Overweight kids overdosed

THERE is significant confusion amongst pharmacists surrounding the appropriate dose of paracetamol that should be given to overweight and obese children, according to a new study.

Published in the European Journal of Hospital Pharmacy the Perceived and actual paracetamol dosing in overweight and obese children study looked at 28 community pharmacists to see what dose of paracetamol they thought should be given to an eight year old child, weighing 25, 32 or 50kgs.

The researchers, hailing from the University of South Australia, also observed doses of paracetamol given to 86 children, one in three of whom was overweight/obese, in the emergency care department of a specialist children’s hospital. According to the researchers, the recommended paracetamol dose per day for children weighing up to 60kgs (or 90kgs if under medical supervision) is between 15 and 20 mg/kg every 4 to 6 hours, whilst for children who are more than 120% above their ideal body weight, experts say this dose should be reduced.

“But it is unclear whether children should be dosed according to their ideal, rather than their actual, body weight,” the authors said.

Interestingly, when posed with the dosing question, the majority of community pharmacists stated the correct doses for children who weighed 25 and 32kgs, however when it came to 50kgs, responses varied greatly, with pharmacists recommending a twofold variation in dose.

When the doses were corrected according to actual and ideal body weight, one in four pharmacists underdosed the children in the overweight category.

Looking at the children in the emergency departments the researchers found that only a few children were given doses above 20 mg/kg when corrected for a child’s actual body weight, however they also discovered that the further a child was above their ideal body weight, the higher the dose of paracetamol they were given.

This dosing trend flies in the face of current expert opinion that paracetamol doses be tapered down in overweight children.

“Simple evidence based dosing guidelines must be developed and communicated to practitioners to reduce the potential for confusion, which may lead to adverse consequences for these children,” the researchers said.

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Social status and health

Australians from the lowest income households are less likely to report having excellent or very good health than adults from high-income households, according to the latest Australian Institute of Health and Welfare. The survey looked at social factors (as found in the 2007-08 National Health Survey) such as post-school qualifications, equilvalised household income, occupation category, remoteness, language spoken at home, sex, and age, to investigate the association between selected social factors and health status. Findings in the report included the fact that people having a bachelor degree or higher qualification were less likely to report smoking and risky alcohol consumption than those without this level of education; whilst managers/professionals were less likely to smoke but more likely to engage in risky alcohol consumption than people who were unemployed or not in the labour force.

Interestingly, researchers found that there was little significant effect of geographical location for any of the health status or health risk factor variables, except for unhealthy body weight. People living in inner regional areas, according to researchers, were more likely to report excellent or very good health status than people living in major cities, whilst those outside of major cities were more likely to report unhealthy body weight than people living in major cities.

Meanwhile in terms of language spoken at home, those who spoke English had a higher prevalence of heart, stroke and vascular diseases; Type 2 diabetes; smoking; risky alcohol consumption; and unhealthy body weight than males.
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