What to do when your child has an earache



nodified from photo by LexiLogancom Does your child have an earache?

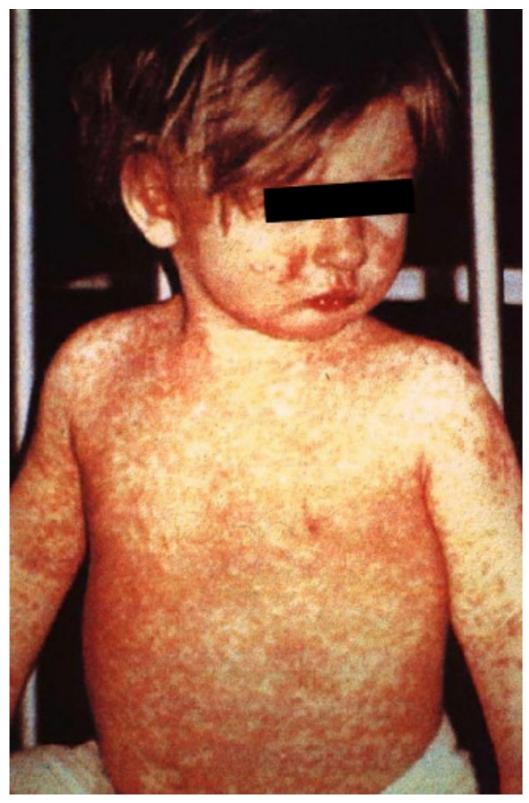
In the aftermath of flu and croup season, we are diagnosing a fair share of ear infections. But not all earaches are due to ear infections.

Read our post about ear pain and what to do about it.

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Another measles outbreak:

recognize measles in your child



A typical measles rash, courtesy of the public health library, Centers for Disease Control and

Prevention

It saddens us that we need to post about how to recognize measles, but the recent measles outbreaks in the United States force parents to be vigilant for a disease that was nearly eradicated in this country.

Both an increase in international travel and a decrease in parents vaccinating their kids is thought to be responsible for the increase in measles cases.

Measles typically starts out looking like a really bad cold — kids develop cough, runny nose, runny bloodshot eyes, fever, fatigue, and muscle aches.

Around the fourth day of illness, the fever spikes to 104 F or more and a red rash starts at the hairline and face and works its way down the body and out to arms and legs, as shown here at the Immunization Coalition site. Just before the rash, many kids develop Koplik spots on the inside of the mouth: small, slightly raised, bluish-white spots on a red base.

Call your child's doctor if you suspect that your child has measles. Parents should be most suspicious if their children have not received MMR vaccine and were exposed to a definite case of measles or visited an area with known measles.

In the US, one in 10 kids with measles will develop an ear infection and one in 20 will develop pneumonia. Roughly one in 1000 kids develop permanent brain damage, and up to two in 1000 who get measles die from measles complications. Kids under age 5 years are the most vulnerable to complications. These statistics are found here. For global stats on measles, please see this World Health Organization page.

Check that your child is up to date on their MMR (measles) vaccine. The first dose is given between ages 12-15 months and the second dose is given at school entry, typically at 4-6

years of age. If you are traveling internationally with your baby between the ages of 6-12 months, ask your pediatrician about getting an early dose of vaccine.

Preventing measles is key because there is no cure.

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How to dress baby (and big kids) for winter



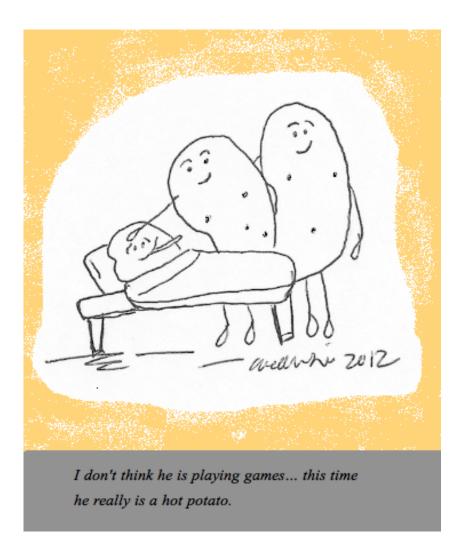
Dr. Kardos's fourth child wears her coat without fuss in cold weather.

Now that the weather has turned "freezy," parents ask us how to dress their baby (and big kids) for cold weather. Even Dr. Kardos's teenaged kids allow her to thrust winter coats on them as they head out to the bus stop. Wondering how to know if your baby, toddler, or older child are dressed correctly for the weather? Read our post on this topic.

Stay warm!

