

AFP Clinical Answers

Measles Vaccine, Acute Appendicitis, Screening for Heart Disease, Abdominal Pain, Hyperhidrosis

What are the risks associated with delaying the first dose of MMR vaccine after 12 to 15 months of age?

Febrile seizures that occur seven to 10 days after the first dose of the measles, mumps, and rubella (MMR) vaccine are rare (0.04% of children between 12 and 15 months), but the risk is increased when the first dose is delayed after the recommended age. In a retrospective cohort study of 840,348 U.S. children who received measles vaccination between 2001 and 2011, those who received a measles vaccination at 16 to 23 months of age had a greater increase in seizure risk (relative risk = 6.5; 95% confidence interval, 5.3 to 8.1) than those who received a vaccination at 12 to 15 months of age (relative risk = 3.4; 95% confidence interval, 3.0 to 3.9), conferring an attributable risk of 5.5 additional cases per 10,000 vaccines given.

<https://www.aafp.org/afp/2017/0615/p786.html>

<https://www.aafp.org/afp/2014/0515/p786.html>

How does intravenous antibiotic therapy for acute appendicitis in adults compare to initial appendectomy?

Antibiotic treatment for adults with appendicitis results in decreased complications, less sick leave or disability, and less need for pain medication compared with initial appendectomy. However, 40% of patients who receive antibiotic therapy will require appendectomy within one year.

<https://www.aafp.org/afp/2018/0701/p25.html>

Should asymptomatic patients be screened for heart disease with ECG?

Screening asymptomatic patients with electrocardiography (ECG) has an extremely low yield in detecting significant pathology and leads to many false-positive findings. The U.S. Preventive Services Task Force recommends against screening with ECG to predict coronary artery disease

in low-risk patients and found insufficient evidence to assess the benefits and harms of screening in individuals at intermediate or high risk.

<https://www.aafp.org/afp/2018/1115/p561.html>

In children with recurrent abdominal pain, what characteristics can distinguish organic from nonorganic disease?

Organic disease is suggested by the presence of fever, vomiting, blood in the stool, more than three alarm symptoms, or history of urinary tract infections.

<https://www.aafp.org/afp/2018/0615/p785.html>

What is the first-line treatment for most persons with primary focal hyperhidrosis?

Topical 20% aluminum chloride (Drysol) should be used as first-line treatment in most cases of primary hyperhidrosis, regardless of severity and location. Iontophoresis may be effective as first- or second-line treatment for primary hyperhidrosis of the palms or soles.

<https://www.aafp.org/afp/2018/0601/p729.html>

Tip for Using AFP at the Point of Care

Looking for more information about vaccines?

You can find more in AFP's Immunizations collection at <https://www.aafp.org/afp/immunizations>. Check out more than 60 other collections in AFP By Topic at <https://www.aafp.org/afp/topics>. When you find your favorite topics click "Add to Favorites" to add them to your personal Favorites list. Find a summary of the 2019 immunization schedules at <https://www.aafp.org/afp/2019/0215/p264.html>.

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