

KIDS HEALTH NEWS

This is a publication for frontline health professionals, where specific child/tamariki health information is brought together from a variety of sources. Our goal is to encourage consistent messaging, communication and collaboration across the range of child/tamariki healthcare services.

Kids Health News is now available on MDHB website:

www.midcentralthb.govt.nz/Publications/AllPublications/pages/default.aspx?query=Kids#

Editorial by Dr Nigel Orr, Consultant Paediatrician, MidCentral Health

PAEDIATRICS: TURBOCHARGED

Child Health staff at MidCentral Health were delighted to host the 64th Annual Scientific Meeting of the Paediatric Society of New Zealand recently. The meeting, in the Palmerston North Convention Centre held on 21–23 November, was attended by a large number of the country's paediatricians, child health nurses and allied professionals. It was stimulating, relaxed, friendly and invigorating. Several international speakers and many local experts delivered some key messages over the three days.

Asthma: a fascinating talk on problematic severe asthma. Dr Paul Brand, from the Netherlands, finds that problematic, severe asthma is either not problematic and severe, or not asthma. He highlighted that there are readily modifiable factors in over 80% of even the most severe. Consider adherence (including child and family's concerns and beliefs regarding medication), inhaler (and spacer) technique, co-morbid conditions (with allergic rhinitis and dysfunctional breathing being especially important) and environmental factors such as cigarette smoke and housing.

Urinary tract infection: a panel of experts discussed the current evidence in guiding an approach to childhood urine infection.

The key messages included:

- Urine infection must be diagnosed with a urine culture, whatever the dipstick says.
- Vesico-ureteric reflux, where urine is able to back-flow from bladder to kidney, has triggered a great deal of investigation and surgical intervention in the past. The current understanding tells us that reflux is virtually never responsible for kidney damage and is increasingly seen as irrelevant.
- Ultrasound is usually the only test required to image a child's kidneys after an infection. Keep an eye out next year with the local Map of Medicine guideline for childhood urine infections.

Nocturnal enuresis: the local nurse-led programme was hailed as a remarkable achievement. The success of the programme lies in targeting healthy bladders prior to commencing alarm training, plus frequent communication between family and nurse. Healthy bladders were discussed at length. The key factors to robust continence are aggressive management of constipation, good volume fluid intake (aiming for 50mL of water per kg of body weight for most children) and regular toileting. The point was made that, for children to achieve day and night-time continence they must regularly empty their bladder into the toilet. It is NOT the ability to hold on which promotes continence. (Remember that a normal frequency of voiding for children is around 6–8 times per day, and that school toilets are often not the nicest!)

Child Poverty: a reminder about the severe impact our nation's choices are having on our children on the bottom rungs in our society. The gap between the haves and the have nots has increased, so what can we do to change this? The session, delivered by the Child Poverty Action Group (and backed up by a repeat screening of the TV3 documentary "Inside Child Poverty" in late November), encouraged us to tell the stories of struggling families to those we mingle with; to make the invisible child a visible issue and to advocate strongly.

There were many more fascinating topics discussed, and Palmerston North rolled out the best of weather. A huge success.



Dr Nigel Orr



INJURY PREVENTION AT HOLIDAY TIME

Christmas holidays bring more than celebrations and presents – they also bring risks to children and their families. Alcohol is often a factor in increased accidents and injuries for adults and children, and one key message is: "Every child needs a sober caregiver."

This is strongly emphasised by Nick Baker, Community Paediatrician and Chair Child Youth Mortality Review Commission. His powerpoint (www.hqsc.govt.nz/our-programmes/mrc/cymrc/publications-and-resources/publication/393/) looks at alcohol and its relationship to deaths reviewed by the Commission.

He notes that 32% of injury death for aged 15–24 involved alcohol, but there is very incomplete data around how alcohol causes and contributes to deaths of under 15 year olds. He lists examples of deaths involving alcohol based on a compilation of what has been learnt from death review and clinical practice. Examples include people drinking and then sleeping with baby on the couch, and a family outing to a river.

Alcohol and transport are a potent mix and one hopes everybody obeys the "Don't Drink and Drive" message to protect children. Almost 25% of deaths for children aged 5–9 from 2006–2010 (157 deaths) and almost 22% for children aged 10–14 (244 deaths) were due to transport related injury. Also important is the use of child safety seats and booster seats, as seats belts that are designed for adults do not work well for children. Booster seats are recommended for school-aged children until they reach 148cm in height. (Short adults have stronger bones which means they do not have to have the same height.) Fatigue is also a risk for road crashes so get plenty of sleep – don't drive if tired and take frequent breaks.

Nigel Fitzpatrick, Health Promotion Advisor, Public Health



ISSUE 17
DECEMBER 2012



MIDCENTRAL HEALTH



FREE INSULATION AVAILABLE

To keep your family in a healthy state, they need to live in a home that is warm, dry and free of mould. There are three conditions necessary to achieve this – ventilation, heat and insulation. Insulation improvements can add real value to your overall home comfort and an added bonus is the saving on electricity costs.

The rise in the home temperature can have the biggest impact on the family's health. NZ has one of the highest rates of asthma and respiratory illness in the OECD countries. Respiratory admissions to hospital increase significantly when there is a drop in room temp that falls below 10°C.

There is good news on warming up your house for the Manawatu region. EnergySmart is offering a very good deal for those living in Manawatu community with loved ones whose health would benefit from living in a warmer, drier home.

To be able to insulate free of charge the person must have:

- a current community services card and
- house they own should have been built prior to 2000 and
- application should be signed by a health professional.

