Baby and toddler nails: Tricks for managing your munchkin's mani-pedi



The prom preparation aftermath

It's not your imagination: baby and toddler nails are funky and warped. Now add the fact that babies and toddlers wiggle and squirm, and taking care of your young child's nails will appear to be a daunting task.

Even soft newborn finger nails leave significant scratches on newborn faces. Newborns need their first "manicure" within days of birth. Although the nails are long enough to scratch, most of the nail is adherent to underlying skin. A nail clipper can not get underneath the edge of the nail easily. We recommend using an emery board or nail file for the first few weeks of nail trimming. File from the bottom up, not just across the nail, in order to shorten and dull the nail.

Babies gain weight rapidly in the first three months at a rate of about one ounce per day, and they grow in length at a rate of about an inch per month. Their finger nails grow rapidly as well and therefore need trims as often as two or three times a week. Toe nails grow quickly as well but because they do not cause self-injury, infants seem to be okay with less frequent toe nail trimming.

Once the nails are easier to grab, you can advance to using nails scissors or clippers. Dr. Kardos used to hold her babies in a nearly sitting position on her lap facing outward. Once you have a good hold, gently press the skin down away from the nails and then clip or cut carefully.

Unfortunately, no matter how careful you are, many well-intentioned parents end up cutting their child's skin at some point. Both Dr. Kardos and Dr. Lai have nicked their kids accidentaly. Dr. Kardos recalls snipping a bit of skin from one of her twins when he was a few months old. Picture a tiny benign paper-cut that seems to cause a disproportunate amount of bleeding. He wasn't even all that upset, but the guilt! If you accidentally cut your child, wash the cut with soap and running water to prevent infection and apply pressure for a few minutes with a clean wash cloth to stop the bleeding. Avoid band-aids: they are a choking hazard in babies who spend most of their waking moments with their fingers in their mouths. Thankfully, rapidly growing kids heal wounds rapidly.

While Dr. Lai gave most of her kids manicures while they were sleeping, Dr. Kardos trimmed her kids' nails while awake to get them used to the feeling of a "home manicure." She likes to think this practice avoided some later toddler meltdowns

over nail trimming. However, as she found out in one of her three kids, some kids are just adverse to nail trimming, or have sensitive, ticklish feet and balk at trims. Yet, trim we must! Clip an uncooperative toddler's nails about 10-20 minutes after she has fallen asleep- this, or wait until you have another adult at home with you. Have your helper hold onto your child's hand or foot while distracting the toddler with singing, book reading, or watching a soothing video together. Then you can (quickly) trim nails.

However, even in infants, the sides of big toe nails grow into the skin. Luckily the nails are very soft, and with some soaking in warm water, you can pull the skin away from the nail and cut the nail to avoid having them dig in and result in infection, or paronychia.

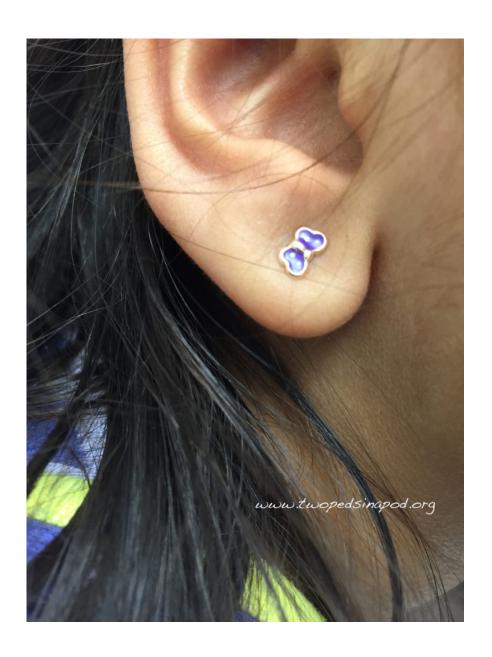
While it's tempting to complete your child's mani-pedi with a coat of nail polish, keep in mind that a young children spend a lot of time with their hands, and their toes, in their mouths. We've seen kids as old as ten years bite on their toe Unfortunately, the nail polish on your bureau may contain toxic hydrocarbons such as toluene formaldehyde. Even non-toxic nail polishes will still contain dyes, and just because a manufacturer uses the term non-toxic, it doesn't necessarily mean a product is absolutely harmless. There are no specific standards for the use of the Bottom line, the only route that avoids any term non-toxic. chemicals is not to apply any polish in the first place. (If you are wondering about any cosmetic, the California department of public health keeps a database of cosmetics with " ingredients known or suspected to cause cancer, birth defects, or other reproductive harm.")

Who ever thought parental obligations would include cutting someone else's finger and toe nails? If you haven't perfected the process yet, take heart. You'll have plenty of practice over the years, and if you are lucky, you'll get a chance like Dr. Lai did last weekend to help prep nails for the prom.

