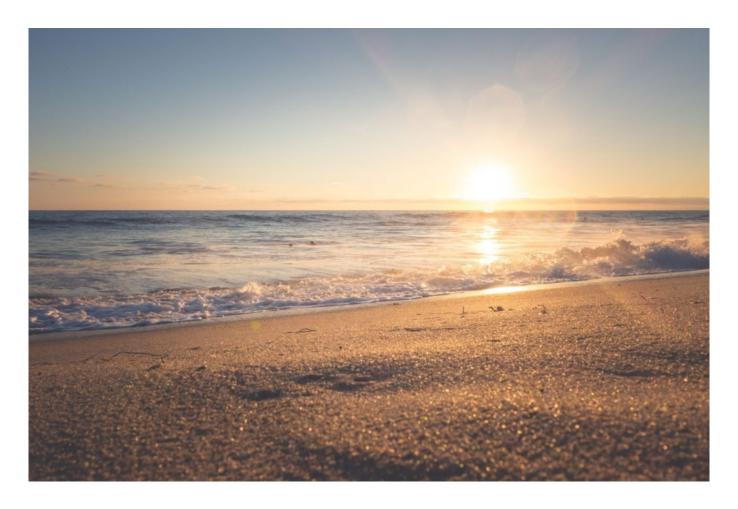
Can't fall asleep? Relaxation techniques to quell anxiety



I love kids who worry. If they didn't worry, they wouldn't care, and if they didn't care, nothing would ever get done. But sometimes, those worries grow bigger than your child and threaten to engulf them. Like any skill, you can teach your child to calm their mind and settle their emotions. Helping them with relaxation techniques as they fall asleep will translate into the ability for your child to calm themselves during the day.

When your child was a baby you would rock them, sing to them, and maybe give a pacifier. But now that they are older, other calming modalities are available.

Start with yourself. Your child looks to you to see how to act. If you constantly feel off balance yourself, you will

find it difficult to convey reassurance and confidence. Therapist Dina Ricciardi reminds parents to incorporate mindfulness into our daily lives. She says, "Relaxation techniques should tap into one or more of our five senses. Tactile — doing something with our hands such as knitting, gardening or baking, or sitting in a warm bath; auditory — such as listening to music or nature sounds; olfactory — aromatherapy oils and diffusers, visual — looking at photos or art, a crackling fire, or visualizing a face or place that makes you happy; taste — sipping a cup of tea." One app for meditation and mindfulness is found at headspace.com. For kids, Ricciardi suggests Mind Yeti. "Anxiety is easily projected, parents need to understand they are barometers," says therapist and resilience expert Amy O'Neil.

Events in the day can affect your child's ability to clear their head at bedtime. Generally, anything that disrupts routine is difficult for kids. Change, even good change, can cause stress. Also, don't assume that your greatest concern is necessarily your kid's greatest concern. You may be worried about mass shootings and your child might be worried that you will find out that they failed a math test that day. Understand where your child is developmentally—trying to explain negative news events and holding long discussions about future repercussions may only confuse your child if they are not developmentally ready to comprehend the news. This post gives you ideas of how to present tragic events to your kids.

Check to make sure that your children's bedtime routine is conducive to sleep and feels secure and cozy at all ages. Instill healthy sleep habits and don't rev up their minds just prior to sleep. Close to the targeted bedtime, avoid screen time and homework. Create a bedtime routine which includes a tuck in by you at any age. Convey that you are putting them in a safe place and that it's okay to "let go." For relaxation, as part of the bedtime routine, you can guide your child

through deep, diaphragmatic breathing or a guided imagery exercise. Click here for more details from Dr. Sandy Barbos. Ricciardi is also a fan of the 4×4 breathing relaxation technique used by Navy Seals. In this technique, one inhales for four seconds, holds for 4 seconds, then exhales for 4 seconds. This pattern is repeated.

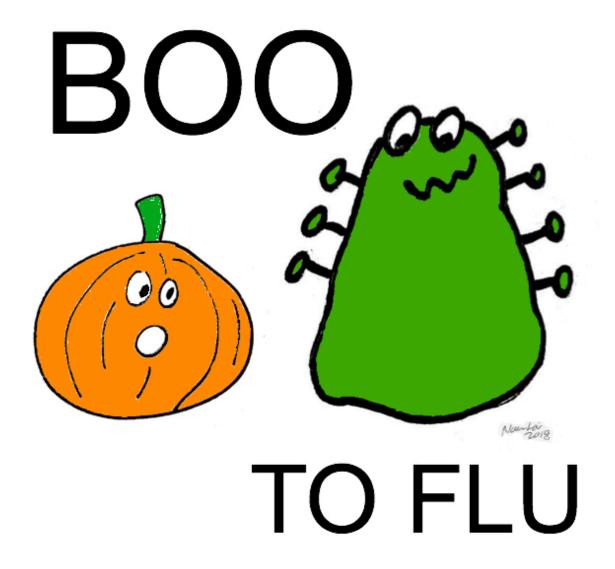
After guiding your child, allow them time to self-calm by themselves immediately before bed. This time, which some call meditation or prayer, becomes your child's self-calming quiet time and allows them to drift off to sleep on their own.

