

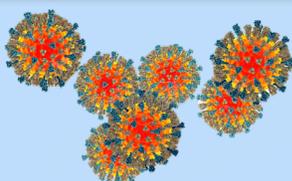
# MEASLES

**the largest outbreak in Rockland County since the 1970's**

by Doug Puder, MD



**Our young patients have formed a shield around the areas where measles is spreading!**



continued on page 4

We admire the parents of our young patients. You have kept Rockland County's measles outbreak from spreading further! The doctors at Clarkstown Pediatrics see how much you care about protecting your children and our community.

It is all of you who responded to this threat to our children. You brought your 6 month old infants for *MMR* vaccine, even if they were sick. You made sure your children over age one have had two doses of *MMR* vaccine even if they were in the office for some other illness.

Some parents had to overcome their fear or distrust of medical science. Despite inaccurate and sometimes fraudulent comments posted on the internet, you listened to us tell you that *MMR* is safe and life saving. Measles vaccine is not the cause of autism or any other problem. You considered the fact that autism is diagnosed more often in groups of children who have *not* had *MMR* vaccine as in those who have. That last year about 100,000 children died from measles worldwide.

And so the young patients of Clarkstown Pediatrics have formed a shield around the areas where measles is spreading. As of January 11th, 2019 there have been **108 cases** of measles confirmed in Rockland County. More are suspected. In the entire United States there were only 86 cases in 2016 for comparison, and 63 in 2010.

Without your help it would have spread like a wildfire through the entire tri-state area. One child with measles spreads it to an average of 18 others! Measles is just about the most contagious infectious disease. An unvaccinated child has a 90% chance of getting measles just by walking through a room even two hours after a child with measles has left it.

The few who cannot be vaccinated are protected by all of you. You are protecting infants under age six months, premature infants, and children with cancer or weakened immune systems.

[www.clarkstownped.com](http://www.clarkstownped.com)

# The Crying Baby and How to Cope

...when the baby is thriving but the parents aren't

by Erica Berg, MD  
and  
Doug Puder, MD



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**What if there are periods in the late afternoon or evening where your baby just cries for hours no matter what you do?**

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All babies cry to tell us when they need something. Over the first month of a baby's life parents develop skills to console their baby and to sense what their baby needs. But some babies are very difficult to console. What if there are periods in the late afternoon or evening where your baby is inconsolable? The glow of having a newborn fades and parents become exhausted from lack of sleep. So many moms and dads understandably get frustrated, discouraged and even depressed.

When crying lasts longer than three hours a day and is not caused by another medical problem, we call it *colic*. *Colic* and fussiness certainly cause parents and babies to develop a different relationship, one with increased holding, singing, ssshhh'ing, which may be part of the biology of it. But that doesn't mean it is okay for parents and babies to suffer through this difficult time. It often begins around 3 weeks of age and peaks between 4 and 6 weeks of age. For most, the intensity increases in the evenings. Thankfully it fades away at about age three months.

**What is most helpful for parents is to know they are good parents.** *Colic* is not caused by poor parenting. A mother of four children told me, "No matter what I do, I can't console my new baby. I promise you I am the same parent I was for my other children, but this baby won't be consoled for hours in the evening. It's like the bewitching time." *Colic* is a real thing!

With *colic*, the baby is thriving and has a normal examination. Sometimes food allergy or gastroesophageal reflux need to be ruled out, the toes checked to make sure there isn't a hair wrapped around one of them, or any other medical issue. No medication has been shown to be safe and effective for colic.

Any degree of increased crying by your baby is upsetting and we wish there was a magic fix. Here are some suggestions that can be helpful. Every baby will respond to different tricks:

**1. Holding and motion:** your arms, a car ride, a swing. Additionally a lullaby often helps too because your child wants to hear what you have to say and may quiet themselves to do so.

**2. Aiding with gas:** as they cry more, they swallow more air, so abdominal massage, and even whole body massage tends to be soothing. Gas medications such as simethicone (*Mylicon*) are harmless but don't work.

**3. Breastfeeding moms:** should avoid gas producing foods. If food allergy is the cause of your child's crying, by far the most common cause is milk allergy. A one week trial of avoiding all dairy: milk, (casein or whey protein) will answer this question. If there is not a dramatic improvement,

We hope you find our Parentletter helpful and informative. Please keep in mind that receipt of this newsletter does not create a doctor/patient relationship and that it is not meant to serve as a substitute for professional medical advice. For particular pediatric medical concerns, including decisions about diagnoses, medications and other treatments, or if you have any questions after reading this newsletter, we encourage you to speak with your child's pediatrician.

it is probably not from food allergy. So many online blogs and friends may ask, "are you eating something that may be causing your baby pain?" Eliminating a lot of foods at once just deprives a mom. It makes her stress even worse. With or without most "bad foods" in a mom's diet, colic gradually improves anyway. Some well intentioned advice may just stress parents more.

Formula fed babies need no more than a one week trial of an allergy free formula (nutramigen, alimentum, neocate, etc.). Unless there is a significant improvement, we recommend going back to your original choice of formula. Please check in with your pediatrician to choose the best formula for your baby. We do not recommend switching from type to type or brand to brand every couple of days to see if it helps with the crying.

**4. Soothing sounds:** white noise, fans, car motors, hair dryers seem to help in many studies looking at colic treatments. Many "white noise" shushing devices are available.

