

# Montana Chapter of the American Academy of Pediatrics Newsletter

November 2013

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## President's Column

Thanks to everyone who participated at Round-up 2013! We had another successful year and enjoyed good speakers and good fellowship.

Despite snowy weather, we still had a full house and good turnout for Round-up 2013. Dr Barbara Howard was our keynote speaker and addressed Oppositional Children and also gave a lecture on Anxiety in Children. With a lot of 'pearls' for those of us in clinical practice, she was well received.

Dr Paul Fisher returned to give us a lecture about headaches and treatment options as well as an update on concussion and recent recommendations about concussion diagnosis and management.

Dr Kristy Kleinschmidt addressed our members on Conduct Disorder and also on Self harming Behaviors. Dr Megan Moran addressed "Sex, Drugs and Facebook" which was a lively discussion of the new challenges facing our teens and a great update

on social media for us. Dr Jinjugi updated our members on fracture care and limb pain. We finished up with a lecture from Dr Kathy Wells about testifying in Child Abuse cases.

Thanks to all who attended Round-up 2013. We look forward to Round-up 2014 which will be on October 3<sup>rd</sup>-5<sup>th</sup> in Chico!

Sheila Idzerda

Executive Director : Molly Taylor [Mollytaylormtaap@gmail.org](mailto:Mollytaylormtaap@gmail.org)  
President: Sheila Idzerda [sidzerda@aol.com](mailto:sidzerda@aol.com)  
Vice-President: Pepper Henryon [pepperhenyon@gmail.com](mailto:pepperhenyon@gmail.com)  
Secretary-Treasurer: Tanya Jagodzinski [Tanyajags@gmail.com](mailto:Tanyajags@gmail.com)



## CATCH OPPORTUNITY

Dr. Angie Ostrowski, our CATCH coordinator, ran a grant writing workshop at the start of Round-up 2013. Meeting mid-day on Thursday September 26<sup>th</sup>, the attendees were able to learn more tips and tricks about writing CATCH grants. Dr. Ostrowski has recently attended the yearly CATCH meeting and brought back some excellent points to improve the process for our members.

In addition, attendees were invited to brainstorm ideas about grants, getting input from other members and Dr. Ostrowski about how to pull together grant ideas into a workable program. The last hour was spent working on writing grant drafts.

Just a heads up for members who are interested in CATCH but were not able to attend – the next grant cycle will start in November 2013 and have a final submission date in January 2014!!

## Obesity Resources

Wait! This article is not going to list the same old sobering statistics and recommend the same old “eat less and exercise more” advice. Instead it is going to outline some of the current practices of many of our pediatricians and highlight some of the excellent resources that are out there. At the same time, it will reveal the fact that many communities lack reliable year round programs for overweight kids which gives us the opportunity to construct new school and community policies that promote healthy lifestyles.

After calling 10 different practices around the state, I learned that many pediatricians refer to hospital-based nutritionists for further management. The nutritionists that I spoke with struggle to find affordable exercise programs to recommend. Two practices have particular pediatricians who take these kids under their wing and provide My Plate

handouts and BCBS sponsored logs. They cheer on these kids and see them back in 1 to 3 month intervals. Unfortunately, reimbursement for these visits can be unpredictable. Using codes such as “acanthosis nigricans”, “abnormal weight gain”, or “weight loss” instead of “obesity” helps.

The YMCA has been a great resource for Montana pediatricians to get their patients active and focused on a healthy lifestyle. Five cities in Montana have YMCA’s. Pediatricians in Butte refer most all 6<sup>th</sup> graders to the YMCA for their free membership. All the YMCA’s have afterschool daycares that offer activities until 5:30 when the parents pick up their children. The Billings YMCA offers an afterschool bootcamp from 3:30 to 5:30 for overweight children called “Fit Kids”. Periodically the parents are expected to meet for nutrition and parenting classes. The Bozeman

YMCA has a 12 week program called “Eat Live Play” for overweight kids and their families. Both of these programs are modeled after programs that are held at many children’s hospitals around the country. The programs are based on a “family systems” model of therapy whereby the family is treated as a whole. The obstacles to successful weight loss are the same in Billings as they are in Baton Rouge—not enough parents finish even the first half of the course, program enrollment numbers are too small to hold stimulating group sessions, cost of enrollment and limited grant moneys, lack of interest in follow up sessions. The benefits are also similar. Approximately 80% of kids that finish the program lose the recommended ½ to 1 pound per week during the intensive program. This success is slightly better than what Weight Watchers sees in adults. However, when follow up measurements are actually taken, too many of these kids revert to their old lifestyles.

