

Speaking to Your Pediatrician

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In books about children with developmental issues, you may find bitter accounts of doctors who missed the boat. Parents were worried, parents knew something was going on, and the pediatrician dismissed the concerns, saying, “He’ll grow out of it.” Then, of course, it turned out that the child really did have a problem and valuable time had been lost. We know these stories, we know they happen, and we want to make sure you don’t end up feeling that way.

Our job is to listen to your concerns and look carefully at your child and help make a reasonable judgment about whether it’s time for further testing. We need to understand why you’re worried, and just how worried you really are.

If you’re really worried about something, communicate that to your pediatrician. It’s sometimes hard for us to tell whether parents are making a casual comment or whether they’re expressing a deep worry, rooted in days and weeks of careful observation and concern. Go ahead, say it, in so many words: “There’s something I’ve been noticing for weeks now, and I’m really worried. I read an article and it seemed to be describing my baby, so now I’m wondering if she has this syndrome. Could this be something really bad?” And if the doctor doesn’t seem to register your concern, say it again. Parents may come away from a medical encounter believing they’ve told the doctor something, while the doctor leaves not understanding that it’s a real worry. It’s not at all uncommon for a parent to drop a casual question: “That birthmark – it’s not going to turn into anything bad, is it?” “That funny sound he makes – does that mean he’s going to have a stutter?” When the pediatrician is fully alert and fully sensitive, those questions get properly explored: “What do you mean by ‘anything bad’?” or “Does stuttering run in your family?” But as we hustle through the day and try to remember all the necessary things on the long checklist of any child’s annual physical, we may not be paying proper attention. Stop us, look us in the eye, tell us you’re worried, and tell us exactly why.

- Schedule a visit specifically about your child’s development. Don’t try to talk about it at the visit that’s really about an ear infection. Sometimes it seems as if parents deliberately avoid scheduling such a special visit. Again, maybe it makes the concerns seem too real. We all walk a fine line as parents between wanting to have our suspicions confirmed and wanting to have our worries set aside. However, you should come in, sit down, and tell us what is worrying you. The fact that you were worried enough to make the appointment will signal to us that we need to give this issue time and attention. If the visit is specifically scheduled to discuss your concerns, there should be time to get your most pressing questions answered to make sure that together you and the pediatrician have agreed on a next step.
- Your concerns should prompt your pediatrician to do some kind of systematic developmental assessment, not just “eyeball” you child. These concerns, expressed at such a visit, should prompt the pediatrician to do a full and systematic developmental exam, looking at how your child rates according to age-appropriate norms in motor development, gross and fine; cognitive

skills; language; and social interactions. These screening tools have been developed to be used by general pediatricians, not specialists, and can be done quite quickly. They may give you a handle on whether a referral is indicated. Many pediatricians will use a test called the Denver Developmental Screening Test, asking your child to perform certain tasks right there in the office (pick up a raisin, for example, or build a tower of blocks) and asking you to describe other behaviors you've witnessed at home (does your child imitate housework?). While looking over a child in the exam room, a pediatrician might also make note of the child's response to the usual sensory stimulation that goes on in a doctor's office, such as an otoscope in his ear or a tongue depressor in his mouth. Children with sensory issues may find this sort of stimulation unbearable. In addition, a simple assessment of a child's neurological skills can help determine how these skills compare with the child's progress in speech and language development.

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