

GRAND ROUNDS

Grand Rounds will not be held the months of June, July and August. Grand Rounds will resume in September.

MEDICAL UPDATE: Pneumococcal Vaccine in Patients with Cochlear Implants

Cochlear implant recipients are at a higher risk for the development of meningitis caused by *Haemophilus influenzae* and *Streptococcus pneumoniae* than are children with normal hearing. It is unclear whether they are at higher risk for meningitis than other children with severe to profound hearing loss. Overall, the chances of a cochlear implant recipient developing meningitis are about 1 in 1,000. However, this risk is sufficiently high to prompt the Centers for Disease Control and Prevention (CDC) to make the following specific recommendations for a pneumococcal immunization in cochlear implant recipients. Because all infants have received the three-dose primary series and booster dose of the conjugate *H. influenzae* type b vaccine since the early 1990s, the risk of disease by this organism is minimal.

1. Children with cochlear implants who are 2 years of age and older and have completed the pneumococcal conjugate vaccine (Prevnar) series should receive one dose of the pneumococcal polysaccharide vaccine (Pneumovax 23) at least two months after the last dose of the conjugate vaccine.

2. Children with cochlear implants between 24 and 59 months of age who have never received either pneumococcal vaccine should receive one dose of the conjugate vaccine followed in two months by one dose of polysaccharide vaccine.

3. The CDC recommends that persons aged 5 and older with cochlear implants should receive one dose of pneumococcal polysaccharide vaccine. George McCracken, M.D., Chief of Infectious Disease at Children's Medical Center and Sarah M. and Charles E. Seay Chair in Pediatric Infectious Diseases at UT Southwestern Medical Center at Dallas, believes that this group, like number two, should also receive one dose of the conjugate vaccine followed two months later by the polysaccharide vaccine. The potential advantage of giving the conjugate vaccine is the enduring immunity that results for the seven serotypes in the conjugate vaccine. Whether this results in greater protection is unknown.

For more information, log on to the Centers for Disease Control website at <http://www.cdc.gov/vaccines> or contact Peter Roland, M.D. at peter.roland@utsouthwestern.edu.

HOSPITAL UPDATE: Children's named one of the top 30 hospitals

Children's Medical Center has been ranked by *U.S. News & World Report* among the top 30 pediatric hospitals in the United States. The June 9, 2008, edition of the magazine features America's Best Children's Hospitals. More than 250 hospitals were considered for the recognition, and this is the third time in four years that Children's has been part of the top-30 list.

Children's also ranked among the top 30 in several specialty areas including Cancer - 15th, Digestive Disorders - 26th, Heart and Heart Surgery - 22nd and Neurology and Neurosurgery - 23rd.

Specialty rankings were based on new methodology that included a blend of reputation, outcome and care-related measures such as advanced technology, credentialing and other factors. Children's is the only hospital in Dallas and one of only two pediatric hospitals in Texas to receive the overall recognition.

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