

POLICY & PRACTICE

Infant Mortality Rates Stagnate

The infant mortality rate in the United States did not improve between 2000 and 2005, according to a report from the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. The U.S. infant mortality rate was 6.86 per 1,000 live births in 2005, not statistically different from 6.89 in 2000. This 5-year period represents the first sustained time period without a drop in infant mortality since the 1950s. The lack of improvement is due in large part to an increase in the percentage of both very

preterm and late preterm births and a lack of improvement in the infant mortality rate for very preterm infants, according to the CDC. However, preliminary data indicate there may have been a small decrease in infant mortality between 2005 and 2006, when the infant mortality rate dropped to 6.71. The United States also continues to rank near the bottom of industrialized countries in terms of infant mortality. The United States ranked 29th in the world on infant mortality based on 2004 data, down from a worldwide ranking of 12th in 1960 and 23rd in 1990.

New President-Elect for AAP

Dr. Judith S. Palfrey, the new president-elect of the American Academy of Pediatrics, said she intends to press hard for all children to have health coverage and a medical home with a physician who can coordinate their care. SCHIP reauthorization is necessary, but is not the complete answer to the problem of uninsured children, Dr. Palfrey told PEDIATRIC NEWS. "I mean full access, not incremental. My hope is that we can work toward full access to insurance for kids so we can have a medical home for every child." Dr. Palfrey also expressed a desire to work for appropriate physician payment and for

strong partnerships between AAP and other groups that are concerned with children's issues. Dr. Palfrey will serve as AAP president during 2009-2010.

Dental Disease Still Medicaid Issue

Dental disease remains a significant problem for children on Medicaid. National surveys taken between 1999 and 2004 show that about one in three had untreated tooth decay, with one in nine having untreated decay in three or more teeth, a Government Accountability Office study showed. The study estimated that in 2005, 6.5 million children aged 2-18 years had untreated tooth decay, and noted that children with Medicaid coverage were almost twice as likely to have untreated tooth decay as were children with private insurance. Meanwhile, the Agency for Healthcare Research and Quality noted in a separate report that enrollment in government-sponsored dental insurance programs has risen sharply in the past decade. About 30% of U.S. children had government-sponsored dental insurance in 2006, compared with 18% in 1996, the AHRQ said.

Behavioral Programs Help the Obese

Obese school-aged children and teenagers can lose weight or prevent further weight gain if they participate in medium- to high-intensity behavioral management programs, the AHRQ said in a report. Effective programs taught techniques to improve dietary and physical activity habits, with some using strategies like goal setting, problem solving, and relapse prevention. These programs met for a total of more than 25 hours, usually once or twice a week, for 6-12 months. Researchers found that, after completion of weight management programs, obese children would weigh 3-23 pounds less, on average, than those who were not involved in the programs. The weight difference was greatest among heavier children as well as those enrolled in more intensive programs, and weight improvements were maintained for up to 1 year after the program ended, the AHRQ study found.

New Jersey Mandates Flu Shots

New Jersey has become the first state to mandate that children aged 6 months to 5 years who attend day care or preschool receive both the influenza and the pneumococcal conjugate vaccine. Beginning this

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From left to right, front to back, Philip O. Ozuah, MD, PhD, Professor and University Chairman, Physician-in-Chief, Children's Hospital at Montefiore, Albert Einstein College of Medicine; Myles Schiller, MD, Professor of Clinical Pediatrics; Christine Tracy, MD, Assistant Professor of Clinical Pediatrics; Daphne T. Hsu, MD, Chief, Division of Pediatric Cardiology, Co-Director, Pediatric Heart Center; Christine Walsh, MD, Director, Pediatric Dysrhythmia Center, Professor of Clinical Pediatrics; Sebastian Strigl, MD, Assistant Professor of Pediatrics; Robert M. Pass, MD, Director, Pediatric Interventional Cardiology, Director, Pediatric Electrophysiology; Rajesh Shenoy, MD, Assistant Professor of Pediatrics; Leo Lopez, MD, Director, Pediatric Cardiac Noninvasive Imaging



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Source: The Nielsen Company, Focus® Medical/
Surgical June 2008 Readership Summary; Pediatric
Section, Table 1002 Projected Average Issue Readers.

