

kids' health news



A fussy, feverish baby may be suffering from herpes simplex virus.

fection around the age of 6 months—about the time they start teething.

Herpes cold sores or blisters are tiny, round, reddish, and slightly raised, sometimes with a whitish center, and occur around the gums. Because they flare up when babies cut their teeth, it's hard for parents to tell whether their child is teething or ill.

A baby's comfort depends on the right diagnosis.

Making the distinction is important. Parents typically rub teething gels on wet, irritated gums to ease discomfort. But if a gel is rubbed on a herpes sore, it will burn.

Tender gums could signal herpes

Many parents are familiar with the symptoms of teething: excessive salivation and tender, swollen, or red gums. It's normal for an infant to fuss or cry as a result, but if she seems particularly uncomfortable or has a fever, call your pediatrician. Your baby could be experiencing an outbreak of the herpes simplex virus, according to Steven Wegter,

D.D.S., of Omaha, a spokesperson for the Academy of General Dentistry.

A recent study at the University of Texas at San Antonio found that of 20 infants whose parents thought they were teething, 9 had cold sores or mouth blisters caused by the virus. Although most babies are born with antibodies that help fight herpes simplex, they begin to lose this pro-

tection around the age of 6 months—about the time they start teething. Parents also risk catching the virus or spreading it to another part of the infant's mouth or body.

If your baby is feverish, don't attribute it to teething. "Call your physician and discuss the possibility that it's herpes," says Wegter. When treated—usually with fever medication—herpes symptoms generally clear up in 10 to 14 days.

Good-bye to needle pain

Children hate shots, as any parent who has taken a child for a vaccination will testify. Luckily, a new product that reduces the pain of injections may make visits to the doctor a little less traumatic for needle-phobic children—especially those who are undergoing a medical procedure.

• Studies of children ages 7 to 15 at more than 100 hospitals have shown that the use of EMLA cream—a topical prescription anesthetic made by AstraZeneca—reduces the pain not only of something simple, such as having blood drawn, but also of more involved procedures, such as IV-line insertion, spinal taps, and laser removal of port wine stains. It is also FDA-approved for use during vaccinations to dull the sting of the needle.

• The cream, which numbs skin for one to three hours, is simple to use, so parents are able to apply it before their child arrives at the hospital or doctor's office. The FDA has approved EMLA for children 1 month or older.

Pediatricians and parents who would like more information about the cream can call 1-800-228-EMLA.

Pediatric

Germ can hide out in toothbrushes and reinfect kids who are recovering from an illness. If you suspect that your child is coming down with a bug, replace his toothbrush immediately. Change it again when he begins to feel better, and again when he is fully recovered.



"Hyper" kids may have a thyroid disorder

For generations, children who were restless, impulsive, inattentive, and easily distracted were considered "difficult." But in recent years researchers have found that such behavior may be linked to attention-deficit hyperactivity disorder (ADHD), a common disability that may be hereditary. It affects about 4 percent of all school-

age children.

Now a new study from the National Institutes of Health (NIH) suggests that in a small percentage of children, ADHD may be triggered by "generalized resistance to thyroid hormone," a genetic disorder. Its symptoms include short stature, difficulty in school, and enlargement of the thyroid gland. "Children have

this thyroid disease and when receive proper medication seem to experience a reduction in ADHD symptoms," says Peter Heuser, M.D., the NIH study's principal investigator. "If your

child has ADHD and there is a family history of thyroid problems, he should probably have a blood test to determine whether thyroid disease might be the cause of his symptoms."



In some children, ADHD is linked to an inherited thyroid condition.

BY AMY SUNDEN

Hearing tests for newborns

One baby in 1,000 is born with a hearing disorder. Because treatment can begin as early as 4 months, a National Institutes of Health panel is now recommending that all infants be tested for hearing impairment by the age of 5 months. The most convenient time for testing is before a newborn is discharged from the hospital.

Until now, auditory screening for infants was expensive and time-consuming, so testing was recommended only for high-risk children. The standard testing procedure, auditory brain-stem response (ABR) audiometry, costs about \$100 and takes between 30 and 60 minutes to perform. But a new procedure,

A small microphone placed in your baby's ear can detect a problem earlier and more easily than before.

known as OAE testing, because it measures otoacoustic emissions, is easier to do and less expensive.

With the new test, a small microphone is placed just inside the baby's ear to measure sound emissions, which indicate whether the baby is hearing-impaired. The test takes ten minutes and costs about \$25, according to James B. Snow, M.D., a director of the National Institute on Deafness and Other Communication Disorders.

