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**Subject:** FW: EMs for children

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From: Anthony Smith  
Sent: 31 May 2007 06:36  
To: Hill, Suzanne  
Subject: EMs for children

Dear Sue,

I've looked at this draft list several times and feel that I have little to contribute as I do not work in the field. However, there are a few comments as below:--

P.4 What do your paediatricians think about listing acetylsalicylic acid for use by under 5's?. Still's disease tends to have a later onset and that could obviate the problem of Reye's syndrome?

P.6 Chlorpheniramine, I think.

P.10 will cloxacillin be given a suggested restriction to suspected resistant staph infection?

-lower on the same page --cilastin not cilastatin.

P 11. nitrofurantoin--increasingly indicated for resistant E.coli infections both in developed/developing countries. India in particular has seen gross overuse of the quinolones with resulting widespread resistance. UTI in children (girls in particular of course ) may well be the principal indication.

Trimethoprim ,for the same reason, should still be on the list even though resistance is beginning to occur.

P 18 T.cruzii infection in South America has been really difficult to treat but there are fresh initiatives --possibly too early for the EM list yet but worth checking as the note says.

P 25. Is there a place for adenosine in the management of supra-ventricular arrhythmias in kids?. We are giving it prominence for adults in the current revision of the CV guidelines in Australia but I'm not sure how useful/safe it is in children.

P 26 .I would not have thought the evidence really supports the use of furosemide as a regular antihypertensive.The studies I know are primarily in adults where there is value in some acute and treatment-resistant forms and in hypertension accompanying renal impairment where the blood pressure is usually very volume dependent.

P 30 Mannitol, while certainly diuretic, usually finds its principal place in the acute management of raised intra-cranial pressure.It certainly should not be considered alongside thiazides and loop diuretics.

Sorry I have so little to contribute. Cheers--Tony

Emeritus Professor Anthony J Smith  
Clinical Pharmacology,  
Level 5, Clinical Sciences Building,  
Newcastle Mater Hospital,  
Waratah,NSW 2298  
Ph: (02)-49211857/6  
Fax:(02)-49602088