

# More ideas and mouth watering recipes from our backyard organic gardening physician



The many hues of cauliflower-photo by Dr. Mass

*Pediatrician and mom Dr. Marion Mass writes this post in honor of Random Acts of Kindness Day, today November 19 in Bucks County, PA. This day is in memory of Abby Schumer, a friend of Dr. Mass's family, who lost her life to a brain tumor at age 10. Gardening, cooking with her children, and donating meals to families in need is how Dr. Mass's family celebrates this day.*

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Despite the fact that it's November and several frosts have hit the Northeast, we still have a surplus of fresh vegetables from our organic garden. If you would like to be in this

enviable position next year, please see my former guest-blog post explaining why you should get started now!

We garden because we value healthy high quality organic food. There is a no more satisfying way for your family to get it than from your own yard. Right now, garden centers across the Northern Hemisphere are selling off their seeds for cheap. And these seeds can be saved until next year. How should you choose what to grow? Grow some produce you know your family is will eat. First, consider looking for seeds with different hues. For example, many kids will eat lettuce. How about a red or maroon-leafed variety? Ditto that with the gardener's favorite, tomatoes. There are yellow, orange, pink, black and blue varieties. One of my pet hypotheses is that the more colors we ingest, the healthier we are...and kids love a rainbow plate. Grow some vegetables that are easy to grow: radishes, beans, beets, and the butternut squash and New Zealand spinach described below, all fall into this category.

Spinach is high in vitamins A, B2, B6, E and K, as well as numerous antioxidants and iron. Shockingly, one cup of spinach contains 25% of the US RDA of calcium, welcome information for those who do not consume dairy products. We grow New Zealand spinach because it does not get stringy and bitter like other varieties and doesn't get mushy when cooked. In addition, two seeds of this variety grow a plant that is so prolific that it feeds my family and several others from late July (seed planted in May) until the hard frost takes it out.

Butternut squash is high in fiber and extraordinarily high in vitamin A. It is great to grow up a gate or fence, the flowers are edible, and if your kids don't mind crushing stink bugs, easy to grow. This year only 6 seeds grew 65 pounds of our favorite hard squash!

Cauliflower is also high in fiber as well as vitamin C. Recent studies suggest that there are certain phytochemicals in cauliflower with cancer-fighting properties. It's a little

harder to grow, given its attractiveness to the cabbage looper caterpillar, one of my garden nemeses. Vigilance and a few tricks can help you! We purchase praying mantis egg cases and lacewing insect eggs from online stores such as Gardens Alive. These beneficial insects will eat the cabbage looper caterpillar. In addition, finding the green worms on the back of the leaves and hand crushing them depletes their population.



New Zealand Spinach

### ***Mouth watering recipes:***

#### **Farfalle, Sausage and NEW ZEALAND Spinach**

*This recipe is good with any leafy greens, and would be OK with traditional spinach, but it is exceptional with New Zealand spinach which has a great bite and holds up after cooking. This recipe is the creation of my wonderful foodie-friend Jeannine*

Ingredients – (flexible on all quantities)

1 lb Italian sweet sausage, casing removed

2 cloves garlic, minced

1/3 cup red wine

salt/pepper to taste

New Zealand Spinach, washed/dried -enough leaves to cover (2) dish towels

Farfalle pasta,  $\frac{3}{4}$  lb

Parmesan, freshly grated, to taste

Preparation – takes 15 minutes

1. Cook pasta in pot boiling salt water. Farfalle usually takes 10 minutes.
2. At the same time, in a deep skillet, cook sausage, crumbling with cooking utensil as it cooks; you can add a little water while it cooks, to prevent sticking, but don't add too much; the meat sticking will help you when you deglaze pan later
3. Once sausage is cooked, add the minced garlic (1) minute
4. Add wine, simmering a few minutes, deglaze the pan with your spatula, all the stuck pieces of browned meats will come off bottom skillet.
5. Then add the dry spinach leaves; even if pan is overflowing with spinach, it will wilt to a much smaller amount. If using "new Zealand" spinach, it needs extra liquid to cook – scoop out a measuring cup of the boiling pasta water and add to the sausage/spinach mixture to help cook. Cover with lid for approx 2 minutes. You want the spinach to be wilted, but not overcooked.
6. Season with salt and pepper to taste
7. Drain cooked pasta and mix in serving bowl with sausage mixture.
8. Pass grated parmesan cheese
9. Great leftover too.



Butternut squash -  
photo by Dr. Mass

### **Roasted Butternut Squash with Pepitas and Pomegranates**

Preheat oven to 375. Cube a medium butternut squash into  $\frac{3}{4}$  inch pieces. I leave the skin on for extra fiber. Place on a rimmed cookie sheet and drizzle with 1-2 tbsp olive oil, sprinkle with  $\frac{1}{2}$  tsp salt. Roast in oven till fork tender, about 45 minutes. Remove from oven, sprinkle with roasted pepitas (pumpkin seeds) and sprinkle with pomegranate seeds. Serve warm or at room temp. Makes a great Thanksgiving vegetarian entrée, just add cubed fresh Mexican cheese (queso fresco)

### **Roasted Cauliflower**

Preheat oven to 350. Cut 1 medium head of cauliflower into 1 inch florets and place on rimmed cookie sheet. Drizzle with 2 tbsp melted butter (it really tastes better than olive oil here) and sprinkle with 2 tsp organic cane sugar,  $\frac{1}{2}$  tsp salt,  $\frac{1}{2}$  tsp cumin, and a tiny pinch of cinnamon. Roast in oven for 30 minutes until fork tender. We serve this as an appetizer or a side dish. You can vary the spices used... We added chili powder last night, have done it with oregano and thyme or coriander.

