



Thomas C. Meyer, MD

Editorial

Starting the school year with a look at adolescent health

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August often brings with it a flurry of student physicals and back-to-school check ups. And now that kids across Wisconsin are back in school, we thought it an appropriate time to look at some of the issues affecting our young patients' health.

Doctor Coleman and her colleagues report on the early results of the Marshfield Youth Study designed to identify early factors associated with excess weight in childhood and adolescence (p 26). We look forward to further follow-up from this group. Related to this study is that of Dr Trentham-Dietz and her colleagues showing an inverse association between increasing weight and earlier onset of menarche (p 65). While both of these studies are in very select populations and therefore not generalizable, it is hoped that continued observation will provide interesting long-term data. We also thank Dr Silva for contributing another perspective on the connection between watching television and age at menarche (p 24).

Doctor Ashby et al provide convincing evidence that major efforts need to be made among black, Hispanic and American Indian teens if the teenage birth-rate in Wisconsin is to be reduced a significant degree (p 37). The Drs Sims report on tobacco use in a stratified random sample of the Wisconsin adolescent Medicaid population (p 41). The highest use of tobacco was in rural and pregnant girls, who may be the group that

could benefit most from prevention and cessation programs. Ms Navon et al underline the important relationship between tobacco smoke and asthma in this age group—as well as the fact that the disease does not deter these patients from smoking (p 47). Based on their data, Ms Fohr and her colleagues come to the sobering conclusion that Graduated Driver Licensing probably leads to lower overall crash rates because of delayed licensure and less driving rather than improved teenage driving (p 31).

Suicide mortality in Wisconsin youth occupy the attention of two groups of investigators. Eisenberg et al point out that the Wisconsin youth suicide rate has declined more slowly than the national rate (and is three times the homicide rate). It is the second leading cause of death in that age group. They provide extensive data on the mortality, hospitalizations and risk factors (p 54). Marbella et al explore the self-poisoning problem in a more limited age group (p 59), but both articles warn that we should heed previous suicide attempts and mental disorders in this age group as heralds to repeat suicide attempts.

Finally, Doctors Soneral and Connor report on five adolescent males from a group home who consumed “moonflower” seeds (*Datura Stramonium*; Jimson Weed) in attempts to achieve a “high.” The authors present lucid descriptions of

the clinical picture (with a delightful mnemonic) and management of anticholinergic toxicity (p 70).

Finally, this issue also contains two important Guest Editorials—one partially related and one unrelated to the adolescence theme—which are especially worthy of note.

The first is Doctor Hargarten's thoughtful description of the potential problems related to the “concealed carry” legislation that will probably be reintroduced in the legislature this fall (p 19). Hargarten points out that Wisconsin is one of only four states that still prohibit the concealed carrying of dangerous weapons. And, along with all of the other problems associated with firearms, our youth suicide rate is significantly higher than the national rate—and 60% of those suicides involve firearms.

The second noteworthy editorial provides the background and rationale for a plea from the Division of Public Health accompanying this year's licence renewal reminders (p 21). The request is for physicians to volunteer to be included in Wisconsin's Emergency Assistance Registry, which has been developed in case of public health threats and emergencies. This is surely a worthwhile effort, especially in the light of the problems surrounding the disastrous chain of events following Hurricane Katrina. The program has a great need for medical practitioners, so please consider signing up today.