

PEDIATRIC ASSOCIATES OF SPRINGFIELD, INC

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SUN AND BUG PROTECTION

SUNSCREEN: Exposure to sunlight is necessary for vitamin D production and subsequent bone and immune system health. However, the sun quickly damages unprotected skin. Protection involves limiting exposure to direct sunlight; using hats, sunglasses and protective clothing and regular use of sunscreens. The most recent information from the FDA suggests using **SPF 30 sunscreen generously and re-applying it every 2 hours**. Tear-proof can be helpful since it is easy to get sunscreen in the eyes. Spray-on sunscreens are not recommended. Many sunscreens now have expiration dates on the packaging. If your favorite brand does not, please buy fresh sunscreen every spring and dispose of all the old bottles and tubes.

If sunburn happens despite your best efforts, aloe vera gel, Sarna lotion (not around the eyes or genitals) and ibuprofen can relieve mild symptoms. If sunburn is severe or involves the eyes, please call the office. A dosage chart for ibuprofen is included under the Parent Resources tab of this website.

Infants may have trouble cooling their bodies so their time in the sun should be limited, especially if the temperature is over 85 degrees. Do not leave infants or children alone in a vehicle under any weather conditions.

INSECT REPELLENTS: Insect protection is necessary to avoid diseases transmitted by tick and mosquito bites. Although people are often concerned about Lyme disease, it is quite uncommon in Missouri. Other tick diseases (such as Ehrlichiosis, Tularemia and Rocky Mountain Spotted Fever) are very common here though and mosquito diseases (such as Zika, Dengue, and malaria) are increasing in frequency. These infections can be life-threatening.

The best way to prevent mosquito bites is to avoid being outside in the early morning and late evening when mosquitoes are most active. Wearing long pants and long-sleeved tops is helpful. Netting can help protect babies who are not yet mobile. **Picaridin** is a non-toxic repellent recommended by the CDC if your only concern is mosquitoes. The higher the strength, the longer the product will last. For example, the 5-7% concentration will last 1-2

hours. Higher percentage herbal products such as eucalyptus oil and citronella are effective but can irritate the skin.

Tick bites can be minimized by wearing longer clothing, tucking pant cuffs into socks and shirt hems into waistbands, and using repellents. **We suggest checking for attached ticks TWICE a day EVERY day from March to October.** Infection risk is higher if a tick has been attached to skin more than 12 hours. If you find a tick on your child, remove it gently with tweezers. Do not handle the tick with your fingers. If the head breaks off in the skin, apply antibiotic cream three times a day and the tick head will come out on its own.

DEET (N,N-diethyl-meta-toluamide) is the most effective repellent for both ticks and mosquitoes. The 5-7% concentration lasts about 1 hour, 10% about 4 hours and 25% about 10 hours. Do not use preparations higher than 30% on the skin. This product is approved for children over 2 months of age.

Reducing your child's exposure to DEET is prudent. We recommend spraying clothing before putting it on your child; not applying DEET under clothes; applying it to a small child's skin with your hands rather than by direct spray and not applying it near a young child's eyes, mouth, nose, hands or broken skin. When your child comes indoors, remove clothing with insecticide on it and bathe your child.

Do not use combination sunscreen and insect repellent products as re-application times may vary between the two products.