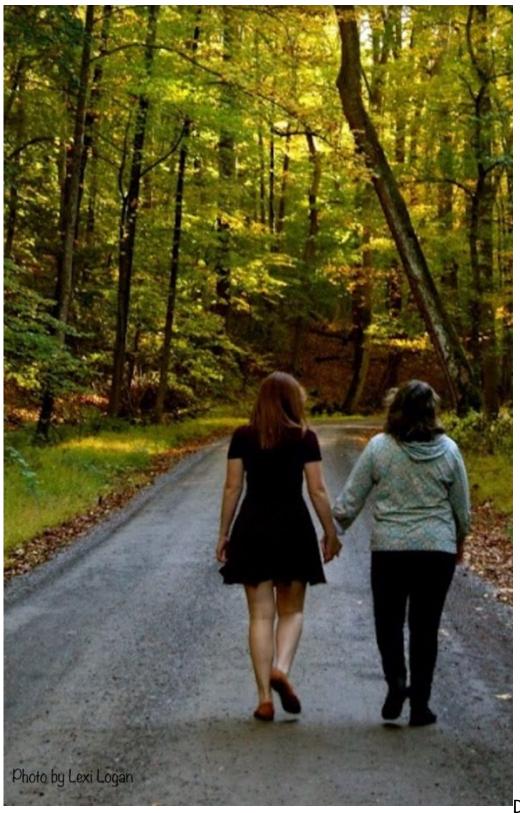
Talk to your teen



Do you wonder if any communication actually occurs when you talk to your teen? We invite you to read this post for some coaching on how

to talk to your teen in ways that they will find palatable.

Julie Kardos, MD and Naline Lai, MD

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When your child lies to you



Your child lies. What do you do?

Read our post to learn the truth of why your child might lie.

Julie Kardos, MD and Naline Lai, MD

Update on Gardasil vaccine: yes, it is safe and effective



"Sh

ould I give my kid the Gardasil® vaccine?" Friends and relatives, as well as our patients' parents, continue to ask us this question.

Our answer is always: "Yes."

Gardasil® vaccine is the current HPV vaccine on the United States market. The vaccine prevents cancer-causing strains of human papillomavirus from infecting a person's body. HPV cancers include cervical cancer in women, penile cancers in

men, and cancers of the mouth and throat in everyone. The vaccine also protects against genital warts.

According to the Centers for Disease Control report, nearly 90 million HPV vaccines were distributed from June 2006 through March 2016. That's a lot of vaccinations. In the US, the large majority of HPV vaccine given was the Gardasil® vaccine.

You can read a detailed report of the way the safety of the vaccine was studied here.

Here are the updates:

- 1. The vaccine prevents cancer-causing strains of HPV from infecting teens and young adults. You can read the latest study about this here.
- 2. The vaccine is still safe. The HPV vaccine has still NOT caused any deaths, has NOT caused cases of premature ovarian failure, and has NOT caused any new chronic pain syndromes or neurologic diseases. If you read on the internet or on Facebook any gory tales about Gardasil, you can check those stories on "Snopes." This website determines whether a popular internet story is a myth or a fact.
- 3. Your child may need only two doses of HPV vaccine instead of three. We now know that younger teens achieve immunity with fewer doses than older teens. So, if your child gets the FIRST dose of this vaccine prior to his 15th birthday, then he needs only one more dose of vaccine 6 months later. Those starting the Gardasil® vaccine on or after their 15th birthday still need 3 doses of vaccine for maximum protection against the disease.
- 4. If your child has a weak immune system, they also might need three doses. Children with weakened immune systems (check with your child's pediatrician) should get 3 doses of Gardasil®.

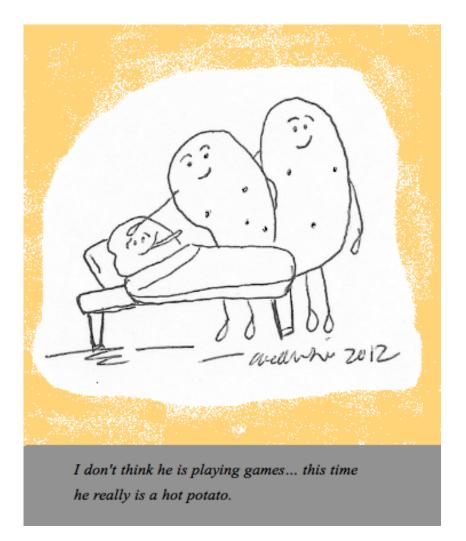
5. Teens and tweens are more likely to feel dizzy or to faint after all vaccinations, not only after the HPV vaccine. There are reports that HPV vaccine causes kids to faint, but fainting may occur with any teen vaccine. It is well known that surges of anxiety can cause fainting. Although they are older, teens are often very apprehensive about getting vaccines. Babies and toddlers rarely faint. Although a toddler may be mad about a vaccine injection, they are not anxious. To prevent any light headedness, your teen's doctor may have them sit for a few minutes after a vaccine.

