

EDITOR'S FOCUS

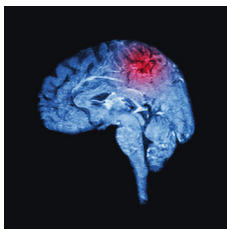
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EARLY CAREER INVESTIGATOR



Congratulations to Katherine F. Guttman, the Early Career Investigator for October 2022. Dr. Guttman grew up in Philadelphia and developed an interest in interpersonal communications at a young age. As an undergraduate at Dartmouth College, she built on this interest by majoring in theater, with a minor in sociology. She received a master's degree in bioethics at the University of Pennsylvania. Her studies of childhood disease processes and work with parents of patients led her to complete a residency in pediatrics and a fellowship in neonatology at the Children's Hospital of Philadelphia, after which she joined the Icahn School of Medicine at Mount Sinai, New York, as a clinical investigator. Her research focuses on communication with parents of seriously ill infants. As reported in this issue, she and colleagues found that neonatologists' perceptions of the Baby Doe Regulations have shifted since 1988 to entail more shared decision-making with parents. In a related Comment, Fanaroff reviews the history of the Baby Doe Regulations and the related Executive Order in 2020. Dr. Guttman's advice to others early in their career is to find mentors, accept failure as part of the process, and have patience. See pages 916, 1059, and 921

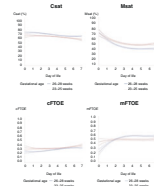
THROMBOEMBOLISM IN CHILDREN WITH MIS-C



In this Review Article, Menon and Srivaths examine all published cases of thromboembolism as a complication of multisystem inflammatory syndrome in children (MIS-C). They found that thromboembolism is a significant complication of MIS-C caused by SARS-CoV-2 infection, with associated morbidity and mortality. The role of standard thromboprophylaxis

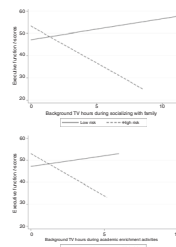
and/or higher-dose thromboprophylaxis in high-risk patients with MIS-C remains to be explored (Photo: stockdevil/Getty). See page 946

DETECTING NEED FOR BETTER CHILD MENTAL HEALTH DATA INFRASTRUCTURE



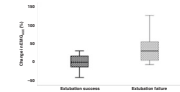
Four articles in this issue examine various facets of child mental health, with background provided in a Comment by Zima and Devaskar. Chock et al. discuss risk reduction of neurodevelopmental delays in preterm infants. Ish et al. examine the relationship between maternal occupational exposures to endocrine-disrupting chemicals during pregnancy and cognitive outcomes. Harrison et al. studied the dietary impact of polyunsaturated fatty acids in adolescents with anorexia. Yu et al. report an association between maternal psychological factors and executive function in offspring. The extent and variety of these topics illustrates the need for a more robust data infrastructure for childhood mental health. See pages 917, 1034, 1153, 1042, and 1051

BACKGROUND TV EXPOSURE IMPACTS EXECUTIVE FUNCTIONING



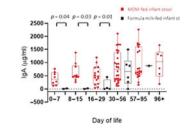
The parents of 1180 children 2–8 years of age participated in a nationally representative survey to determine the impact of background TV exposure. Most exposures occurred while children were sleeping, with this exposure predicting poorer executive functioning. When the exposure occurred while children were playing alone, executive functioning was worse. Socializing with family or engaging in academic activities mitigated risk. The findings support the AAP's statement that TV should be turned off in the background when children are in the room. See page 1168

DIAPHRAGMATIC ELECTROMYOGRAPHY PREDICTS EXTUBATION SUCCESS



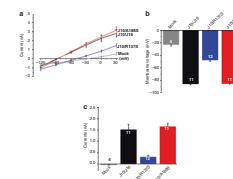
Timing of extubation in preterm infants is important for limiting injury from either reintubation or prolonged intubation. Williams et al. measured the maturity of the diaphragm using noninvasive electromyography. They found that it can predict extubation failure with moderate sensitivity and specificity and is useful in a composite assessment. In a related Comment, Ferguson and Tingay outline the many physiologic factors necessary for successful extubation and propose an extubation-readiness bundle. See pages 1064 and 923

NORMAL VALUES OF SIGA IN PRETERM INFANTS



Immunoglobulin A (IgA) and its secretory form (sIgA) are important for protection from infection and necrotizing enterocolitis, but the amount in preterm breast milk and stool is unknown. Granger et al. determined the amount of IgA and sIgA in breast milk and in the stool of 42 breastfed infants. Handling processes reduced the amount of IgA and sIgA in breast milk. Surprisingly, formula-fed infants did not have sIgA in their stool until 3 weeks of age. An accompanying Science for Kids piece summarizes this paper for younger readers. See pages 979 and 1197

GENETIC VARIANTS IN CHEMORECEPTOR GENES IN SIDS



Sudden infant death syndrome (SIDS) remains one of the leading causes of postnatal infant death. Neubauer et al. screened data from 155 SIDS cases in an effort to determine the contributions of genetic variants in 11 genes that participate in chemoreception. Of the 155 infants, 5 had potential pathologic variants in these genes. Two of these variants were in a gene encoding a potassium channel, but only one caused impairment of function. The authors conclude that genetic variants may be a factor in a fraction of SIDS cases. See page 1026.

ACKNOWLEDGEMENTS

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