## **Some of my favorite garden websites:**

Kitchen Gardeners International (features forums, recipes, blogs and the ability for people to gather on a local level)

Chiot's Run (garden journal of a small organic garden in the Midwest)

The Royal Horticultural Society (the UK's leading gardening charity, promotes horticulture and gardening.)

You Grow Girl (unusual plants, recipes, beautiful pictures, and gardening tips)

Skippy's Vegetable Garden (a Boston city vegetable garden)

Marion Mass, MD

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## **Gift ideas by ages and stages**



*Nice Auntie Mimi bought me Candy Land for the holidays... too bad I won't know my colors or understand how to take turns until next year.*

It's gift-giving season! Now that your families are another year older, it's time to update our sometimes-you-just-want-to-buy-something holiday gift idea list arranged by ages and developmental stages.

**0-3 months:** Babies this age have perfect hearing and enjoy looking at faces and objects with contrasting colors. Music, mobiles, and bright posters are some age appropriate gift ideas. Infants self-soothe themselves through sucking- if you can figure out what your nephew's favorite type of binkie is, wrap up a bunch-they are expensive and often mysteriously disappear.

**3-6 months:** Babies start to reach and grab at objects. They enjoy things big enough to hold onto and safe enough to put in their mouths- try bright colored teething rings and large plastic "keys." New cloth and vinyl books will likewise be appreciated; gnawed books don't make great hand-me-downs.

**6-12 months:** Around six months, babies begin to sit alone or sit propped. Intellectually, they begin to understand "cause and effect." Good choices of gifts include toys with large buttons that make things happen with light pressure. Toys which make sounds, play music, or cause Elmo to pop up will be a hit. For a nine-month-old old just starting to pull herself up to a standing position, a water or sand table will provide hours of entertainment in the upcoming year. Right now you can bring winter inside if you fill the water table with a mound of snow. Buy some inexpensive measuring cups and later in the

summer your toddler will enjoy standing outside splashing in the water.

**12-18 months:** This is the age kids learn to stand and walk. They enjoy things they can push while walking such as shopping carts or plastic lawn mowers. Include gifts which promote joint attention. Joint attention is the kind of attention a child shares with you during moments of mutual discovery. Joint attention starts at two months of age when you smile at your baby and your baby smiles back. Later, around 18 months, if you point at a dog in a book, she will look at the dog then look back at you and smile. Your child not only shows interest in the same object, but she acknowledges that you are both interested. Joint attention is thought to be important for social and emotional growth.

At 12 months your baby no longer needs to suck from a bottle or the breast for hydration. Although we don't believe mastery of a sippy cups is a necessary developmental milestone, Dr. Lai does admire the WOW cup because your child can drink from it like she does from a regular cup. Alternatively, you can give fun, colored actual traditional plastic cups, which difficult to break and encourage drinking from a real cup!

**18-24 months:** Although kids this age cannot pedal yet, they enjoy riding on toys such as "big wheels" "Fred Flintstone" style. Dexterous enough to drink out of a cup and use a spoon and fork, toddlers can always use another place setting. Toddlers are also able to manipulate shape sorters and toys where they put a plastic ball into the top and the ball goes down a short maze/slide. They also love containers to collect things, dump out, then collect again.

Yes, older toddlers are also dexterous enough to swipe an ipad, but be aware, electronics can be a double edged sword- the same device which plays karaoke music for your daddy-toddler sing-along can be transformed into a substitute parent. The other day, a toddler was frightened of my stethoscope in the office. Instead of smiling and demonstrating to her toddler how a stethoscope does not hurt, the mother repeatedly tried to give her toddler her phone and told the child to watch a video. Fast forward a few years, and the mother will wonder why her kid fixates on her phone and does not look up at the



family at the dinner table. Don't train an addiction.

**2-3 years:** To encourage motor skills, offer tricycles, balls, bubbles, and boxes to crawl into and out of. Choose crayons over markers because crayons require a child to exert pressure and therefore develop hand strength. Dolls, cars, and sand boxes all foster imagination. Don't forget those indestructible board books so kids can "read" to themselves. By now, the plastic squirting fish bath toys you bought your nephew when he was one are probably squirting out black specks of mold instead of water- get him a new set. Looking ahead, in the spring a three- year-old may start participating in team sports (although they often go the wrong way down the field) or in other classes such as dance or swimming lessons. Give your relatives the gift of a shin guards and soccer ball with a shirt. Offer to pay for swim lessons and package a gift certificate with a pair of goggles.

**3-4 years:** Now kids engage in elaborate imaginary play. They enjoy "dress up" clothes to create characters- super heroes, dancers, wizards, princesses, kings, queens, animals. Kids also enjoy props for their pretend play, such as plastic kitchen gadgets, magic wands, and building blocks. They become adept at pedaling tricycles or even riding small training-wheeled bikes. Other gift ideas include crayons, paint, markers, Play-doh®, or side-walk chalk. Children this age understand rules and turn-taking and can be taught simple card games such as "go fish," "war," and "matching." Three-year-olds recognize colors but can't read- so they can finally play the classic board game *Candyland*®, and they can rote count in order to play the sequential numbers game *Chutes and Ladders*®. Preschool kids now understand and execute the process of washing their hands independently... one problem... they can't reach the faucets on the sink. A personalized, sturdy step stool will be appreciated for years.

**5-year-olds:** Since 5-year-olds can hop on one foot, games like *Twister*® will be fun. Kids this age start to understand time. In our world of digital clocks, get your nephew an analog clock with numbers and a minute hand... they are hard to come by. Five-year-olds also begin to understand charts- a calendar will also cause delight. They can

also work jigsaw puzzles with somewhat large pieces.