If your hospital does not offer this test, Snow suggests that you talk to your pediatrician to arrange for an independent testing.

Currently, hearing losses are diagnosed at an average age of nearly 3 years, but by then it can be too late. The first three years are critical to a child's development of speech and language skills. Hearing problems experienced during this time can also affect a child's social and emotional growth.

Portable crib: a death trap

Kolcraft Enterprises, in Chicago, is recalling 11,638 portable cribs sold between 1990 and 1992 under the name "Playskool Travel-Lite," with model numbers 77101 and 77103. The cribs have nylon-mesh sides and blue plastic ends where the name "Playskool" appears in white letters on a red background.

The side rails fold in the center for storage and carrying, and three infants have suffocated when the rails inadvertently tottered during use. If you own one of these cribs, stop using it immediately and call Kolcraft at 1-800-453-7673 for a refund.



By ANY SHREVE

Mouthwash poses danger



Mouthwash can contain as much as 26.5 percent alcohol and can be fatal if swallowed by children. For this reason, 30 state attorneys general, the American Academy of Pediatrics, the American Association of Poison Control Centers, and others are urging the U.S. Consumer Products Safety Commission to require child-resistant packaging for any mouthwash with an alcohol content higher than 5 percent. In the meantime, keep mouthwashes safely locked away.



Pediatric

If your kids are itchy all over from insect bites, take them swimming. The cold water from a pool or the ocean will soothe their skin. If you can't get to the water, let them soak in a cool bathtub with a half cup of cornstarch.

Q&A safety

Expert advice on baby jumpers and more.

"Can a strand of hair harm a baby?"

Q My sister told me that her baby almost lost a toe when a strand of hair got wound around the toe and cut off circulation. Is this possible?

A Yes. "It is not a common problem, but it does happen," says Marilyn Bull, M.D., professor of pediatrics at the Indiana University School of Medicine, in Indianapolis. In fact, the problem even has a name: hair-thread tourniquet syndrome.

The trouble occurs when a strand of hair or a thread becomes wrapped around a baby's finger or toe—or even his penis—and cuts off the circulation. This mayadden sensation in the extremity, so your baby may not even signal you by crying. If circulation is cut off entirely, the tissue could die.

"To prevent this from happening, you should get in the habit of checking your baby regularly. If you do discover a thread or hair,

you should remove it immediately," advises Bull. The extremity may appear discolored—either pale or reddened—but as long as its color returns to normal within 20 minutes, there is no need for further action. If it remains discolored, or if you cannot remove the hair or thread, call your doctor.

"Is it okay for me to let my child play in a baby jumper?"

Q My 6-month-old loves to play in a baby jumper that we hang from the kitchen doorway. My mom says that this is bad for his legs because he is too young to stand. Is she right?

A There seems to be a popular misconception that jumpers can harm a baby's joints or make him bowlegged, but there is no evidence to support either of these beliefs. "By the age of 4 months, it is natural for most babies to start bearing weight and standing up with support," says Patricia Howe, M.D., a pediatrician at the LaSalle Clinic, in Neenah, Wisconsin. "so



Jumpers are great fun, but your baby will need your supervision.

a jumper would pose no problem." Jumpers are not recommended for babies younger than 4 months.)

According to the Consumer Products Safety Commission, jumpers are safe if you follow the manufacturer's instructions and if you do not attach the jumper to a door trim or molding that might come loose.

If your baby does use a jumper, make sure that the

clump is in no danger of coming loose. "And you should never leave a child of any age unsupervised in a jumper. You really need to watch him at all times," Howe stresses.

"When can a child travel on an airplane by herself?"

Q My parents, who live in another state, want my 6-year-old daughter to visit them during her school vacation. Is she old enough to fly alone?

A If the flight is nonstop, a 6-year-old should be able to handle it by herself, as long as she indicates that she is up for the adventure and is well prepared.

