

Healthy Children for a Healthy World



INTERNATIONAL PEDIATRIC ASSOCIATION

www.ipa-world.org

IPA NEWS LETTER OCTOBER-DECEMBER 2010

VOL 6 - No. 4

Message From The President

Dear friends and colleagues, ladies and gentleman, this is the last 2010 issue of IPA's newsletter. We're now 4 months from our inauguration and are happy to say that many good things were done and we keep moving on. IPA participated in meetings around the world, giving a voice to pediatricians and children. The PMNCH meeting in India (which, as most of you know, is a major forum for the achievement of MDGs), National Societies' Boards meetings in Venezuela, Mexico, United States and Russia were some of the important events attended by your officers and executives, spreading our messages and programs.



IPA was also invited to write jointly with FIGO a commentary in Lancet, at the launching of a series of papers on stillbirth. It is needless to stress the importance of these publications, in which our Treasurer, Prof. Zulfiqar Bhutta is fully enrolled. The co-participation strengthens even more our links

with our colleagues from FIGO and paves the way to a constructive and mutually beneficial association.

Communication with our constituency, the pediatric community and the health sector is essential to our successful work during the forthcoming years. Our newsletter will be a strong instrument on this endeavor.

One of our goals is the establishment of a strong and functional link between our programs and the Regional/National Member Societies. Once this is achieved we'll be much more able to deliver our actions and programs at the grass roots level worldwide, where they can mean real benefit for children.

We invite all our Member Societies and the Pediatricians and children they represent to engage in this process. Visit our website at www.ipa-world.org and learn more about our organization, send your requests and ideas. Only together we can mean a real change in people's lives.

Warm regards

Sergio Cabral



From the Desk of the Editor



Dear friends

This is the last and fourth volume of the IPA newsletter for the year 2010. Many of you enjoyed reading the 3rd volume of July-Sep 2010 that gave the IPA congress news and the new office bearers of IPA for the term Aug 2010 to Aug 2013. I thank you for the appreciation.

This volume contains news from some program areas of IPA namely Adolescent Health, Child Health and Environment and Early Childhood development. It also gives comprehensive news about IPAs participation in important meetings like PMNCH and GAVI and IPA involvement in various WHO workshops that are conducted in various regions. We also have news from our national Paediatric society and regional paediatrics society meetings.

In collaboration with WHO, the IPA Program area on adolescent health has developed a IPA WHO resource kit for orientation of paediatricians for adolescent health. The details of this module are given in this issue. If any country is interested in holding a orientation program for this kit, please contact me at swatiybhave@yahoo.com with your request and I will inform you about the process

We request you all to help in making the newsletter more interesting and informative. Please send news of events from your national and regional societies with one or two attractive pictures. We welcome information about any awards or recognitions you have received with short details and a passport size colour photo. We also would appreciate to have information about the sad demises of people who have worked for IPA with details of the work they have done as a memory and to pay homage and tribute to them.

We have a readers response section to put down your comments. Your appreciation motivates me to continue putting in the time and energy required to sustain this effort. Your constructive criticism and suggestions will help in further improving the news letter

Wishing all the readers a very happy and prosperous New year 2011

Yours in IPA service

Dr Swati Y Bhave



News from Collaboration with International agencies

October 19-21, Yerevan, Armenia,

WHO Inter-country meeting on improvement of hospital care for children

WHO Regional Office for Europe organized the first inter-country meeting on improvement of the quality of paediatric hospital care. The meeting was aimed at evaluating results of the experiences carried out in the European Region, which includes CIS countries including Central Asia, in assessing and improving quality of care at hospital level and develop and disseminate evidence based guidelines for paediatric care. Participants included leading paediatricians and representatives of Ministries of health from over 20 countries, mostly from Central and Eastern Europe and Central Asia. Country wide assessments of quality of care and quality improvement processes have been carried out in the Region since 2002 and involved so far 8 countries. Other countries are developing evidence based guidelines, usually with support from WHO

IPA was represented by Giorgio Tamburlini, who was also one of the organizers of the meeting and who presented the Regional experience and discussed the main issues and policy implications, EPA/UNEPSA was represented by Lazlo Szabo.

Conclusions and recommendations

Quality care for children is the delivery of safe, effective, equitable and mother and child friendly interventions to ensure the best possible health outcomes to all children

For health manager policy makers and health professionals, provide quality medical care is an ethical imperative. For mothers and children, quality of care is a right

The participants of the first inter-country meeting on hospital care for children, held in Yerevan, Armenia on October 19-21, recognize that:

- Quality of care for children, at both primary care and hospital care level, has been shown in several systematic assessments conducted in the CEE/CIS countries to be poor or suboptimal. Excess or ineffective treatments, excess of hospitalization, poor implementation of existing guidelines are still common in many countries.
- In countries with a high coverage to primary and hospital care services, such as CEE/CIS countries, quality of care is a key issue to reduce maternal newborn and child mortality and morbidity
- The lack of quality besides putting at risk the health of mothers, newborns and children, causes inefficient use of resources, resulting in net cost for the health system and for the households
- There are unacceptable differences (by social status, gender and ethnicity) in the quality of care delivered and they contribute to inequity in health outcomes.
- Examples of good and even excellent quality of care were also observed, showing that safe, effective and child-friendly medical care can be provided, and that existing deficiencies in health system organization, hospital infrastructure and availability of equipment drugs and supplies can be overcome by good management and excellent professional competences.

