# School: Motivate your child to embrace learning



photo by Lexi Logan

"What will happen if your grade drops from an "A" to a "C"?" I sometimes ask during a check-up.

Many kids shrug and say, "Try harder next time, I suppose." Others look shocked and anxious about the possibility and are speechless.

Still others will point at their parents and say,"THEY would kill me."

Observe a toddler learning a new skill. You will see him repeatedly try to fit a ball into a hole until he is either successful or wanders way. He is not anxious or afraid of

failure. He is not "stressed" about trying to learn. Although all children start this way, too often toddlers become big kids who end up in my office discouraged and worried about school performance. Today's guest writers, based on the work of Dr. Carol Dweck, discuss ways parents can influence their children so that they embrace learning.

- Drs. Lai and Kardos

Researchers under the leadership of Dr. Carol Dweck conducted a survey of parents of school aged children. The majority of parents thought it was necessary to praise their children's intelligence in order to give them confidence in their abilities and motivate them to succeed. Instead, this approach can lead to fixed mindsets in children. Kids with fixed mindsets believe "my abilities are what they are."

Instead, the most motivated and resilient students demonstrate a growth mindset. They are the ones who believe their abilities can be developed through their effort and learning. These students are resilient and persevere when tasks become

challenging.

A study of students' brain waves revealed students with a fixed mindset were interested in whether they got an answer right or wrong, but when they were wrong, they paid little attention to the correct answer. Students who were praised for their intelligence later lied about their scores. They felt the errors were so humiliating that they could not own up to them. The students failed to persevere, believing they were no longer "smart," and therefore unable to meet academic challenges.

Students with a fixed mindset typically think it is best if they:

- Don't make mistakes "I'm too smart to make mistakes."
- Don't need to work hard —"I'm smart and learning comes naturally to me."
- Don't try to repair mistakes- "I was wrong, and that is the end of it."

Students with a growth mindset generally:

- Take on challenges
- Work hard
- Confront their deficiencies and correct them

How should parents talk to their children in order to develop a growth mindset?

- Wow, you got 10 out of 10 right! What strategy did you use to get a perfect score?
- What can you learn from this mistake that will help you do better next time?
- I am proud of how hard you worked on this project and look at how your hard work paid off!
- The strategies you used last time didn't work. Let's take a look at them so I can help you figure out better strategies to use next time.
- You're becoming such a good learner!
- Smart is not something you are; it's something you become. Let's figure out how you can become smart at this assignment.

What is your child's mindset? Ask yourself, what is <u>your</u> own mindset? Have a conversation with your child as you discuss your child's report card. Use any upcoming parent teacher conference to examine outlooks, attitudes, and strategies that are or are not supporting your child's academic progress.

- Where applicable, praise your child's positive skills and attributes. Celebrate instances you observed that contributed to positive indicators.
- When necessary, examine areas of poor performance and strategize with your child about how he or she can turn a weakness into a strength. Again, you may revisit situations you observed this past grading period in which your child took shortcuts, provided incomplete work products, or did not do his or her personal best.
- Make your expectations very clear in terms of why you value attributes or traits of resiliency, and how they can and will develop into habits that will serve your child well.

Grades are a distant second to the level of effort a child invests in personal learning in any setting.

Leonard H. Schwartz and Michael R. Testani

Mr. Schwartz and Mr. Testani have been central to the Central Bucks School System in Pennsylvania. After fourty-three years as an educator in two school districts and five schools, Mr. Schwartz retired in 2012. Most recently he served as the principal of Mill Creek Elementary School. Mr. Testani wrote this while he was the Assistant Principal of the Mill Creek Elementary School. Mr Testani now serves as the principal of Gayman Elementary School. This post was published in its full original form in the publication Principal's Prose of Mill Creek Elementary School.

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# Staggering: How to tell if your child's back pack is too heavy



Dr. Lai staggers under the load of a back pack

Although we see in the news that ebooks are replacing textbooks, our kids' backpacks look heavier than ever. Returning is physical therapist Dr. Deborah Stack with backpack pointers. -Drs. Lai and Kardos

With the return to school, we wanted to remind you of some healthy backpack tips. I recall the first day of school one year when the "first day of school" photo showed my not-quite-100-pound child bending in half under the weight of a backpack, trombone, lunchbox and art portfolio. I quietly

decreed that it would not happen again. To make sure it does not happen at your house either, consider a few suggestions to keep your children healthy:

- 1. A traditional backpack with **two shoulder straps** distributes the weight more evenly than a pack or messenger bag with a single strap.
- 2. Look for wide, padded straps. Narrow straps can dig in and limit circulation.
- 3. Buckle the **chest or waist strap** to distribute weight more evenly.
- 4. Look for a **padded back** to protect your child from pointy pencils etc.
- 5. Look for a **lightweight pack** that does not add much overall weight.
- 6. Multiple compartments can help distribute weight.
- 7. **Place heavier items** close to the spine instead of in front pockets.
- 8. **Compression straps** on the sides or bottom of the backpack can compress the contents of the backpack and stabilize the articles.
- 9. **Reflective material** allows your child to be visible on those rainy mornings.
- 10. A well fitting backpack should match the size of the child. Shoulder straps should fit comfortably on the shoulder and under the arms, so that the arms can move freely. The bottom of the pack should rest in the contour of the lower back. The pack should "sit" evenly in the middle of the back, not "sag down" toward the buttocks.

