

EDITOR'S FOCUS



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EARLY CAREER INVESTIGATOR



Congratulations to Erlinda Ulloa, the Early Career Investigator for November 2021. She is a pediatrician and associate professor at the University of California Irvine School of Medicine and the Children's Hospital of Orange County, California. Her interest in global health led her not only to Argentina on Fullbright and Fogarty fellowships to conduct research but also to Kenya as a Hubert Global Health Fellow with the Centers for Disease Control and Prevention. In addition, she obtained an MS in microbiology and immunology from Stanford University. Inspired by her grandmother, and driven by the urgent need to improve antimicrobial treatment strategies, her research focus is on novel strategies to treat drug-resistant pathogens. This focus has expanded to SARS-CoV-2 in children. In a study of schoolchildren reported in this issue, Ulloa and colleagues observed low rates of SARS-CoV-2 infections, without differences between schools with predominantly remote learning compared with on-site learning. Mitigation compliance was high in this diverse range of schools. Seropositive children generated evident humoral and cellular immunity. Also in this issue, in a Special Article, she and co-workers elaborate on the key challenges and knowledge gaps with regard to SARS-CoV-2 vaccinations in children. See pages 924, 1073, and 966

NEONATAL BLOOD CULTURE INOCULANT VOLUME



Woodford et al. performed a single-center prospective study in a 50-bed, level 3 neonatal intensive care unit measuring inoculant blood volume for blood cultures in admitted neonates. Clinicians reported at least 1 milliliter total inoculant in 97% of evaluations. Among evaluations in which bottles were weighed, 93% contained at least 1 milliliter total inoculant. Monitoring of inoculant volume revealed areas of improvement for the culture technique.

A related Comment by Sundararajan emphasizes the challenge of obtaining adequate blood volume in the smallest individuals admitted to the hospital. See pages 1086 and 930

EFFECTS OF A LOW-GLYCEMIC-INDEX DIET ON PLASMA ADIPOKINES IN OBESE CHILDREN



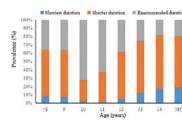
Visutranukul et al. analyzed several adipokines in a secondary analysis of a randomized controlled trial investigating the effects of a low glycemic index diet (GID) compared with a conventional diet (CD) in obese children. No differences were observed in adipokine levels between the intervention and control groups either at baseline or after the 6-month trial period. However, higher baseline leptin levels were associated with lower changes in fat mass index. Leptin levels may be a predictor of fat loss success. As part of the Science for Kids project, Mohan and Ward created a poster and slideshow to explain this study. See pages 1009 and 1096

BENIGN PAROXYSMAL TORTICOLLIS



Greene et al. describe a cohort of 73 children with ongoing (52%) or resolved (48%) benign paroxysmal torticollis (BPT). In telephone interviews with parents and caregivers of the children, ataxia, irritability, vomiting, and pallor were the most frequently reported symptoms accompanying head-tilt episodes. BPT influenced quality of life in the majority of children. See page 1044

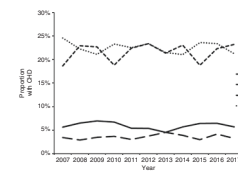
SLEEP, WEIGHT STATUS, AND WEIGHT-RELATED BEHAVIORS



Ma et al. describe the results of a longitudinal study of sleep among children aged 6–17 years in five large

Chinese cities. Younger age and higher paternal education were associated with longer sleep duration. Longer sleep was associated with healthier weight-related behavior, shorter periods of screen and computer time, and lower central obesity risk. The findings suggest that influencing sleep duration can change weight-related behavior and prevent childhood obesity. See page 971

IMPACT OF PRENATAL SCREENING ON CHDs IN NEONATES WITH DOWN SYNDROME



Hart et al. studied the proportion of several types of congenital heart defects (CHDs) in a large nationwide cohort of newborns with Down syndrome. They hypothesized that the implementation of noninvasive prenatal screening (NIPS) may have led to changes in rates of CHDs in liveborn children. However, data from the Pediatric Health Information System showed no difference in the proportions of types of CHD before and after implementation of NIPS. Also in this issue, two sets of parents describe their experience with their daughters with Down syndrome and make a plea for research into less invasive cardiac repair procedures as well as into life expectancy and outcomes of patients with the syndrome. See pages 1081, 1098, and 1099

THE EVOLVING SCIENCE OF FLUORIDE



In the first article of its type published in *Pediatric Research*, Till and Green tackle the issue of whether fluoride is safe. They discuss four well-conducted studies linking fluoride use during pregnancy to adverse neurodevelopmental effects. In noting the difficulty of changing long-held beliefs, despite new evidence, they quote Herbert Needleman, MD: "Do not avoid difficult areas of investigation. Take risks. If scientists exclusively choose the safe routes, avoid controversial research problems, and play only minor variations of someone else's themes, they voluntarily turn themselves into technicians. Our craft will indeed be in peril." (Photo: Oscar Wong/Getty.) See page 1093