

# Pediatric pearls for the non-pediatrican!

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## 1 “Veterinary” Pediatrics.

Small children and animals share certain characteristics:

- they are very lovable
- they don't like being stared at
- they lie down when they are sick
- repeated food refusal is unusual
- they have limited ability to express themselves
- they adopt the position of comfort when well
- they have a strong survival instinct

Inspection and intuition are hence important introductions to the pediatrics examination. So begin yours as vets do: by listening and looking.

*Gill & O'Brien: Pediatric clinical examination 1988;3-4*

## 2 It's a crying shame...

So just how much do babies cry each day? (we probably need to pull out our ear plugs and humbly ask our wives!). Fortunately, Brazelton's oft-quoted study way back in the 60's will spare us the embarrassment :

Age/ Weeks	Average crying time/hours
2	2
6	3
12	1

Useful stuff to reassure parents and us!

*BrazeltonTB: Crying in infancy. Pediatrics 29:579,1962.*

## 3 Sleeping beauties?

And since we are at it, the average number of hours children sleep isn't 24 minus the time we have left for ourselves:

Age	Average sleep requirement/hours
Birth	16
6 mos	14.5
12 mos	13.5
2 yrs	13
4 yrs	11.5
6 yrs	9.5
12 yrs	8.5

By 3 months, 70% of infants will not cry or awaken their parents between midnight and 6am; and by months, 90%. But between 6 and 9 months, the night awakenings increases before settling down again.

*Pediatric secrets 3rd ed, 2001, Polin/Ditmar, pg 61*

## 4 The tonsil counsel

The oral cavity is hostile territory, replete with mouths that won't open, jaws that clamp on prising spatula and teeth ever ready to snap on probing fingers. Often we get little more than a fleeting glimpse of the uvula and some breakfast on our ties.

Asking the child to open wide, stick out his tongue while saying “ah” causes the pharynx to contract thereby forcing the tonsils toward the midline, making them look larger than they really are. A far better method is to ask the child to open the mouth, keeping the tongue in and to pant. Demonstrate this to the child who is usually amused. Panting lets the tongue relax out of the way, the spatula touches only the front of the tongue, minimizing retching and the tonsils can be seen in their normal position.

For older children, ask them to simulate a yawn.

*Grossman: Everyday pediatrics1994;232*

## 5 To see eye to eye

To get a newborn to open his eyes, don't try to pry them open- somehow it doesn't work. Instead ask the mother to hold him upright, or suckle him. They will usually open in this position.

For treating small children, drops are easier to use than ointment. One trick is to have the child supine with eyes closed. When the lids are opened, the drops flood in without much discomfort. Eye ointment has the advantage of persistence implying fewer daily doses. The lower lid should be pulled down and a ribbon of ointment laid from one corner to the other, between the lid and the bulb. Hold open the eye for 30 second to allow the ointment to melt and spread. If you fail to instruct the parents, the medications may be used imaginatively but not effectively!

*Grossman: Everyday pediatrics1994;213*