How much should that tike be toting? The American Academy of Pediatrics recommends no more than 10-20 percent of body weight and the American Physical Therapy Association recommends no more than 15 percent of a child's weight. Here's a chart to give you an idea of the absolute maximum a child should carry in a properly worn backpack:

| <b>Child's Weight</b> (pounds) | Maximum Backpack Weight (based on 15% of body weight) (pounds) |
|--------------------------------|--|
| 50                             | 7.5  |
| 60                             | 9  |
| 70                             | 10.5   |
| 80                             | 12   |
| 90                             | 13.5   |
| 100                            | 15   |
| 110                            | 16.5   |
| 120                            | 18   |
| 130                            | 19.5   |

Here are some ideas to help lighten the load, especially for those middle school kids who have a plethora of textbooks:

- 1. Find out of your child's textbook can be accessed on the internet. Many schools are purchasing access so the students can log on rather than lug home.
- 2. Consider buying an extra set of books for home. Used textbooks are available inexpensively online.
- 3. Limit the "extras" in the backpack such as one free reading book instead of five. I am not exaggerating; one day I found five free reading books in my child's backpack!
- 4. Encourage your child to use free periods to actually study, and leave the extra books in his locker.
- 5. Remind your child to stop by her locker between classes to switch books rather than carrying them all at once.
- Consider individual folders or pockets for each class rather than a bulky 3-ring notebook that holds every subject.

You may need to limit the load even further if your child is still:

- Struggling to get the backpack on by herself
- Complaining of back, neck or shoulder pain
- Leaning forward to carry the backpack

If your child complains of back pain or numbness or weakness in the arms or legs, talk to your doctor or physical therapist.

When used correctly, backpacks are supported by some of the strongest muscles in the body: the back and abdominal muscles. These muscle groups work together to stabilize the trunk and hold the body in proper postural alignment. However, backpacks that are worn incorrectly or are too heavy can lead to neck, shoulder and back pain as well as postural problems. So choose wisely and lighten the load. Happy shopping!

Deborah Stack, PT, DPT, PCS
With over 20 years of experience as a physical therapist, Dr.
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Pennsylvania. She holds both masters and doctoral degrees in
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# Pack healthy school lunches: beware of junk food disguised as healthy foods



Junk food in disguise

Need ideas on how to pack healthy school lunches? Beware of junk food masquerading as healthy food. Dr. Roxanne Sukol, an internist who writes the popular nutrition blog Your Health is on Your Plate, mom of three children, and friend of Dr. Kardos's from medical school, shares her insights.

## What should we pack in our children's lunch bags?

The key to retraining our children to eat real food is to restore historical patterns of food consumption. My great-grandparents didn't eat potato chips, corn chips, sun chips, or moon chips. They ate a slice of whole-grain rye bread with a generous smear of butter or cream cheese. They didn't eat fruit roll-ups. They ate apricots, peaches, plums, and grapes. Fresh or dried. Depending on where your family originated, you might have eaten a thick slice of Mexican white cheese (queso blanco), or a generous wedge of cheddar cheese, or brie. Sunflower seeds, dried apples, roasted almonds. Peanut butter or almond butter. Small containers of yogurt. Slices of cucumbers, pickles, or peppers. All of

these make good snacks or meals. My mom is proud to have given me slices of Swiss cheese when I was a hungry toddler out for a stroll with my baby brother. Maybe that's how I ended up where I am today.

When my own children were toddlers, I gave them tiny cubes of frozen tofu to grasp and eat. I packed school lunches with variations on the following theme: 1) a sandwich made with whole grain bread, 2) a container of fruit (usually apple slices, orange slices, kiwi slices, berries, or slices of pear), and 3) a small bag of homemade trail mix (usually peanuts + raisins). The sandwich was usually turkey, mayo and lettuce; or sliced Jarlsberg cheese, sliced tomato, and cream cheese; or tuna; or peanut butter, sometimes with thin slices of banana. On Fridays I often included a treat, like a few small chocolates.