**8-year-olds:** Kids at this point should be able to perform self help skills such as teeth brushing. Help them out with stocking stuffers such as toothbrushes with timers. They also start to understand the value of money (here is one way to teach kids about money). The kids will appreciate gifts such as a wallet or piggy bank. Eight-year-olds engage in rough and tumble play and can play outdoor games with rules. Think balls, balls, balls- soccer balls, kickballs, baseballs, tennis balls, footballs. Basic sports equipment of any sort will be a hit. Label makers will also appeal to this age group since they start to have a greater sense of ownership.

**10-year-olds:** Fine motor skills are quite developed and intricate arts and crafts such as weaving kits can be manipulated. Give a “cake making set” (no, not the plastic oven with a light bulb) with tubes of frosting and cake mix to bake over the winter break. Buy two plastic recorders, one for you and one for your child, to play duets. The instrument is simple enough for ten-year-olds or forty-year-olds to learn on their own. Ten-year-olds value organization in their world and want to be more independent. Therefore, a watch makes a good gift at this age. And don't forget about books: reading skills are more advanced at this age. They can read chapter books or books about subjects of interest to them. In particular, kids at this age love a good joke or riddle book.

**Tweens:** Your child now has a longer attention span (30-40 minutes) so building projects such as K'nex® models will be of interest to her. She can now also understand directions for performing magic tricks or making animal balloons. This is a time when group identity becomes more important. Sleepovers and scouting trips are common at this age so sleeping bags and camping tents make great gifts. Tweens value their privacy – consider a present of a journal with a lock or a doorbell for her room.

**Teens:** If you look at factors which build a teen into a resilient adult, you will see that adult involvement in a child's life is important.

<http://www.search-institute.org/research/developmental-assets>

We know parents who jokingly say they renamed their teens “Door 1” and “Door 2,” since they spend more time talking to their kids’ bedroom doors than their kids. Create opportunities for one-on-one interaction by giving gifts such as a day of shopping with her aunt, tickets to a show with her uncle, or two hours at the rock climbing gym with dad.

Encourage physical activity. Sports equipment is always pricey for a teen to purchase- give the fancy sports bag he’s been eyeing or give a gym membership. A running watch is always appreciated or treat them to moisture wicking work-out clothes or a gift card to a sports equipment store.

Sleep! Who doesn’t need it, and teens often short change themselves on sleep and fall into poor sleep habits. Help a teen enjoy a comfortable night of rest and buy luxurious high thread count pillow cases, foam memory pillows, or even a new mattress. After all, it been nearly 20 years since you bought your teen a mattress and he probably wasn’t old enough at the time to tell you if he was comfortable. Since a teen often goes to bed later than you do, a remote light control will be appreciated by all.

Enjoy your holiday shopping!

Naline Lai, MD and Julie Kardos, MD

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*Modified from our original November 2012 post*

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## **Using melatonin in children**

*Our guest blogger, Dr. Kristann Heinz, a doctor who practices with a holistic and integrative approach, shares her knowledge about melatonin use in children. – Drs. Kardos and Lai*



When we got back from Hawaii my three year old daughter, Ruby, was a hot mess! The eight-hour time difference made it hard for her to adjust her internal clock. At first, I just attributed it to routine jet lag but after a week of the same sleep-wake cycle, I knew something was going on. She was wandering around the house in her pink spotted pajamas WIDE AWAKE until 1am, 2am, and 3am. And then in the morning, she was dead asleep and I could barely get her up. So at this point, I took her to our doctor to make sure everything was all right. The doctor told us my daughter's jet lag was leading to a sleep disturbance and suggested I try melatonin. I gave melatonin to Ruby that night. She was asleep by 11pm and slept soundly until morning. Over the next few days, she adjusted beautifully and we were back to a normal sleep routine in 3 days. After that, we stopped the melatonin.

### **What is Melatonin?**

Melatonin is a hormone that occurs naturally in our bodies. A hormone is a signal containing a message from one part of the body to another. Melatonin is naturally secreted by the pineal gland, a gland located in the brain that is very sensitive to light. As night falls, the pineal gland secretes melatonin to tell the brain that it is time to sleep. This process is

sometimes described as the “opening of the sleep gate.”

### **Why would my doctor prescribe melatonin to my child?**

People often use melatonin to help adjust their sleep-wake cycles. For adults melatonin is used to treat a variety of medical disorders including cancer, headaches, and autoimmune disorders as well as insomnia. In children however, the primary reason melatonin is prescribed is for sleep disturbance. Some children with certain medical conditions are thought to have lower levels of naturally produced melatonin, which contributes to sleep-wake disturbances. For these children supplementing with melatonin can be beneficial and enhance sleep. Melatonin has been studied and shown to be helpful to children with developmental delays, ADHD, cerebral palsy, autism, and jet lag.

### **What dose should I use?**

The dose of melatonin should be discussed with your doctor. Doses can range from 0.03mg – 6mg, generally given at bedtime. To establish the appropriate therapeutic dose, your doctor will take into account your child’s weight and the health condition you are trying to treat.

### **Are there different kinds of melatonin?**

Melatonin is synthetically produced but there are also products that contain biological glandular material, a source of natural melatonin. Synthetically produced melatonin is recommended by most doctors because it provides a more consistent dose and is less likely to be contaminated.

