductive and sexual health threats).
2. Creating supportive environments specifically for vulnerable adolescents (preparing the socio-cultural environment for the acceptance of vulnerable adolescents, and modifying laws related to pregnant adolescents).

**Conclusion:** Preventing risky behaviors, maintaining, and promoting reproductive and sexual health in vulnerable adolescent girls require the participation of families, media, educational and health systems in reducing social harms. In this regard, comprehensive legal, social, political, and cultural support for vulnerable adolescents is essential.

**Keywords:** Adolescent health, Sexual and reproductive health, Sexual and reproductive health services, Qualitative study

P-90

### The role of air pollution in abortion is the most severe consequence of pregnancy

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**Background:** Air pollution is a major problem in industrial cities, affecting various physiological systems and increasing the risk of disease and mortality at all ages. Currently, air pollution is associated with several adverse obstetric outcomes, including pregnancy-induced hypertension disorders, preterm birth, low birth weight, and stillbirth. This study was conducted to investigate the effect of air pollution on the rate of abortion.

**Methods:** This study was conducted by searching reliable databases, including ScienceDirect, Google Scholar, PubMed, Web of Science, and Scopus, using keywords Such as Air pollution, Abortion, fetal death, and intrauterine mortality.

**Results:** This study found that exposure to air pollutants, such as particulate matter (PM), carbon monoxide (CO), nitrogen dioxide (NO<sub>2</sub>), and cooking smoke, can damage the health of pregnant women. These harmful pollutants can cause oxidative stress, mitochondrial and nuclear DNA methylation, and endocrine disruption, which disturb oocyte quality, implantation, early embryo development, and placental function. These effects have direct implications for the development of spontaneous abortion and stillbirth. An imbalance between reactive oxygen species (ROS) and the antioxidant defense system in fetal tissues can lead to miscarriage. Additionally, the mimicking effects of androgens and estrogens from air pollutants in humans also contribute to this damage. Endocrine disruptors in air pollutants can cause reproductive harm through interactions with classical nuclear receptors and membrane-bound estrogen receptors.

**Conclusion:** As contact with polluted air during pregnancy may increase the adverse consequences of pregnancy and stillbirth, health authorities should take necessary measures to protect pregnant women from the harmful effects of air pollutants.

**Keywords:** Air pollution, abortion, particulate matter, fetal death, intrauterine mortality

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## Prevalence of Self-Reported Domestic Elder Abuse and Its Relation with Elderly Individuals and Their Family Caregivers' Personality Traits

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**Background:** Elderly abuse (EA) is a serious public health issue recognized as a healthcare priority. Personality traits can influence social behaviors. This study aimed to determine the prevalence of self-reported domestic EA and its relationship with older people and their family caregivers' personality traits.

**Methods:** A cross-sectional study was conducted in 2022. The research population included older people living in the urban community of Lorestan Province (a province in the western region of Iran), selected by multistage cluster sampling. In general, 998 older people and their family caregivers were sampled. The data collection tool used was a three-part questionnaire. a. The demographic characteristics of older people. The questionnaire on the incidence of elder abuse, and c. The short version of the NEO Five-Factor Inventory-Revised (NEO-FFI-R) measures the personality traits of older people or family caregivers. The statistical software used was Stata 14.

**Results:** The present study reported a prevalence of EA at home of 37.78%. In the present study, older age, female sex, unmarried status, lower education, unemployment, and characteristics of a rented house were predictors of EA. High agreeableness, high extroversion, and low neuroticism reduce conflict and tension in older people with their relatives and family, which appears to be a protective factor against EA.

**Conclusion:** Policymakers and health experts should develop training programs and screenings to consider these factors, enabling the identification of older people exposed to EA more quickly, and facilitating the use of early interventions to improve their health status and enhance their quality of life.

**Keywords:** Prevalence, Elder abuse, Elder mistreatment, Family caregiver, Personality traits

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## The Impact of Digital Lifestyle Changes on Youth Attitudes Toward Childbearing: A Systematic Review

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**Background:** In recent years, digital technologies have significantly altered lifestyles, particularly among youth. These changes influence various aspects of personal life, including family formation and fertility intentions. This study systematically reviews the global evidence on how digital lifestyle patterns affect young people's attitudes toward childbearing.

**Methods:** A systematic review was conducted based on PRISMA guidelines. Academic databases including Scopus, PubMed, and Web of Science were searched for articles published between 2015 and 2024 using keywords such as "digital lifestyle", "youth", "fertility intention", and "childbearing attitudes". After screening 174 studies, 61 met the inclusion criteria and were analyzed thematically

**Results:** The findings reveal a growing body of literature linking increased digital engagement—especially social media use, online dating, and virtual socialization—with delayed marriage and reduced fertility intentions. Key mechanisms include shifting values, prioritization of self-development, economic uncertainty linked to gig economy involvement, and changing norms around family life. Gender differences were noted, with young women more likely to report digital lifestyle factors influencing decisions about parenthood.

**Conclusion:** Digitalization is emerging as a subtle yet influential driver in shaping fertility-related behaviors and attitudes among youth. Policymakers should consider the cultural and psychological dimensions of digital life when designing interventions aimed at supporting family formation. More empirical research is needed, especially in non-Western contexts.

**Keywords:** Digital lifestyle, Youth, Fertility intention, Childbearing attitudes, Systematic review, Social change

P-93

## Assistive Technologies and Cognitive Stimulation Tools in Dementia Care: A Systematic Review of Randomized Controlled Trials (2020–2025)

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**Background:** Dementia is characterized by a progressive decline in cognitive functioning. Assistive technologies, such as cognitive stimulation tools like digital apps and virtual reality programs, have emerged to potentially mitigate disease progression and enhance quality of life. This systematic review synthesizes evidence from randomized controlled trials evaluating these interventions in patients with dementia.

**Methods:** Following PRISMA guidelines, we searched databases including PubMed, Scopus, and Web of Science for randomized controlled trials published between 2020/01/01 and 2025/08/13. Inclusion criteria encompassed trials assessing assistive technologies or cognitive stimulation tools in demented patients with primary outcomes focused on disease progression and quality of life. Screening was done using the Cochrane risk of bias tool, and data were narratively synthesized due to intervention heterogeneity.

**Results:** Five randomized controlled trials were included, involving 185 participants with mild to moderate dementia. Interventions included digital cognitive stimulation therapy combined with hearing training (n=23), NeuronUP platform-integrated rehabilitation (n=20), individual cognitive stimulation therapy apps (n=61), virtual group cognitive stimulation therapy (n=21), and cognitive stimulation therapy based on Roy's adaptation model (n=60). Across studies, interventions significantly improved quality of life, with effect sizes ranging from moderate to large. Cognitive function showed stabilization or mild improvement in four trial, suggesting potential delay in disease progression, though one trial reported no significant changes.

**Conclusions:** Assistive technologies and cognitive stimulation tools demonstrate promise in enhancing quality of life and possibly slowing cognitive decline in demented patients. However, limited trial numbers underscore the need for further studies to confirm efficacy and generalizability.

**Keywords:** Dementia; cognitive stimulation; computerized cognitive training; assistive technology; randomized controlled trials; quality of life.

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## Community-Based Primary Health Care: Global Experiences from Eleven Countries

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**Background:** Primary Health Care (PHC) is universally regarded as the foundation for Universal Health Coverage (UHC), but translating this principle into effective practice remains uneven across diverse political, economic, and social contexts.

**Methods:** A systematic comparative review of PHC models was conducted; data were collected through structured searches in PubMed, Scopus, and Web of Science, complemented by reviews of WHO reports and national health reports. Eleven countries were purposively chosen to reflect geographical diversity and income levels. Data were synthesized in two phases: within-case analyses to form national profiles, and cross-case comparison to identify convergent and divergent themes. Reliability was augmented by data triangulation and iterative validation.

**Results:** Successful PHC models across the board shared two defining features: organized community outreach and multi-disciplinary teams. Community health workers ranging from Iran's Behvarz to Brazil's Family Health Strategy and Costa Rica's EBAIS played critical bridging roles between populations and health systems and registered spectacular gains in maternal and child health and immunization coverage. Overcoming challenges were financial instability, workforce deficits, and disjointed data systems.

**Conclusion:** There is no single template that guarantees PHC success; rather, adaptive implementation with the backing of local context is key. Key enabling conditions are stable finance grounded in universal insurance, strong political will, community-based investment in the workforce, integration of digital health, and intersectoral governance. Cumulatively, these principles offer an evidence-informed approach to spur change toward UHC.

**Keywords:** Primary Health Care, Universal Health Coverage, Community-Based Care, Health Equity, Workforce, Family Health, Multidisciplinary Teams

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## The Effect of Cardiac Rehabilitation Program on Severity of Dyspnea and the Indicators Amount of 6-minute Walking Test in Patients with Heart Failure

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**Background and Aim:** Given the high prevalence of heart failure and its complications on various aspects of life, including decreased exercise tolerance and dyspnea, this study aimed to determine the effect of a cardiac rehabilitation program on the severity of dyspnea and the 6-minute walk test indices in patients with heart failure.

**Methods:** In this randomized controlled clinical trial, 74 patients with heart failure hospitalized in cardiac intensive care units were studied. In the intervention group, 37 patients underwent a one-month cardiac rehabilitation program for three sessions per week, each session lasting one hour, and in the control group (37 patients) they received only conventional drug treatments. Demographic and medical information forms, the modified Medical Research Council (mMRC) dyspnea scale, and 6-minute walk test indices (systolic and diastolic blood pressure, heart rate, SpO<sub>2</sub>, and corridor length) were used. Data were measured before and one month after the intervention in both groups. Data analysis was performed using SPSS version 22.

**Results:** There was no statistically significant difference in the mean severity of dyspnea before the start of the study in the intervention and control groups ( $p=0/366$ ). After one month of intervention, a statistically significant difference was observed in the comparison of the two groups and before and after the intervention in each group ( $p<0/001$ ). In the study of the 6-minute walk test indicators, there was no statistically significant difference between the two groups in the intervention and control groups before the intervention ( $p<0/05$ ). However, after one month of intervention, a statistically significant difference was observed between the two groups only in the corridor length variable ( $p<0/001$ ).

**Conclusion:** The results showed that performing a combined aerobic and resistance exercise program reduced the severity of dyspnea and improved corridor length (one of the indicators of the 6-minute walk test) in patients with heart failure after discharge. Therefore, training in these exercises is recommended as a complementary treatment alongside drug treatment during discharge from the hospital.

**Keywords:** Cardiac Rehabilitation; Dyspnea; Six-Minute Walk Test; Heart Failure

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## Investigating the effectiveness of community-based care models in improving the quality of life of the elderly; a systematic review

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**Introduction:** Quality of life in old age is a complex and subjective concept. With the increase in the elderly population, the well-being of older adults in physical, mental, and social dimensions is considered an essential need. Therefore, this study investigated the effectiveness of community-based care models in improving the quality of life of the elderly.

**Methods:** This study was conducted by searching the SID, WOS, Scopus, PubMed, and Civilica databases, as well as the Google Scholar search engine, using the keywords care models, community-based care, quality of life of the elderly, elderly, quality of life during the years 2020 to 2024.

**Findings:** The results of various studies showed that more than two-thirds of the elderly population resides in developing countries, especially in East Asia. To improve elderly health and prevent or reduce diseases, the first step is to identify the status and needs of older adults. Community-based care models, with a focus on disease prevention, strengthening physical and mental health, and providing or developing services such as home care, increase the independence of the elderly and reduce their feelings of loneliness and dependence. Implementing such care models can decrease the financial burden on patients and enhance sustainability in service delivery by reducing the frequency of visits to treatment centers and lowering care costs. Community-based care models are also effective as a sustainable solution in preventing the physical and mental harms associated with aging.

**Conclusion:** Given the upward trend in the growth of the elderly population, paying attention to their quality of life and improving existing methods is a fundamental necessity. Therefore, greater emphasis should be placed on the design and implementation of efficient care models.

**Keywords:** Care models, Community-based care, Quality of life of the elderly, Elderly, Quality of life

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## The application of Telenursing in Enhancing Self-Care Among Patients with Diabetes: A Systematic Review

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**Background:** Diabetes is one of the most common chronic diseases worldwide, and its effective management requires strict self-care, continuous monitoring, and specialized support. With advances in modern technology, telenursing has emerged as an innovative and efficient approach for delivering remote nursing care, playing a significant role in improving diabetes control and enhancing patients' quality of life. Therefore, this study aimed to review the application of telenursing in enhancing self-care among patients with diabetes.

**Methods:** This systematic review was conducted in 2025 using an advanced search with the keywords "telenursing", "diabetes," and "self-care" in the databases PubMed, SID, Scopus, Magiran, and the Google Scholar search engine. After applying inclusion and exclusion criteria, 21 articles published between 2019 and 2024 were selected and reviewed based on the PRISMA checklist.

**Results:** The results showed that telenursing interventions, including telephone follow-ups, electronic education, and remote monitoring, had a significant impact on improving self-care among diabetic patients. These interventions led to a meaningful reduction in HbA1c levels, better blood glucose control, increased patient self-efficacy, and the promotion of healthy behaviors such as medication adherence, proper diet, and regular physical activity. Additionally, telenursing increased the frequency of home blood glucose monitoring, reduced unnecessary visits to healthcare centers, and improved patients' quality of life. One of the prominent advantages of this approach is overcoming time and location barriers to care access and providing personalized and continuous care, which is especially important for elderly patients and those living in remote areas.

**Conclusion:** Telenursing, as an accessible, cost-effective, and efficient solution for diabetes management, has played a key role in improving self-care and health outcomes in patients. Given the positive results of this review, further research is recommended to evaluate cost-effectiveness, optimize methods, and expand the application of telenursing in various care settings to fully utilize the potential of this technology in enhancing the health of diabetic patients.

**Keywords:** Diabetes, Telenursing, Self-care

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## Effectiveness of Reproductive Health Interventions (Education, Infertility Screening, and IVF Treatments) in Increasing Successful Childbearing: A Systematic Review

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**Background:** Infertility affects 10–15% of couples worldwide, creating barriers to successful childbearing. Interventions such as fertility education, early screening, and assisted reproductive technologies (ART), particularly IVF, have been developed to improve outcomes. This review synthesizes evidence on their effectiveness, focusing on live birth rates.

**Methods:** Following PRISMA guidelines, PubMed, Scopus, Cochrane Library, and Web of Science were searched for studies published between 2000 and 2025. Eligible designs included randomized controlled trials, cohort studies, and meta-analyses evaluating education, screening, or IVF in adults aged 18–45. The primary outcome was live birth; secondary outcomes included clinical pregnancy rates and treatment dropout. Study quality was assessed using the Cochrane and Newcastle-Ottawa tools.

**Results:** From 1,250 records, 15 studies (8 RCTs, 5 cohorts, 2 meta-analyses) with >10,000 participants were included. Fertility education improved awareness and reduced dropout, while early screening enhanced detection of treatable causes and increased live births by ~15%. IVF showed the strongest impact, with pregnancy rates rising from 29% to 34% during the review period. Meta-analysis indicated a pooled relative risk of 1.25 (95% CI: 1.10–1.42) for live births with combined interventions compared to standard care. Integrated approaches, particularly combining education, screening, and IVF, achieved the greatest success, though access disparities persisted.

**Conclusion:** Fertility education, screening, and IVF are effective strategies for improving reproductive outcomes. Integrated and equitable programs should be prioritized to enhance live birth rates and reduce infertility burdens globally.

**Keywords:** Reproductive health, fertility education, infertility screening, IVF

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## Application of Telenursing in Elderly Patients with Alzheimer's Disease: A Systematic Review

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**Background:** Alzheimer's disease is a neurodegenerative disorder characterized by progressive decline in cognitive function, memory, and behavior, severely impacting the quality of life of patients and their families. Given the increasing elderly population and the high prevalence of Alzheimer's, the use of innovative care approaches such as telenursing can play a significant role in improving care quality, reducing caregiver burden, and enhancing health outcomes for these patients. This study aims to review the application of telenursing in improving cognitive and psychological functioning in elderly patients with Alzheimer's disease.

**Methods:** This systematic review was conducted in 2025 using advanced searches with the keywords "telenursing," "elderly," and "Alzheimer's" in the PubMed, SID, Scopus, Magiran databases, and the Google Scholar search engine. After applying inclusion and exclusion criteria, 17 articles published between 2019 and 2024 were selected and reviewed based on the PRISMA checklist.

**Results:** Findings indicate that telenursing is an effective tool for improving the quality of life of elderly patients with Alzheimer's disease and their families. Remote educational interventions and telephone follow-ups have reduced caregiver burden, improved lifestyle, and promoted health behaviors and self-management among patients. Evidence suggests that telenursing can reduce depression and anxiety, enhance cognitive processes, increase family involvement in care, and lower the costs associated with patient management. Furthermore, the use of modern technologies such as video calls and gait pattern analysis can help improve patients' physical and social activities. However, further studies are needed to identify the most effective techniques and implementation strategies for optimal use of this approach.

**Conclusion:** Telenursing is highly effective and practical in the care, education, follow-up, and counseling of patients with Alzheimer's disease, and can serve as an accessible and cost-effective tool to improve the quality of life for these patients and their families. Further research is recommended to optimize and expand the application of this approach.

**Keywords:** Alzheimer's, Telenursing, Elderly

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## Migration and Urbanization as Threatening Factors to Population Structure and Fertility Decline: An Umbrella Meta-Analysis

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**Background:** Migration and urbanization are major drivers of demographic change, strongly linked to fertility decline and population imbalance. Urbanization lowers fertility through delayed marriage, higher costs of living, and wider access to education and contraception. Migration redistributes populations, often causing depopulation and aging in rural areas while creating overcrowding in cities. Together, these trends threaten population sustainability by increasing dependency ratios and reducing workforce availability.

**Methods:** This umbrella meta-analysis followed PRISMA guidelines for systematic reviews of reviews. Searches were performed in PubMed, Google Scholar, and Web of Science for studies published between 2000 and 2024. Eligible studies were meta-analyses or systematic reviews assessing the impacts of migration and/or urbanization on fertility or population structure, reporting quantitative estimates. Narrative or low-quality reviews were excluded.

**Results:** From 80 records, five high-quality meta-analyses or systematic reviews were included. Findings consistently showed urbanization reduces fertility, with pooled estimates indicating a decline of 0.5–1.0 children per woman per 10% rise in urban population, especially in developing countries. Migration altered age structures: rural out-migration accelerated population aging and fertility decline, while urban in-migration increased labor supply but did not offset fertility drops. Shrinking cities faced compounded challenges of depopulation and economic contraction. Heterogeneity was moderate ( $I^2 = 45\text{--}60\%$ ), reflecting regional differences.

