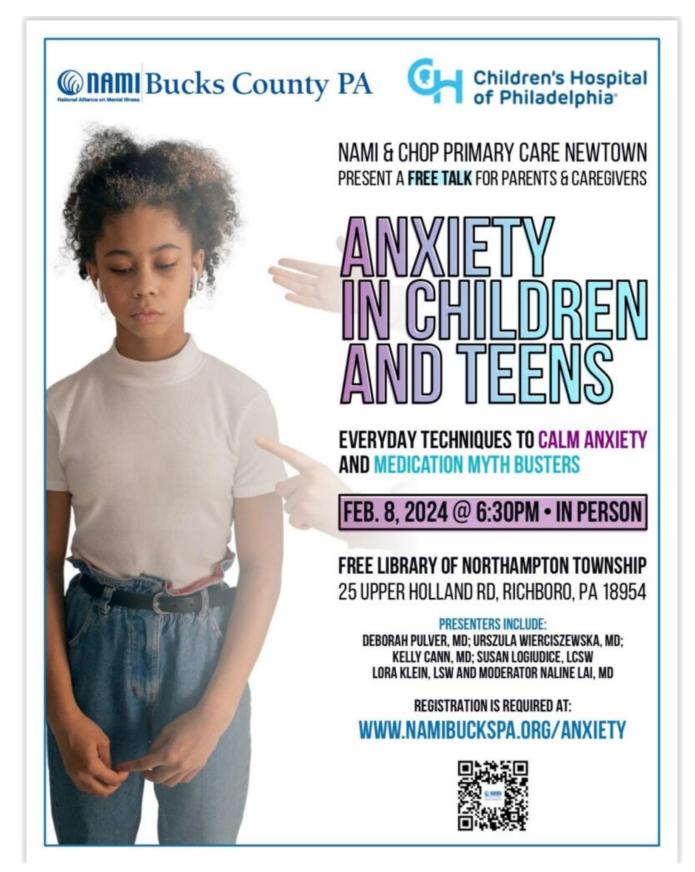
Managing anxiety in children



Parents local to Northampton Township, PA: We welcome you to come hear local pedatricians from The Children's Hospital of

Philadelphia and mental health experts talk about basic ways you can help manage anxiety and some information about medications for children and teens on February 8, 2024 at 6:30pm in the Northampton Library.

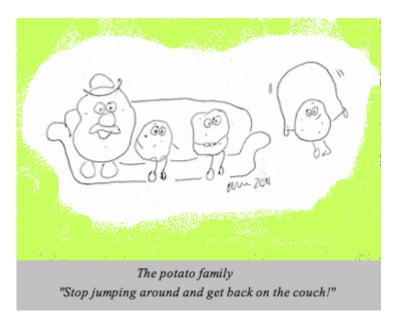
The talk is free and there will be time for questions. Please register so we set up enough chairs!

Special note: your Two Peds will be in attendance. Hope to see you there!

Naline Lai, MD and Julie Kardos, MD

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Quick exercises for kids and teens



Physical therapist Dr. Deborah Stack brings us quick exercises for kids and teens — Dr. Lai and Kardos

After six months of COVID; yes, it really has been that long

already, your family has probably found some favorite outdoor hiking spots or bike routes. But what can you do when it's too cold or wet outside? How can you combat literally HOURS of kids sitting at computers especially if they only have 30-45 minutes until their next class? Here are quick exercises for kids and teens and a table of caloric expenditure for common activities.

Schedule active movement breaks into their day. Take advantage of that lunch and recess "break" and be an example yourself.

Here are some short burst ideas:

- Have a 15-minute dance party
- Use your body to make all the letters of the alphabet
- Shadow box to some music
- Dust off the treadmill or stationary bike in the basement
- Play ping-pong
- Do a few chores (carrying laundry baskets up and down is great exercise)
- Jump rope
- -Jog in place
- Do jumping jacks
- Pull out some "little kid games" such as hopscotch or hulahoop
- Let each child in your house choose an activity for everyone to try
- Do a family yoga video
- •Walk or "run" stairs...kids can try to beat their prior score for a minute of stairs
- Take walking/wheeling/even wheelbarrow laps around the house
- Stretch out calves, quadriceps, arms and back…see ergonomics post for counteracting all the sitting

Don't forget the teenagers; they still need activity too especially if their teams are not practicing or competing. Staff from the Mayo Clinic recommend kids ages 6-17 should have one hour of moderate exercise each day. Exercise can help improve mood (through the release of endorphins), improve sleep and therefore attention (critical with all the online learning), and improve cardiovascular endurance. Here are some numbers to get the kids moving:

All activities are based on 20 minutes and a teen who weighs 110 pounds. The number of calories burned depends on weight. If your child weighs more, he will burn a few more calories, if he weighs less, he'll burn a few less. Below the table are links to some free and quick calorie calculators on the web so your kids can check it out for themselves. For those attached to their phones, there are web apps too.

