Outreach

Your Outreach Librarian can help facilitate evidence-based practice for all General Paediatrics members of staff, as well as assisting with academic study and research. We can help with literature searching, obtaining journal articles and books, and setting up individual current awareness alerts.

Literature Searching

We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a 1 to 1 session where we can guide you through the process of creating a well-focused literature research and introduce you to the health databases access via NHS Evidence.

Critical Appraisal Training

We also offer one-to-one or small group training in literature searching, accessing electronic journals, and critical appraisal/Statistics. These are essential courses that teach how to interpret clinical papers.

Books

Books can be searched for using SWIMS our online catalogue at www.swims.nhs.uk. Books and journals that are not available on site or electronically may be requested from other locations. Please email requests to: thomas.osborne@uhbristol.nhs.uk
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If you require full articles please email me @ Thomas.Osborne@UHBristol.nhs.uk

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Potential Drug-Drug Interactions in Infant, Child, and Adolescent Patients in Children's Hospitals
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Insulin and BMI as Predictors of Adult Type 2 Diabetes Mellitus
Rapid Normalization of Vitamin D Levels: A Meta-Analysis
Vitamin D in Fetal Development: Findings From a Birth Cohort Study
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Early Weight Loss Nomograms for Exclusively Breastfed Newborns
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Breastfeeding Duration and Weight Gain Trajectory in Infancy
A 33-Month-Old With Fever and Altered Mental Status
Early Childhood Neurodevelopment After Intrauterine Growth Restriction: A Systematic Review
An Approach to Renal Masses in Pediatrics
Should We Tell Parents When We’ve Made an Error?
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Maintaining Tradition While Fostering Change: Pediatrics in 2015
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Antimicrobial Stewardship in Pediatrics: A Good Beginning But We Have a Long Way to Go
Eradicating Polio: How the World's Pediatricians Can Help Stop This Crippling Illness Forever
Mobile and Interactive Media Use by Young Children: The Good, the Bad, and the Unknown
Hormonal Contraceptive Agents: A Need for Pediatric-Specific Studies
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Family-Initiated Dialogue About Medications During Family-Centered Rounds
Comparative Effectiveness of Digoxin and Propranolol for Supraventricular Tachycardia in Infants*
Greater Fluctuations in Serum Sodium Levels Are Associated With Increased Mortality in Children With Externalized Ventriculostomy Drains in a PICU*
Implementation of an Extracorporeal Cardiopulmonary Resuscitation Simulation Program Reduces Extracorporeal Cardiopulmonary Resuscitation Times in Real Patients*
Exubation During Pediatric Extracorporeal Membrane Oxygenation: A Single-Center Experience*
Predictors of Mortality in Pediatric Patients on Venoarterial Extracorporeal Membrane Oxygenation*
Pediatric Perioperative Cardiac Arrest and Mortality: A Study From a Tertiary Teaching Hospital*
Sedation Guidelines, Protocols, and Algorithms in PICUs: A Systematic Review
Sepsis or SEPSIS: Does It Make a Difference?*
How to Guide Transfusion Decision-Making? That Is the Question*
The Tremendous Burden of Sepsis on China’s Youngest Children*
Are We Exchanging Morbidity for Mortality in Pediatric Intensive Care?*
Sepsis in Children: A Dark Cloud With a Silver Lining*
Treatment of a Mostly Self-Limiting Disease: Keep It Simple and Safe*
Connecting the Dots: From Time Point to Trajectory Analysis of Serum Sodium Levels in Pediatric Neurologic Injury*
Enhancing the Power of Simulation for Complex Clinical Care*
Exubation and Extracorporeal Membrane Oxygenation: What a Difference a Decade Makes!!!*
Is This Heart Going to Work?*
Pediatric Perioperative Outcomes in the Developing World: Where Are We Now?*
Diastolic Dysfunction in Children With Septic Shock: Does It Help Us Manage Our Patients?*
Liquid Ventilation in Congenital Diaphragmatic Hernia: Back on Stage?*
What Are the New Perspectives in Rehabilitation in the PICU Using Traditional Techniques?
The author replies
What Is the Meaning of Hypertension in the PICU?
The authors reply
Prevalence and Outcome of Diastolic Dysfunction in Children With Fluid Refractory Septic Shock—A Prospective Observational Study*
Intrapulmonary Instillation of Perflurooctylbromide Improves Lung Growth, Alveolarization, and Lung Mechanics in a Fetal Rabbit Model of Diaphragmatic Hernia
Increase in Oxygen Consumption After Albuterol Inhalation in Ventilated Infants and Children
National Conference & Exhibition October 12, 2014 — San Diego, CA
Online Abstract Translations