**Conclusion:** Urbanization and migration significantly undermine population stability by accelerating fertility decline and producing demographic imbalances. Policymakers should prioritize rural revitalization and pro-natal incentives, while future research should apply longitudinal approaches to track long-term effects.

**Keywords:** Migration, Urbanization, Fertility Decline, Population Structure

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## Assessing the Influence of Patient-Centered and Family-Centered Self-Care Training on the Quality of Life of Patients with Multiple Sclerosis.

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**Background:** Education on self-care behaviors has been shown to enhance quality of life in patients with multiple sclerosis (MS). The present study aimed to compare the effects of patient-centered versus family-centered self-care education programs on the quality of life in individuals with MS.

**Methods:** This quasi-experimental study was conducted among MS patients referred to the Iranian MS Association between November 2017 and September 2018. Participants were recruited through convenience sampling and randomly assigned into three groups using block randomization with blocks of nine. While the control group received no intervention, intervention group 1 underwent self-care training workshops, and intervention group 2 attended the same workshops accompanied by a family member. Follow-up telephone calls were conducted for eight weeks after the final session. Data were collected using the Multiple Sclerosis Quality of Life-54 (MSQOL-54), and a demographic questionnaire. Statistical analyses were performed with SPSS version 16 using descriptive statistics (mean and standard deviation) and inferential tests (paired t-test and analysis of variance).

**Results:** Significant differences were found among the three groups in both quality of life ( $53.16 \pm 15.19$  vs.  $56.03 \pm 14.40$  vs.  $52.48 \pm 21.20$ ;  $p < 0.001$ ) scores, indicating improvements in both patient-centered and family-centered groups compared with the control group.

**Conclusion:** Given the critical role of families and nurses in patient care and education, implementing structured self-care training programs for patients with multiple sclerosis and their families can be an effective strategy to enhance quality of life.

**Keywords:** Multiple Sclerosis, Self-care, Patient-Centered, Family-Centered, care, Quality of life.

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## The role of developmental inequalities in the distribution of the burden of TB-hyperglycemia in Iran: Evidence from three decades of data (1990-2021)

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**Background:** Today, diabetes is one of the most common comorbidities and risk factors in patients with tuberculosis. The present study examines the trend of the disease burden of tuberculosis attributed to high blood sugar in Iran during the years 1990 to 2021, emphasizing the role of the Human Development Index. Our analysis reveals how socioeconomic progress, reflected in the HDI, has influenced the epidemiological dynamics of TB in the diabetic population. Understanding this relationship is critical for developing integrated public health interventions that address this dual disease burden effectively.

**Methods:** The present study extracts epidemiological data from the Global Burden of Disease database in 2021. This dataset includes disability-adjusted life years (DALYs) and age-standardized rates stratified by sex and country in Asia. The study examines the trend of mortality and DALYs from 1990 to 2021. In addition, it examines the relationship between TB attributed to high blood sugar and Human Development Index (HDI) using Pearson correlation analysis.

**Results:** The results showed that the burden of TB disease attributed to hyperglycemia in Iran decreased during 1990-2021. The results showed that Sistan and Baluchestan, Golestan, and Khorasan Razavi provinces had the highest burden of TB attributed to hyperglycemia in 2021, and Tehran province showed the highest percentage change in disease burden. The results also showed that there is a negative and significant correlation between the Human Development Index (HDI) and TB DALY attributed to hyperglycemia ( $r=-0.378$ ,  $p$ -value=0.035) and YLD attributed to hyperglycemia ( $r=-0.449$ ,  $p$ -value=0.011).

**Conclusion:** Although Iran has successfully reduced the overall burden of TB attributed to hyperglycemia, significant regional disparities persist. To address these inequalities, targeted interventions in underserved areas and continued improvement of human development indicators are essential. These efforts will ensure more equitable health outcomes and further reduce the dual disease burden across all regions.

**Keyword:** Tuberculosis, Diabetes, Human Development Index, Burden of Disease, Iran

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## Multilevel Barriers to Post-Discharge Care in Patients with Severe Traumatic Brain Injury: A Step Toward Promoting Individual and Community Heal

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**Background:** Patients with severe traumatic brain injury (TBI) require continuous and comprehensive care after hospital discharge. However, multilevel barriers at the individual, interpersonal, and organizational levels hinder the quality and continuity of post-discharge care. Identifying these barriers is critical not only for optimizing patient recovery but also for promoting broader individual and community health outcomes.

**Methods:** This qualitative content analysis study explored barriers to post-discharge care in patients with severe TBI. Data were collected through 25 semi-structured interviews with family caregivers and healthcare professionals, supplemented by a literature review. Purposeful sampling ensured variation among participants. Transcripts were coded and categorized inductively to identify main categories and subcategories.

**Results:** Three main categories of barriers were identified. (1) Organizational barriers included patient abandonment after discharge, inadequate insurance support, insufficient caregiver training, limited access to medical equipment, lack of temporary care organizations, absence of structured home care, high cost of home services, and poor supervision. (2) Interpersonal barriers included lack of communication networks, caregivers' reluctance or inability to provide care, psychological burden, and financial stress within families. (3) Individual barriers consisted of patients' cognitive limitations in expressing needs and complications due to multiple traumas.

**Conclusion:** Multilevel barriers compromise the effectiveness of post-discharge care for patients with severe TBI. Addressing these barriers through community-based care planning, policy support, and caregiver empowerment represents a vital step toward improving not only patient well-being but also the overall health of families and communities.

**Keywords:** Severe traumatic brain injury; Post-discharge care; Barriers; Family caregivers; Community health

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## Managing biological and emerging threats in the health system: A systematic review of the literature

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**Background:** In recent years, the use of biological agents to harm the population, the unwanted spread of emerging diseases or the resurgence of pathogens in the form of bacteria or viruses that are resistant to treatment, bioterrorism, and emerging health threats have become serious challenges for health systems around the world. Flexibility, rapid response, and coordination among sectors are key components in facing these threats. This review article aims to examine and analyze the preparedness of the health system against the aforementioned threats in order to identify weaknesses and strengthen strengths and provide a framework for strategic planning.

**Methods:** The current review was conducted by searching for information in reputable scientific databases such as PubMed, Scopus, Web of Science, Google Scholar, and reports from the World Health Organization and the Centers for Disease Control, with inclusion criteria such as reviewing articles with an appropriate publication date and with a systematic review analysis approach or operational reports published until 2025, focusing on health system preparedness, response to the impact of bioterrorism, and emerging threats using the keywords bioterrorism, emerging threats, management, and health system.

**Results:** Bioterrorism threats include agents with widespread transmissibility, drug resistance, and easy access to biological tools and technologies, and emerging pathogens, including emerging pathogens, genetically modified pathogens, diseases with long-term but sudden outbreaks, and threats arising from biological or climate change. The complexity of threats is increasing due to international connectivity, rapid movement of people and goods, and access to new technologies. The most important risk assessment indicators include the severity of consequences, probability of occurrence, response time, and health system response capacity. Prioritizing resources toward equipment that can be used quickly, establishing rapid diagnostic laboratories, and increasing biosafety capabilities in infrastructure are considered critical. Macro-plans should seek to establish strategic stockpiles, rapid distribution channels, and sustainable financial support. Establishing a crisis command structure with a clear hierarchy, rapid response units, and specialized teams for bioterrorism management. Designing protocols for diagnosis, treatment, isolation, and infection control while respecting ethical principles and human rights. Developing simulation models for practical exercises and evaluating responses to various bioterrorism scenarios. Establishing credible communication channels with the public, media, and international organizations to ensure accurate and up-to-date information are among the measures that should be included in the health system's roadmap for managing such threats.

**Conclusion:** The main challenges include a lack of resources, deficiencies in personnel training, lack of coordination between different agencies, and lack of support systems for health information management. Opportunities include the development of rapid diagnostic technologies, prevention through vaccination and public health, strengthening international scientific cooperation, and creating clear legal frameworks for rapid response. The importance of creating a culture of biosafety at all levels of the health system and promoting public awareness of biological threats from a social and legal perspective are important. Therefore, the health system must increase its preparedness against bioterrorism and emerging threats by strengthening infrastructure, training human resources, and improving inter-sectoral coordination.

**Keywords:** Bioterrorism, emerging threats, management, health system

## The Role of Artificial Intelligence in Enhancing Nurses' Clinical Decision-Making in Epidemiological Crises: A Systematic Review

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**Introduction and Objective:** Epidemiological crises like COVID-19 create challenges for nurses due to resource constraints and the need for rapid decision-making. This study evaluated the impact of artificial intelligence (AI) technologies on improving the accuracy and efficiency of nurses' clinical decision-making in such crises.

**Methods:** A systematic review following PRISMA guidelines was conducted, searching PubMed, Scopus, SID, and MagIran databases (2015–2024). Inclusion criteria covered studies on AI applications in nursing decision-making during epidemiological crises. Exclusion criteria included non-nursing studies or those lacking valid data. Study quality was assessed using the AMSTAR 2 checklist. Eighteen studies were analyzed.

**Results:** Machine learning algorithms (e.g., Random Forest) and neural networks achieved 75–85% accuracy in early detection of clinical changes and reduced decision-making errors by 25%. Similar to the NHS in the UK, these technologies improved hospital resource management. Challenges in Iran included software incompatibility with hospital systems, limited budgets, and insufficient nurse training. Targeted training and user-friendly system design were identified as key solutions.

**Conclusion:** AI enhances nursing care quality in epidemiological crises. These findings align with the congress theme of community-based care, as early-detection apps can empower local communities. Recommendations include specialized nurse training and investment in health technology infrastructure, such as local servers for system integration.

**Keywords:** artificial intelligence, nursing, clinical decision-making, epidemiological crisis, systematic review, health technology, intelligent systems, hospital resource management

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## Relationship Burden of Brest Cancer Attributable to High Fasting Plasma Glucose (HFPG) and Socio-Demographic Index in Asia 1990-2021

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**Background:** In Asia, breast cancer is the most common cancer and the second leading cause of cancer death among women. The etiology of breast cancer is multifactorial and involves a complex interaction of various genetic, hormonal, and environmental factors. Key risk factors include family history and BRCA gene mutations, as well as reproductive patterns such as early menarche, late menopause, and fewer pregnancies. Furthermore, lifestyle changes associated with urbanization including physical inactivity, obesity, and alcohol consumption are contributing to the rising incidence rates observed across many Asian countries.

**Methods:** The present study is a population-based study. Epidemiological data on breast cancer attributable to HFPG in this study were extracted from the Global Burden of Disease Database (GBD) 2021. These data include mortality, disability-adjusted life years (DALY), Age-Standardized DALY Rate (ASDR) and Age-Standardized Mortality Rates (ASMR), stratified by gender and country in the Asian continent. We assessed trends in ASDR and ASMR from 1990 to 2021. In addition, using Pearson correlation analysis, the relationship between socio-demographic index (SDI) and breast cancer attributed to High Fasting Plasma Glucose (HFPG) was calculated.

**Result:** The results showed that the trend of ASMR and ASDR of breast cancer attributed to HFPG is increasing in the Asian continent. The percentage of breast cancer ASMR and ASDR changes attributed to HFPG during the period of 1990-2021 was positive for the Asian continent. In 2021, the highest ASMR and ASDR of breast cancer attributed to HFPG were from the United Arab Emirates, Qatar and Bahrain. The results showed that there is a positive and significant correlation between ASMR ( $r=0.291$ ,  $p=0.04$ ) and ASDR ( $r=0.28$ ,  $p=0.04$ ) of breast cancer attributed to HFPG with SDI in Asian countries.

**Conclusion:** The findings confirm a significant and growing burden of breast cancer linked to high fasting plasma glucose in Asia, with a clear positive correlation to socioeconomic development. This underscores the urgent need for integrated public health strategies that combine breast cancer prevention with diabetes control programs. Implementing targeted lifestyle interventions and systematic screening for high-risk groups with hyperglycemia is essential to reduce breast cancer incidence and mortality in the region.

**Keywords:** Fasting plasma glucose, Neoplasms, Mortality, Breast cancer

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## Effect of Foot Reflexology on Sleep Quality in Patients with Multiple Sclerosis

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**Background:** MS is an autoimmune disease of the central nervous system, often accompanied by worsening sleep quality. The study examined whether foot reflexology could improve sleep quality in MS patients.

**Methods:** This study is a double-blind clinical trial in which sixty-four MS patients were randomly assigned to either an intervention or sham group. The intervention involved 26-minute foot reflexology sessions, three times a week for four weeks—performed by a trained researcher in the morning and by patients at home on three additional days. Moreover, the sham group received nonspecific foot massage without applying pressure to the standard reflexology points under similar conditions and durations as those of the intervention group. Data were collected at baseline, immediately after, and one month post-intervention using the Pittsburgh Sleep Quality Index.

**Results:** The results revealed a significant improvement in sleep quality ( $p < 0.001$ ) in the intervention group. In contrast, no significant change was observed in the sham group ( $p = 0.306$ ). There was a significant difference in sleep quality scores between groups at both post-intervention and one-month follow-up ( $p < 0.001$ ).

**Conclusion:** Foot reflexology may improve sleep quality in MS patients. It is an effective, noninvasive, and affordable therapy. Training nurses and patients is recommended.

**Keywords:** Multiple Sclerosis, Reflexology, Sleep quality

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## Evaluating Team-Based Patient Positioning in Laparoscopic Surgery: A 360-Degree Assessment observational study

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**Background:** Accurate patient positioning in laparoscopic surgery is essential for safety and efficacy. This study aimed to develop and apply a checklist to evaluate surgical team performance during patient positioning in lithotomy, Trendelenburg, and reverse Trendelenburg positions.

**Methods:** A 50-item checklist was developed across four domains: environmental facilities (12 items), environmental care (12), basic care (12), and specialized care (3 items for Trendelenburg/reverse Trendelenburg; 8 for lithotomy). Using a 360-degree assessment, in 120 laparoscopic surgeries surgical team (surgeons, operating room nurses, anesthetists nurses and physician anesthetists) was observed, with each team evaluated by three assessors: a researcher, supervisor, and second researcher.

**Findings:** Most hospitals had adequate environmental facilities (97.6%), but surgical positioning pads were lacking in 80% of cases. Overall team performance was good (80.8%). Environmental care scores were lowest for pad usage and only 20% of cases used them when available, suggesting good adherence when resources were present. In basic care, surgeon presence during positioning was critically low, observed in only 40% of surgeries. Specialized care performance was high for Trendelenburg and reverse Trendelenburg (97%). For lithotomy, major deficiencies included failure to place both legs simultaneously with two staff members (57%) and incorrect hip flexion (42%) standard achieved in (58%). Although no statistically significant difference was found between assessors' scores, supervisors consistently tended to rate team performance more favorably than researchers.

**Conclusion:** The checklist effectively identifies strengths and gaps in positioning practices. While infrastructure is generally sufficient, lack of positioning aids and inconsistent team practice especially surgeon absence and improper lithotomy technique pose risks. When equipment is available, compliance is high, highlighting the importance of resource provision. Targeted training, team coordination, and routine audits using standardized tools are recommended to enhance patient safety.

**Keywords:** laparoscopic surgeries, patient positioning, surgical team

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## The effect of Benson's relaxation on headache-induced by intravenous infusion of Nitroglycerin in Acute Coronary Syndrome patients: a randomize controlled trial

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**Background and purpose:** Severe Pulsating headache is the most common side effect of Nitrates. This study aimed to determine the effect of Benson relaxation on headache-induced by intravenous infusion of Nitroglycerin.

**Materials and methods:** This Randomized Controlled Clinical Trial was conducted on 60 patients with Acute Coronary Syndrome, 30 in the control and 30 in the intervention group, who were randomly assigned to receive intravenous nitroglycerin infusion. After 20 minutes of starting the intravenous Nitroglycerin infusion, the intervention was performed for 15 minutes. The intervention group received relaxation despite standard treatment (injection of one gram of intravenous acetaminophen at the time of headache). The control group received only standard headache treatment in case of headache and did not receive any relaxation. The patients' headaches were recorded using a 100 mm visual analogue scale and on three occasions 15, 35, and 60 minutes after starting the intravenous Nitroglycerin infusion. Data analysis was also performed using SPSS version 23.

**Findings:** The results showed that the average time of headache onset in the intervention group was 20 minutes and in the control group was 19 minutes, but this difference was not statistically significant. Regarding the frequency of headache onset 15, 35 and 60 minutes after the start of Nitroglycerin infusion, it was 73.3, 60 and 26.7% in the intervention group, respectively, and 80, 80 and 86.6% in the control group, respectively, with the difference between the groups being significant only at 60 minutes after the infusion ( $p=0.001$ ). Regarding the average headache severity at 15, 35, and 60 minutes after Nitroglycerin infusion, the relaxation group had 21.33, 12.67, and 7.67 scores, respectively, and the control group had 23.33, 20, and 32.33 scores, respectively. The difference between the groups was significant only at 60 minutes after the drug infusion ( $P=0.001$ ). Regarding the need for Acetaminophen, it was also found that the control group's need for Acetaminophen was greater than that of the intervention group ( $P=0.001$ ).

**Conclusion:** This study showed that Benson relaxation can be useful in reducing headache caused by intravenous Nitroglycerin infusion in addition to other treatments for patients. Keyword: Relaxation technique, headache, Nitroglycerin, infusion.

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## AI-Driven Clinical Decision Support Systems in Nursing Care of Older Adults with Diabetes Mellitus: A Systematic Review

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**Background:** Diabetes is a common condition among older adults and often leads to serious complications. Artificial intelligence-based decision support systems (AI-DSS) can help prevent complications and improve nursing care by analyzing clinical data. This study aimed to identify the applications, benefits, and challenges of AI-based decision support in nursing care for diabetic patients over 60.

**Methods:** In this systematic review, studies published up to August 2025 were searched in PubMed, Web of Science, and Scopus using selected keywords. The initial search retrieved 450 articles, and references of the included papers were also reviewed manually. Based on the inclusion and exclusion criteria, original English-language studies focusing on AI-based clinical decision support in nursing care for diabetic older adults over 60 years were selected and analyzed. In the end, 8 articles were reviewed in full, and relevant data were extracted.

**Results:** AI-based decision support systems, through advanced analysis of data such as electronic health records, vital signs, and laboratory results, were effective in predicting complications, controlling blood glucose, adjusting insulin doses, monitoring treatment adherence, and personalizing care for elderly diabetic patients. However, challenges remain, including algorithm accuracy, integration into workflows, polypharmacy in older adults, generalizability, transparency, elderly-friendly interface design, staff training, and ethical considerations.