ACTIVITY	CALORIES USED
Shooting Basketballs	75
Pickup Basketball game/practice	100
Biking on stationary bike	116
Dancing	75
Hopscotch	67
Ice Skating	116
Jogging in place	133
Juggling	67
Jumping Rope	166
Ping Pong	67
Rock Climbing	183
Running at 5 mph	133
Sledding	116
Treadmill at 4 mph	67
Vacuuming	58

caloriesperhour

Try these activity calculators:

http://www.caloriecontrol.org/healthy-weight-tool-kit/lightenup-and-get-moving

https://www.webmd.com/fitness-exercise/healthtool-exercise-calculator

Keep 'em moving- you'll have more fit, better rested, and happier kids!

Deborah Stack, PT DPT PCS ©2020 Two Peds in a Pod®

Dr. Stack is a board certified specialist in pediatric physical therapy and the owner of the Pediatric Therapy Center of Bucks County, LLC in Doylestown, PA. In addition to treating children ages 0-21 for conditions such as torticollis, coordination, neurologic and orthopedic disorders, she also instructs physical therapists across the country in pediatric development and postural control and is a Certified Theratogs fitter.

Going back to school online? Here's what pediatricians want you to know



Chances are, because of COVID 19, this school year will look different for your children. Here are your Two Peds' tips for helping your children if they are learning online this fall.

Start with basics such as setting a sleep schedule. Think about how many hours your child slept during the spring quarantine and over the summer. If they woke up refreshed, that is the optimal amount of sleep they need to be alert during class. Incorporate this into your school year expectations. Falling asleep too late and sleeping too late? Check here on how to get your child's late schedule under control.

Set up an **eating routine**. Healthy eating habits have not changed from when you were a child. Stick to the school year schedule of breakfast, lunch, dinner and a morning and afternoon snack — just like at school. Don't allow the kids to graze. Without structure, children tend to throw off their weight- in fact, kids tend to gain weight more quickly in the summer than during the school year.

Rehearse mask wearing. Even though they attend school at home, your kids will go to the grocery store, see a good friend or get a haircut. Teach them to wear a mask properly so you don't need to spend time readjusting their masks outside of the house.

Keep up the hand hygiene at home: Washing hands always limits germ spread. WHEN—before and after eating, after using the bathroom, after playing outside, and before and after school, the HOW—soap and water preferred for the duration of time it takes to sing the Happy Birthday song twice, or hand sanitizer

if a sink is not available, and the WHY—avoid germ spread. See our post on handwashing.

Prevent neck and back strain from continual computer use: Read these posts on ergonomics and proper computer positioning to prevent your children from feeling like pretzels at the end of the day. Likewise, prevent eye strain.

If you are worried about the amount of additional time your children will spend in front of the computer for entertainment in addition to schoolwork, use the American Academy of Pediatrics' Family Media Plan tool to create a customized screen time contract.

Create a home learning space that your child can call their own. This will be where your child will complete schoolwork and homework. This is especially important if you child usually spends time doing homework on their bed. You want your child to associate their bed with relaxation and sleep rather than activities that rev up their mind.

Get your child the flu vaccine this fall. Even if you never immunized in the past, this is the year you should. Please see our post on the benefits of the flu vaccine.

Help your child to "roll with the punches." Change, even happy change, can be stressful for adults. After all, we all know how adults often run around frantically during the winter holidays. If you feel frustrated, angry, or fearful about the pandemic, try to keep the brunt of your own negativity from your children. Kids are often more adaptable than you might give them credit for, but they tend to mimic their parents and look to parents about how to respond to new situations. Seek adult help to prevent your own negative feelings from flowing over and smothering your children.