Pediatric Anesthesia Volume 25, Issue 1

Determination of the 95% effective dose of remifentanil for the prevention of coughing during extubation in children undergoing tonsillectomy (with or without adenoidectomy)
A randomized comparison of the i-gel™ with the self-pressurized air-Q™ intubating laryngeal airway in children
Dexmedetomidine vs midazolam as preanesthetic medication in children: a meta-analysis of randomized controlled trials
A comparison of functional magnetic resonance imaging findings in children with and without a history of early exposure to general anesthesia
Prophylactic methylprednisolone to reduce inflammation and improve outcomes from one lung ventilation in children: a randomized clinical trial
Comparison of pediatric perioperative risk assessment by ASA physical status and by NARCO-SS (neurological, airway, respiratory, cardiovascular, other–surgical severity) scores
Propofol–ketamine or propofol–remifentanil for deep sedation and analgesia in pediatric patients undergoing burn dressing changes: a randomized clinical trial
A Pilot study to determine whether visually evoked hemodynamic responses are preserved in children during inhalational anesthesia
The development of pediatric anesthesia and intensive care in Scandinavia
A change in anticoagulation monitoring improves safety, reduces transfusion, and reduces costs in infants on cardiopulmonary bypass
Prophylactic versus reactive transfusion of thawed plasma in patients undergoing surgical repair of craniosynostosis: a randomized clinical trial
Intraoperative optimization to decrease postoperative PRBC transfusion in children undergoing craniofacial reconstruction
Effects of a restrictive fluid regimen in pediatric patients undergoing major abdominal surgery
Ultrasound assessment of gastric volume in the fasted pediatric patient undergoing upper gastrointestinal endoscopy: development of a predictive model using endoscopically suctioned volumes
The pressure drop across the endotracheal tube in mechanically ventilated pediatric patients
Simulated fluid resuscitation for toddlers and young children: effect of syringe size and hand fatigue
Intranasal dexmedetomidine premedication reduces minimum alveolar concentration of sevoflurane for laryngeal mask insertion and emergence delirium in children: a prospective, randomized, double-blind, placebo-controlled trial
Raising the bar for pediatric sedation studies and trials
Fond farewell
Monitoring depth of anesthesia: from consciousness to nociception. A window on subcortical brain activity
Bradycardia in perspective—not all reductions in heart rate need immediate intervention
The ‘Can't Intubate Can't Oxygenate’ scenario in pediatric anesthesia: a comparison of the Melker cricothyroidotomy kit with a scalpel bougie technique
Are new supraglottic airway devices, tracheal tubes and airway viewing devices cost-effective?
Perioperative respiratory complications following awake and deep extubation in children undergoing adenotonsillectomy
Lumbar punctures in thrombocytopenic children with cancer
Systematic Review and Meta-Analysis of benefits and risks between normothermia and hypothermia during cardiopulmonary bypass in pediatric cardiac surgery
Anesthesia and the pediatric cardiac catheterization suite: a review
Dose effect of local anesthetics on analgesic outcomes for the transversus abdominis plane (TAP) block in children: a randomized, double-blinded, clinical trial
Emergency pediatric anesthesia – accessibility of information
Confirmation of local anesthetic distribution by radio-opaque contrast spread after ultrasound guided infraclavicular catheters placed along the posterior cord in children: a prospective analysis
Total intravenous anesthesia will supercede inhalational anesthesia in pediatric anesthetic practice
Through the Glass Darkly: searching for safety signals in physiological monitoring
A comparative study of Laryngeal Mask Airway size 1 vs i-gel size 1 in infants undergoing daycare procedures
Assessment of three placement techniques for individualized positioning of the tip of the tracheal tube in children under the age of 4 years
Perioperative pulmonary aspiration is infrequent and low risk in pediatric anesthetic practice
Sedation monitoring during open muscle biopsy in children by Comfort Score and Bispectral Index – a prospective analysis
Pain in children – are we accomplishing the optimal pain treatment?
Anesthesia-related neurotoxicity and the developing animal brain is not a significant problem in children
Treating perioperative anxiety and pain in children: a tailored and innovative approach
Rapid sequence induction has no use in pediatric anesthesia
Awake caudals and epidurals should be used more frequently in neonates and infants
A new twist in the pediatric difficult airway
Evaluation of the minimum volume of salvage blood required for the successful use of two different autotransfusion devices
Effect of carboxyhemoglobin on postoperative complications and pain in pediatric tonsillectomy patients
Neurosurgical conditions and procedures in infancy are associated with mortality and academic performances in adolescence: a nationwide cohort study
Pediatric airway anatomy may not be what we thought: implications for clinical practice and the use of cuffed endotracheal tubes
Adjuncts should always be used in pediatric regional anesthesia
Sevoflurane anesthesia and brain perfusion
Anesthetic considerations in myofibrillar myopathy
Tracheal intubation with the Bonfils fiberscope in the difficult pediatric airway: a comparison with fiberoptic intubation
Development of an optimal sampling schedule for children receiving ketamine for short-term procedural sedation and analgesia
Comparison of actual oxygen delivery kinetics to those predicted by mathematical modeling following stage 1 palliation just prior to superior cavopulmonary anastomosis
Electroencephalography for children with autistic spectrum disorder: a sedation protocol
Blood transfusion in patients treated with surgery for necrotizing enterocolitis
Noninvasive cardiac output monitoring using bioreactance-based technique in pediatric patients with or without ventricular septal defect during anesthesia: in comparison with echocardiography
Intraoperative apnea in children after buffered 5% povidone-iodine site sterilization for strabismus surgery
Clinical utility of B-type natriuretic peptide (NP) in pediatric cardiac surgery – a systematic review
Continuous noninvasive cardiac output in children: is this the next generation of operating room monitors?
Initial experience in 402 pediatric patients
Noninvasive cardiac output measurement using bioreactance in postoperative pediatric patients
Pressure recording analytical method and bioreactance for stroke volume index monitoring during pediatric cardiac surgery