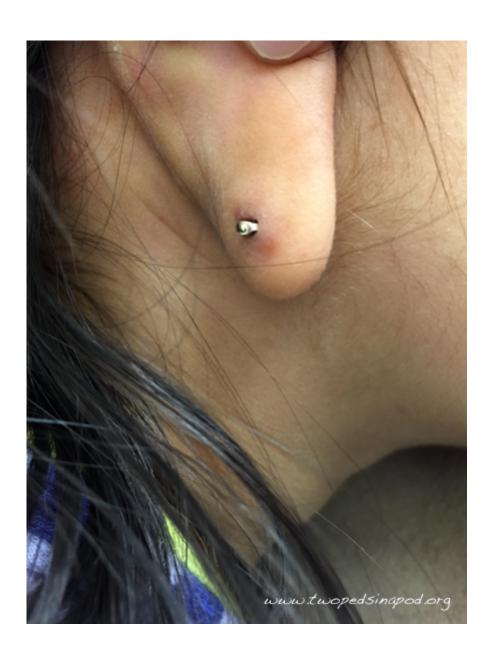
Julie Kardos, MD and Naline Lai, MD © 2010, rev 2016 Two Peds in a Pod®

Pretty earrings- but what you see in the back will surprise you

We see this a couple times a year… an earring which looks fine when viewed from the front…



mis actually embedded when viewed from the back. When you flip up this child's ear lobe, you will notice how the skin has nearly completely engulfed the earring back. Young children heal well and the skin in the back of an ear can grow over the back of an earring fairly easily. So, change earrings often and "watch their backs." It's not enough just to spin the earrings around from the front.



Naline Lai, MD and Julie Kardos, MD © 2016 Two Peds in a Pod®

Mom "nose" best: Happy

Mother's Day 2016



This Mother's Day, we honor Dr. Kardos's mom, who passed earlier this year.

Dr. Kardos and I had been planning a post on nasal congestion in kids, but because we couldn't have said it any better, we share a poem that Dr. Kardos's mom wrote on this topic.

-Drs. Lai and Kardos

Runny Noses

My grandsons seem always to have runny noses;

They drip from their noses and land on their toeses;

One kid especially, his name is Aaron,
Will hug you so tight that what's runnin' you're sharin'.

Alex will wipe with the back of his hand;
His runs in the house, on the beach, on the sand.

Jacob is older and he'll use a tissue,

So his runny nose is not much of an issue.

In case they have colds, I hand each one a sweater,
But wearing a sweater does not make things better.
Allergic to dust? That's the answer I'm seeking;
But while I keep dusting, their noses keep leaking.

They eat well and sleep well and play hard all day
In spite of their dripping that won't go away.
So I've come to conclude, and I'm happy to say
That the noses of kids prob'ly just come that way.

by Felice Kardos (1943-2016)

The best sunscreen: questions answered



An inadvertent sunburn tattoo

I was greatly relieved recently when my teen arrived back from a music department trip to Disney without a sunburn. I had pictured a bright red cherry tomato coming off the plane. For those of us stuck in the middle of an East Coast perpetual rain cloud, it's hard to believe that anyone outside of the South needs to worry about sunscreen. But soon enough, you will be scratching your head in a pharmacy aisle asking yourselves these questions:

What is SPF?

- SPF stands for Sun Protection Factor. SPF gives you an idea of how long it may take you to burn. SPF of 15 means you will take 15 times longer to burn without sunscreen. If you would burn after one minute in the sun, that's only 15 minutes of protection!
- The American Academy of Pediatrics recommends applying a minimum of SPF 15 to children, while the American Academy of Dermatology recommends a minimum of SPF 30. We both apply sunscreen with SPF 30 to our own kids (mom hint: the high SPF sunscreens tend to be watery).
- Apply all sunscreen liberally and often— at least every two hours. More important than the SPF is how often you reapply the sunscreen. All sunscreen will slide off of a sweaty, wet kid. Even if the label says "waterproof," reapply after swimming.
- Watch out for sunlight reflecting off water as well as sunburning on cool days. One pediatrician mom I know was aghast at seeing signs posted at her kid's school reminding parents to apply sun screen "because it will be in the 80's." Kids burn on 60 degree days too. Lower temperatures do not necessarily mean less UV light.

Why does the bottle of sunscreen say to "ask the doctor" about applying sunscreen to babies under 6 months of age?

- Sunscreens were not safety-tested in babies younger than 6 months of age, so the old advice was not to use sunscreen under this age. The latest American Academy of Pediatrics recommendation is that it is more prudent to avoid sunburn in this young age group than to worry about possible problems from sunscreen. While shade and clothing are the best defenses against sun damage, you can also use sunscreen on exposed body areas.
- Clothing helps to block out sunlight. In general, tighter weaves protect better than loose weaves. Expensive "sun-protective clothing" is not always

better— a study from 2014 suggests regular clothing may be as protective.