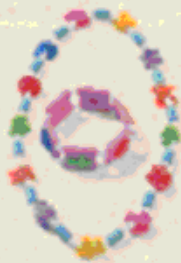
"Most airlines have guidelines to ensure the safety of children who are flying alone," says David Sterpler, executive director of the International Airline Passengers Association, in Washington, D.C. At American Airlines, children as young as 5 are permitted to fly unaccompanied on nonstop

PRODUCT RECALL

Charm necklaces and bracelet

Dillon Importing Company, of Oklahoma City, has recalled two charm necklaces and one charm bracelet. The Consumer Product Safety Commission tested the toy jewelry and found that small parts separated when the elastic band broke, presenting a potential choking hazard

to young children. The 18-inch plastic necklaces consist of small plastic charms in assorted colors, separated by white beads strung on a piece of thin elastic. The six-inch plastic bracelet has six square pieces separated by two white beads; one colored charm is attached to each square. The toy



jewelry was sold without packaging stores tended to hang it from

display rods or put it in open bins. The necklaces and bracelet were sold in 24 states for about \$1 each. If your child has either necklace or the bracelet, return the jewelry to the store where it was purchased for a full refund. For more information call the Dillon Importing Company at 1-800-654-3666.

kids' health news



Experts think that babies who sleep on their backs or sides may be less vulnerable to SIDS.

Sleep position and SIDS

Are babies who sleep on their stomachs (the prone position) more vulnerable to sudden infant death syndrome (SIDS)? Last year the American Academy of Pediatrics recommended that healthy full-term babies sleep on their sides or backs to lower their risk. Now a new study, published in *The New England Journal of Medicine*, identifies four factors that may increase the risk of crib death among prone-sleeping babies in the first year of life: soft natural-fiber mat-

resses; swaddling; recent illness such as congestion, coughing, fever, vomiting, or diarrhea; and elevated room temperature.

Experts aren't sure why these factors increase SIDS risk, but parents should not panic. Research linking sleep position to SIDS is still preliminary, notes Bradley T. Thach, M.D., professor of pediatrics at Washington University School of Medicine, in St. Louis, Missouri. Thach advises that babies sleep on their backs or sides; doctors may recommend

that preterm infants with respiratory-distress syndrome sleep on their stomachs because that position facilitates breathing. Based

on the study, Thach also recommends the following:

- Don't overbundle your baby or overheat her room.
- Avoid placing your baby on soft sleep surfaces such as sheepskin or giving her a

pillow; doing so may put her at risk for suffocation by causing her to rebreathe exhaled air.

● Don't use a thick blanket, a comforter, or a blanket that has been folded many times as a sleep surface. Use a firm mattress covered by a sheet.

Pediatric

Before removing a splinter, cover the area it is lodged in with teething gel. This numbs the site enough to make splinter removal painless.

Heading off head lice

Some 6 million cases of head lice occur every year among U.S. children ages 3 to 12, even those who shampoo daily, re-

ports the National Pediculosis Association (NPA). Lice, tiny insects the size of a sesame seed, live on the scalp and lay

eggs—called nits—that adhere to hair shafts. Lice and nits can't be dislodged by ordinary washing and brushing of hair, but they are easily transmitted by head-to-head contact and by sharing combs, hats, pillows, and headphones. Getting rid of the insects requires washing hair with a medicated lotion or shampoo and removing the eggs with a special nit comb. You also need to wash clothes, bed linens,

combs, and brushes in hot water, and vacuum carpets, furniture, plush toys, and car seats that may have come into contact with infected hair.

For more information call the NPA at 1-800-446-4-NPA. For the free brochure *Home Treatment Guide for Head Lice*, write to the Office of Public Affairs, Nonprescription Drug Manufacturers Association, 1150 Connecticut Avenue N.W., Washington, DC 20036.

Head lice are tenacious but treatable.



Stubborn warts meet their match

Multiple warts can be tough to treat, and even though many cases clear up on their own within two years, they shouldn't be ignored, because they can easily spread. What makes multiple warts so troublesome is that they often resist traditional treatments—such as topical medications, freezing, burning, and laser surgery—or return after surgery. Now researchers may have discovered an alternative treatment in an oral drug that is typically used for ulcers.

Details of the study.

Doctors at Children's Memorial Hospital, in Chicago, and New York University gave doses of cimetidine three times daily to 32 children who had suffered from multiple warts for at least six months. All of the young patients had tried other treatments, which were unsuccessful. When the researchers treated these children with cimetidine, however, most showed signs of improvement. Within six to seven weeks, many had become flatter and less visible. And two months into the study, the warts had disappeared entirely in 80 percent of the children.

Is the drug harmful?

According to the researchers, cimetidine is safe for children and does not seem to cause any side effects. Although further investigation is needed before the drug can be prescribed routinely, the results are promising. "Cimetidine is something new to add to our arsenal for fighting warts," says Amy Paller, M.D., head of dermatology at Children's Memorial Hospital.

By AMY SUNSHINE-GENOVA