### Homemade trail mix is one terrific snack.

It can be made with any combination of nuts, seeds, and/or dried fruit, plus bits of dark chocolate if desired. Remember that dark chocolate is good for you (in small amounts). Dried apple slices, apricots, kiwi or banana chips, raisins, and currants are nutritious and delicious, and so are pumpkin seeds and sunflower seeds, especially of course in homes with nut allergies. Trail mix can be simple or involved. Fill and secure baggies with  $\frac{1}{4}$  cup servings, and refrigerate them in a closed container until it's time to make more. I would include grains, like rolled oats, only for children who are active and slender.

### What do I consider junk food?

Chips of all kinds, as well as those "100 calorie packs," which are invariably filled with 100 calories of refined carbohydrate (white flour and sugar) in the form of crackers (®Ritz), cereal (®Chex), or cookies (®Chips Ahoy).

You can even find junk food snacks for babies and toddlers

now: The main ingredients in popular Gerber Puffs® are refined flour and sugar. Reviewers tout: "You just peel off the top and pour when you need some pieces of food, then replace the cap and wait for the next feeding opportunity." Are we at the zoo? "He would eat them all day long if I let him." This is not a benefit. It means that the product is not nutritious enough to satisfy the child's hunger.

### A note about drinks

Beware not only of drinks that contain minimal amounts of juice, but also of juice itself. Even 100% fruit juice is simply a concentrated sugar-delivery system. A much better approach is to teach children to drink water when they are thirsty, (See my post entitled **One Step at a Time**) and to snack on fresh fruit when they are hungry. Milk works, too, especially if they are both hungry and thirsty!

Roxanne Sukol, MD

Roxanne B. Sukol, MD is board-certified in Internal Medicine and practices Preventive Medicine in the Wellness Institute at the Cleveland Clinic in Ohio. Dr. Sukol's nutrition blog Your Health is on Your Plate celebrates ten years of blogging this summer. Since her patients (the grown-ups) are the ones packing the school lunches for our patients, we thank her for this post.

Julie Kardos, MD and Naline Lai, MD Reviewed 2019 ©2016 Two Peds in a Pod®

# No more night owl! How to adjust your child's sleep schedule for school



Great-horned owl, NPS Photo, Big Bend National Park

Okay, we admit it: our kids are definitely in summertime stay up late/sleep late sleep mode. With school starting soon, many of us now have to shift our children from summer to school year sleep schedules. Because school start times are constant (and early), the kids will have an easier time if you help them shift their bedtimes gradually over the period of a week or two toward the desired earlier bedtime. Remember, the average school-aged child needs 10-11 hours of sleep at night and even teenagers function optimally with 9-10 hours of slumber per night.

Here are some straight forward ways to help ensure good quality sleep for your child:

1) Keep sleep onset and wake up times as consistent as possible 7 days a week. If you allow your child to "sleep in" during the weekends, she will have difficulty falling asleep earlier on Sunday night, have difficulty waking up Monday morning, and start off her week overtired, more cranky, and less able to process new information—not good for learning. That said, you can allow your teens, who generally have a much earlier school start time than their biological clocks desire, to sleep in an hour or so on weekends to catch up on sleep.

- Limit or eliminate caffeine intake. Often teens who 2) feel too sleepy from lack of sleep drink tea, coffee, "energy drinks" or other caffeine laden beverage in attempt to self-medicate in order to concentrate better. What many people don't realize is that caffeine stays in your body for 24 hours so it is entirely possible that the caffeine ingested in the morning can be the reason your child can't fall asleep later that night. Know also that kids who drink "pre-work out" drinks may not realize that caffeine is one of the ingredients. Better to pre-hydrate with water. Caffeine can have side effects of jitteriness, heart palpitations, increased blood pressure, and gastro-esophageal reflux (heartburn). If your child already has a daily ice-tea, coffee, or other caffeine containing drink, let her wean down gradually- abrupt caffeine withdrawal can cause headaches.
- 3) Keep a good bedtime routine. Just as a soothing, predictable bedtime ritual can help babies and toddlers settle down for the night, so too can a bedtime routine help prepare older kids for sleep. Prevent your child from doing homework on his bed- better to associate work with a desk or the kitchen table and his bed with sleep.
- 4) Avoid TV/computer/ screen time/smart phones just before bed. Although your child may claim the contrary, watching TV is known to delay sleep onset. We highly recommend no TV in a child's bedroom, and suggest that parents confiscate all cell phones and electronic toys, which kids may otherwise hide and use without parent

knowledge, by one hour prior to bedtime. Quiet activities such as taking a bath, reading for pleasure, and listening to music are all known to promote falling asleep. Just be sure your kids put down the book, turn off the music, and turn off the light to allow time to relax in their beds and fall asleep. Many use this time for prayer or meditation.

5) Encourage regular exercise. Kids who exercise daily have an easier time falling asleep at night than kids who don't exercise. Gym class counts. So does playing outside, dancing, walking, and taking a bike ride. Participating in a team sport with daily practices not only helps insure better sleep but also has the added benefit of promoting social interactions.