- Hats help prevent burns as well.
- Remember that babies burn more easily than older kids.

Which brand of sunscreen is best for babies and kids?

• Although clothing and shade block harmful rays the best, no one brand of sunscreen is better for children than another. We both tell our patients to apply a "test patch" the size of a quarter to an arm or leg of your baby and wait a few hours. If no rash appears, then use the sunscreen on whatever body parts you can't keep covered by clothing. Look for UVA and UVB protection. More expensive does not always mean "better" and SPF above 50, according to the American Academy of Dermatology, has not been proven to be more effective than 50.

What do we know about the ingredients in sunscreen such as oxybenzone? In the United States sunscreen ingredients are considered medications and are regulated by the FDA. Oxybenzone is one of the oldest broad-spectrum (UVA and UVB) sunscreens, and was approved by the FDA in 1978. Oxybenzone's main side effect is that it can cause allergic reactions of the skin. Recently, some people question whether oxybenzone can be a hormone disrupter and have questioned the use of oxybenzone. At this point, no hormonal disturbances have been clearly found in humans and the American Academy of Dermatology continues to support the use of oxybenzone.

Sunscreens made with zinc oxide and titanium dioxide (the white stuff on a lifeguard's nose) have not garnered any questions nor sparked any debate about safety. Interestingly, zinc oxide is not only an effective sunscreen but also you will recognize it as the main ingredient in many newborn diaper rash creams.

Any info about the popular sprays? For spray formulations of

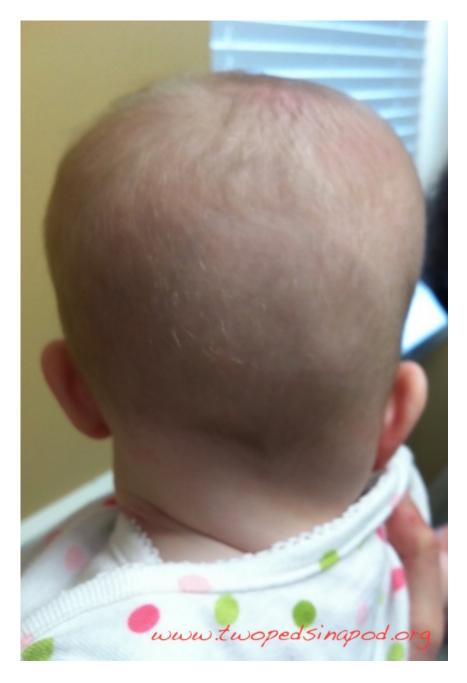
any type of sunscreen, many doctors are concerned that any aerosolized oily substance will irritate the lungs and are looking into long term effects now. Avoid spraying sun screen near a child's head to avoid inhalation. Also with the spray, some dermatologists worry that people might not be as thorough when they apply a spray as when they apply a cream.

Can I use last year's sunscreen? Most sunscreens have expiration dates, as long as your bottle hasn't expired, then it should be effective. In general, sunscreens are designed to last about three years before they expire.

Remember when we used to call sunscreen lotion "suntan lotion," and when tolerating red, blistering shoulders was considered a small price to pay for a tan? Live and learn.

Naline Lai, MD and Julie Kardos Two Peds in a Pod® rev ©2016 , 2015

Why is my baby's head flat? About plagiocephaly.



Squeezed through the canal, birth many babies are born with pointy, cone-shaped heads. Others. delivered by caesarian section, start off life with round heads. Few babies begin with flat head. But a s parents put babies on their backs to sleep in accordance with <u>Sudden</u> <u>Infant Death Syndrome</u> prevention quidelines, babies are developing flat heads.

Called positional plagiocephaly, a young infant's head flattens when prolonged pressure is placed on one spot. Tricks to prevent positional plagiocephaly all encourage equal pressure over the entire head. Because babies' heads are malleable, parents can prevent and treat the flatness. In fact, the flat shape begins to correct itself as babies spend less time lying down and more time sitting and crawling. Additionally, increased hair growth hides some of the flatness.

To prevent positional plagiocephaly, place your baby prone (belly down) frequently WHILE AWAKE, starting in the newborn period. This tummy time decreases pressure on the back of the head. Some babies are not fond of tummy time and will cry until they are back on their backs. For those kids, check out our post on making tummy time more tolerable for your baby.

Encourage your baby to look to both sides while lying down. Too much time turned to one side will cause flattening on that side. Alternate how you place the baby in crib so that sometimes she turns to the right and other times she turns to the left to face into the room and away from the wall. If your baby seems to prefer looking only to the right or only to the left, place toys or bright objects toward the non-preferred side. If bottle feeding, switch off which arm you use to feed your baby, so that the baby sometimes turns to the right and sometimes to the left. If breastfeeding, start and end on the side that the baby tends to avoid. These actions will help prevent neck muscles from becoming too tight on one side and thus allow your baby to turn easily to both sides.