**Melatonin comes in three different forms:** immediate release, sustained released and sublingual. The most convenient form of melatonin for children is the sublingual form because their bodies begin to absorb it as soon as it is placed in the mouth. The sublingual form is easier than swallowing a pill, which can be difficult or uncomfortable for some children. There are many different liquid brands available as well, which have the same benefit. Another good way to administer

melatonin to a child is to dissolve an immediate release melatonin tablet in juice or mix it with applesauce before offering it to your child. Taking melatonin with food does not change the effectiveness of the supplement.

### **How long does it take to work?**

Melatonin should work the first night it is given to a child and it does not require multiple doses to be effective. It can take up to 30 minutes after taking the medication to experience its full effect. Often your child will begin to feel drowsy and tired soon after taking the supplement.

Let's use jet lag as an example of how to use melatonin. You may give the melatonin to your child just before bedtime in the new time zone. The supplement will facilitate sleep within 30 minutes of taking it. But, remember, our internal clocks usually adjust one hour a day when we travel to different time zones, and melatonin can only help to a point. The greater the time difference the more difficult it is for our bodies to resume a normal sleep pattern in the new time zone. If, for instance, there is a twelve-hour time difference, it will still take time for our biologic rhythms to change, even with the help of melatonin. However, the transition is often faster and smoother with the aid of melatonin. Melatonin is not a sleeping pill. It is used to enhance the onset of sleep naturally.

### **Are There Side Effects or Contraindications?**

Melatonin is very safe. The most common side effect for children is excessive sleepiness, which can be moderated by decreasing the dose. In high doses, which are used mostly in treating adults (10mg-60mg melatonin), side effects include headaches, nausea, dizziness and fatigue. For children, taking melatonin is not associated with any short or long-term side effects in relation to growth, development or puberty. Drug interactions can take place between melatonin and sedatives, antidepressants and hormones, so if your child is taking medications of this kind, be sure to discuss whether it is

safe to give your child Melatonin with your child's doctor before doing so.

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**Cold weather is here: time to start an organic produce garden with your kids**



*We welcome pediatrician Dr. Marion Mass to talk about starting a garden from a piece of suburban lawn. – Drs. Kardos and Lai*

A few years back, my family was getting ready for my parents to come for dinner and I was peeling the skins off the roasted beets we had grown for my mother. One of her favorites...but not mine. My five-year-old Brian had picked the beets and was eager to try them. As Brian brought a sliver of beet up to his mouth I braced myself for a “yucky face”. Instead, I was shocked to see him gobble the beets up. He loved them. To this day, beets are one of his favorite veggies.

Hands down, the best activity I have ever done with my family is planting and nurturing an organic garden for 11 years. Along the path to growing delectable vegetables, we have discovered together gardening’s health, intellectual and social benefits.

Actively tied to the process of supplying their own food, gardening kids will naturally want to eat more and more



produce. Kids develop a sense of pride (truly, a basketful of beans, lettuce and cucumbers is so attractive) and eventually they develop a positive association with the outdoors and vegetables. In addition to eating more quantity, what your kids eat will be healthier than store bought veggies. Produce closer to harvest contains more nutrients and you don't get closer than your own yard to table. If you garden organically, you will also avoid potentially harmful chemicals. Lastly, there is a sense of relaxation upon stepping into a garden. It is a balm for anxiety, for depression, for anger; in short, one of the best adjuvants to mental health therapy that I know.

If you want to harvest a crop next year, and you live in a cold weather area of the northern hemisphere, NOW is the best time to start. The most cumbersome task of starting a garden is to dig up the sod (existing lawn), but a few tricks in the fall can prevent this disc-slipping chore.

- Chose a spot in your yard that gets at least 6 and preferably 8 hours of sunlight a day.
- If possible, stay away from edges, tree lines and spots where large garden parasites (such as deer, rabbit and groundhogs) lurk.
- If you live next to a pesticide happy neighbor, you will want to locate your garden away from a spray zone and will want to think about runoff. A helpful site to determine runoff capabilities of specific pesticides is: <http://www.pw.ucr.edu/>
- Remember you may need to water your organic garden bed once in awhile, so keep it close to a water source (or at least someplace to which you don't mind lugging a hose).
- Start small: a 3 x 10 foot plot can grow a good bit if you plan well. Lay out a 12 layer thick plot of newspaper over the grass where you want your garden to grow and dump 4 inches of composted manure, manure and

hummus mix or mushroom soil over top of the newspaper.

You can purchase in bulk from a garden center (I would do 2 cubic yards for a 3 x 10 spot) or in bags (about 15 40 lb bags).

That's it. Now go away and leave the garden alone until spring. During the fall and winter, the grass will die and the newspaper will rot. Both will become a source of composted nutrients for your garden veggies. While you hibernate this winter, start your wheels turning and think about what crops you will grow. Buy a few packs of discounted seeds now; they will still germinate next year.

When the ground is ready in the spring, rent a tiller or get a sturdy pitchfork (trust me, the tiller is SO much easier!!) and turn over the soil mixing the composted manure, rotted newspaper and dead sod into the rocky soil we have around here. The result will be a much richer garden soil that your vegetables will love.

What are you waiting for?? Get cracking now and start your produce garden. Hopefully, by next spring your kids will be eating and enjoying organic beets that they grew !!!!

Marion Mass MD, FAAP

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*In practice for 17 years, Marion Mass MD, FAAP graduated from Penn State and Duke University Medical School. She*

completed her pediatric residency at Northwestern University's Children's Memorial Hospital in Chicago. Currently Dr. Mass works at Jellinek Pediatrics in Doylestown, PA and serves on the Wellness Council of the Central Bucks School District, PA. Produce from her kids' garden garnishes the plates of many local families as well as the plates of the restaurant Puck. All garden profits benefit Relay for Life. ☐ When she is not in her home garden, you can find her also tending to her son's middle school garden.

