

The winter cold virus



Believe it or not, pharmacies sold this “cold remedy” until the 1960s!

Honey, tar, and alcohol, oh my! Tucked away in a display at

the Mercer Museum of Bucks County, Dr. Lai found this old bottle of cough syrup from the late 1800s. While we do NOT recommend this type of medicine for children of any age for any condition, it does remind us that we wish we had the perfect cold remedy to offer our patients who have a winter cold virus.

Whether your child caught their cold from the infant room in daycare or the high school hallway during change of class time, kids with colds suffer similar symptoms in a similar time course.

Kids can start out feeling extra tired or out of sorts for a day or so, then they may develop a sore throat, runny nose, maybe a fever, and then the cough sets in. Fever from a cold virus starts within the first two days of a cold. Younger kids sometimes develop loose bowel movements or vomit mucus. Colds can cause watery eyes. Symptoms from a winter cold virus interrupt sleep and disrupt appetites.

What can parents do to help their children feel better from a winter cold virus?

- Treat pain from sore throats, nasal congestion, or mild aches with acetaminophen (Tylenol) or ibuprofen.
- Treat fever if it is causing discomfort, again with acetaminophen or ibuprofen.
- Use nasal saline to treat stuffy noses. Because babies can't blow their noses, you can suction the mucus out to help them breathe better through their noses. Older kids can try to blow their noses to clear them. Steam from a hot shower can help clear out stuffy noses as well— read their bedtime story in the steamy bathroom or give them

an extra bath.

- Coughing is normal with a cold. In kids over one year of age, honey can soothe a cough. In all kids, drinking extra fluids to moisten the throat will help suppress cough. Cough medicine doesn't work well and the American Academy of Pediatrics does not recommend cough medicine for kids under 4 years. The cough medicine you can find on pharmacy shelves can have side effects and does not improve symptoms. However, if your child's cough is from asthma, be sure to follow their asthma care plan to keep their airways open.
- All kids need extra fluids when sick: encourage lots of drinking.

It can take 2-3 weeks for ALL symptoms of a cold to resolve. However, kids usually feel their worst during the first week. If they are not feeling too miserable, they can still go to school. Keep your child home from school if they require too much TLC for a teacher to provide while caring for everyone else in the class. Older kids should stay home if they feel too tired or miserable to learn. Having trouble getting an older kid to pack a water bottle and go to school? Just remind them, "There is nothing wrong with your brain...just your nose."

Most kids with colds never need a doctor visit. However, here are reasons to call your child's pediatrician:

- Cough makes your child short of breath.
- Initial fever of 100.4 or higher lasts more than 2-3 days.
- All babies 8 weeks or less go to the Emergency Department for ANY temperature of 100.4 (rectal) or higher.
- Fever suddenly appears "just as you thought things were turning the corner and improving."

- Your child does not drink enough to urinate their typical amount per day.
- Runny nose and cough show NO signs of improvement by the end of 2 weeks.
- Symptoms continue to get worse and worse, instead of better, after the first week.
- Watch for pain. Depending on location, pain can be a sign of a new bacterial infection on top of a cold virus. For example, ear pain can signify an ear infection, chest or shoulder pain can signify pneumonia, and pain over the face (cheeks or forehead or behind the nose) can signify a sinus infection.