Assessments and evaluations show that the main **obstacles** to deliver safe effective and child friendly care are

- a) the **curricula of background and the post-diploma training** of most health professionals, which do not provide the scientific and methodological basis to ensure compliance with international standards, develop the capability for continuous updating, the attitude to collaborative team work and attention and responsiveness to mothers' and children's needs;
- b) the lack of **incentive systems** for health facilities as well as for individual professionals to deliver quality care, and make an effective use of resources according to international guidelines
- c) the lack or inadequate system of **certification and accreditation** based on quality criteria including adequate supplies, optimal case management and mother and child friendly care.



- d) the inadequate **remuneration of health professionals and the parallel lowering prestige of health professionals, particularly those devoted to child care such as pediatricians**, which put at risk their independence vis-a-vis the pharmaceutical drug and vaccine industry, increase the likelihood of informal payments and of inappropriate medical interventions.

WHO developed a series of tools to guide to evidence based hospital care for children at all levels (IMCI, Paediatric Hospital care Guidelines, relevant training manuals and teaching aids), assessment tools for quality of care at hospital level, and software for distance learning (ICATT). WHO, UNICEF with the assistance and support of other partners has provided technical support to assess and improve quality of care in an increasing number of countries.

An increasing number of countries have engaged in recent years in programmes of assessment and quality improvement of care for mothers, newborn babies and children, and preliminary results show that these approaches are effective to improve quality of care and improve attitudes knowledge and skills of health managers and health staff, particularly when based on peer-review participatory assessments – such as as those proposed by WHO - on quality improvement cycles and supportive supervision.

The participants draw the governments and MoHs attention to the health, social and financial costs of the existing gaps in quality of hospital care for newborn babies and children and call MoHs to **strengthen their stewardship role** in assessing and improving the quality of care.

Options to be considered to address the current gaps and obstacles to better quality of care for children, **along the continuum from mother newborn child and adolescent care** and from community and PHC to hospital and referral care, include

1. Giving priority to quality improvement methods based on supportive supervision & peer review standard-based systematic assessments, using the available WHO tools (assessment tool and “beyond the number” approaches as far as maternal health is concerned)as well as other approaches provided that they have been validated internationally.
2. Introducing performance based financial and not financial incentives and child focused criteria for certification and accreditation of health facilities and licensing/relicensing mechanisms for health providers.
3. Strengthening professional associations to build their capacity to develop and implement guidelines, develop local protocols, etc.
4. Empowering the role of patients and patients association in CQI, identifying mechanisms to make patients' voice heard and ensuring feedback from the patients to health managers and health providers, and including patients' view in quality assessment and accreditation criteria.
5. Incorporating the contents of WHO guidelines for paediatric care, and EBM methods to guideline and protocol development in both pre-service curricula and in CME, promoting Training of Teachers to build capacity among Faculty members and in professional organizations, and introducing innovative training tools and methods, such as ICATT.
6. Ensuring appropriate distribution of paediatric professionals across level of care, including subspecialty care, as well as defining the standards and ensuring the adequate supplies drugs, and equipment by level of care.
7. Overcoming the current fragmentation of referral paediatric care by subspecialty hospitals by ensuring comprehensive integrated hospital care for medical conditions of children.
8. Ensuring access to new Information Technology in all hospitals.
9. Promoting a child rights approach to hospital care by introducing clear criteria informed to the CRC and to the Charter for Children in Hospital' by the European Association for Children in Hospital (EACH).
10. Enhancing communication through media to support behaviour change among health professionals and among users for appropriate and child friendly use of health services for children.

Recommended actions

a) For Member States

1. Each country, according to assessment of the quality of care provided to children and taking into account the health care systems and institutional reform context, should identify the best combination of policies and actions, among those mentioned above, to be put in place to ensure quality of care to all children. Best practices in



improving quality of MNCH should be evaluated, communicated and brought to scale, and methods incorporated in the current development plans regarding Quality of care.

2. Partners should be identified at country level that can provide support, leadership and professional expertise in the process of implementing guidelines and improving quality of care, with emphasis on professional associations and users' associations.

b) For WHO and partners

To provide technical support to MoH in

1. developing concept and tools and implementing supportive supervision;
2. carrying out systematic assessments of quality of hospital care;
3. building national capacity in quality assessment and development of practice guidelines;
4. updating pre-service and in-service training and adopt innovative training methods;
5. exploring, together with partners, how financial and non financial incentives and accreditation mechanisms may be used to improve quality of care;
6. reviewing country experiences to ensure child rights in the hospital/health system as a basis to take action.
7. identifying centres of excellence within the Region that may provide support in the dissemination of relevant materials, such as systematic reviews and updates in Russian language.
8. continuing support to documentation and dissemination of best practices.

c) For Professional associations

National Pediatric Associations, EPA/UNEPSA and IPA commit to support this process by:

1. Providing technical support, model trainings and including topics related to Quality care in meetings and congresses
2. Promoting twinning programmes, exchanges of information, professional networking and international benchmarking on quality of referral care by subspecialties
3. Providing support to the development and dissemination of guidelines in specific areas of paediatric care, building on the experience made in paediatric neurology, in collaboration with the European Society for Paediatric Neurology.

Report submitted by Gergio Tamburlini IPA Technical Advisor on program for Quality care in children





November 29-December 3, Zanzibar Tanzania

Consultative Group on Early Childhood Care and Development (CGECCD) Annual Meeting

The Group which is a conglomerate of about 40 International organizations (like WHO, UNICEF and UNESCO), NGOs, Donors, and other civil society stake holders, aimed in this meeting to design a global campaign of early childhood, discuss and priorities solutions to address ECD, explore emerging possibilities for strengthening links with health and nutrition sectors, and agree upon strategies to support advancement of ECD within the various regions of the world.