New NICE Guidance

Child abuse and neglect (GID-SCWave0708) TBC NICE guidelines
Children's attachment (GID-CGWAVE0675) October 2015 NICE guidelines
End of life care for infants, children and young people (GID-CGWAVE0730) TBC NICE guidelines
Gastro-oesophageal reflux in children and young people (GID-CGWAVE0599) January 2015 NICE guidelines
Harmful sexual behaviour among children and young people (GID-PHG66) September 2016 NICE guidelines
Intravenous fluids therapy in children (GID-CGWAVE0655) October 2015 NICE guidelines
Kidney transplantation (children, adolescents) - immunosuppressive regimens (review of TA99) [ID346] (GID-TAG255) January 2016 Technology appraisals
Obesity - prevention and lifestyle weight management in children (GID-QSD80) TBC Quality standards
School based interventions to prevent smoking (partial update) (GID-PHG81) TBC NICE guidelines
Social and emotional wellbeing in primary and secondary education (update) (GID-PHG82) TBC NICE guidelines
Management of vomiting in children and young people with gastroenteritis: ondansetron (ESUOM34) October 2014
Developmental follow-up of pre-term babies (GID-CGWAVE0752) TBC NICE guidelines
End of life care for infants, children and young people (GID-CGWAVE0730) TBC NICE guidelines
Neonatal Jaundice (update SC) (GID-CGWAVE0732) TBC NICE guidelines
Antibiotics for neonatal infection (QS75) December 2014

