It is time to rethink hydroxyurea for the treatment of sickle cell disease, especially for your children. Hydroxyurea is a critical therapeutic treatment for children with recurring acute pain events. It has shown to deliver long-term benefits such as the prevention of organ damage.



Who is the best candidate for hydroxyurea?

- Children over two years old with sickle cell disease who have recurring and severe pain events (vaso-occlusive crises) are strong candidates for treatment with hydroxyurea.
- How old does my child need to be to start taking hydroxyurea?
- Hydroxyurea has been approved for use in children as young as 2 years old.



ls hydroxyurea difficult to administer?

No. For children and adolescents a pill a day with water is easy. Hydroxyurea comes as a tablet that quickly melts in water. It is important to understand that in order to get maximum benefit, hydroxyurea must be taken every day. As a parent or caregiver, it is important to commit to the recommended daily dosage. Daily dosage is based on your child's body weight. It will target an optimal response with fewer side effects, which will help ease your child's discomfort.



Will I see results in my child right away?

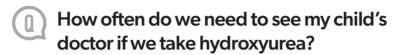
It may take several months before you see the benefits. You should expect results from daily usage of hydroxyurea within 2–6 months of treatment, though results may vary.



To learn more about hydroxyurea visit one**SCD**voice.com







You will probably take your child to the doctor monthly to check blood levels, ensure the treatment is working and that your child is doing well.

side effects

I heard that side effects include causing cancer. Is that true?

The side effects of taking hydroxyurea are usually mild and most children can tolerate the medicine without difficulty. Occasional side effects include mild headaches and stomachaches. It is important to talk to your child's doctor about potential side effects.



Is it ok to stop giving my child hydroxyurea if they appear to be doing well?

You should consult with your child's doctor about changes to the recommended daily plan. Studies have shown that children who are on hydroxyurea have less frequent pain crises, are less likely to require hospitalization and have an improved quality of life.



Why has my child's doctor not discussed hydroxyurea with me before?

Hydroxyurea was approved for adults with sickle cell disease in 1998. While it was approved in 2017 for pediatric treatment, many physicians are still learning about hydroxyurea as a successful and available treatment option for your child.



