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HOUSE CALL
Your Child’s Tummy Ache Could Be Irritable Bowel Syndrome

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Question: My son frequently complains that he has stomachaches. I’m not sure what is causing them. What should I do?

Answer: “I have a tummy ache” is one of childhood’s most common complaints. Any child who complains frequently of abdominal pain should see a doctor, especially if the pain is associated with fever, blood in the stool, disturbed sleep, or weight loss. A child whose stomachache accompanies constipation or diarrhea could be suffering from irritable bowel syndrome, or IBS, a functional gastrointestinal disorder.

Those with IBS have intestines that are more sensitive than others’. The sensitive intestines of a person with IBS make food move too quickly or slowly. This condition doesn’t harm the intestines or lead to any other diseases. But its recurring symptoms—pain, gas, diarrhea, and/or constipation—can be bothersome. Functional dyspepsia—upper abdominal pain, often with nausea, occasionally with vomiting—is another common pediatric functional gastrointestinal disorder.

An Increase of IBS in Children
Recently, IBS has begun to be recognized as a pediatric problem and it can be seen in children as young as age 7 or 8, though it’s more common in teen-agers. As with adults, more girls than boys have IBS.

Like adults, children can reduce their symptoms by minimizing known culprits, including stress and certain foods. They should try to eat the same high-fiber, low-fat, caffeine-free diet that helps many adults. Keeping a food diary also can help parents discover what foods to limit.

Other Suggestions to Help Your Child
In addition to their IBS, some children can’t handle different sugars, including lactose, fructose, and maltose. To see if it relieves their pain, try to have your child avoid milk, fruit juices, and the corn syrup that’s present in most processed foods.

If these dietary changes alone aren’t effective, medication may be prescribed by your child’s physician. Although frequently prescribed, medications don’t help all children with IBS.

After dinner, let your child suck on two candies containing a natural intestinal relaxant, such as peppermint oil.

Do you have a question for the pediatric experts at Children’s Mercy Hospitals and Clinics? Submit your question by sending an e-mail to thassen@cmh.edu or writing the editor: Telisa Hassen, Community Relations, Children’s Mercy Hospitals and Clinics, 2401 Gillham Road, Kansas City, MO 64108. We will answer as many inquiries as possible.
Deciding to let your child stay home alone is a process. It requires planning, teaching, and taking a realistic look at your child’s readiness.

“There is no simple answer that will apply to every child,” says Rochelle Harris, PhD, Clinical Psychologist at Children’s Mercy Hospitals and Clinics and Assistant Professor of Pediatrics at the UMKC School of Medicine. “Not all children of the same age are able to handle the same situations.”

The American Academy of Pediatrics (AAP) cautions that most children younger than age 11 or 12 are not able to handle stressful or emergency situations on their own. Even more important than age, say experts, is maturity: Does your child generally behave responsibly? Exercise good judgment? Obey the rules in your absence? Is your child relaxed or apprehensive about being alone? The bottom line: Let your child stay home alone only if you and your child are comfortable with the idea.

Prepare Your Child
Preparation is the key to helping your child feel safe. Experts recommend that you arm your child with knowledge:
- Find a babysitting or first aid course to teach your child how to handle various situations.
- Make sure your child understands the dangers of medicines, power tools, drugs, alcohol, cleaning products, and inhalants. Store these items, and any firearms that may be in the house, in a secure place.
- Install smoke detectors. Show your child which exits are safest to use in case of fire.
- Teach your child how to use the phone in an emergency. Make sure your child knows the emergency number for your area, such as 911, and is able to give directions to your house. Leave your phone number as well as numbers for nearby friends, neighbors, or relatives.
- Agree on the rules for using the phone, television, and kitchen appliances; having friends visit; and taking care of pets.

Protect Your Child
In addition to preparation, experts advise that you protect your home-alone child by following these guidelines:
- Secure windows and doors when you leave.
- Tell your child never to enter your empty house if a door is unlocked, a window is open or broken, or a screen is ripped.
- Teach your child to keep the doors and windows locked at all times. Your child should not let anyone come inside without first checking with you.
- If a stranger calls or rings the doorbell, teach your child to say only that you are not available to come to the telephone or door.
- Tell your child to phone you or a neighbor periodically. Or make these checkup calls yourself.
- Have a plan for how time is structured. “Do a gradual time test,” suggests Dr. Harris. “Test it out by running to the grocery store, then try running two errands and so on, to gradually see how your child handles being alone for a certain amount of time.”

