



Pennridge Pediatric Associates

Pointers and Pearls

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TODDLERS AT RISK FOR PAPER SHREDDER INJURY IN THE HOME: EASY ACCESS AND SEVERE INJURY.

Paper shredders -- increasingly common household items -- pose a serious risk for toddlers who could suffer potentially devastating lifelong injuries, including lacerations, finger amputations, and other finger injuries. The majority of injuries are to young children under age 5. Young children are interested in imitating adult activities, and they may try to activate the shredder when an adult is not present. Injuries can occur even when an adult is supervising a child. Children's fingers can be pulled into the paper shredding mechanism if they don't let the paper go. Never allow children to operate a paper shredder, even under adult supervision. Place the paper shredder in an area that is not accessible to children. Unplug the power cord when the shredder is not in use. Do not operate a paper shredder while wearing loose fitting clothing that may enter the shredder opening. Keep hair and items such as a tie or a long necklace away from the shredder.

ASTHMA AND HAY FEVER

Springtime is a common time for allergy problems to appear or reappear. If your child is uncomfortable because of itchy watery eyes or a constant runny nose that may be itchy too, we

can help. If your child has symptoms of asthma (chronic cough, nighttime cough, or wheezing), this would be a good time to have us review his or her symptoms and help you decide if anything further should be done to treat them.

NATURAL IS NOT ALWAYS BETTER

Many people believe that herbal remedies are safer than traditional drugs because they are "natural." Nothing could be further from the truth. Some of these remedies can be just as potent as some prescription medicines, and can



put a pregnancy, an unborn baby, or a child at risk. Unlike traditional drugs, herbals are not regulated by the FDA, so the manufacturers do not have to conduct strict studies demonstrating the safety or effectiveness of the purported remedy before stocking the health food store's shelves with it. In

addition, the herbal companies don't have to adhere to the same standard of quality controls used for medications, so there is no way of being sure where they came from, if they are contaminated, and what the amount of the touted active ingredient is in any particular dose. Critics argue that sales have been driven by the loose labeling rules that allow marketers to target consumers with promises of unproven health claims. So be careful when considering the use of herbal remedies. Harm has occurred because of their use. You should hold anything used to treat or prevent a health concern to the same high standards: are there well designed studies indicating a significant benefit of the product you are considering, and have they been shown to be safe? Most likely you won't find that herbal remedies meet these standards.

BABIES WITH FLAT HEADS.

Your new baby is beautiful. She smells sweet, coos like an angel, and is perfect.... except for that disturbing flat spot on her head! There's really no cause for alarm. Most likely, your baby has developed **positional plagiocephaly**, also known as "flattened head syndrome." This temporary condition occurs when your baby consistently sleeps or rests in the same position. Usually, the back or one side of

the head is affected. Positional plagiocephaly does not affect your child's brain growth or cause developmental delays or brain damage. And, with appropriate mild intervention, the condition will improve by the time the child is 1 year old. Because of the recommendations that babies sleep on their backs to reduce the risk of Sudden Infant Death Syndrome more babies have developed positional plagiocephaly. We can usually diagnose positional plagiocephaly by simply examining your child's head without the need for X-rays. Treatment for the flattened head is simple and painless for your child and includes:

- ▶ Having the parent reposition the child during sleep to encourage her to alternate the position of her head while sleeping on the back.
- ▶ changing the baby's position during the day so that he is not constantly lying on the same spot.
- ▶ placing baby on her stomach during play time when someone is with the baby
- ▶ placing the baby's crib so that when he is lying on the flat side of his head he has to look at a blank wall and when he turns to see the mobile or the rest of the room he has to lie on the side that is not flat
- ▶ for the rare severe case of positional plagiocephaly, the baby may be fitted with a custom-made helmet or head band. These work by applying constant gentle pressure on the baby's skull to redirect growth. Usually, this is done between four and six months.

THREE NEW VACCINES ARE COMING

Hepatitis A vaccine. Because of its success in dramatically reducing the frequency of hepatitis A where it has been

recommended for routine use, it will be recommended for use throughout the US. Hepatitis A is usually spread from person to person by putting something in the mouth (even though it may look clean) that has been contaminated with the hepatitis A virus. Children (often those in day care) are the most common source of illness in adults, in whom hepatitis A is usually much more severe. Hepatitis A vaccine is recommended for travel to most parts of the world. It is expected that the children who are vaccinated will be protected for a very long time and not need a booster at the time of travel.

Rotavirus vaccine. Rotavirus is the most common cause of severe diarrhea among children, resulting in the hospitalization of approximately 55,000 children each year in the United States and the death of over 600,000 children annually worldwide. Immunity after infection is incomplete, but repeat infections tend to be less severe than the original infection. Almost all children in the US have at least 1 rotavirus infection by the time they are 2 years old. One quarter of household contacts of children with rotavirus infection will become ill too.

Human papillomavirus vaccine

HPV infection is caused by human papillomavirus (HPV). Most people who become infected with HPV will not have any symptoms and will clear the infection on their own. Some of these viruses are "high-risk" types, and may lead to cancer of the cervix or penis. Others are called "low-risk" types, and they may cause genital warts.

Approximately 20 million people are currently infected with HPV. At least 50 percent of men and women acquire genital HPV infection at some point in their

lives. By age 50, at least 80 percent of women will have acquired genital HPV infection. About 6.2 million Americans get a new genital HPV infection each year. Although only a small proportion of women have persistent infection, persistent infection with "high-risk" types of HPV is the main risk factor for cervical cancer. The American Cancer Society estimates that about 10,520 women will develop invasive cervical cancer and about 3,900 women will die from this disease each year. Most of these cancers are now preventable. Pennridge Pediatric Associates has participated in vaccine trials with each of these vaccines and we thank our patients and their parents who participated with us in these trials.

FROM THE SECRETARIES

School physical exam forms for fall sports must be done after June 1st. Please schedule early and avoid the possibility of not being able to schedule the exam before practice begins for your child's sport. Please remember to bring all exam forms with you and give them to the nurse. There is no charge for filling out these forms at the time of your child's well check.

RESEARCH AT PPA

Meningococcus is now the most common cause of life-threatening bacterial infections. Coming soon are two meningococcal vaccine studies.

In one study the meningococcal vaccine is combined with the HIB vaccine and it will be given to infants who enroll at 2, 4, and 6 months of age. The second is the same as the vaccine currently being given routinely at 11 years and older. It will be given to infants 9 months of age and children 4 years of age.