Continued from previous page

year, the federal Centers for Disease Control and Prevention has recommended that all children aged 5-18 years receive a flu shot each year, adding to its previous recommendation that children aged 6 months to 5 years receive the vaccine. But the New Jersey Public Health Council's decision late last year to require the vaccine for preschoolers and children in day care has drawn fire from some parents, who want to be able to choose whether their children receive vaccinations. Assemblywoman Charlotte Vandervalk (R-Bergen), a critic of mandatory vaccination, said that although New Jersey allows exceptions to mandatory vaccination for medical and religious grounds, few of these exceptions are actually granted. She is sponsoring legislation

to allow for conscientious objections to mandatory vaccination.

EPA Tightens Lead Standard

The Environmental Protection Agency has dramatically strengthened the nation's air quality standards for lead, reducing the allowable lead level from 1.5 mcg of lead per cubic meter of air to 0.15 mcg. The decision is the first changed in 30 years, the EPA said. The agency said it strengthened the standards after a thorough review of the science on lead as well as advice from its Clean Air Scientific Advisory Committee. By October 2011, the EPA will designate areas that must take additional steps

to reduce lead air emissions, and states then will have 5 years to meet these new standards. AAP President David Tayloe applauded the move. "We were reminded again of the dangers of lead in toys and children's products over the past year, but children are exposed to lead through many sources, including the air we breathe," Dr. Tayloe said. "We must move aggressively to reduce children's exposure to lead from all possible sources, and the EPA's action is a significant step in this battle."

