providers, such as through effective referral systems, may improve outcomes and reduce risks.

OP 7

Quality of life and nutritional status of children with cerebral palsy: an analytical cross-sectional study

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Introduction: Cerebral palsy (CP) affect both quality life (QoL) and nutritional status. Understanding how functional limitations shape these outcomes is important for improving care.

Objectives: To compare QoL and nutritional status between children with CP and healthy children, and to examine variation by functional ability in children with CP.

Method: An analytical cross-sectional study was conducted at Teaching Hospital Jaffna. Children with CP were enrolled as cases, and controls were matched 1:1 for age, sex, socioeconomic status and area using consecutive sampling technique until the sample size was reached. Demographic and clinical data extracts from clinic records. Gross Motor Function Classification System (GMFCS), Manual Ability Classification System (MACS), Communication Function Classification System (CFCS), and Eating and Drinking Ability Classification System (EDACS) were assessed. PedsQL™ 3.0 CP Module was used to assess QoL. Nutritional status was determined by anthropometry and WHO AnthroPlus software. Data analysis was performed using SPSS version 25 with Mann-Whitney U test and Chi-square test. Ethical clearance was from ERC of University of Jaffna (J/ERC/23/148/NDR/0301).

Results: A total of 70 cases and 70 controls with the majority (52.9%) in the 5-7year group. Participant had a mean age of 8.5±2.8 years. Total QoL score were

significantly lower in children with CP (median 62.15, IQR (36.74–78.49)) compared with controls (Z= -10.243, p<0.0001). All QoL domains: daily activities, movement and balance, pain/hurt, fatigue, eating and communication were poorer in CP group (p<0.0001). Underweight (51.4% vs. 12.9%), Stunting (64.3% vs. 15.7%), thinness (48.6% vs. 18.6%) were more prevalent among CP compared to controls. Within the CP subgroup, QoL was significantly lowest in children with functional limitation in mobility, manual handling, communication and feeding (p<0.0001). Children with greater motor impairments (GMFCS III-V) and assisted feeders (EDACS III-V) had significantly higher rates of stunting (p<0.0001, p=0.018), as well as underweight (EDACS, p=0.013) and thinness (EDACS, p=0.050), compared to independent counterparts.

Conclusion: Children with CP experience significantly poorer QoL and nutritional status, particularly those with severe functional limitations. These findings call for integrating rehabilitation and nutritional support in to CP care and greater policy attention to reduce disparities.

Note: Part of the data presented at Annual Scientific Congress of the Sri Lanka College of Paediatricians (SLCP) in June 2025.

OP 8

Exploring the caregiver's knowledge, attitude, practice and predictors of adherence towards iron supplementation in paediatric patients with iron deficiency anemia.

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Introduction: Iron deficiency anemia remains a significant paediatric public health concern globally. Understanding caregiver factors influencing treatment adherence is