Some babies wear helmets to correct their abnormal head flattening. Neurosurgeons, who are head and brain specialists, and plastic surgeons prescribe these helmets for babies who have extreme flattening. Fortunately, the majority of babies with positional plagiocephaly do not need to wear helmets.

You also may have heard of babies who need corrective surgery for an abnormal head shape. This condition, called craniosynostosis, is rare. Pediatricians monitor the size and shape of the head, check the soft spot on the top of the head and for ridges on the skull at every check-up. A baby's skull develops in pieces as a fetus, and these pieces eventually come together at predictable places called sutures. If the pieces come together too early or the soft spot closes too soon, corrective surgery may be needed.

So, avoid head flatness by rotating your baby's position frequently (think rotisserie chicken!) and provide plenty of "tummy time" when awake. Start when the baby first comes home.

If you are worried about your baby's head shape, just head on over to your baby's pediatrician and bring up your concern. It is unlikely that your concern will "fall flat."

Julie Kardos, MD and Naline Lai, MD

Before the Zika virus: A look back at Rubella and microcephaly



photo credit: Laikipia Pixabay.com

The Zika virus in the news these days reminds us of another microcephaly-causing virus which scourged our world in the not-so-distant past. In the years right before the Two Peds doctors were born (late 1960s), the virus Rubella routinely swept through the United States and the rest of the world. The airborne germ Rubella, just like the mosquito-spread Zika virus, caused most people just a mild illness that they usually never even knew that they had. After they were sick, they became immune to the virus. But when pregnant women contracted Rubella early in pregnancy, their unborn children sometimes ended up with microcephaly.

Microcephaly is a condition where a small, underdeveloped, or abnormal brain leads to a small head at birth. Many children with microcephaly have significant mental disabilities.

So what happened to Rubella? It's the R in the MMR vaccine. We give this vaccine to all children, first at 12-15 months, and again at 4-6 years of age. We vaccinate girls to protect their unborn fetuses when they are pregnant, and we also vaccinate boys. Although boys will not become pregnant, they can contract the disease and spread it to others who are pregnant. It is standard practice for obstetricians to test all of their pregnant patients for immunity to Rubella. If a woman is not immune, she is given the MMR vaccine after delivery to prevent coming down with Rubella during future pregnancies.

Because of the success of this safe vaccine, it is extremely rare to have child born with Congenital Rubella Syndrome and its accompanying problems. The syndrome not only included the mental impairments associated with microcephaly but also was associated with blood disorders, heart defects, deafness, visual impairment, developmental delay, and seizures. In the United States where the vaccine rates are high enough, no cases have been reported since 2004. In the rest of the world, cases still occur in countries with limited access to vaccines against Rubella. Approximately 100,000 cases of Rubella worldwide per year still occur <u>according to</u>

the Centers for Disease Control.

Scientists are working on a vaccine against the Zika virus because, as is often the case, preventing a disease is often easier, less costly, and more successful than attempting to cure it. For a basic explanation of how vaccines work, please see our prior post on this topic. Trials for a vaccine for Zika may begin as early as summer 2017.

But if we look at history, Rubella was once a dreaded virus too. Now, with the widespread use of a vaccine, although still dreaded, the rates of Rubella have dropped dramatically. Zika hopefully will not be far behind.

Naline Lai, MD and Julie Kardos, MD

©2016 Two Peds in a Pod®, updated April 2017

Dressing children for cold weather



Dr. Kardos's fourth child wears her coat in the snow without fuss.

There is snow on the ground, so every morning I ask my elementary school-aged son if he wears gloves and a hat at recess. Every morning I get back the same blank stare and the question, "Why?"

It's an age-old battle between parents and kids. Parents insist the kids are underdressed and the kids insist they are overdressed. In fact, I remember in fourth grade many an embarrassing moment when my mother would suddenly appear with mittens at the bus stop. So how can parents decide how warmly to dress their children?

Infants are particularly poor at regulating their own temperatures. In general for cool weather, dress a baby in one more layer of clothing than you are comfortable wearing. Another good way to keep a newborn from losing too much heat is to keep the hat on for a couple of weeks. It's not an old wives tale; people do lose a fair amount of heat through their heads.

However, beware of over-swaddling. Over-heating has been

suggested as a factor in death from SIDS (Sudden Infant Death Syndrome). If your partner insists on keeping the house the temperature of a sauna and you are sweltering all year, then dress your baby in a simple onesie. Just as infants have difficulty regulating body temperature in the cold, they also have difficulty regulating their temperature in heat. In general, if you feel cold, your baby will feel colder. If you are warm, your baby will feel warmer than you do. There is an official indoor temperature recommendation for daycare centers: in cold weather, keep indoor temperatures to 68-75F.