You can do this. Who taught your children their first words? How to walk? The color of an apple? How to organize their homework? You will still have teachers who will teach the

content of a class. Your role, as it always has been, is to provide the best possible learning environment.

No matter how it looks, we wish your family a great start to the school year!

Naline Lai, MD and Julie Kardos, MD

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Kids on computers: are special blue light-blocking filters worth the expense?



Kids are spending much more time on computers and other screens learning, staying in touch with friends and family virtually, and playing games. Are glasses with special blue light-blocking filters worth the expense? Our guest blogger, pediatric ophthalmologist Dr. Sheryl Menacker, addresses this question.

-Drs. Kardos and Lai

There is much buzz about glasses that filter out blue light from computer, phone, and other screen devices. But are the problems real and are these glasses worth the expense?

The American Academy of Ophthalmology says *no*, and here is the explanation from their website.

Are eyeglasses with special blue light-blocking

filters worth the expense?

By absorbing the excess blue light from our devices, the eyeglasses claim to:

- improve sleep
- reduce digital eye strain
- prevent eye disease

We all want to do these things, but it's not necessary to spend money on special eye wear for computer use. Here's why:

- •Blue light from computers will not lead to eye disease. It is true that overexposure to blue light and UV light rays from the sun can raise the risk of eye disease, but the small amount of blue light coming from computer screens has never been shown to cause any harm to our eyes.
- Sleep can be improved without special eyeglasses. You don't need to spend extra money on blue light glasses to improve sleep— simply decrease evening screen time and set devices to night mode.
- Digital eye strain is not caused by blue light. The symptoms of digital eye strain are linked to how we use our digital devices, not the blue light coming out of them.

Computer/digital eye strain

While using devices will not damage your eyes permanently, staring at them for a long time can cause temporary discomfort. People experience eye strain in different ways, but symptoms can include:

- dry eyes
- blurry vision
- tearing or watery eyes
- headache

The reason we get digital eye strain is that we blink less when we stare at our devices.

Normally, humans blink around 15 times per minute—but this "blink rate" can be cut in half when staring at screens or doing other near work activities (like reading). To reduce eye strain:

- Take frequent breaks by using the "20-20-20" rule. Every 20 minutes look away from your screen and look at an object 20 feet away for at least 20 seconds. This gives your eyes a chance to reset and replenish themselves.
- Use artificial tears to lubricate your eyes when they feel dry.
- **Keep your distance.** Sit about 25 inches or at arm's length from your screen and adjust its height so you're looking slightly downward at it.
- Reduce glare and brightness. Devices with glass screens can cause glare. To reduce glare, consider a matte screen filter for your device. Adjusting the brightness and contrast of your screen and dimming the lighting near your screen can also help reduce eye strain.
- Wear eyeglasses. If you wear contact lenses, you already know they can increase dryness and irritation. To reduce these symptoms, try wearing eyeglasses instead when working on a computer for longer periods.

Sheryl Menacker, MD ©2020 Two Peds in a Pod®

Dr. Sheryl Menacker, of Tri-County Eye Physicians, is a certified Diplomate of the American Board of Ophthalmology, a Fellow of the American Academy of Ophthalmology, member of the American Association for Pediatric Ophthalmology and Strabismus, and examiner for the American Board of Ophthalmology. In addition to general pediatric ophthalmology, Dr. Menacker has a specialty interest in treating individuals with disabilities. She holds a clinical appointment at the

University of Pennsylvania School of Medicine and Emory University, where she is an active teacher and lecturer.

Teen vegetarian diet basics



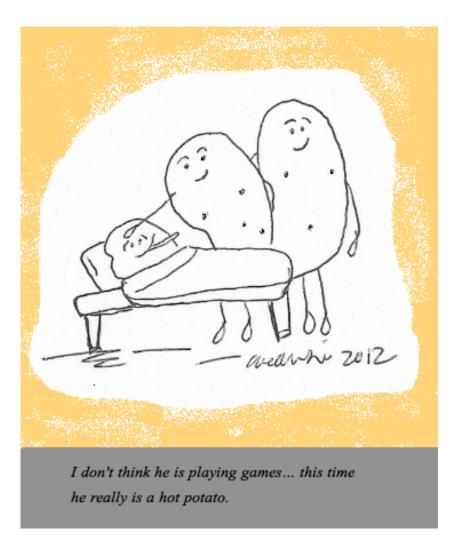
veggies, veggies, veggies

"Monitor your child's diet closely to make sure they are getting enough calories... Some teens need 4,000 calories a day when they're in a growth spurt!"