There's a reason why we give the vaccine "so young." Once people are infected, the vaccine does not work as well. Even though it may be difficult to imagine your child needing protection from a sexually transmitted disease, prevention of cancer-causing strains of human papillomavirus is most effective when HPV immunization is given well before your kids have had any exposure to the virus.

Yes, the HPV vaccine is safe, and yes, we gave it to our own kids.

Julie Kardos, MD and Naline Lai, MD □2019 Two Peds in a Pod□

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.

Julie Kardos, MD and Naline Lai, MD

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Help prevent your teen from playing risky games



Some games are riskier than others and it's hard for teens to tell the difference.

Remember playing "Truth or Dare" as a kid? Some of the dares were silly, some potentially embarrassing, but some were downright risky. Now our children are playing potentially dangerous games. How can you prevent your teen from taking unnecessary risks?

To understand why kids would play risky games such as the Cinnamon Challenge or the Laughing Game, let's step into the mindset of a teenager. Don't let their adult-like appearances deceive you. Based on what we know about teenage brain development, teens are more likely to misinterpret or mislead social cues and emotions and to engage in risky behavior. Even though your teens may be taller than you, their deductive reasoning skills are not fully developed until around 25 years old. They have difficulty thinking through long term plans.

Take a simple example of studying. If they stay up very late studying, they do not consider that this will cause impairment in cognition the next day and consequently they are forced to stay upeven later to understand class material. Further, because teens also are impulsive, they will typically check their cell phones multiple times while studying, which further pushes off bedtime. Days later, when it comes to taking a test in class, their cumulative sleep deprivation leads to poor focus and poor memory retrieval.

Applied to more dangerous situations and coupled with peer pressure, even a "good teen" may take unnecessary risks. Teens truly believe that they cannot die. Even if they know others who have died, they don't think it can happen to them. So they may be more likely to run across a busy street, try getting high off of a friend's Adderall, or drive distracted while checking social media on their phones.

Teen peer pressure + immature teen brain = disaster potential.

As parents, you do have some power to prevent disaster. You can teach your teens the tools you have acquired through the years to help them consider all potential consequences of their actions.

Here are some ways parents can teach:

- Tell kids to pause first before playing any game. Think "What is the worst that can happen if I play the game, win or lose?" If the worst case scenario is severe injury or death, DON'T PLAY THE GAME. Remember that kids feel invincible.
- Teach directly by allowing kids to take small risks. Like we've said before, hold tight, but remember to let go. If your child chooses not to study for a test in school, then let them fail the test. However, make sure they study for the final exam.
- Teach indirectly through anecdotes, either from your own

childhood or events you hear about. For example, your kids might not consider that the beach they visit with you every summer can hold danger. Tell them about the family I know who lost their teen to drowning while swimming too far and was caught in a riptide on an unguarded beach.

- Teach kids that you cannot always save them. You cannot magically can save them if they get hit by traffic on a dare.
- Know where your kid and your kid's friends are developmentally and supervise accordingly. Volunteer to host the gatherings where a game may occur. Hint: Go down into the basement often with food-the kids will be happy to see you and you can be a better spy.
- Keep 'em busy so that they do not play risky games simply out of boredom.
- Give your kid a way out of an uncomfortable situation. Let them know they can always say, "I can't, my parents would kill me."

Unfortunately life is not all fun and games. Remind your kids that playing Monopoly or video games is not the same as taking real life risks.

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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.

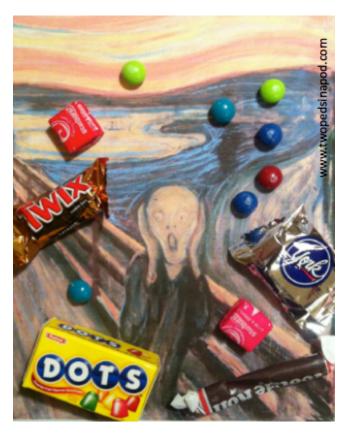
However, coughs can spread germs and make kids feel plenty uncomfortable. And, frustrating for parents, many over-the-counter medicines are not recommended for kids.

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.

What's that red mark on my child's face? Picture puzzle of the day



A red mark on your child's cheek appears just like the one above. Can you wait to ask the pediatrician about it at their next check up? Yes, you can wait. The spider-like pinkish mark is aptly named a spider angioma. Also called by other names such as spider nevus or spider telangiectasia, the marks are composed of fine blood vessels in a radiating pattern close to the skin's surface. When pressed, they momentarily disappear (blanching). Although in adults they can be associated with

pregnancy or liver disease, having one or two is common in healthy children. Since they are harmless and often resolve in their own, we usually leave them alone.

There's also a type of red mark called a cherry angioma. You can probably guess what shape those marks take.

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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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