Dr. Mohamad Mikati, member of the Standing Committee of the International Pediatric Association (IPA) and liaison officer between the IPA and International Child Neurology Association was an invited speaker in this meeting. He gave three presentations. The first was about the advances in understanding neurobiology of brain development and how this understanding is supporting the importance of ECD interventions and shaping the underlying strategies. The second talk was about the IPA program on ECD which Dr. Mikati leads. He presented the activities of this program that include workshops, resource material, training in Care for Child Development skills, studies, review articles, and a book on developmental interventions. An oversubscribed IPA-WHO-UNICEF workshop in the August IPA Congress in Johannesburg was a landmark activity of the program and a similar and even more advanced workshop is one of the aims to accomplish in the 2013 Melbourne Congress. The third talk was to present the results of an analysis of cost effectiveness of ECD interventions that demonstrated the economic benefits of ECD programs not to mention ethical and social benefits.

Other talks centered on inequities in ECD opportunities in many countries in the world and how to correct them, about financing of ECD interventions, progress reports of national and regional programs, Education For All initiative, the Lancet Series on Childhood Development. Discussions centered on these topics and on the four cornerstone principles of the Consultative Group (starting early, providing new opportunities, making school ready for children, and ensuring development of appropriate policies) and how to use them to shape the agenda and future activities in ECD interventions. Final discussions centered on planning for a global campaign for ECD and on strengthening the relationship between various organizations in the Consultative Group and with other stake holders such as the Health and Education Sectors and NGOs like the ICNA and the IPA.

Submitted by Mohamad Mikat IPA Technical Advisor Early Childhood Development (ECD)



Dr. Mohamad Mikati lecturing in the Consultative Group on Early Childhood Care and Development Meeting in Zanzibar, December 1, 2010.



Dr. Youssef Hajjar (right), President and Louise Zimanyi, Director of the Consultative Group on Early Childhood Care and Development with Dr. Ghassan Issa (left) Head of the ARC (Arab Resource Collaborative) during the Group's Meeting in Zanzibar, November, 29-December 3, 2010.



News from IPA and International Collaboration

November 12-14, New Delhi India PMNCH meeting



Organized by the Partnership on Maternal, Newborn and Child Health (PMNCH). Hosted by The Government of India. Officiating Guests at Opening Ceremony: President of India. Purpose: High-level political event to consolidate commitments and accelerate progress toward MDG 4 & 5. The meeting was held in 2 parts: The Forum and the PMNCH Board Meeting.

Vinod Paul, Professor of Pediatrics at the All India Institute, played a major role in organizing and directing this Forum in conjunction with the government of India; He is the PMNCH Newborn Academic Board representative and co-Chair of the PMNCH Board. Zulfiqar Bhutta treasurer of IPA presented one of the Forum keynote addresses.

IPA officially represented by Bill Keenan (ED), Zulfi (IPA Delegate at PMNCH Board) and Chok-wan (IPA Alternate Delegate). Others who attended were Jane Schaller former IPA ED (PMNCH Child Academic Board representative), and SverreLie (alternate Child Academic Board representative). Naveen Thacker, Cherif Rehemy and Swati Bhawe. There were also members from the Indian Academy of Pediatrics

IPA has been active on the PMNCH Board ever since the PMNCH founding in 2005, and was previously a member of each of the three Partnerships which joined forces to create PMNCH in 2005 (Child Survival Partnership, Healthy Newborn Partnership, Safe Motherhood Partnership). As reported over the past years, IPA has been active in the Health Care Professional Association Group (HCPA) of the PMNCH Board, and also in the Academic Research and Training group of the PMNCH Board.

In 2010, the global community is two-thirds on the way to the target date of achieving the Millennium Development Goals (MDGs) by 2015.

Background of the Partners forum

Over the past decade many countries have taken significant steps towards reaching the MDGs. There is need for renewal energy and commitment in this last stage, particularly as related to achieving MDGs 4 and 5.

In 2010, many high-level meetings have emphasized the importance of maternal, newborn and child health (MNCH) including G8 summit in June 2010, the African Union Summit on MNCH and the MDG Summit/Un General Assembly in September 2010

The Partners' Forum in 2010 in Delhi recapped commitment pledged through this important year and provided a platform for developing strategies and networks that promote accountability for these pledges.

The program of the Forum built on the PMNCH Consensus and Joint Action Plans by featuring success stories in financing, delivery and accountability, identifying innovative strategies, policies and programs that can be scaled up for changes.

This is the Second full meeting of PMNCH partners. The First Full Forum was held in Dar es Salaam, Tanzania in April 2007. It also marks the 5th Anniversary of the launch of the Delhi Declaration at the "Lives in Balance Conference" at which The Partnership for Maternal, Newborn and Child Health (PMNCH) was born. Zulfi and Chok-wan were present at the 2005 Forum. IPA has been member of the healthcare professionals within the Partnership since its inauguration.