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Is your child sick? When to call the doctor



Unfortunately, it is sick season. Fortunately, we have a great

post to help you know when you need to call the doctor about your child's illness.

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It's possible: Tricks for eating out with your toddler



this busy, holiday time of year, you may find yourself dining out frequently with your toddler. Read our post to find hints on avoiding restaurant meltdowns without the use of an iPad or phone!

Julie Kardos, MD and Naline Lai, MD

Coughing out germs? Natural remedies for kids



"coughing out germs"

Recently a 6-year-old patient handed me this drawing of "a person coughing out germs."

The artwork reminds us that a cough can be a good thing. A cough dislodges mucus from the airway and can help prevent pneumonia.

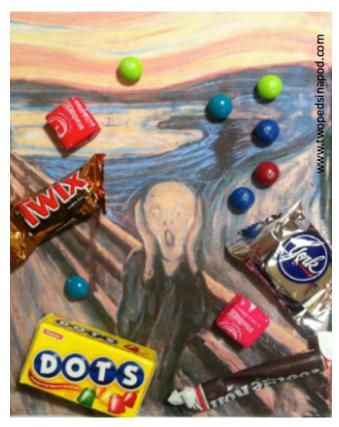
However, coughs can spread germs and make kids feel plenty uncomfortable. And, frustrating for parents, many over-the-counter medicines are not recommended for kids.

Looking for natural remedies for kids? Look no further than your kitchen.

Julie Kardos, MD and Naline Lai, MD

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How to get rid of Halloween Candy



After the fun

You poured out all of your two liter soda bottles, replaced all of the potato chip snacks with fruit, and signed up all of your children for winter sports. Just when you thought your family's exercise level and food choices were perfect, along comes Halloween, that fabulous candy-filled holiday, to thwart your efforts. Here are some ways to keep the Halloween candy deluge down to a trickle:

- -Buy back the candy with toys or money. The Halloween Buy Back Program was started by dentist Chris Cammer in 2005. Traditionally, dentists buy back candy from kids and usually send the candy to United States troops. Find local participating dentists and learn more about the program here.
- -Have the Sweet-Tooth Fairy or Switch Witch™ come overnight, pick up the candy, and leave a present behind.
- -Let your children know Halloween (and most holidays) lasts only one day. Live it up on Halloween, then dump the extra sweets into the trashcan the next day. If you hear whining,

remind them that until summer, holidays come at a pace of about once a month. Additionally, they may attend an awful lot of birthday parties in between. A parental saying you can recite is, "It's not a treat if you have something all the time."

- -If you decide to keep a small bag of candy around, watch out, your children will want to eat some daily. Candy becomes an ongoing "must have." Instead, designate a day of the week that you will let them have some candy such as Candy Friday or Sweet Saturday. If the kids whine for candy on any other day of the week, you can say, "Sorry, it's not Sweet Saturday."
- -One parent told me she discourages her kids from eating too much Halloween candy by making their dental appointments on November 1—the day after Halloween.

As final justification for getting rid of the abundance of candy after Halloween, Dr. Kardos and I have heard more than a few parents say, "If I don't get the candy out of my house, I'll be the one who ends up eating it all."

Now, that's a scary Halloween thought.

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Hooray! United States flu vaccine is here!



Fight the flu! Vaccinate!

It's time for your child's yearly flu vaccine!

Why get the flu shot? Vaccinate against influenza (the flu) not only to avoid missed school days, but also to avoid hospitalizations and death. Last year in the USA, 172 children died from flu. You may not have heard about these fatalities because more sensational news tends to overshadow news about illness. We wish the news would inform that the vast majority of kids who died from flu had not received the flu vaccine. In addition, about half of the children who died from the flu were previously healthy and without underlying medical

problems. Excluding the 2009 flu pandemic (H1N1), last year's flu deaths represents "the highest reported since influenza-associated pediatric mortality became a nationally notifiable condition in 2004." Kids younger than 5 years old have the highest flu complication rate of all children, so even if they do not yet attend daycare or school, bring your little ones in for a flu vaccine. Vaccinate your school-aged kids as well, for they spread the flu to more folks than any other age group.

Does it help to wait to give the vaccine? What if the vaccine wears off before flu season ends?

We wish we could predict just when the flu will hit, but sadly we cannot. Therefore, we urge you to give your children the flu vaccine as soon as your pediatrician has it available. Like all vaccines, it will take about two weeks for the protection against flu to kick in, and you never know when flu will strike your community. Did anyone catch the story about Vanilla Ice quarantined on a plane in New York with sick passengers last week? Turns out flu was on board. Don't worry about immunity decreasing over time, infectious disease experts would not allow us to give it in early fall if they thought protection wouldn't last for at least a few months.