Latest relevant Systematic Reviews from the Cochrane Library
If you require full articles, or a more enhanced search of any of the below topics please email me @ Thomas.Osborne@UHBristol.nhs.uk

**Alpha-2 agonists for long-term sedation during mechanical ventilation in critically ill patients**
Ken Chen, Zhijun Lu, Yi Chun Xin, Yong Cai, Yi Chen and Shu Ming Pan

**Minimally invasive surgery versus open surgery for the treatment of solid abdominal and thoracic neoplasms in children**
Elvira C van Dalen, Manou S de Lijster, Lieve GJ Leijssen, Erna MC Michiels, Leontien CM Kremer, Huib N Caron and Daniel C Aronson

**Chemotherapy for children with medulloblastoma**
Erna MC Michiels, Antoinette YN Schouten-Van Meeteren, François Doz, Geert O Janssens and Elvira C van Dalen

**Honey for acute cough in children**
Olabisi Oduwole, Martin M Meremikwu, Angela Oyo-Ita and Ekong E Udoh

**Intraoperative local anaesthesia for reduction of postoperative pain following general anaesthesia for dental treatment in children and adolescents**
Susan Parekh, Collette Gardener, Paul F Ashley and Tanya Walsh

**Isotonic versus hypotonic solutions for maintenance intravenous fluid administration in children**
Sarah McNab, Robert S Ware, Kristen A Neville, Karen Choong, Mark G Coulthard, Trevor Duke, Andrew Davidson and Tavey Dorofaef

**Household interventions for preventing domestic lead exposure in children**
Berlinda Yeoh, Susan Woolfenden, Bruce Lanphear, Greta F Ridley, Nuala Livingstone and Emile Jorgensen

**Oxygen therapy for lower respiratory tract infections in children between 3 months and 15 years of age**
Maria Ximena Rojas-Reyes, Claudia Granados Rugeles and Laura Patricia Charrry-Anzola

**Vitamin E supplementation in people with cystic fibrosis**
Peter O Okebukola, Sonal Kansra and Joanne Barrett

**Universal school-based prevention for illicit drug use**
Fabrizio Faggiano, Silvia Minozzi, Elisabetta Versino and Daria Buscemi

**NHS Behind the Headlines**
Our health news predictions for 2015

Friday Jan 2 2015

A few days ago we looked at The Guardian’s health news predictions for 2014. So we decided to see if we could better the newspaper’s efforts by providing our own health predictions for 2015…

How to read health news

Tuesday Dec 23 2014

If you’ve just read a health-related headline that has caused you to spit out your morning coffee (“Coffee causes cancer” usually does the trick), it’s always best to...

Academic hype 'distorting' health news

Wednesday Dec 10 2014

"Science and health news hype: where does it come from?," The Guardian asks. A new study suggests a lot of the hype comes from academics themselves, or at least their press offices, as many press releases contain exaggerations…

New activity in Uptodate/DynaMed

New human papillomavirus (HPV) vaccine targets nine HPV types (December 2014)

Infection with human papillomavirus (HPV) types 16, 18, 31, 33, 45, 52, and 58 is implicated in approximately 90 percent of invasive cervical cancers. The US Food and Drug Administration has approved Gardasil 9, a 9-valent HPV vaccine that targets those seven HPV types in addition to the two types associated with genital warts (6 and 11), for the prevention of HPV-related disease [38]. In an as-yet-unpublished trial that included approximately 14,000 females randomly assigned to receive the 9-valent or quadrivalent HPV vaccine, immune responses with the two vaccines were comparable for the HPV types targeted by both (6, 11, 16, and 18). Additionally, the 9-valent HPV vaccine was 97 percent effective for preventing precancerous and cancerous lesions of the cervix, vagina, and vulva associated with the other targeted HPV types (31, 33, 45, 52, and 58). Safety profiles were overall similar. The 9-valent vaccine is expected to be available in the US in early 2015. (See “Recommendations for the use of human papillomavirus vaccines”, section on ‘Available vaccines’.)
Circulating influenza A H3N2 viruses in the United States (December 2014)

