

CLINICAL CAPSULES

Define Staph in Neonates

Skin rashes occurred significantly more often among the confirmed and probable *Staphylococcus aureus* (SA) cases, compared with coagulase-negative staphylococci (CoNS) cases (20% vs. 4%) in a cohort of 191 neonates in intensive care, said C. Mary Healy, M.D., of Baylor College of Medicine, Houston, and her colleagues. Invasive staphylococcal disease remains a risk among preterm and very-low-birth-weight infants, but data on the clinical presentations of these infections are limited. Six of 41 infants with confirmed and prob-

able SA (14%) had significantly more bone and joint complications, compared with 2 of 108 (2%) with CoNS.

Recreational Ritalin on the Rise

Approximately 4% of a national sample of 8th, 10th, and 12th graders reported illicit use of methylphenidate (Ritalin) within the past year, said Sean Esteban McCabe, Ph.D., and his associates at the University of Michigan, Ann Arbor.

Based on data from the 2001 Monitoring the Future Survey, students in grades 10 (4.6%) and 12 (5%) were significantly

more likely to report illicit use than were 8th graders (2.7%).

Illegal methylphenidate use was significantly more common among students with grade point averages of C or D (6.4%), compared with those with a B average (3.9%) or A average (2.6%).

In addition, white students (4.8%) were significantly more likely to report illegal use than were black students (0.8%), which mirrored racial differences in prescription patterns (J. Adolesc. Health 2004;35:501-4).

Sleep-Disordered Breathing, Behavior

Children with mild to moderate sleep-disordered breathing demonstrated sig-

nificantly more problem behaviors, compared with controls in a cross-sectional study of 829 8- to 11-year-olds, said Carol L. Rosen, M.D., of Case Western Reserve University, Cleveland, and her associates.

The children were assessed with unattended in-home overnight cardiorespiratory recordings of airflow, respiratory effort, oximetry, and heart rate. Overall, children with sleep-disordered breathing were at least twice as likely to score in the borderline or clinically abnormal range on the Child Behavior Checklist (CBCL) externalizing and internalizing scales (Pediatrics 2004;114:1640-8).

The children with sleep-disordered breathing were significantly more likely to demonstrate hyperactivity, emotional lability, aggression, and opposition, compared with controls. Black ethnicity was a significant predictor for the CBCL total and social problem scales and a hyperactivity scale. The significantly higher odds of behavior problems in black children as a subgroup may be the result of a greater vulnerability to sleep disruption in this group, the researchers said.

Talk Therapy for IBD Depression

Adolescents with inflammatory bowel disease and either major or minor depression showed a significant reduction in depressive symptoms after 12 sessions of a manual-based cognitive-behavioral therapy program, reported Eva Szegedy, M.D., of Children's Hospital Boston and her associates.

In a pilot study, 11 adolescents aged 12-17 years participated. Seven patients had Crohn's disease and four had ulcerative colitis, with an average of 40 months' duration. Scores on the Children's Depression Inventory dropped from 16.18 before treatment to 4.82 after treatment. At baseline, all the teens reported depressed mood and anhedonia; ten reported sleep disturbance and fatigue (J. Am. Acad. Child Adolesc. Psychiatry 2004;43:1469-77).

Although illness severity remained the same, the adolescents' own perception of their physical functioning improved by the end of the study period.

EC Knowledge Doesn't Raise Risk

Knowledge of emergency contraception (EC) was not associated with increased sexual risk-taking according to a telephone survey of 1,158 adolescents aged 14-19 years in Monroe County, N.Y., Dr. Elizabeth Kelts of the University of Rochester (N.Y.) said at the annual meeting of the Association of Reproductive Health Professionals.

Teens were asked whether they were sexually active and, if so, when they became sexually active, and whether they knew of the "morning-after pill."

Overall, 73% of the teens reported awareness of EC, and 41% reported being sexually active. Sexually active teens who were aware of EC were significantly more likely to have used birth control during their last sexual encounter than were teens not familiar with EC (83% vs. 17%).

The average age of first sex for adolescents aware of EC was slightly older than for those who were not aware of EC (17.6 years vs. 16.7 years).

—From staff reports

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Educational Needs

The results of laboratory and clinical studies in recent years have changed our understanding of the nature of some STIs. Advances in techniques to diagnose and therapeutic methods to treat STIs have evolved rapidly as have standards of care. What has not changed is the adverse impact that many of these infections can have on the lives of women, their sexual partners, and, in many cases, their pregnancies. It is important that women's health specialists remain up to date on advances and current recommendations in the treatment of STIs.

Educational Objectives

At the conclusion of this meeting, participants will be able to:

- Discuss what is currently known about the etiology and diagnosis of lower genital tract infections, and how this information has effected changes in the treatment of trichomoniasis, candidiasis, and bacterial vaginosis.
- Explain the role of the women's health care provider in screening for and treating genital herpes, chlamydia, gonorrhea, and pelvic inflammatory disease.
- Articulate what is currently known about the nature, diagnosis, and treatment of human papillomavirus (HPV) infections, including vaccine development and the management of genital warts.
- Outline the management of STIs in special populations of women, including adolescents, pregnant women, and HIV-infected patients.
- Describe recent findings regarding urinary tract infections, Group B strep, and best practices for detection and treatment of pre-malignant lesions.

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