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YOUR GROWING CHILD



A newsletter for families of Partners in Pediatrics Ltd.

An affiliate of Children's Minnesota



Nasal Spray Influenza Vaccine Not Recommended This Year

If you went looking for the greatest advance in public health in the last 75 years, you would find it was the advent of immunizations. Nothing has done greater good for our children than these miracles of disease prevention.

Part of the elegance of vaccines is that they are not static creations. They are continually being refined. Vaccines are also monitored for safety and effectiveness.

It was as a part of this monitoring that new information about the live attenuated nasal spray vaccine was discovered.

Studies showed that live attenuated vaccine did not work well in the 2013 to 2016 influenza seasons.

Because of these findings, the Centers for Disease Control (CDC) could not

guarantee this year's nasal vaccine would be effective. So they have recommended the nasal spray form of the vaccine not be used.

This recommendation was advised by a committee made of vaccine experts. With knowledge that the nasal vaccine had no protective benefit based on research reports and surveillance, this decision was made.

Why does a vaccine that previously was effective have a string of years when it was not effective? Nobody seems to know for sure. And despite the loss of this form of the vaccine, experts strongly recommend that almost everyone 6 months and older get vaccinated with the injectable vaccine because influenza can still cause serious illness and death.

We know the absence of a nasal spray option for influenza will be very

disappointing for many families. But we also recognize that continually monitoring and evaluating the effectiveness of vaccines will benefit our children.

The influenza virus is very unpredictable. Some years, the same strain as in previous years is dominant. In other years, an entirely new mutated strain is dominant. Because of the lead time needed to manufacture the vaccine, the vaccine's efficacy can vary from year to year. This is why the effectiveness of the flu vaccine is monitored each year.

Ongoing surveillance will provide the safest and most effective vaccines for your children. This year, give your children the best chance for a safe cold and flu season—vaccinate your family with the injectable vaccine.

How Much Sleep is Enough Sleep?

The best cure for insomnia is to get a lot of sleep.

—W. C. Fields

Sleep. It's something that everyone talks about getting more of but nobody seems to do anything about.

So how much sleep should we expect for ourselves and our children? As you might expect, needs vary and some children need more than the average and some need less.

This year, the National Sleep Foundation (NSF) came out with new recommendations for appropriate length of sleep. Their recommendations will give us a better idea about what is a healthy amount of sleep time.

The NSF took recommendations from experts in childhood sleep, anatomy and

psychology as well as experts in pediatrics and neurology. The following are the changes:



• Newborns (0-3 months): Sleep range narrowed to 14-17 hours each day (previously it was 12-18 hours)

• Infants (4-11 months): Sleep range widened two hours to 12-15 hours (previously it was 14-15 hours)

• Toddlers (1-2 years): Sleep range widened by one hour to 11-14 hours (previously it was 12-14 hours)

• Preschoolers (3-5): Sleep range widened by one hour to 10-13 hours (previously it was 11-13 hours)

• School age children (6-13): Sleep range widened by one hour to 9-11 hours (previously it was 10-11 hours)

• Teenagers (14-17): Sleep range widened by one hour to 8-10 hours (previously it was 8 ½ -9 ½ hours)

• Younger adults (18-25): Sleep range is 7-9 hours (new age category)

• Adults (26-64): Sleep range did not change and remains 7-9 hours

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On-screen Violence, Real-world Aggression

As much as we try, it is impossible to shield our children from the media violence on television, in video games and in the movies.

Recently researchers reviewed over 400 studies looking into violence in media. They found a significant association between exposure to this violence and aggressive behavior, aggressive thoughts and anger.

According to the research, the association between screen violence and real world aggressive behavior in children was stronger than that of second-hand smoke exposure and lung cancer.

However, the researchers point out that a definitive link between screen violence and real-world violence has not been found.

What can we do to help?

We can start with the following:

- Parents should be aware of what their children are watching.
- Parents should know the content of the video games their children play.
- When possible, they should watch the shows their children watch and play the video games they play to get a sense of what is actually happening within the story.
- Children under six should be protected from virtual violence because of their inability to distinguish between reality and fantasy.
- Utilize what your children are exposed to from the media to start a conversation about what is real and what is fiction.
- Talk to your children about alternative responses to the violence they observe in the media.
- Limit their television viewing and video game use and encourage an active, healthy lifestyle.

Above all else, keep the lines of communication open with your children.

To Sleep, Perchance to Dream

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- Older adults (65+): Sleep range is 7-8 hours (new age category)

According to the NSF, this is the first time that the organization has come up with age-specific recommendations based on a comprehensive and rigorous review of the scientific literature. It was their hope to provide everyone with knowledge-based guidelines for sleep health.

They also added two new categories to cover variability in some individuals' sleep patterns. These categories are listed in the accompanying table.

We don't think that these guidelines will lessen the amount of time we discuss our children's sleep patterns, but they might make those discussions more specific. Until we have a sure-fire way to change sleep to become healthier, we will continue to research and to talk. Until then, sweet dreams.

Age	Recommended	May be appropriate	Not recommended
Newborns 0-3 months	14 to 17 hours	11 to 13 hours 18 to 19 hours	Less than 11 hours More than 19 hours
Infants 4-11 months	12 to 15 hours	10 to 11 hours 16 to 18 hours	Less than 10 hours More than 18 hours
Toddlers 1-2 years	11 to 14 hours	9 to 10 hours 15 to 16 hours	Less than 9 hours More than 16 hours
Preschoolers 3-5 years	10 to 13 hours	8 to 9 hours 14 hours	Less than 8 hours More than 14 hours
School-aged Children 6-13 years	9 to 11 hours	7 to 8 hours 12 hours	Less than 7 hours More than 12 hours
Teenagers 14-17 years	8 to 10 hours	7 hours 11 hours	Less than 7 hours More than 11 hours
Young Adults 18-25 years	7 to 9 hours	6 hours 10 to 11 hours	Less than 6 hours More than 9 hours

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Appointment Hours

Monday through Friday 8 a.m. to 5 p.m.

Pediatric Ready Care Hours — Walk-ins Welcome!

Monday through Friday
8 a.m. to 5 p.m. all clinics

Monday through Thursday
5 p.m. to 8 p.m.
Maple Grove

Saturdays and Sundays
8:30 a.m.—12:30 p.m.
Maple Grove only



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