Giving your child the ability to relax and fall asleep on their own, no matter what swirls around them, is a gift they will cherish into adulthood.

Naline Lai, MD and Julie Kardos, MD

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Cold vs. Flu: we're in a GoodHousekeeping.com post about ways to recognize the difference

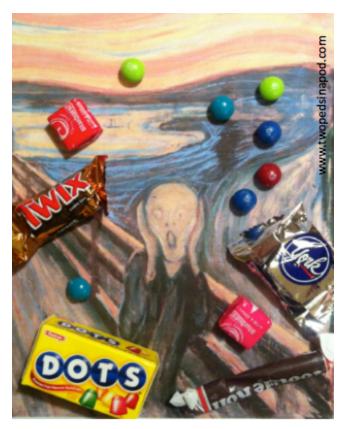


The flu is an unwelcome trick-or-treater.

We're happy GoodHousekeeping.com editor Marisa LaScala quoted us in her recent post about the flu. Click here to read.

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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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Oh no, it's the back to school cold!



Mr. Germ was excited to join the class this year as mystery reader until he saw the hand sanitizer on the back to school supply list.

Your child went back to school a couple of weeks ago, you've been to back to school night, and now, right on time, many of your children have... THE BACK TO SCHOOL COLD. What to do with this cold?

Whether caught from the toddler room or from the middle school hallway, most back to school colds look the same. Your child will start with a day of extra grumpiness or vague complaints about feeling tired or having a sore throat, followed by a runny nose

the next day, and then a cough a couple of days later. If your child has a fever from a cold, it starts during the first or second day. Some kids get watery eyes or a small amount of

mucus from their eyes, to match their runny noses. To add insult to injury, some kids produce loose stools or vomit mucus. Many lose their appetites. In general symptoms build on days 0-2, peak at days 3-5, gradually get better days 6-7, and linger for the next week.

Colds are viruses and do not improve with antibiotics, but it is important to be on the look out for superimposed bacterial infections. In other words, cold viruses can irritate the body and make the body more susceptible to bacterial infections (pus producing infections) like ear infections or pneumonias. Unlike colds, bacterial infections can be eradicated with the help of antibiotics.

Here is what you can expect from a back to school cold and how you can help your child feel better:

Sore throat

- Expect sore throat for at least the first 2-3 days.
- **Treat** pain so that your kid hydrates without pain on swallowing. You can give acetaminophen (i.e. Tylenol) or ibuprofen (i.e. Motrin, Advil).

We have a post devoted to ways to soothe a sore throat here. And this post can help you decide whether your child needs to be tested for strep throat.

Fever

- Expect fever to start within the first 2 days of cold symptoms and to last at least 2-3 days. If it lasts more than 4-5 days, call your child's doctor.
- **Treat** discomfort with fever reducing medicine if needed. Read helpful information about fever here.

Runny/stuffy nose

■ Expect your child to have a runny, stuffy nose for as long as 2-3 weeks. Sinus infections are explained here.

• Treat your baby or young child's stuffy nose with suction and saline (salt water) nose drops to help clear mucus. Although older kids can blow their nose, they can also use saline nose drops and take long warm showers to relieve nasal congestion. See other ways to treat cold symptoms here.

Cough

- Expect the cough to get worse on days 3, 4 and 5 of the cold, and to last for as long as 2-3 weeks. Here is our post on how to tell if your child is handling her cough or if the cough is a harbinger of asthma or pneumonia.
- Treat cough with extra fluids, and you can give honey if your child is over one year old. If your child has asthma, follow their asthma treatment plan. Remember to stay away from over-the-counter cough medications.

Sorry, we don't have a vaccine against the many viral germs that cause the common cold. But we do have one against the viral germ called influenza, better known as "the flu." The flu is much more severe than a cold, so if your child is miserable from their cold, imagine how they will feel if they catch the flu (read here to tell the difference between colds vs flu).

Who knows, maybe this back to school cold will be the last cold of the school year. Here's to hoping!

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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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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.