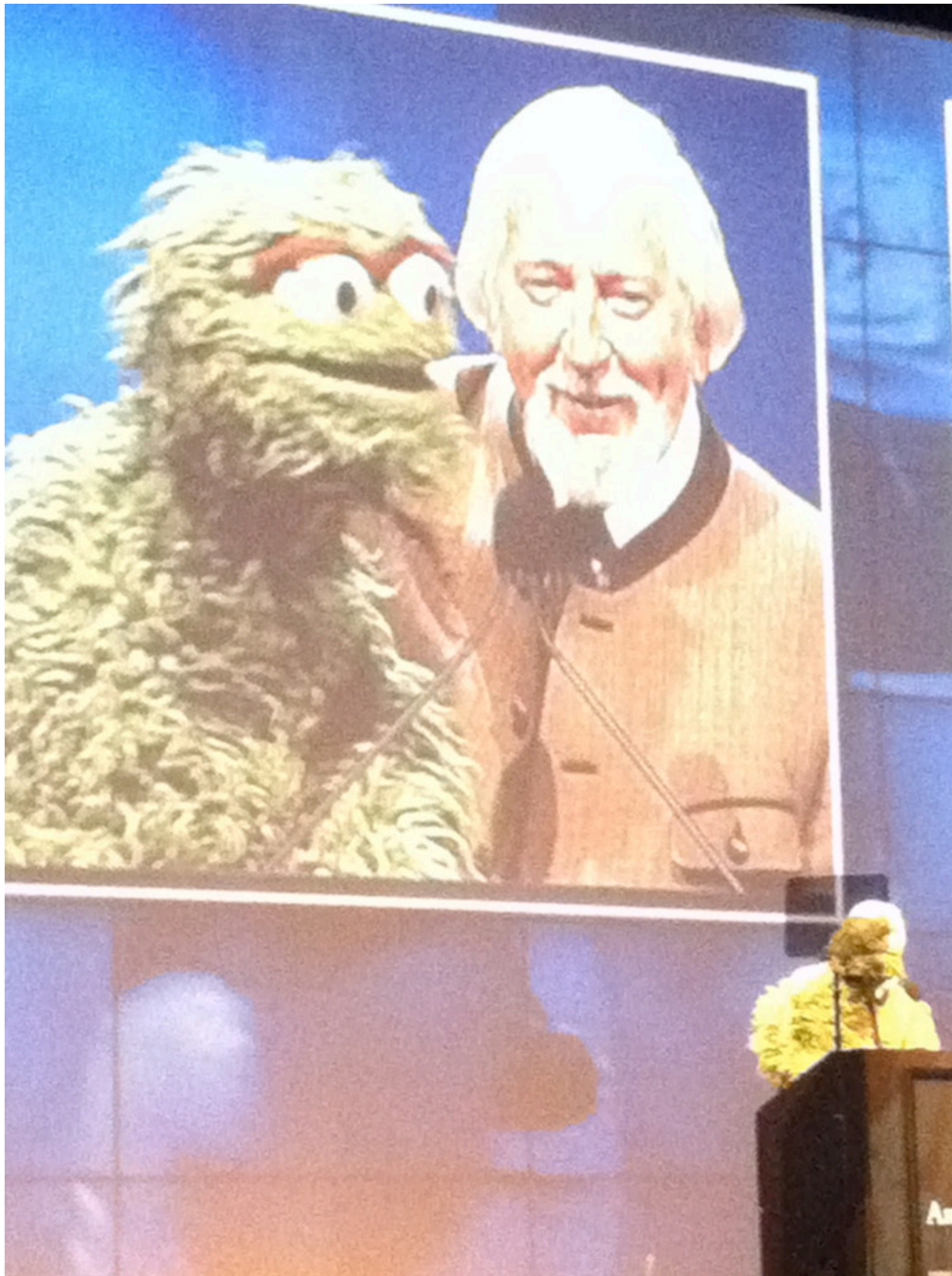
How to keep from getting a winter cold virus? Wash your hands, wash your kids' hands, and did we remember to say "wash hands?" Remember to get everyone in your family the flu vaccine, because the flu is MUCH WORSE than a cold, and you already know how miserable a cold can make your child feel.

And please do NOT use the cold remedy in the photo that Dr. Lai took at the museum. Better to ride out the winter cold with "tincture of time," and chicken soup.

Julie Kardos, MD and Naline Lai, MD

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Tribute to Big Bird and 6 year olds



We were thrilled to hear Carroll Spinney, a.k.a. Bird Bird and Oscar the Grouch, address the American Academy of Pediatrics National Conference back in 2011 (Dr. Lai's iPhone 3 or 4 captured this "high" quality photo).