Speaking of Weight Watchers, many of us are providing doctor’s notes for patients to have permission to participate in adult

Weight Watchers. The national office says they currently do not offer any kid-friendly meetings. They will accept kids age 12 to 16 with a physician’s note. Weight Watchers of course has meetings all over the state, so don’t hesitate to use them. I have recommended the website “MyFitnessPal.com” for teens as well. Check this out for yourselves, it keeps track of calories and exercise in a straight forward manner.

Another opportunity for overweight kids is Big Sky Fit Kids (sponsored by Big Sky State Games). There are two components to this. The first is a month long log of healthy habits used by many classrooms around the state. They record whether or not the kids eat breakfast, how many minutes of activity they have logged, and fruit and vegetable intake. The groups then are entered in to a lottery to win cash prizes. The other component of Fit Kids is a 6 week long after school activity class. These classes meet for 45 minutes twice a week with a teacher who leads fun games. Usually the school’s PE teacher applies for this grant and then is paid a stipend to lead the kids in fun games. This is a



### National AAP Opportunities

The AAP is looking for nominees for members for several national committees. These include committees on Child Abuse and Neglect, Child Health Financing, Coding and Nomenclature, Development, Infectious Disease, and Private Payer Advocacy Advisory. Please contact me if you are interested and I will help with the process on application as well as helping with a recommendation!! Sheila Idzerda [sidzerda@aol.com](mailto:sidzerda@aol.com)

PREP is looking for editors for both Adolescent Medicine and also Self Assessment and PREP ICU. Please let me know if you are interested in one of these opportunities Sheila Idzerda



. This is a great resource, but is only run in the spring. Barriers to this program have been time conflicts with other activities and lack of bus transportation home. If your school does not have a Fit Kids program and there is a teacher who would be willing to lead this, then contact Karen Sanford Gall at Big Sky State Games.

Wouldn't it be nice if we could rely on the schools to deliver our kids back home smart and fit? Kids should have a minimum of 45 minutes of aerobic activity daily, so one PE class per week is clearly lacking. Recess is not required in our curriculum either, and many school playgrounds are too small to accommodate large classes. Many are also covered in snow and ice for much of the year. In the winter, our kids have less than an hour to play outside in the cold before the sun goes down. Schools used to have more opportunity for exercise built in to the school day. Obesity rates in the US started creeping up in the 1970's around the time that expanded arts and language curriculum was becoming the norm.

These classes replaced PE for better and worse. An expanded school day that incorporates all these classes may be the answer. Clearly there is room for Since PE is not part of the common core as it is in other countries, some Montana schools have resorted to leading structured recesses. Along with BCBS, our clinic is studying the effect of structured recess in some schools on academic and physical fitness. Measuring success can be tricky without looking at BMI. I had the opportunity to testify at the Montana Legislature this year in favor of AGGREGATE and ANONYMOUS BMI collection in our schools. The bill failed. This was a missed opportunity to identify best practices that are already occurring in different areas of Montana, so be on the lookout for this bill in the future! If any of you have pearls that you would like to share, email them and we can share them in the next newsletter.

Claire Kenamore MD

[ckenamore@billingsclinic.org](mailto:ckenamore@billingsclinic.org)

**My thanks to Claire Kenamore, our guest writer for this newsletter. Claire is also the Montana representative to NANA – National Alliance for Nutrition and Activity. She is active in obesity prevention and has been an honoree from Mrs. Obama's Let's Move Initiative.**

## MEDICAL HOME PORTAL

We are fortunate that Dr Laura Nicholson and Dr Marian Kummer in Billings have been actively working on the Montana Medical Home Portal. This is a website which can be found at [www.medicalhomeportal.org](http://www.medicalhomeportal.org) which aims to provide access to reliable and useful information for professionals and families to help them care and advocate for children with special health care needs. This website offers current data about chronic medical conditions and helps identify resources for these children and their families. It is supported by a National Library of Medicine grant and so there is support to update this website and keep it current. Information for services in Billings and Bozeman have been updated, but we need further information from across the state. Please check out the website and then contact Laura or Marian to add your local information.

## New Survey On Autistic Spectrum Screening

The Utah Regional Leadership Education in Neurodevelopment and related Disabilities (URLEND) is conducting a survey of Montana pediatricians to see what our current practices and resources are in regard to Autism Screening. This will come to you via our email list in the next month and will be a survey monkey. I encourage all members to complete this survey. At present we need hard data about practices and resources to be able to form a plan for improving care for our children with Autistic Spectrum Disorders. During a recent grant proposal, our state lacked data to be able to even apply for the grant. Please look for this survey which is coming soon.