

Do you know your ABCDE's?

New Sunscreen Regulations

National Breastfeeding Awareness week

Crossword Puzzle



August 2012

Got shades?

Just like our skin, our eyes are susceptible to damage caused by UVA and UVB rays. Babies and children 6 months and up that spend time outdoors in the sun should wear sunglasses to protect their eyes and skin around their eyes. While babies in sunglasses are cute, it is more important to choose sunglasses that will provide the highest level of protection:

- Find glasses that block 99-100% of both UVA and UVB rays.
- Look for glasses with large, wrap around lenses. The more skin covered the better.
- Choose a pair that fit snugly on the child, and don't easily fall off, break, or scratch. Try on several styles until you find a pair that will stay put while the child runs, trips, falls, and plays.
- Have your child wear a wide brimmed hat in addition to sunglasses, which only protect from the rays that come directly through the lenses. A hat will shade the sides and top of the face where UVA and UVB can get through, and also protect the rest of the face and neck where sunglasses don't reach.
- Let the child choose a pair they like, which will make them more likely to actually wear the sunglasses.

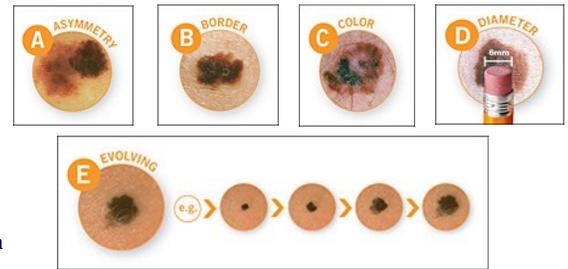
Good Day Sunshine

Do you know your ABCDE's?

Skin cancer is the abnormal growth of skin cells, which can occur after exposure to the sun's ultraviolet rays. There are three different types of skin cancer: basal cell carcinoma, squamous cell carcinoma, and melanoma. The best way to prevent skin cancer is by limiting exposure to the sun through use of sunscreen, wearing protective clothing, and seeking shade or staying indoors from 10am-2pm, when the sun's rays are the strongest.

It is important to regularly check for moles and see a dermatologist, even if sun safety is regularly practiced. As Florida residents, we are exposed to higher levels of strong ultraviolet radiation, and therefore must make an extra effort to detect possible cancerous moles early.

When checking for moles on your child's body, simply follow the ABCDE's of skin cancer: asymmetry, border, color, diameter, and evolving. You can use the American Academy of Dermatology's chart as a guideline.



If you have concerns about a particular mole, talk to your child's pediatrician. Remember, anyone can get skin cancer regardless of skin color. However, those with fair skin and light eyes who burn easily are more at risk. For more information on skin cancer and how to protect your child, visit www.aad.org or www.skincancer.org.

New Sunscreen Regulations



Drug Facts	
Active Ingredients	Purpose
Azobenzene 3% Homosalate 10% Octyl methoxycinnamate 7.5%	Sunscreen
Uses	
• helps prevent sunburn	
• if used as directed with other sun protection measures (see Directions), decreases the risk of skin cancer and early skin aging caused by the sun	
Warnings	
For external use only	
Do not use on damaged or broken skin	
When using this product keep out of eyes. Rinse with water to remove.	
Stop use and ask a doctor if rash occurs.	
Keep out of reach of children. If product is swallowed, get medical help or contact a Poison Control Center right away.	
Directions	
• apply liberally 15 minutes before sun exposure	
• reapply	
• after 40 minutes of swimming or sweating	
• at least every 2 hours	
• Sun Protection Measures. Spending time in the sun increases your risk of skin cancer and early skin aging. To decrease this risk, regularly use a sunscreen with a broad spectrum SPF of 15 or higher and other sun protection measures including:	
• limit time in the sun, especially from 10 a.m. - 2 p.m.	
• wear long-sleeve shirts, pants, hats, and sunglasses	
• children under 6 months: Ask a doctor	
Inactive ingredients	
aloe extract, butyl salicylate, benzyl alcohol, carbomer, dimethicone, disodium EDTA, jojoba oil, methylparaben, octadecane/MA, copolymer, polyglyceryl-3 distearate, phenethyl alcohol, propylparaben, sorbitan sebacate, sorbitol, stearic acid, tocopherol (vitamin E), triethanolamine, water	
Other information	
• protect this product from excessive heat and direct sun	
Questions or comments?	
Call toll free 1-800-XXX-XXXX	

In June the FDA released new regulations for over-the-counter sunscreen products. Manufacturers have until December 17th to be in compliance with these new guidelines. Here are the main things to look for:

"Broad Spectrum" – this means the product protects against both UVA and UVB rays. Sunburn is mainly from UVB rays, but both kinds cause sunburn, skin cancer,

SPF – Sun Protection Factor – Products that are SPF 2-14 have only been shown to prevent sunburn, and are not effective in protecting against skin damage. Products that are not broad spectrum and at least SPF 15 will have a warning that reads: **"Skin Cancer/Skin Aging Alert: Spending time in the sun increases your risk of skin cancer and early skin aging. This product has been shown only to help prevent sunburn, not skin cancer or early skin aging."** (The American Academy of Dermatology recommends at least SPF 30.)

"Water resistance" – These claims must state how long one can expect to be in the sun (with the stated SPF protection) while swimming or sweating. Two times will be permitted: 40 minutes or 80 minutes.

