

## **Impact of Television on Children**

Over the last decade there is a significant increase in the number of hours the programmes are telecast on television, and the spectrum of programmes covering various subjects. Television is a major source of information and entertainment to many. About 3 years back the only choice available was to switch on to Doordarshan or put it off. A few could afford the luxury of a video. On 15th May, 1991 Star television's channel began its telecast in India(1). Within a couple of years India has gone cable television crazy and this craze is sweeping through urban India. Door-darshan, satellite and cable televisions are spreading through cities and towns like wild fire.

Television has now become a family's best friend. Evenings, weekends, late nights and vacations are being devoted to it. At present on any day atleast 6-8 channels are available throughout the day and night. So now we and our children are being exposed to six to eight alternatives to view on idiot box, ranging from Michael Jackson dancing on MTV, to Boxing on prime sports to seminude seductive film stars on Star Plus, besides the hourly world news on BBC. Additionally Zee television is catering to Hindi audience. Infact, many more Satellite television channels are likely to be received in any part of India in the next few years and the choice then may be a mind boggling 30-32 channels. To make things worse, some

affluent Indian children also have a choice of home video games. Now-a-days parents are no longer amazed to find their children fiddling with television controls or remote.

Television has a major impact on children's knowledge, attitudes and behavior. There are several hypotheses of how television may influence reading and school behavior. Most obvious is that television displaces reading, outdoor playtime and hobbies(2). Many a parents and children reorient their working schedules, may it be work, or play or studies, to be available and free to watch their favourite shows on TV.

Literature on impact of television on children is scarce and of the few studies, majority are from United States of America. In USA(2,3), (0 More than 96% of American' homes have atleast one television set; (i) On an average, television set is on for 6 hours 56 minutes each day; (iii) Children spend 4-5 hours a day in watching television, the same time as spent in classrooms; (iv) An average child watches 18,000 murders before he/she completes high school. Bombings, beatings and other types of violence are more frequently seen; and (v) Child watches on average 20,000 advertisements per year of which two-third are of foodstuffs commonly containing high sugar.

Schor has summarized seven important effects of television on children(4): (i) Increased aggressive behavior and acceptance of violence; (ii) Difficulty in distinguishing between reality and fantasy; (iii) Distorted perceptions of reality (consumerism, violence, etc.); (iv) Trivialization of sex and sexuality; (v) Negative effect on cognitive learning; (vi) Increased passivity; and (vii) Loss of time.

Several studies have shown that children who watch violence on television, perceive aggressive behavior as normal and acceptable phenomenon. In elementary school, it is very important that children need to practice reading to improve their skills. In contrast, they are spending a great deal of time watching television. A child who spends 30-35 hours per week in school and 20-35 hours in front of television will not have much time to read at home.

Television, if used properly does not hurt the eye sight. If picture is in focus and not flickering it may not cause eye strain. Ideally, the television should not be viewed from a distance of *less than 6 feet* for small screen and a distance of 10-20 feet for larger screen(5). This may not be the case in children, especially in smaller rooms of matchbox homes/apartments. Television is a potential source of radiation; however, the dose is significantly less to cause any harmful effect(6).

#### **Advertising on Television**

Young children do not actually purchase products themselves, but they exert considerable influence on parents to buy products seen on television. Parents purchase a variety of items on requests of children influenced by watching television. Majority of such advertisements have special effects created to enhance the attractiveness of products. Young children have difficulty in distinguishing between a programme content and commercial message. Fortunately, atleast on Doordarshan, advertisements of cigarettes and alcohol are prohibited, but same may not be true of other channels and video movies. Dietz *et al.* have observed that duration of weekly viewing correlated well with consumption of food advertized on television(7,8).

Watching television requires no energy in excess of resting metabolic rates, and it may reduce the time spent in more energy expensive activities. It has been conclusively proved, that television viewing is associated with obesity and hypercholesterolemia(2,8). On the other hand, several studies have shown that, good programmes have a positive impact. Unfortunately, there are a few such programmes. In this regard, the idea floated by one of the Executive Board member of IAP, of providing education and entertainment to children is good(9). Moreover, the Indian Academy of Pediatrics should monitor these programmes regularly and use this excellent media for the benefit of children.

