



Happy Fall to our patients at Stamford Pediatrics! Back to school is a good time to make sure our children are up to date on all of their vaccines as well as their annual physical exams. Unfortunately at this time of year it is common to battle pests such as lice and viruses such as flu — this issue has some tips to help you hopefully manage it all.

## How to manage COLDS AND FLU

As the kids get back to school and the weather turns cool we begin once again to enter cold and flu season. Here are some tips to survive it as painlessly as possible.

We can try to prevent our children from getting the flu in the first place by vaccinating children age 6 months and older each year. For younger children, make sure the people around them have had the flu vaccine.

### TO TREAT SYMPTOMS:

Make sure your child gets plenty of rest and fluids.

#### STUFFY NOSE:

- Use saltwater (saline) nose drops or spray. For infants, use a rubber suction bulb to suck out the extra drops or spray.
- Put a cool-mist humidifier or vaporizer in your child's room. Clean the machine every day.



#### COUGH:

- For children ages 1 to 5 years, try half a teaspoon of honey. Do not give honey to babies under one year—it is not safe.
- Try one teaspoon of honey for children 6 to 11, and two teaspoons for children 12 or older.
- Consider cough drops for children 5 and older.
- Over-the-Counter Cough & Cold Medicines should never be given to children under age 4 and used cautiously in older children. There are no studies that support the efficacy of these medications.
- Many cold medicines already have acetaminophen in them, so beware of double dosing.

#### FEVER AND BODY ACHES:

- Do not give your child aspirin, which has been linked to a rare but serious illness in children.
- Up to age 6 months, give only acetaminophen (Tylenol and generic).
- After 6 months, you can give either acetaminophen or ibuprofen (Advil, Motrin, and generic).
- Ask the doctor for the right medicine and dose for your child's age and size.

If antibiotics are prescribed for bacterial infections such as an ear infection or pneumonia, make sure to give the full course as directed, even if your child feels better. If antibiotic treatment stops too soon, the infection may get worse or spread in the body. Call the doctor if your child is not getting better with treatment.

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Getting back to school inevitably means new outbreaks of lice. Here's answers to commonly asked questions about these pesky bugs.

The head louse is a tiny, wingless insect that lives among human hairs and feeds on extremely small amounts of blood. Lice are a very common problem.

Lice aren't dangerous. They don't spread disease. But they are contagious, so they can spread from person to person easily. They're also annoying: louse bites can itch. If someone scratches a lot, it may lead to skin irritation and even infection.

A head louse can survive up to 30 days on a person's head and can lay eight eggs a day. Since that means lice can multiply fast, it's a good idea to treat head lice quickly.

## SIGNS OF LICE

An adult louse is grayish white or tan and about the size of a small sesame seed. Lice move fast, so you're actually more likely to see their eggs than the lice themselves.

Louse eggs are called nits. Nits look sort of like dandruff, except they don't brush or fall off as easily as dandruff. Lice attach their nits to pieces of hair, close to the scalp. If you think you have lice and see a small, oval blob on a strand of hair, it's probably a nit.

If nits are yellow, tan, or brown, it means the lice haven't hatched yet. If the nits are white or clear, the lice have hatched and just the egg remains. Lice eggs hatch within 1 to 2 weeks after they're laid.

In addition to seeing nits or lice on the head - itching or the feeling of something moving around on the scalp is another clue you might have lice. Like mosquito bites, the itching is a reaction to the saliva of lice. Some people with lice also get a rash of small red bumps from scratching.

## HOW THEY SPREAD

Lice cannot jump or fly. They spread from person to person when people's heads touch or after sharing things like hats and other clothing, combs, brushes, headbands, or barrettes. Lice can live up to 2 days without feeding on a person, so you also can get lice from pillowcases, sheets, blankets, sleeping bags, and other bedding.

