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### Опыт применения тобрамицина для ингаляций у детей с муковисцидозом

Благодаря эффективности и безопасности, ингаляционные антибактериальные препараты все шире используются при лечении пациентов с муковисцидозом, имеющих первичный высев или хроническое течение синегнойной инфекции [1, 2]. На сегодняшний день наиболее применяемым ингаляционным антибиотиком у пациентов с муковисцидозом в мире (в том числе в России) является ингаляционный тобрамицин. Этот препарат относится к группе аминогликозидов и предназначен для контроля легочной синегнойной инфекции у пациентов с муковисцидозом. Так, применение ингаляционного тобрамицина при первичном высеве синегнойной палочки позволяет обеспечить эрадикацию бактерий с отсутствием в последующем высева патогена в среднем до 26 месяцев [3]. Оригинальным препаратом ингаляционного тобрамицина является препарат Тоби, впервые зарегистрированный в США в 1997 г., в РФ — в 2008 г.

Исследования показывают, что при ингаляционном введении данного препарата его концентрация в мокроте превышает минимальную подавляющую концентрацию (МПК) в 25 раз, а риск побочных эффектов существенно ниже по сравнению с другими способами введения [4, 5]. Данные российских ученых также подтверждают эффективность тобрамицина. Ингаляционное введение препарата позволяет добиться эрадикации синегнойной палочки у 74% пациентов [6], а курсовое применение в амбулаторных условиях позволяет получить прирост объема форсированного выдоха (ОФВ<sub>1</sub>) на 9% [7].

Считается, что при появлении новых форм уже существующего препарата (дженериков) для его регистрации компания-производитель может ссылаться на данные уже существующих клинических исследований оригинального препарата, предоставив только результаты

исследования биоэквивалентности. При необходимости компания-производитель может провести дополнительные исследования клинической эффективности, безопасности и переносимости самостоятельно или по рекомендации регуляторных органов. Однако, подобных исследований практически не существует, т. к. их проведение может повлиять на конечную стоимость дженерика, приравняв его к оригинальному лекарству. В связи с этим, клиницисты часто оказываются в ситуации, когда отсутствуют данные, подтверждающие или опровергающие эффективность, безопасность и переносимость конкретного препарата-дженерика.

В 2010 г. в России был зарегистрирован новый лекарственный препарат, относящийся к классу ингаляционных антибиотиков для лечения синегнойной легочной инфекции у пациентов с муковисцидозом, дженерик Тобрамицин-Гобби. Поскольку клинических исследований долгосрочного применения данного лекарственного вещества не проводилось, то первое различие, на которое можно было обратить внимание, - это формулировка показаний к его применению, которая звучит следующим образом (ЛСР-006248/10-010710): «Инфекции дыхательных путей, вызванные P. aeruginosa у больных с муковисцидозом». В отличие от показаний оригинального препарата (ЛСР-003819/08-190508): «Длительное лечение хронической легочной инфекции, вызванной Р. aeruginosa (синегнойной палочкой) у пациентов с муковисцидозом в возрасте от 6 лет и старше».

Учитывая вышеизложенное, возможность апробации данного препарата в реальной клинической практике явилась для нас одинаково интересной и спорной, поскольку контроль над легочной инфекцией у пациентов с муковисцидозом является жизненноважным [8-10].

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### **Experience of the use of tobramycin for inhalation in children** with cystic fibrosis

**Таблица.** Динамика показателей ФВД и посевов мокроты у пациентов с муковисцидозом при применении тобрамицина для ингаляций Гобби

| Пациент    | Показатели                        | Исходные  | После<br>1-го курса                               | После<br>2-го курса | Общая оценка<br>врача | Общая оценка родителей |
|------------|-----------------------------------|---|---|---------------------|-----------------------|------------------------|
| А., 17 лет | $0\Phi B_1 \ ЖЕЛ \ Посев мокроты$ | 2,36 л (66,5%)<br>3,11 л<br><i>P. aeruginosa</i> 10 <sup>5</sup>      | 2,24 л<br>3,12 л<br>Р. aeruginosa 10 <sup>5</sup> | 2,34 л<br>2,85 л    | Без эффекта           | Без эффекта            |
| Д., 10 лет | ОФВ $_1$<br>ЖЕЛ<br>Посев мокроты  | 0,38 л (27,7%)<br>0,42 л (26,6%)<br>P. aeruginosa 10 <sup>3</sup>     | 0,32 л<br>0,38 л<br>C. albicans 10 <sup>3</sup>   |                     | Без эффекта           | Без эффекта            |
| П., 6 лет  | $0\Phi B_1 \ ЖЕЛ \ Посев мокроты$ | 1,0 л (87,7%)<br>1,14 л (95%)<br><i>P. aeruginosa</i> 10 <sup>5</sup> | 0,98 л<br>1,12 л<br>P. aeruginosa 10 <sup>5</sup> |                     | Без эффекта           | Без эффекта            |

Применение Тобрамицина-Гобби производилось у 3 пациентов с муковисцидозом в возрасте старше 6 лет. Среди них один пациент с первичным высевом P seudomonas aeruginosa (10 лет) и двое пациентов с хронической синегнойной инфекцией. Последние ранее получали ингаляционный тобрамицин (ТОБИ), было отмечено нарастание показателей  $O\Phi B_1$  и жизненной емкости легких (ЖЕЛ) в динамике на 10-25%.

В соответствии с инструкцией по применению, препарат назначался 2 раза в день по 300 мг/5 мл через небулайзер. Перед ингаляцией пациенты применяли сальбутамол для усиления бронходилатации и увеличения площади бронхиального дерева, на которой должно осесть лекарственное средство. Пациентам проведен 1 курс терапии в течение 28 дней (2 пациента), 2 курса лечения по 28 дней с перерывом между ними в 28 дней у 1 пациента. Оценивались стандартные показатели функции внешнего дыхания, микробиологическое исследование мокроты, интенсивность кашля, качество и количество мокроты (полуколичественно), данные аускультации легких. Эффективность терапии предлагалось оценить врачам и родителям пациентов.

Динамика показателей ФВД и результаты посевов мокроты представлены в табл.

Как видно из представленной таблицы, микробиологическая эффективность была отмечена только у одного больного (Д., 10 лет), у остальных же пациентов состоя-

ние оставалось без динамики. Результаты показателей функции легких тоже не отражали значимых положительных изменений по  $O\Phi B_1$  и/или ЖЕЛ. Нами не получено значимых изменений характера и интенсивности кашля, количества и качества мокроты. К сожалению, применяемый препарат-дженерик не предупреждал обострений процесса, все пациенты были экстренно госпитализированы, проводилась внутривенная антибактериальная терапия, после которой были получены приросты  $O\Phi B_1$ , ЖЕЛ. У одного пациента обострение протекало по пневмотическому типу.

Побочных явлений во время проведения ингаляций пациенты и врачи не отмечали.

Наш опыт показал, что тобрамицин для ингаляций Тобрамицин-Гобби при проведении курсового лечения (у 3 пациентов, 4 курса лечения) не оказал существенного влияния на показатели ФВД, результаты посевов мокроты и динамику кашля. Также врачи и пациенты оценили результат применения данного препарата как «без эффекта».

Безусловно, опыт трех пациентов не является достаточным для формулирования окончательного вывода. Однако, принимая во внимание, что муковисцидоз является орфанным заболеванием, а на территории РФ зарегистрировано от 1500 до 1700 больных, нам представляется важным поделиться первым в России клиническим опытом.