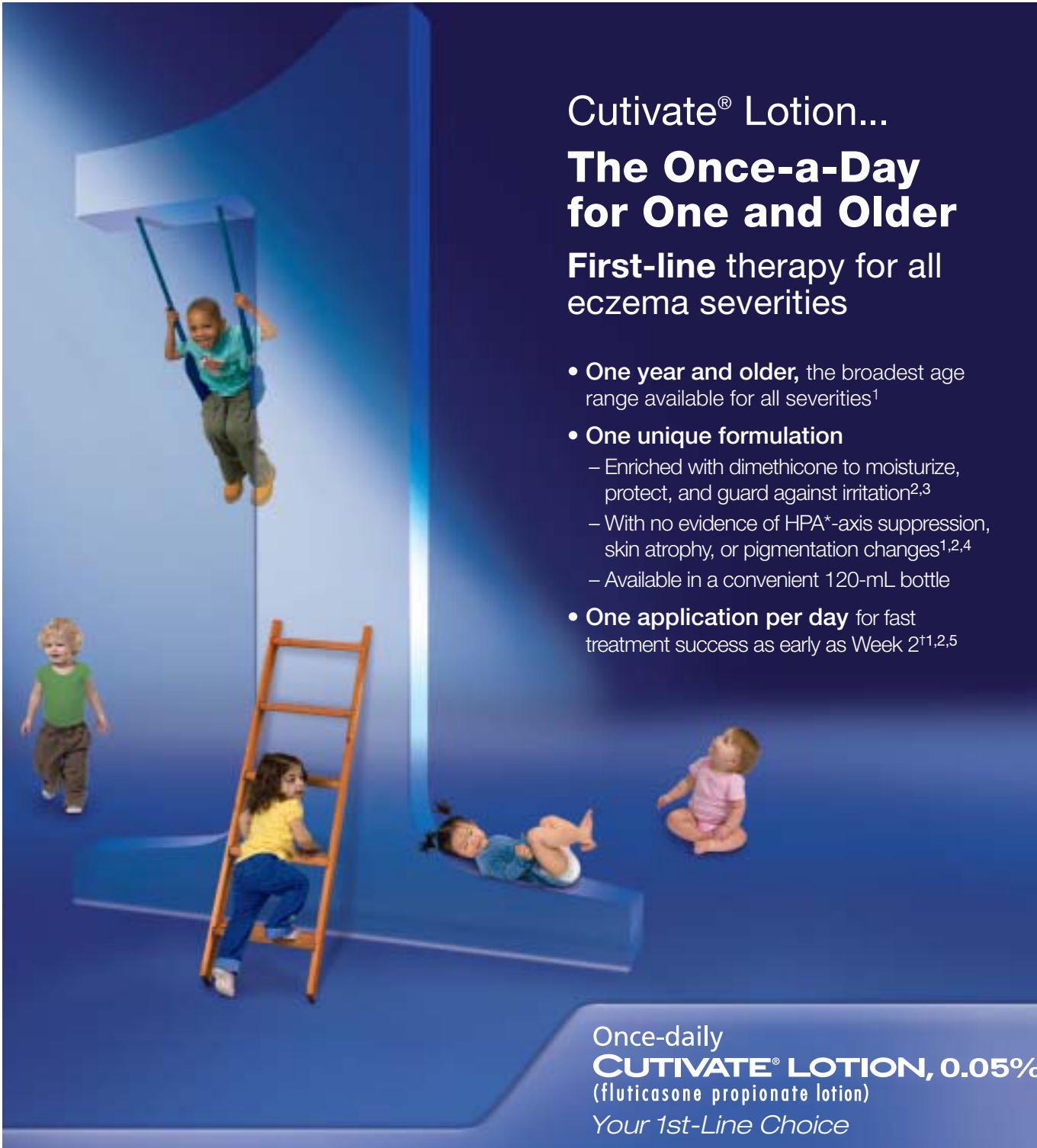
Maternal Health Resolution Passes

The United States must do more to reduce maternal mortality in this country and

abroad, according to a resolution passed unanimously by the Senate. S. Res. 616, introduced by Sen. Blanche Lincoln (D-Ark.) and Sen. Olympia Snowe (R-Maine), noted that globally, 536,000 women die during pregnancy and childbirth each year. "While the majority of deaths occur in developing countries, the United States has one of the highest maternal mortality rates among industrialized nations," Sen. Lincoln said in a statement. "A mother's health affects the health of her child, her family's well-being, and the productivity of a community." The House approved a companion resolution (H. Res. 1022) earlier this year.

—Jane Anderson

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Not for ophthalmic, oral, or intravaginal use, or for use by patients with a hypersensitivity to any of its components. In clinical studies, drug-related side effects following the use of CUTIVATE LOTION consisted primarily of localized burning and stinging, and were usually mild and self-limiting. No skin atrophy, changes in pigmentation, or evidence of HPA-axis suppression were observed following the use of CUTIVATE LOTION in these studies. Adrenal suppression has been observed in studies with other fluticasone propionate topical formulations.

References: 1. Cutivate® Lotion, 0.05% [prescribing information]. Melville, NY: PharmaDerm®, a division of Nycomed US Inc. 2008. 2. Eichenfield LF, Miller BH; Cutivate Lotion Study Group. Two randomized, double-blind, placebo-controlled studies of fluticasone propionate lotion 0.05% for the treatment of atopic dermatitis in subjects from 3 months of age. *J Am Acad Dermatol*. 2006;54:715-717. 3. Ullasz A, Lebowitz M. Dimethicone as a protective ingredient in topical medications. Poster presented at: 65th Annual Meeting of the American Academy of Dermatology; February 2-6, 2007; Washington, DC. 4. Hebert AA, Friedlander SF, Allen DB; Fluticasone Pediatrics Safety Study Group. Topical fluticasone propionate lotion does not cause HPA axis suppression. *J Pediatr*. 2006;149:378-382. 5. Data on file, PharmaDerm.

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