Lice have nothing to do with personal hygiene. Lice love everyone, including the cleanest kid in the class! Lice spread in schools and other group settings (like camp or even slumber parties) because these are places where people are in close contact. One reason why kids get lice more often than teens is because kids play together closely and often share more stuff.

You can't get lice from a pet. Lice are "species specific," meaning that people can't catch lice from pets and pets can't catch the kind of head lice that people get.

## PREVENTING LICE

Lice can be tricky to get rid of because nits can remain unhatched on your head or you might pick up lice that are still on bedding or other items. Here's what to do if you've had lice or someone in your family has:

1. Wash bed linens and clothing that anyone with lice has used recently. Use very hot water (130°F [54.4°C]), then use the hot cycle of the dryer for at least 20 minutes.
2. Take items that can't be washed (like comforters, pillows, clothing, and stuffed animals) to the dry cleaner. Or put them in airtight bags for 2 weeks.

3. Vacuum carpets and any upholstered furniture, as well as car seats.
4. Soak hair-care items like combs, barrettes, hair ties or bands, headbands, and brushes in rubbing alcohol or medicated shampoo for 1 hour. You also can wash them in hot water or just throw them away.
5. Because lice can move easily from person to person in the same house, family members will also need treatment to prevent the lice from coming back.

Here are some ways to avoid getting lice in the first place:

- Try to avoid head-to-head contact, like in gym or during sports.
- Don't share combs, brushes, hats, scarves, bandanas, ribbons, barrettes, hair ties or bands, towels, helmets, or other personal care items with anyone else.
- Don't lie on bedding, pillows, and carpets that someone with lice has used in the past couple of days.
- If someone in your family or at school has lice, ask a parent or adult to check your hair and scalp every 3 or 4 days to be sure you haven't picked up lice.

*Kidshealth.org*



# VACCINATING Your Preteen:

## ADDRESSING COMMON CONCERNS

In many parents' minds there remain questions about the safety and necessity of vaccines for teenagers. Here we try to provide information to enable you to be confident about your decision to vaccinate.



### HPV Vaccine

#### Why is the HPV vaccine needed?

The AAP recommends HPV vaccination at 11-12 years of age for several reasons. HPV is spread by intimate skin-to-skin contact. People need all 3 doses of the vaccine before ever coming into contact with the virus in order to be protected. Also, the immune system of an 11-12 year old responds better to the vaccine than that of an older teen.

One study found that up to 80% of teens or preteens contracted HPV within 2-3 years of the first time they engaged in sexual activity, making it important that preteens receive the full series of 3 doses before first sexual activity. The Centers for Disease Control and Prevention (CDC) reports that as many as 64% of teen or preteen girls may be infected with HPV, and 75% of new cases of HPV are found in persons age 15-24 years. Even if your child waits until he is married and or only has one partner in the future, your child could still be exposed to HPV by that partner.

#### Why does my son need HPV vaccine if it protects against cervical cancer?

HPV vaccine prevents cervical cancer, which, of course, only females can get. But HPV vaccine can protect both males and females by preventing genital warts and cancers of the mouth, throat, anus, and genitals.

A preteen boy who receives HPV vaccine can also protect his future partner. Men and women infected with HPV often have no symptoms. Women can get cervical cancer screening, but there is no such test for men. Men who are infected and don't know it can spread HPV to a partner.

#### Do adolescent vaccines have serious side effects?

**PAIN:** Pediatricians do not like to cause discomfort to children of any age. Even though shots may hurt, getting a vaccine is not as bad as suffering from a serious disease such as meningitis or cancer.

**FAINTING:** Your pediatrician may ask your child to sit for 15 minutes after getting a shot in case your child faints (syncope). Staying seated for 15 minutes reduces the main risk from fainting — getting hurt from falling.

**VACCINATION AT SICK VISITS:** Many families are busy and it is hard to find time to visit the pediatrician's office to get a shot. It is smart to get any vaccines that are due when your child is in the pediatrician's office. This will reduce the chance that your child has to miss school, work, or other activities to receive vaccines.