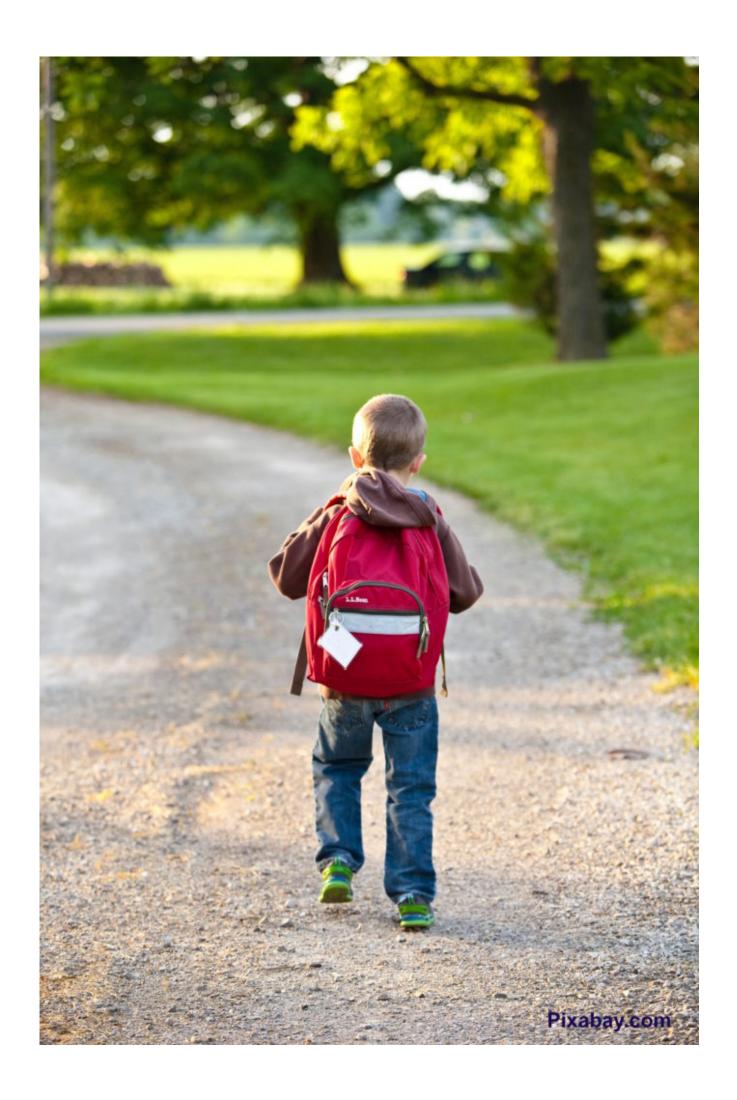
Help your child get back on a school-friendly sleep schedule. If your child is still in summer vacation sleep mode, we provide ways to help get your child's sleep back on track.

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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The truth about the first day of school for parents- from kindergarten to college



The first of many first days of school.

Parents, let's admit it. Many of the tears shed on the first day of school are our own. The first day of school for parents is not easy. There is genuine sadness and ache that goes beyond the bittersweet as our kids approach momentous milestones such as kindergarten entry and college send off. As our pediatrician friend Dorothy Novick posted on Facebook, "Because here's a thing no one ever says out loud on Facebook: as all the balloons and congrats explode on our feeds, many of us parents of graduates are experiencing some pretty serious grief. There's true pride in the photos, yes, but there's also honest to goodness grief."

For your kid-remember the rules of drop off:

- For kids of all ages, convey to them that the transition is a positive experience. You give your child cues on how to act in any situation. Better to convey optimism than anxiety. Kids, no matter the age, mirror the emotions their parents convey.
- For daycare and preschool, take your child and place her into the arms of a loving adult- do not leave her alone in the middle of a room.
- Say good bye. Let your child know that you are leaving. Don't try to sneak off. At any age, it's unsettling for you to suddenly disappear.
- Do not linger. Prolonging any tears, only prolongs tears. The faster you leave, the faster happiness will start.
- For the younger ones- it's ok to go back and spy on them to reassure yourself that they have stopped crying- just don't let them see you. For the older ones-let them have their independence- this is what you've trained them for. In fact, encourage their independence. When your young adult asks you a question, ask it back. Chances are, they already know the answer. Just remind them that

you are always available. Send the care packages and answer their midnight texts.

For yourself:

Congratulate yourself on reaching a family milestone. The first day of school for parents and children is momentous. Yes, the configuration of your family has changed and it will not be the first or last time. Acknowledge the ache of the passage of time, and reach out to others in similar situations.

Just as your child delights you with all of their unique interests and attributes, go show them all the amazing unique things you do. Take up ball room dancing, start a business painting colorful furniture or join an adult soccer league ...these are all real life examples of things we know people embarked on when their kids went off to school.

Cry those "happy tears." But be aware, sentimental "happy tears" can tip over into depression.

If negative thoughts or worries constantly impinge on your thoughts and weigh you down, then seek help. Talk to your doctor for advice. Also, the National Alliance on Mental Illness maintains a lists of resources. Depression looks like sadness much of the time but it can also manifest as anger or anxiety.

