

Secondary Drowning

By Nicole Reidy



What is it?

Secondary Drowning (sometimes known as delayed drowning) occurs when a small amount of water enters the lungs after an episode of being submerged underwater. The child may be coughing and spluttering immediately after a scary underwater moment, but then seems fine afterwards.

The inhaled water interferes with the lungs ability to oxygenate the blood and causes increasing difficulty with breathing for up to 24 hours later. If not recognized and treated early, then it can result in death. Thankfully, it is a very rare occurrence, only accounting for 1-2% of all drownings.

How does it happen?

When the water enters the lungs, it can wash away surfactant, a chemical in the lungs which is essential for the transfer of oxygen and carbon dioxide. This causes the alveoli of the lungs to become damaged and fluid to leak into the lungs, called pulmonary oedema. As a result, it becomes increasingly difficult to breathe and there is a lack of oxygen getting to the brain, called hypoxia.

What are the symptoms?

Any child who has needed to be rescued by an adult and has come up struggling for breath, coughing or vomiting should have a medical evaluation.

There are four key symptoms to watch out for in the first 24 hours.

- Difficulty breathing/coughing/chest pain or vomiting
- Extreme tiredness. This can be a sign that the brain is not getting enough oxygen.
- Behaviour changes. Children in the early stages of secondary drowning may exhibit marked irritability or become argumentative. This is caused by a lack of oxygen to the brain.
- Physical symptoms. Blue lips and pale skin can be signs.

If you notice any of these changes in your child after they have inhaled water, take them to the emergency department to be checked. Time is a critical factor in successful treatment. Your

child will be monitored for the oxygen levels, undergo lung examinations and may be referred for further testing such as a chest x-ray. Treatment is supportive with children being given oxygen and ventilation in extreme cases.

How can this be prevented?

Although awareness of this rare, but potentially dangerous, condition is very important, the key message is to practice water safety to prevent all drownings.

The best way to monitor your children around the pool is to get into the water with them. You should be within an arm's reach of your children at all times. Children under the age of four should not be left alone, even for a minute, around water. Babies and young children can drown in as little as one inch of water so vigilance is essential at all times.

At parties, choose one adult to have sole responsibility of watching each child. When lots of people are around, people assume someone else is watching and this is a high-risk time for drownings. Drownings are silent and often occur when the child is being supervised, but there is a momentary loss of attention. Do not drink alcohol when you are supervising children at the pool.

Make sure your children are educated about water safety from an early age. Educate yourself and become formally trained in CPR.

Make sure all adults who care for your children are aware of this condition so that they know to tell you should there be an incident in the bathroom or the pool.

Photo by Prayitno

Dr. Nicole Reidy is an Australian doctor who graduated from the University of Tasmania in 1996 and was awarded Fellow of Royal Australian College of General Practitioners (2003). Dr. Reidy completed her general practice training in Melbourne and spent six years living in the UK where she practiced in psychiatry, rural general practice and student health, culminating in the appointment as a partner in a NHS general practice in Marylebone, London. www.imc-healthcare.com

Digging Out

By Laura Timms



An edition of the *Singapore American Newspaper* focusing on homes and property would not be complete without a mention of Marie Kondo's *The New York Times* bestseller *The Life Changing Magic of Tidying Up*.

Kondo's exacting methodology for decisive decluttering has been recognized by the *London Times* as "psychotherapy for the home." Kondo argues that, if done correctly, "Tidying is a dialogue with oneself" through which we may learn not only our domestic likes and dislikes, but discover how we burden ourselves with obligations and expectations. These are the "shoulds" such as holding onto unwanted gifts from friends, manuals for appliances that we use confidently every day or notes from past studies, to refer to in future or study in more depth when time allows (which it rarely does).

From TV shows like *Hoarding: Buried Alive*, it's easy to see not just how dangerous a home can become when someone is unable to discard objects appropriately, but to understand that, as the *London Times* observes, "Mess is often about unhappiness." So what about tidying up? Therapists frequently work with clients with obsessive compulsive disorder who cannot tolerate mess and fear contamination if their home is not always scrupulously clean. Tidying up and decluttering carried out to excess is also "often about unhappiness," a form of purging where a person only feels relief from intense anxiety by discarding items and "purifying" their home through cleaning.

What excessive hoarding and excessive decluttering have in common is the sense of being driven that sufferers experience. They are not fully, mindfully conscious of their actions, but are acting under the influence of a compulsion. As far as tidying up goes, it's the difference between deciding you'd like to get the family room tidied up and so clearing it out at a reasonable pace over the weekend, versus staying up far later than you had planned to do, intent on clearing out just one last cupboard because you simply won't be able to rest otherwise.

Kondo's bestseller offers an important piece of advice that can help us, whether our tendency is to hoard or to discard excessively: she emphasises the importance of acting mindfully. Tuning in to an item and our response to it, respectfully and with our full attention, is the opposite of the driven, anxious and unsettled state experienced when we act through compulsion. If you recognize yourself feeling driven in this way in any area of your life, practicing mindfulness is likely to be helpful for you; expert help is available from the team at SACAC Counselling.

Photos by Billie Grace Ward and Kris Krug

Laura Timms is a psychotherapist and coach, originally from the UK, practicing at SACAC Counselling.

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