**Shital Shetti,**  
*Akanksha Hospital,*  
*Nipani 591 237*  
*Karnataka.*

#### **REFERENCES**

1. Bajpai S. Hooked? Sunday Magazine. Indian Express Pune May. 31,1992.
2. Zukerman DM, Suckerman BS. Television impact on children. *Pediatrics* 1985, 75: 233-340.
3. Forman MA, Kerschbaum WE. Impact of television. *In: Nelson Textbook of Pediatrics, 13th edn.* Eds Behrman RE, Vaughan VC, Nelson WE. Philadelphia, WB Saunders Co, 1987, p 50.
4. Polin RA, Ditmer MF. *Pediatric Secrets.* 1st edn. New Delhi, Jaypee Brothers, 1989, p 148.
5. Lawrence T, Clemensen JW, Burnett RW. *Your Health and Safety, 5th edn.* Harcourt, Brace World Inc, 1957, p 296.
6. Park JE, Park K. Radiation. *In: Textbook of Preventive and Social Medicine, 13th edn.* Jabalpur, Bhanot Publishers, 1991, p390.

7. Dietz NH, Gortmaker SL. Do we fatten our children at television set? Obesity and television viewing in children and adolescents. *Pediatrics* 1985, 75: 807.
8. Wong ND, Hei TK, Qaundah PV. Television viewing and pediatric hypercholesterolemia. *Pediatrics* 1992, 90: 75-79.
9. Bodhankar U. XXXI National Conference of the Indian Academy of Pediatrics, Presidential address. *Indian Pediatr* 1994, 31: 257-262.

### Cyclic Neutropenia in Common Variable Immunodeficiency

The case report on cyclic neutropenia in a case of common variable immunodeficiency (CVID) was interesting(1). The authors have done well in controlling the infections and symptoms over a three year period.

Detailed studies of patients with so called cyclic neutropenia has revealed involvement of monocytes, lymphocytes, reticulocytes and platelets as well(2). Hence the term cyclic hematopoiesis is more appropriate. These parameters have not been mentioned in the reported case. There is also no mention of whether the child had organomegaly. This is relevant because patients with cyclic neutropenia and splenomegaly have been reported to benefit from splenectomy. Incidentally, splenomegaly is also seen in 45% CVID cases(3).

Patients with CVID usually present in 2nd and 3rd decade of life. Characteristically these patients have normal or increased B lymphocytes which are defective. Though PHA stimulation was defective, the number of B lymphocytes were actually decreased. This would go in favor of autoantibodies (against T and B lymphocytes plus neutrophils in this case); in which case CD4 and CD8 ratio should be

decreased (usually due to increase in T suppressor cells)(4). Unfortunately, helper and suppressor T lymphocyte subsets were not analysed in this case. In fact the T lymphocytes were identified using resetting with sheeps RBCs—a test which identifies only that lymphocyte subset having epitope reactive to monoclonal antibody CD2.

Along with autoantibodies against neutrophils and lymphocytes, other autoimmune diseases can also be present with CVID (like autoimmune hemolytic anemia, idiopathic thrombocytopenia, SLE, chronic active hepatitis, rheumatoid arthritis, *etc*). With the hypothesis put forth in the discussion, why were antiplatelet antibodies and Coomb's test not done? The other theory of a persistent viral infection would hardly explain cyclic neutropenia and is, therefore, untenable.

Lastly, I am unable to understand the following line in the case report, "...serum G. CSF, 3 days prior to the ANC being zero, showed a slight elevation 'in vitro' CFU-C assay". How was serum G. CSF measured? What is 'slight elevation' in 'in vitro' CFU-C assay?

**Purvish M. Parikh,**

*Department of Medical Oncology and Hematology, Tata Memorial Hospital, Parel, Bombay 400 012.*