Getting enough sleep is important for your child's academic success as well as for their mental health. We pediatricians have had parents ask about evaluating their children for attention-deficit hyperactivity disorder because of an inability to pay attention, only to find that their youngster's focusing issues stem from tiredness. Teens are often so over-involved in activities that they average 6 hours of sleep or less per night. Increasing the amount of sleep in these kids will alleviate their attention problems and resolve any hyperactivity.

Additionally, sleep deprivation can cause symptoms of depression. Just recall the first few weeks of having a newborn: maybe you didn't think you were depressed but didn't you cry from sheer exhaustion at least once? A cranky kid or sullen teen may become much more upbeat and pleasant if they get an extra hour of sleep each night.

Unfortunately for children, the older they get, their natural circadian rhythm shifts them toward the "night owl" mode of staying up later and sleeping later, and yet the higher-up years in school start earlier so that teens in high school start school earliest at a time their bodies crave sleeping

late. A few school districts in the country have experimented with starting high school later and grade school earlier and have met with good success. Unless you live in one of these districts, however, your teens need to conform until they either go to college and when they can choose classes that start later in the day or choose a job that allows them to stay up later and sleep later in the day.

For kids of all ages, a night time ritual of "tell me about your day" can help kids decompress, help them fall asleep, and keep you connected with your child.

Julie Kardos, MD and Naline Lai, MD

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# Happy Birthday-Two Peds in a Pod Turns Seven! About seven-year-olds



We are so proud that Two Peds in a Pod® turned SEVEN this week!

It's the golden age of seven— too old to take a nap and too young to drive. Some parental worry will now subside. Finally, you will be able to clean your garage out on the weekend without wondering if your kid has stuck her head in a bag of mulch.

### Seven Wonders of your Seven-year-old's World

Entering first or second grade, a seven-year-old will often sport a toothless grin (and still believes in the tooth fairy) as she continues her march to independence and self care. Wondering what she is capable of? Now she is able to set an alarm, wake up for school, get dressed and brush teeth on her own. However, self care will not be as meticulous as the care you give, so be prepared to dot sunscreen on the large patch of skin that she missed.

Wondering if your child is too old for you to read to him at bedtime? We recommend you not only continue to read aloud to your child, but have your child read out loud to you. Read higher level, more interesting books to him (chapter books), which will inspire him to become a better reader. He is now transitioning from learning to read to reading to learn. In other words, he will start to gain information from reading. Bedtimes become busy, with electronics and extra curricular activities crowding up the family schedule, but persevere.

Wonder if your child can do his own homework? Improve your child's self-esteem by allowing him do his own homework. Encourage success by setting up a quiet, clean place away from his younger siblings. At this age, homework is not supposed to take more than 10-20 minutes- if it does, alert the teacher. Let your child see natural consequences of not doing homework (teacher will have a repercussion, refrain from double punishing). Set up good expectations.

Wonder if you or your child is ready for sleepovers? Remember: kids do not sleep at sleepovers. If you will not sleep at night because a) your child is at a family's home that you are not familiar with, b) your child is at your own home and you will be constantly interrupted by the thumping of feet running about, or c) you dread how crabby and whiny your child will be in the morning, don't do it. Despite any accusations you may hear, you will not be the only parent in history to say "no" to a sleepover. Many times in the office when we see an ill child, the parent starts out the office visit with, "Well, she was at a sleepover and the next day she came down with a fever/sore throat/cough/etc."

Wonder how your child conducts himself when he is away from you? A seven-year-old is fully capable of entertaining his own friend at your home and remembering "yes, please" and "no, thank you" in a friend's home. Make sure your seven-year-old has memorized your phone number as well as his address.

When you get into a car with a seven-year-old, he not only can buckle himself up in the car (another wonder of the seven year old world and a huge improvement from having to kneel in the back seat straining your back as you buckled him up as a toddler) but also he will likely remind you to do the same. Seven-year-olds are rule followers. A strategy you can use at home to encourage desired behavior is to say "The rule in our house is that everyone cleans up his own mess," rather than saying "Clean up your toys because I said so." (Although he may ask, he still needs to be in a booster seat.)

Our 7th wonder of the seven year old world: when your seven-year-old recovers from a nasty stomach virus, it is possible that NO ONE ELSE in the family will catch it. A seven-year-old can use a basin, run to the toilet, wash his own hands, and change his own pajamas. You just have to supply the watered down gatorade (and comfort, as older sick kids still appreciate a parent's cool hand and reassuring words) and remind him to keep drinking.

We are excited to have reached our 7th year writing practical pediatrics for parents on the go. That's hundreds of posts on topics that you have suggested to us both in the office and online. Please continue to share our content- we wonder if we can reach 7 million families this year!

Thank you for your suggestions and comments over the years.