**Conclusion:** The reviewed studies indicate that AI-based decision support systems, as transformative and complementary tools, hold great potential for improving nursing care in elderly patients with diabetes. At the same time, there is a need for responsible AI development with attention to patient privacy and transparency.

**Keywords:** Clinical Decision Support; Nursing Care; Diabetes Mellitus; Older Adults

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### Assessment of Sleep Quality in Dialysis Patients: A Scoping Review

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**Background:** Dialysis is a life-saving treatment for kidney failure patients, but many of these patients struggle with Sleep problems. Poor sleep quality can seriously affect their overall health. Several factors, like the dialysis process, medical conditions, contribute to this problem. Despite its importance, sleep quality in dialysis patients is often overlooked. This review identifies challenges in sleep for dialysis patients and informs better recognition and management.

**Methods:** The search for relevant studies involved keywords related to “Sleep Quality” and “Dialysis” in international databases, including PubMed and ScienceDirect, and national resource (Magiran), from 2010 to 2025. The initial search yielded 235 studies. Inclusion criteria consisted of clinical articles relevant to the study title, excluding animal studies, reviews, conference. After removing duplicates and ensuring ethical standards, the final analysis comprised 42 studies.

**Results:** Sleep impairment is a widespread issue, appearing in 13 studies (30%). Poor sleep showed a strong link to elevated anxiety and depression in 9 studies (21%). 6 studies (14%) identified uraemic pruritus and pain as main causes. Insomnia’s main effects included decreased quality of life in 5 studies (12%), and 2 studies (4%) predicting five-year mortality. Seven studies (16%) suggested psychosocial support, and modifications to proposed diet and physical activity modifications. Three studies (7%) recommended a multidisciplinary, personalized care approach by nurses.

**Conclusion:** Poor sleep quality is a serious concern in dialysis patients, linked to psychological distress and physical symptoms like pruritus. This impairment reduces quality of life, underscoring the need for comprehensive interventions and multidisciplinary care, including psychosocial support and lifestyle changes.

**Keywords:** Sleep Quality, Dialysis Patients, Anxiety, Depression, Quality of Life, Multidisciplinary Care

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## Barriers to implementing evidence-based care in nursing care of patients with HIV: A systematic review

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**Background:** Nurses of patients with special conditions should be able to use the evidence-based practice process in order to identify, access, apply, and integrate new knowledge with their practice in order to provide high-quality care. Identifying and removing barriers in this path helps nurses caring for patients with special conditions to make care-treatment decisions for their patients that are based on the best, most common, most valid, and most relevant evidence available. Therefore, this article has reviewed the barriers related to evidence-based practice in the field of nursing patients with HIV.

**Methods:** A literature review was conducted in the Cochrane library, Pubmed, Scopus, Science Direct (Ovid) and EMBASE (Ovid) databases in English and Persian with the keywords, Nursing, Evidence-Based Nursing Care, HIV disease, obstacles according to the MeSH database without time limit. The inclusion criteria for the study using the Prisma checklist included access to the full text of the articles, relevance of the title, etc., and the results of the studies were reviewed independently by two researchers, and after screening, relevant articles were selected and used in the present study.

**Results:** Findings In the review, several studies provided evidence that evidence-based nursing can increase patients' motivation to adhere to treatment by educating them by providing accurate information about the disease, complications, and treatment. Also, emotional support and emotional support from nurses help patients cope with the psychological stress caused by the disease. According to studies, creating personalized treatment plans and designing programs based on the individual needs of patients can lead to increased adherence to treatment. Also, regular monitoring and follow-up of patients' conditions and continuous follow-ups can prevent non-adherence.

**Conclusion:** The results of this systematic review indicate that evidence-based nursing has an important role in improving treatment adherence in patients with hypertension. Given the high prevalence of this disease and the complications caused by non-adherence, incorporating evidence-based nursing strategies into treatment protocols can be an effective approach to improve patient health. In general, there is a need to hold training workshops for nurses in evidence-based nursing. On the other hand, more detailed and comprehensive research in this field can help improve treatment strategies and patient care.

**Keywords:** Nursing, HIV, Evidence-based nursing care, Barriers

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## Evaluation of the quality of nursing documentation in the emergency department of a major teaching hospital: A descriptive-cross-sectional study

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**Background:** High-quality nursing documentation is a cornerstone of safe, effective, and continuous patient care, yet achieving and maintaining high standards is a persistent global challenge. Deficiencies in documentation can lead to medical errors, discontinuity of care, and legal vulnerabilities. In Iran, the quality of nursing documentation remains a concern, necessitating ongoing evaluation to identify weaknesses and guide improvement efforts. This study aimed to provide a comprehensive Evaluation of the quality of nursing documentation in the emergency department of a major teaching hospital affiliated with Isfahan University of Medical Sciences in Iran.

**Methods:** A descriptive-cross-sectional study was conducted in the emergency department of Al-Zahra Hospital from April to August 2025. A total of 307 nursing reports—comprising 103 admission, 101 in-patient, and 103 discharge reports—were selected via random sampling. Data were collected using a validated and reliable structured checklist. The collected data were analyzed using descriptive statistics in SPSS version 22.

**Results:** The quality of documentation varied across different report types. Discharge reports had the highest overall quality with an average correct documentation rate of 81.7%, followed by admission reports (65.3%) and inpatient reports (64.6%). In admission reports, the time of physician notification and physician's visit were not documented in 88.3% and 89.3% of cases, respectively. routine in-patient reports, nurses had poor documentation, with patient's sleep/rest status (61.4%), fluid intake and output (59.4%), and patient education (52.5%) frequently unrecorded. In discharge reports, patient education was missing or incomplete in 23.3% of records.

**Conclusion:** These findings highlight an urgent need for targeted interventions, including continuous staff training, systematic auditing, and workflow optimization, to address these deficiencies and improve patient outcomes and protect nurses from legal issues.

**Keywords:** Nursing Documentation, Quality Evaluation, Nursing Process, Emergency ward

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## Prioritizing patients during disaster triage from a public perspective: a systematic review study

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**Background:** One of the characteristics of disasters is the creation of medical needs that exceed available resources and the capacity of human resources to provide services (1). As demonstrated in the Haiti earthquake and the H1N1 and COVID-19 pandemics, medical teams face the challenge of how to best utilize available treatment resources (2). Triage is a strategic therapeutic tool used during times of imbalance between need and resources and is accepted to guide treatment resource allocation decisions (3). Although using standard techniques can prevent arbitrary decisions and lead to a fair distribution of emergency medical resources, previous experiences indicate that triage officers have faced difficulties in these situations (4). Therefore, the decision regarding which patient receives care is stressful for the triage officer and can raise significant ethical debates (5). Most triage models have adopted a utilitarian approach, with saving the most lives as the guiding principle for their decisions (6). Thompson identifies the duty to provide care, equity, individual liberty, privacy, and protecting the community from harm as intrinsic values for decision-makers in allocating medical resources during an influenza pandemic. Researchers state that due to differing ethical perspectives, the framework they introduce can serve as a basis for decision-making, and each society should provide an ethical framework appropriate to its own culture (7). To ensure the validity of decisions in prioritizing patients during resource scarcity, it is necessary to examine the opinions and perspectives of all stakeholders in such decisions. Since the public is one of the most important stakeholders in patient prioritization decisions, understanding public opinion is essential (8). This is because if public views are used in triage and incorporated into policy, it will be more readily accepted by the public during disasters (9). While studies have been conducted on this topic in various countries, especially during the peak of the COVID-19 pandemic, there is still no clear agreement on the goals and criteria for prioritizing patients among the public and professionals (10-12). Prioritizing disaster victims has been debated for a long time. The aim of this study is to identify criteria acceptable to the public for prioritizing patients (triage) in access to scarce medical resources (ventilators, hospital beds).

**Methods:** To gather relevant studies, based on the research team's decision, four databases of articles and publications related to medical sciences were searched for the period 2002 to 2020: 1) PubMed ([www.ncbi.nlm.nih.gov/pubmed](http://www.ncbi.nlm.nih.gov/pubmed)), 2) Web of Science ([www.webofknowledge.com](http://www.webofknowledge.com)), 3) Scopus (<https://www.scopus.com>), and 4) ProQuest ([www.proquest.com](http://www.proquest.com)). The research team also searched the Google Scholar database and the World Health Organization (WHO) website using a search strategy tailored to each database. The study's search strategy was built based on a combination of MeSH keywords related to disasters and ethics. In the next stage, titles and abstracts were reviewed for relevance, and irrelevant titles were removed. Then, the full texts of the articles were evaluated for relevance based on inclusion and exclusion criteria, and irrelevant articles were removed. Important criteria for ethical decision-making were then extracted from the included studies, and the importance of these criteria was calculated using the provided percentages or scores.

**Results:** Out of 4167 titles identified in the search, 21 studies were included. The important factors identified in patient prioritization from the public's perspective were divided into two categories: medical measures (medical need, likelihood of benefit and survival) and non-medical measures (saving the most lives, priority to the youngest, maintaining community function, protecting vulnerable groups, resources required, and fair/random selection). Demographic characteristics, patient health status, patient social value, and random selection were identified as discriminatory factors in resource allocation.

**Conclusion:** Various factors have been introduced for considering the ethical prioritization of patients in disaster triage. Public participation, public education, and continuous training are essential for achieving fair decision-making.

**Keywords:** Triage, Disasters, Public, Systematic Review

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## Application of artificial intelligence in health data analysis

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**Background:** Artificial intelligence (AI) is often heralded as a potential disruptor that will transform the practice of medicine. This technology has dramatically improved research and healthcare outcomes by providing more accurate diagnoses and treatments. AI in healthcare organizations is changing the way patients receive quality care, while reducing costs for providers and improving health outcomes.

**Methods:** This research is a systematic review article. The data collection method was reliable library and internet sources related to the research topic. In order to collect internet data from articles available in the databases Science Direct, Magiran, Pubmed, SID and Google Scholar in the last few years.

**Results:** A total of 86 articles were retrieved, and among them, studies related to the relationship between artificial intelligence and healthcare were thoroughly reviewed. Finally, 21 articles in the field of artificial intelligence in healthcare were selected for review. Evidence suggests that artificial intelligence is used to provide timely data to clinical staff, overcome large volumes of data, improve the quality of care, help accelerate and correct clinical decisions, improve communication between clinical staff, reduce costs, and assess health status.

**Conclusion:** The results of this study showed that healthcare organizations need the potential capabilities of artificial intelligence, including machine learning, natural language processing, rule-based expert systems, diagnostic and treatment software, and management software, to achieve better performance. It is proposed that due to such capabilities, artificial intelligence be used to augment, automate, and transform medicine in healthcare organizations.

**Keywords:** Artificial intelligence, medicine, digital health, health care

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## Child and Adolescent Psychiatric Nursing at the Forefront: Systematic Review of Strategies to Promote Mental and Social Health in Crises

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**Background:** Children and adolescents are highly vulnerable during social crises, including pandemics, natural disasters, and armed conflicts. Exposure can lead to anxiety, depression, behavioral disorders, and post-traumatic stress. Child and adolescent psychiatric nurses play a crucial role in early identification, intervention, and family-centered support to safeguard mental and social well-being.

**Methods:** A systematic review was conducted using PubMed, Scopus, and Google Scholar for articles published between 2014 and 2024. Keywords included “child and adolescent psychiatric nursing,” “social crises,” “mental health,” “nursing interventions,” “natural disasters,” and “pandemic.” Duplicates were removed, and abstracts and full texts were screened for relevance, methodological quality, and practical applicability. Data extraction and thematic analysis followed PRISMA guidelines.

**Results:** Findings show that psychiatric nurses mitigate the psychological impact of crises by conducting mental health screening, early detection of issues, teaching coping and resilience skills, providing trauma-informed and family-centered care, and offering psychoeducation to parents, teachers, and caregivers. Innovative approaches, including telepsychiatry and online counseling, support continuity of care. Collectively, these interventions reduce anxiety, depression, behavioral problems, and post-traumatic stress while enhancing adaptive functioning and overall mental and social well-being.

**Conclusion:** Child and adolescent psychiatric nurses are indispensable in managing mental health consequences of social crises. Strengthening specialized training, developing culturally adapted guidelines, and integrating digital and community-based interventions can improve outcomes. Empowering nurses in policy-making and crisis-response programs ensures effective, sustainable care for vulnerable youth.

**Keywords:** Child; adolescent; psychiatric nursing; mental health; social crises

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## The effect of patient education on Coronary Artery Bypass Grafting (CABG) stages on postoperative anxiety and pain

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**Background:** Coronary Artery Bypass Grafting (CABG) is recognized as the standard treatment for patients with severe coronary artery obstruction. Postoperative anxiety and pain are common issues faced by this patient population. The present study aimed to investigate the impact of education regarding the stages of CABG on postoperative anxiety and pain levels.

**Methods:** This research was a quasi-experimental study in which 100 patients undergoing CABG were randomly divided into two groups: control and intervention. The intervention group received face-to-face education, while the control group received routine preoperative care. Data were collected using a demographic questionnaire, the State-Trait Anxiety Inventory (STAI), and the Brief Pain Inventory (BPI), and were analyzed using SPSS software at a significance level of 0.05.

**Results:** The changes in mean heart rate ( $P \leq 0.001$ ), systolic blood pressure ( $P \leq 0.001$ ), diastolic blood pressure ( $P = 0.045$ ), levels of explicit anxiety ( $P \leq 0.001$ ), and pain intensity ( $P \leq 0.001$ ) between the two groups over time were statistically significant. An independent t-test also indicated a statistically significant difference in hidden anxiety between the two groups ( $P$ -value = 0.037).

**Conclusion:** Face-to-face education, by preparing patients for surgery and increasing their awareness, has a positive effect on reducing anxiety and pain following CABG, potentially improving patients' physiological indicators. This method is recommended as an effective non-pharmacological intervention.

**Keywords:** Education, Coronary Artery Bypass Grafting (CABG), Anxiety, Pain

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## The Barriers and Facilitators Related to the Application of Telenursing in the Management of Patients with Amyotrophic Lateral Sclerosis: A Narrative Review

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**Background:** Amyotrophic Lateral Sclerosis (ALS) is a rare neurodegenerative disorder accompanied by problems with movement, speech, swallowing, and breathing. Given its progressive, rare, and incurable nature, patients are often cared for at home and, in some remotely. Managing ALS patients through telenursing presents both barriers and facilitators that significantly impact its implementation. While telehealth is promising in enhancing care and access, existing challenges in this area need to be addressed. Therefore, this narrative review aims to explore the barriers and facilitators of using telenursing in the management of patients with ALS.

**Methods:** The present study is a narrative review, in which searches were conducted using the keywords "telenursing" and "Amyotrophic Lateral Sclerosis," "barriers and facilitators," and their Latin equivalents, within the past 5 years (from the beginning of 2020 to the beginning of 2025) in the PubMed, Scopus, Web of Science, and Google Scholar databases. Relevant reviews and interventional articles in this field were collected, studied, and summarized.

**Results:** Studies identified the most significant barriers to telenursing in ALS management as the attitudes and resistance of healthcare professionals based on concerns about a lack of patient interaction and technical issues, failure to maintain patient privacy, security, and legal issues, unequal patient access to technology, financial limitations in providing necessary equipment, and geographical limitations such as living in remote areas. Facilitators included a positive attitude towards patients and caregivers, facilitated patient education and support at home, a multidisciplinary team approach, and, consequently, increased patient satisfaction.

**Conclusion:** Despite the potential benefits of telenursing in ALS management, there are barriers to implementing such interventions, and balancing them, employing hybrid care models, and establishing health policies to facilitate the implementation of advanced care in this vulnerable population are crucial.

**Keywords:** Telenursing, Amyotrophic Lateral Sclerosis, Barriers, Facilitators

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## A synthesis of traditional and current medicine in nursing care of Fibromyalgia: A systematic review study

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**Background:** Fibromyalgia is a chronic musculoskeletal pain syndrome characterized by widespread pain, tender points, fatigue, and sleep disturbance, and its etiology is unknown in conventional medicine. It is characterized by chronic muscle pain and muscle attachment points. This disease is a type of connective tissue rheumatism. The existence of a set of symptoms other than pain, such as muscle spasms and walking disorders, depression, morning stiffness of the joints, night insomnia and instead the tendency to sleep during the day, skin rashes and brain fog, has caused the term fibromyalgia syndrome to be applied to this disease. Skeletal-muscular pain is seen in 10% to 12% of the population, for which no structural or inflammatory cause can be found. In traditional medicine, the cause of this disease is cold and dry indigestion, and the symptoms of this disease appear in this indigestion. Therefore, the present study was conducted with the aim of providing integrated nursing care of common medicine and traditional medicine for fibromyalgia disease.

**Methods:** The present study was conducted as a systematic review. To find relevant studies, the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines were followed and the primary search was performed accordingly in March 2024. PubMed, Web of Science, Google Scholar, Scopus, Embase and Science Direct databases were searched using key words such as fibromyalgia, traditional medicine, nursing, care. 1027 articles were reviewed. The articles were descriptive, analytical, systematic review and experimental and semi-experimental and qualitative.

**Results:** According to the results of this study, anti-depressants, anti-anxiety drugs, painkillers, anti-inflammatory drugs, and even corticosteroids can be used for quick and symptomatic treatment of the disease and management of anxiety, depression, and pain in patients. From the point of view of the paradigm of traditional medicine, the mood of the patients should be corrected in terms of cold and dry bad mood. Using the essential set, for example, doing sports such as yoga, listening to quiet music, encouraging the consumption of warm and moist food and medicine, avoiding the consumption of cold and dry food, recommending to live in a climate with warm and moist quality, advice to regulate night sleep and perform medical procedures such as dry and wet cupping and with the simultaneous use of traditional and common medicine measures, under the supervision of the doctor, the patient's health will be restored.

**Conclusion:** Therefore, the study recommends that the nursing care of patients with fibromyalgia is based on a combination of traditional medicine and common medicine.

**Keywords:** Fibromyalgia, Traditional medicine, Nursing, Care, Common medicine

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## Navigating the Future: Technological Trends in Nursing and Their Challenges

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**Background:** Technological advancements, particularly in healthcare, have significantly transformed nursing by enhancing patient care, clinical decision-making, and efficiency. Keeping pace with these changes is essential for preparing nursing practice for the future. This review aims to identify technological trends expected to influence nursing in the near future and provide guidance for their safe adoption.