At its five anniversary since inauguration, PMNCH has more than 300 partner organizations including governments, multilateral organizations, donors and foundations, civil society organizations, healthcare professional associations, and academic, research, and training communities

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Goals of the meeting were :

- Putting a human face on the issues to encourage ownership and action
- Profiting innovations and partnerships for scaling-up changes (i.e. access to quality care)
- Enabling partner exchange and mobilization, and mechanisms for tracking progress
- Promoting strategies and networks among public- and private-sector partners to ensure accountability for commitments made to the Joint Plan

The three key themes were

Voice and Accountability: Supporting communities to speak out about MNCH issues and ensure accountability of all stakeholders

Innovation for changes: highlighting innovation in MNCH – political, financial, delivery of interventions, technology. Success stories will be featured.

Engaging all Actors: expanding partnership beyond the MNCH community to include other health communities (HIV/AIDs, Malaria), as well as other sectors that determine MNCH outcomes (water and sanitation, nutrition, education, gender etc)

Major deliverables were

- Face to face meeting for all partners for direct exchange of views and ideas amongst the major stakeholders
- Platform for enhancing good consensus for opinions
- Excellent solidarity and enthusiasm for achieving the targets
- Meeting Declaration for strategic actions plans

All agree to meet again in 2015 in Delhi to audit the final achievement of the MDG's

The PMNCH Board Meeting was held on 15th November 2010

IPA represented by Zulfi and Chok-wan. Jane Schaller has the academic seat and she is due for retirement at the end the Delhi Meeting

The Board reviewed activities and actions since the last meeting in Dhaka, Bangladesh. The Global Strategy for Women's and Children's Health – Commitments from Health Care Professional Association" was adopted with commendation. There were extensive discussions on the future directions and activities of the Board having taken up innovations and ideas from the Forum.

This Forum and Board meeting were notable events for the global MNCH and MDG communities. The primary focus was on the UN Secretary General's recent MNCH initiative (The UN Global Strategy for Women's and Children's Health) which was launched in September 2010 at the UN MDG Summit in New York. Bill Keenan represented IPA at this UN Summit meeting.

With approximately 1,200 participants from 33 countries, including 11 ministers, it allowed for in-depth discussions amongst a wide range of partners from all constituencies. The results of these deliberations are captured in Delhi Declaration 2010, endorsed by the groups present at the meeting. In addition, every constituency, including governments, multilateral agencies, donors/foundations, the private sector, civil society, health professional associations, academia, parliamentarians and the media, agreed on their own specific commitments and role towards the implementation of the Global Strategy for Women's and Children's Health. All the information about the Forum is being updated in the Forum and PMNCH websites, please see the links available from <http://www.who.int/pmnch/en/>, including links to the press release,

http://www.who.int/pmnch/media/press_materials/pr/2010/20101112_partnersforum_pressrelease/en/index.html

Delhi Declaration 2010: Outcome document from the PMNCH Partners' Forum

We the partners of the Partnership for Maternal, Newborn and Child Health:

- Welcome the commitments and outcomes that world leaders agreed to in the Global Strategy for Women's and Children's Health launched at the MDG Summit in September 2010; and encourage further commitments to funding fully costed national plans for achieving MDGs 4 and 5.
- Shall work with governments and other key stakeholders to transform into action the pledges made in the Global Strategy.

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- Will act on the emerging consensus on priority, evidence-based interventions, and ensure these are articulated in the form of national plans and implemented equitably at scale through the continuum of care, in order to achieve the agreed results for women's, newborns' and children's health.
- Agree to shared principles for advocacy, action and accountability:
 - o A core set of indicators, integrated into country monitoring and evaluation mechanisms, so all partners are accountable for the commitments and results agreed to in the Global Strategy.
 - o A multi-stakeholder process to ensure inclusiveness and participation, including the most vulnerable and marginalized.
 - o Harmonization of existing efforts to ensure that there is complementarity between partners' work.
 - o Regular progress reports to the World Health Assembly and UN General Assembly.
- Shall collaborate with WHO to speedily implement the role it was tasked with in the Global Strategy, to: "chair a process to determine the most effective international institutional arrangements for global reporting, oversight and accountability on women's and children's health".
- Affirm the Partnership for Maternal, Newborn and Child Health is an active participant to track commitments and results and thus ensure mutual accountability.
- Agree to regularly monitor and report on progress, and meet again in 2015, in Delhi, to evaluate the achievement of our shared global commitments to women's, newborns' and children's health, development and human rights.

Edited and complied version of news submitted by Chok Wan Chan, Bill Keenan, Jane Schaller



Venue of the Congress, Vigyan Bhavan



IPA delegation with Elizabeth Mason WHO



Dr Chok Wan Chan with Indian delegates



THE GLOBAL ALLIANCE FOR VACCINES AND IMMUNIZATION (GAVI)

MEETING OF THE CIVIL SOCIETY ORGANIZATIONS CONSTITUENCY STEERING COMMITTEE

IPA can take well deserved pride in the fact that GAVI has now supported and is funding a formal CSO (Civil Society Organization) Constituency. This Constituency includes a group of organizations which recognize the importance of immunization in global health and achievement of the MDGs. It is governed by an appointed Steering Committee of twenty members which includes three pediatricians: Clarisse Loumou (former President of the Cameroon Pediatric Society, representing Alternative Santé to GAVI, one year term), Naveen Thacker (representing the Indian Academy of Pediatrics, one year term), and Jane Schaller (representing IPA, two year term).

The GAVI CSO Steering Committee has now developed a CSO Charter which includes regulations for applying for GAVI CSO membership as an organization or as an individual. This Charter and the GAVI Membership forms can be accessed through the IPA web site www.ipa-world.org. We urge all IPA Member Societies, as well as any individual Pediatricians who are interested, to join the GAVI CSO group at no cost and with great benefit of being linked to an active group concerned with vital global health issues.

