



Collaboration for Early Childhood

Strong Start, Bright Future

April
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CHILDREN AND PICKY EATING

Rebecca Barbato, MD

As a pediatrician, I am faced with picky eating every day. I can't even begin to tell you how many kids I see who won't eat fruits or veggies, only eat pasta, won't eat meat...and the list goes on. I feel like most of my advice about this issue comes from my own family and watching my own "picky eaters." Most of the time, I feel like my job is to reassure worried parents and try to create better eaters over time. Every once in a while, though, I do get worried about a child. For example, what if a picky eater stops gaining weight? Or what if he or she starts to develop some other developmental or social concerns? What do we do then?

The Physicians Network thought that it would be helpful to understand the science and culture behind picky eating and when one needs to worry. I am hoping that you will join us for our breakfast meeting sponsored by the Physicians Network. We are meeting at Maya del Sol on April 24th to hear Dr. Ruby Roy present: "The Science and Culture of Picky Eating: When to Worry and What to Do." Dr. Roy is Assistant Professor of Pediatrics, Section of Chronic Disease at the MacLean Center for Clinical Medical Ethics, The University of Chicago and La Rabida Children's Hospital. A Fellow, American Academy of Pediatrics, she lectures, publishes, and has received two recent recognitions: the National Committee on Quality Assurance Physician Recognition and *Chicago Magazine's* "Top Doctor Award" for Pediatric Chronic Disease. To register, please contact Karen Baldwin at the Collaboration for Early Childhood: 708-613-6122 or kbaldwin@collab4kids.org.

REFERRALS FOR EARLY INTERVENTION

If there is concern regarding the development of a child under the age of three, a referral (including name and birthdate of child, reason for referral, and family contact information) should be made to the local Child and Family Connections Office for Early Intervention services.

The Standardized Illinois Early Intervention Referral Form can be found on the Collaboration for Early Childhood's website at www.collab4kids.org under the Health Professionals or Developmental Screenings tabs.

Once the referral is made, a service coordinator will be assigned to each family through the Child and Family Connections office. The service coordinator will conduct an initial intake (typically in the family's home) and provide a list of area service providers who will be able to conduct eligibility determinations and assessments for Individualized Family Service Plan (IFSP) development. Once eligibility has been determined, either by an automatically qualifying diagnosis or evaluations demonstrating a greater than 30% delay in development, an IFSP will be developed based on the family's desired outcomes. Developmental therapy, nutrition, occupational therapy, physical therapy, social work, and speech/language therapy, along with 10 other services, are available through Early Intervention.

For West Suburban Cook County, the Child & Family Connections Office is at Suburban Access Inc., 4415 W. Harrison St., Suite 201, Hillside, IL 60162; 708-449-0625 or 888-KONTACT. Other Child & Family Connections Offices can be found in the Collaboration for Early Childhood's Developmental Referral and Services Directory.

SYMPTOMS & DIAGNOSTIC

CRITERIA OF ADHD

(per National Resource Center on AD/HD, a Program of CHADD)

The Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR), published by the American Psychiatric Association, is the guide that lays out the criteria to be used by doctors, mental health professionals, and other qualified clinicians when making a diagnosis of ADHD.

As with all DSM-IV diagnoses, it is essential first to rule out other conditions that may be the true cause of symptoms. The DSM-IV identifies three sub-types of ADHD, depending on the presence or absence of particular symptoms: Inattentive type, Hyperactive type, and Combined type. Because everyone shows signs of these behaviors at one time or another, the guidelines for determining whether a person has ADHD are very specific. To be diagnosed with ADHD, individuals must have six of the nine characteristics in either or both DSM-IV categories listed below. In children and teenagers, the symptoms must be more frequent or severe compared to other children the same age. In addition, the behaviors must create significant difficulty in at least two areas of life, such as home, social settings or school. Symptoms must be present for at least six months.

Criteria for the three primary subtypes are:

ADHD - Predominantly Inattentive Type

- Fails to give close attention to details or makes careless mistakes.
- Has difficulty sustaining attention.
- Does not appear to listen.
- Struggles to follow through on instructions.
- Has difficulty with organization.
- Avoids or dislikes tasks requiring sustained mental effort.
- Loses things.
- Is easily distracted.
- Is forgetful in daily activities.

ADHD - Predominantly Hyperactive/Impulsive Type

- Fidgets with hands or feet or squirms in chair.
- Has difficulty remaining seated.
- Runs about or climbs excessively.
- Difficulty engaging in activities quietly.
- Acts as if driven by a motor.
- Talks excessively.
- Blurts out answers before questions have been completed.
- Difficulty waiting or taking turns.
- Interrupts or intrudes upon others.

ADHD - Combined Type

- Individual meets both sets of inattention and hyperactive/impulsive criteria.

Our mission is to make sure that all children
(birth to age 5) in our local community
arrive at kindergarten safe, healthy,
and eager to learn.

www.collab4kids.org
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