Carroll Spinney, the late puppeteer who was both Big Bird and Oscar the Grouch on *Sesame Street*, had the idea back in 1969 to make Big Bird a forever 6 year old. We were sad to hear of his passing today, but glad that Big Bird's portrayal of 6 year olds lives on. Please read our post to learn more about 6

year olds.

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Thank-you Magic: Happy Thanksgiving 2019



Manners can work magic. Here's how, when, and why to say "thank-you" to your children.

"Thank-you for bringing your plate to the sink," to your 2-year-old becomes "Thank-you for clearing the table," to your 8-year-old becomes "Thank-you for cooking dinner," to your 14-year-old.

"Thank-you for putting your clothes in the hamper," to your 3-year-old becomes "Thank-you for folding your clothes," to your 6-year-old becomes "Thank-you for doing the laundry," to your 10-year-old.

"Thank-you for sharing your toy with your sister," to your

four-year-old becomes “Thank-you for babysitting your sister,” to your 13-year-old.

“Thank-you for climbing right into your car seat,” to your 3-year-old becomes “Thank-you for buckling your seat belt before I drive,” to your 9-year-old becomes “Thank-you for driving over to the store for more milk,” to your 16-year-old.

“Thank-you for the hug,” to your 1-year-old becomes “Thank-you for the hug,” to your 5-year-old becomes “Thank-you for the hug,” to your 15-year-old becomes “Thank-you for the hug,” to your 50-year-old.

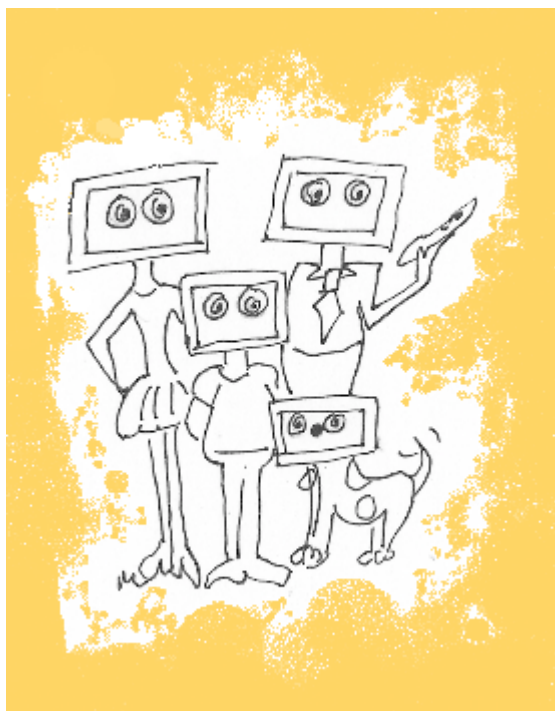
May your Thanksgiving include many servings of “thank-you.”

Happy Thanksgiving,

Julie Kardos, MD and Naline Lai, MD

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Screen time for kids: How much is too much?



When Dr. Lai's niece was in preschool she would complain of headaches- the culprit? Too much screen time and the need for glasses. Check out the post that Dr. Lai contributed to Children's Hospital of Philadelphia's *Health Tip of the Week* on screen time for kids.

Julie Kardos, MD and Naline Lai, MD
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Afraid of a tantrum? How to set limits for your child

Photo by Lexi Logan



Has your toddler ever pulled off your glasses and thrown them? Slapped another toddler at the playground? Bitten their brother? Run off in a store and ignored you when you called? Are you afraid to set limits for your child because you fear the tantrum that may result?

Yes, toddlers are cute, but left to their own devices, they grow into the school bully, the family bully, or worse yet, they don't listen to an adult and run into the street in front of a car.

Unbeknownst to you, you probably started to set limits for your child as early as 6 months of age.