**Methods:** A narrative review was conducted using the keywords Future trends, Healthcare trends, Technology, Technological innovation, Digital health, Health technology, Innovation technology, Health innovation, Nursing field, Nursing practice, Nursing education, and Nursing profession. Searches were performed in PubMed, ScienceDirect, Web of Science, and Google Scholar. Inclusion criteria were full-text articles in English published between 2000–2024. Exclusion criteria included comments, letters, gray literature, duplicates, and studies not aligned with the objective. After screening, 226 studies were analyzed.

**Results:** Twelve major technological trends were identified: telemedicine, artificial intelligence, Internet of Medical Things, electronic health records, personalized medicine, virtual reality, robotics and automation, 3D printing, blockchain, cognitive sciences, nanomedicine, and neurotechnology. The reviewed studies highlighted the potential impact of these innovations on nursing care. For each trend, the following aspects were discussed: the importance and impact of the trend on the nursing discipline; examples of the trend in nursing; and key messages for preparedness to engage with the trend.

**Conclusion:** Technological trends are reshaping nursing practice. Preparing for their integration will strengthen nursing's role in delivering safe, efficient, and patient-centered care. Future studies should evaluate long-term impacts on clinical outcomes and patient experiences.

**Keywords:** Future trends, Healthcare trends, Technology, Technological innovation, Digital health, Health technology, Innovation technology, Health innovation, Nursing field, Nursing practice, Nursing education, and Nursing profession

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## Investigating the general Self efficacy and its related factors in the Elderly with Physical- motor disabilities

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**Background:** With the growing number of elderly individuals suffering from various disabilities, especially physical-motor disabilities, identifying modifiable factors that can reduce or prevent physical limitations is crucial for improving independence and quality of life. One important psychological factor in this context is general self-efficacy and its associated determinants. Therefore, this study aimed to investigate the relationship between general self-efficacy and its related factors in elderly individuals with physical-mobility disabilities.

**Methods:** This cross-sectional, descriptive-analytical study was conducted on 200 elderly individuals with physical-mobility disabilities who were referred to three selected educational and treatment centers of Babol University of Medical Sciences (Ayatollah Rouhani, Shahid Beheshti, and Shahid Yahya Nejad) from December to March 2020. Participants were selected using quota sampling based on age, sex, and type of physical-motor disability. Data were collected using a demographic questionnaire and the General Self-Efficacy Scale (GSE-10). Data analysis was performed using independent t-tests, ANOVA, Scheffe post hoc, and multiple linear regression in SPSS version 20 at a significance level of  $p \leq 0.05$ .

**Results:** The participants' mean age was  $72.25 \pm 8.45$  years; 58% were women. The mean general self-efficacy score was  $28.48 \pm 6.48$ , with 55% showing moderate self-efficacy. Significant relationships were found between self-efficacy and employment status ( $p < 0.001$ ), income level ( $p < 0.001$ ), and underlying diseases ( $p = 0.034$ ). Income level was the strongest predictor.

**Conclusion:** General self-efficacy is influenced by demographic and health-related factors. Educational programs, counseling, and home-based geriatric nursing care may help improve self-efficacy in this population.

**Keywords:** self-efficacy, aged, Physically Disabled

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## Investigating the Quality of life and related factors in the Elderly with physical-motor disabilities

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**Background:** The concept of quality of life (QoL) depends on living conditions, diseases, and disabilities, which vary across populations, time, and location. Identifying factors influencing QoL in elderly individuals with physical-motor impairments can provide a foundation for future educational interventions and strategies. This study aimed to identify factors affecting QoL in elderly individuals with physical-motor disabilities.

**Methods:** This descriptive-analytical, cross-sectional study was conducted on 200 elderly individuals with physical-motor impairments attending three educational and healthcare centers affiliated with Babol University of Medical Sciences (Ayatollah Rouhani, Shahid Beheshti, and Shahid Yahya Nejad) between October and March 2020. Participants were selected based on age, gender, and physical-motor impairments. Data collection tools included a demographic questionnaire and the WHOQOL-BREF (World Health Organization Quality of Life Brief) scale. Data were analyzed using independent t-tests, ANOVA, and multiple linear regression in SPSS version 20, with a significance level of  $p<0.05$ .

**Results:** The mean age of participants was  $72.45 \pm 8.25$  years. The overall mean QoL score was  $54.50 \pm 21.23$ , indicating a moderate level. Significant associations were found between QoL and education level, employment status, living conditions, income level, and underlying diseases (all  $p<0.001$ ). Mean scores in physical health, psychological health, social relationships, and environmental health were 50.35, 55.68, 58.04, and 62.90, respectively.

**Conclusion:** The findings highlight the need for educational programs targeting key QoL factors. Nursing educators and planners should develop strategies to improve care quality and enhance elderly individuals' quality of life.

**Keywords:** Quality of life, aged, physical-motor disability

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### Investigating the level of disaster preparedness among nursing managers

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**Background:** Disasters pose a significant challenge for healthcare systems globally. Nursing managers play a crucial role in managing disasters, highlighting the importance of their preparedness. This study aims to assess the knowledge and attitudes of nursing managers in public hospitals in Lorestan province when faced with disasters.

**Methods:** In 2020, a cross-sectional study was conducted with 158 nursing managers from public hospitals affiliated with Lorestan University of Medical Sciences. Participants were selected through census sampling and completed the Disaster Preparedness Knowledge and Attitude Questionnaire, which had been confirmed validity and reliability. Data analysis was performed using SPSS statistical software version 21, with a significance level set at  $P<0.05$ .

**Results:** The study revealed that nursing managers had an average knowledge score of 12.26 out of 25 and an average attitude score of 66.18 out of 80. There was a significant relationship between disaster experience and knowledge scores, as well as between marital status and attitudes. However, no significant correlation was found between knowledge scores and attitudes.

**Conclusion:** The findings indicate that nursing managers have moderate knowledge levels and positive attitudes towards disaster management. Continuous training courses on disaster preparedness are recommended for hospital nursing managers to enhance their knowledge and effectiveness in handling disasters.

**Keywords:** Disaster preparedness, Knowledge, Attitude, Nursing managers

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### A critical look at Madeleine Leininger's theory of cultural care based on Millis's model

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**Background:** Leininger's theory of cultural care is one of the most influential theories in the field of nursing that emphasizes the culture of health and illness. Despite the high status of Leininger's theory, like any other theoretical structure, this theory also requires continuous review, analysis, and criticism to identify its strengths and areas for development and improvement. The present study aimed to provide a critical analysis of Madeleine Leininger's theory of cultural care using the Millis model analysis.

**Methods:** The present study was a theoretical and analytical study that used a critical approach to Leininger's cultural care theory based on the Millis model. First, a detailed and comprehensive review of Madeleine Leininger's cultural care theory was conducted. This review included identifying key concepts, central principles, assumptions, and main applications of this theory. In the next step, the Millis model was selected as an analytical framework. The Millis model framework consisted of five stages: description, analysis, critique, testing, and theory support, and the present study focused on the third stage, which is critique.

**Results:** According to Millis's critical approach, the strengths of Leininger's cultural care theory included: relatively simple and understandable concepts, coherent structure and stable principles, high adaptability (to different cultures and conditions), systematic approach, conceptual simplicity, and the importance of repetition for emphasis and learning. Also, the weaknesses of Leininger's theory included: the complexity of the Sunrise model, lack of training and resources, cultural conflicts and ethical issues, the impact of social inequalities on implementation, dependence on technology and related challenges, insufficient coordination between international and local organizations, and the need for extensive financial and human resources.

**Conclusion:** The results of this study showed that while the theoretical foundations of Leininger's theory remain valid and influential, successful implementation requires the removal of identified barriers. Therefore, it is recommended that efforts be made to enrich educational programs, provide supportive infrastructure, and strengthen interdisciplinary collaborations to overcome the practical challenges of this theory.

**Keywords:** Cultural care, Madeleine Leininger, nursing theory, Millis model, critique

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## Model of a Healthy Family: Assessing Family Health Promotion Indicators in Islamic Teachings

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**Background:** It is certain that the set of Islamic teachings regarding the family guides us towards a model with efficient components that can effectively address the material and spiritual needs of families. The present study aims to identify indicators for promoting family health and to develop a practical model for individual and social health promotion based on Islamic verses and traditions.

**Methods:** This review study extracted and explained the indicators of family health in Islamic verses and traditions by analyzing the content of interpretive books, research articles, and reputable scientific websites.

**Results:** The findings of this study revealed that, since the family is the fundamental unit in Islamic society, Islamic teachings have addressed various aspects of family lifestyle. These include the importance of piety in the family, fostering tranquility, forgiveness and overlooking faults, spousal affection, empathy and companionship, family economy and livelihood, respect for parents, child-rearing, avoiding discrimination among children, and even breastfeeding.

**Conclusion:** Islam is a comprehensive religion that addresses to all aspects of human life. The family, as one of the core and fundamental institutions in Islam, receives special attention. Undoubtedly, adherence to Islamic teachings plays a significant role not only in shaping and ensuring family health but also, on a larger scale, in the health of society.

**Keywords:** Healthy Family, Health Promotion Indicators, Islamic Verses, Islamic Traditions

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## Knowledge Translation in Health Policy-Making: From Research to Evidence-Informed Decision-Making

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**Background:** Knowledge translation is a process that presents research findings in an accessible form for policymakers, enabling more effective health-sector decisions. This process bridges the gap between research and practice and enhances the quality of health policies. The present study aims to examine the role of knowledge translation in transforming research findings into evidence-based decision-making in the field of health policymaking, and to propose strategies for improving this process.

**Methods:** This study was conducted using a narrative review method. Articles from the period 2012 to 2025 were searched in the Google Scholar, SID, and PubMed databases using the keywords “knowledge translation”, “health policy” and “health care”. Following the search, 6 out of 18 articles were selected for final analysis.

**Results:** The findings revealed that knowledge translation has a significant impact on decision-making in the health sector. The main challenges in this path include the lack of direct communication between researchers and policymakers, and the complexity of transforming research findings into executable policies. Several strategies have been introduced to facilitate this process in health policymaking, including preparing policy-specific reports, organizing dialogue sessions between researchers and decision-makers, and presenting research findings in simple and accessible formats.

**Conclusion:** To optimize this process, it is recommended that academic and research institutions establish specialized training programs and design interactive platforms to provide more structured frameworks for knowledge translation. Moreover, establishing specialized knowledge translation working groups in research institutions can expand collaboration between researchers and policymakers, paving the way for the application of practical findings in macro-level decision-making.

**Keywords:** knowledge translation, policymaking, health care

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## High-risk adolescence: A four-dimensional framework for understanding risks and guiding interventions

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**Background:** Adolescence is a critical stage of life characterized by vulnerability to multiple health risks. The increasing rates of high-risk behaviors and psychosocial problems among adolescents highlight the urgent need for a comprehensive framework that captures the complex nature of “high-risk adolescence.” Objective: To provide a conceptual framework that defines high-risk adolescence and outlines its main dimensions, providing guidance for assessment, prevention, and policy development.

**Methods:** Using an integrated review of the literature and synthesis of available evidence, a multidimensional model was developed to explain overlapping domains of adolescent risk.

**Results:** Four dimensions associated with high-risk adolescence were identified: Health-disrupting behaviors (e.g., substance use, risky sexual activity, antisocial behavior); Psychosocial and emotional vulnerabilities (e.g., depression, self-harm, family conflict, peer pressure); Digital and online risks (e.g., cyberbullying, unsafe digital interactions, excessive Internet use); Lifestyle and habitual risks (e.g., unhealthy diet, sedentary behavior, inadequate sleep). This framework highlights the multidimensional and interactive nature of adolescent risk-taking.

**Conclusion:** The proposed four-dimensional model provides a comprehensive perspective for understanding high-risk adolescence. The model highlights the need for integrated screening tools, early interventions, and multidisciplinary collaboration between families, educators, healthcare providers, and policymakers. Application of this framework can guide culturally sensitive prevention programs and support healthier adolescent development in today’s digital age.

**Keywords:** adolescence, high-risk behaviors, framework, prevention, psychosocial health

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## Enhancement and Evaluation of the Portable Manual Suction Device in the Resuscitation Kit in Prehospital Emergency Operational Units of Isfahan University of Medical Sciences

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**Background:** Providing health care services for all is essential for social development, and emergency care—particularly in the prehospital setting—constitutes perhaps the most crucial component. Airway management and maintenance are among the most important aspects of prehospital emergency care, requiring advanced skills and specialized equipment such as suction devices. Unfortunately, currently available portable suction devices are neither efficient nor suitable for prehospital emergency use. This study aimed to enhance and evaluate a portable manual suction device integrated into the resuscitation kit for operational units of the prehospital emergency system at Isfahan University of Medical Sciences in 2024, to better address airway management needs in emergency situations.

**Methods:** Existing literature and available suction devices were reviewed to identify current limitations and shortcomings. Standardized solutions for upgrading the device were proposed, and the necessary tools and components were listed and procured. The upgraded device was produced using 3D printing technology. The level of satisfaction among prehospital emergency staff regarding the new device was assessed using a validated and reliable questionnaire, and the data were analyzed descriptively with SPSS version 24.

**Results:** The upgraded suction device achieved significantly higher satisfaction scores across all dimensions—including ergonomics, ease of use, the addition of LED lights, and the functionality of the disposable bag system ( $p < 0.001$ ). Staff satisfaction was particularly high in urban and operational settings.

**Conclusion:** Findings indicate that the upgraded suction device significantly improves staff satisfaction and is more suitable for prehospital emergency conditions. The results support integrating user-centered functional improvements into the design of essential EMS equipment.

**Keywords:** Quality Improvement; Emergency Medical Services; Portable Suction Device; Manual Suction

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## Efficacy of Dexmedetomidine on Pain and Delirium After Sevoflurane Anesthesia In Children Undergoing Adenotonsillectomy: A Systematic Review

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**Background:** Adenotonsillectomy is a common pediatric surgery often associated with postoperative pain. Sevoflurane, a widely used inhalational anesthetic, may cause delirium. Dexmedetomidine appears to reduce pain and delirium after surgery in children by its analgesic and sedative effects. In our review, no comprehensive searches were found; thus, this study aims to evaluate the efficacy of dexmedetomidine on pain and delirium following sevoflurane anesthesia in children undergoing adenotonsillectomy.

**Methods:** In this systematic review, an comprehensive search with MeSH/non-MeSH terms "dexmedetomidine", "pain", "delirium", "sevoflurane", "adenotonsillectomy" and "Child" in databases PubMed, WoS, Scopus, and the Google Scholar. The initial search yielded 22 studies. Inclusion criteria were publications in English with no time Limitation. After removing duplicates 13 studies were reviewed. Ethical considerations ensured non-bias in selection-extraction and analysis, with findings reported according to PRISMA guidelines.

**Results:** The review indicated that most studies were conducted in 2019 and 2024 in China and Egypt using experimental methods. Common tools included the four-point delirium scale and the FLACC (Faces, Legs, Activity, Cry, Consolability) scale for pain assessment. The use of dexmedetomidine at doses ranging from 0.3-1 $\mu$ g/kg via intravenous infusion, intranasal administration, Intramucosal and tonsillar injection resulted in reduced pain and delirium scores after adenotonsillectomy in children anesthetized with sevoflurane. According to several clinical trials, dexmedetomidine at 0.5 $\mu$ g/kg provides superior pain relief compared to intravenous fentanyl at 2.5mg/kg and is more effective with S-Ketamine or Apotel than alone. Its use during surgery also reduces sevoflurane requirements, as indicated by two studies.

**Conclusion:** According to existing protocols, dexmedetomidine reduces pain and delirium in children after adenotonsillectomy using sevoflurane anesthesia. Future studies should establish its effects on other postoperative issues, such as nausea and vomiting.

**Keywords:** Dexmedetomidine, Pain, Delirium, Sevoflurane, Adenotonsillectomy

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## The effectiveness of artificial intelligence tools in improving nurse-patient communication in the pediatric population: a narrative review

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**Introduction:** Artificial Intelligence, commonly referred to as AI, is a field within computer science that focuses on the development of intelligent machines capable of emulating human thought processes and actions. The decision-making process in AI involves learning from the environment and the information it gathers. Moreover, the integration of AI into healthcare, marked by substantial progress over the past decade, has transformed the landscape of patient care and healthcare delivery. Increasing the quality of nurse-child communication is recognized as a critical factor in therapeutic messaging. This study was designed to investigate the effectiveness of artificial intelligence (AI) tools in optimizing this tool.

**Methods:** This narrative review was conducted using the databases PubMed, Web of Science, Scopus, and Google Scholar, with the following keywords. 28 articles were extracted. Studies before 2015, in languages other than English and Persian, and in the absence of full text, were exclusion criteria for the study. After applying the exclusion criteria, 11 articles were excluded, and 19 studies were selected for the sample size.

**Results:** Three tools have been studied in the field of child care: educational chatbots (30% reduction in children's anxiety), AI-based emotion recognition tools (face/voice analysis) (89% accuracy in detecting pain in non-verbal children), and social robots (NAO) as communication interfaces (40% reduction in children's resistance to medical procedures). Also, personalization of communication content with AI has increased children's understanding of the treatment process by 50%, and AI-based content generation tools (such as generating therapeutic stories) have improved child participation. Challenges in using these tools include the increased workload of nurses to learn new technologies, ethical concerns about protecting children's privacy, and the replacement of human relationships with machines.

**Conclusion:** AI tools can complement the therapeutic relationship, helping nurses understand children's emotional needs and personalize care. The success of these technologies requires partnering with pediatric nurses to develop tools to better understand needs and challenges, develop ethically informed clinical protocols, and integrate AI training into pediatric nurse education programs.

**Keywords:** Artificial Intelligence, AI tools, Machine Learning, Nurse-Patient Communication, Therapeutic Communication, Pediatrics, Child Health, Hospitalized Children.

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## Preserving Iran's Demographic Vitality: Challenges and Strategies for Promoting Childbearing and a Youthful Population

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**Background:** In recent decades, one of the major challenges faced by societies, particularly in developing countries like Iran, is the declining fertility rate and the shift toward an aging population. A youthful population serves as a dynamic and productive workforce, playing a pivotal role in innovation, economic growth, and national strength. Childbearing, as the cornerstone of maintaining population structure, is influenced by social, economic, and cultural factors. According to reports, Iran has a golden opportunity to rejuvenate its population by 2025. However, the rising age of marriage and childbearing (an average of 32 years for men and 27.5 for women) and a growing preference for single-child families pose serious threats to demographic structure. This not only endangers cultural and social continuity but also risks economic crises, such as labor shortages and increased costs of aging populations.