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## Why is my potty trained child's underwear occasionally damp?



A mom of a six-year-old patient asked recently, "Why is my daughter's underwear damp?"

*"I guess you don't worry about keeping your kids dry."*

-She's been potty trained for 3 years.

-She is dry overnight.

-She urinates about 6 times in the daytime.

-She doesn't complain of pain during urination.

Yet, her underwear is occasionally slightly wet.

We don't know if anyone has ever tracked the statistics, but this girl's cause of damp underwear is common in little girls. Called vaginal voiding, vaginal voiding occurs when a girl urinates on the toilet with her legs tightly pushed together. She pulls her pants down minimally, to about mid-thighs so urine gets trapped in the vagina as it comes out the urethra. When she stands up and pulls up her pants, the drop of urine that was trapped in the vagina will drip out into her underwear.

The treatment of vaginal voiding is simple. Make sure your daughter pulls her pants all the way down to her ankles when sitting on the toilet. Encourage her to spread her knees apart while urinating. You could even have her sit on the toilet seat BACKWARDS, facing the back of the toilet. This position forces the knees apart and prevents any urine from becoming trapped. In turn, her underwear will remain dry.

A reason both girls and boys occasionally have damp underwear is giggle incontinence or cough incontinence, which is exactly what it sounds like—a bit of urine gets leaked during laughing or coughing.

To help kids who leak during coughing or laughing, first make sure that they are not holding in their urine for too long. Have your child do a potty check, as in "go sit on the potty," every 2-3 hours throughout the day. Try setting an alarm on her iPod or on your cell phone. Often, merely providing enough opportunities during the day to empty the bladder cures the

problem of leaking during laughing or coughing.

After trying these simple measures, if your child's underwear is still wet or your child tells you that she still leaks during coughing or laughing, discuss this problem with your child's doctor. In addition, please know that while laughing daily is wonderful, daily coughing is not normal. Your child may need further evaluation for the source of a daily cough.

Damp or wet underwear may not be the most glamorous pediatric topic, but it is important for the kids who suffer from it. Hopefully this post offered a quick fix for some of your kids. You and your laundry machine will be happier.

Julie Kardos, MD and Naline Lai,MD

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**Enterovirus D-68 put into  
perspective**

No doubt, there has been an uptick in respiratory illness in our area, but the news media is causing panic specifically over one of them:  
enterovirus D-68.



The name “enterovirus” does not imply “deadly.” Many of you are well familiar with hand-foot-mouth disease, aka “Coxsackie virus.” Guess what? This extremely common, benign but annoying virus is also an enterovirus!

Let’s put into perspective how this “new” respiratory virus compares with an “old” well-known respiratory virus, influenza (The Flu). Remember that both flu and enterovirus D-68 are tracked by REPORTED cases. Most of the time doctors do not test children with mild disease so most reported cases are hospitalized patients.

**Enterovirus D-68, the numbers:** From mid-August through the first week in October (peak enterovirus season)- 664 people are known to have been infected in the USA, most of whom are children. You can track these numbers on this Centers for Disease Control website.

**Influenza, the numbers:** Each year in the US, approximately 200,000 people (children and adults) are hospitalized from complications of the flu. This year’s flu season in the northern hemisphere is just starting. Generally peak flu season is in the winter months. Large numbers of people contract the flu but they are not sick enough to be hospitalized- they suffer a week of fever, cough, sore throat

and body aches at home but recover uneventfully. Up to 20% of the population are infected with flu each season.

**Death from enterovirus D-68:** 1 child. Four other children died who tested positive for this virus but it is unknown if the virus caused their deaths.

**Death from influenza** during the 2013-2014 flu season: 108 children

**Symptoms of enterovirus D-68:** range from mild cold symptoms to high fever and severe respiratory symptoms

**Symptoms of flu:** usually abrupt at the onset: fever, body aches, cough, and runny nose. Please see our prior post for more information.

**Prevent enterovirus D-68:** same as for all “cold” viruses- wash hands, sneeze/cough into elbow, not hands.

**Prevent flu:** Same as for enterovirus D-68, AND we have an Influenza vaccine for all children aged 6 months and above, with a few exceptions-see our article for more information. Last year the flu vaccine was about 60% effective: it’s not perfect, but it is certainly better than not vaccinating.