If you breastfed, you may remember this scenario: you were breastfeeding your 6-month-old when they suddenly bit you very hard with their new tooth.

Did you continue to breastfeed calmly and ignore the mind

numbing agony? Did you say in a sweet sing-song voice, “Honey, biting hurts Mommy. Mommy does not like being hurt. Please do not do that again?”

If you are like Dr. Kardos and Dr. Lai, you did not have time to say any of the above, because you were suddenly in PAIN. You likely removed your baby from your breast immediately and yelled, “OW!” Your baby (like each of ours) may have cried (howled) from surprise. However, your baby probably never bit you again while breast feeding!

Fast forward to the present and imagine you are holding your 16 month old and they hit, bite, pinch, pull your hair, or pull off your glasses. Maybe they were angry, but equally possible they may have been simply excited. Even though you know they are not purposefully hurting you, it is important to stop this behavior. Say in a firm voice: “No hitting!” and put them down.

This is time-out.

Time-out does not have to be spent on a chair in the corner of the room. Time-out is not a terrible punishment. Just like in sports, it is a **pause in the play**. By giving a time-out, your child learns that they do not get more attention for mean or aggressive behaviors, but less attention. As a variation, you can time-out a toy.

What if your baby starts crying on the floor? Give them a minute to recover. Remember that time-out lasts one minute per year of age. For your 16 month old, time-out will last one minute. At two years, time out will last two minutes. When time-out is complete, offer comfort. If they repeat the behavior, put them back down again.

Your goal, when you set limits for your child, is to stop a behavior that can hurt them or hurt others.

More tips on how to set limits:

Praise them specifically at every opportunity.

For example, "Good job putting your toys back into the box," or "I like how you remembered to take my hand when we cross the street," or "I like how you sit in your chair at dinner instead of standing up." You will be amazed at how often children repeat desired behaviors that you point out to them.

Follow through on your requests.

If your toddler got a hold of a pair of scissors, you would take those scissors away immediately, without thought or fear about their feelings. You would put your child's immediate safety ahead of their desire to play with scissors, and you would not stop to explain why they should give up this new-found plaything. Likewise, if you tell your child to come to you for any reason, be ready to physically go and lead them if they choose to ignore you. For instance, at a party, wait to tell them to come until you are ready to go. Otherwise they will learn that you "cry wolf" and will ignore you.

Make consequences logical and immediate for undesirable behaviors.

If your child throws a toy train at his friend's house, say "No throwing trains!" and take the train away for a time-out. Telling them that "you are in trouble when we get home" means nothing to a toddler.

Refrain from explaining too much.

Toddlers have a TINY attention span. Just give them a command or an explanation that is 3-4 words or less. For example, "No hitting, it hurts!" is enough. Telling them that hitting hurts

others, asking how would they like to be hit and telling them about the need to be kind, is wasted effort. The time for longer explanations is when they are developmentally capable of putting themselves in another's shoes, around age six years for most children.

Label the behavior as bad, not the child.

Say "No throwing sand!" not "You are bad for throwing sand!"

Remember to set expectations and teach which behaviors are not acceptable.

Toddlers are not mind-readers. You need to tell them not to open the trash can and rummage through it, otherwise they will not know any better.

Seize the opportunity to turn a negative behavior into a positive behavior.

For instance, as you see your child raise their hand to hit you, firmly hold their wrist and say "Don't hit. Soft touches," and simultaneously bring their hand to pat your cheek. This will give you a chance to praise your child.

Do not fear the tantrum.

Toddler tantrums are NORMAL reactions to feeling angry or frustrated. Many toddlers throw tantrums in response to your telling them "no" or "stop." It is not fair to expect toddlers not to throw tantrums. Just put on your bored face (and some ear plugs) and wait for it to be over.

If a tantrum immediately occurs, remind yourself that at least you stopped your child from hurting themselves or others. Tantrums don't hurt anyone. You can read more about how to manage tantrums [here](#).