If I give my children the flu vaccine every year, why do I have to give it again this year? Even we constantly-exposed-to-germs pediatricians get our flu vaccine yearly. The flu germs morph from year to year so the vaccine also changes.

Why does my younger child need a second dose this year?

As in previous years, children under nine years of age need a booster dose the first year they receive the vaccine. If your young child *should* have received a booster dose last year, but missed it, they will receive two doses of this year's vaccine spaced one month apart (the primary dose plus a booster dose).

Is the nasal spray form back? Or is it only in injectable form?

The nasal spray form of the flu vaccine is back for healthy kids ages 2 years and up. However, this year, it received only a lukewarm reception from the American Academy of Pediatrics. The AAP recommends giving all children aged 6 months and older the flu SHOT, because in past years the intranasal form did not protect against the flu nearly as well as the shot did.

Not only is the nasal spray vaccine not getting a high endorsement, but some kids with asthma and kids with certain immune system problems are not allowed to get the nasal spray form. All kids can get the shot. So, pediatricians will continue to recommend injectable form of flu vaccine this year. However, with the rationale that something is better than nothing, for the severely injection-phobic family, some doctors may elect to give the nasal spray.

In the past, my child did not get the flu vaccine because he is allergic to eggs- did that change?

Even kids with severe egg allergies can get the flu shot safely in their pediatrician's office. Now we know that allergic reactions to flu vaccine, as with any vaccine, are exceedingly rare.

We visit other people's homes only if they are not sick. If my child's friend doesn't have flu symptoms, doesn't that mean we can't catch it from him?

Nope. You are infectious the day before symptoms show up.

Why is it worth it? The coverage is never 100 percent.

Children who get the flu vaccine but then get the flu anyway do not get sick as severely as kids who are unvaccinated. If all kids and adults got flu vaccine, then the chances of YOUR vaccinated child getting flu would be MUCH less. That's how vaccines work.

Here we have tips on how to help your children if they get the flu.

You can read a comprehensive summary of this year's flu

vaccine recommendations from the Centers for Disease Control here.

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Updated car seat safety guidelines!



Car seat safety isn't just child's play.

Just in time for families who plan to drive to Labor Day Weekend destinations, the American Academy of Pediatrics updated their car seat safety recommendations.

Families are now encouraged to keep their children rear facing for **as long as possible**, until they exceed the height or weight limit allowed by their car seat's manufacturer. This means that some kids who are older than two years will continue to ride backwards. Dr. Lai's own pip squeaks easily would have ridden backwards until they were three or four years old.

Regardless of age, kids facing backward in a car crash fare better than kids facing forward. A rear facing car seat prevents whip lash by fully supporting a child's head and neck. A forward facing car seat does not restrain kids' heads. In a crash, kids' heads continue to move at the speed of the car until the shoulder harnesses and lap belts restrain their bodies. It makes us wish that grownups could also somehow ride backwards.

Other recommendations remain the same. For example, children can graduate from booster seats when they are 4 ft 9 inches tall and the car's seat belt fits them properly. You can read about other car safety tips and view a link to children's airline safety restraints in our 2017 post about car seat safety. In the post you will see a fabulous photo of a child who was saved by her car seat.

Again, no matter the age, as long as they fit, keep your children riding backwards in their car seats.

We're thrilled that car safety has progressed over the years. Pictured here is Dr. Lai ready to go out in her 1960's car

seat:



It's Dr. Lai in her 1960's car seat! note the two point harness and the big safety pin

Drive Safe!

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Ready for school: backpacks, packing lunches, when to keep your kid home for illness, and more



Now that you just read how to drop your kid off at school on the first day, you may be backpack shopping, pondering what to send your child for lunch, and knowing that your child will have difficulty waking up early for school. Never fear! Your Two Peds can help you and your kids get ready for school.

First, make sure your child's backpack fits correctly and is not too heavy. Our guest blogger, a pediatric physical therapist, provides tips to help lighten the load.

Help your child get back on a school-friendly sleep schedule. If your child is still in summer vacation sleep mode, we provide ways to help get your child's sleep back on track.

If your child brings lunch to school, you may need some hints on what to pack and how to beware of junk food disguised as healthy food. And this post provides suggestions for healthy snacks. Need suggestions on how to motivate your child to want to learn? Two former school principals share their wisdom in this post.

Finally, you should know when to keep your child home for illness. This post also contains some surprising truths about when you can send your child back to school during as well as after certain maladies.

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