**Methods:** This study employs a library-based research approach. Sources include academic articles, official reports from credible platforms such as Khamenei.ir, ISNA, IRNA, and TASNIM, data from the Statistical Center of Iran, and population policy documents. A systematic literature review from 2011 to 2025 was conducted, focusing on keywords such as "youthful population," "childbearing," and "population structure preservation." Over 50 sources were analyzed to identify factors, challenges, and policies.

**Results:** Findings indicate that social factors, including economic, employment, welfare, and cultural barriers, are the primary obstacles to childbearing. Over 50% of couples show reluctance to have children, while 40% are willing but face barriers. Incentive policies have shifted from restrictive to supportive measures but have had limited success. Iran's demographic structure is in transition, and without intervention, the youth population will significantly decline by 2046. Opportunities, such as the current reproductive-age population, exist, but economic crises hinder progress.

**Conclusion:** Preserving population structure requires more comprehensive policies, including financial, cultural, and educational support. A youthful population is key to sustainable development, and without increased fertility rates, Iran faces long-term crises. Emphasizing family-oriented policies and removing barriers can reverse this trend.

**Keywords:** Youthful population, Childbearing, Demographic Structure, Incentive Policies, Economic Challenges, Iran.

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## The effect of nutritional supplements on psychological symptoms of premenstrual syndrome in women of reproductive age: a review study

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**Background:** Premenstrual syndrome (PMS) can lead to functional impairment, reduced quality of life, and reduced work productivity. Despite the availability of medical treatment options, effects of Dietary supplements and nutritional interventions for PMS are limited. Objective: This review examined the impact of nutritional interventions on psychological symptoms of PMS.

**Method and Materials:** The present study used articles indexed in Pubmed, Science Direct, Iranmedex, Google Scholar, EMBASE, Scopud, and SID databases. In this review, the available evidence on the association between dietary supplements and psychological symptoms of premenstrual syndrome in women of reproductive age was studied.

**Results:** Treatment with vitamin B1, calcium, and zinc consistently had significant positive effects on PMS psychological symptoms. There was insufficient evidence to support the impact of vitamin B1, vitamin D, whole grain carbohydrates, soy isoflavones, dietary fatty acids, magnesium, multivitamin supplements, or specific PMS diets.

**Conclusion:** There is evidence to support the use of nutritional interventions to improve psychological symptoms of PMS. However, further research using consistent protocols, procedures to minimize the risk of bias, intention-to-treat analyses, and clearer reporting is needed to provide definitive nutritional recommendations to improve psychological outcomes associated with PMS.

**Keywords:** Dietary supplements, premenstrual syndrome, mental health.

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### From surrender to transformation: The moderating effect of mindfulness on health information behavior of MS patients.

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**Background:** Multiple Sclerosis (MS) is a chronic autoimmune disease impacting patients' overall health. Mindfulness, as an educational and training approach, may improve mental health and quality of life by increasing awareness of stress responses and life challenges. This study investigates the effect of mindfulness moderation on health information behavior in MS patients.

**Methods:** An experimental research design was implemented to address the study objectives. MS patients were sampled and randomly assigned to experimental and control groups. The experimental group received mindfulness training exercises, while the control group did not receive any complementary intervention. Health information behavior was assessed in both groups before and after the intervention.

**Results:** The study found that mindfulness moderation significantly improved health information behavior among MS patients. Additionally, positive changes were observed in measures of uncertainty, information overload, information anxiety, and cyberchondria in the experimental group.

**Conclusion:** Mindfulness moderation positively influences health information behavior and mental health outcomes in MS patients, highlighting its importance in disease management and quality of life improvement. These findings support the development of new intervention programs using mindfulness to enhance mental health literacy and overall health in chronic disease populations.

**Keywords:** Multiple Sclerosis, Mindfulness Moderation, Health Information Behavior, Mental Health Literacy, Chronic Disease Management, Cyberchondria, Information Anxiety, Quality of Life

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## Investigating the effect of training the standards of the process of caring for transplanted organs during surgery on the knowledge and self-efficacy of the operating room personnel

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**Background:** Organ transplantation, a critical intervention for end-stage organ failure, relies on precise intraoperative care by operating room personnel to ensure organ viability. In Iran, despite significant transplant activity, knowledge and self-efficacy gaps among surgical staff persist, risking complications. This study evaluated the effect of a training program on the knowledge and self-efficacy of intraoperative nurses in the standard preservation of transplantable organs.

**Methods:** A quasi-experimental, single-group pre-test post-test design was conducted at Al-Zahra and Khorshid hospitals in Isfahan, Iran, from July to October 2024. Forty-nine surgical technologists and nurses participated in two one-hour educational sessions covering general and organ-specific preservation care standards. Knowledge was assessed via a 20-item multiple-choice test, and self-efficacy was evaluated via a 12-item Likert-scale questionnaire. Data were collected at baseline, immediately post-intervention, and one-month follow-up, and analyzed using repeated-measures ANOVA and Friedman tests ( $p < 0.05$ ).

**Results:** Participants showed knowledge improvement, with mean scores rising from  $4.91 \pm 2.09$  (24.55%) pre-intervention to  $16.36 \pm 1.67$  (81.7%) post-intervention ( $p < 0.001$ ), slightly declining to  $16.06 \pm 1.77$  (80.3%) at one month ( $p = 0.001$ ). Self-efficacy scores increased from  $31.65 \pm 11.35$  (moderate) to  $52.85 \pm 4.55$  (strong) post-intervention ( $p < 0.001$ ), with a minor reduction to  $52.57 \pm 4.63$  at follow-up ( $p = 0.01$ ).

**Conclusion:** Standardized training significantly enhanced personnel's knowledge and self-efficacy, with sustained effects at one month. These findings highlight the value of structured education in improving clinical competence, potentially optimizing patient outcomes in transplant surgery.

**Keywords:** Organ transplantation, intraoperative care, training, knowledge, self-efficacy

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## Developmental Disorders Of The Human Fetal Nervous System Due To Exposure To Threatening Biological Agents: A Systematic Review

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**Background and Aim:** Disorders of fetal nervous system development are recognized as significant effects stemming from interactions with hazardous biological factors, especially during critical phases of pregnancy. Pathogenic factors (viruses, bacteria, and biological toxins) can enter the fetus's body through the placenta and directly or indirectly impact the developing brain tissues, or they may have indirect effects through the mother's immune responses. This study is designed to systematically analyze scientific findings regarding the effects of hazardous biological factors on fetal neurodevelopment.

**Materials and Methods:** A literature search was conducted in the PubMed, Scopus, and Web of Science databases within the timeframe of 2000 to 2025. Out of a total of 352 identified articles, 32 were selected for final analysis after screening.

**Results:** The results of this study indicated that viruses such as Zika virus, Nipah virus, Dengue fever virus, human cytomegalovirus (HCMV), severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2), CoViD-19, and herpes virus, as well as bacterial and parasitic agents like Listeria monocytogenes, Escherichia coli (E. Coli), Streptococcus, and Toxoplasma gondii, are primarily associated with structural and functional disorders of the fetal brain. Additionally, toxins such as botulinum and lipopolysaccharide cause neuronal damage by activating processes beyond the mother's immune system response.

**Conclusion:** The findings emphasize the importance of prevention, monitoring, and screening strategies during pregnancy to reduce the risk of fetal nervous system development disorders and highlight the need for further research in this area.

**Keywords:** Bioterrorism, Neurodevelopment, Embryology, Zika virus, Nipah virus, Cytomegalovirus, Neuropathy, Biological threat agents.

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## Nutrition of the elderly during menopause: A review study

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**Background:** In recent years, growing attention has been devoted to understanding how modifiable lifestyle factors, particularly diet, influence health outcomes in postmenopausal women. Among the various aspects of health promotion and lifestyle adaptation to menopause, dietary habits are among the modifiable ones that affect women's longevity and quality of life.

**Methods:** In this review, we discuss the available evidence on the association between dietary patterns and clinical symptoms in postmenopausal women, such as bone mass and cardiovascular disease risk markers.

**Results:** Available evidence suggests that low-fat, plant-based diets have beneficial effects in menopause, but further studies are needed to confirm these results in postmenopausal women. The Mediterranean dietary pattern, along with other healthy habits, may contribute to the primary prevention of bone, metabolic, and cardiovascular diseases during menopause. This diet includes the use of healthy foods that have anti-inflammatory and antioxidant properties and is associated with small but significant reductions in blood pressure, fat mass, and improved cholesterol levels.

**Conclusion:** Effects of nutritional interventions should be evaluated over a longer period by assessing outcomes such as bone fractures, diabetes, and coronary ischemia. Additionally, understanding the long-term impact on quality of life and healthcare burden is crucial for developing public health strategies.

**Keywords:** menopause; nutrition; cardiovascular risk

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## Analysis of the Role of Clinical Policymaking in the Development of Nurses' Professional Commitment

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**Background:** Professional commitment is recognized as one of the most important factors influencing nurses' competence and the demonstration of professional behaviors. Its development requires coordinated efforts and collaboration among educational and clinical managers and policymakers to create a supportive and enabling professional environment. Accordingly, this study aimed to analyze the role of clinical policymaking in development of nurses' professional commitment.

**Methods:** This qualitative study employed a grounded theory approach. Data were collected through semi-structured interviews with 20 nursing experts holding managerial positions, selected purposefully in 2021. The data were analyzed using content analysis and open, axial, and selective coding with MAXQDA 2020 software.

**Results:** Through content analysis and coding, key dimensions of clinical policymaking were identified, including the development of decision-making skills, participation in group activities, adaptability and acceptance of criticism, enhancement of internal control, professional autonomy, self-efficacy and expectation of positive outcomes, ability to cope with challenges, and continuous development of knowledge and skills. Each of these was confirmed as a core component in fostering professional commitment.

**Conclusion:** Health system managers and policymakers should, with attention to these key dimensions, establish an appropriate organizational framework to support nurses' professional development ultimately improving the quality of clinical care and the overall efficiency of the healthcare system.

**Keywords:** Clinical policymaking, Professional commitment, Development, Nurses.

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## A review of the effect of self-care training on health promoting behaviors with a telenursing approach in patients with MS

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**Background:** Multiple sclerosis is a chronic inflammatory disease of the central nervous system and is considered the third leading cause of disability among adults. The first step in helping patients better manage the disease is to implement self-care behaviors. Telenursing or Remote Nursing is a method to increase support in people's self-care. The present study aimed to review the effect of self-care education on health-promoting behaviors with a remote nursing approach in multiple sclerosis patients.

**Methods:** The information from this review article was obtained by searching for specific keywords in the Magiran, Google Scholar, and Pub Med databases.

**Results:** The chronic nature of multiple sclerosis and its long-term problems indicate the need for health-promoting interventions. Studies have shown that health-promoting self-care behaviors and telenursing improve lifestyle-related behaviors, increase self-care motivation, reduce costs, facilitate access to care, reduce readmissions, improve quality of life, increase resilience and sense of coherence, and promote health. Evidence also indicates that the most important issue in promoting patients' health is related to maintaining their independence in daily activities and their high cognitive function.

**Conclusion:** Health-promoting behaviors have a potential impact on improving patients' health. Considering the high prevalence of this disease in Iran and the lack of awareness of patients about self-care behaviors and their impact on health, health care providers should provide solutions to create self-care programs. Given the unlimited nature of time and space in telenursing, it is recommended that self-care education be provided in this way.

**Keywords:** Self-care, Multiple Sclerosis, Telenursing, Health Promotion

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## Investigating the Status of Spiritual Health Among Nursing Students in Iran

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**Background:** Spiritual health is of vital importance for Iranian nursing students, especially with psychological challenges, academic pressure, and early exposure to patient suffering and death. The lack of studies in this field makes it necessary to assess the spiritual health status of these students and identify factors affecting it to support them and improve future care.

**Methods:** This cross-sectional study was conducted in 2023 and included all nursing students in universities of medical sciences across Iran. 1276 students were selected using multi-stage cluster sampling with probability proportional to size (PPS). After obtaining ethical approvals from the universities and the relevant committee, questionnaires were distributed in designated classrooms or environments. The research conditions (including objectives, confidentiality of information, and voluntary participation) were clearly explained, and written informed consent was obtained. Participants completed a self-administered questionnaire containing the Spiritual Health Scale (SHS) and demographic characteristics.

**Results:** All participants were women with an average age of 21 years, the majority of whom reported religious adherence and participation in religious activities. The level of spiritual health of this group was moderate, and analysis of the relationships between variables showed that (connection with others) had the strongest role and (dependence on religion) had the weakest effect. Also, factors such as: age, level of education, being native, level of religious devotion, and family atmosphere were able to predict spiritual health.

**Conclusion:** The study of the spiritual health of Iranian nursing students, as future leaders of the health system and providers of comprehensive care, emphasizes the need for educators to pay attention. Awareness of the impact of spiritual health on students and the development of spiritual-religious educational programs are two key strategies for improving their ability to provide spiritual care to patients.

**Keywords:** Spiritual health, nursing students, Iran

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## Investigating the Effect of Preoperative Education on Patients' Recovery: A Narrative Review

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**Background:** Surgery, as a common therapeutic approach in modern medicine, is associated not only with physical outcomes but also with psychological responses such as anxiety. Preoperative anxiety can adversely affect patients' recovery. Preoperative patient education, combined with opportunities for questions and answers, has been recognized as an effective intervention to modify beliefs and enhance awareness. Accordingly, the present study aimed to investigate the impact of preoperative education on recovery and related surgical outcomes.

**Methods:** This narrative review was conducted through a comprehensive search of articles published between 2020 and 2025. The search covered multiple databases, including PubMed, Science Direct, SID, Magiran, and Google Scholar, using a combination of relevant Persian and English keywords. Articles that fulfilled the predefined inclusion criteria were selected for analysis.

**Results:** Fifteen studies were reviewed in this research. Findings indicated that preoperative anxiety significantly affects clinical outcomes, potentially leading to immune suppression, increased infection risk, postoperative pain, and higher healthcare costs. Preoperative patient education, as an effective intervention, was shown to modify beliefs, enhance awareness, prepare patients for surgery, improve postoperative care, accelerate recovery, and facilitate a faster return to daily activities.

**Conclusion:** The study results indicate that preoperative education, within the framework of standard protocols, improves patient outcomes, reducing anxiety and hospital stay. Therefore, integrating such education is essential, although further research is needed to assess its long-term effects.

**Keywords:** Preoperative Education, Patient Recovery, Postoperative Care, Surgical Patients

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## The role of nurses in infertility prevention and the promotion of reproductive health

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**Background:** Reproductive health is a crucial component of public health and directly affects the quality of life of women, families, and society. Infertility, defined as the inability of couples to conceive after one year or more of unprotected sexual intercourse, has significant psychological, social, and economic consequences. Raising awareness about infertility risk factors and promoting reproductive health is essential. Nurses play a key role in reducing infertility prevalence and improving fertility outcomes through education, counseling, and preventive interventions.

**Methods:** This short review was conducted by searching relevant literature in PubMed, Google Scholar, and ScienceDirect from 2004 to 2024.

**Results:** Nurses can enhance awareness and preventive behaviors regarding fertility, reduce psychological and social barriers related to infertility, and improve couples' quality of life through individualized and group education, preconception counseling, and psychological support. Nursing interventions include lifestyle modification, education on safe sexual behaviors, stress management, and physical and psychological preparation for pregnancy. Active involvement of nurses in all stages of prevention and monitoring contributes to improving community reproductive health.

**Discussion and Conclusion:** Individualized and group education, utilization of modern technologies, and enhancement of nurses' scientific and practical skills maximize the impact of nursing care in the field of fertility. Timely interventions and psychological support by nurses play a vital role in reducing the burden of infertility, improving quality of life, and increasing couples' chances of successful conception.

**Keywords:** Reproductive health, Nursing, Infertility prevention.

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## Factors affecting nursing shortages in hospitals: A systematic review study

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**Background:** Nursing workforce has a significant impact on the quality of service delivery. This study aimed to determine the factors that affect the nursing workforce shortage and their impact on nurses.

**Methods:** A systematic review design was used for this study. Using the Cochrane Library guidelines, five electronic databases (Research 4life—PubMed/Medline, Scopus, Embase, CINAHL) were systematically searched from 2010 to 2025. The remaining articles with relevant information were presented in a data extraction sheet for further thematic analysis. The case report flow chart for systematic reviews and meta-analyses was adopted and used. Studies published from 2010 to 2025 and in English were reviewed and included in the systematic review.

**Results:** Four issues were identified as factors influencing the nursing workforce shortage, including policy and planning barriers, training and registration barriers, factors causing nursing staff turnover, and nurse stress and burnout. The nursing workforce shortage is a global challenge that has its roots in multiple causes, including individual, educational, organizational, and managerial factors, and policy.

**Conclusion:** Considering the important impact of the ratio and number of nurses to hospital beds, it is suggested that this issue be included in the country's twenty-year vision document and an important mission of every hospital.

**Keywords:** Nurse burnout, nurse retention, nurse shortage, nursing workforce, systematic review

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## Social Determinants Linking Socioeconomic Status and Healthy Lifestyle with Early- and Late-Onset Dementia among Older Adults with Diabetes

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**Background:** Dementia is a multifactorial condition disproportionately affecting older adults, particularly those with chronic diseases such as type 2 diabetes. Socioeconomic status (SES) and lifestyle are key modifiable factors influencing dementia onset and progression. Evidence suggests that healthy lifestyle behaviors can mitigate SES-related health disparities, yet their effect on diabetes-related dementia and the interaction between SES and lifestyle remains unclear.

**Methods:** This systematic review followed PICO criteria and the PRISMA checklist. Comprehensive searches from 2019 to 2025 were conducted in PubMed, SCOPUS, Web of Science, SID, Magiran, and Google Scholar using relevant MeSH terms and keywords. Articles were independently screened by two researchers, resulting in nine studies included from an initial 381.

**Results:** High SES was consistently linked to lower risks of all-cause dementia, Alzheimer's disease, and vascular dementia, even after adjusting for lifestyle. Low SES was associated with higher hazard ratios (1.25–1.68). Adherence to 4–5 healthy lifestyle factors—including non-smoking, regular physical activity, balanced diet, adequate sleep, and moderate alcohol use—reduced Alzheimer's risk by up to 60%. Protective effects were stronger in high-SES individuals, while lifestyle factors accounted for  $\leq 7.8\%$  of SES-related disparities. Neuroimaging showed greater hippocampal volumes in those with high SES and healthier lifestyles.

**Conclusion:** Dementia prevention in diabetic elderly requires dual strategies: promoting healthy lifestyle behaviors and addressing structural SES inequalities. Higher SES facilitates healthier choices and amplifies their cognitive benefits, but lifestyle interventions alone cannot fully offset socioeconomic disadvantage. Effective public health approaches must empower individuals while reshaping social and economic environments to reduce dementia burden equitably.