In December 2014, the CDC released a health advisory stating that more than half of influenza A H3N2 viruses collected and analyzed in the United States in October and November 2014 were antigenically different (drifted) from the H3N2 antigen included in this season’s influenza vaccines [39]. Although influenza has been relatively infrequent up to this point in the season, it appears to be increasing, and most isolated influenza viruses have been H3N2 strains. During previous seasons in which influenza A H3N2 viruses have predominated, higher hospitalization and mortality rates have been reported among older people, very young children, and individuals with certain medical conditions. Influenza vaccination is still strongly recommended because it usually provides some cross-protection against drifted viruses and because influenza vaccines protect against other strains. The CDC health advisory was issued to reemphasize the importance of the use of neuraminidase inhibitors (eg, oseltamivir, zanamivir) when indicated for the treatment and prevention of influenza infection as an adjunct to vaccination. (See “Seasonal influenza vaccination in adults”, section on 'Drifted H3N2 viruses during the 2014 to 2015 influenza season'.)

Isolated loss of consciousness in children with minor head trauma (October 2014)

Loss of consciousness (LOC) following minor head trauma is frequently used to make decisions regarding neuroimaging. However, new data suggest that the risk of clinically important traumatic brain injury (ciTBI) that requires neurosurgical intervention, endotracheal intubation for 24 hours, or hospitalization for at least two days is low in the setting of brief, isolated LOC without any other clinical predictors. In a large multicenter, prospective cohort study of more than 5,000 children with LOC after mild head trauma, 0.5 percent of children with isolated LOC, defined as LOC but otherwise meeting validated clinical predictors indicating very low risk for ciTBI (table 2), had ciTBI compared with 4 percent of children with LOC and not meeting at least one of these criteria [18]. In this study, duration of LOC longer than five seconds was also associated with significantly greater risk of ciTBI. These findings support the conclusion that children with minor head trauma and isolated LOC of less than five seconds do not routinely require neuroimaging. (See "Minor head trauma in infants and children: Evaluation", section on 'Approach' and "Minor head trauma in infants and children: Evaluation", section on 'Loss of consciousness'.)

Emergency department thoracotomy in children (October 2014)

Among adults, survival after emergency thoracotomy for thoracic trauma approaches 20 percent in patients with isolated stab wounds to the heart but is extremely rare in those with blunt trauma, multiple gunshot wounds to the chest, or no signs of life in the field (≤1 percent for each group). Evidence is more limited for outcomes in children. In an observational study of 316 children (mean age 15 years) who underwent thoracotomy within one hour of emergency presentation and were treated in a level one trauma center, 31 percent of patients survived to discharge, including 19 percent of 70 patients with blunt trauma and 34 percent of those with penetrating trauma [19]. Survival dropped to 5 percent in patients presenting with heart rate ≤70 beats per minute or systolic blood pressure ≤50 mmHg, regardless of trauma type. These data suggest that initial vital signs are more important than type of trauma when deciding whether or not to perform emergency thoracotomy in
adolescents. (See "Initial evaluation and management of penetrating thoracic trauma in adults", section on 'Overview and survival' and "Initial evaluation and stabilization of children with thoracic trauma", section on 'Emergency department thoracotomy'.)

### Dimercaptosuccinic acid for treatment of severe pediatric lead poisoning (November 2014)

Parenteral dimercaprol (2,3-dimercapto-1-propanol or BAL) and calcium disodium edetate (CaNa2EDTA) are the recommended treatments for severe lead poisoning in children. However, oral chelation with dimercaptosuccinic acid (DMSA) may be an option if BAL and CaNa2EDTA are not available or cannot be safely administered. This was demonstrated in a retrospective study of 1,156 Nigerian children, of whom over one-third had venous blood lead levels ≥80 ug/dL [1]. DMSA successfully decreased venous blood lead levels and was associated with clinical improvement. Minimal adverse effects, primarily moderate serum alanine aminotransferase (ALT) elevations, occurred during <2.5 percent of over 3,000 treatment courses. Mortality for all children (including those without severe lead poisoning) was 2 percent during the period of the study. (See "Childhood lead poisoning: Management", section on 'Initial chelation therapy'.)

