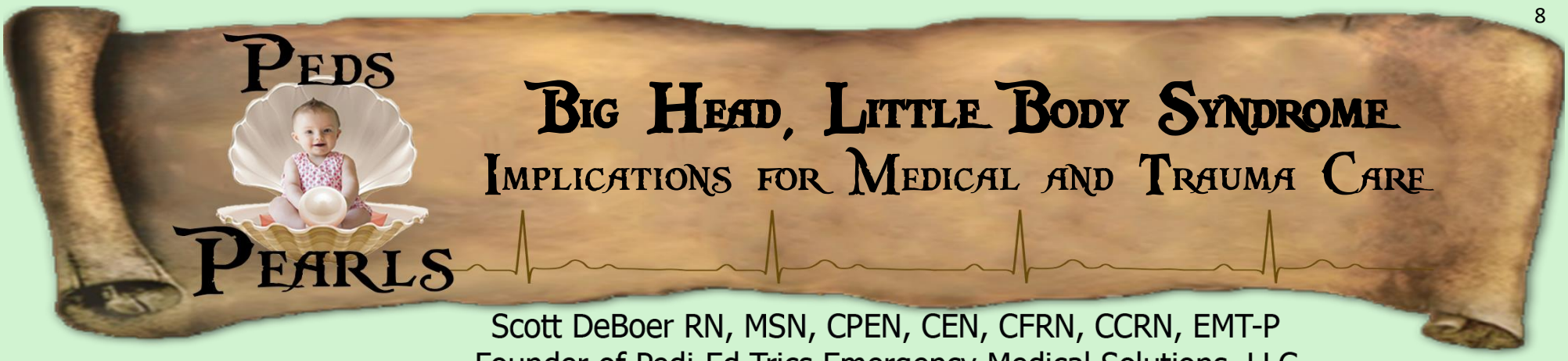


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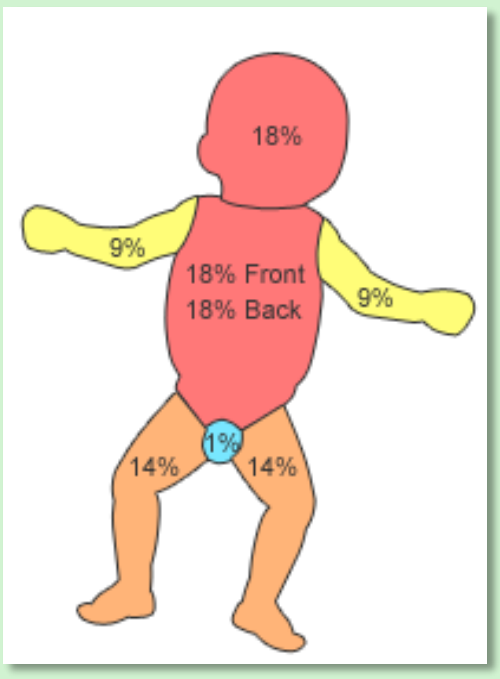
In real estate, the key to success is location, location, location. With little kids, the key to success in many cases is head size, head size, head size. Little kids, especially those under the age of two, have a medical phenomenon often referred to as "Big Head, Little Body Syndrome." Their bigger head size makes a big difference, especially in situations related to airway management, trauma, burns, and drowning.

Airway: Think about placing one-year-olds with a big ol' heads (imagine Charlie Brown) flat on a spine board or sedated for a CT scan. What does their big heads do to their airways? It shoves their chins onto their chests, kinks off that flexible little kid trachea, and then, unsurprisingly, they tend not to breathe very well. Simply putting a diaper or towel under their shoulders or placing little ones under three months of age in the "Peanut" papoose (www.ossur.com) goes a long way to offset “Big Head, Little Body Syndrome” and improve airway patency.



Trauma: The purpose of spinal immobilization/restriction is to help maintain the spine in proper position. But, if the child's chin is on their chest and the cervical spine X-ray looks like a "U," that defeats the purpose of immobilization. As with the airway management suggestion above, a little padding under the shoulders, peanut papoose, or pediatric spine board goes a long way (and is often crucial) for maintaining proper trauma positioning.

Drowning: Little ones are curious creatures who, when not under general anesthesia, seem to be in perpetual motion. And unlike horses, kids don't need to be led to water. They find it on their own just fine. So, when you combine that perpetual motion with any sort of body of water (from bucket or bathtub to lake or ocean), they tend to fall in. And when they fall in, how do they fall? Head first, of course. Why? Physics says – heaviest part first, so, the culprit again is - Big Head, Little Body Syndrome.



Burns: The Rule of 9's teaches us that there are two kinds of body parts: Little parts (9%) and big parts (twice that amount – 18%). In adults, “little parts” include the head and get counted as 9% of the body surface area. However, when we remember that little children have “Big Heads,” they get the “big part” percentage, or 18% for their big ol' head.



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Moral of the story

In little kids who look like little kids (under 2-years-old), whether for medical or traumatic emergencies, you must remember the implications of Big Head, Little Body Syndrome!

Pedi-Ed-Trics™
Emergency Medical Solutions, LLC



Peds Pearls™ is a registered trademark of Pedi-Ed-Trics Emergency Medical Solutions, LLC and is intended to provide accurate pediatric emergency Tips, Tricks, and Treasures for emergency medical professionals when caring for critically ill or injured children. However, always follow your medical director's specific protocols.

Contact us to have Scott DeBoer or one of our other pediatric experts present at your next conference.

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