

The number of young children who need mental healthcare is on the rise

When Marie, 11, called a suicide prevention hotline in October, nobody saw it coming. Not even Marie herself, who had been bottling up feelings of loneliness and sadness for months without telling anyone.

Her relationships with some of her closest friends had started to suffer when school went online last year, and she worried about losing other people in her life, too. What if they moved away? What if they died?

One weekday afternoon, she put on her headphones and listened to music while taking a walk, and she began to get increasingly upset. Even now, she isn't sure exactly why. "I knew that I needed help, but I didn't really know who to go to," she said. She searched for a suicide prevention hotline on her phone, and wondered momentarily whether the crisis counsellors would take her seriously. Then, she called.

With Marie's permission, a counsellor conferred in Marie's mother, Jackie, who was a 25-minute car ride away. They came up with a plan to keep Marie safe until Jackie could arrive. (Their surname and those of other families interviewed for this article are being withheld to protect their privacy. Marie is being identified by her middle name.) The next day, Marie told her mother that "in the past, not too long before that, she had brought scissors in her bedroom with the intention of hurting herself, but didn't know how to," Jackie said. "I was completely blindsided."

It wasn't as though Jackie was unaware of the mental health crisis affecting adolescents. She works as a nurse at two different paediatric intensive care units on the East Coast, where she has treated many children who attempted suicide in the past year. "Some of them we've asked, 'How did you get the idea to do this?'" Social media is their typical response, she said. "They don't grasp that if they hurt themselves, it might not be something we can fix, and they might not get better." Interviews with mental health providers and data from hospitals across the country reveal that while providers are continuing to see a surge in teenagers visiting the emergency room for mental health problems, the number of children in cri-



sis under the age of 13 is also on the rise, and has been for years.

The youngest patient under Jackie's care who had recently attempted suicide was eight years old. She survived, but another child, also under 13, was not as fortunate, and became an organ donor. Jackie said that most of the children who come in after suicide attempts are girls who have overdosed on pain medication, like Tylenol. Some of them now face liver damage. Once, after a particularly difficult day at work, Jackie called her husband and asked him to look up all the Tylenol and Motrin in their home.

'WE WILL SEE THIS CRISIS GROW.' Even before the pandemic, a mental health crisis was brewing among children struggling with bullying, abuse, eating disorders, racism or undiagnosed mental health conditions. But now, children are facing even more stressors, like the loss of a family member to Covid-19, adjusting to remote school or the anxiety of returning to in-person school. "It's almost like the pandemic threw gasoline on embers that were already

glowing," said Heather C. Huszti, chief psychologist at Children's Hospital of Orange County (CHOC) in Orange, California. "We've never seen it this bad." For young children, the pain can feel endless.

"It's like, 'This is my life now. Do I have anything to look forward to?'" Dr. Huszti said. "Because they just can't think long term." CHOC, where Dr. Huszti works, has the only inpatient psychiatric center in Orange County that can take children under 12. In order to be admitted to one of the center's 18 beds, a child must be a current or imminent threat to themselves or to others. When the center first opened in 2018, about 10 per cent of the children were under the age of 12. In 2020, that number began to increase, and now has more than doubled, Dr. Huszti said.

"We have some days where every kid in the unit is under 12," she said.

National data shows a similar pattern. In November, the Centres for Disease Control and Prevention (C.D.C.) published a study that compared how often children came to emergency rooms in the United

States for mental health reasons versus other types of concerns. The agency found that between April and October of 2020, there was a 24 per cent increase in the proportion of mental health emergency department visits for kids ages five to 11 compared with the same period in 2019.

'THE YOUNGER THE CHILD IS, THE LONGER THEY WAIT.' Children's hospitals, which typically have few (if any) available inpatient beds for mental health patients, have begun to run out of room. "The younger the child is, the longer they wait," Dr. Huszti said. "It just breaks my heart."

Some inpatient psychiatric units may not be able to admit kids under 12, she added, because they often require more one-on-one monitoring than older kids, as well as age-specific therapy. In April, 11-year-old Lu and her mother, Nicole (their middle names), had to wait in an emergency room in Ohio "all day and all night" because the hospital's 13 paediatric beds were full and two kids were in line ahead of her. They were eventually transferred to a behavioural health hospital nearby. Lu befriended other kids there who had their own mental health struggles, including some who were several years older. At one point, she saw someone get sedated and restrained.

"I was concerned," Nicole said. "She was exposed to so much there that I wouldn't want her to be exposed to." During the pandemic, Lu underwent "a really big personality change" that Nicole attributed to the "perfect storm" of isolation, hormones and genetics. (Nicole was diagnosed with depression and anxiety when she was in her early 20s.) Lu became immersed in social media, and appeared to be caught in an algorithm that kept showing her videos of sad kids, her mother said. "I had to actually explain that to her," Nicole said. "I was like, 'Hey did you know if I like a picture of a pair of tennis shoes, I'm going to probably keep seeing pictures of tennis shoes?'" And she looked at me, and she was like, 'Really?'"

A couple of months ago, Nicole had the sudden urge to check the text messages saved on her daughter's tablet. That was when she discovered that Lu had been planning on harming herself and had also written a goodbye letter. —CNA

Flu, colds increasing as Covid-19 restrictions are eased



Many health officials expect influenza and cold cases to increase this fall and winter as COVID-19 safety protocols are eased.

Experts note many symptoms for the flu and COVID-19 are similar, including fever and body aches. However, breathing difficulty is more common with COVID-19. Health officials say that if you're not feeling well, you should isolate, hydrate, and get tested.