### Fatality due to contaminated probiotic in a preterm infant (November 2014)

In October 2014, a fatal case of mucormycosis caused by *Rhizopus oryzae* was reported in a premature infant who received the probiotic supplement Solgar ABC Dophilus® Powder for prevention of necrotizing enterocolitis (NEC) [8]. Investigation by the Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), and Connecticut Departments of Public Health and Consumer Protection of the same lot of unopened Solgar ABC Dophilus® Powder revealed contamination with *Rhizopus oryzae*. As a result, the CDC sent out a Health Alert on November 25, 2014 that recommends Solgar ABC Dophilus not be used in infants, and that any patient who received this product in the last 30 days be evaluated and empiric antifungal therapy be considered in consultation with an infectious disease specialist. This case supports our current practice of NOT routinely using probiotic therapy to prevent NEC until strict criteria are met for manufacturing and regulation of probiotic products, and there are reliable data for optimal administration of these products. (See "Mucormycosis (zygomycosis)", section on 'Healthcare-associated' and "Prevention of necrotizing enterocolitis in newborns", section on 'Probiotics'.)

### Low Apgar scores: Predictors of neonatal and infant deaths (November 2014)

Although not used to guide resuscitation, Apgar scores, first introduced in 1953, have been used as a measure of the newborn's overall clinical status and response to resuscitation during the first minutes after delivery. The accurate predictability of low Apgar scores for mortality was confirmed by a study that reviewed discharge and mortality data for all births in Scotland between 1992 and 2010 [9]. Linear regression analysis showed Apgar scores ≤3 at five minutes, compared with normal scores (between 7 and 10), were associated with 300-fold increased risk of early neonatal death (birth to seven days of life), 30-fold increased risk of late neonatal death (7 to 28 days of life), and 50-fold increased infant death (up to one year of age). (See "Neonatal resuscitation in the delivery room", section on 'Apgar scores'.)
Indomethacin not a risk factor for spontaneous intestinal perforation in ELBW infants (November 2014)

An earlier study of extremely low birth weight (ELBW) infants (birth weight <1000 g) from the National Institute of Child Health and Human Development (NICHD) Neonatal Research Network had reported an association between spontaneous intestinal perforation (SIP) and the administration of indomethacin as medical therapy for patent ductus arteriosus closure in preterm infants [10]. A subsequent NICHD study of ELBW infants enrolled from 1999 to 2010 compared ELBW infants for exposure to two factors that might impact the incidence of SIP: indomethacin and early feedings (which improves nutritional outcomes but may increase the risk of SIP) [11]. In this cohort, the risk of SIP was the same for infants exposed to indomethacin with or without early feeding. The risk of SIP was lower for infants who received indomethacin and were fed early compared with those who did not receive either indomethacin or early feeding. These results suggest that SIP is not an adverse event of indomethacin exposure. (See "Spontaneous intestinal perforation of the newborn", section on 'Exposure to indomethacin'.)

Transcutaneous bilirubin measurements after discontinuation of phototherapy in neonates (November 2014)

In neonates, transcutaneous bilirubin (TcB) measurement devices are used to estimate total serum or plasma bilirubin (TB), thereby reducing the need for blood sampling. While TcB measurements are typically lower than TB, the degree of underestimation is greater in infants with high TB levels (>15 mg/dL [257 micromol/L]), dark-skinned infants, and during phototherapy. In these settings, TB may be needed to accurately determine the magnitude of hyperbilirubinemia. A German study has also reported TcB underestimation of TB is greater within the first eight hours of discontinuation of phototherapy [12]. This difference between TcB and TB measurements subsequently decreases, and returns to pretreatment values 24 hours after discontinuation of phototherapy. As a result, clinicians must take into consideration the timing of TcB measurement in relationship to discontinuation of phototherapy. If there is any question regarding the validity of TcB measurements, TB should be obtained to assess the degree of neonatal hyperbilirubinemia. (See "Evaluation of unconjugated hyperbilirubinemia in term and late preterm infants", section on 'Transcutaneous bilirubin'.)