Check out the Children's Hospital of Philadelphia Tip of the Week- a post on vegetarian teen diet basics with input from Dr. Lai!

Julie Kardos, MD and Naline Lai, MD

Is your child sick? When to call the doctor



Unfortunately, it is sick season. Fortunately, we have a great post to help you know when you need to call the doctor about your child's illness.

Julie Kardos, MD and Naline Lai, MD

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Coughing out germs? Natural remedies for kids



"coughing out germs"

Recently a 6-year-old patient handed me this drawing of "a person coughing out germs."

The artwork reminds us that a cough can be a good thing. A cough dislodges mucus from the airway and can help prevent pneumonia.

However, coughs can spread germs and make kids feel plenty uncomfortable. And, frustrating for parents, many over-the-

counter medicines are not recommended for kids.

Looking for natural remedies for kids? Look no further than your kitchen.

Julie Kardos, MD and Naline Lai, MD

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Ready for school: backpacks, packing lunches, when to keep your kid home for illness, and more



Now that you just read how to drop your kid off at school on the first day, you may be backpack shopping, pondering what to send your child for lunch, and knowing that your child will have difficulty waking up early for school. Never fear! Your Two Peds can help you and your kids get ready for school.

First, make sure your child's backpack fits correctly and is not too heavy. Our guest blogger, a pediatric physical therapist, provides tips to help lighten the load.

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

If your child brings lunch to school, you may need some hints on what to pack and how to beware of junk food disguised as healthy food. And this post provides suggestions for healthy snacks. Need suggestions on how to motivate your child to want to learn? Two former school principals share their wisdom in this post.

Finally, you should know when to keep your child home for illness. This post also contains some surprising truths about when you can send your child back to school during as well as after certain maladies.

Julie Kardos, MD and Naline Lai, MD ©2018 Two Peds in a Pod®

Poison ivy: stop 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, the rash of poison ivy is NOT contagious. You can "catch" a poison ivy rash ONLY from the

plant, not from another person.

Another myth buster: You can not spread the rash of 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. Some doctors recommend giving it twice a day- ask your pediatrician.

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 the chance of

infection. Just like with an itchy insect bite, with each scratch, your child is possibly introducing infection into an open wound. At night, turn up the air conditioning and put your child into pajamas that cover up the poison ivy. Kids who don't scratch in the day often scratch subconsciously at night. 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.

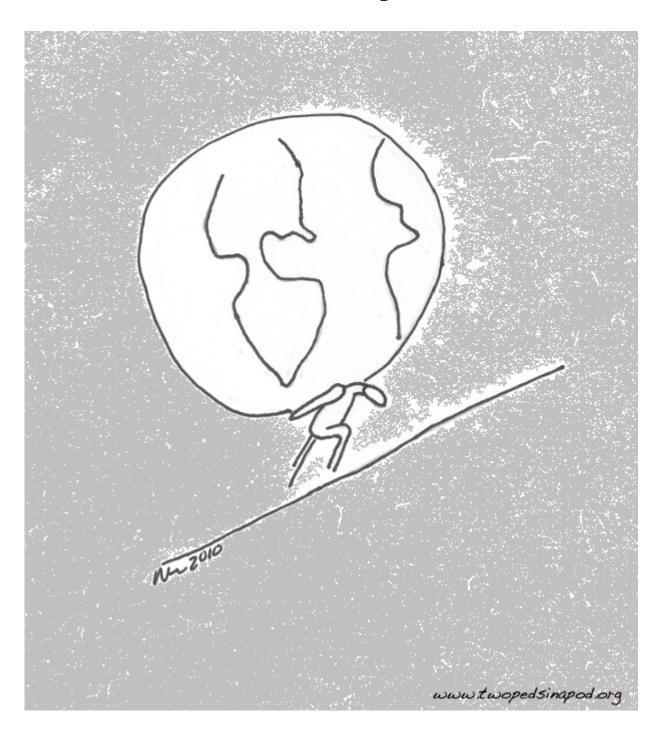
However, infections cause pain — if there is pain associated with a poison ivy rash, think infection. Allergic reactions cause itchiness- if there is itchiness associated with a rash, think allergic reaction. Because it usually takes time for an infection to "settle in," an infection will not occur immediately after an exposure to poison ivy. 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 ©2018 Two Peds in a Pod®

Discussing suicide: how much should I tell my kids?