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### INTERNATIONAL PEDIATRIC ASSOCIATION Message From The President

Dear members of the IPA. We have reached one third of our tenure leading our association and its time to make a report of what has been done so far. First of all we dedicated much of this time to secure an administrative structure that can keep us moving on. Our Executive Director, William Keenan, has organized an ED Office, working with Mrs. Alejandra Lule-Rivera, our Executive Manager, and we are searching for a place for establishing our headquarters in Europe. IPA has reviewed and increased its partnership with WHO and is fully engaged in all global health initiatives involving children, like the UN high level meeting on noncommunicable diseases, the Partnership for Maternal, Newborn and Child Health (where we are represented by Zulfigar Bhutta and past president Chokwan Chan) and many others. Immunization is also one of our priorities and our Technical Advisory Group in this field, leaded by past president Adenike Grange, Ciro de Quadros and Louis Cooper, is about to initiate a series of group meetings in Africa, moving on with the Champions in Immunization program, initiated in 2010 by Jane Schaller and Sverre O Lee. IPA took part in many meetings of our Member Societies, engaging in fruitful discussions on local and regional programs. We had the opportunity of writing two comments in very important publications. The first one on January 2011, in The Lancet (jointly prepared with FIGO), on Stillbirths and the second in Pediatrics, invited by Jay Berkelhamer (to be published in January 2012), entitled Overview of the global health issues facing children. Both are papers directed to advocacy on child health what is ultimately one of our most important roles. So, as you can see, we keep moving on and should definitely be happy with ourselves! Nevertheless, in spite of all the hard work and results obtained to this point, IPA is nothing without the full engagement and participation of its Member Societies. Our communications are much better now, including the launching of a new and much functional website and this Electronic Newsletter (by which we are extremely grateful to the hard work from Naveen Tacker and Swati Bhave). We hope to use this improvement in our communication tools, to improve our dialogue and mutual understanding with our members. That's all for now and we take this opportunity to wish you all a Merry Christmas and a very happy New Year.

Sergio Cabral President IPA 2010–13.

### From the Desk of the Editor

Dear Members

We have been regularly bringing out the Quarterly news letter of IPA from 2009. This year due to some unavoidable circumstances I was unable to bring out the Jan-March, April- June and July-Sep Issues The number of enquires I got, as to why the news letter was not being sent made me very happy, as it reflected on the popularity of this news letter, which is one the new venture that IPA started in 2009 with me as the editor So this issue is a combined January to October 2011 issue.

Our President has already highlighted the various collaborations IPA is doing with various International agencies. Our Executive Director Bill Keenan is actively working for NCD with Jonathan Klein from AAP and also on Vaccine issues with our past president Dr. Nike Grange and senior members of AAP Apart from detailed news about these collaborations, this issue is rich in its contents. We have news from our three program areas: Environment and child health, children in disaster situations, IPA AAP global Tobacco control program. We have a report from one of our regional society EPA/UNEPA. Conference news from other Regional societies: UMEMPS, UPR, UNPSTR, Regions, Euro-congress and IPA Specialty society ISTP congress. Collaborations between various IPA societies make it really a global organization. We have reports of collaboration of the Turkish Pediatric society with AAP and the Italian society, The Union of Arab pediatric societies with Lebanese pediatric society, Indian Academy of Pediatrics with the UAE and AAP Pakistan pediatric society with AAP, ISTP with Thailand Pediatric Society and UMEMPS with Jordan Pediatric society The preparations for IPA congress at Melbourne in 2013 August are in full swing under the dynamic chairmanship of Dr. Neil Wigg who has given a update on the congress. Our IPA website is being revamped to have a state of art status under the able guidance of our website co-ordinator Dr. Naveen Thacker from India He has given a report of its many capabilities Please do visit it www.ipa world.org give a feedback Also browse through the news section to see the old issues of our Newsletter Life is full of joys and sadness in a ever flowing cycle. We have the sad news of the passing away of a very senior pediatrician from Finland, Niilo Hallman who was associated with IPA and happy news about the grand felicitation of a very renowned senior pediatrician from Russia, Alexander Baranov. We have put in the event section news of forthcoming events for 2011-13. Do send us news of future events for your region and your society The next issue of this year will be the Nov-Dec issue. Please do send me your critical comments so as to help me to better the issue. We will put them with your name in the Readers Response section which we will restart from next issue.

> Happy Reading Dr. Swati Y Bhave Editor IPA News letter.

### **News from IPA Congress**

#### **Update November 2011**

Planning for the next International Congress of Pediatrics 2013 of the IPA has moved into «second gear». Only 22 months remain before this gala event on our pediatric calendar. The ICP2013 will be held at the Melbourne Convention and Exhibition Centre, Australia between 24 and 29 August 2013. Your hosts will be the Paediatric and Child Health Division of the Royal Australasian

College of Physicians, and we promise you an exciting and challenging Congress. The local Congress Committee is supported by Kenes International and the IPA in bringing this event together. Visit www.kenes.com/ipa/to keep informed. This month Melbourne will be the venue for the World Society of Pediatric Infectious Diseases Congress. Immediately following this Congress the ICP2013 Scientific Program Committee will also meet in Melbourne — immediately following this a preliminary program will be announced and posted on the Congress website. I am delighted to receive the enthusiastic support of a distinguished panel of IPA nominated Scientific Program Committee members. Drs Jie Ding, China (nephrology), Olle Soder, Sweden (endocrinology), Ricardo Uauy, Chile (nutrition), Peter Cooper, South Africa (academic pediatrics), Ali el Halabi, Jordan (cardiology), Ralph Cohen, Australia (surgery) and Gary Pekeles, Canada (general pediatrics/Indigenous health) make up the IPA panel. Joining this panel at the Melbourne SPC meeting on 20 November this year are the host society nominees: Drs. Elizabeth Elliott (SPC Chair), Paul Colditz (perinatology), Andrew Day (gastroenterology), Harriet Hiscock (maternal and

child health), Heidi Peters (genetics/metabolic), Jill Sewell (Congress co-chair), and Jacqueline Small (developmental medicine). Drs Keith Grimwood (infectious disease/research) and Angela Alessandri (oncology/ethics) are also members of the SPC. This local panel will ensure the very best of pediatrics and child health in New Zealand and Australia is brought to you in the Congress. In parallel to the ICP 2013 the Australian College of Children and Young People's Nurses will be hosting an international Nursing Congress in Melbourne. Please encourage international colleagues to participate. (http://www.accypnconf.com.au/)

Personally, I have been delighted to meet so many international colleagues during the past year. My visits to Pedicon 2011 in Jaipur, India, the UMEMPS Congress in Jordan and the ESSOP meeting in Maastricht, The Netherlands, have each been richly rewarding. The enthusiastic support for ICP2013 is very encouraging. My travels in 2012 to promote our IPA Congress, will be more extensive and I look forward to meeting colleagues and friends from across all the regions of IPA. Thanks also to Kenes International for marketing the ICP2013 in many other paediatric congresses across the globe this year.

Spread the word about ICP2013, come «down-under» in August 2013 and bring your colleagues with you!

Best wishes from Australia Neil Wigg, IPA Congress Director ICP2013, Melbourne Australia.