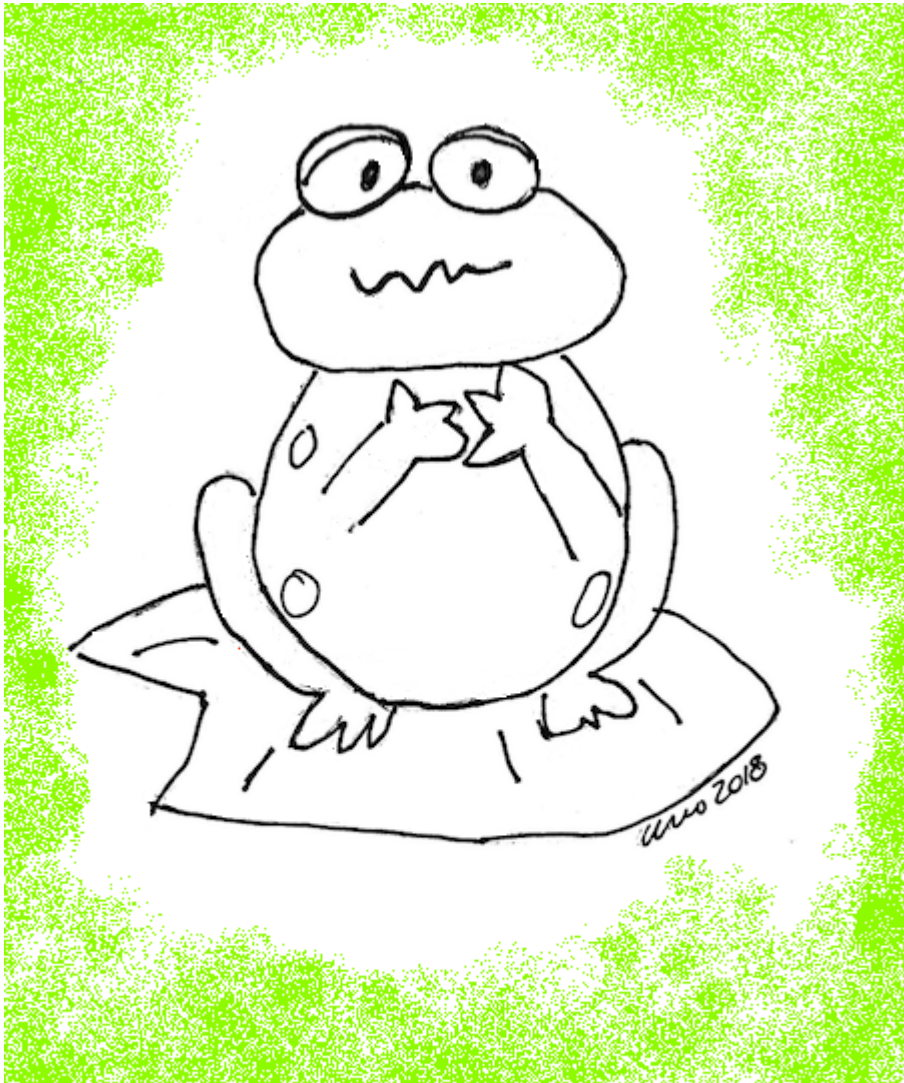
Set limits for your child.

When you set limits for your child, you teach them to behave in ways that will keep them and others safe. Act confidently when you set limits, and your child will learn to interact appropriately with others and gain self-control.