Sincerely, Julie Kardos, MD and Naline Lai, MD

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### Poison Ivy: Soothe the itch



Teach your child to recognize poison ivy: "leaves of three, let'em be!"

Recently we've had a parade of itchy children troop through our office. The culprit: poison ivy.

Myth buster: Fortunately, **poison ivy is NOT contagious**. You can catch poison ivy ONLY from the plant, not from another person.

Also, contrary to popular belief, you can not spread poison ivy on yourself through scratching. However, where the poison (oil) has touched your skin, your skin can show a delayed reaction- sometimes up to two weeks later. Different areas of skin can react at different times, thus giving the illusion of a spreading rash.

Some home remedies for the itch :

• Hopping into the shower and rinsing off within fifteen minutes of exposure can curtail the reaction. Warning, a bath immediately after exposure may cause the oils to simply swirl around the bathtub and touch new places on your child.

- Hydrocortisone 1%. This is a mild topical steroid which decreases inflammation. We suggest the ointment- more staying power and unlike the cream will not sting on open areas, use up to four times a day
- Calamine lotion a.k.a. the pink stuff. This is an active ingredient in many of the combination creams.
   Apply as many times as you like.
- Diphenhydramine (brand name Benadryl) take orally up to every six hours. If this makes your child too sleepy, once a day Cetirizine (brand name Zyrtec) also has very good anti itch properties.
- Oatmeal baths Crush oatmeal, place in old hosiery, tie it off and float in the bathtub- this will prevent oat meal from clogging up your bath tub. Alternatively buy the commercial ones (e.g. Aveeno)
- Do not use alcohol or bleach— these items will irritate the rash more than help

The biggest worry with poison ivy rashes is not the itch, but the chance of infection. With each scratch, your child is possibly introducing infection into an open wound. Unfortunately, it is sometimes difficult to tell the difference between an allergic reaction to poison ivy and an infection. Both are red, both can be warm, both can be swollen. However, infections cause pain — if there is pain associated with a poison ivy rash, think infection. Allergic reactions cause itchiness— if there is itchiness associated with a rash, think allergic reaction. Because it usually takes time for an infection to "settle in," an infection will not occur immediately after an exposure. Infection usually occurs on the 2nd or 3rd day of scratching. If you have any concerns take your child to her doctor.

Generally, any poison ivy rash which is in the area of the eye or genitals (difficult to apply topical remedies), appears infected, or is just plain making your child miserable needs medical attention.

When all else fails, comfort yourself with this statistic: up to 85% of people are allergic to poison ivy. If misery loves company, your child certainly has company.

Naline Lai, MD and Julie Kardos, MD ©2016, 2015 Two Peds in a Pod®, updated from 2012

# Time out from summer for an important flu update



Time out from summer for a flu update

We interrupt your summer to bring you a Flu vaccine reminder and update.

Although flu (influenza) may be far from your minds, as we

enter hot July, pediatricians are already ordering flu vaccines in preparation for Back to School. When the time comes, parents should add "schedule flu vaccine" to their back-to-school list as flu vaccines will arrive in offices as early as late August. Even immunizations given in August will last the entire winter season.

For fans of the nasal spray version of the flu vaccine—bad news. Turns out, data from the past 3 years shows the nasal spray is not nearly as effective as the injectable version. The American Academy of Pediatrics and the American Center for Immunization Practices both recommend giving only the injectable version of flu prevention for protection against influenza.

Nonetheless, for the inconvenience of a pinch, the vaccine is still worthwhile. A total of 77 children died from flu in the US during the 2015-2016 flu season and many more children were hospitalized with flu related complications such as pneumonia and dehydration. Flu is highly contagious and spreads rapidly within households and schools, including daycare centers. People are contagious from flu one day prior to showing any symptoms of flu.

While most people who become sick with the flu survive, they will tell you it is a tough week. In addition to having a high fever that can last 5-7 days, a hacking cough, and runny nose, those stricken will tell you that every part of their bodies hurt. Even the movement of their eyes can hurt. In addition to the physical effects, our high school and college level patients are particularly distraught about the amount of schoolwork they miss while recovering from the flu.

An ounce of prevention is worth a pound of cure, which is why the flu vaccine is so terrific. There is no "cure" for the flu- you have to let your body fight it out. Unfortunately antiviral medications such as oseltamivir at best shorten the duration of flu symptoms by about one day. Flu vaccines work by jump starting your body's natural immune system to produce disease fighting cells called antibodies. Vaccines are given yearly because flu virus strains often morph between flu seasons.

For more Two Peds In a Pod posts about flu and about vaccines in general: How to tell the difference between the common cold and the flu, Fact or Fiction: a flu vaccine quiz, Getting back to basics: how vaccines work.

OK, now back to your summer fun!

