

OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Joseph Baker

Baby Gear and Your Child's Spinal Health

Babies come into this world wearing only their Birthday suits. But these tiny beings rapidly accumulate a large amount of stuff. As any parent knows, it doesn't take long before the house is filled with diapers, toys, clothes — and baby gear!

Unfortunately, some baby gear can actually endanger a child's health. Dr. Baker notes that many items can negatively affect a child's spinal wellness. That's why Dr. Baker urges parents to educate themselves about the pros and the pitfalls of baby gear.



Baby Steps ...

Baby walkers *don't* help children learn to walk. In fact, scientific research reveals that they can delay motor and mental development (*Pediatrics* 2001;108:790-2).

Baby walkers also jeopardize spinal development by forcing children to assume erect postures before they attain the necessary bone strength and muscle coordination. This can spark misalignment of the spinal bones (vertebrae), a condition known as **vertebral subluxation**.

Linked to an array of disorders, vertebral subluxations are a suspected cause of childhood ear infections and colic. Without proper care, these misalignments can lead to a lifetime of maladies. That's why regular chiropractic care — starting at birth — is so vital.

Dr. Baker uses gentle maneuvers known as **chiropractic adjustments** to restore the spine to perfect balance. Chiropractic adjustments are so safe that chiropractors routinely perform them on newborns to counteract the spinal trauma associated with the birth process.

...And Baby Falls

Studies show that baby walkers are also a leading cause of falls. Case in point: The number of baby-walker injuries treated in U.S. hospital emergency rooms averaged nearly 25,000 per year throughout the early 1990s. Approximately 80 percent of those injuries were related to falling down stairs (*J Safety Res* 2005;36:327-32).

In Greece, it's estimated that 4,400 infants suffer fall-related injuries each year. These falls are equally attributed to baby walkers, bouncy chairs and strollers. "Falls are a common cause of serious infant injuries and nursery equipment is frequently involved in the injury-causing event." (*Arch Pediatr Adolesc Med* 2004;158:1002-6.)

Safety Regulations No Guarantee

Regulations drafted in 1997 by the Consumer Product Safety Commission (CPSC) have reduced the number of baby-walker accidents. But Dr. Baker wants patients to be aware that these

regulations remain voluntary.

To comply with the regulations, walkers manufactured after June 30, 1997 must be wider than a 36-inch doorway or must have a braking mechanism designed to stop the walker if one or more wheels drop off the riding surface: such as at the top of a stairway (*Pediatrics* 2001;108:790-2).

In the late 1980s, Canada's Juvenile Products Manufacturers Association convinced large retailers and the makers of baby products to voluntarily ban the sale of baby walkers. Unfortunately, when the organization disbanded, so did the ban. "In spite of the massive effort to discourage their sale and use, the Canadian Paediatric Society notes that "baby walkers continue to be used by some Canadian families and injuries continue to occur."

High Chairs

According to CPSC data, there were 40,650 high-chair related injuries in the United States alone between 1994 and 1998. The average age at the time of injury was 10 months, and *the primary reason was linked to children being unrestrained while in their high chairs.*



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“Most injuries involved the head (44 percent) or face (39 percent). Injury diagnoses included contusions or abrasions, lacerations, closed head injury, and fractures. Two percent of the injured children, an estimated 941, were admitted to the hospital during the study period.” (*Ambul Pediatr* 2002;2:276-8.)

Injuries to the head can spark misalignment of the spine of the neck (cervical vertebrae) and have far-reaching ramifications. When using a high chair, make sure your child is properly restrained at all times. If the manufacturer’s restraints are no longer attached, don’t use the chair.

And never leave a child unattended in a high chair. Toddlers, when they become restless, can rock a high chair and tip it over.

Strollers

Although most parents consider their strollers a safe haven for baby, they can actually be dangerous. There were a shocking 64,373 stroller-related injuries between 1994 and 1998 (*Pediatrics* 2002;110:62). The majority of the children were unrestrained.

Of these injuries, 76 percent were due to falling from the stroller. And, as with high chairs, most injuries involved the head or face. To prevent stroller-related injuries, take care to always properly restrain youngsters in strollers.

Bouncy Chairs

A child doesn’t have to fall from a great height to sustain a life-threatening head injury, according to researchers in Wales. They cited the case of an infant whose head was only two feet from the floor when he landed on a thick carpet. The bouncing of the seat “increased the momentum of the head before it struck the ground and so the injury was more severe than a straightforward fall back from his own height to the ground.” (*Pediatr Emerg Care* 1996;12:432-4.)

In reviewing the cases of 11 bouncy-chair related falls, researchers in the United Kingdom noted that “100 per-

cent were caused by a fall from a surface with the baby in the chair.” (*Arch Dis Child* 2002;86:168-9.)

Bouncing also stresses the spine. Infants without proper back support risk fracturing delicate spinal bones (vertebrae). Fractures may compress the spinal cord and reduce its blood flow.

Again, prevention is the key if you opt to use a bouncy chair. The best place for a bouncy chair is on the floor. And, as with high chairs, never leave a child unattended or improperly restrained. However, like baby walkers, it is best to avoid bouncy chairs altogether.

Rocking Cradles

When researchers examined every brand of commercially available rocking cradle in South Australia, the results were alarming. The study included videotaping 11 healthy infants in rocking cradles to examine how they moved and how they reacted in different positions.

Many cradles had unsecured locking pins. And infants in cradles tilted ten degrees, face down with the side of their face against the bars — and an arm trapped between the body and bars or through the bars — were unable to obtain clear airways on their own (*J Paediatr Child Health* 1995;31:38-40).

To minimize the likelihood of injury, researchers suggested the following:

- Infants should never be left unattended in freely rocking cradles.
- Locking pins should be bolted into place.
- Cradles should not be allowed to tilt greater than five degrees.

Pacifiers

Researchers in Brazil recently noted that pacifier use can inhibit a child’s swallowing reflex and spark a condition known as TMD: temporomandibular dysfunction (*Int J Paediatr Dent* 2005;15:29-36).

Symptoms of TMD include headache and earache. Instead of relying on antibiotics and ear tubes — both of which merely address symptoms — doctors of chiropractic focus on the origins of TMD and use safe and gentle maneuvers to alleviate the condition.

According to the Canadian Paediatric Society, prolonged pacifier use is also linked to misalignment of the jaw, gum disease and other dental problems. “A recent study showed significant differences in dental arch and occlusion characteristics in users at 24 months and 36 months of age compared with those that had stopped sucking by 12 months of age.” Another study looked at children aged 2 to 5 years and also found significant increases in openbite and posterior crossbite in pacifier users (*Paediatrics & Child Health* 2003;8:515-19).

Misalignment of the jaw creates a domino effect that can spark not only TMD, but also result in vertebral subluxations affecting the cervical spine.

Talk With Your Doctor

Purchasing baby gear isn’t just fun and games. It requires shoppers to educate themselves on the cons as well as the pros of everything they purchase.

Work to prevent baby-gear related injuries by using the information contained in this issue of the **Optimal Health University**[®] handout. And never hesitate to ask your doctor’s opinion or bring an item you have questions about to your next appointment.

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