Finally, limit the time that your child is alone. An hour or two may be appropriate, but try to avoid extended periods of unsupervised time.
Consider that only 13 percent of children walk or bike to school these days. Some parents have solved this problem by organizing walk-to-school programs in their neighborhood, taking turns escorting kids to school. Parents also can squeeze in more walking time by taking their child to a farther stop in the neighborhood, if he takes the bus. Parents who belong to a carpool can try walking their child to the driver’s house or another central location.

After-school time also is an opportunity to get kids moving. Go for a family bike ride after dinner. Or visit the park and shoot some hoops. You can even ask for your child's help with washing the car or doing other active chores.

Electronic Amusements, Unplugged
While kids have fewer opportunities for exercise, they have more choices for entertainment than ever before. Most pediatricians believe that too much screen time can harm a child’s academic performance. Screen time refers to the amount of hours spent watching television and playing video and computer games. On average, young people spend 4.7 hours of screen time per day, including 2.5 hours watching television. This means less exercise, reading, and social time with friends.

“Electronic isolation is an increasing concern among mental health professionals,” says David Bennett, PhD, Clinical Psychologist at Children’s Mercy Hospitals and Clinics and Assistant Professor of Pediatrics and Psychology at the UMKC School of Medicine. “Children are not spending as much time in face-to-face social interaction as they should and this is affecting their development.”

School-age kids shouldn’t get more than one to two hours of screen time a day—that includes television, computer games, and video games. To help pull your child away from the screen, offer some options. Crafts, hobbies, and books are all worthy distractions.

More grade “A” advice: Keep televisions out of your kids’ bedrooms, and don’t allow the tube to be on during homework time. And consider using a timer to enforce limits on video games, computer surfing, and TV shows.
Children who eat breakfast learn better, are more alert in school, and are more likely to participate in activities during the day.

A healthy breakfast menu can be simple and easy to prepare. Children who eat just one cup of whole-grain cereal with skim milk and a piece of fruit or glass of fruit juice take in a good variety of the nutrients they need for the day.

For the most balanced meal, make sure breakfast includes these different groups from the USDA Food Guide Pyramid:

- Two servings from the bread, cereal, rice, and pasta food group
- One serving from the fruit group

Good food choices include non-fat or low-fat yogurt, light or 2% cheese, skim or 1% milk, whole-grain bread, bagels or English muffins, whole-grain waffles, an omelet with vegetables, a hard boiled egg, or any kind of fruit. Some breakfast ideas that are fun and still pack a hearty nutritious punch are:

- fruit kabobs to dip in yogurt
- peanut butter and jelly spread on a tortilla or peanut butter and a banana wrapped up in a tortilla
- cereal cookies or whole-grain cereal with skim or 1% milk
- berry or banana milk shake or fruit smoothies
- fruit-sweetened muffin.

Easy-to-eat choices such as a granola bar or slice of reheated pizza can still help children avoid skipping breakfast and keep their energy levels up.
A child might say the worst part of being heavy is the teasing. You, too, probably dread the thought of your child being mocked or bullied.

Most of the time when a child has a medical complication of being overweight, it is not evident to their parents; there is no outward sign.

“That is why it’s important to ask your child’s primary care provider to screen him or her for these complications,” says Sarah Hampl, MD, General Pediatrics, Pediatric Care Center at Children’s Mercy Hospitals and Clinics and Assistant Professor of Pediatrics at the UMKC School of Medicine.

Heart Disease and Other Problems Skyrocket

Children with extreme weight problems have a higher risk of many health problems:

- Obese children often develop problems that typically don’t develop until adulthood, such as type 2 diabetes.
- Overweight children may have an increased risk of developing cancer as adults.
- Heart disease is more common in adults who were heavy as children. Children who are heavy also have a high risk of being heavy as adults. The risk rises with age. Only 20 percent of obese 4-year-olds become obese adults. But 80 percent of obese adolescents face severe weight problems as adults.

Healthy Changes Can Prevent Obesity

If you think your child has a weight problem, check with your pediatrician. “When we work with overweight children and their parents, we help them create changes that will work for their family. Every situation is different, and it is crucial that the parents lead the way. The changes are healthy for everyone, whether or not they are overweight; the family must make the changes together to be successful,” explains Dr. Hampl.

Most overweight children simply need to be encouraged to eat healthier foods and move around more. As they grow taller, their weight should then stay the same or only increase a healthy amount.