Sleep always seems to bring out red cheeks and sweaty heads in toddlers. Are they too hot or cold? As you peek in on them after tucking them to bed, feel their hands and cheeks. Warm (but not flushed) cheeks mean they will be comfortable even if their hands are a bit cool.

For older kids, simply dress them the same way you dress yourself. Make sure areas prone to frostbite such as toes, ears and fingers stay warm. Quick tidbit: do not re-warm nearly frostbitten areas by massaging. The rubbing action causes more injury. Instead, place the area in warm water.

Sorry, you can't use the rational, "Dress warmly or you will catch a cold." Cold temperatures do not cause colds. Germs cause colds. However, there is one study on mice that suggests cooler noses allow the rhinovirus (a common cold germ) to grown more easily. Also, there is a phenomenon called nonallergic rhinitis which manifests itself as a drippy nose which can be set off by cold air. Likewise, inhaling cold air can set off coughing in kids with asthma. For more about the health benefits and hazards of cold weather for both kids and adults, check out this article from Harvard Health Publications.

Why it's not "cool" to stay warm, I'll never understand. At least for the older boys, parents don't need to take into account the weather. The kids will wear hoodies whether it's

seven or seventy degrees outside.

Naline Lai, MD with Julie Kardos, MD ©2016 Two Peds in a Pod® revised 1/2019

(For a laugh: we love this tongue-in-cheek post about how kids dress for cold weather).

Prevent rotten teeth



isted on many pediatric developmental milestone charts, there is the six month milestone, " can hold their own bottle." Unfortunately, this is the last thing we want our patients to do. Babies who feed by holding their own bottle tend to suck

for a longer period of time than when they are at the breast or when a parent holds the bottle. Prolonging the time any sweet substance, whether breast milk, cow's milk, or watered down juice is in the mouth can produce cavities. Even in toothless babies, the sugar can seep through gums and rot the teeth producing cavities called "bottle rot" in the two front teeth. As shown above, sucking on a sippy cup constantly can also produce the characteristic damaging pattern and cause rotten teeth.

Sippy cups are like daytime bottles. In the "old days" if a child wanted a drink, the parent would give him a cup, he would take his drink, and then the cup would be put away so it would not spill. Sippy cups are easier to leave around for kids to grab when they need it. They are easy for kids to carry and graze from while playing. They don't make a mess in the car. But because kids can nurse a sugar-containing drink all day, it becomes easy for a sweet drink to have constant contact with teeth, thus producing the problem you can see in our photo.

How to prevent rotten teeth:

- Once they are toddlers, give your kids beverages at meal or snack times only. Let them drink and then put the cup away. Otherwise, forward to the future, and imagine your sippy-cup-toting toddler becoming the perpetually-drinking-coffee office coworker down the hall. We're sure your coworker's teeth are not pretty. The only exception to giving a beverage only at meal or snack times is the quick after dinner cup of milk when they are very young (toddlers). If your toddler drinks a cup of milk before bed, make sure he brushes his teeth before going to sleep. Brush-book-bed is a good routine to institute.
- Limit juice. Whether 100%, or organic, or watered down, juice contains enough sugar to rot teeth over time. Dr. Kardos remembers a friend lamenting, "I bought only 100%

juice for his sippy cup and had no idea it could hurt my son's teeth like that!" Eventually, her friend's son underwent a tooth repair under anesthesia.

- Encourage good tooth brushing at least twice a day with fluoride-containing toothpaste, starting when your child gets his first tooth. Before that point, wipe out your baby's gums with a wet gauze or wash cloth.
- Schedule regular dental visits for your child starting around or soon after his first birthday. Going to the dentist is a vital part of preventing rotting teeth.
- Ask your pediatrician or dentist if supplemental fluoride may be helpful.

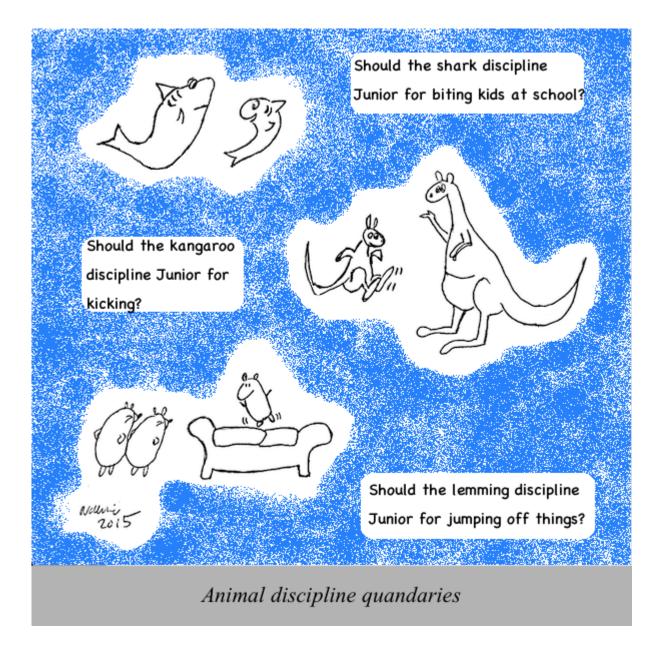
Some final food for thought: snacks of pouch-pureed fruits and vegetables are increasing in popularity. We don't think we need to wait for a scientific study to say that prolonged sucking on a packet of "healthy" fruit puree will probably result in the kind of teeth pictured above .