Julie Kardos, MD and Naline Lai, MD

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## Bring on the heat: Hot Tub Folliculitis



Note that the hot tub folliculitis rash is worse under the area of the swimming suit at the top of the thigh.

From the start, a family I know was suspicious of the hot tub sanitation at the resort where they recently stayed. As time went by, even though the water looked clear, the hot tub seemed less chlorinated, and the water more tepid. They dubbed the tub "the scuz tub." After their return, one of the kids broke out in the rash of hot tub folliculitis pictured above. You could say, they figured out just what the "scuz wuz".

Hot tub folliculitis is a skin rash caused by a bacteria called pseudomonas aeruginosa. The rash appears a day or two after soaking in a hot tub. A light pink bump appears around hair follicles (hence the name). As you can see in this photo, the rash is typically worse on areas of skin where bacteria was trapped under a swimming suit. The rash can cover all body surfaces, including the face, if your child

dunked his head under water.

The rash can be slightly itchy but is not usually painful. No other symptoms develop such as fever or sore throat. The rash is not contagious, but often other people who swam in the same hot tub also break out.

Treatment is to wait it out. Typically by one to two weeks, provided your child does not go back into the hot tub, the rash resolves on its own. If your child feels very itchy, you can treat her with oral diphenhydramine (brand name Benedryl). Rarely, just like mosquito bites, the rash can become infected with other bacteria if your child scratches too much.

Pseudomonas thrives in warm wet places. In fact, it's the same bacteria that causes "<u>swimmer's ear</u>." Tight control of chlorine and acid content of the hot tub water limit the growth of the bacteria. Unfortunately, you cannot tell the pseudomonas content of water just by eyeing it.

May you bring back a better souvenir than this family did on your next vacation.

Julie Kardos, MD and Naline Lai, MD

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# Feeding picky eaters plus some recipes



Photo credit: Lexi Logan

Back by popular demand: our picky eater post, with bonus recipes at the end.

"You just don't appreciate a picky eater until you have one." —Overheard at Dr. Lai's dinner table

### Picky eaters come in two major varieties.

One kind is the child who eats the same foods every day and will not vary her diet. For example, breakfast is always the same cereal with milk and a banana, lunch is always peanut butter and jelly, and dinner is some form of chicken, rice, and peas. This diet is nutritionally complete (fruit, vegetable, protein, dairy, carbohydrate) but is boring to the parent.

The other kind of picky eater is the child who leaves out entire food groups, most commonly vegetables or meat, or

leaves out meals, such as always eats breakfast but never eats dinner.

My twins, when younger, ranged from the One Who Tried Anything to the One Who Refused Everything! My oldest child lived on cheerios and peanut butter and jelly for about two years, but now he eats crab legs and bulgur wheat and sushi. My point: I feel your frustration, and I will give you advice that works as well as optimism and a new way of thinking about feeding your children.

Fortunately, from a medical point of view, toddler/children nutrition needs to be complete as you look over several days, not just one meal. For example, if every three days your child has eaten some fruit, vegetables, protein, dairy, and complex carbs, then nutritional needs are met and your child will thrive. Of course, if your child's pediatrician has determined that your child is not growing appropriately, you may need to look "beyond the picky" into medical causes and treatments of poor growth.

### Ways to outwit, outplay, and outlast picky eaters

- 1. Never let them know you care about what they eat. If you struggle with your child at mealtimes, she will not eat and you will continue to feel bad about her not eating. Talk about the day, not about the food, at mealtime. You want your child to eat for the simple reason that she feels hungry, not to please you or anyone else, and not because she feels glad or mad or sad. Also, refrain from cooking a "special meal" for your toddler. Typically once a toddler catches on that you desperately want her to eat your cooking, she will refuse it.
- 2. Do let them help you cook. Even young children can wash vegetables and fruit, arrange food on platters, mix, pour, and sprinkle ingredients. Older kids can practice reading aloud from recipes and can help measure. Kids are more apt to taste what they help create.

- 3. Let them dip their food into salad dressing, apple sauce, ketchup, etc., which can make their food more appealing or interesting to eat.
- 4. Hide more nutritious food in the foods they already like. For example, carefully mix vegetables into meatballs or meatloaf or into macaroni and cheese. Bright green smoothies hiding kale and other greens are very popular. See the recipes at the end of this post for Zucchini chocolate chip muffins and Magic Soup.
- 5. Remember to offer foods that YOU do NOT like— your kids might like them! Here is an example: When my children were toddlers, we decorated Easter eggs at Dr. Lai's house with her children. My kids asked if they could eat their decorated hard boiled eggs. Understand that hard boiled eggs is one food that I do NOT like. I don't like their smell, their texture, and I really do not like the way they taste. Yet, all three of my kids, including my pickiest, loved those hard boiled eggs dipped in a little salt. Go figure. I had found an inexpensive, easy, healthy protein source to offer, even though I can't stand the way my kitchen smells when I cook them.. but hey, if my kids actually EAT them...
- 6. In the same vein, offer foods that you assume they will not like. Dr. Lai was shocked to find that her pickiest eater enjoyed hot and spicy food.
- 7. Continue to offer foods even if your picky eater refuses them. Don't force feed, just have them on the table. It could take 20 or 30 exposures before your kids might try them so do not despair. It took EIGHT YEARS of exposure to broccoli (one of my personal favorite vegetables) until two of my three kids decided they love it too. One still does not eat it. And that's ok.
- 8. **Hunger is the best sauce**. Refrain from offering junk food as snacks or as reward for eating "real" food. Pretzels, crackers, cookies, candy, cake, and chips have NO nutritional value yet fill up small bellies quickly.