This GAVI CSO Constituency came to be through the efforts of IPA representatives and a few other CSO activists who have pushed this effort since the beginnings of GAVI in 1999 – 2000. This effort came to fruition while IPA (represented by Nike Grange and Jane Schaller) represented Civil Society Organizations on the GAVI Board of Directors from 2004 to 2008. For a global power partnership like GAVI to come to recognize that Civil Society has an important voice to contribute to global health issues has been a most worthwhile achievement.

IPA has made a similar push for an effective CSO voice within PMNCH (The Partnership for Maternal Newborn and Child Health), focusing on the voices of Health Care Professional Organizations and Maternal Newborn and Child Health (MNCH) Academicians.

Now IPA and our CSO colleagues bear the responsibility of bringing informed positions and suggestions to these global tables, and promoting meaningful action on them. Actions most needed in these years leading up to the MDG achievement deadline of 2015 are enabling meaningful country level action that will demonstratively improve MNCH. This is a task that IPA has the connections and the know-how to foster. Together we Pediatricians have both important roles to play and important commitments to keep!

Again, we urge IPA National, Regional, and appropriate Specialty Societies to apply for membership in the GAVI CSO Constituency, and also welcome individual membership applications from any interested individuals.

Report submitted by Jane Schaller IPA ambassador Former ED IPA and GAVI CSO Constituency Steering Committee Member



News from Program Areas

IPAAP tobacco control program

(jointly being done with AAP by two program areas of IPA - Adolescent Health and Environment and child health)

Collaboration with International agencies: WHO Asian Pacific Region Launches Tobacco Control Training Network for Children and Youth

IPA and the American Academy of Pediatrics Julius B. Richmond Center are working with the World Health Organization Asian/Pacific Tobacco Free Initiative to develop a network of national training centers to develop, sustain and promote programs to address child health and tobacco control in their countries, and to strengthen clinician leadership and support training among primary health care workers engaged in maternal and child health. The health sector plays an important role in tobacco control, not only in terms of education of their patients and their families, but in terms of leading key advocacy initiatives and participation in the development of health policy central to their governments work and practice. And yet studies show that there is a low awareness of the importance of integrating tobacco control measures in child and adolescent health programmes and services among health professionals in general. Child health and tobacco control is a strategic entry point for building capacity within the health sector. The alignment of child health is universally valued and a high priority of governments. Training on child and adolescent health and tobacco control is a critical entry point to raise awareness, impart knowledge and understanding and enhance skills of health workers. Thus, engaging pediatric leaders in advocacy and leadership makes imminent sense. Clinicians can help individuals quit effectively, help communities adopt policies that promote smoke-free environments, and help families ensure that children are protected from second-hand smoke.

The IPA recently adopted a policy on second-hand smoke and children see

http://www.ipa-world.org/Program_Areas/Documents/IPA_Policy_Secondhand_Smoke_and_Children.pdf

supporting 1) increasing the unit price for tobacco products, 2) mass media education campaigns, and 3) community mobilization to restrict children's access to tobacco products.

In December, 2010, the WHO Tobacco Free Initiative (Dr. Susy Mercado, Director) and the WHO Adolescent health initiative (Dr. Marianna Trias, Director), convened a meeting of experts and 25 stakeholders in paediatric and adolescent health training and education to build a network of institutions that can develop, sustain and promote programmes to address issues and problems related to child and adolescent health and tobacco control in countries.

One third of the world's smokers reside in the Western Pacific Region where it is estimated that two people die every minute from a tobacco-related disease. Children bear a heavy burden from tobacco use. Tobacco use is a pediatric disease. Initiation to smoking, habitual use, and addiction often starts during the early teen years, before children understand the consequences of their behaviors, and long before the age when the capacity to control impulsive behavior develops. The Global Youth Tobacco Survey shows that 13.8% of students aged 13-15 currently smoke and would like to stop, but there are limited programs or services to address cessation needs of young people.

Dr. Jonathan Klein (USA), AAP Associate Executive Director, IPA Technical Advisor for Non-communicable diseases and co-director of the IPA/AAP project on tobacco and children, is also serving as temporary scientific advisor to WHO for this project. Dr. Judith Palfrey (USA), AAP Immediate past-President, and Dr. Susan Sawyer (Australia), Director, Centre for Adolescent Health, Royal Children's Hospital in Melbourne, Australia, also served as temporary Scientific Advisors to WHO.

The goal of the meeting was to convene pediatric leaders and public health tobacco control leaders from the member countries to (1) share and discuss how tobacco control can be applied to improve the health of children and adolescents in countries; (2) identify entry points for training and capacity building on child and adolescent health and tobacco control; and (3) develop a plan of action for a network of training institutions on child and adolescent health

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and tobacco control. Representatives from ministries of health and leaders from Pediatric societies from China, Vietnam, Fiji, Mongolia, Singapore, Malaysia, Japan, and the Philippines attended the session. The group convened a network of child health tobacco control leadership in each country to address clinical and policy opportunities to protect children and families from tobacco and secondhand smoke.

Dr. Genesis Rivera, Philippine Pediatric Society President, was elected Chair of the meeting, Dr. Sawyer was elected Vice-Chair, and Dr. Elizabeth Rogers of Fiji was elected rapporteur. Presentations addressed what we know about tobacco and youth and the training of health professionals; the role of pediatricians in tobacco control.