### **News from IPA Administration**

United Nations Environment Programme (UNEP) Mercury Treaty — Vaccine Issue Overview WHO has brought to the health community attention the fact that the UN Environment Program is negotiating a treaty on mercury and mercury containing products which may limit access to vaccines, by banning the use of thiomersal. Thimerosal is a mercurybased preservative used in most multi-dose vaccines (including d PT, H Flu, Influenza, Hep B and menigicoccal disease). Studies show no evidence of harm caused by the low dose of thiomersal in vaccines, all mercury-added pharmaceutical products, including vaccines, are included in a draft list of products to be banned if the treaty is adopted. Abundant data exists supporting safety. A ban would limit the availability of vaccines and result in a negative health impact. According Erin Fry, Government Affairs Officer at PATH, the only organized nongovernmental organization response related to vaccines prior to October, 2011 was from antithiomersal groups. In a 'Dear Colleagues' letter, PATH noted that «it is critical that the voice of the public health community be heard so that country delegates to the UNEP understand the public health implications of banning thiomersal.» Since that time, several global health organizations submitted materials, some of which are now available on the UNEP website. Anegotiation meeting recently concluded in Nairobi which included a discussion of thiomersal. WHO provided

a technical briefing and groups on both sides of the issue presented. The majority of countries represented agreed that a thiomersal ban would have negative implications for immunization programs and global health, the issue will likely not be resolved until negotiations conclude in early 2013. PATH has prepared fact sheets about the issue and is coordinating outreach and advocacy efforts. Please contact Erin (efry@path.org) for more information. Dr. Keenan, IPA Executive Director, issued a memo to IPA Standing and Executive Committee Members in November alerting them to this issue and noting that there may be discussion of the use of thimersol for vaccines with their own governments. Pediatric societies are encouraged to inform country level health officials about the issue, encourage health officials to educate country delegates to the UNEP about thiomersal and the potential impact of a ban, and urge the UNEP delegates to rely on scientific evidence from WHO in the committee's decisions about mercury in vaccines. AAP and IPA representatives met with the US State Department in early November along with representatives from the Gates Foundation, PATH, Sabin Institute, Every Child by 2, UN Foundation and others. There were also antithiomersol groups present, advocating for a ban on thimerosal. The US Deputy Assistant Secretary for Environment and Sustainable Development said that the US had studied the issues of vaccines and found the WHO

arguments in favor of maintaining thiomersal in vaccines "compelling" and that the US had reached the same conclusions as WHO that a ban is not supported. He said that the US position in the UNEP meetings on the treaty will be against a ban. The UNEP meets next in June 2012. PATH reports that anti-thiomersal advocates are actively

lobbying governments in Africa and South America. Other IPA member countries who have been involved in this issue are also encouraged to send reports to the Dr. Adenike Grange, IPA Vaccine technical Assistance lead (nikegrange@yahoo.com) and to IPA Executive Director William Keenan (keenanwj@slu.edu).

### IPACOLLOBORATION FOR NCD (Non Communicable Diseases)

September 2011 18, New Voic, USA

The United Nations General Assembly hosted a high level meeting September 18 through 21 at their New York headquarters on Non-Communicable Diseases (NCDs). As usual with UN meetings numerous side meetings were hosted by major funders of global health initiatives, NGOs and major corporations. The International Pediatric Association was represented by Dr. Bill Keenan, Executive Director of the IPA, Errol Alden, MD a former of the IPA Standing Committee and chairman of the IPA Foundation Board, Dr. Jonathan Klein, a member of the IPA technical committees for both Adolescent Health and Non-Communicable Diseases and Dr. Louis Cooper, a member of the Immunization technical committee. These representatives attended a variety of meetings hosted by UN and NGO organizations including the Secretary General's Every Woman Every Child Commitment, the Global Health Council, the White Ribbon Alliance, the United Nations Foundation. the World Bank and major corporations. In addition to the NCD theme events, and focused meetings on tobacco control and obesity, IPA was represented in side meetings discussing Child Survival, Immunizations, M-Health priorities, and Workforce issues. The emphasis of many of the NCD summit meetings were heart disease, obesity, cancer and diabetes. While the role that women play in a healthy society received come emphasis, children and adolescents' issues received relatively minor attention. The UN Declaration on NCDs can be found at http://www.un.org/ga/search/view\_ doc.asp?symbol=A/66/L.1 IPA representatives used every opportunity in these meetings to emphasize the importance of NCDs to the well being of children. Several broad areas of emphasis were used in the efforts to advocate for children:

- a) Immunizations can greatly influence the incidence of some cancers (ex. Hepatitis B, HPV) and impacts numerous causes of life long disability (ex. Measles, Rubella).
- Safe deliveries and proper newborn resuscitation will prevent asphyxia deaths and also will prevent chronic disabilities and special health care needs in many children.
- c) Proper nutrition, nutritional interventions, avoidance of maternal obesity, smoke free environment, and elimination of alcohol exposure will all reduce the incidence of prematurity (the most common cause of disability) fetal growth delay (associated with increased risk of «adult» diseases, including obesity, diabetes, heart disease and renal disease) and congenital malformations (associated with specific maternal nutritional deficiencies and fetal drug or alcohol exposure.

Each of the four representatives felt that our contacts were receptive to hearing of child and adolescent issues related to NCDs but that much ongoing work is required so that the very cost efficient and effective interventions on behalf of newborns, infant, children and adolescents attain equal regard in global priority, budgeting and goal setting processes.

Report submitted by William Keenan Executive Director IPA and Dr. Jonathan Klein Associate Executive Director AAP

# Global consultation on Emerging Issues in Adolescent Health: Implications for Low and Middle-Incomecountries

October 2011 23-26 , Wisconsin USA

This was hosted by Dr. Robert Blum from the Johns Hopkins Bloomberg School of Public Health. The aim of the meeting was to bring together scientists, policy makers and program planners to discuss the implications of recent

scientific advances of particular importance to adolescents for policies and programs that affect their health in the present and, by association, across the life span. The meeting was aimed at presenting cutting-edge research in

ways that make it accessible to non-scientists, and to explore the implications of the new science for interventions directed toward adolescents in relation to alcohol use, food consumption, mental health and violence. Together, these issues account for far more than half of all the morbidity in the second decade of life and set the stage for adult noncommunicable conditions (NCCs). This meeting was building on the Resolution on Youth and Health Risks that was adopted at the recent 64th World Health Assembly and the outcome of the High-Level Meeting of the UN General Assembly on non-communicable diseases that took place in September 2011. There were 24 participants from the following countries Bangkok, Brazil, Jamaica, Hong Kong, India, Mexico, Nigeria, USA, UK, Vietnam and Switzerland. There was representation from organisations like John Hopkins Bloomberg School of Public Health, WHO, PAHO, PATH, and various NGO's like AACCI, PHFI, MAMTA. There were excellent scientific deliberations presented by academicians who were experts in the field. Neurodevelopment during

Adolescence by Linda Spears, The Neurobiology of Addictions by Marc Potenza, Epigenetics by Xiaobin Wang. Implications for the science for mental health promotion by Vikram Patel, obesity prevention by Albert Lee, substance abuse prevention by Maria Elena Medina-Moraand violence prevention by Elizabeth Ward. The group deliberated in working sessions for drafting recommendations for priotorising issues on Adolescent health. After the consultation there will be a number of follow-up activities, including the publication of the recommendations IPA participation: Dr. Swati Y Bhave who was called as Executive Director of her NGO-AACCI-Association of Adolescent and Child Care in India, also represented two Professional organisations IPA (where she is Technical Advisor Adolescent Health) and IAAH (where she is Regional Vice President for Middle East and South east Asia)

Report submitted by Dr. Swati Y Bhave Co-ordinator and Technical Advisor Adolescent Health.

### **News from Program Areas**

#### **IPA Environment and child health programe**

The IPA Environmental Health Committee has continued to post monthly research findings on the IPA website. Please go to <a href="http://www.ipa-world.org/page.php?id=257">http://www.ipa-world.org/page.php?id=257</a> to stay current on the most recent findings about child health and the environment. The Environmental Health Committee also continues its work with the Global Alliance to Eliminate Lead Paint. The Global Alliance is a voluntary collaborative initiative to achieve international goals to prevent children's exposure to lead from paint and to minimize occupational exposures to lead paint. The Global Alliance is a joint undertaking of the United Nations Environment Programme (UNEP) and the World Health Organization (WHO). Though an online survey WHO and UNEP we are trying to get a broad a picture as possible and obtain initial information about

the current status of lead paint and any related prevention and control activities. Please go to the IPA website at <a href="http://www.ipa-world.org/page.php?id=319">http://www.ipa-world.org/page.php?id=319</a> to learn more. The Environmental Health Committee reports that WHO has several recent publications about Children's Health and the Environment. They are listed here, with links to the WHO website.

- 1. Children's Exposure to Mercury Compounds
- 2. Healthy Environments for Healthy Children
- 3. Children's Environmental Health Units
- 4. Childhood Lead Poisoning
- Persistent Organic Pollutants: Impact on Child Health Submitted by Ruth Etzel Technical Advisor IPA program on Environment and child Health.