Dehydration and hypovolemia in infants and children

review of disorders of plasma sodium (N Engl J Med 2015 Jan) 01/05/2015 11:38:00 AM

Immune thrombocytopenia (ITP)

intracerebral hemorrhage rate 1% and severe bleeding rate 15% in patients with primary ITP (J Thromb Haemost 2014 Dec 12 early online) 01/05/2015 10:43:00 AM
<table>
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<th>Topic</th>
<th>Summary</th>
<th>Date</th>
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<tr>
<td>Laceration management</td>
<td>tissue adhesives may have similar rate of surgical wound infection compared to adhesive tapes or staples; limited evidence to evaluate effect on dehiscence (Cochrane Database Syst Rev 2014 Nov 28)</td>
<td>01/05/2015</td>
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<td>Alport syndrome</td>
<td>cochlear implantation may be considered in children &gt; 1 year old with severe-to-profound hearing loss (GeneReviews 2014 Jan 9)</td>
<td>01/01/2015</td>
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<tr>
<td>Seborrheic dermatitis in infants</td>
<td>review of common skin rashes in infants (FP Essent 2013 Apr)</td>
<td>01/01/2015</td>
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<td>Neonatal hyperbilirubinemia</td>
<td>phototherapy in supine position is as effective for reducing serum bilirubin levels as changing position every 2-3 hours in jaundiced neonates (J Clin Nurs 2014 Oct 16 early online)</td>
<td>12/31/2014</td>
</tr>
<tr>
<td>Distal radius fracture</td>
<td>oral morphine does not further reduce pain but increases risk of adverse events compared to oral ibuprofen in children with uncomplicated extremity fractures (CMAJ 2014 Dec 9)</td>
<td>12/31/2014</td>
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<td>Asthma alternative treatments</td>
<td>heat-sensitive moxibustion may improve asthma symptoms and pulmonary function similar to combined inhaler in patients &gt; 15 years old with asthma (J Tradit Chin Med 2014 Aug)</td>
<td>12/31/2014</td>
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<tr>
<td>Ulcerative colitis</td>
<td>5-ASA compounds associated with reduced risk of colorectal neoplasia</td>
<td>12/31/2014</td>
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<td>Topic</td>
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<td>Infantile colic</td>
<td>probiotic Lactobacillus reuteri supplement may reduce crying in exclusively breastfed infants with colic (J Pediatr 2015 Jan)</td>
<td>12/31/2014 10:39:00 AM</td>
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<td>Immotile cilia syndrome</td>
<td>later onset of neonatal respiratory distress, longer duration of oxygen therapy, situs inversus, and lobar collapse or consolidation on chest x-ray associated with increased risk of primary ciliary dyskinesia in term neonates with respiratory distress (Pediatrics 2014 Dec)</td>
<td>12/31/2014 10:27:00 AM</td>
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<tr>
<td>Crohn's disease in children</td>
<td>anti-TNF therapy reported to have about 85% clinical response rates, 45% endoscopic response rates, and 22% rates of mucosal healing in pediatric Crohn's disease (Eur J Gastroenterol Hepatol 2014 Apr)</td>
<td>12/30/2014 08:10:00 PM</td>
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<td>Latent tuberculosis</td>
<td>American Academy of Pediatrics (AAP) technical report on interferon-gamma release assays for diagnosis of tuberculosis infection and disease in children (Pediatrics 2014 Dec)</td>
<td>12/30/2014 03:08:00 PM</td>
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<td>Disorders of sex development in infancy</td>
<td>review of psychological and medical care of gender nonconforming youth (Pediatrics 2014 Dec)</td>
<td>12/30/2014 10:49:00 AM</td>
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<td>Cerebral palsy (CP)</td>
<td>review of nonoral feeding for children and youth with developmental or acquired disabilities (Pediatrics 2014 Dec)</td>
<td>12/30/2014 10:11:00 AM</td>
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<tr>
<td>Cleft lip and palate</td>
<td>review of nonoral feeding for children and youth with developmental or acquired disabilities (Pediatrics 2014 Dec)</td>
<td>12/30/2014</td>