For more tips check out the American Academy of Pediatrics and the American Academy of Pediatric Dentistry.

Julie Kardos, MD and Naline Lai, MD

©2016 Two Peds in a Pod®

Raise a well-behaved child part 2: discipline without spanking



Questions: Why does that child run into the road? Why does that child hit other kids?

Answer: Because no one ever taught him not to.

Toddlers need lots of teaching, so where do you start? To help teach your on-the-move, act-first-and-ignore-the-consequences toddler how to become more civilized, first make sure BOTH parents agree on the rules. Teach your toddler that **you mean what you say.** When you call your toddler and he does not come right away, GO TO HIM AND LEAD HIM BY THE HAND OR PICK HIM UP no matter what the situation. Also remember that civilizing a toddler is a work in progress, not an afternoon project.

These are negative behaviors we want to train out of our toddlers: hitting, kicking, biting, pinching, and in any way inflicting pain on others. Excitement and anger are normal reactions in toddlers, but these negative responses to excitement or anger are always unacceptable.

Before we go further let's review normal toddler behavior. These are things that you just can't punish a toddler for, but rather you can try to capture on camera and to enjoy the memory later:

- Making a mess. All toddlers are messy. They can't help it. They don't have the fine motor coordination to prevent dropping food or for keeping toys contained to one area. (I am recalling with a smile a home-movie of my twin toddlers double-fisting a spaghetti dinner). Besides, to a toddler (and to many adults for those of you who used to watch Dave Letterman) it's always fun to watch things splat on the floor. That being said, kids are never too young to teach "clean-up." Make it fun and light-hearted, not onerous. All kids love to use brooms, so encourage them to help clean up the Cheerios that coat the floor after a meal.
- Touching everything. They will touch themselves and others- they are just curious.
- Speaking their minds. Toddlers are truthful and literal, not malicious or insinuating. My oldest son at age 3 saw a man with one arm and said very loudly, "Look, Mommy, that man has only one arm!"

How to discipline:

Catch 'em being good. This works wonders if you are consistent about it. Be specific about your praise. Tell your toddler, "I like how you are not hitting your brother right now," or "Good job playing quietly while your baby sister naps," or "Great job putting the legos away in the box!" instead of "You are being good now."

Teach consequences: If he throws a toy, say "NO throwing that toy," and take the toy away for a minute or two to make your point.

Chastise the behavior, not the child. Say to your child "No hitting," not "You are bad for hitting."

First make it clear that a behavior is not acceptable. Toddlers are not mind readers. If you never told her, "Don't rummage through the garbage can," she will not know better.

Parents need to be on the same page. Discuss in advance, not in front of your child, what the consequences are for misbehavior. If one parent gives in to a tantrum and one does not, your toddler will become confused, then anxious, and then learn how to pit parents against each other. He will throw longer, louder, more destructive tantrums because he knows, if he hangs on long enough, ONE person will give him what he wants.

Have immediate consequences. Avoid "Wait until your mom gets home." Also avoid "When we get home from the store, you are in trouble." As determined as they can get, toddlers also paradoxicaly have the attention span and memory of a flea. However, in order to give an appropriate, immediate consequence, plan your consequence before you need it or else you may give out one that you regret.

For example, if you and your toddler are having a fine time at the playground with other parents and their toddlers, you may regret this warning: "Stop hitting Billy with your toy car or we will leave the playground." If your child ignores you, then you are stuck leaving the playground. And leave, you must! If you fail to heed your own warning, your toddler will learn that you do not mean what you say. He will see you as a wimp and will always try to take advantage of you. A better way to stop your kid is to say, "Stop hitting Billy with your toy car or I take that car away from you." Then take it away if he

continues the behavior. Here are the benefits:

- 1-Teach your child that you mean what you say.
- 2- Protect others from your toddler's dangerous behavior.
- 3- Preserve your own sanity. Why should you have to miss out on talking to other mommies while enjoying the day with your toddler? Sure, your toddler may tantrum in response to his lost car, but after the tantrum your toddler and you can continue to have fun at the park.