### IPA — Children in Disasters Programme

9-11 March
Port au Prince. Haiti

A workshop on "Psychosocial Issues of Children in Disasters" was held by the IPA technical advisory committee on children in humanitarian emergencies, under the direction of Dr. Karen Olness, from Case Western Reserve University (CWRU), and Dr. Ronald Eveillard, President of the Haitian Pediatric Society. Participants included 21 Haitian pediatricians, 15 child psychologists, and 5 social workers. The workshop was supported by the International Pediatric Association, Health Frontiers, and CWRU.

Visiting faculty included Karen Olness, MD, Srivieng Pairojkul, MD, Marisa Herran, MD, Marlene Goodfriend, MD,

Kathleen Clegg, MD, Felicite Chatel-Katz, MA, and Mark Cheren, EdD. Local presenters included Dr. Ronald Eveillard, Dr. Edwige Millien, who is a Haitian Psychologist working in schools, and Patricia Landinez, a UNICEF representative.

The workshop coordination was provided by Ms. Felicite Chatel-Katz, from CWRU, in close partnership with Dr. Elsie Pothel Ovile, from the Haitian Pediatric Society. All course materials were translated into French by Felicite Chatel-Katz. Direct translation of talks and discussions was provided on site by Felicite Chatel-Katz and Dr. Jacqueline Gautier, Haitian Pediatrician.

Topics included: The Special Needs of Children Victims of Disasters, The Problem Based Learning (PBL) Methodology, Signs and Symptoms of Trauma in Children, Medical and Psychological Triage, Principles of Epidemiological Assessment, Report on Psychosocial Interventions in Thailand, Helping Rescue Workers Cope with Stress, Rapid Psychosocial Interventions to Foster Resilience, the Role of UNICEF, Sharing from Haitian Pediatricians and Psychologists, The Essential Roles of Education and Schools, Orphans and Unaccompanied Minors, Child Trafficking, Sexual Violence, Safety Issues, and Death and Bereavement.

The Methodology: Didactic lectures were extensively supplemented with problem-based learning (PBL) exercises, skills training and practice. Participants were separated in small groups to reflect on evolving stages of an original case history that had been specially developed to address the needs and resources of Haiti. The methodology required participants to think on their feet and strategize to address complex and evolving situations; it fostered an intensive and interactive learning experience.

The Haitian participants responded extremely well to this PBL methodology and were very engaged. Many commented on the great value of this educational method. Several mentioned that it was the first time they had attended a training program which included pediatricians and child psychologists working in collaboration and that this interaction was extremely valuable.

Many participants had been intensely involved in the aftermath of the Haitian earthquake and several had lost family members. They shared their experiences with one another and with faculty. Dr. Mark Cheren facilitated a

wrap up session on future plans. Participants discussed their intention to apply several key content areas in their work. As encouraged, they also shared who they hoped to exchange mutual support with in pursuing such efforts. Several participants indicated their intention to replicate the course within the year.

There were many topics that participants felt would be of immediate value in treating or assisting children who suffered from last year's earthquake and its aftermath. Aparticular highlight was Dr. Pairojkul's description of what was being done on a local, regional and national level for children who had been impacted by the Tsunami, in Thailand, in the way of long term rehabilitation and resiliency training. At the same time, it was striking to hear the extent to which some participants felt this experience also encouraged and supported their thinking about ways they could better prepare for the time when the NGOs will be leaving Haiti, and plan for the management of future disasters, as difficult as it was to contemplate such possibilities at this stage of things. Finally, a few participants commented on the impact of learning about the details of disaster situations that have occurred during the past several years, in other nations. Hearing that others were dealing with so many of the same issues and what they were doing in these various situations helped them to put their own experience in a somewhat different perspective. It enabled them to feel their colleagueship with others engaged in the same critically important work. And they were able to draw strength from this.

Report submitted by Karen Olness, Chair IPA Technical Advisory committee, Children in Humanitarian Emergencies.

### News from IPA AAP Tobacco Control Program Area

AA Pand IPA continue to work with the WHO Tobacco Free Initiative in the Western Pacific Region to develop pediatric tobacco control efforts in Asian and Pacific countries. The 8 Asian Pacific countries that participated in the training network launch in December, 2010 will be reconvening in February, 2011. Drs. Klein and Keenan also participated in the United Nations General Assembly high level meeting activities on tobacco control and other Non-Communicable Diseases (NCDs) in September, 2011. In a session sponsored by Global Bridges, a Mayo Clinic based worldwide science-based initiative to help healthcare providers treat tobacco dependence and advocate for effective tobacco control policies, Global Bridges is partnering with J&J, WHO, HHS, and the American Cancer Society in these efforts. Dr. Klein spoke about the importance of including child health leaders in adult tobacco control efforts. Discussions with Global Bridges are ongoing to identify support for pediatric advocacy training on tobacco and secondhand smoke in IPA member countries and at regional meetings. Douglas Betcher, MD, Director of the WHO Tobacco Free Initiative will present the AAP 2011 Christopherson lecture and participate in meetings with IPA leadership at the AAP 2011 NCE in Boston in October. Additionally, Karen Wilson, MD, MPH, FAAP will present a keynote on children and tobacco control, and will participate in a workshop on engaging child health leadership in tobacco control at the 3rd Latin American and Caribbean Conference on Tobacco OR Health in Lima, Peru, also in October 2011. This meeting will help prepare for follow-up discussions and planning towards future collaborative training activities with PAHO during ALAPE regional pediatric meetings. Indian Academy of Pediatrics: The IPAAAP tobacco control program was launched in India in collaboration with the Indian Academy of Pediatrics in 2009. The President of the Indian Academy has identified tobacco control in 2011 as part of a 5 year action plan; activities will be conducted in collaboration with the IAP meeting in January, 2012. An Educative CD for tobacco Awareness for school children has been developed by IAP with input from the Association of Adolescent and child care in India. This will be launched by the President Dr. T U Sukumaran in Nov 2011 and will be sent to all the IAP city and state branches and the Pediatric Depts. of medical colleges in India, to use in school Health programs. Assession on Tobacco awareness will be held in the Annual IAP conference in Jan 2012. There will also be a meeting with AAP and IAP to plan a collaborative project to train members of IAP adapting a training module developed by AA Pin the year 2012-13.

Report submitted by Swati Y Bhave, Ruth Etzel, Jonathan Klein co-ordinators of IPAAAP Global Tobacco Program

\$3,000 to \$24,000.

## AAP Richmond Center Launches New and Improved Web site! WSLETTER JANUARY-OCTOBER

The American Academy of Pediatrics Julius B. Richmond Center of Excellence is proud to launch a new and improved Web site! The new site contains information about many tobacco-related topics, and has been expanded to meet the needs of a variety of audiences, including clinicians, researchers, community-level advocates, educators, parents, and children. A clearer structure, simplified navigation, and improved search functions make finding information easier than before. Features of the Web site include: Tobacco Prevention Policy Tool- This tool offers policy strategies to further prevention of secondhand smoke exposure, cessation, and tobacco control efforts at multiple advocacy levels, and can be used by anyone, regardless of profession or level of advocacy experience. Downloadable Power point Presentations- These ready-made presentations contain the most recent information on a variety of tobacco control topics and are available to download and present at Grand Rounds, noon hour conferences, or other events. Citations, reference notes, and instructions on inserting local statistics are available with these presentations. Funding Opportunities- The AAP Richmond Center offers four types of funding opportunities throughout the years mall grants, fellowships, visiting lectureships, and Community Access to Child Health (CATCH) grants. Funding amounts vary from

Faculty Expert Panel- Looking for a national expert to come speak at your institution about creating a tobaccofree campus, incorporating secondhand smoke exposure discussions into pediatrics visits, or getting through to teens who use tobacco products? The AAP Richmond Center Faculty Expert Panel fills this need to sending experts to present on these topics and more.