Julie Kardos, MD and Naline Lai, MD

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All about strep throat



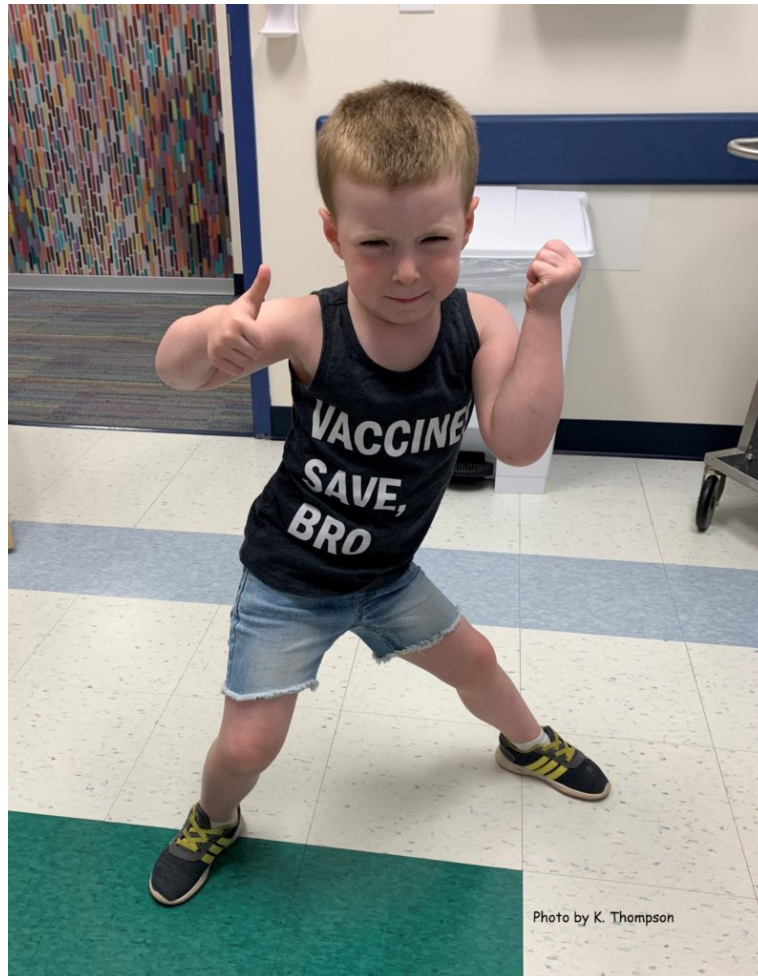
Freddy the Frog didn't quite know how to describe the uncomfortable sensation in his throat.

Now that school has been in session for over a month, it's not too early for you to learn all about strep throat. It might even save you a trip to the doctor's office!

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Flu vaccine 2019-2020



Excited for his Germ Fighters, this kiddo wears his “Vaccines save, bro” shirt for all of his pediatric office vaccine visits.

The US flu vaccine 2019-2020 is here!

Who should get it?

Unless medically contraindicated, all kids aged six months and older should get the flu vaccine. Your child’s pediatrician will ask you questions to be sure the flu vaccine is appropriate for your child.

Is the flu vaccine different this year from last year?

Yes, so even if your child received a flu vaccine last year, they should get another one this year. The predicted flu strains change yearly so manufacturers make up a new batch of flu vaccines every year.

Which flu vaccine should they get- the shot or the-spray-in-the-nose kind?

All kids can get the shot. Kids two years and older without certain other medical conditions can get the nose spray. If your child is eligible for both, then the best type to get is the one that is available- they are both effective.

When should they get the flu vaccine?

The goal is to be completely immunized for this year's flu season by Halloween- the end of October. When it comes to the flu vaccine, "better late than never" also holds true. It is impossible to predict precisely when the flu will hit and how long it will circulate. So even if it's mid winter, get the vaccine if it is still available.

How many doses do they need?

If your child is under the age of nine years and never had a flu vaccine or had only one prior dose of flu vaccine before the date of June 30, 2019, then they need two doses separated by a minimum of four weeks. All other kids need one dose only every year.

What are the common side effects of the flu vaccine?

The injectable brands of flu vaccine, like all shots, can cause mild symptoms such as soreness or redness in the body area where a child gets the shot, fever, or fatigue. The nasal spray version can cause some nasal congestion, sore throat, fever, and muscle aches.