**5. Swaddling and Sleep:** to help calm your baby's body and aid sleep, swaddling them really does help even if they initially try to wiggle out of it. The more babies sleep during the day, the smoother their evening will be and the more successful night time sleep will be.

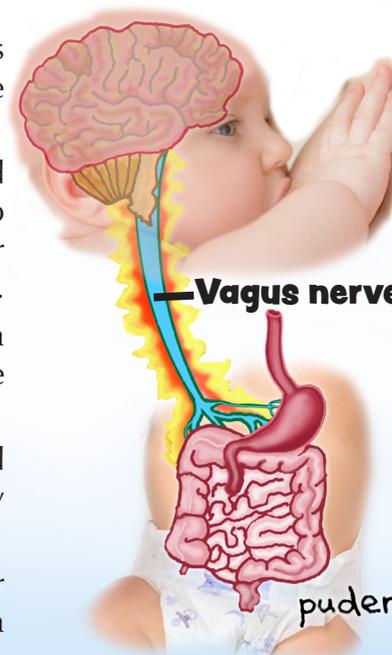
**6. Probiotics:** compared to placebo, taking beneficial bacteria reduces crying in several (but not all) studies. Speak to us for some suggestions to try.

**7. Gas relief and herbal remedies:** both safe to try and possibly helpful in a small number of babies. Most studies show they don't do much.

**8. Take a break:** take turns with a partner to care for your crying baby. You can't hold a crying baby hour after hour without a break, it is intolerable! If you need to, set your baby down in a safe place and walk away to calm yourself. Ask a friend or family member to come over to hold the baby even for a short while so you can just rest. Emotions you never thought you would have (frustration, anger, shame) add to the the intensity of the moment. You will be able to pay more loving attention to your baby when you've had a chance to get refreshed.

**9. This won't last forever:** know that with each passing week, the fussiness should improve. Colic generally resolves by age 3 months. If it isn't getting better, a recheck at our office is always welcomed to discuss your baby's health and development.

**10. So what causes colic?** Even though it looks like it's from the intestines, it is an over-sensitivity in the vagus nerve (which connects the brain to the intestinal tract). Some babies seem to experience sensory overload in the first three months. But don't worry, these sensitive babies will show their wonderful personalities soon. And if parents hang in there, the "happily ever after" part is coming!



**sensitive nerve,  
normal intestines**



# MEASLES

at our doorstep...

*continued from page 1*

by Doug Puder, MD

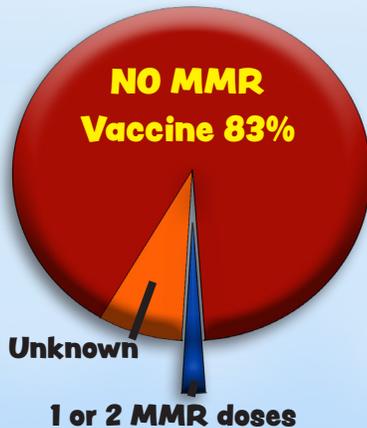
**98%**  
CLARKSTOWN  
pediatrics

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**Could measles at our doorstep teach us something important? That diseases we thought were gone can come back if we let down our "vaccine shields"...**

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**Of 108 Measles Cases:**



Over 98% of Clarkstown Pediatric patients over age six months have gotten at least one MMR vaccine. We continue to make calls to those few who have yet to be vaccinated.

Rockland county's measles outbreak began in early October 2018. Several children visiting the USA from overseas spread measles in the Monsey community. Seventy percent of children in this community are vaccinated. (Orthodox Rabbis **do** encourage vaccination of children.)

During that first week, a child was diagnosed with measles at our New City office. All patients in the office in that day were contacted and immunized. None of them developed measles.

Since then there have been **no cases of measles among any patient of Clarkstown Pediatrics!** Our MMR shield is working. In partnership with all of the pediatricians and Rockland County Department of Health over 13,000 doses of MMR have been given to children since October. We are using an accelerated schedule starting at age six months (details are posted on the homepage of our website).

Of the 108 cases of measles confirmed in Rockland County ages range from 1 day old to 62 years (most around age six). There have been eight intensive care hospitalizations for pneumonias, respiratory distress, and dehydration. Thankfully none have died or developed neurologic complications so far. But neurologic disease can appear almost a decade after measles infection in some cases. The expected rate of such severe problems is about 3 to 4 per thousand infected people. Prior to 1963 when measles vaccine was first given, measles caused about 500 deaths per year in the USA.

Of the 108 cases of measles confirmed in Rockland County, 83% occurred in people who have not been vaccinated, 10% in people with unknown vaccine records, 2% in children who received one MMR dose, and 5% in people who had two MMR doses. All cases in the vaccinated group were mild and without complications. (We know that measles protection from one MMR is 93% and from two 97%.)

To protect the fragile patients who cannot be vaccinated and to protect the 3% of children who develop only partial protection from two doses of MMR vaccine the rest of us need to be vaccinated. In a community where 95% of people are vaccinated, measles will not spread.

By year 2000, measles had been considered "eliminated" in this country. Could having measles at our doorstep teach us something important? That diseases we thought were gone can come back if we let down our "vaccine shields".

Thank all of you loving parents for helping create a shield. You protected your own children but also kept measles from spreading. You protected Rockland county's most fragile children too!

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