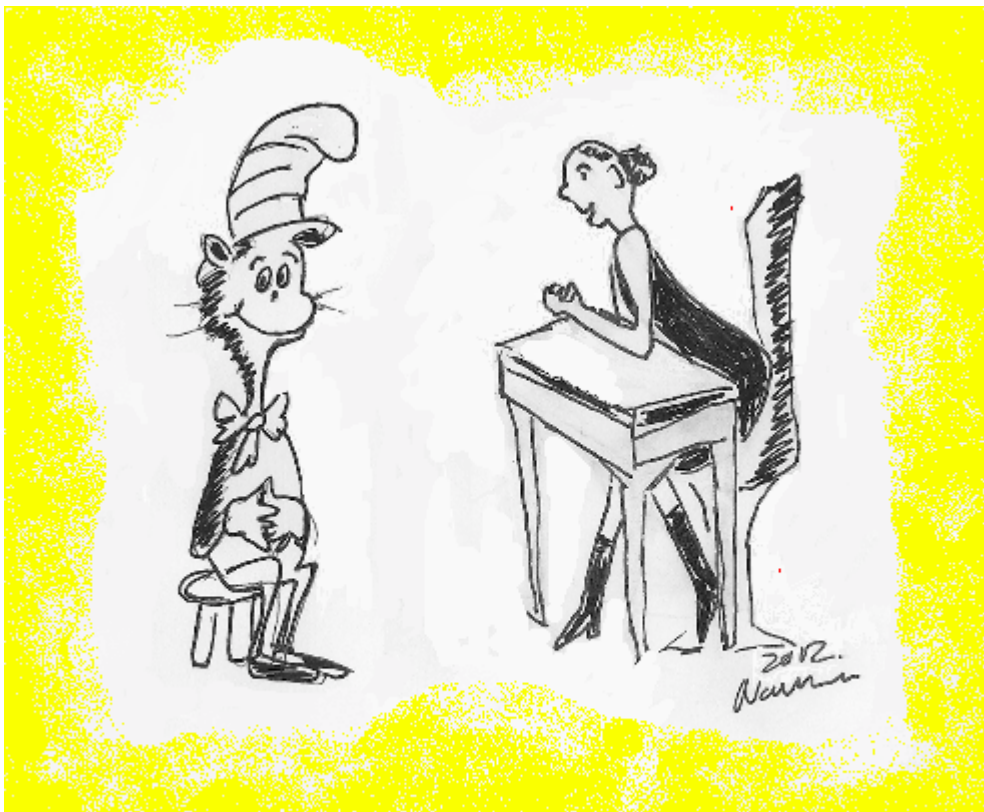
Overall, remember that enterovirus D-68 is one of many cold viruses that circulate the country. We are all familiar with back-to-school viruses. My teen-aged son told me, amid his sniffles and nose-blowing last week, that “more than half my school has a cold now.”

Certainly some of those colds could be enterovirus-D-68. But please don’t panic. All respiratory illnesses, including colds, have the potential to travel into your child’s lungs. It is more important to practice good illness prevention techniques and to recognize the signs of difficulty breathing. As we have said before, if we parents could worry all illnesses away, no one would ever be sick.

Julie Kardos, MD and Naline Lai, MD

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# Enterovirus D68, RSV, The flu! How do I know my kid's having trouble breathing?



*"Mr. Cat, if you join the staff at Star Early Child Education Center you will be wearing more than one hat."*

Mid-west respiratory virus, RSV, The Flu! Lots of respiratory-distress-causing-germs. Although Enterovirus D68 is in the news these days, a slew of infections can hit the lungs hard. So even if you think your child has a simple cold, it's important to recognize when your child is having difficulty

breathing. Share this information with all of your child's caretakers, including teachers. As this cartoon illustrates, many people wear medical hats. Too often we get a child in our office with labored breathing which started during school hours but was not recognized until parent pick up time.

Signs of difficulty breathing:

- Your child is breathing faster than normal.
- Your child's nostrils flare with each breath in an effort to extract more oxygen from the air.
- Your child's chest or her belly move dramatically while breathing—lift up her shirt to appreciate this.



- Your child's ribs stick out with every breath she takes because she is using extra muscles to help her breathe—again, lift up her shirt to appreciate this. We call these movements “retractions.”
- You hear a grunting sound (a slight pause followed by a forced grunt/whimper) or a wheeze sound at the end of each exhalation.
- A baby may refuse to breast feed or bottle feed because the effort required to breathe inhibits her ability to eat.
- An older child might experience difficulty talking.
- Your child may appear anxious as she becomes “air hungry” or alternatively she might seem very tired, exhausted from the effort to breathe.
- Your child is pale or blue at the lips.

In this video, the child uses extra chest muscles in order to breathe. He tries so hard to pull air into his lungs that his ribs stick out with each inhalation.

For those with sensitive asthma lungs, review our earlier asthma posts. Understanding Asthma Part I explains asthma and lists common symptoms of asthma and Understanding Asthma Part II tells how to treat asthma, summarizes commonly used asthma medicine, and offers environmental changes to help control asthma symptoms.

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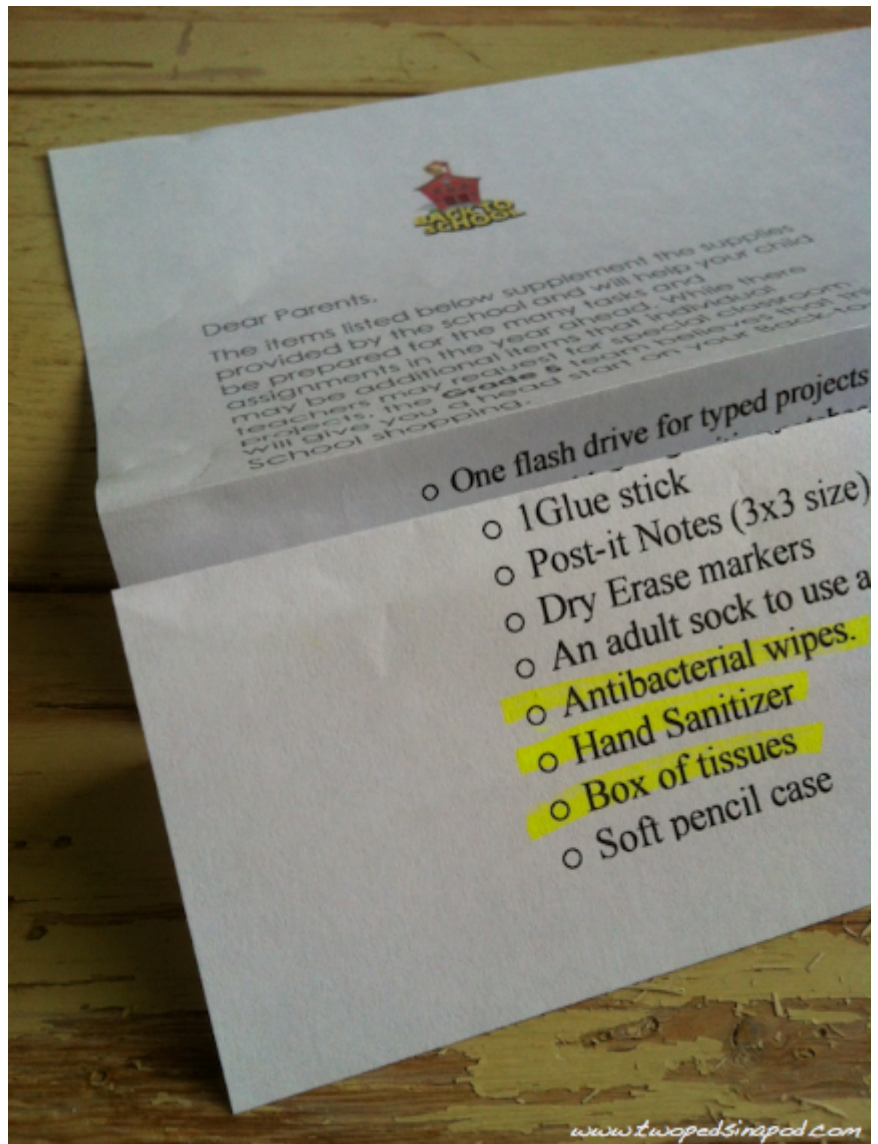
updated from our previous 2012 post