What you won't see: "Waterproof", "Sweatproof" and "sunblock" - Manufacturers will no longer be able to make these statements on their products. For more information on these guidelines check out:

and premature aging. Products that protect against all types of sun-induced skin damage will be labeled "Broad Spectrum" and SPF 15 (or higher).

<http://www.fda.gov/forconsumers/consumerupdates/ucm258416.htm>
<http://www.aad.org/media-resources/stats-and-facts/prevention-and-care/sunscreens>

National Breastfeeding Awareness Week

In conjunction with National Breastfeeding Awareness week (August 1-7), we want to share with you 10 things we know about breastfeeding.

1. **CURRENT RECOMMENDATION** - Exclusive breastfeeding for the first 6 months and thereafter introducing complementary foods while continuing to breastfeed for at least 12 months.

These recommendations are supported by the American Academy of Pediatrics (AAP), the Centers for Disease Control (CDC), and the World Health Organization (WHO).

2. **BETTER INTESTINAL HEALTH** - Babies who are breastfed exclusively for the first 6 months have fewer gastrointestinal infections than babies who are formula fed AND than babies who are exclusively breastfed for 3-4 months and then start receiving complementary foods (i.e. "solids").

3. **LESS ILLNESSES OF ALL TYPES** - Infants who are breastfed have less illnesses (less asthma, fewer ear infections, less obesity, less diabetes) and this benefit even continues after nursing has been stopped. Additionally, there is some evidence that breastfeeding improves cognition and eyesight.

4. **FEWER CASES OF SIDS** - Breastfeeding offers a protective effect against Sudden Infant Death Syndrome (SIDS).

5. **SLEEP** - Formula feeding does not consistently help babies sleep better or sleep through the night at a earlier age (despite popular belief).

6. **GOOD FOR MOTHERS** - Breastfeeding has been linked to a lower risk of breast cancer, ovarian cancer, and postpartum depression. Additionally, breastfeeding facilitates loss of weight due to pregnancy. Working mothers who breastfeed have been shown to miss fewer days of work (due to the fact that the infant has fewer illnesses), and breastfeeding can save a mother up to \$1500 of formula-related costs during the infant's first year.

7. **GOOD FOR SOCIETY** - It is estimated that if the United States could double our current breastfeeding rates it would save over \$10 billion each year.

8. **RATES ARE IMPROVING** - Although we are still below the goals for breastfeeding in our country, the rates are improving. Currently, approximately 75% of women attempt to breastfeed, 45% are still nursing at 6 months (though exclusive nursing at 6 months is only 16%), and 25% are still breastfeeding at 12 months. Florida's are slightly above the national average. Oregon has the highest rate, and Mississippi and Louisiana are the lowest.

9. **BREASTFEEDING IS HARD** - The initiation of breastfeeding can be quite difficult for some mothers. In our office, we try during those first few days to provide a lot of support and guidance because this is the time when it often fails. Most of the area hospitals have lactation specialists to provide help in the hospital and once

WORD SEARCH

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u e t y d o d s n w s h d g h
l t j f l q d u a e a a a a q
t a p i h j b i s e g t h b t
r r p c d o r s x b q h e y z
a d w f n e a t e o h o h r i
v y b o m l s u n s c r e e n
i h l m g c a n m m l n s n c
o u u n j a f w c c h u i y o
l s u u w k p z n s y i g z x
e s l e v y i u c r v n h a i
t y c o e c s b m b z i h z d
h v k j v y x l h w n s a d e
s n q m m d a v s h a d e d r
l u t l k d g q c s b r q f i
    
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Hat
Hydrate
Shade
Summer
Sun

Sunglasses
Sunscreen
Ultraviolet
Water
Zinc Oxide

you go home. In order to improve rates of breastfeeding, it is essential to have postnatal support for specific problems, not just antenatal education and encouragement. Our nurse practitioner, Michelle Cash, is a certified lactation counselor. Lactation consultations can be made with her to discuss any breastfeeding questions or difficulties you may have.

It needs to be said that deciding not to breastfeed, either due to medical reasons that prohibit nursing or due to other factors, should never be a cause for guilt. Our society (and specifically the demographic of families in our practice) tends to place so much pressure on women to be "uber-moms", and there is an unreachable goal of perfection that loving, well-meaning mothers try to achieve. While we wholeheartedly support and recommend breastfeeding, we also feel that is important to see it in its proper context - breastfeeding as part of a larger discussion on nutrition; nutrition as part of a larger discussion on physical health, and physical health as part of a larger discussion on parenting.

10. And **FINALLY** - to quote a female pediatrician and breastfeeding advocate, "breastfeeding is cheaper, more convenient, and it comes in the cutest little packages."

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Sun got you burned?

Despite practicing sun safety, the harsh Florida sun got the best of you. Now what? The following tips can help relieve pain, while your child's sunburn heals:

- Give the child ibuprofen or acetaminophen to relieve pain
- Place the child in a cool (not cold) shower or bath, or apply cold compresses as needed
- Use aloe gel to provide comfort, and keep the skin moisturized (avoid products containing petroleum jelly)
- Wear loose, cool clothing
- Give the child extra fluids for 2-3 days to ensure he or she is well hydrated
- Stay out of the sun if possible, and make sure all sunburned areas are fully covered until the sunburn is healed
- If blisters form, avoid popping them, which can cause infection

For more information on avoiding and treating sunburns, visit www.kidshealth.org