**SAFETY:** All vaccines routinely recommended for preteens have been licensed by the Food and Drug Administration and found to be safe. The safety of each vaccine continues to be

checked after it is licensed. Your pediatrician can provide you with a Vaccine Information Statement that explains the mild side effects that can occur after receiving shots.

#### Why is more than one dose of vaccine needed?

**HPV VACCINE:** It is recommended that your child receives 3 doses of HPV vaccine at ages 11-12 for full protection. All 3 doses of the HPV vaccine are needed for the body to build up enough immunity to protect against infection. This is also true of many of the vaccines that babies get.

**MENINGOCOCCAL VACCINE:** One dose of meningococcal vaccine protects a person, but immunity may wane over time. A booster dose can "boost" immunity so that your child is still fully protected. Children should receive meningococcal vaccine as preteens to be fully protected for a few years and another dose at age 16 to boost immunity levels.

**TDAP:** Recently, there have been several outbreaks of pertussis (whooping cough) throughout the United States. One study has shown that this is due, in part, to waning immunity. It is possible that booster doses of pertussis vaccine (in Tdap) will be recommended in the future. Studies are still underway to determine exactly if and when they will be needed.

*Healthychildren.org*

## GUN SAFETY: Keeping Children Safe

With the recent string of violent attacks by gunmen in our country there has been renewed debate over the issue of gun control. The fact is that more than 44 million Americans own firearms. Of the 192 million firearms owned in the United States, 65 million are handguns. Research shows guns in homes are a serious risk to families.

- A gun kept in the home is far more likely to kill someone known to the family than to kill or injure a household member than kill or injure an intruder.
- A gun kept in the home triples the risk of homicide.
- The risk of suicide is 5 times more likely if a gun is kept in the home.

The best way to keep your children safe from injury or death from guns is to NEVER have a gun in the home. Remember that young children simply do not understand how dangerous guns can be, despite parents' warnings. Find out if there are guns in the homes where your children play. If so, talk to the adults in the house about the dangers of guns to their families.

For those who know of the dangers of guns but still keep a gun in the home:

- Always keep the gun unloaded and locked up.
- Lock and store the bullets in a separate place.
- Make sure to hide the keys to the locked boxes.

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## GERM PREVENTION STRATEGIES

We can try to limit the spread of germs from person to person by following a few simple guidelines.

### Hygiene Strategies

When your child or another family member has a cold or cough, there are extremely important steps in addition to frequent hand washing that can lower the risk of spreading the infection to others. Some experts call these strategies respiratory hygiene, and they can be very effective if followed carefully. For example, to keep your sick child from blowing secretions into the air, where they can land on other people or on toys and other objects.

- Encourage her to cough or sneeze into a tissue or, if a tissue isn't available, onto her sleeve.
- Discourage your child from covering her mouth with her hands while coughing or sneezing because this will leave germs on the hands that can be spread by touching other people or objects. Most often, germs are spread by the hands, not through the air.

- Throw away tissues immediately after each use, putting them in a nearby wastebasket or other container.
- Once your child is old enough, teach her how to blow her nose into a tissue.
- Don't allow your child to share pacifiers, drinking cups, eating utensils, towels, or toothbrushes.

### Clean and Disinfect

If you spend a few minutes killing germs, especially those in the kitchen and bathroom, it can go a long way toward keeping your child healthy.

After you've prepared a meal, wash the kitchen counters with hot, soapy water and disinfect them using a household bleach solution or other disinfectant. Infectious bacteria can thrive in foods like uncooked beef and chicken. In the bathroom, use the same cleaning and disinfecting routine on the toilet, sink, and other surfaces. This is especially important when a family member is sick with an infectious disease, particularly one that causes diarrhea. Also, frequently clean the area where you change diapers, including the changing table. Avoid changing diapers in areas where food is being prepared or consumed.