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## **Flu vaccines: what you need to know for the 2014-2015 flu**

# season

We gave our kids their back-to-school haircuts, donated their pants that fit like floods, and bought them new folders and notebooks. As shown on our back-to-school supply list photo, back-to-school also means the start of hand sanitizer and tissue season. Yes, it's time for your child's yearly flu vaccine. Even if you gave your child a flu vaccine last year, she'll need another one this



season. Not only does the flu or influenza virus (not to be confused with “the stomach bug/stomach flu”) usually come back every season in a slightly different form, but your child’s immunity has waned over the past year. With every flu season, the Centers for Disease Control comes out with new recommendations. Here is a snap shot:

## Who needs the flu vaccine?

All children aged 6 months or older, with a few exceptions discussed below, should receive a flu vaccine every year.

## How many doses of flu vaccine does my child need this year?

If your child is nine years or older, your child only needs one dose this season.

If your child is younger than nine, your child only needs one dose this season **UNLESS:**

- This year will be the **first** time your child receives the flu vaccine. Then, she will need a second (booster) dose at least 4 weeks later.
- Your child skipped last year's flu vaccine. Then, she may need a booster dose this year. Check with your child's doctor.

**Which type of flu vaccine is better, a shot or the mist (squirt in the nose)?**

This year, the Centers for Disease Control suggests, if available, to give children aged 2-8 years the squirt in the nose. However, if the mist is unavailable, do not delay the vaccine. Give your child a flu shot instead. For older kids, the data is not as clear cut as to which vaccine works better to prevent the flu. Give your child either form of the vaccine.

**Who cannot receive the mist?**

Kids younger than 2 years; kids with certain medical conditions such as ongoing asthma (wheezing in the past year, or 2 through 4 years of age with asthma) and diabetes; kids undergoing aspirin therapy; kids who have had influenza antiviral therapy in the last 48 hours; kids with immune deficiencies; and kids around immunosuppressed people who require a protective environment (e.g. around people hospitalized in a bone marrow transplant unit), should not receive the mist. **These kids should receive the injectable form of flu vaccine.** Your child's doctor can provide the complete list of contraindications.

**Who should NOT receive any flu vaccine?**

Babies younger than 6 months old and children with severe egg

allergy (anaphylaxis) should not receive the flu vaccine.

Our office is slotted to receive our annual supply of flu vaccine in the next few weeks. Our own families have learned to expect the annual flu vaccine with the start of each school year. Now we just need to convince them that they needed the haircuts.

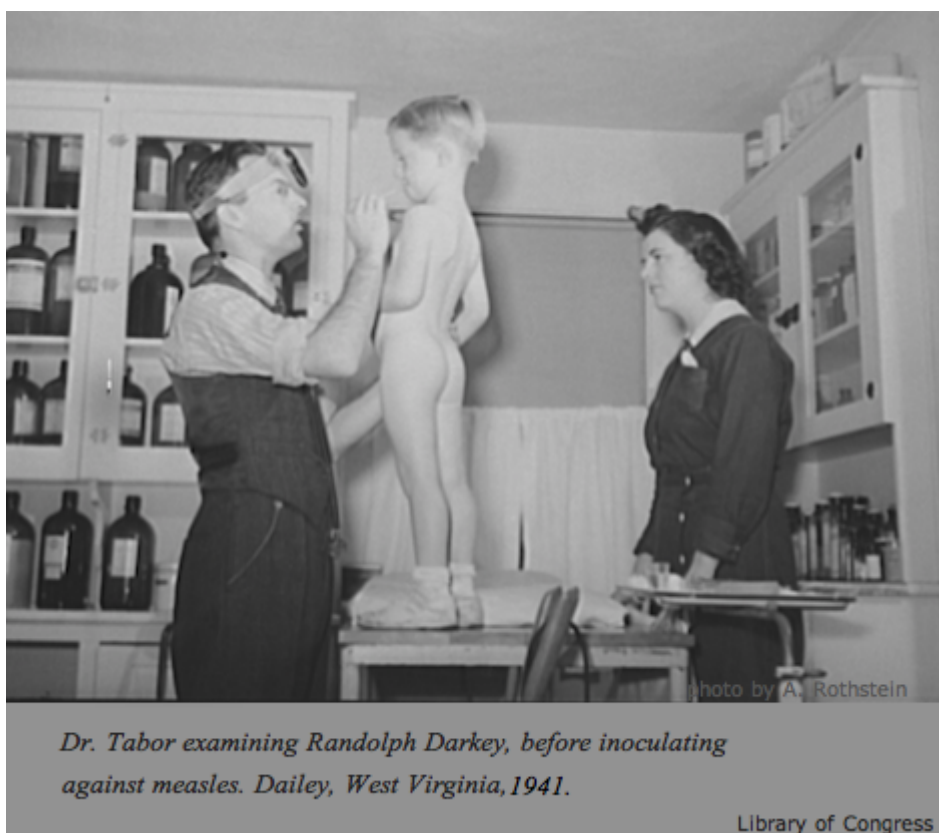
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## The return of measles- What to look for in your child