Can any flu vaccine cause the flu?

No.

You can read a summary about the nasal spray form of the flu vaccine [here](#) and well as the injectable form of the flu vaccine [here](#). Both of these Vaccine Information Statements expand on all of the above points.

Still on the fence about flu vaccine 2019-2020?

Last year, 116 children in the US died from the flu, and almost half of these children were previously healthy kids. The average age of death was six years. Of those who died and COULD have received flu vaccine- meaning the ones that were older than 6 months of age, 70% did NOT receive the flu vaccine. So flu vaccine might have averted more than half of these flu deaths.

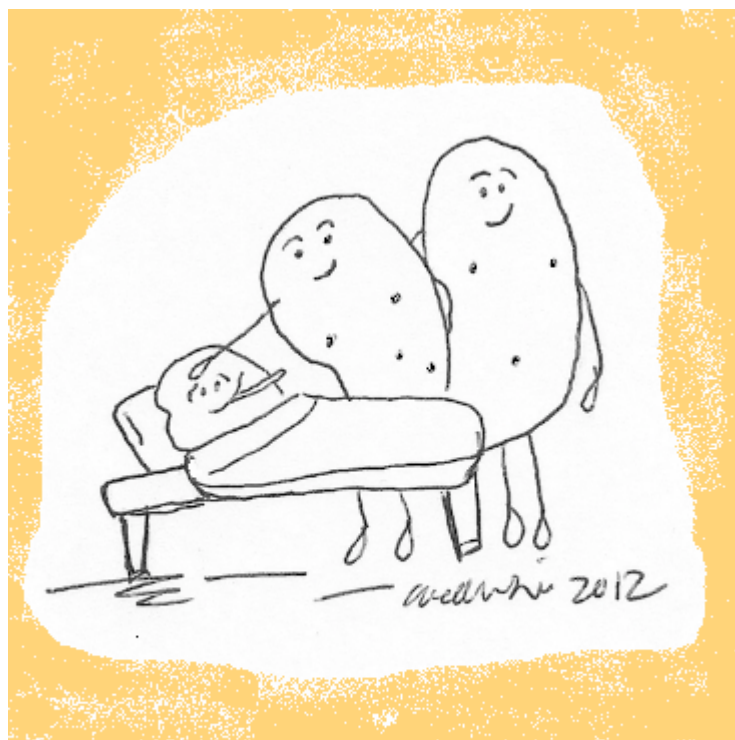
Additionally, of children last year in the hospital with flu, the majority did NOT receive flu vaccine. The flu killed thousands of adults last year. School-aged children are the group most likely to spread the flu germs. Therefore, flu vaccine not only can protect your children and those too young or too ill to be vaccinated, but also protects your children's grandparents.

[Click here](#) for an exhaustive review of the American Academy of Pediatrics recommendations for this year's flu season. We hoped to provide you all with the most important highlights. You can read our flu vaccine myth-busters [here](#).

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Treating fever: some like it hot!



I don't think he is playing games... this time he really is a hot potato.

While most of us enjoy back-to-school night, we do NOT enjoy back-to-school fever. Here is our guide for evaluating and treating fever in your child.

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School avoidance: Why won't

my child go to school?



Happily hopping off to school – image by Sasin Tipchai from Pixabay

Do you recognize these school avoidance scenarios?

- Your child feels sick every school-day morning, but not on weekends.
- Your kid outright refuses to get on the bus or into your car on school mornings.
- After witnessing another kid throwing up in school, your kid refuses to go back to school in fear that they might throw up in school.
- Beginning with the second or third day of school, your child says it doesn't "feel right" to be away from mom or dad for the day.
- Your middle schooler or high schooler gets ready for school and then feels too tired to actually leave the

house. They go back to sleep for several hours and that convinces you and them that they needed to stay home and rest.

It can happen at any age, in any grade. School avoidance is the older kid version of daycare separation anxiety.

