

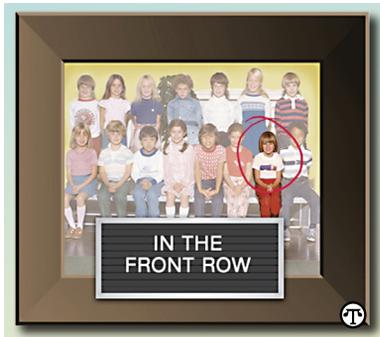
Is Your Child Always In The Front Row?

(NAPSA)—Each year the back to school season is marked by the biggest day of the year—class picture day. But, when you look at your child's pictures and compare them with those from previous years, is your child always seated in the front row—always one of the shortest in the class?

If your child is considerably smaller than his or her classmates and you are wondering why, now might be the time to assess your child's growth and speak to your doctor. Normally, children between ages 2 and puberty grow between 2 to 2.5 inches per year; yet, some children just don't. It is estimated that between 1 in 4,000 and 1 in 10,000 children have a condition called growth hormone deficiency.

Dr. Svetlana Ten, director of pediatric endocrinology at Maimonides Medical Center, explains: "Every child is different and signs of growth hormone deficiency, in which the pituitary gland in their brains are unable to release or produce adequate amounts of this hormone, can manifest differently. The most common symptom is slow growth, causing children to look smaller than their peers and/or siblings. If this sounds like your child, I urge you to speak with your child's pediatrician about whether you should see a specialist to determine if your child has a growth issue."

Fortunately, if detected early enough, growth hormone deficiency may be treatable with growth hormone treatments such as Saizen®



[somatropin (rDNA origin) for injection]. Dr. Ten continues, "In children with growth hormone deficiency, Saizen® helps return the amount of growth hormone to regular levels, so that your child can achieve an adult height that is as close to normal as possible."

"In fact, during treatment years, I've seen patients who have grown as much as three or more inches in the first year of treatment on Saizen®, and two or more in subsequent years."

While Saizen® may be the right treatment for your child, it is not for all children and shouldn't be used in patients with a known hypersensitivity to growth hormone, diabetic retinopathy, acute critical illness in the presence of active malignancy, and in patients with Prader-Willi syndrome who are severely obese or have severe respiratory impairment. It also should be used with caution in patients with insulin resistance, glucose intolerance, diabetes, hypothyroidism, intracranial hypertension, and in women who are pregnant or nursing.

Growth hormone treatments are generally administered by a needle. But devices like easypod® can help by keeping the needle hidden from anxious eyes. Designed specifically by EMD Serono for use with Saizen®, easypod® is a first-of-its kind electronic injection device which features preset dosing and dose delivery confirmation. Although infrequent, delivery site reactions may occur.

If you are concerned that your child may have growth hormone deficiency, ask your pediatrician about a referral to a pediatric endocrinologist who can determine whether your child has this condition. If diagnosed, this specialist will help you determine whether growth hormone therapy is appropriate and, if so, can recommend a growth hormone therapy to help your child reach his/her height goals. To learn more about growth hormone deficiency, visit www.HowKidsGrow.com. For more information on Saizen® and easypod® including full prescribing information, visit www.saizenus.com. Refer to easypod® device instructions for use for full disclosure.

easypod® is intended for use with Saizen® click.easy cartridges after training from a health care provider. Refer to instructions for use on www.easypodus.com for more information. Although infrequent, injection site reactions can occur. easypod® and Saizen® click.easy are available by prescription only. For full prescribing information, visit: www.saizenus.com.