AAP Richmond Center E-mail List- To stay informed of the latest in tobacco control news, visitors can sign up for the AAP Richmond Centere-mail list. This list is open to anyone, regardless of profession or location, and offers monthly information on webinars, meetings, funding opportunities, and new resources through the AAP Richmond Center and other organizations. Solving the Puzzle: A Guide to Pediatric Tobacco Control-Created by the AAP Richmond Center, this resource guide offers handouts that clinicians can use with youth and families, strategies to integrate cessation counseling into practice settings, and strategies to keep communities tobacco-free.

Explore these features and more by visiting www.aap.org/richmondcenter, and feel free to pass this information to interested colleagues and organizations.

If you have any questions, suggestions, or comments, please contact Janet Brishke at jbrishke@aap.org or 800/434–9016 x7783.

# The 33rd congress of the UMEMPS (Union of Mediterranean and Middle East Pediatric Societies) and the 6th congress of Jordan pediatric society

May 2011 4-7, Amman, Jordan

The UMEMP Sconsists of pediatric societies from 32 countries in the region. The congress was a big occasion for pediatricians from all over the world to discuss and share information in the field of pediatrics. 150 papers and lectures were presented by 253 authors covering all fields of pediatrics and neonatology in three parallel sessions. Guest speakers from Asia, Africa, Europe, North and South America, and Australia had their valuable contributions in the conference. In addition, there were 2 successful workshops during the congress, the first was in adolescent medicine

and was organized in collaboration with WHO, and the second was in neonatal life support. Both activities attracted many attendants. Many of the participants and their families found it an opportunity to visit the famous attractive places in Jordan like Petra, which is one of the seven wonders in the world, the Dead Sea, the lowest point on earth, and Jerash which is one of the famous ancient Greco-Roman cities.

Edited version of report submitted by Ali El-Hababi IPASC member and President of UNEMPSCombined

# 16 th Congress of EUSUHM (European Union for School and University Health and Medicine)

June 2011 9-11, Moscow, Russia

Organizers: The European Union for school and University medicine (EUSUHM), Union of pediatricians of Russia (UPR) (www.pediatr-russia.ru), Russian Ministry of health and social development, Russian society for school and university medicine. For the first time in the history of Russia, «EUSUHM-2011» has been held. The motto of the Congress was: Education and health from childhood to adult life. The Congress was attended by 1197 experts from 22 countries (Belarus, Belgium, Great Britain, Hungary, Denmark, Germany, India, Spain, Italy, Kyrgyzstan, China, Moldova, Netherlands, United Arab Emirates, Russia, Slovenia, Ukraine, Croatia, Finland, Sweden, Switzerland and Estonia). 119 reports were presented. At the poster alley 98 reports were also demonstrated. The Scientific program included a discussion of the following issues: Healthy nutrition and physical health and healthy life style for preschool children, schoolchildren and students. 4. Neuro-psychological, cognitive development. Reproductive health of children, adolescents and youth. Youth friendly Clinics. Vaccination. Early detection of abnormallities, affecting the learning process, and its prevention. Career counseling Children with disabilities: medical-psychological and social rehabilitation. International Classification of Functioning, work incapacity and health — the version for children and youth (ICF CY). 12. The role of school nurses in child healthcare. Strengthening the role of parents in children's health care. Use of new technologies in the pediatric healthcare system. Medical and psychological support for young sportsmen. Leading specialists from WHO, IPA, EUSUHM, UPR took part in the plenary sessions The results of all discussions and sharing the experience were following: Despite the fact that we live in different systems (social, educational, etc.), formulation and review of medical and psycho-pedagogical problems of education in children, adolescents and students is actual and timely in all countries. We need to continue our united activities directed on health promotion (school, universities, kindergarten, nursery schools, community) for providing psychical, mental and sexual welfare for children and youth, formation of healthy life style for children in the World.

IPA presence: Dr. Swati YB have Co-ordinator and Technical Advisor Adolescent Health.

Report submitted by executive secretary of Union of Pediatric societies of Russia executive secretary Komarova Olga (komarova@nczd.ru)

### 5th Europaediatrics Congress Vienna

June 2011 23, Europe

A Global Event Representing European Child Health Care was held in Vienna. More than 2,000 professionals representatives from 92 countries attended Nearly 200 speakers and chairpersons served up 99 sessions — including lectures, debates, round tables and practical sessions. The overall emphasis of the content was placed firmly in the European arena and took into account social and demographic change within the continent as well as syndromes and diseases particularly relevant in

Europe. However, delegates came from all over the world to attend the comprehensive programme.

The congress was awarded 18 credits by the European Union of Medical Specialists (UEMS) / The European Accreditation Council for Continuing Medical Education (EACCME). More than 70% attendees taking part in our evaluation process graded the conference over all as good to excellent. The venues for the next two Europaediatrics congresses have been named — Glasgow in July 2013 and Rome in 2015.

Edited version of Report submitted by Andreas Konstantopoulos President Elect IPA

### UNPSTR — Tenth Regional Congress of Pediatrics

#### September 2011 16–17, Astana, Kazakhstan

Eurasian countries have similar child health problems. The Union of Pediatric Societies of Turkish Republics (UNPSTR) is encouraging these countries to improve their child health situations in this area, since its establishment in the year 1993 thorough organizing congresses and workshops. The theme was «Current Problems in Pediatrics and Pediatric Surgery». The Congress was organized by UNPSTR in collaboration with the Ministry of Health of Kazakhstan, Nursultan Nazarbayev (President of the Republic of Kazakhstan) was the Honorary President, Zhaksylyk Doskaliyev (Minister of Health Republic of Kazakhstan) and Enver Hasanoglu (Secretary General of the UNPSTR) were Vice-Presidents of the Congress. Yermek Ayazbekov (Director of the Scientific Centre of Pediatrics and Pediatric Surgery, Kazakhstan) was the President, Nasib Guliyev (President of the UNPSTR) and Auken Mashkeyev (President of the Kazakh National Pediatric Society) were Vice-Presidents; Kairat Dzhanabergenov, Kuanysh Nurgaziev, Myrzabek Rysbekov, Nurgul Khamzina, Murat Yurdakok, Daulethan Yesimov, Aikan Akanov, Yelzhan Birtanov, Tezer

Kutluk, Zaure Dushimova, Saule Nurtazayeva were the Members of the Organizing Committee. Congress was held at the Congress Hall of Hotel Rixos Astana President. Zhaksylyk Doskalivev. Enver Hasanoglu. Nasib Gulivev. and Kamal Ormantavev have had opening remarks in the morning of September 16, 2010. «Environmental Pollution and Fetus» was the topic of the Opening Lecture and given by Kadriye Yurdakok (Deputy Director of International Children's Center). IPA presence «Enver Hasanoglu SC member IPA There were 259 registered participitants from six countries: Azerbaijan, Kazakhstan, Kyrgystan, Tajikistan, Turkey, Turkmenistan and Uzbekistan. Forty oral presentations on various topics of pediatrics and pediatric surgery were discussed. Abstracts of the poster presentations in numbers 405 were printed in the Congress Book. The congress is announced to be held in Dushanbe, Tajikistan in 2011. Europe.

> Edited version of Report submitted by Enve Hasanoglu IPASC member and Secretary General of UNPSTR

#### September 2011 20-22, Kazan , Russia

The scientific conference of Union of pediatricians of Russia «Pharmacotherapy and Nutrition in pediatrics»

This was held — Kazan, Volga federal Region, Kazan State Medical University, which hosted the Conference is renowned for the pediatric school for over two hundred vears of existence. Many Great Russian pediatricians and pediatrician's dynasties are natives the Kazan University and its also is the alma mater for our leader professor Alexander Baranov. The forum was opened be the Solemn Plenary session with the greeting from the chairman of the Union of pediatricians of Russia professor A.A. Baranov and fundamental presentations of the representatives of the State Parliament (professor T.V. Yakovleva), Ministry of Health of Russian Federation (professor O.V. Chumakova), Minister of Health of the Republic of Tatarstan (A. Z. Farrahov), as well as leading pediatricians from Moscow (professor L.S. Namazova-Baranova) and Kazan (professors A.S. Sozinov, R.A. Faizullina). As usual, Union of pediatricians of Russia in order to maintain CME for pediatricians has formed the scientific program of the conference on the principle of specialized training courses.