Don't nag. Toddlers are professionals at ignoring parental nagging. Just follow through on your consequence for failure to obey you.

Ignore whining. Whining is very hard to stop once you allow your toddler to get what he wants when he whines. Instead, ignore his whining and nagging (just as your toddler does so easily and naturally when you do it to him). Only grant him your attention when he uses his regular voice. Tell him once: "I can't understand when you talk that way. I only understand your Joey (insert your child's name here) voice." Then ignore him until he uses his "regular" voice.

Catch teachable moments. If you see another toddler misbehaving OR behaving well, point out the behavior to your toddler. You could say, "Oh, she hit her sister. I am so glad you are not hitting now. You know that our rule is No Hitting!" Also use books to point out desirable behavior. Plenty of books that you read to your children have examples of children having fun together or working toward a goal together without hitting, biting, or kicking each other. Point that out!

Time out and its permutations:

Time-out is a consequence. The goal of time-out is to stop the undesirable behavior and to give negative associations to the

bad behavior.

The traditional way of giving a Time-out in response to an aggressive or otherwise inappropriate behavior is to place your child in a chair or stool or on the floor in a corner or other quiet, boring place in the house for one minute per age of the child. Try not to use a spot which is associated with relaxation and sleep such as his crib.

Time-out is more of a mental place than a physical place. Years ago when I was out with Dr. Lai and our kids, her then 18-month-old hit her 3-year-old sister. Dr. Lai firmly told her 18 month old, "NO hitting, Mommy is not talking to you for one minute!" and she turned her back and folded her arms, making it a point of not looking at her daughter (Of course I was there to make sure her 18- month-old didn't run into trouble). Her 18-month-old had a tantrum but she got the message.

My own twins were a handful- often they would bite or hit each other over a toy that they both wanted. Rather than attempting to put two twins in two Time-Out chairs, I put the TOY in time-out on top of the refrigerator, where they could see it but not reach it, for the number of minutes of my twins' age. Yes, I had to endure a double tantrum but the undesirable behavior, namely the hitting, stopped. Over time they learned to think twice about hurting each other. Read more about twin toddler discipline tips here.

Teaching self-calming is different from disciplining misbehavior/unsafe activities.

Your kids may throw tantrums often in response to your discipline. This is perfectly fair. Toddlers are allowed to feel frustrated and angry ("If you're happy and you know it clap your hands; if you're angry and you know it throw a fit!"). Just ignore the tantrum and remove any breakables from the line of fire. The goal is for your child to have a bad

feeling about making a bad choice. If she has a tantrum, she may later remember that if she throws a toy at someone, it will be removed from her and She Will Feel Bad about it. We will give you more tips about helping to stop an endless tantrum in our next post. Remember, though, that **once time out is over**, **it is over**. Move on and don't continue to talk about the incident.

We do not recommend hitting your toddler as punishment or as a way to stop them from some undesirable behavior. Toddlers mirror your behavior. They will pretend to swipe a smart phone. They will blow kisses back to you. Toddlers will suddenly will start spewing inappropriate words because they hear their parents using those words. So, be on your best behavior. If you hit your child, you will model hitting as a proper response for anger. Try not to hit your child even in jest. You don't want to be explaining to other parents on the playground that your hitting child "doesn't know better."

Be aware it will feel like you are reiterating the same teaching points endlessly You will often feel you are talking to yourself. Even though you told a toddler once not to rummage through a garbage can, you'll have to repeat the instructions the next time you see a different garbage can. As my brother-in-law says,"You don't ever stop. Kinda like practicing layups or free throws in basketball."

Remember to take a deep breath: It is easy to lose control of yourself when you spend a lot of time with a toddler because toddlers, even though they are all adorable, can be infuriating, unreasonable, and irrational. Remember who is two and who is thirty-two. You NEED to be in control. If not, give yourself a timeout.

If you find a day with your toddler particularly tough, just do what melted my heart when my boys were toddlers. When asked, "Who will you marry?" they would always say "YOU, Mom."

Julie Kardos, MD and Naline Lai, MD

©2015 Two Peds in a Pod®

Based on our original 2009 podcast about toddler disciplineyou can listen to it here.

Raise a well-behaved child: set the stage while they are toddlers



Riding into toddlerhood

When your baby turns one, you'll realize he has a much stronger will. My oldest threw his first tantrum the day he turned one. At first, we puzzled: why was he suddenly lying face down on the kitchen floor? The indignant crying that followed clued us to his anger. "Oh, it's a tantrum," my husband and I laughed, relieved he wasn't sick.