Seasonal influenza cases were rare last winter and experts credit COVID-19-related physical and social distancing and mask-wearing for keeping rates low. With COVID-19 restrictions easing, however, the flu is expected to make a comeback. That could make it harder to tell whether that irritating cough, congestion, or fever is only a cold, the flu, or something worse.

"Droplets spread viruses like the

flu, COVID-19, or things like RSV (respiratory syncytial virus) in the air," Dr. Phil Mitchell, an emergency room physician and chief medical officer at DispatchHealth, told Healthline. "The steps we took to avoid the spread of COVID-19 with masks, social distancing, good hand hygiene is universal prevention for all respiratory viruses.

Because we practiced unprecedented levels of protection, resulting in almost no flu, some health experts speculate we lack some natural immunity, and flu may come back this fall with a vengeance." During the 2019-2020 influenza season, an estimated 38 million people Trusted Source in the United States became ill with the flu, according to the Centers for Disease Control and Prevention (CDC).

Between September 27, 2020, and April 24, 2021 — a span that included the peak of the COVID-

19 pandemic — only 2,038 flu cases were reported to the CDC. But some research suggests that diseases such as the flu are poised to return in 2021-2022. For example, the CDC recently reported that cases of RSV, which declined sharply after April 2020, are climbing back up again in the southern United States, where COVID-19 precautions have largely been lifted.

RSV is the most common cause of bronchitis and pneumonia among infants and is especially dangerous among young children and older adults.

"After a worldwide drop in influenza cases and the lowest rate on record in the United States during the pandemic, we should all expect to see more flu in the coming fall and winter," Dr. David Cutler, a family medicine physician at Providence Saint John's Health Center in Santa Monica, California, told Healthline. —Agencies

Nutrition and heart health: The latest review

A new literature review suggests refined dietary guidelines for the prevention of cardiovascular disease (CVD). The paper emphasizes pleasure, education, and sustainability as key factors in long-term dietary success.

It is worth noting that funding sources and author affiliations present conflicts of interest.

In a recent article, researchers explored the findings of past studies into heart-healthy eating. Using keyword searches of PubMed, a database of biomedical articles, the authors sought to extract high-level insights from existing research. They present their conclusions in a new article in the European Society of Cardiology's journal Cardiovascular Research.

Before we outline the findings, it is important to mention that the authors disclose conflicts of interest. They explain that funding came from the Barilla Center for Food & Nutrition, a think tank created by pasta giant Barilla.

This organization endorses the Mediterranean diet — an endorsement shared by the research team. While a person's diet isn't the only factor influencing CVD, it is the single most significant contributor, the researchers observe. "Food choices are the most important factors undermining health and well-being, accounting for as much as almost 50% of all CVD deaths," they note in their paper.

"Other lifestyle-related factors, such as smoking and low physical activity, as well as the individual's genetic background, can modify [cardiovascular] risk and may also modulate the impact of diet on atherosclerosis; however, to review

the role of these factors remains beyond the scope of this article." Atherosclerosis is a buildup of fatty plaques on the walls of arteries. Over time, as the plaques accumulate, they narrow the blood vessels. Atherosclerosis is the underlying cause of around 50% Trusted Source of all deaths in Westernized nations.

The current research is part of a broader effort toward a revamped food pyramid to prevent CVD. Some of the paper's conclusions align with typical dietary advice. For instance, the researchers found that consuming more plant-based foods and avoiding refined cereals and starchy foods can lead to better heart health than consuming predominantly animal-based foods. But the paper also drew some less obvious conclusions. —Agencies



'Increased risk' of rare nerve disorder after J&J vaccine: US



WASHINGTON: The US Food and Drug Administration updated its warning labels for the Johnson & Johnson Covid-19 vaccine to include information about an observed "increased risk" of a rare neurological disorder called Guillain-Barre Syndrome (GBS).

The news is a further blow for the company, which was granted an emergency use authorization for its shot in February but has played a minor role in America's coronavirus immunization campaign. Based on analysis of a federal vaccine safety monitoring system, officials have identified 100 preliminary reports of GBS after approximately 12.5 million doses administered, people familiar with the matter said.

Of these reports, 95 of them were serious and required hospitalization. There was one reported death. GBS is a neurological disorder in which the body's immune system damages nerve cells, causing muscle weakness or, in the most severe cases, paralysis. It af-

fects an estimated 3,000 to 6,000 people each year in the United States, and most go on to recover.

The new warning label for caregivers and recipients says in most people, symptoms began within 42 days of receiving the vaccine, and "the chance of having this occur is very low." People should seek medical attention right away if they experience weakness or tingling sensations, especially in the legs or arms, that worsen or spread to other parts of the body. Difficulty walking, difficulty with facial movements including speaking, chewing or swallowing, double vision or an inability to move the eyes, and loss of bladder or bowel function are also reasons to seek urgent care.

While the FDA continues to work with the Centers for Disease Control and Prevention (CDC) in vaccine safety surveillance, it "continues to find the known and potential benefits clearly outweigh the known and potential risks," sources said. GBS has also been

observed at an increased rate with certain vaccines, including some seasonal influenza vaccines and a vaccine to prevent shingles.

But so far, no similar signal has been identified with the Moderna and Pfizer-BioNTech Covid-19 vaccines. The J&J vaccine has suffered major production issues, and a Baltimore plant responsible for its manufacture has been shut for three months based on contamination issues. The shot was also subject to a safety pause in April after a heightened risk was identified involving a rare form of clotting, mostly in younger women. The pause was lifted after it was determined that the danger was remote and the benefits still greatly outweighed the risks, but the episode left a lasting drop in demand. The news comes as demand for Covid vaccines in the United States continues to decrease, with only around 430,000 shots being administered a day. The peak seven-day-average was around 3.5 million, back in April. —AFP