Yet another reminder about the signs and symptoms of measles from a health agency landed in our email inbox the other day. The reason? According to the Centers for Disease Control, as of this point, the United States has seen more measles



cases this year (almost 600 reported) than in the past decade (typically 60 cases per year). Organizations are

reminding physicians about the symptoms of measles because thanks to vaccinations, many pediatricians have not seen a case of the measles in decades. In this post, we pass the information on to you. After all, you will be the first to recognize that your child is ill.

Measles typically starts out looking like almost every other respiratory virus— kids develop cough, runny nose, runny bloodshot eyes, fever, fatigue, and muscle aches.

Around the fourth day of illness, the fever spikes to 104 F or more and a red rash starts at the hairline and face and works its way down the body and out to arms and legs, as shown here at the Immunization Coalition site. Many kids also develop Koplik spots on the inside of the mouth (small, slightly raised, bluish-white spots on a red base) 1-2 days before rash.

In the US, one in 10 kids with measles will develop an ear infection and one in 20 will develop pneumonia. Roughly one in 1000 kids develop permanent brain damage, and up to two in 1000 who get measles die from measles complications. Kids under age 5 years are the most vulnerable to complications. These statistics are found here. For global stats on measles, please see this World Health Organization page.

There is no cure for measles and there no way to predict if your child will have a mild or severe case. Fortunately, one dose of the MMR (Measles, Mumps, Rubella) vaccine is 92% effective at preventing measles, and two doses are 97% effective at preventing measles. That's the best we can do, but this 97% protection rate works great when everyone is vaccinated. The American Academy of Pediatrics recommends giving the first dose of MMR vaccine at 12-15 months and the second dose at school entry, between 4-6 years of age.

If parents refuse the MMR vaccination for their children, then more people are left susceptible to measles. This leads to

more people who can spread the disease when it hits a community. Measles is one of the most contagious diseases known: 9 out of 10 unvaccinated people exposed to measles will become sick, and infected people are contagious even before symptoms appear. One of the reasons behind the increase in measles cases is the increase in unvaccinated children. One patient of Dr. Kardos's was a four-year-old boy who was behind on his vaccines and hospitalized for measles pneumonia. Before he was diagnosed he exposed an entire Emergency Department to measles.

In our global world, another reason for the spike in measles cases is the increase in travel between countries. In fact, young children traveling internationally often need to get the MMR vaccine outside of the routine schedule. If you plan on traveling, check here to see if you need to give your child the MMR vaccine on an early schedule.

With increased vigilance and vaccination, hopefully measles will once again become a disease few doctors have ever encountered. After all, vaccines did eradicate small pox. The last case of smallpox in the United States was in 1949, and the last case in the world was in 1977. In the meantime, you'll know how to "spot" a case of measles too.

Julie Kardos, MD and Naline Lai, MD

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## **On letting go and coming back**



Friends make birthdays better

I have been musing ever since our hosting site told us they were switching blog platforms. In a blink of an eye, our blog was slated to disappear. The dynamic Two Peds in a Pod community would be plunged into silence. At first, disbelief gave away to intrigue. Was this a sign to change personal paths? As I started to think of all the things I could do with the time that I would have spent writing the blog, my to-do list grew and grew. I could hear my son's closet, overflowing with outgrown clothing, crying out to be re-organized.

When I told friends of the opportunity to dissolve the blog, I heard time and time again "I think you should save it." Even friends without children were aghast. When I told my own children that the blog was on the verge of imploding they looked at me blankly and said, "Why would you stop writing for Two Peds?"

Then I remembered the mom who read our article on croup seven

times in one night. I remembered Dr. Kardos's patient whose dad said our strep throat article helped him decide not to cut his family's vacation short. I thought of the many times parents thanked me for posts which allayed their fears of fever.

The blog did eventually stop when the old hosting site went down. But as my friends and family reminded me, the goal of the blog is to positively impact children globally by guiding their caretakers; and by the time the blog went down, we had reached nearly three million views. Two Peds in a Pod is "Practical pediatrics for parents on the go." After more thought, I decided it would be difficult to accomplish this goal from the back of one of my kid's closets.

So today, I am happy to post that the stop was just a temporary suspension. I credit my friends and family for reminding me of the original goal of the blog. In particular, thanks to Dr. Kardos. While I was mulling, Dr. Kardos was busy staying up past midnight valiantly importing posts from the rapidly fading old site.

We're back, albeit a little rough around the edges as we construct the new site. And it's just in time for our 5th birthday!

Thanks, my friend, Dr. Kardos. I wouldn't be able to blow those candles out without you.

Happy 5th Birthday Two Peds in a Pod- may there be many more.

Dr. Lai

Naline Lai, MD and Julie Kardos, MD

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