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<td>Perinatal asphyxia</td>
<td>therapeutic hypothermia with lower temperature and longer duration of cooling does not appear to decrease mortality compared to hypothermia at 33.5 degrees C (92.3 degrees F) for 72 hours in neonates with hypoxic ischemic encephalopathy (JAMA 2014 Dec 24)</td>
<td>12/29/2014</td>
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<tr>
<td>Routine prenatal care</td>
<td>maternal plasma cell-free fetal DNA screening appears to have high sensitivity and specificity for fetal trisomies 21 and 18 in high-risk women (Am J Obstet Gynecol 2014 Oct)</td>
<td>12/29/2014</td>
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<td>Human Papillomavirus Vaccine</td>
<td>HPV 16/18 AS04-adjuvanted vaccine appears effective in women &gt; 25 years old (Lancet 2014 Dec 20)</td>
<td>12/29/2014</td>
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<td>Parapneumonic effusion and empyema in children</td>
<td>VATS appears to have similar outcomes to urokinase in children with septated parapneumonic empyema requiring chest tube drainage (Pediatrics 2014 Nov)</td>
<td>12/29/2014</td>
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<td>Urinary tract infection (UTI) in children</td>
<td>continuous antibiotic prophylaxis may decrease recurrent febrile or symptomatic urinary tract infection but may not reduce risk for new renal scarring (J Urol 2014 Sep 4)</td>
<td>12/28/2014</td>
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<td>Topic</td>
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<td>Date</td>
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<td><strong>Perinatal stroke</strong></td>
<td>perinatal hypoxia factors associated with increased risk of arterial ischemic stroke (PLoS One 2014)</td>
<td>12/28/2014</td>
</tr>
<tr>
<td><strong>Appendicitis</strong></td>
<td>point-of-care ultrasound by pediatric emergency physician may inform likelihood of appendicitis in children and adolescents with suspected appendicitis (Acad Emerg Med 2014 Feb)</td>
<td>12/27/2014</td>
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<td><strong>Influenza antiviral treatment and prophylaxis</strong></td>
<td>addition of IV peramivir does not appear to reduce symptom duration in hospitalized patients with influenza treated with oseltamivir (Clin Infect Dis 2014 Dec 15)</td>
<td>12/24/2014</td>
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<td><strong>Atopic dermatitis</strong></td>
<td>daily emollient therapy may prevent atopic dermatitis in high-risk neonates (J Allergy Clin Immunol 2014 Oct)</td>
<td>12/23/2014</td>
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<td><strong>Guillain-Barre syndrome</strong></td>
<td>amantadine may not reduce fatigue in patients with Guillain-Barre syndrome (J Neurol Neurosurg Psychiatry 2006 Jan)</td>
<td>12/23/2014</td>
</tr>
<tr>
<td><strong>ERAS/ATS guideline on definition, evaluation, and treatment of severe asthma in adults and adolescents</strong></td>
<td>ERS/ATS guideline on definition, evaluation, and treatment of severe asthma (National Guideline Clearinghouse 2014 Dec 22)</td>
<td>12/23/2014</td>
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</tbody>
</table>
Quick Exercise

Fill in the gaps in the pyramid of evidence...

This month’s Paediatrics Lit Searches

Mucusitis
Avascular Necrosis
Wong-Baker scale (children’s pain visual analogue scale)
Itchman scale (children’s itch/discomfort measuring scale)
Visual analogue scale (adult pain measuring scale)
Vancouver scar assessment
Patient and observer scar assessment scales
Infections in paediatric burns patients
COPD (chronic obstructive pulmonary disease/chronic obstructive airways disease)/respiratory disease combined with nutritional requirements/treatments could be as food/supplements/nasogastric tube feeding/enteral feeding, macro or micronutrients.
PDA aneurysm, neonate, and ACTA2
ACTA2 and cardiac surgery
ACTA2 mutation in neonates/infants
Library Opening Times

Staffed times 8.30 am—16.30 pm
Monday to Friday

Swipe Access 7.00 am—23.00pm
7 days a week

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University Hospitals Bristol

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Thomas.Osborne@UHBristol.nhs.uk