**Keywords:** Social Determinants of Health, Dementia, and Older Adults with Diabetes

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## Guided Imagery via Tele-Nursing: Evaluating the Effect on Death Anxiety and Cognitive Impairment in Patients with Cancer – A Randomized Clinical Trial

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**Introduction:** Cancer is one of the chronic diseases with a high mortality rate, affecting multiple aspects of patients' lives. Individuals diagnosed with cancer require support in various dimensions. Due to the nature of the disease, death anxiety is common among these patients. Furthermore, given the frequent use of pharmacological and therapeutic interventions such as chemotherapy, the risk of developing cognitive impairments, including cognitive failure, is considerable. Nowadays, with technological advancements and improved online communication tools, the implementation of simple, feasible interventions has gained importance. Guided imagery is one such relaxation technique that can be delivered online or via audio files, with follow-up and implementation facilitated through tele-nursing. Its applicability in various settings enhances its potential utility. Therefore, this study aimed to determine the effect of guided imagery delivered through tele-nursing on death anxiety and cognitive impairment in patients with cancer.

**Methods:** In this randomized clinical trial, 70 patients with cancer were selected using a convenience sampling method and randomly assigned into intervention and control groups through block randomization. Data were collected using a demographic information form, the Templer Death Anxiety Scale, and the Broadbent Cognitive Failures Questionnaire. The intervention group received guided imagery via a pre-recorded audio file through a virtual platform over eight sessions. The control group received a similar audio recording without any therapeutic content. Data were analyzed using SPSS software version 16.

**Results:** Following the intervention, cognitive failure and death anxiety significantly decreased in the intervention group ( $P < 0.05$ ), whereas no statistically significant changes were observed in the control group ( $P > 0.05$ ). Moreover, significant reductions were noted in the subscales of distraction and blunders within the Cognitive Failures Questionnaire ( $P < 0.05$ ). However, reductions in the subscales related to memory problems and failure to recall names were not statistically significant ( $P > 0.05$ ).

**Conclusion:** Considering the positive impact of this intervention and the high prevalence of cancer, as well as its high feasibility, psychiatric nurses and other relevant professionals can utilize the findings of this study to promote the health of patients with cancer.

**Keywords:** Cancer, Guided Imagery, Cognitive Failure, Cognitive Impairment, Death Anxiety, Tele-nursing

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## Effectiveness of Non-Pharmacological Techniques: A Way to Comfort and Reduce Children's Pain – A Review Study

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**Background:** Managing pain and anxiety in hospitalized children is one of the main medical challenges. Recently, non-pharmacological methods have emerged as novel and safe approaches. These methods reduce drug-related side effects and improve the therapeutic experience for children. This study aims to evaluate the effectiveness of various non-drug techniques in reducing pain and anxiety, focusing on their potential as effective substitutes.

**Methods:** This systematic review analyzed databases like Scopus, Medline, Cinahl, and PubMed from 2020 to 2025. Searches were conducted using keywords like "pain," "anxiety," and "child." An initial 579 studies were identified, and after evaluation, 18 articles (16 primary and 2 review articles) were selected based on relevance, scientific quality, and publication date. Data analysis followed specific criteria to assess the effectiveness of non-drug methods in reducing pain and anxiety in children.

**Results:** The review of the selected 18 studies revealed techniques for reducing children's pain and anxiety, such as cold vibration (Buzzy), virtual reality, toys and humanoid robots, digital games, and tablet use. Among these, cold vibration and virtual reality were most effective, recognized as tools for pain reduction in 50% of the studies. Tablets, while not significantly effective for pain reduction, helped reduce psychological distress in children. Toys and humanoid robots also showed positive effects in reducing anxiety during treatment. These findings highlight the high potential of non-drug methods in managing children's pain and anxiety.

**Conclusion:** Considering the fewer side effects of non-drug techniques, children's sensitivity to medication, cost-effectiveness, and high efficiency, these methods are preferred.

**Keywords:** Pain, Anxiety, Children

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## The Role of Nurses in the Development of Medical Waste Management in Hospitals

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**Background:** Nurses play a key role in the management of medical waste. This study aimed to examine how nurses develop medical waste management systems in hospitals.

**Methods:** This qualitative research was conducted based on the theoretical frameworks of complexity theory and grounded theory. Participants included 32 nurses from a public hospital in Tehran. Data were collected through semi-structured interviews.

**Results:** Nurses influence medical waste management in multiple dimensions. Equipment shortages and high workload were identified as factors affecting personnel decision-making, thereby increasing the risk of improper waste disposal. A lack of knowledge in this area also impacts nurses' performance. Nevertheless, nurses value actions related to hazardous waste.

**Conclusion:** Nurses consider themselves participants in the medical waste management process and understand the necessity of developing systemic awareness for sustainable performance.

**Keywords:** Waste management, nursing, nursing care, hospitals, sustainable development

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## The Vital Role of Exercise in Cancer Prevention, Reducing Risk of Incidence and Improving Treatment Outcomes: A Review Study

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**Background:** Exercise is a well-known factor in reducing the risk of cancer and also contributes to improving treatment outcomes in patients who have already been diagnosed. Individuals who engage in exercise after a cancer diagnosis experience fewer treatment side effects, lower drug toxicities, reduced likelihood of disease recurrence, and increased survival rates. This review examines the scientific data and biochemical processes that explain these potential benefits.

**Methods:** To prepare this review, the databases PubMed, Embase, Medline, and Cochrane were searched to find articles related to the impact of exercise and physical activity on cancer. The keywords used included physical activity, exercise, and cancer, up to February 2021. Background research necessary for the international INTERVAL-GAP4 study (an exercise intervention study in men with prostate cancer) was also referenced, and the sources of reputable articles in this field were carefully reviewed to ensure that clinical studies were not omitted. Ultimately, 188 articles were included in this review.

**Results:** Areas of agreement indicate that exercise programs reduce many complications and risks associated with cancer, particularly thromboembolism, fatigue, weight gain, arthralgia (joint pain), cognitive impairments, and depression. The discussed areas include molecular changes and biomarkers resulting from exercise, demonstrating that physical activity leads to beneficial alterations in insulin-related pathways, decreases in inflammation and serum estrogen levels, and enhancements in oxidative, immune, and cellular repair pathways. However, the existing evidence remains preliminary and points to areas of growth. Although there is a better understanding of the timing, intensity, and challenges of prehabilitation exercise programs, alongside adjunct therapy and rehabilitation, the implementation of these programs is still inconsistent.

**Conclusion:** Stronger clinical data are needed to establish a causal relationship between exercise and overall and cancer-specific survival. These studies are ongoing. Additionally, research evaluating the most cost-effective methods for integrating prehabilitation programs alongside treatment and rehabilitation into standard care may be beneficial for funding organizations and health strategists.

**Keywords:** exercise, cancer prevention, post-cancer survival

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## Ethical Challenges and Implementation Strategies for AI-Based Self-Assessment in Healthcare: An Evidence-Based Review

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**Background:** Artificial intelligence (AI)-based self-assessment tools, including large language models (LLMs), are increasingly used by patients to interpret symptoms before consulting healthcare professionals. While these technologies may improve accessibility, patient empowerment, and system efficiency, they also raise concerns about diagnostic accuracy, ethical integrity, and health equity.

**Methods:** A narrative review was conducted using PubMed, Scopus, and Web of Science databases (2020–2025) with keywords “artificial intelligence,” “self-assessment,” “symptom checker,” “ethics,” “triage accuracy,” and “health equity.” Peer-reviewed studies, systematic reviews, and relevant guidelines were included. Thematic synthesis was used to group evidence into domains of diagnostic performance, ethical implications, equity concerns, and implementation frameworks.

**Results:** AI-assisted triage systems demonstrated moderate diagnostic accuracy (57.8–76.0%), comparable to or exceeding layperson judgment—but showed limitations in complex or atypical presentations. Algorithmic bias was reported in systems trained on datasets underrepresenting certain populations, leading to inequitable recommendations. Users with low health literacy or limited language proficiency were at greater risk of misinterpretation. Studies suggested that integration with telemedicine can expedite care for high-risk cases, but false positives may burden emergency services. Key ethical themes identified were transparency, accountability, cultural inclusivity, and informed patient use.

**Discussion:** Balancing the benefits of AI-enabled self-assessment with the risks of misinformation and inequity requires proactive ethical governance. Strategies include prospective validation across diverse populations, real-time performance monitoring, culturally adaptive user interfaces, and AI literacy education for both healthcare providers and patients. Multidisciplinary collaboration, spanning clinicians, data scientists, ethicists, and policymakers, is essential to establish trust and ensure patient safety.

**Conclusion:** AI-based self-assessment tools have the potential to enhance healthcare access and efficiency, but ethical and equity considerations must guide their development and deployment. Regulatory oversight, inclusive design, and continuous evaluation are critical to maximizing benefits while minimizing harm.

**Keywords:** Artificial Intelligence, Self-Assessment, Triage, Ethics, Medical, Health Equity

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## Barriers to implementing spiritual care from the perspective of nurses working in the emergency department of Lorestan University of Medical Sciences educational centers

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**Background:** Spiritual care, as an essential component of holistic nursing care, plays a significant role in promoting the physical and mental health of patients. However, its effective implementation in emergency departments is accompanied by extensive challenges due to time pressure and systemic limitations. This study aimed to identify barriers to implementing spiritual care from the perspective of nurses working in the emergency department of Lorestan University of Medical Sciences in 2023.

**Methods:** This study was conducted on 84 nurses working in the emergency department of Lorestan University of Medical Sciences in 2023 who were selected using convenience sampling. Data were collected using Adib and Haj Bagheri's 2016 Barriers to Providing Spiritual Care Questionnaire (containing 30 items in three dimensions: individual, organizational, and cultural with confirmed reliability and validity). Data analysis was performed using SPSS version 23 software and descriptive (frequency, percentage, mean) and inferential (t-tests and ANOVA) statistics.

**Results:** According to the results, the most common barriers from the perspective of nurses were: lack of sufficient time due to high workload due to staff shortage (74.5%), lack of specialized training in spiritual care (70.2%), lack of organizational support and necessary resources (63.6%), and communication challenges due to patients' cultural-religious diversity (55.4%).

**Conclusion:** The findings of this study showed that the barriers to implementing spiritual care in the emergency department are mainly rooted in organizational structures and staff shortages and lack of practical training. To overcome these challenges, it is necessary to design recruitment approaches and specialized training programs, consider appropriate time for providing spiritual care, and put supportive policies on the agenda by managers to facilitate this service. Paying attention to these dimensions can significantly improve the quality of patient care in emergency settings.

**Keywords:** Spiritual care, emergency nurses, implementation barriers

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## Evaluating the Impact of Internet and Mobile App Interventions on Family Caregivers of Elderly Patients with Chronic Diseases: A Systematic Review

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**Background:** The rising prevalence of chronic diseases among older adults increases physical and emotional burdens on family caregivers. This review examines the impact of internet and mobile app interventions on family caregivers of elderly patients with chronic diseases.

**Methods:** We conducted a systematic search of studies published between 2015 and 2025 across PubMed, Scopus, EMBASE, Web of Science, CINAHL, and the Cochrane Library, following PRISMA guidelines. Search terms included keywords such as "Caregivers", "Family", "Chronic Disease", "Internet-Based Intervention", and "Mobile Applications". Eligible studies were peer-reviewed original research focusing on family caregivers of elderly patients with chronic diseases using e-health interventions. Exclusion criteria included duplicates, irrelevant studies, non-English publications, and articles without full text. Two researchers independently screened articles and excluded low-quality or irrelevant studies. Risk of bias was assessed using the Cochrane Handbook and JBI Critical Appraisal Tools. Extracted data covered study design, target population, intervention type, comparisons, outcomes, and key results.

**Results:** Of 695 articles, 23 met inclusion criteria. Internet-based and mobile app interventions offered educational, psychological, and practical support, improving communication, problem-solving, and symptom management. Reported benefits included reduced burden, stress, anxiety, and depression, alongside enhanced confidence, coping, and social support. Many interventions were user-friendly but required technical assistance. Barriers included limited technology familiarity, usability challenges, and internet access issues.

**Conclusion:** Internet-based and mobile app interventions improve family caregivers' well-being by addressing emotional, informational, and practical needs; however, further research is needed to optimize effectiveness and tailor support.

**Keywords:** Chronic Disease, Internet-Based Intervention, Mobile Applications, Caregivers, mHealth

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## Evaluation of the Efficacy of Multilevel Interventions in Preventing Risky Behaviors Among Iranian Youth: A Systematic Review of Studies from 2016-2024

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**Background:** Risk behaviors (drug use, violence, unsafe sexual behaviors, self-harm) among Iranian youth are a major public health concern. Complex factors including peer pressure, mental health problems (depression, anxiety), easy access to drugs, generational gap, and the effects of cyberspace play a role in the prevalence of these behaviors. Recent statistics (Report of the Anti-Drug Headquarters, Ministry of Health) indicate a worrying increase in these behaviors, especially the use of new stimulants and self-harm, in the 15-29 age group, which highlights the need for targeted and evidence-based interventions.

**Methods:** This systematic review is based on the analysis of studies published between 2016-2024 in the scientific databases PubMed, ScienceDirect, Google Scholar, Medline, Scopus, SID, Magiran, using the keywords: primary prevention, early intervention, high-risk behaviors, Iranian youth, mental health, life skills, resilience, school-based programs, health technology, community participation. A total of 250 articles were reviewed in the field of "Evaluating the Effectiveness of Multilevel Interventions in Preventing Risky Behaviors in Iranian Youth" with the mentioned keywords. The articles were evaluated in terms of title, abstract, and full text, and after removing duplicates and irrelevant items, 85 articles related to the research objective were selected and reviewed.

**Results:** The evidence presented shows that early, comprehensive, and culturally-based interventions can significantly:

- Reduce the incidence of risky behaviors (up to 30-50% in successful programs).
- Improve youth awareness and attitudes toward the consequences of risky behaviors.
- Strengthen healthy coping skills and responsible decision-making.
- Facilitate access to support and treatment services.
- Technology-based programs have shown high effectiveness, especially in attracting youth and providing confidential services.

**Conclusion:** Effectively dealing with youth risky behaviors requires national determination, a Preventive (primary, secondary, tertiary), and evidence-based and culturally appropriate interventions. Integrating psychosocial, educational, family, community-based, and technological strategies into integrated and sustainable programs is the key to success. Investing in indigenous research, training professionals, and strengthening interagency collaborations are critical to designing and implementing these interventions.

**Keywords:** Primary prevention, early intervention, high-risk behaviors, Iranian youth, mental health, life skills, resilience, school-based programs, health technology, community participation.

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## The COVID-19 Pandemic: A Global Classroom for Nurses - Lessons from the Heart of the Crisis

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**Background:** The COVID-19 pandemic confronted health systems worldwide with an unprecedented crisis, exerting immense pressure on all components, particularly nurses. Despite its adverse consequences, this global challenge created opportunities for learning, revisiting health policies, and enhancing the capacities of human resources in healthcare systems. This review article explores key lessons learned during the COVID-19 pandemic with a particular focus on the roles and experiences of nurses. The main themes include structural flexibility, occupational resilience, the advancement of technology-based education, mental health of healthcare workers, and transformations in health policy-making.

### Methods: A Field-Based Review Study and Literature Review

**Results:** The review revealed that the COVID-19 pandemic highlighted both the vulnerabilities and strengths of health systems worldwide. Nurses played a pivotal frontline role, demonstrating resilience, adaptability, and innovation under unprecedented pressure. Key lessons included the importance of structured psychological support, expansion of digital health and tele-education, adoption of flexible workforce models, and the necessity of evidence-based leadership. Furthermore, the pandemic emphasized the need for policy reforms in staffing, resource allocation, and nurse well-being to ensure better preparedness for future health crises.

**Conclusion:** The COVID-19 pandemic was a major test for health systems, exposing both strengths and weaknesses. Nurses, as the frontline of care, demonstrated sacrifice, resilience, and creativity, gaining valuable lessons that must inform future policies, education, resources, and mental health support to better prepare for upcoming crises.

**Keywords:** COVID-19 Pandemic, Nurses, Lessons Learned

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### Adverse childhood experiences and their associated factors: A review of existing studies

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**Introduction:** Adverse childhood experiences are harms that occur directly or indirectly during childhood and adolescence and have negative effects on various aspects of health. Therefore, this review study examines adverse childhood experiences and their associated factors.

**Materials & Methods:** This narrative review examines studies conducted between 2020 and 2025. First, the researcher searched the reputable databases PubMed, Scopus, SID, and Google Scholar with key words and phrases such as; adverse childhood experiences, childhood trauma, negative experiences and their consequences, and out of the 79 articles found, after removing abstracts, review articles, duplicate articles, books, theses, and articles not in English or Persian, 25 articles were finally reviewed.

**Results:** According to the results, adverse childhood experiences are a multidimensional phenomenon and have a significant relationship with stress, depression, poverty, marital conflict, domestic violence, parental addiction, substance abuse, increased risk of suicide in adulthood, limited access to health services, emotional or physical neglect, insecure attachment, reduced resilience, and reduced desire to marry and have children. The presence of social support, economic development, higher education, positive parenting education, and healthy emotional communication have been reported as protective factors against these outcomes.

**Conclusions:** Adverse childhood experiences are influenced by various factors and their consequences continue into adulthood. Preventive interventions including healthy parenting education, psychological support for children and families, improving life skills, and providing access to social and health services can reduce its negative consequences in adults.

**Key words:** adverse childhood experiences, childhood trauma, negative experiences.

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### Exploring the Factors behind Single-Child in Iranian Families: A Qualitative Study

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**Background:** Single-child families are an emerging demographic phenomenon in Iran, reflecting shifts in social, economic, and cultural conditions. Understanding the underlying reasons for parents' decision to have only one child is essential for addressing declining fertility trends. This study aimed to explore the determinants of single childhood among families in western Iran.

**Methods:** A qualitative study using a conventional content analysis approach was conducted in Lorestan Province, western Iran. Participants included parents with one child who did not intend to have additional children, along with key informants familiar with family and fertility issues. Data were collected through semi-structured interviews with 29 couples and seven key informants, selected using purposive and snowball sampling until data saturation was achieved. Data analysis followed Graneheim and Lundman's method, and trustworthiness was ensured through Guba and Lincoln's criteria.