Your insightful child will HOLD OUT for the junk and refuse good nutrition if they know they can fill up on snacks later. Along the same line, avoid bribing food for food. Chances are, if you bribe eating vegetables with cookies, the focus for the rest of the meal will be on the cookies and a tantrum will follow. You and your child will have belly aches from stress rather than full bellies. While it is tempting to let your child gaze all day, this will simply fill your child up so that she does not feel hunger at a meal or snack. Beware, even water can suppress the appetite.

- 9. If the goal is to have your children eat real food, then avoid "fake food." Pouches with pureed fruit/veggie/cereal combos, fruit bars, fruit juice, protein shakes, and Puffs all may have nutrients but often have much sugar that grazes teeth and do not teach young taste buds the texture and flavors of healthier versions of actual fruits, vegetables, cereal, and protein sources such as meat.
- 10. It is okay to repeat similar meals day after day as long as they are nutritious. We might like variety as grownups but many toddlers and young kids prefer sameness and predictability.
- 11. Avoid becoming a "short order" chef. Picky eaters quickly take advantage of their power to make parents prepare multiple meals and likely end up not eating anyway. When your child says "I don't want this! I want something else!" at breakfast, lunch, or dinner, you can answer calmly but firmly, "The meal is on the table." It's okay if they eat only one of the foods on the table. Next week she might try another. A different approach that some families use is to have one back-up meal that is the same every day for every meal and must be completely non-cook and nutritious. Examples are low sugar cereal and milk, peanut butter and jelly sandwich, yogurt with nuts or fruit mixed in, etc. that you agree to serve if your child does not want to eat

what the rest of the family is eating.

- 12. You can give your child a pediatric multivitamin. This tactic is not giving up or cheating. It can give the Parent as Provider of Nutrients peace of mind. You can give the multivitamin every day or just on the days that you are convinced that your child has eaten nothing.
- 13. Read *Green Eggs and Ham*, by Dr. Seuss, to your young picky eater. It stars a picky eater who becomes convinced to "try them." You may, however, need to learn to make green eggs!

#### Zucchini muffins ( or just call them "green muffins")

3 cups flour, 1Tbs baking powder, 1 tsp salt, 1/2 tsp baking soda 1 1/2 tsp cinnamon, 1/2 tsp nutmeg

2 eggs, 1/2 cup low-fat milk, 1/2 cup canola or vegetable oil, 1 cup sugar, 2 cups shredded zucchini — approximately 2 medium zucchini- leave skins ON. OPTIONAL (but yummy): 1/2 cup mini chocolate chips

Preheat oven to 375F.

Stir together flour, baking powder, salt, baking soda, cinnamon, and nutmeg.

In separate bowl, beat eggs with electric mixer x 1 minute. Beat in milk, oil, and sugar. Stir in zucchini until well blended.

Add flour mixture to batter a bit at a time and stir to mix.

Mix in chocolate chips, if desired.

Spoon into greased muffin tins or place paper muffin liners, sprinkle tops of batter with a bit of sugar or "cinnamon sugar"

Bake 20 minutes, or until tops are golden brown and spring back when you touch them.

### Magic Soup recipe

Take a large soup pot. Add raw chicken parts (breasts, thighsbones add to the flavor) and cover with water.

Add onion, carrots, celery, cauliflower.

Flavor with salt, small amount of pepper, and any spice you like- I use tarragon but you can also use cilantro, parsley, curry powder, ginger.

Bring to boil, then cover and simmer for approximately 2 hours. toward the end, add some nappa (Chinese cabbage) or regular cabbage, cook until cabbage is wilted.

Serve to picky eaters: pull out the soft chicken pieces to pick up, pull out cooked vegetables — good finger food as well. Serve the broth in a cup. Most vitamins are water soluble, which means that even if your child only drinks the soup or if you pour the soup over something your child already likes such as noodles or rice, they are still getting all of the nutrition from your soup (hence, "magic soup").

Julie Kardos, MD with Naline Lai, MD

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### Pleeeease- can we get a dog?