Dr. Klein presented the AAP Richmond Center curriculum for clinical and community tobacco control, which is available to IPA member countries to help disseminate best practices for child health and tobacco control, and Dr. BJ Sablan presented a report on a national training pilot on brief interventions for pediatricians in the Philippines. Please see <http://www.aap.org/richmondcenter/PediatricCurriculumGuide.html> or

<http://www.aap.org/richmondcenter/international.html> for resources.

Each country's participants developed a one year implementation plan to take back and work on together with the team of pediatric and public health participants from their country who were at the meeting. Each country plan included attention to training methodologies and materials on advising parents, youth cessation, changing clinical practice systems to support cessation/quitting, clinical action to promote effective policies to prevent addiction and SHS exposure, and other topics. WHO will be make some resources directly available to the child health tobacco control network participants from within their country's WHO plans, will help organize ongoing technical assistance, and will sponsor a follow up meeting of this training network on child and

adolescent health and tobacco control in the Western Pacific in December 2011, to share progress among the participating teams.

Additionally, a session on Progress on Tobacco Control and Child Survival in Asia will report on progress in dissemination of best practices and activation of paediatric leaders in tobacco control are provided from Japan, China, and the Philippines at the Pediatric Academic Societies/Asian Society for Pediatric Research meetings in Denver, Colorado, USA, in May, 2011. For more information about the PAS/ASPR meeting please see <http://www.pas-meeting.org/2011Denver/default.asp>

Report submitted by Swati Bhawe (IPA TA Adolescent Health) Jonathan Klein (Deputy Director AAP) and Ruth Etzel (IPA TA Environment and child health)



Susan M. Sawyer, Judith S. Palfrey, MD, AAP Past-President facilitate the participants discussion of their action plans for child health and tobacco control



Susan Mercado, Regional Adviser, Tobacco Free Initiative, WHO Regional Office for the Western Pacific Region and other participants work on country specific plan.



Collaboration of the IPA program Area on Adolescent Health and the Child and Adolescent Section (CAH) of WHO HQ Geneva

Adolescent health is very important for all countries for achieving the Millennium Goals. This is because most MDGs are directly or indirectly related to adolescents and the significant percentage of adolescents' in most developing countries make it a very important area for public health.

IPA is working with WHO in various aspects of child health and adolescent area is one important area for collaboration for last many years. In 2008-09 WHO/CAH and IPA agreed to collaborate on a specific set of activities on Adolescent health One of the activities was Development of a Resource kit on Adolescent Health kit:

In many countries paediatricians can see children only up to the age of 12yrs. Adolescent health is not a recognised speciality nor is there specialised training programs available in many countries.

Hence the IPA program area TA Dr Swati Bhavne and Dr Chandra Mouli and Paul Bloem from WHO CAH developed a proposal to develop an orientation package to introduce adolescent health to the IPA member societies. This kit was to be used by National paediatrics associations to orient their members to the special characteristics of adolescents. It aimed to address the contribution that Paediatrician could make to adolescent health and well being both as both as individual clinicians and in the context of public health (as influential members of their communities).

This proposal was approved by the IPA Standing committee in 2008 and the resource kit was developed and field tested in India in 2009 and received a good response.

This module was then finalised and released by the President IPA 2007-10 at the 26th IPA congress at Johannesburg in Aug 2010, in the presence of Elizabeth Mason incharge of MCH from WHO HQA Geneva who also addressed the gathering.

A master trainer orientation workshop was held after the release. Originally the workshop was planned for 40 participants and a letter was sent to all National Paediatric societies to nominate one person to attend the workshop. It was also advertised at the congress website. We were pleasantly surprised and over whelmed to get over 250 registrations!



Since we did not want to disappoint any of the registered delegates we decided to chose one person per country from the nominations and allow all the rest to be observers and seated behind to see how the workshop was conducted. We had representation from 50 countries. Dr Peter Cooper kindly helped to have a last minute change the venue from the small hall to a big hall which can seat 300 people.

The workshop was conducted Paul Bloem from WHO CAH and Dr. Swati Bhavne, IPA TA programme area on Adolescent Health. The total module is a four hours package and can be given to medical and paramedical personnel who deal with adolescent health issues



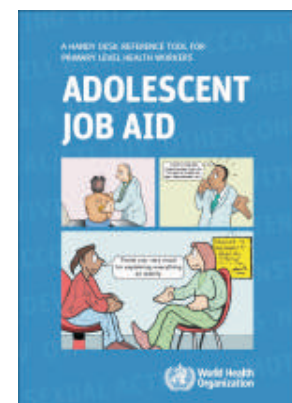
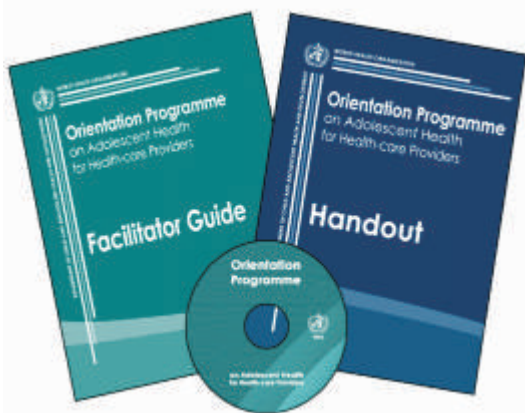
As a result of undertaking the course, participants will have:

- improved their understanding of the meaning of adolescence;
- reflected and discussed on what adolescence means to them at the personal level;
- reflected on and discussed what adolescence means to them at the professional level (as paediatricians);
- reflected and discussed on what the relevance of adolescence is to public health;
- considered what they would do or do differently as a result of undertaking the course.