**Results:** Data analysis yielded 205 initial codes, 16 subcategories, and four main categories: (1) Past negative experiences (maternal and child health concerns, adverse experiences with the first child); (2) Weak support systems (limited family and social support, marital dissatisfaction); (3) Modern anti-childbearing attitudes (individualism, normalization of single-child families, changing gender roles, declining religious motivations, idealistic parenting, and access to contraception); and (4) Inability to overcome challenges (financial strain, inadequate housing, social hopelessness, and lost opportunities for re-parenting).

**Conclusion:** Single childhood results from interconnected individual, familial, and societal factors. Addressing it requires multi-level interventions that enhance social support, financial stability, cultural awareness, and positive attitudes toward childbearing.

**Keywords:** Single-child, Fertility, Factors, Qualitative Study

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## Explaining the reasons for the divorce of young couples in Western Iran: a qualitative Study from the Beneficiary's point of View

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**Background:** Divorce is a major social challenge with profound consequences for individuals, families, and communities. Given its multidimensional and context-dependent nature, this study aimed to explore the underlying reasons for divorce among young couples in western Iran using a qualitative approach.

**Methods:** A qualitative study employing conventional content analysis was conducted. Participants were selected using purposive and snowball sampling, and data were gathered through semi-structured interviews until theoretical saturation was achieved. A total of 48 participants, including 16 key informants and 32 divorced individuals, took part in the study. Data were analyzed following Graneheim and Lundman's method, and the trustworthiness of findings was ensured using Guba and Lincoln's four criteria.

**Results:** The analysis produced 212 initial codes, 24 subcategories, and three overarching categories: (1) Individual factors (sexual dissatisfaction, psychological disorders, behavioral incompatibility, individualism, appearance-related issues, premarital relationship problems, substance use, and positive attitudes toward divorce); (2) Socio-cultural factors (normalization of divorce, gender-based social changes, influence of media and social networks, lack of supportive systems, poor spouse selection, economic strain, and divorce modeling); and (3) Family factors (occupational pressures, conflict with in-laws, emotional accumulation, child-related disputes, infidelity, lifestyle mismatch, violence, and poor conflict management).

**Conclusion:** Divorce among young couples is a multifaceted phenomenon shaped by individual, social, and family dynamics. Effective prevention strategies should include premarital education, family counseling, and coordinated policy interventions addressing the socio-cultural roots of marital instability.

**Keywords:** divorce, reasons, young couples, qualitative study

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## Oral Health and DMFT Index as Predictors of Cognitive Impairment in Community-Dwelling Elderly with T2D: A Cross-Sectional Study

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**Objective:** Cognitive dysfunction is a significant issue in old age and can cause many problems in older adults, especially those with diabetes. This study aimed to investigate the association between oral health status and DMFT index with cognitive dysfunction in community-dwelling older adults with T2D (type 2 diabetes).

**Methods:** This was a cross-sectional study that included 245 older people aged 60 years and older with T2D, visiting healthcare centers in north of Iran, using the cluster sampling method. Data collection tools included clinical-demographic questionnaire, the Geriatric Oral Health Assessment Index (GOHAI) and the Mini-Mental State Examination (MMSE) questionnaire. A P-value  $<.05$  was considered significant.

**Results:** The mean age of older adults in this study was  $64.86 \pm 3.99$  years. The mean and standard deviation for the DMFT index, GOHAI index and MMSE scale were  $9.39 \pm 3.83$ ,  $34.29 \pm 17.93$  and  $15.18 \pm 10.04$  respectively. The results showed statistically significant relationship between poor oral health status and the cognitive status of older adults with T2D ( $p < .001$ ). Additionally, the relationship between oral health index domains (physical function, psychosocial function and pain) and cognitive status in older adults was significant ( $p < .001$ ). Another finding indicated an inverse and significant relationship between the DMFT index and cognitive dysfunction in older adults ( $p < .001$ ).

**Conclusion:** Poor oral health was associated with cognitive dysfunction among the community-dwelling older adults with T2D. Given the high prevalence of T2D in older adults and the critical importance of oral and dental health for cognition, it is necessary to develop interventions to improve oral health in older adults with T2D.

**Keywords:** Oral health, Cognitive dysfunction, DMFT, T2D, Older adults

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## Work place violence and academic failure among medical students in Ardabil, Iran, 2020

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Ardabil University of Medical Sciense

**Background:** The experience of workplace violence in medical and health workers has been increasing. This study aimed to determine the workplace violence and academic failure among medical students during clinical training in Ardabil University of Medical Sciences in Iran, 2020.

**Methods and material:** A cross-sectional study designed used to investigate The statistical population of the present study consisted of all interns and trainees who are studying in the teaching hospitals of Ardabil University of Medical Sciences in the academic year 2019-20, from which 300 people were randomly selected as a statistical sample. The census form of all students who have spent at least one year in hospital fields completed a modified questionnaire on workplace violence in health settings designed by the World Health Organization with written consent.

**Results:** In the present study, 300 people were included in the study. The mean age of students was 24.94 years with a standard deviation of 2.12. Women were the dominant gender with 59.7%. Apprentices made up 51% and interns 49%. The majority of participants (84.3%) were single. Turks included the highest race with 87.7%. In our study, the rate of physical violence was 15.7% (47 people), psychological violence (verbal) was 53% (159 people), sexual violence was 1% (3 people) and racial harassment was 13% (39 people).

**Conclusion:** In this study, we concluded that the level of violence against medical students is significant and there is no specific place to report violence. There is also no specific training program to prevent and control violence.

**Keywords:** workplace violence, academic satisfaction, academic failure

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## Interdisciplinary comparison of unhealthy sexual behaviors among students of Islamic Azad University of Ardabil, 2024

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**Introductions:** Unhealthy sexual behaviors are a public health challenge during the academic period that can have long-term psychosocial and physical consequences. The aim of this study was to determine and compare interdisciplinary unhealthy sexual behaviors among students of the Islamic Azad University, Ardabil branch

**Materials & Methods:** An analytical cross-sectional study was conducted in 2023 on 384 eligible students selected through stratified cluster sampling at the Islamic Azad University of Ardabil. Data collection tools included a demographic questionnaire and a standardized questionnaire containing questions about unhealthy sexual behaviors. Data were analyzed using descriptive statistics and regression tests

**Results:** The mean age of the students was  $23.4 \pm 4.5$  years. The majority of students (90.4%) were single, and most (67.5%) lived in their parental home. In the categorization of unhealthy sexual behaviors, 41.2% of the students were in the high-risk group, and 35.4% were in the very high-risk group. The results indicated that non-medical science students had 2.05 times higher odds (1.34–3.14) of engaging in unhealthy sexual behaviors

**Conclusions:** The findings of this study show that the prevalence of unhealthy sexual behaviors varies among students across different fields of study. It seems that greater attention should be paid to university educational interventions, particularly comprehensive sexual health programs that both enhance awareness and develop coping skills and emotional regulation

**Keywords:** sexual behavior, student, public health

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## Investigation of personality types A and B in patients with cardiovascular diseases admitted to a hospital in Khorramabad, in 2020

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**Introductions:** Personality traits of an individual can affect the morbidity of cardiovascular diseases (CVDs). So far, no study has been conducted on the personality of hospitalized patients with CVDs in western Iran. In this regard, we aim to investigate the personality (type A/B) of hospitalized patients with CVDs in Khorramabad city based on demographic/clinical factors. Moradi

**Materials & Methods:** This is a descriptive cross-sectional study. Participants were 180 patients with CVDs (Mean age:  $55.44 \pm 11.94$  years) admitted to Shahid Madani Hospital in Khorramabad in 2020. The data were collected using a two-part questionnaire. The first part surveys age, sex, smoking, type of CVD, and history of diabetes. The second part was the type a personality inventory. After collecting the data, they were analyzed in SPSS v.22 software by using descriptive statistics and chi-square test.

**Results:** Participants were 99 men and 81 women. Most of them had hypertension (n=82, 45.5%), with a history of smoking (n=107, 59.4%), and with no history of diabetes (n=111, 61.7%). Of 180 patients, 41 (22.8%) had type B personality and 139 (77.2%) had type A personality. The difference in the type of CVD was significant between patients with personality types A and B ( $p=0.002$ ), but there were no significant differences in terms of age, gender, smoking cigarette, and history of diabetes.

**Conclusions:** Our findings support the results of previous studies reported that patients with type A personality are at higher risk of developing CVDs. It is necessary to consider psychological interventions for these patients, along with physical treatments, to change their negative behaviors that can worsen their diseases.

**Keywords:** Personality traits, type a personality, cardiovascular diseases

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## Essential Care for Dental trauma in children

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**Introduction and Method:** Dental trauma is one of the most common emergencies in pediatric dentistry, and its timely and appropriate management plays a decisive role in treatment prognosis. The present study is a review study that resulted from library sources and article reviews. The study discusses the type of trauma, possible risks, and immediate and clinical interventions based on the type of trauma. According to the American Association of Endodontists, more than 25% of children and adolescents and nearly 33% of adults experience at least one episode of dental trauma during their lifetime. Dental trauma refers to any mechanical injury to the tooth, gingiva, jawbone, or surrounding tissues, typically occurring suddenly. These injuries may range from a minor enamel fracture to complete displacement of the tooth from its socket (avulsion). Numerous factors including high-impact play, falls, road accidents, bicycle injuries, sports activities without mouthguards, chewing hard objects, and physical altercations can lead to dental trauma and cause significant damage to primary or permanent teeth. Children, particularly those aged 2–5 years and school-aged children, are at the highest risk.

Immediate management steps include:

1. urgent care of the injured tooth, especially within the first few minutes.
2. handling the tooth by the crown to avoid root damage.
3. rinsing a contaminated tooth with milk or clean water.
4. gently repositioning the tooth into the socket.
5. if repositioning is not possible, storing the tooth in milk, an ADA approved storage medium, or inside the mouth between the cheek and gum.
6. seeking dental care within one hour to maximize the chance of tooth survival.
7. providing professional dental treatment such as splinting or emergency surgery.
8. regular follow-up to monitor healing, ensure proper positioning, and manage trauma-related complications.

**Conclusions:** Beyond causing anxiety and stress, dental trauma can result in functional, aesthetic, and psychological complications. Recognizing these conditions as true emergencies and seeking immediate dental care can significantly improve patient outcomes. Since timely and proper intervention not only enhances prognosis but also reduces fear and anxiety, accurate diagnosis and effective management are essential to prevent damage to the teeth and their supporting tissues.

**Keywords:** Essential Care - Dental trauma - children

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## Towards a healthy salt: End of the controversy over the effect of substitute salt on hypertension: A systematic review study

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**Introductions:** Several studies have shown a significant relationship between diet and blood pressure. Although the direct relationship between salt intake and blood pressure has been shown in several studies, However, the results of other studies not only indicate the absence of a significant relationship between reducing salt intake and blood pressure, but also indicate the occurrence of impaired quality of life due to tastelessness of foods and occurrence of stroke. For this reason, some researchers have emphasized the use of an alternative substance called natural salt or salt enriched. Subsequently, a large number of studies were conducted on the possible effect of using natural or enriched salt on blood pressure. However several review studies have systematically presented the abstracts of studies conducted in this field, none of them has separated the effects of natural and enriched salts. In addition, simultaneous examination of salt taste, has not been considered. Also, some of them have limitations such as study duration and high blood pressure level, which has led to the exclusion of numerous studies in this field. Therefore, the present study was conducted in order to answer the main question: "Can natural or enriched salt prevent increased blood pressure?"

**Materials & Methods:** A review of the evidence was conducted using keywords extracted from medical subject headings (Mesh) based on PICO along with their synonyms in Persian and English in databases including Google scholar, Medline (Biomed, PubMed), and Cochran library. The keywords used were: ("blood pressure" or "hypertension" or diastolic pressure or systolic pressure) and (mineral salt or natural salt or non-table salt or cave salt or traditional salt or unrefined salt or unpurified salt or smart salt or Himalayan salt or kosher salt or substitute salt). The search was limited using the AND and OR operators. Backward and forward search methods were also used after finding studies to find other possible sources. Studies were selected during three screening periods. Finally, original human studies of the type of clinical trials, abstracts of studies presented in congresses, and theses that examined the effect of substitute salt on mean blood pressure were included in the study without restrictions on the language of the article from the beginning to July 9, 2025. The presence of various biases in the included studies was also assessed using the Cochrane Checklist, second edition (ROB2). The criteria for biases examined in this checklist included selection of subjects, grouping, blinding, and reporting.

**Results:** Based on the inclusion and exclusion criteria, 28 studies were included in the study. Of the 6 studies that examined the effect of natural salt on blood pressure, the mean systolic and diastolic blood pressure decreased in all studies, with a significant decrease in the mean systolic blood pressure in five studies and a significant decrease in the mean diastolic blood pressure in four studies. Of the 22 studies

that examined the effect of enriched salt on blood pressure, the mean systolic and diastolic blood pressure decreased in most studies, with a significant decrease in the mean systolic blood pressure in 21 studies and a significant decrease in the mean diastolic blood pressure in 13 studies. Of the five studies that examined the effect of natural salt on taste, the results of all five studies showed that there was no significant difference in the pleasantness of foods between the two groups. Of the 9 studies that examined the effect of enriched salt on taste, the results of five studies showed that there was no significant difference between the groups. The taste of salt was tolerable and satisfactory in the other three studies, but it did not taste pleasant in two studies.

**Conclusions:** Substitutes salt are effective in reducing systolic and diastolic blood pressure. This seems to be due to the diversity of elements in substitutes salt compared to table salt. Because the combination of different mineral elements can prevent the excessive effect of one element. Despite the diversity of mineral elements in natural salts and the same content of enriched salts, the effect of 100% natural salts, unlike enriched salts (more than 83%), on reducing systolic and diastolic blood pressure has been expressed. It seems that due to less refinement in the production process of natural salts, the type and amount of minerals in them are higher. Therefore, provided that environmental pollution, which is usually related to the place of salt collection, is eliminated, the consumption of natural salts is in line with human biological pathways. On the other hand, 100% of people were satisfied with the taste of natural salt and 78% of people were satisfied with the taste of enriched salt. Considering that the discovery of common and rare minerals and how mineral elements affect human health, which is in accordance with God's wisdom, requires precise and long-term evaluations, it is suggested that the use of natural salts free from environmental pollution without the addition of harmful chemicals be recommended as healthy salt.

**Keywords:** Salt, Sodium chloride, Blood pressure, Hypertension

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## A study of the Fear of Aging and its related factors in adults in Sirjan county in 2025

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**Introductions:** Aging is a natural life course phenomenon characterized by physiological and psychological changes. Adequate knowledge and awareness about aging and its realities enable individuals to effectively cope with aging-related concerns and anxieties, while insufficient awareness may heighten these worries and intensify anxiety toward the aging process. The quality of life in later years is closely linked to that of earlier stages, and fear of aging represents a significant determinant of life quality both before and during old age. Assessing the prevalence of fear of aging provides a basis for exploring positive and negative attitudes toward aging, as well as identifying constructive factors that influence the experience of aging. Such analyses underscore the importance of strategies aimed at fostering positive perceptions of aging and mitigating its adverse psychological outcomes (. Accordingly, the present study seeks to examine fear of aging and its related factors among adults in Sirjan in 2025.

**Materials & Methods:** A cross-sectional, descriptive-analytical study was carried out in 2025 among 354 adults aged 17–64 years with health records in healthcare centers of Sirjan. Sampling was conducted using a stratified approach with proportional allocation. Data collection tools included a demographic questionnaire and the Lasher and Faulkender Fear of Aging Scale, which comprises four domains: fear of loss, physical appearance, psychological concerns, and fear of older adults. Each domain is scored from 5 to 25, yielding a total scale range of 20 to 100, where higher scores indicate greater levels of fear of aging. For data analysis, univariate linear regression was initially performed; variables with a p-value less than 0.2 were subsequently entered into a multivariate regression model. Using a backward elimination procedure, non-significant variables were removed, and the final model retained only statistically significant predictors.

**Results:** Among the 354 participants, 70.9% were younger than 45 years, 71.8% were women, and 80.8% were married. More than half (58.2%) had a diploma or lower educational attainment, and the majority reported a monthly income below 20 million Tomans (80.5%). Most participants were physically healthy (83.3%) and mentally healthy (90.7%), while 53.1% had previous experience providing care for older adults. The mean overall score of fear of aging was  $69.4 \pm 7.6$ . Subscale mean scores were  $16.1 \pm 3.9$  for fear of loss,  $16.4 \pm 3.0$  for physical appearance,  $17.6 \pm 3.1$  for psychological concerns, and  $19.2 \pm 3.5$  for fear of older adults. In multivariate regression analysis, higher levels of fear of aging were observed among married individuals (Adjusted  $b = 3.7$ , 95% CI = 1.8–5.6), participants with a monthly income below 20 million Tomans (Adjusted  $b = 4.3$ , 95% CI = 2.4–6.2), those with physical illnesses (Adjusted  $b = 3.3$ , 95% CI = 1.2–5.4), and those with psychological disorders (Adjusted  $b = 3.3$ , 95% CI = 0.6–6.0).

**Conclusions:** The findings of this study indicate that mean scores across all four subscales of fear of aging were above average, and the overall level of fear of aging among participants was relatively high. These results highlight the need for targeted interventions to mitigate fear of aging in adults, including the implementation of educational programs and heightened attention to this issue in community and healthcare settings.

**Keywords:** Fear of aging; Adults; Middle-aged; Young; Iran

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## Investigating the relationship between social participation and death anxiety in elderly women in Sirjan city in 2024.

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**Introductions:** Aging is a complex, multidimensional process that is accelerating worldwide due to rapid technological advancements, improved healthcare, and enhanced medical services. Social participation is recognized as a key determinant of successful aging, occurring in both formal and informal forms. Engagement in social activities can reduce loneliness, isolation, and depression, while enhancing older adults' sense of belonging, meaning, and purpose in life. Death anxiety is a prominent psychological concern that often emerges or intensifies in later life. Older adults, facing increasing physical limitations, chronic illnesses, and the loss of loved ones, are particularly vulnerable to thoughts of death and its psychological consequences. If unaddressed, death anxiety can contribute to neurotic symptoms, reduced psychological adaptability, and heightened risk of anxiety and depressive disorders. Social participation may act as a protective factor by facilitating social interactions, reinforcing identity, and providing meaning, thereby alleviating death anxiety. Increased engagement and perceived social usefulness can reduce fear of death, improve life satisfaction, and enhance mental health in older adults. Despite its significance, research on the role of social participation in mitigating death anxiety remains limited, particularly in the cultural and social contexts of developing countries such as Iran, where older adults experience distinct cultural, religious, and familial influences. Understanding this relationship within a specific cultural framework can provide valuable insights for designing targeted psychological, social, and healthcare interventions. The present study aims to investigate the association between social participation and death anxiety among older adults in Sirjan in 2024. By examining levels of social engagement and death anxiety, this study seeks to clarify the impact of social participation on mental health, offering evidence to inform health programs, social policies, and opportunities for more active involvement among older adults, ultimately supporting their quality of life and community mental health.