If people are renting, the criteria is the same regarding holding a current community services card and renting a house built before 2000. However, the landlord will have to be in agreement to pay \$575.00. This is a good offer and has great benefits for homeowners and landlords as well as tenants.

To access this offer, contact Heather on (06) 952 7733 or hmasters@energysmart.co.nz or Sharon Vera on (06) 350 9110 or sharon.vera@midcentralthb.govt.nz.

Pauline Brown, Health Promoter, Public Health

BE SUNSMART, PLAY SUNSMART



After enjoying the winter sun and its vitamin D benefits, its time for hats and sunscreen again. The UV radiation level is rising to levels that put skin at risk of serious damage. So time to look at some frequently asked questions.

CAN WE LET OUR CHILDREN GO OUTSIDE AND PLAY IN THE MIDDLE OF THE DAY?

Most of the sun's UV radiation reaches us during the middle part of the day. During this time period, UV levels are most intense. Be mindful of peak UV times and try scheduling outdoor activities in the mornings or afternoons (if possible), when the UV is not as intense. Active outdoor play is important for health and development. Outdoor activities are safe as long as time spent in direct sunlight is minimised whenever possible – plenty of shade, combined with the use of appropriate hats, clothing and sunscreen help protect children from getting sunburnt.

The Cancer Society recommends applying sunscreen every two hours so that you can be sure it has a good chance of providing the best level of protection. It's an important lesson to teach children that before they go outdoors, they must grab their hat and apply sunscreen. Children can learn to apply their own sunscreen and could be matched up with a sunscreen buddy to help them.

DO WE NEED A SPECIAL SUNSCREEN FOR OUR CHILDREN?

Proper protection from the sun is more important during childhood than at any other time in life. Childhood and teenage sunburn is a high-risk factor for developing melanoma. Sunscreens that are specially formulated for children have a mild base designed especially for their sensitive skin. But there's no reason why children shouldn't use the family sunscreen, provided it doesn't irritate their skin. Test a small amount on the inside of their forearm first.

Keep babies and toddlers out of the sun as much as possible. The best protection for everyone is staying in the shade and using cover-up clothing.

IS IT POSSIBLE TO GET SUNBURNT ON CLOUDY OR COOL DAYS?

Sunburn is caused by UV radiation not temperature therefore even on a cooler day in summer, the UV level can be intense. You can also get sunburnt on cloudy days, as UV radiation can penetrate some clouds.

WILL I BECOME VITAMIN D DEFICIENT IF I USE SUN PROTECTION?

Sensible sun protection does not put people at risk of vitamin D deficiency. When UV levels are three and above, most people get enough vitamin D through normal activity, even with sun protection. Prolonged use of sunscreen has been shown to not affect long term vitamin D levels. This is because most people do not apply enough sunscreen and often forget to reapply.

Over the coming months, many workplaces plan special activities, but has sun protection for staff been considered? Care needs to be taken to ensure everyone enjoys celebrations that don't put them at risk of skin damage.

Please enjoy your celebrations but remember the importance of skin protection and make sure you and your children Slip, Slop, Slap, Wrap whenever the UVR is three and above.

For further information, please contact Kerry Hocquard, Manawatu Cancer Society SunSmart Advisor Email: Kerry.hocquard@cancercd.org.nz phone (06) 356 5355.

IMMUNISATION UPDATE

Our new Ministry of Health target now focuses on children being fully immunised at eight months, at the same time we are expected to maintain our two-year-olds at 95%. To achieve this new target, it is important children are immunised on time. Please remind parents of this and if they have queries advise them to phone the 0800 522 748 number.

The Immunisation Advisory Centre have released the dates for the education courses for next year including vaccinator training courses, vaccinator updates, immunisation information courses and midwives education courses. There is online immunisation updates and a specific online course for those who vaccinate only adults. For information and to register go to: www.immune.org.nz or phone 0800 882 873 (IMAC).

Deb Winiata has taken up a new position in Horowhenua and Otaki within the PHO and will be replaced on the immunisation team by Tracey Bentall. Deb has contributed a huge amount of time and dedication to immunisation over the years in our DHB which has been greatly appreciated.

Tracey Bentall & Vicki Rowden, Immunisation Coordinators, Central PHO

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THE CHILD AND YOUTH HEALTH COMPASS

The 64th Annual Scientific Meeting of the Paediatric Society of New Zealand was held recently in Palmerston North. The meeting was host to a range of national and international expertise.

Among local expertise, the New Zealand Children's Commissioner, Dr Russell Wills, introduced the Child and Youth Health Compass. The Child and Youth Health Compass aims to identify, showcase and share innovation and good practice in child and youth health across New Zealand. The concept is based, in part, on the DHB Scorecard project conducted by the Paediatric Society of New Zealand (PSNZ) during 2002–2004. It aims to support and add value to existing activities aimed at improving services for children and youth. The project will be completed in partnership between the PSNZ and the Office of the Children's Commissioner, with guidance and support from the Health, Quality and Safety Commission.

Find us on Facebook: www.facebook.com/?ref=logo&__adt=12#!/pages/Childrens-Commissioner-NZ/186408948108425

**Pam Calton, Clinical Psychologist, Paediatrics,
Child Development Service, MidCentral Health**

MidCentral District Health Board
Te Pae Houora o Ruahine o Tairāwhiti

HEALTH EXPO!

Wednesday, Waitangi Day
6 February 2013

- Open to the public for free
- 10 – 5pm at the Convention Centre
- Designated area in the Social Gallery
- Te Manawa is holding Waitangi Day celebrations next door

WELLCHILD EXHIBIT

Convention Centre
palmerston north