Try adopting small habits that can last your child’s lifetime:

- Offer healthy choices that are low in calories and high in nutrition, such as fruits, vegetables, and yogurt.
- Plan healthy meals and snacks. Study food labels when grocery shopping, and choose items low in fat and high in nutrition.
- Switch from whole to low-fat or skim milk once children reach age 2.
- Set limits on TV and computer. The American Academy of Pediatrics recommends less than two hours per day for children older than age 2, and no screen time for children 2 and younger.
- Insist that all meals and snacks be eaten at the dinner table.
- Plan family time to be active. Children are much more likely to become physically active adults if they grow up with active parents being role models.
- Cut out sugary beverages, such as sodas, which provide only empty calories. Offer water or sugar-free beverages instead.
- Teach children how to order healthy food at restaurants. Order a green salad and encourage your child to do the same.

What if your child is already considered obese? These same healthy strategies can help your child lose weight. If your child’s weight problem is severe, the doctor may recommend additional steps.

PHIT Kids

PHIT Kids stands for Promoting Health In Teens and Kids. This program is available to children or teens who want to obtain a healthy weight by learning healthy habits. For more information on this fun program, call PHIT Kids at (816) 983-6471.
What to Do About Hives

Hives are a type of itchy rash that appears when the body is reacting to something, such as medicine, food, viral or bacterial infections, insect venom, environmental exposures, or even anxiety.

What Are Hives?
If your child gets a single red welt from an insect bite, that is similar to a hive reaction. They are smooth on top but melted up from the skin. There can be many small patches, or large irregular patches. Frequently they are pale in the center, or may have a pale halo around them—especially on lighter skin. Localized hives mean only a small area of the body is breaking out. Usually you can figure out what caused this. If your teen used a new face product and gets hives on her face and hands, the cause is the product. Discard the product, and wash the areas well with soap and water.

Hives can affect the entire body, and may come and go, showing up in different locations. This reaction is no more serious than smaller reactions if itching is the only symptom. A severe allergic reaction is called anaphylaxis. This is when the hives are accompanied by swelling of lips, tongue, or throat; tingling sensation in the throat; hoarseness, wheezing, or coughing; and difficulty breathing. Anaphylaxis is an emergency, so call 911 immediately.

What You Can Give Your Child to Ease Symptoms
Without any other symptoms, you can treat itching with Benadryl® as needed every six hours until the hives have been gone for 12 hours. For children less than 20 pounds, call for instructions. A lukewarm bath with 1/4 cup baking soda, or Aveeno® bath per instruction on box, may help with itching. A very itchy spot can be treated with over-the-counter hydrocortisone 1 percent cream, or rub with an ice cube. Avoid overdressing or overheating, as heat makes any rash itch more.

See a doctor if hives still itch badly after using Benadryl for 24 hours, or if hives last more than one week, or if three cases of hives have occurred and the cause is not known.

Boys to Men: Male Puberty
Mood swings? Clumsiness? Locked doors? Adolescence brings a series of changes and challenges, and hormones play a starring role. Puberty in both sexes begins with a hormonal change in the brain that signals the rest of the body it’s time to become physically and sexually mature. Other hormones in the body then kick in, producing a series of changes that generally take place during a period of up to five years.

“In boys, the average age for beginning puberty is between 11 and 12, but it can be as early as 10 or as late as 16,” says Daryl Lynch, MD, Section Chief, Adolescent Medicine at Children’s Mercy Hospitals and Clinics, and Associate Professor of Pediatrics at the UMKC School of Medicine.

As they begin to grow taller, boys will gain weight, build muscle, and develop wider shoulders and chests. The voice box enlarges and vocal cord muscles grow, deepening the voice and sometimes causing it to crack as he speaks. The hormone responsible for all these changes—testosterone—also causes testicles and the penis to become larger.

Underarm, leg, and pubic hair begin to appear, followed by facial hair about three years later. Chest hair may start to grow during puberty or not until years after, if ever.

Increased hormones can cause skin to get oily and break out in pimples.

Talk to your doctor if you have questions about how to help your son cope with the changes of puberty.

The Children’s Mercy Teen Clinic is available to help you help your growing teen with all the changes that happen during puberty. For more information, call (816) 234-3050.
SAFETY & HEALTH 

Bring the whole family and join us for the Back-To-School Fair!

Sponsored by Children’s Mercy Healthy Kids University
Brought to you by Kohl’s Department Stores
Saturday, July 22, 9 a.m. to 1 p.m., Overland Park Convention Center

Presentations by child psychologists every half hour on how to help your child with school—special sessions for parents of children ages 3 to 6, 6 to 10, and 10 to 14!

Interactive, educational booths for parents and kids on how to pack a healthy lunch, making sure your child’s backpack is not too heavy, developing good study habits, and much more!

Information on child health and safety:
- booster seat safety
- Internet safety
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Refreshments, fun and games, fun giveaway items, and drawings for prizes!

For details, check our Web site at www.childrensmercy.org and click on Back To School!