

POLICY & PRACTICE

Uninsured Children Fare Worse

Injured, uninsured children who are hospitalized were twice as likely to die of their injuries as their insured counterparts, according to a new study from the advocacy group Families USA. Among children admitted with traumatic brain injury, uninsured children were more than twice as likely to die while in the hospital as insured children. Uninsured children also were less likely to get expensive treatment or rehabilitation, and were more likely to be discharged earlier, the report said. And, among children admitted to the hospital

with otitis media, uninsured children were less than half as likely to get ear tubes inserted than insured children. "The clear implication of these groundbreaking data is that, when kids get hurt or sick, insurance matters," said Families USA Executive Director Ron Pollack in a statement.

AAP Worried About HDHPs

High-deductible health plans could lead families to delay or avoid seeking care, meaning children may not get the preventive care they need for long-term good health, the American Academy of Pedi-

atrics said in a policy statement. HDHPs provide a lower-cost policy in exchange for a very high deductible, often in the thousands of dollars. Some 20% of employers now offer HDHPs, many in lieu of more traditional policies that had included more preventive care benefits. "The financial risks are significant under HDHPs, especially for low- to moderate-income families and for families whose children have special health care needs," AAP said in its policy statement. The academy noted that HDHPs should provide coverage for preventive services, including well-child care, immunizations, and appropriate screenings, without sub-

jecting the cost of those services to the deductible.

Call to Action on Drinking

In its first Call to Action against underage drinking, the U.S. Surgeon General's office appealed to Americans to do more to stop the country's 11 million current underage drinkers from using alcohol, and to keep other young people from starting to drink. Acting Surgeon General Dr. Kenneth Moritsugu laid out recommendations for government and school officials, parents, other adults, and young people, saying that, while tobacco and illicit drug use has declined significantly, underage drinking as remained consistently high. "Research shows that young people who start drinking before the age of 15 are five times more likely to have alcohol-related problems later in life," Dr. Moritsugu said in a statement, adding, "New research also indicates that alcohol may harm the developing adolescent brain."

Booster Seat Laws Help

Children aged 4-7 in states with booster seat laws appear more likely to be appropriately restrained during car crashes than children in states without booster seat laws, according to a report in the Archives of Pediatrics & Adolescent Medicine. Motor vehicle accidents killed 350 children aged 4-7 in 2004, the article said. The authors compared data collected from 1998 to 2004 from both states that implemented booster seat laws and states that did not. They found that children aged 4-7 in states with booster seat laws were 39% more likely to be appropriately restrained in crashes. The increase in appropriate restraint was higher for 4- to 5-year-olds, the study found. "Future upgrades to child restraint laws should target all children through at least age 7 years to achieve the greatest effect on overall child restraint use," the authors concluded.

Group Cautions States on Medicaid

States should pay critical attention to meeting the health needs of children as they contemplate health insurance coverage expansions and other changes to publicly funded programs, according to a new study from the advocacy group Commonwealth Fund. Comprehensive well-child services, such as those covered by Medicaid, play a critical role in preparing children for school and helping to determine how well they will do in life, said the study. The study calls on states considering any modifications to their programs to not only preserve what is already in place through Medicaid's Early and Periodic Screening, Diagnosis and Treatment (EPS-DT) program, but to actively work to ensure that children have access to a full array of high-quality preventive and developmental services. At a minimum, covered child health services should conform to AAP recommendations, the study said. In addition, states should create integrated systems of early childhood programs at the state and community level, and work to actively improve the quality of preventive pediatric care. States need to "make certain that children have access to care that will help them achieve their full potential," said Commonwealth Fund President Karen Davis in a statement.

—Jane Anderson



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References: 1. Arvola T, Laiho K, Torkkeli S, et al. Prophylactic Lactobacillus GG reduces antibiotic-associated diarrhea in children with respiratory infections: a randomized study. *Pediatrics*. 1999;104:e64. 2. Vanderhoof JA, Whitney DB, Antonson DL, et al. Lactobacillus GG in the prevention of antibiotic-associated diarrhea in children. *J Pediatrics*. 1999;135:564-568.

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