Many of our patients have dogs in their homes, and many families choose to adopt a dog during summer. Unfortunately, dog bite rates are also highest in summer, and occur most often in five to nine year olds, according to the Centers for Disease Control. Today we re-post tips on how to introduce a into a home dog children and how to best avoid dog bites. We thank our expert consultant, veterinarian Sharin Skolnik, DVM.



-Julie Kardos, MD and Naline Lai, MD

#### Two Peds: Are some breeds of dogs better for children?

Dr. Skolnik: Breed recommendations are tough, because there are such different personalities within every breed. Breeds bred to protect will tend to guard their family, but may not be friendly with other kids. I have had to euthanize golden retrievers and labs for severe aggression, and know some truly stellar pit bulls. I would like every family bringing a dog into their home to think about how much time and energy they can devote to the following: exercise/walks/play dates/mental stimulation, grooming, feeding, veterinary care, and arranging travel concerns/contingency plans. If I had to pick a good family breed, I would suggest a Cavalier King Charles spaniel, but only if you forced me to pick one! Choosing the right dog for your family is the first big step, but do many people think about what comes with

## Two Peds: Any suggestions for screening a dog before bringing it into the family?

Dr. Skolnik: Many rescue groups use experienced foster homes to get an idea of where a dog is at before placement, which is wonderful. Look for a puppy or dog that is not too hyper or timid, unless you have the time and energy to devote to modifying these behaviors. Inquisitive but not pushy is ideal. Having said that, dogs are incredibly trainable in the right hands. Use care when bathing, feeding, or taking things away from a newly adopted dog. Trust is a two-way deal, and positive and gentle first interactions will set the stage for the relationship.

#### Two Peds: Why are young kids prone to dog bites by the family dog?

Dr. Skolnik: Many factors: kids are usually very bad at reading dog body language. For that matter, many adults I meet think that a wagging tail indicates a friendly dog, when in fact it means the dog is willing to interact, positively or negatively. Kids are usually loud and move unpredictably and quickly. Never leave kids and dogs unsupervised, because the kids may not understand how to be gentle and respectful of the dog. It is important to set clear and consistent expectations for both kids and dogs on what counts as acceptable behavior.

### Two Peds: What should parents teach their children about approaching a dog?

Dr. Skolnik: Teach them to always ask an owner's permission with unknown dogs. Look for "soft" features like relaxed ears, floppy wagging tail, wiggling body. Tense body, rigid tail (wagging or not), backing up, dilated pupils— leave that dog alone. Supervision by responsible adults is key.

#### Two Peds: How can a dog be taught to "respect" a child?

Dr. Skolnik: The same way dogs learn to leave people's houses and other pets alone. "Claim" items as yours, and not the dog's, while meeting their needs. When I adopt a new dog: Guinea pigs/cats/shoes/etc. are mine. Every time the dog shows an interest in one of these things, he is told firmly "No." The dog is given plenty of walks through the woods, praise for desired behaviors, some one-on-one time, and a few weeks later and we usually are on the same page. Consistency in training is key. The dog can't be allowed to chase the

cat when you are not home, so keep them separated! Set the dog up for praise, gently but firmly correct missteps, don't overcorrect or correct after the fact. The latter only increase anxiety and the likelihood of future behavior problems

A common mistake in dog discipline is relying too much on punishment/ negative corrections and ignoring "good" behavior. For example; yelling at the dog for grabbing at the kids' clothes, hands, whatever and ignoring the dog when it is chewing one of its own toys. Dogs are pack creatures; they rarely will play by themselves. Single-dog homes especially need to budget enough time each day to meet the dog's mental and physical needs.

### Two Peds: Should a dog that bites a kid be given a second chance? Can dogs be rehabilitated?

Dr. Skolnik: Depends on the scenario. A very forward dog with a history of unprovoked aggression towards kids is going to require a huge commitment to prevent injury and likely needs to go where there are no children, or humanely put to sleep. Most vets are pretty intolerant of dog aggression towards children. Now if an adult dog unfamiliar with kids snaps when a kid grabs an ear, or tries to take something away, or if the dog gave some warning that the kid should back off— I would blame the adults that put those two in the situation. Dogs (and people) can be rehabilitated, but there will always be the possibility of relapse. There are no guarantees with behavior modification.

Sharin Skolnik, DVM, holds a Bachelor's degree from Cornell University School of Agriculture and Life Science and a veterinary degree from University of Pennsylvania School of Veterinary Medicine. She has been practicing veterinary medicine for over 20 years and is a member of the AVMA and the NJVMA. She currently works at Chesterfield Veterinary Clinic in Bordentown, New Jersey.

Her "children" include horses, dogs, cats, guinea pigs, hamsters, sheep, chickens, and rabbits. She is also a long time friend of Dr. Kardos's. Their children play well together under close supervision.