Warning signs of depression include:

- Acting out of control
- Losing interest in activities which normally bring pleasure
- Changes in sleep patterns-difficulty falling asleep, numerous awakenings, or excess sleeping
- Having feelings of worthlessness about yourself or other
- Poor work performance
- Low energy or fatigue or conversely restless or "hyper"

(excessive shopping binges)

- An increase in alcohol or drug use (attempts at "self-medicating")
- Thoughts of being better off dead or a desire to hurt yourself or others

To end on an upbeat (and ok, bittersweet) note, we invite you to read the letter Dr. Lai wrote the day before her first child left for kindergarten.

A letter to my child

My Child,

As we sit, the night before kindergarten, your toes peeking out from under the comforter, I notice that your toes are not so little anymore.

Tomorrow those toes will step up onto to the bus and carry you away from me. Another step towards independence. Another step to a place where I can protect you less. But I do notice that those toes have feet and legs which are getting stronger. You're not as wobbly as you used to be. Each time you take a step you seem to go farther and farther.

I trust that you will remember what I've taught you. Look both ways before you cross the street, chose friends who are nice to you, and whatever happens don't eat yellow snow. I also trust that there are other eyes and hearts who will watch and guide you.

But that won't stop me from worrying about each step you take.

Won't stop me from holding my breath.

Just like when you first started to walk, I'll always worry when you falter.

I smile because I know you'll hop up onto the bus tomorrow, proud as punch, laughing and disappearing in a sea of waving

hands. I just hope that at some point, those independent feet will proudly walk back and stand beside me. Maybe it will be when you first gaze into your newborn's eyes, or maybe it will be when your child climbs onto the bus for the first time.

Until then, I hold my breath each time you take a step.

Love, Mommy

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How to stop nail bitingthoughts to chew on



A preschooler nibbles on her nails.

Stop nail biting! One of our readers wrote to us: "My 3.5-year-old daughter has started biting her nails to the quick. She does have a new little sister so perhaps it is stress/anxiety about that, but I don't know what to do. Do I ignore it? Offer rewards for not biting? Please help — the habit drives me nuts and her poor little fingers are looking worse for the wear (and painful)."

As many of you have likely already discovered, telling your kid, or pleading with them, or bribing, ignoring, or yelling at them, will not help your kids stop nail biting.

Nail biting is a common childhood habit. Really common. In fact, according to this review article from 2015, it is THE most common habit seen in school-aged and college-aged kids. As many as 60% of kids, at some point, bite their nails. Nail biting usually starts between the ages of three to six years, so our reader's child is right on target for this habit.

I am amused that many of the parents who ask me how to help their kids stop biting their nails are, themselves, nail biters. I will point out that even if we can't stop nail biting, the concerned parent is a living example of a nail biter who still grows into a successful adult.

Assuming that your child is otherwise acting well, eating and sleeping normally, and mostly cheerful, it is not always important to identify the trigger of nail biting. More importantly, make sure your child washes their hands after playing outside and before eating (and nail biting) to limit germ spread. Check their fingers for signs of infections that can result from nail biting.

What to do

A quick internet search reveals dozens of products that you can dab onto your child's fingers to discourage nail biting. Products with nasty tasting ingredients such as "bitter apple" tote promises such as "stop nail biting instantly." Unfortunately, most nail biters are not deterred by paint-on products.

Usually kids have a hard time breaking a habit unless they REALLY want to break it themselves. Here are some suggestions to help:

- Offer painting nails or small rewards for not biting nails.
- Don't be a nag.
- Establish a code word for stop biting your nails that only your child knows. The word can be a nonsense word

- (e.g. oogleschmertz) or a word entirely out of context (e.g. elephant). For younger kids especially, this creates an environment of humor, rather than annoyance when you are reminding them to stop biting.
- Substitute a less annoying habit for nail biting. Hand them something to keep their hands busy. Give them a squishy toy to squish or a hair scrunchy to wear on their wrist to flick.
- Offer older kids sugarless chewing gum to keep their teeth busy.

If all else fails, take heart in one study that came out in favor of nail biting (and thumb sucking). Perhaps it's not imperative to stop nail biting after all. The study showed that nail biters and thumb suckers had a lower rate of atopic sensitization (medical term for allergic eczema) than their non-nail biting or thumb sucking peers. The researchers conclude "Although we do not suggest that children should be encouraged to take up these oral habits, the findings suggest that thumb sucking and nail biting reduce the risk for developing sensitization to common aeroallergens." In other words, the nail biters show fewer allergy symptoms in their skin than the non-nail biters.

Let's face it: We all are creatures of habit. The key is to make sure the habit is not self-detrimental. Every childhood habit does not need to be broken immediately, even if it drives us parents crazy.

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