Sessions were organized simultaneously in seven halls: 62 symposiums, 3 lecture, 3 round tables, as well as clinical cases and poster presentations. Discussions on the key topics were devoted at the sessions of pediatric nephrology, gastroenterology, allergy, vaccination, rheumatology, nutrition, pediatric surgery. Special attention was turn to the social aspects in pediatrics. The conference was attended by one of the European experts in this field, General Secretary of Turkish National Pediatric Society professor Enver Hasanoglou. Our professional association traditionally provided new issues of medical journals «Current pediatrics», «Pediatric pharmacology», «Pediatric diagnostics» for participants. High level of the scientific program, alive audience interest and involvement in the discussions became the privilege for the successful conference in Kazan.

IPA presence: L.S. Namzova Baranova and Enver Hasanoglou SC members of IPA.

Edited version of Report submitted by executive secretary of Union of Pediatric societies of Russia executive secretary Komarova Olga (komarova@nczd.ru)

### UNPSTR — Eleventh Eurasian Congress of Pediatrics

September 2011 29–30, Dushanbe, Tajikistan

The Union of Pediatric Societies of Turkish Republics & Central Asia (UNPSTR), one of the regional branches of IPA, is encouraging Eurasian countries to improve their child health situations in Eurasia, since its establishment in the year 1993 thorough organizing congresses and workshops. The thema of the Elevent Eurasian Congress of Pediatrics was "Recent Advances in Pediatrics and Pediatric Surgery". The Congress was organized by UNPSTR in collaboration with the Ministry of Health of Tajikistan. Nusratullo Salimov (Minister of Health, Tajikistan) was the President, Fayzulloev Nusratullo (President of Tajik Academy of Medical Sciences), Enver Hasanoglu (Secretery General of the UNPSTR) were Vice-Presidents, and Murat Yurdakok (Past-President of the Turkish National Pediatric Society) and Nasib Guliyev (President of the UNPSTR) were General

Secreteries of the Congress. Congress was held at the Congress Hall of Vahdad Congress Center. Rukia Kurbanova (Deputy Prime Minister of Tajikistan), Nusratullo Salimov (Minister of Health, Tajikistan), Lola Bobokhojieva (Head of the Departent of Women and Family Affairs of the Executive Office of the President), Enver Hasanoglu (Secretery General of the UNPSTR), Fayzulloev Nusratullo (President of Tajik Academy of Medical Sciences), Nasib Guliyev (President of the UNPSTR), and Zohir Nabiev (Director of the Tajik Scientific

Clinical Center Pediatrics and Pediatric Surgery) have had opening remarks in the morning of September 29, 2011. Scientific sessions of the Congress took place on September 29 and 30, 2011 with 251 registered participitants from 17 countries: Afghanistan (24), Armenia (1) Azerbaijan (4), Baskhortostan (2), Belarus (2), Iran (3), Kazakhstan (8), Kyrgystan (1), Russian Federation (5), Slovenia (1), Tajikistan (179), Tataristan (2), Turkey (12), Turkmenistan (3), Ukrain (2), Uzbekistan (1), and Yakutia (2). 63 oral presentations on various topics of pediatrics and pediatric surgery were discussed. Abstracts of the poster presentations in numbers 166 were printed in the Congress Book. Just after the Congress, application of Iranian Society of Pediatrics to the UNPSTR was approved by the Executive

Board which increases the acting members of the UNPSTR to 13: Afghanistan, Azerbaijan, Bashkortostan (Russian Federation), Crimea (Ukraine), Iran, Kazakhstan, Kyrgyzstan, Tajikistan, Tatarstan (Russian Federation), Turkish Republic of Northern Cyprus, Turkmenistan, Turkey, and Uzbekistan.

IPA presence: Enver Hasanoglu IPASC member

Edited version of Report submitted by Murat Yurdakok Past President of the Turkish National pediatric society

### The 9th ICTP Congress

October 2011 18–20, Bangkok

The 9th International Congress of Tropical Pediatrics (9th ICTP) was held under the auspices of the International Society of Tropical Pediatrics in collaboration with the Thailand Chapter of the International Society of Tropical Pediatrics (TCISTP) and the Pediatric Infectious Disease Society of Thailand at the Queen Sirikit National Convention Center (QSNCC), Bangkok, Thailand. There were 2 joint congresses namely the 3rd Travel Medicine and Immunization entitled "Travel Medicine in the Tropics" on October 18–19, 2011 and the Dengue Conference on October 20, 2011. The 9th ICTP addressed the need for Global Partnerships and Networking for Child Health emphasizing the latest new ideas and strategies in various aspects of Tropical Pediatrics. The scientific program comprised 15 Plenary sessions, 18 symposia, 8 sessions of Meet the Experts. There were world renowned 90 speakers who are experts in Paediatrics. There were more than 1000 participants from over 42 representing countries all over the world. 187 abstracts were submitted for poster presentation. 10 abstracts were selected for the 3 awards as the best poster award, the 2nd and the 3rd runner-ups which were awarded toDr. Jia-Feng Wu, Dr. Agarawal Vishnu and Dr. Yong Poovorawan, respectively The first three plenary sessions on AIDS: A continuing global challenge by the president of the 9th ICTP, Prof. Usa Thisyakorn, the Rights of the Child: Key Implications for the Medical Profession by Prof. Dr. Vitit Muntrabhorn, a Professor in Law, and Serving the Underserved Children by Prof. Roberto Tapia Conyer, a former Deputy Minister of Health, Mexico gave an excellent overview of the direction of the congress. The opening ceremony was graciously presided by Her Royal Highness Princess MahaChakriSirindhorn on October 18,2011 followed by the Keynote speech from His Excellency Ambassador Kulkumut Singhara Na Ayudhaya, the Ambassador of Thailand to the Kingdom of Spain, entitled "Global partnerships and Networking for Child Health".

There was a great exhibition of HRH Princess MahaChakriSirindhorn as the Princess Pavilion organized by the Faculty of Tropical Medicine, Mahidol University. Another interesting exhibition demonstrated the need for understanding the special children «Children with special needs: lesson learned from Manoy.

IPA presence: Dr. Swati YBhave IPATechnical Advisor on Adol Health delivered a plenary lecture on Pediatrians role in sexuality education.

The 10th ICTP will be held in Kenya in 2014.

Edited version of Report Submitted by Prof. Krisana Pengsaa, Secetary General, 9th ICT President, TCISTP

### **News from National Pediatric Societies**

#### September 2011

#### 23, Sharjah UAE

The Indian Academy of Paediatrics (IAP) started its first foreign branch in UAE with the name IAP Emirates. The branch is officially affiliated to IBPC- (Indian Business and Professional Council) harjah. The event was attended by 600 delegates and attendees from all parts of UAE. The workshops and CME lectures were conducted by a panel of eminent faculty IAP Indian Academy of Pediatrics. This CME had the unique distinction of being accredited by all three health authorities of UAE — MOH, DHA and HAAD. The inauguration was in presence of a large audience at the Sharjah Cultural Palace Auditorium followed by a two-day international event featuring an Oration, Workshops and CME lectures. The inauguration was by HE Shri Sanjay Verma, Consul General of India, Dubai in the presence of Shaikh Mohammed bin Saqer Al Qassimi, Director, Sharjah Medical

district, Sheikh Majid bin Hamad Al Qassimi, Sheikh Sultan bin Majid Al Qassimi, Mr. Faisal Al Midfa, Ministry of Health, Sharjah, Dr. T U Sukumaran, President Indian Academy of Pediatrics, Dr. MKC Nair, President, National Neonatology Forum (NNF). Dr. Sunny Kurian, President, IAP Emirates said that "the first overseas branch of IAP will play a crucial role in developing the knowledge base of Paediatricians in this part of the world". IPA presence Dr. Swati Y Bhave President IAP 2000 and IPA coordinator for IPAAAP global Tobacco Control program gave the oration on adverse effects of Tobacco in children and teens (more details in the Bouquet section).

