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FAMILY MATTERS

## PARENTING WITH LISA SALMON



# Childhood illnesses on the increase

A NUMBER of childhood illnesses are on the rise in the UK. Why? According to a paediatrician and a university medical anthropology professor who have co-written a new book *What's Making Our Children Sick?*, the "epidemic" increase in chronic, hard-to-diagnose childhood health problems - ranging from allergies and asthma to autism and ADHD - can be attributed to "the cumulative outcome of being born into and living in an environment that has been made toxic by agrochemical industrialised food production".

The authors, Dr Michelle Perro and Professor Vincanne Adams, claim that unless children are eating 100 per cent organic food or home-grown vegetables, they are eating "toxic ingredients" like pesticides, hormones and antibiotics that are harmful to their health.

A broad spectrum of childhood illnesses can be tied to exposure to food and environment, say Perro and Adams. The illnesses include basic digestive disorders from reflux and constipation to colitis, immune disorders such as allergies and asthma, and neurocognitive disorders such as autism, ADHD and various mood disorders. Obesity, diabetes and other endocrine issues can also be related to the food supply and exposure to environmental endocrine disruptors, they say.

"There are other concerns that are not as well-publicised but are equally troublesome, such as sleep disorders and fatigue. Many kids just don't feel well," says Perro, a former director of the Paediatric Emergency Department at New York's Metropolitan Hospital.

Certainly, a number of these health problems have become increasingly prevalent in UK children - Allergy UK says the percentage of children with allergic conditions has risen dramatically. Childhood cases of eczema and allergic rhinitis (hayfever) have both trebled over the last 30 years, and the prevalence of children with peanut allergy in western nations has doubled in just ten years. In addition, in the five years up to 2012 the number of children classed as being autistic in the UK rose by more than half.

Although many factors are linked to chronic illnesses in children, Perro and Adams focus on what they say is one of the biggest causes: industrialised food. They say over the past 20 years there have been significant changes in the food supply, and weed and insect resistance has led to "alarming" increases in the amount of pesticides in food. The most significant increase, they say, has been in the use of glyphosate-based herbicides and ever more toxic formulations of new pesticides.

"Foods once considered 'healthy' are now potentially full of toxicants that are causing systemic issues in our children's guts," explains Adams.

# AUSSIE FLU ... WHAT YOU SHOULD KNOW

## HEALTH

With Dr Zak Uddin



WITH reports of the NHS in crisis, five hour waits in A&E and "a killer virus from Australia hitting our shores", you might not be blamed for thinking that we are on the brink of an apocalypse and now might just be the time to retreat to the safety of an underground bunker.

In the last few weeks, the number of hospital admissions with flu has tripled, and sadly there have been more than 140 deaths reported so far.

The strain, H3N2, has been dubbed "Aussie flu" as it is similar to that which hit Australia six months ago during their winter season.

However, H3N2 itself is not new; it is that which caused the 1968 outbreak in Hong Kong, and has been circulating ever since. Indeed the same strain was implicated in last year's flu outbreak.

For the majority of people the effects of flu are simple and thankfully short-lived.

Symptoms are those of any viral infection, with raised temperature, sore throat, cough and muscle aches and pains. Sometimes vomiting and diarrhoea are part of the picture. However, in the majority of fit and healthy individuals, the illness will resolve of its own accord, in around seven to ten days, although you may feel very ill during this time, and it would not be unusual for most of that to be spent in bed recuperating.

The concern is more for those at the extremes of age, or with underlying illnesses that make



NOT TO BE SNEEZED AT: Australian flu has been rife this winter

Picture: PA Photo/thinkstockphotos

them more susceptible to complications which can range from pneumonia through to meningitis.

Although aspects of healthcare including sanitation and vaccination have improved in the past 100 years, living longer means we have a larger elderly population who are more at risk. Equally poor lifestyle choices and the rise of obesity with all its associated comorbidities results in a group of individuals who are more likely to suffer complications of otherwise simple illnesses.

Public Health England and the Royal College of General Practitioners are united in their simple, concise advice.

Despite being in the midst of the flu season, if you are without symptoms, eligible and have not yet had the jab; aim to get immunised now.

The current UK vaccine was developed in March of this year, Australia's winter season, as soon as the virus was identified.

Although H3N2 has mutated to some degree since then, the vaccine is still effective against 40 to 60 per cent of cases and if you

are still unlucky enough to succumb to it, hopefully your symptoms will be milder and shorter lived.

As always, remember the basics; catch any sneeze in a tissue, dispose of it and then wash your hands.

This simple message has been made into the NHS "Catch it, Kill it, Bin it" campaign.

If your symptoms last more than seven to ten days and you aren't showing signs of improvement, please consult a medical professional to assess your individual case.

## Ask Dr Zak - your questions answered

**Q:** I am really keen to go on a statin. My cholesterol is 6, but my doctor said my risk of a heart attack or stroke is not high enough to need medication - Alex, 47

**A:** Your "Q risk" is the risk of heart attack or stroke in the next ten years and is worked out as a percentage.

We used to treat people with medication when the risk was greater than 20 per cent, this has now been reduced to 10 per cent. Your risk is worked out not only from your cholesterol figure, but also other factors including Body Mass Index (BMI), blood pressure

and whether you smoke. While I would advise you to be on a medication if your risk was above 10 per cent and had not dropped with diet and exercise, being on a medication lifelong, without clear reason would not be advisable.

**Q:** I'm worried my three-year-old son, Charlie, may have autism. He only has a few words and often seems to be in a world of his own. I'm worried because nursery have noticed these things too - Charlotte

**A:** Autism is a developmental disorder present from birth, although it is often not noticed

until the child is three or older. There are usually problems with language skills and social interaction.

However, not all children with these necessarily have autism, some being slower to develop than others.

If a concern has been raised by nursery, it would be wise to have a review with your routine GP. He or she will observe Charlie and advise you.

Diagnosis nowadays is made by a specialist with an interest in autism, and if this is the case, you will be supported along the way.

●If you have a question for Dr Zak, please email: askdoctorzak@gmail.com  
W: doctorzak.co.uk  
T: @AskDoctorZak

Dr Uddin's advice is provided in good faith and in accordance with currently accepted evidence. However, this content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. You should always seek the advice of a GP, or other qualified health provider, regarding a medical condition.