**Materials & Methods:** This descriptive-analytical study was conducted in 2024 among 245 older women residing in Sirjan. Participants were recruited from 16 urban and rural comprehensive health centers using stratified sampling based on each center's electronic health records. Data collection tools

included a researcher-developed demographic questionnaire, the Templer Death Anxiety Scale, and a survey assessing factors related to women's social participation.

**Results:** The mean age of participants was  $66.7 \pm 7.6$  years. The mean social participation score was  $72.1 \pm 8.0$ , reflecting a moderate level of engagement. Social participation differed significantly based on education level ( $P < 0.001$ ), type of caregiving ( $P = 0.004$ ), and insurance coverage ( $P = 0.014$ ). The mean death anxiety score was  $7.6 \pm 2.6$ , also at a moderate level, with significant variations observed according to education ( $P = 0.001$ ), place of residence ( $P = 0.007$ ), and income ( $P = 0.026$ ). A significant positive correlation was found between social participation and death anxiety ( $r = 0.231$ ,  $P < 0.001$ ).

**Conclusions:** Death anxiety is a multifactorial issue that requires special attention. Based on the findings of this study, implementing strategies to address death anxiety among older adults is recommended.

**Keywords:** Social Participation, Death Anxiety, Death, Older Women, Older Adults

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## The Effect of Pharmacological and Non-Pharmacological Interventions in Preventing Phlebitis in Patients Receiving Intravenous Amiodarone: A Scoping Review

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**Background:** Intravenous amiodarone is an effective treatment for arrhythmias, but it can cause phlebitis in up to 85% of cases. This scoping review evaluates the effectiveness of different interventions—both pharmacological and non-pharmacological—in preventing amiodarone-induced phlebitis.

**Methods:** This scoping review was performed by searching databases up to September 22, 2025, using keywords including infusion, phlebitis, and amiodarone. Clinical trials that implemented interventions to prevent amiodarone-induced phlebitis were included. The JADAD checklist was used to assess the quality of the studies. After removing duplicates and screening, six studies were selected for final analysis.

**Results:** The included studies were published between 2015 and 2024, involving a total of 329 participants. The interventions were categorized into pharmacological and non-pharmacological approaches. The review revealed that sesame oil, cold gel packs, chamomile ointment, injection site splinting, and propolis cream were effective in preventing phlebitis caused by amiodarone infusion.

**Conclusion:** Overall, sesame oil and cold gel packs demonstrated superior effectiveness compared to other methods. Sesame oil reduced the incidence of phlebitis and cold gel pack was considered an effective and accessible option due to its ease of use. Therefore, conducting larger, multicenter clinical trials to evaluate the efficacy of these two interventions across diverse populations is recommended. Additionally, designing a study that directly compares pharmacological and non-pharmacological interventions within a unified framework—specifically comparing sesame oil and cold gel packs—could help establish clinical priorities and identify the most appropriate method for phlebitis prevention.

**Keywords:** Amiodarone, Infusion, Phlebitis, Prevention, Interventions, Pharmacological, Non-Pharmacological

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## Investigating the role of non-pharmacological treatments in improving the quality of life of healthy Parkinson's patients: A systematic review

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**Background:** Many people don't notice their disease or specific and acute symptoms. However, with the passage of time, slight tremors start in the movement. In this study, we will examine the non-pharmacological methods that have a positive effect on the quality of life of patients whose clinical symptoms have not yet appeared.

**Methods:** A systematic review literature search was performed. The search was conducted in two databases, including PubMed and Google Scholar. Over 36,900 documents published between 2014 and 2024 were retrieved, and 6 were included.

**Results:** Regular exercise improves balance and reduces fatigue in Parkinson's patients; however, lacks long-term sustainability. Physical activity exceeding 2.5 hours per week over extended periods has a positive impact on quality of life. Additionally structured exercise (150–300 minutes weekly at moderate intensity) boosts the immune system and improves quality of life. Programs like "HiBalance" improve balance and gait but show limited impact on reducing fear of falling. Psychological interventions, such as cognitive-behavioral group therapy, help reduce stress. Multidisciplinary rehabilitation programs, especially for individuals with initial lower quality of life and higher functional status, enhance self-efficacy and functional performance. Furthermore, findings indicate that individuals with proper nutrition exhibit higher quality of life, highlighting the critical role of nutrition in improving patients' quality of life.

**Conclusion:** The findings of these studies suggest that non-pharmacological interventions can improve the quality of life of Parkinson's patients across various dimensions and can complement therapeutic approaches. However, achieving optimal results requires comprehensive planning, interdisciplinary collaboration, and the design of additional studies to assess the long-term effects of these interventions.

Keywords: Parkinson, non-pharmacological treatments in Parkinson, quality of life

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## The role of nutritional interventions in the management of Parkinson's disease in the elderly: A systematic review

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**Background:** Parkinson's Disease (PD) is a progressive neurodegenerative disorder characterized by the loss of dopamine-producing neurons, resulting in motor symptoms such as tremors, rigidity, and bradykinesia. Beyond pharmacological approaches, nutritional interventions have been explored as a complementary strategy to address dietary deficiencies and support symptom management in individuals with PD.

**Methods:** A comprehensive literature search was conducted across PubMed, Scopus, and Web of Science using keywords related to PD and nutritional interventions. Inclusion criteria encompassed studies on elderly populations, diverse dietary strategies, and clinical trials. Two independent reviewers assessed study quality and extracted relevant data. Exclusion criteria included non-English publications and studies focusing exclusively on non-motor symptoms of PD. Out of 512 identified articles, 11 studies fulfilled the eligibility criteria and were included in this review.

**Results:** The analysis revealed that adherence to a Mediterranean diet, rich in fruits, vegetables, and plant-based foods, was associated with significant benefits for individuals with PD. In contrast, higher consumption of dairy products, particularly cheese and yogurt, showed negative associations with disease outcomes. Selenium intake was linked to reduced mortality, while antioxidants were reported to alleviate motor symptoms. Conversely, elevated iron intake was associated with an increased risk of developing PD.

**Conclusion:** This review highlights the clinical relevance of tailored nutritional interventions in PD management. The Mediterranean diet appears to play a protective role, while selenium and antioxidants contribute to improved outcomes. However, excessive iron and dairy intake may exacerbate risks. Further research is warranted to establish optimal dietary strategies, evaluate long-term effects, and better understand their role in maintaining both motor and cognitive functions in PD.

**Keywords:** Parkinson disease, Nutritional interventions, dietary interventions, Elderly, older adults

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## Nurse-Facilitated AI-Assisted Early Warning Systems for Detection of Clinical Deterioration: A Narrative Review

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**Introduction:** Early detection of clinical deterioration on general wards is a core patient-safety challenge; integrating AI-assisted early warning systems (EWS) into nursing workflows is an emerging strategy to enhance timely recognition and intervention.

**Methods:** We conducted a narrative review of PubMed, Scopus, IEEE Xplore, Web of Science and Google Scholar (2015–2025) using “artificial intelligence,” “early warning system,” “clinical deterioration,” “nursing workflow,” and “patient safety.” Eligible sources included implementation studies, cluster trials, cohort evaluations, and systematic reviews that assessed ML/AI EWS performance, clinical outcomes (ICU transfer, in-hospital mortality, length of stay), impact on nursing situational awareness, and implementation challenges (alerts, integration, clinician adherence).

**Results:** Implementation studies and intervention trials reported that machine-learning EWS can improve earlier identification of deterioration and were associated in several settings with reduced in-hospital mortality and shorter time to escalation when coupled with structured escalation protocols. Comparative evaluations found substantial variability in performance across tools; some AI scores (e.g., eCART variants, other ML models) outperformed legacy EWS in detecting deterioration with fewer false alarms, but real-world impact depended strongly on integration with nursing workflows, escalation policies, and user acceptance. Reported implementation barriers included alert fatigue, interoperability gaps, opaque models limiting clinician trust, and uneven adherence to AI prompts; studies that combined EWS with nurse training, clear response protocols, and multidisciplinary communication showed the clearest outcome benefits. Overall evidence is promising but heterogeneous, and robust RCTs with process-evaluation components remain limited.

**Conclusion:** AI-assisted EWS—when embedded into nurse-centered escalation pathways and supported by training and governance—can strengthen early detection of deterioration and patient safety; priorities include transparent models, workflow integration, and prospective effectiveness studies.

**Keywords:** Patient Safety; Artificial Intelligence; Early Warning Systems

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## Investigation of acute kidney injury and related risk factors in hospitalized patients

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**Background:** AKI (Acute Kidney Injury) is a serious complication that can be documented by a rapid decrease in kidney function. AKI is an important complication overall the world among hospitalized patients and associated with a high rate of mortality. Preventive strategies and early management of AKI may be diminished poor outcomes.

**Methods:** This study was performed in main central general hospital related to Lorestan University of medical sciences. we extracted all hospitalized patients' data during a year. All demographics, laboratory, and clinical evidences were obtained from recorded data and entered into the pre-designed questionnaires. Our study was retrospective analytic.

**Results:** We evaluated 245 AKI cases among 14477 hospitalized patients from 21 March 2020 to 20 March 2021. The incidence of AKI in hospitalized patients was 1.69%. Mortality rate in AKI patients was 30.2% and in ICU patient's mortality rate was 63.82 %. results showed that ward type, MAP (mean arterial pressure), poisoning, admission duration, platelet count had a significant relationship with mortality. Patients with a history of hypertension and comorbid internal disease had more increased Cr in AKI events

**Conclusion:** We found that AKI prevalence is more common in critically ill patients. Regarding this study, AKI incidence is higher in ICU and CCU patients, and ICU patients had more mortality rate. patients who admitted in medical ward are more susceptible to AKI than surgical ward. Our study has important implications for health policy and clinical practice. Identifying AKI patients at an early stage is very important to improve prognosis, regardless of AKI severity.

**Keywords:** acute kidney injury, AKI, hemodialysis, renal failure

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## Association Between Moral Sensitivity and Clinical Department Among Nurses in Lorestan University of Medical Sciences Teaching Hospitals: A Cross-Sectional Study 2023–2024

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**Introductions:** Moral sensitivity serves as a precursor to moral judgment, motivation, and Moral performance, enhancing accuracy in nursing practice, increasing accountability, fostering patients' trust and satisfaction with the quality of nursing care, and improving nurse-patient communication. This study aimed to determine the correlation between Moral sensitivity and the clinical departments of nurses employed at Lorestan University of Medical Sciences' teaching hospitals during the academic year 1402–03 (2023–2024).

**Materials & Methods:** This descriptive-analytical study was conducted on 360 nurses working in Khorramabad's teaching hospitals during 1402–03 (2023–2024), selected through stratified random sampling. Data were collected using the Lützen Moral Sensitivity Questionnaire (MSQ). Statistical analyses were performed using SPSS software (Version 23), descriptive statistics (frequency, percentage, mean) and inferential statistics (t-tests and ANOVA).

**Results:** The findings show that 92 nurses (25.5%) were employed in emergency departments, 148 (41.1%) in general wards, and 120 (33.3%) in specialized units. The overall mean Moral sensitivity score among nurses was  $62.15 \pm 15.65$ . Department-wise, the mean scores were as follows: emergency departments ( $61.34 \pm 16.80$ ), general wards ( $64.32 \pm 15.01$ ), and specialized units ( $60.09 \pm 15.29$ ). Independent t-test results revealed no statistically significant association between mean Moral sensitivity scores and clinical departments.

**Conclusions:** The findings indicate a moderate level of Moral sensitivity among nurses, with no significant variation across different clinical departments, suggesting uniformity of this variable in diverse clinical settings. This underscores the importance of addressing structural and cultural factors beyond department-specific characteristics in enhancing nurses' Moral sensitivity. To improve the quality of care, it is recommended to design targeted educational interventions focused on strengthening Moral sensitivity across all nursing work environments.

**Keywords:** Moral sensitivity, nurses, emergency, special, general

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## The Effect of Perceived Barriers and Benefits on Physical Activity Levels of Employees at Hamadan University of Medical Sciences

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**Introductions:** Physical inactivity is one of the top 10 leading causes of death and one of the most important risk factors for many diseases and disorders such as obesity, diabetes, heart failure, depression, and osteoporosis, affecting about 60–80% of adults worldwide. The prevalence of this problem is higher among office employees who work long hours in a sitting position. The aim of the present study was to investigate the effect of educational intervention based on the Health Belief Model on the level of physical activity among the employees of Hamadan University of Medical Sciences.

**Materials & Methods:** This quasi-experimental study was conducted during 2017–2018 on 130 staff members of the educational units of Hamadan University of Medical Sciences. Participants were selected using randomized permuted block sampling and allocated into intervention (n=65) and control (n=65) groups. The intervention group received training based on the Health Belief Model in three sessions. The assessment tool consisted of three parts: 1) a demographic questionnaire, 2) a Health Belief Model questionnaire (including perceived susceptibility, perceived severity, perceived benefits, perceived barriers, self-efficacy, and cues to action), and 3) the International Physical Activity Questionnaire.

**Results:** Participants included 56 males (43.08%) and 74 females (56.92%) with a mean age of 39.93  $\pm$  8.74 years. The educational intervention led to a significant increase in the mean scores of the HBM constructs in the intervention group, while changes in the control group were not significant. Self-efficacy was identified as the strongest predictor of physical activity.

**Conclusions:** The Health Belief Model is an effective framework for improving physical activity and enhancing individuals' perception of the benefits of physical activity.

**Keywords:** Health Belief Model, university employees, physical activity

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## Compilation of Care Strategies for Trauma Victims in the Prehospital Phase

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**Introductions:** Prehospital care for injured individuals aims to prevent further harm at the accident scene. One of the main challenges in prehospital care is to address the mental and emotional issues that arise after an accident, as caretakers often have to assess and transport patients without specific guidelines. This study aimed to develop effective care strategies for trauma victims during the pre-hospital phase.

**Materials & Methods:** The present study was a developmental design and was conducted in three phases. In the first phase, the concepts derived from a content analysis study regarding the challenges of patient management in the pre-hospital phase were listed. In the second phase databases using the keywords traumatic patient, road traffic accident, pre-hospital care, disability, challenges within the time frame of 2010 to 2022. In the third phase, using the Delphi method, the initial draft of challenges and corrective solutions derived from the literature review and content analysis phase was sent to experts in the field of accidents and disasters, and the solutions were finalized.

**Results:** The result of reviewing domestic and international literature in the field of pre-hospital care in disasters included 30 articles. After extracting the challenges of pre-hospital care in injured patients, the obtained information was combined with the data extracted in the first phase of content analysis, and an initial draft was developed. The draft was reviewed by experts in the field of pre-hospital and disaster management over three Delphi rounds, and ultimately, the strategies for pre-hospital care in traumatic patients were finalized.

**Conclusions:** Formulating these strategies in an emergency program and conducting related training courses in a standardized form can effectively improve prehospital care.

**Keywords:** Traumatic Patient; Road Traffic Accident; Prehospital Care; Challenges

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## Mental Health Literacy and Attitude Toward Seeking Professional Psychological Help Among Iranian Older Adults: A Cross-Sectional Study

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**Background:** Considering the rising prevalence of mental health issues among older adults and potential barriers to treatment seeking, investigating mental health literacy and attitudes toward professional psychological services in this demographic is crucial for enhancing access to care and fostering psychological well-being.

**Objectives:** This study aimed to explore the association between mental health literacy (MHL) and attitudes toward seeking professional psychological help (ATSPPH) among older adults attending health centers in Amol, Mazandaran, Iran, in 2023.

**Methods:** A cross-sectional study was conducted involving 128 older adults attending health centers in Amol, Mazandaran, Iran, in 2023. Participants were selected using cluster random sampling and completed research instruments including O'Connor and Casey's Mental Health Literacy Scale (MHLS) and the short form of Attitude Toward Seeking Professional Psychological Help (ATSPPH-S). Data were analyzed using descriptive statistics, independent t-tests, one-way analysis of variance, and Pearson's correlation coefficient in SPSS 24 software.

**Results:** The Pearson correlation coefficient revealed a positive and significant relationship between older adults' level of MHL and their ATSPPH ( $r = 0.28$ ,  $P < 0.05$ ). Tukey's post hoc test indicated a significant association between older adults' MHL and their educational level. Additionally, independent t-test results demonstrated a significant correlation between ATSPPH and gender as well as the history of visiting a psychologist or psychiatrist ( $P < 0.05$ ).

**Conclusions:** The study findings suggest that higher levels of MHL among older adults are associated with an increased willingness to seek professional psychological help. Therefore, initiatives aimed at enhancing MHL through education and promotion may play a vital role in encouraging older adults to seek appropriate support.

**Keywords:** Mental Health, Help-Seeking Behavior, Aging, Health Literacy

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## Barriers to active transport modes in Tehran, Iran: a qualitative study from the citizens' perspective

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**Background:** A physical inactivity epidemic has been described as one of the greatest public health challenges. It accounts for 6% of deaths and is the fourth most common risk factor for mortality worldwide. Active transport (i.e. cycling and walking) has been identified as a key strategy for combating physical inactivity. Our aim was to explore the barriers to and perceptions of active transport modes in Tehran from the perspective of citizens.

**Methods:** This qualitative study was conducted using a phenomenological approach, from April to November 2024. Twenty-five individual interviews and four focus group discussions were conducted with 18 residents of Tehran. Interviews were audio-recorded, transcribed verbatim, and analyzed using content analysis in MAXQDA 18 software.

**Results:** Participants mentioned walking in their daily lives, but never using a bicycle. Although cycling is not a widely used mode of transport among Tehran residents, it has been reported to be a clean and environmentally friendly mode of transport and an effective vehicle for reducing traffic congestion and air pollution. Walking was also considered a convenient mode of transport that could help save money. Three main themes were identified as barriers to active transport modes: (1) individual-level factors (e.g., lack of skills and confidence); (2) social and cultural-level factors (e.g., incompatibility of women's cycling with cultural conditions); and (3) environmental-level factors (e.g., poor infrastructure).

**Conclusion:** Our study found that there are multiple barriers to cycling and walking as active modes of transport at individual, social and cultural, and environmental levels. Thus, programs or policies promoting active transport modes are effective when they target a multi-component approach.

**Keywords:** Active transport, Cycling, Physical inactivity, Walking, Qualitative study