Parenting toddlers requires the recognition that your child innately desires to become independent of you. Eat, drink, sleep, pee, poop: eventually your child will learn to control these basics of life by himself. We want our children to feed themselves, go to sleep when they feel tired, and pee and poop on the potty. Of course, there's more to life such as playing, forming relationships, succeeding in school, etc, but we all need the basics. The challenge comes in recognizing when to allow your child more independence and when to reinforce your authority.

Here's the mantra: Parents provide unconditional love while they simultaneously make rules, enforce rules, and decide when rules need to be changed. Parents are the safety officers and provide food, clothing, and a safe place to sleep. Parents are teachers. Children are the sponges and the experimenters. Don't be afraid of spoiling your child; be afraid of raising a child that acts spoiled. Here are concrete examples of how to provide loving guidance:

Eating: The rules for parents are to provide healthy food choices, calm mealtimes, and to enforce sitting during meals. The child must sit to eat. Walking while eating poses a choking hazard. Children decide how much, if any, food they will eat. The kids choose if they eat only the chicken or only the peas and strawberries. They decide how much of their water or milk they drink. By age one, they should be feeding themselves part or ideally all of their meal. By 18 months they should be able to use a spoon or fork for part of their meal.

If, however, parents continue to completely spoon feed their children, cajole their children into eating "just one more bite," insist that their child can't have strawberries until they eat their chicken, or bribe their children by dangling a cookie as a reward for eating dinner, then the child gets the message that independence is undesirable. They will learn to ignore their internal sensations of hunger and fullness.

For perspective, remember that newborns eat frequently and enthusiastically because they gain an ounce per day on average, or one pound every 2-3 weeks. A typical one-year-old gains about 5 pounds during his entire second year, or one pound every 2-3 months. Normal, healthy toddlers do not always eat every meal of every day, nor do they finish all meals. Just provide the healthy food, sit back, and enjoy meal time with your toddler and the rest of the family.

A one-year-old child will throw food off of his high chair tray to see how you react. Do you laugh? Do you shout? Do you do a funny dance to try to get him to eat his food? Then he will continue to refuse to eat and throw the food instead. Instead, you can say blandly," I see you are full. Here, let's get you down so you can play," then he will do one of two things:

- 1) He will go play. He was not hungry in the first place.
- 2) He will think twice about throwing food in the future because whenever he throws food, you put him down to play. He will learn to eat the food when he feels hungry instead of throwing it.

Sleep: The rule is that *parents* decide on reasonable bedtimes and naptimes. The toddler decides when he actually falls asleep. Singing to oneself or playing in the crib is fine. Even cries of protest are fine. Check to make sure he hasn't pooped or knocked his binky out of the crib. After you change the poopy diaper/hand back the binky, LEAVE THE ROOM! Many parents tell me, "He just seems like he wants to play at 2:00am or he seems hungry." Well, this assessment may be

correct, but remember who is boss. Unless your family tradition is to play a game and have a snack every morning at 2:00am, then just say "No, time for sleep now," and <u>ignore his protests</u>.

Pee/poop: The rule is that parents keep bowel movements soft by offering a healthy diet. The toddler who feels pain when he poops will do his best not to have a bowel movement. Going into potty training a year or two from now with a constipated child can lead to many battles. Also the toddler decides when he is brave enough or feels grown up enough to sit on the potty. Never force a toilet training child to sit on the potty. After all, did you force your toddler to learn how to use a remote control for your television? Of course not- he learned to use it by imitating you and wanting to be like you and by being pleased with the result (Cool! I turned on the TV!). The same principle applies to potty training. He will imitate you when he is ready, and will be pleased with the result when you praise him for his result.

Even if your child does not show interest in potty training for another year or two, <u>talk up the advantages of putting pee</u> and <u>poop in the potty</u> as early as age one. Remember, repetition is how kids learn.

Your toddler will test your resolve. He is now able to think to himself, "Is this STILL the rule?" or "What will happen if I do this?" That's why he goes repeatedly to forbidden territory such as the TV or a standing lamp or plug outlet, stops when you say "No no!", smiles, and proceeds to reach for the forbidden object.

When you <u>feel exasperated by the number of times you need to redirect your toddler</u>, remember that if toddlers learned everything the first time around, they wouldn't need parenting. Permit your growing child to develop her emerging independence whenever safely possible. Encourage her to feed herself even if that is messier and slower. Allow her to fall

asleep in her crib and resist rocking and giving a bottle to sleep. Everyone deserves to learn how to fall asleep independently (and to brush their teeth before bed). You don't want to train a future insomniac adult.

And if you are baffled by your child's running away from you one minute and clinging to you the next, just think how confused your child must feel: she's driven towards independence on the one hand and on the other hand she knows she's wholly dependent upon you for basic needs. Above all else, remember the goal of parenthood is to help your child grow into a confident, independent adult.

Julie Kardos, MD with Naline Lai, MD ©2015, revised from 2012
Two Peds in a Pod®