Edited version of report submitted by Dr. Tanmaya Amladi Secretary General Indian Academy of Paediatrics

### **News from collaboration between National Pediatric Societies**

#### October 2011 6-8, Beirut, Lebanon

18 th congress of the Union of Arab Pediatric Societies, the 8th Lebanese Pediatric Society (LPS) congress & the 5th Pan Arab Pediatric Nephrology Association congress

The meeting was organised by the LPS headed by Prof Joseph Haddad. The meeting was held at the Lebanese Order of Physicians building in Beirut Lebanon and was attended by almost 1200 participants from the middle and East areas as well as north Africa countries. In addition, delegations from Turkey, Greece and Cyprus were present. The following societies and professional bodies were involved: IPA, 22 societies of the Arabic countries, WHO, UNICEF, Turkish, Hellenic, Cyprus paediatric societies, Lebanese Order of Physicians, Lebanese Order of Nurses, Lebanese Society of Obs Gyn, Lebanese Society of Perinatal Medicine. Representation from IPA presence: Prof Andreas

Konstantopoulos, President Elect IPA and IPASC members: Prof. Enver HASANOGLU, Prof Joseph HADDAD and Dr. Ali Halabi The meeting was accredited 47 CME points, the most

highly ranked congress in lebanon for 2011. More than 200 speakers and chairmen participated to the meeting. Four our amphitheaers were running at the same time for 3 days. The scientific program included topics on epigenetics, nutrition, environment health, vaccination, infections, community pediatrics, and update on all pediatric subspecialities. LPS has issued recommendations at the end of the meeting during a press conference on: breastfeeding and beneficial effects on short, mid and long term outcomes of the human being — nutrition and importance of balanced nutrition emphasising on Omega 3, vitamin D and Iron, vaccinations and RSV prophylaxis — the burden of auto medication in the behavior of parents, especially the abuse of antibiotics and anti cough medicines the effects of media and TV in children and adolescents the drug abuse in adolescence.

Edited version of report submitted by Joseph Haddad IPASC member

### 55th Turkish National Pediatric Congress, and First Italian — Turkish Pediatric Meeting

October 2011 12-15, Antalya, Turkey

55th Turkish National Pediatric Congress was held at the Congress Center of Rixos Sungate Hotel in Antalya, Turkey on October 12–15, 2011 with the participation of more than

1400 pediatricians from Turkey. In addition to Turkish speakers, Berthold Koletzko (Germany), Marin Burlea (Romania), Zeljko Roncevic (Bosnia and Herzegovina), Mahmoud Elshandidi (Saudi Arabia), and Hanns Haberlein (Germany) were invited speakers. Turkish National Pediatric Society hosted the "First Italian-Turkish Pediatric Meeting" during the annual pediatric meeting in October 15, 2011, in Antalya, Turkey. In the Opening Ceremony, Enver Hasanoglu (Secretary General, Turkish National Pediatric Society) and Salvatore Vendemmia (President, Societa Italiana di Pediatria Ospedaliera) have had opening remarks, Murat Yurdakok (Past-President, Turkish National Pediatric Society) made an Opening Lecture entitled "Italian Contributions to Turkish Pediatrics During Ottoman Empire". In the scientific sessions of the meeting, 11 oral presentations on various topics of pediatrics were discussed with Italian and Turkish pediatricians. Second meeting will be organized by the Societa Italiana Pediatria Ospedaliera in Italy. A protocol for "Russian-Turkish Pediatric Meetings" was

assigned between Scientific Center of Children's Health, Russian Academy of Medical Science) and Turkish National Pediatric Society during the annual national pediatric meeting in 2011 in Antalya, and planned to organize the first meeting in Turkey. Turkish National Pediatric Society and American Association of Pediatrics (AAP) will also be organized a meeting in 2012 in Antalya. Signature Ceremony of Russian-Turkish Pediatric Meetings: Alexander Alexandrovich Baranov (Chairman of the Executive Committee of Union of Pediatricians of Russia) and Enver Hasanoglu (Secretary General, Turkish National Pediatric Society).

IPA presence: Enver Hasanoglu IPASC member.

Edited version of report submitted by Enver Hasanoglu IPASC member

### News from collaboration between National Pediatric Societies AAP and PPS

The AAP has been working with the Pakistan Pediatric Association, working with Dr. Arif, then Dr. Fasih as she took over the PPS leadership. After sending an initial \$10,000, AAP has also sent additional \$54,000 of funds that have been raised for the country needs. AAP had been working in partnership with the Association of Physicians of Pakistani descent of North America (APPNA) on these efforts. The PPS had requested that AAP Friends of Children support be used for typhoid vaccines for children in flood affected areas. To date, they have vaccinated

approximately 17000 children for typhoid in different flood effected areas of Ounjab, Sindh and Khaber Pak Khaw. The PPA plans to vaccinate nearly one million children in the near future. Their plans also include future collaboration with AAP on a disaster preparedness training courses to better serve childrens' needs in future disaster situation.

Submitted by Jonathan D. Klein, Associate Executive Director AAP

### News from Regional Pediatric societies The European Paediatric Association (EPA/UNEPSA)

The Union of National European Paediatric Societies and Associations (UNEPSA) was founded in 1976 by 18 European countries. In the first 30 years of its existence UNEPSA created a forum for the mutual discussion of matters concerning paediatrics. Early on it became clear that the diversity of pediatric care in different countries in Europe is extreme. During the «cold war» UNEPSA was able to cross boundaries between socialist and capitalist countries in Europe, and it was due to the activity of individual members of the UNEPSA council that clinical co-operation and research activities were initiated crossing many political borders. In 2007, UNEPSA was renamed European Paediatric Association (EPA/UNEPSA) and a revised constitution was introduced and approved by the General Assembly. EPA/UNEPSA continues the work of UNEPSA and maintains its character and activities. Annual meetings of national pediatric presidents focus on the most urgent problems of pediatric health care. The main research activities of EPA concentrate on identifying the demography of primary, secondary and tertiary care pediatrics in Europe. EPA constantly plans new activities in an effort to demonstrate that it is an active paediatric association counting 40 member countries and representing today more than three quarters of all European countries.

In 2009, EPA/UNEPSA also opened its doors to individual members. Currently EPA recruits international clinical expert teams for examination of urgent clinical issues in their areas of expertise, and for working on solutions to address those, ultimately with new best practice guidelines. This work will be documented on our website (www.epa-unepsa.org) via published meeting reports and consensus statements. We also continue develop our educational activities through our flagship conference Europaediatrics, our participation in Excellence in Paediatrics, and clinical workshops for all general paediatricians and paediatric sub-specialists in Europe.