Before getting into the why's of school avoidance, let's jump to the most important part of how to treat school avoidance: **While it may feel difficult for you and cause tears to flow, you need to get your school-avoiding child BACK TO SCHOOL!**

All other treatment modalities and all other issues can be dealt with while your child continues to attend school. The longer you let your child stay home, the more difficult it will be for them to return to school.

Can there be legit reasons that your child avoids going to school? Of course! Think about the following factors that might come into play:

- Is your child being bullied? Or is he, in fact, the bully?
- Can your child not see well enough or hear well enough to learn in the classroom?
- Is the teacher "a yeller" and does that scare your child? Or does the teacher fail to control the classroom, and the resulting chaos causes your child discomfort?
- Is your kid holding in pee or poop to avoid using the school bathroom? Are they afraid of "foreign" bathrooms? For older kids, are other kids vaping in the bathroom and your kid doesn't want to be around that? Is the teacher not allowing your child to use the bathroom when they need it? Bathroom woes cause a lot of anxiety in many of our patients.
- Has something changed your family's structure? Did a parent move out? Is someone very ill? Did a caretaker

die? Are they now afraid you will die or disappear while they are away at school?

- Was your child's sleep disrupted? Are they exhausted by late night phone texts or are they having difficulty calming their mind before bedtime?
- Are sick days "fun" for your child? When they are home, do they receive special privileges such as playing on their phone all day?
- Some kids just cannot come up with a reason. They just "don't want to go" to school.

Absolutely talk to your child about why going to school is hard for them. However, have the conversation AFTER school or during the weekend, not right before school. On school mornings, stick to the morning routine and send them to school.

Often, kids "listen" better to people other than their parents. Enlist the help of a neighbor or relative to get your child on the bus. Have a plan in place with school for when they arrive. A teacher who reinforces how they are looking forward to seeing your child the next day will make a world of difference.

First take your school-avoiding child to their pediatrician to evaluate for any medical causes of their symptoms. Ideally this appointment takes place before or after school hours but not during school. Your pediatrician will give advice specific to your child and may recommend therapists as well. Kids who show signs of depression or anxiety can benefit from cognitive behavior therapy, and a select few might need medication. For kids who feel sick, often simply the reassurance from a pediatrician that they are healthy is enough to get a kid to school. The adage "little pitchers have big ears" is true. Share any information you would like to discuss privately with the pediatrician beforehand in a separate communication.

Parents and kids, together with a therapist, your child's

teacher or school principal and pediatrician, can work on ways to smooth your child's return to school. Again, keep in mind that the longer your child stays away from school, the harder it is for them to return.

What if you are not sure if your child is actually sick on a particular school morning? For kids who rarely miss school, you can choose to err on the side of caution and give them the morning, or the day, off. However, if your child had one time of feeling sick, stayed home, and then appeared well within 30 minutes of missing school, or for the teen who went back to sleep for several hours and then appeared quite well afterward, only to complain of feeling too tired the next day, then parents need to enforce tough love. Kids who feel sick but have no fever and are not vomiting can and should go to school.

Kids take cues from their parents. Anxious kids cause their parents to feel anxious, who in turn ricochet that anxiety right back to their kids. Or sometimes parents are the ones who have anxiety about their children leaving them. If you recognize this propensity in yourself, then you may benefit from your own therapy as a way to help your children manage their anxiety. It's like when you fly in an airplane and heed the instructions: if needed, place the oxygen mask over your own face first, before assisting others.

Don't let the morning routine paralyze your family. Enjoy the school year.

Julie Kardos, MD and Naline Lai, MD

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All cleaned up!



All cleaned up! Someone hacked into our blog and inserted links to ads without our knowledge and certainly without our endorsement.

We combed through ALL of our blog posts and removed all links to ads, and we added some security to our site. You will note that while we link to our own prior posts and to scholarly sources, we do not advertise on our blog and we do not insert links that endorse any particular products.

Thanks for your patience while we cleaned up !

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