Key messages of this course

- Adolescence is special phase in life when enormous physical, psychological and social changes occur in an individual's life. It is a time both of opportunity and of risk.
- Our own experiences of our adolescence, and our experiences with the adolescents we encounter in our everyday lives could affect the way in which we deal with the adolescents we encounter in our professional work.
- Adolescent patients share many characteristics with those of our patients who are children or adults; they also have some special characteristics.
- In order to deal with them effectively, we need to take into account their evolving capacity and their growing desire for autonomy. We also need to be aware that our ethical obligation to meet their best interests may sometime come into conflict with social norms and the law.
- There are sound public health, economic and human rights reasons to address the health and well-being of adolescents.
- Many 'players' have important and complementary contributions to make to the health and well-being of adolescents.
- Health workers have a contribution to make to help well adolescents stay well and ill adolescents get back to good health.
- Within this group, paediatricians, by virtue of their understanding of and work with children and the influence they have, could make a very important contribution.

A CD has been prepared which has a soft copy of the orientation workshop modules and also the following material has additional WHO resource material for the participants to carry home



FUTURE PLAN OF ACTION

1. In 2011, IPA and WHO would work together to provide technical support up to 25 national paediatrics associations in low and middle income countries to use the course materials in their national or sub-national workshops, or in their continuing education programmes.
2. As a follow up to the course, IPA and WHO would work to provide technical support to up to 5 national paediatrics associations to carry out activities that they have identified (e.g. carrying out a survey of the perceptions of their members, or strengthening linkages with national adolescent health programmes).

We Invite applications from the National Pediatrics Societies for both the above activities

Those who are interested please contact the IPA Technical advisor on Adolescent Health - Dr Swati Y Bhave at swatiybhav@yahoo.com. You will receive a application form and other details of the process



News from Regional Pediatric societies

Asia Pacific Pediatric Society -APPA

APPA has a new official Website: www.a-p-p-a.org.

Please disregard the old APPA website:

www.appassoc.org. This website has many new features like Polls, Forum, Events Calendar, Resources ,

Stay up to date, Tell a colleague etc Web Editor

Dr. Naveen Thacker drnaveenthacker@gmail.com.



New WHO booklet on Childhood Lead Poisoning

IMPORTANT RESOURCE FOR PAEDIATRICIANS

Childhood lead poisoning was in the news many times during 2010. A major outbreak of lead poisoning resulted in the deaths of hundreds of young children in northern Nigeria. It was linked to neighborhood processing of lead-rich ore for the extraction of gold. WHO has just released a new booklet designed to update medical professionals about the sources of lead and childhood lead poisoning.

This booklet is an invaluable resource that paediatricians and paediatric associations can use in their advocacy efforts for children. It is loaded with facts about lead exposure, its subtle but critical effects on children and the costs of these injuries to society. Useful information is given about national and regional determinants of lead exposure among children (including information about the continued use of lead in paints in many countries). Paediatric societies will want to use the resources in this booklet to support their efforts to protect children . You can download this book at

<http://www.who.int/ceh/publications/childhoodpoisoning/en/index.html>

Edited version of news submitted by Ruth Etzel IPA TA Environment and child health





News from National Pediatric Societies

September–October 2010

Congress of Pediatricians Bosnia and Herzegovina (B&H)

Organizers: Pediatric Society for (B&H). President: Dr. Zelko Roncevic. Participants: 200 local pediatricians out of total of 400 from the country. This is a Triennial Congress. For the first time the Congress invited international participants: Hong Kong, Hungary, Croatia, Italy, USA, Poland and others.

IPA Participation at the Congress. Dr Chok Wan Chan was invited as Immediate Past President of IPA. He officiated the Opening Ceremony and delivered a Keynote Lecture on “IPA and Global Child Health”.



Dr. Zelko Roncevic



Chok-wan with Professor and Mrs. Enver
HASANOGLU OF TURKEY



Chok-wan and Leaders from Bosnia



Congress Exhibition Hall



September 23- 25, Esztergom,

National Congress of Pediatrics of Hungary Pediatric Association

Organized by Hungarian Pediatric Association. President Dr. Laszlo Szabo Participants: 500 local pediatricians plus more than 20 international speakers. The Hungarian Pediatric Association was one of the 16 founding a national member of IPA in 1910. It is now 110 year old and they have a National Congress on Annual Basis. Their membership is 2,500. The National Society consist of five regions with the President coming from each of the regions sequentially. IPA Participation at the Congress: Dr Chok Wan was invited as Immediate Past President of IPA and Eva Olah (former IPA Standing Committee Members). He delivered a Keynote Lecture on "IPA and Global Child Health: Views, Means and Goals". He also attended the General Assembly of the National Society and was awarded with a Certificate of Merit. He visited Budapest, Debrecen and Esztergom during my visit and had lots of opportunity of visiting local child health instructions and university departments. He visited to the Bethesda Hospital met the program Director: Dr. George Velkey and gave a talk on "IPA and MDG". He visited the Department of Pediatrics invited by Professor Eva Olah. He met the Chancellor, Dean and staff of the Department and gave a talk on "Pediatricians and Global Child Health". He was interviewed by the local TV and was invited to introduce IPA and its achievements over the past 100 years.