Following the past congresses held in Rome (2000), Prague (2003), Istanbul (2008) and Moscow (2009) the 5 th Europaediatrics congress was held in Vienna, Austria, 23–26 June 2011 (www.europaediatrics2011.org) Also, for a third consecutive year, EPA and the Cochrane Collaboration/Child Health Field will actively contribute to the development and delivery of a focused thematic stream in the context of the prestigious annual international conference Excellence in Paediatrics (www.excellence-inpaediatrics.org). Following a focus on nutrition in 2009, and respiratory medicine in 2010, this year's conference to

be held on 2-3rd Dec at Istanbul, Turkey will on pediatric dermatology and particularly the ongoing challenge to help paediatricians acquire the necessary skills to integrate evidence based medicine into their day to day practice. In addition, a new highly interactive version of the EPA website (www.epa-unepsa.org) is currently under development focusing on the concept of «working and learning together». The new website will include utilities for individual members and national societies and up-todate contents such as news, education through e-learning opportunities and discussion threads for visitors. EPA also runs campaigns for improved paediatric practice across Europe. For the future, EPA has developed novel ideas to stimulate European paediatric innovation, based on modern web technology. These ideas aim to address unmet industrial innovation needs and to stimulate innovative thinking among interested EPA members. Current examples that could quickly be developed into real projects include a paediatric problem solutions exchange, and a web centre for clinical trials that could potentially dramatically speed up paediatric patient recruitment. EPA announced Evidence Based Child Health: A Cochrane Review Journal as the Official Journal of the association at the beginning of 2009. The journal is edited by the paediatric leadership within the Child Health Field of the Cochrane Collaboration and their mission «to ensure that children and adolescents receive effective interventions for the best health outcomes based on up-to-date evidence» is closely aligned with the EPA vision. The Journal provides EPA members the opportunity to benefit from the relevant, timely and topical Cochrane systematic reviews in a

synthesised and easily accessible format. The aim is to allow all readers put evidence-based decision making in their child health practice. EPA/UNESPA also publishes a quarterly e-newsletter which is accessible through the associations website (www.epa-unepsa.org).

After more than 30 years, EPA/UNEPSA is still an expanding and vital instrument in improving the medical care of all children and the co-operation of their caretakers in Europe.

The EPA/UNEPSA Council: *President*: Andreas Konstantopoulos, Hellenic Paediatric Association (GREECE); President Elect, IPA *Secretary General* Massimo Pettoello-Mantovani, Institute of Pediatrics, University of Foggia (ITALY), Vice President, Alexander Baranov, Union of Paediatricians of Russia (RUSSIA). *Vice President* Manuel Moya, Pediatric Department, University M. Hernandez/Hospital U. S. Juan (SPAIN) Councilors Fugen Cullu Cokugras, Cerrahpasa Tip Fakultesi; Cocuk Sagligi ve Hastaliklari ABD; Pediatrik Gastroenteroloji (TURKEY). Laszlo Szabo, Hungarian Pediatric Association; Borsod County University Teaching Hospital; Child Health Centre (HUNGARY). *Treasurer* Jochen Ehrich, MHH Children's Hospital (GERMANY) Past President Armido Rubino, Department of Paediatrics, University Federico II (ITALY).

President of 5th Europaediatrics

Wilhelm Kaulfersch, Department of Pediatrics & Adolescent Medicine, General Hospital of Klagenfurt (AUSTRIA).

Submitted by Andreas Konstantopoulos, President Elect IPA and President EPA/UNESPA council

### **News from IPA website**

IPA Webmaster Dr. Naveen Thacker Dr. Naveen Thacker has taken the challenge of upgrading the existing IPA Website Our website **www.ipa-world.org** is a great tool of communication for pediatricians around the world. New Features that are going to be added are:

- Language translator tool: User has the option to view the site in his or her language the site will be converted in seconds to his selected language
- Member societies can be located on Google Map with its contact Details/Upcoming events, News.
- IPA Virtual Learning System: Online Training, Online examination/evaluation, Online Survey, Real-time Results of surveys and Tests, On-line Polls
- Dynamic Chat area fully controlled by admin and can be used for secure inter office and intra office communication tool
- IPA TV channel on YouTube, IPA on Facebook so that societies can stay in touch — Social Media website link Face book, tweeter etc.
- Print/PDF/Email/Change Font/Share tool
- Stay up to date: Register once and you will get automated email, Newsletter,

- Dynamic Chat area fully controlled by admin and can be used for secure inter office and intra office communication tool
- IPA TV channel on YouTube, IPA on Facebook so that societies can stay in touch — Social Media website link I Face book, tweeter etc.
- Print/PDF/Email/Change Font/Share tool
- Stay up to date: Register once and you will get automated e-mail, Newsletter,
- Dynamic Events/News/Change contact details One Page for each member societies
- EVENTS: Powerful calendar to view day wise, month wise year wise, print events of any day/month/year, search whole database of events, list view to see all events on one page, e-mail reminders can be sent automatically to the members
- Share files, Photo Gallary Tool
   We wish him all success to make our IPA website a state
   of the art soon

Editor Swati Y Bhave

### **Bouquets**

Professor Alexander Baranov who celebrates his 70-th anniversary this year. He is a leading pediatrician, famous scientist, physician and teacher, a great organizer of pediatric health care in Russia, the Chairman of the Union of pediatricians of Russia-which has 80 thousand pediatricians. He is the Vice-

President of the European Pediatric Association and Russian Academy of Medical Sciences. Professor Baranov heads main federal pediatric center in Russia — Scientific Center of Children's Health. Warm wishes from all his colleagues around the world! Aspecial CD was made on this occasion.

#### Section — OBITURY

Niilo Hallman, emeritus professor of paediatrics, University of Helsinki and the former head of the University Children's Hospital died after prolonged illness in Helsinki at 13th January, 2011 in age of 94-years. He was born in Kuopio, Finland at 15th July 1916. Hallman graduated as MD (Univ. Helsinki) in 1943. From 1939, he served as a medical officer in the Finnish army during the war period. He was also active in research from early on, finishing his extraordinary PhD thesis during his MD studies. After war, he found his way straight into paediatrics, which had been his mission since childhood. Already in 1947 he got a U.S. fellowship at the Children's Hospital in Boston as the first research assistant of the recently appointed professor of paediatrics at Harvard Medical School, Charles Janeway. In James Gamble's laboratory he studied pathophysiology of nephrotic syndrome and especially the electrolyte balance. These studies opened the doors to several directions: first of all to paediatric nephrology, where he was one of the founding members of European and international societies and to medical genetics. Prompt application of knowledge resulted striking decrease in the risk of lethal diarrhea during late 40ies and early 50ies in Finland. Few years later he published early studies on congenital nephrotic syndrome. Hallman was appointed to professor of paediatrics (Univ. Helsinki) in 1957 and thus he became also head of the new, large Children's hospital, leading of which required lot of his energy during the years until his retirement in 1983. In addition to his everyday activities as university teacher, paediatrician, hospital manager, scientist and leader of many national societies and organizations Hallman was especially interested in international issues, i.e. developing internationalization of paediatrics. His first post-war contacts were with Sweden and other Western European countries and with USA. He was a founding member the European Club of Paediatric Research (predecessor of ESPR) in 1953 and European society of his own subspecialty, nephrology. An important forum of internationalization was IPA, which congresses Hallman and a group of Finnish paediatricians attended regularly since the New York meeting in 1947. He was elected treasurer of this society in Mexico in 1968. That was the start of his 30-year career as a board member of IPA in different roles, including treasurer, director, vice-president, president, past president and coordinator. As a member of the board he took the initiative in founding continental-wide paediatric unions for Europe (UNEPSA) and Africa (UNAPSA). The African union needed a lot of supportive activities from the IPA, which was then mediated often by Hallman. His closest friend among IPA leaders was prof. Ihsan Dogramaci: both Hallman and Dogramaci were nephrologists educated by Janeway and both about the same age, thus developing life-long friendship and also cooperation between Turkish and Finnish paediatricians. The activities of IPA initiated Hallman's interest in child health problems in developing countries, which again was the start of the real globalization of Finnish paediatrics. In cooperation with a Finnish child welfare society he established rural health centres in three African countries (Nigeria, Uganda and Malawi) including health education activities and regular maternity and health centres. His son is professor Mikko Hallman in Oulu university (Mikko.Hallman@oulu.fi) submitted by Jarmo Visakorpi, Professor (emeritus) of Paediatrics, University of Tampere, Finland 1,2 & 3 (Combined)