In the wake of chef Anthony Bourdain and designer Kate Spade's deaths from suicide, you may be wondering how to address the topic of suicide with your child. We bring back psychotherapist Dina Ricciardo's post for guidance:

"Hi, it's me, Hannah. Hannah Baker." So begins the first

episode of 13 Reasons Why, a thirteen installment Netflix series that focuses on the aftermath of the suicide of a 17year-old high school student. Based on the novel by Jay Asher, the series has sparked quite a bit of debate and concern among parents and mental health professionals. best, the series has served as a conversation starter; at its worst, it has glamorized suicide and the fantasy of revenge. At the end of the day, however, an important question How do we talk with our kids about suicide? many difficult topics have become increasingly safer to discuss, suicide is one that is still shrouded in secrecy and shame. In fact, it is so difficult to talk about that I had a hard time writing this post. Finding the right words about something that often remains unspoken is not an easy task. if circumstances require it, how are we to explain suicide to our children?

According to the American Foundation for Suicide Prevention, research has shown that over 90% of people who died by suicide had a diagnosable, though not always identified, brain illness at the time of their death. Most often this illness was depression, bipolar disorder, or schizophrenia, and was complicated by substance use and abuse. Just as people die from physical illnesses, they can die as the result of emotional ones. If we can change the narrative about suicide from talking about it as a weakness or character flaw to the unfortunate outcome of a serious, diagnosable, and treatable illness, then it will become easier for us to speak with honesty and compassion.

Telling the truth about any death is important. While it is natural for us adults to want to protect our children from pain, shielding them from the truth or outright lying will undermine their trust and can create a culture of secrecy and shame that can transcend generations. We can protect our children best by offering comfort, reassurance, and simple, honest answers to their questions. It is important to

recognize that we adults typically offer more information than our children require. We should start by offering basic information, then let them take the lead on how much they actually want to know.

For young children, your statements may look something like this: "You have seen me crying, that is because I am sad because Uncle Joe has died." They may not even ask how the death occurred, but if they do, you can say "He died by suicide. That means he killed himself." The rest of the conversation will depend on the child's response. With older children, the narrative can follow a similar theme yet use more sophisticated language. The older the child, the more likely they are to ask direct questions. Some examples of honest answers are "Do you know how people have illness in their bodies, like when Grandma had a heart attack and our neighbor had cancer? People can get illness in their brains too, and when that happens, they feel confused, hopeless, and make bad decisions. Uncle Joe didn't know how to get himself help to stop the pain." If they ask how the suicide occurred, you can say "With a gun" or "She cut herself." Sometimes you will have to say "I don't know. I wish I knew the answer." Whatever the age of your child, do your best to use simple, truthful language.

Regardless of age, children converse about and process death differently than adults. If you tell your child about a suicide, it is likely that he/she will want to talk about multiple times over the course of days, weeks, or even years. Keep the dialogue open, and check in with them periodically if they have questions. If you find that you or your family is in need of the support of a professional, you might want to consider a bereavement group or a trained professional who specializes in grief. These resources are available through online directories, local hospitals, and the Psychology Today therapist finder. Overall, be aware that providing truthful information, encouraging questions, and offering loving

reassurance to your children can allow your family to find the strength to cope with terrible loss.

(Excerpts taken from The American Foundation for Suicide Prevention's "Talking to Children about Suicide", www.afsp.org.)

Links:

Sesame Sreet Workshop's When Families Grieve
The Dougy Center for Grieving Children and Families
The American Foundation for Suicide Prevention
Hands Holding Hearts (Bucks County, PA)
The Jed Foundation

Dina Ricciardi, LSW, ACSW

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Guest blogger Dina Ricciardi is a psychotherapist in <u>private</u> <u>practice</u> treating children, adolescents, and adults in Doylestown, PA. She specializes in disordered eating and pediatric and adult anxiety, and is also trained in Sandtray Therapy. Ricciardi is a Licensed Social Worker and a member of the Academy of Certified Social Workers. She can be reached at dina@nourishcounseling.com.