Edited version of report submitted by Past President IPA Chok Wan Chan

CONGRESS PHOTOS



Chok Wan Chan



Chok Wan Chan with conf poster



Chok-wan and Professor Laszlo Szabo
(President of Hungary Pediatric Association)



Chok-wan with senior staff of Bethesda Children's Hospital at Dinner in Budapest



Chok-wan with Leaders of Hungary Pediatric Association at the Congress Reception



Chok-wan with the Local TV Interviewer



October 15-17, Kuala Lumpur, Malaysia

32nd National Congress of Pediatric of the Malaysian Paediatric Association (MPA)

Theme: Ambulatory Paediatrics. President: Professor Zabidi Hussin. Participants: 400 local paediatricians. Officiating Guest at the Opening Ceremony was the First Lady - wife of President of Malaysia. Malaysian Paediatric Association (MPA) has a membership of 600 qualified paediatricians. They Organize a congress on yearly basis. Paediatric Association Council Members by representatives from each of the provinces. National Assembly meet every year at the time of the National Congress.

MPA also functions at Secretary for APPA with Professor Sham Kasim as Secretary-General and Dr. Koh Chong Tuan as Treasurer of APPA.

MPA will be the Organizer for the Asia-Pacific Congress of Pediatrics in 2012 at Kuching, Sarawak, Chairman of Organizing Committee (also President-Elect for APPA) – Datuk Professor Zulkifli Ismail.

IPAs participation : The past President IPA Chok-wan's was invited both as Immediate Past-President of IPA and Honorary President of APPA. He officiated the Opening Ceremony and delivered the Bill Marshall Memorial Lecture (a Keynote Lecture in memory of the late Bill Marshall for his contribution to training of young paediatricians from the Asia Pacific) on "IPA and the Industry – An Ethical Appraisal".

Edited version of report submitted by Dr Chok Wan Chan Immediate Past President IPA



Chok-wan at the Conference



Officiating Guest at the Opening Ceremony –First Lady (Wife of President of Malaysia)



Children's Dancing at the Opening Ceremony



Chok-wan, Professor Zabidi Hussin (President of MPA) and Datuk Professor Zulkifli Ismail (APPA President-Elect) at the Gala Dinner of the Conference



December 8-10 Damascus, Syria

The 22nd Syrian Pediatric Society conference

was held under auspices of Dr. Redda Saied, The Health Minister of Syrian Arab Republic.

450 participants from Syria and many other Arab countries participated. The congress had been designed with the aim of achieving a balanced flow of knowledge from different pediatric fields of research and clinical experience in order to improve pediatric daily practice and scientific horizons.

On plenary sessions there were some interesting lectures about Children health, environment, nutrition, perinatal medicine, infection disease such as meningitis, pneumococcal diseases and vaccinations, pediatric resuscitation and emergency, and metabolic disease.

In total 58 lectures were held and discussed, all of them were orally presented in Arabic.

The Speakers were from Syria and invited speakers from Arab Countries (Lebanon, Jordan, Saudi Arabia and UAE), there was also a speaker from Canada and other from USA.

During the Congress, an industrial exhibition of medical manufacturers and pharmaceutical companies was organized in the congress area. Good social events were held.

The president of Syrian Pediatric society Dr M Tarakji delivers the welcome speech in the presence of health minister Dr Redd Saeid

Report submitted by Dr. Sahar Idelbi, General Secretary of Syrian Pediatric Society



The president of Syrian Pediatric society Dr M Tarakji delivers the welcome speech in the presence of health minister Dr Redd Saeid

November 2010, India

Indian Academy of Pediatrics

World Pneumonia Day 2010 Celebrations

In pursuant to the appeal (IPA), the Indian Academy of Paediatrics (IAP) celebrated "World Pneumonia Day" on 12th November 2010 on a grand scale, through active participation of its 300+ State and local IAP Branches. The aim was to collaborate with the IPA and supplement its efforts to bring down infant and child mortality due to pneumonia and achieve the goals mentioned in MDG4. Every effort was made to make the scientific community and lay persons aware of the menace of pneumonia, thereby making the public aware of the common symptoms and signs so that early treatment could be received and more children would be immunized, thus helping to bring down the mortality and morbidity caused by pneumonia.

A special poster was designed depicting signs and symptoms of pneumonia and urging one and all to join our movement to fight this number one killer.

The advocacy activities included engaging media, and public education campaigns.

The President of the Indian Academy of Pediatrics, Dr. Deepak Ugra in his press release said that "pneumonia continues to kill over 4 lacs children in India each year highlighting the need for awareness and education and called upon parents to ensure that their children are at low risk by providing exclusive breast-feeding for six months, timely vaccination and good nutrition. He further stated that Fever, Fast or difficult breathing and cough are important indicators of Pneumonia. Pneumonia, an infection of the lung can be deadly for children under five. Pneumonia continue to be the major killer in this age group and kills more children than AIDS, Measles and Malaria combined".

More than 40 branches of IAP released information on Pneumonia, in the local newspapers for parent education on this preventable disease. Thus the celebration of the World Pneumonia Day in India in 2010 was a grand success.

Report submitted by Dr Tanmay Amladi General Secretary IAP



IAP Drug Formulary – Going International

The IAP Drug Formulary is a prestigious publication of the Indian Academy of Pediatrics

(Ref - IPA Newsletter October-December 2009 VOL 4 - NO. 5 -

<http://www.ipaworld.org/News/Documents/IPA%20Newsletter%20Oct%20Dec%20issue%20Vo1%205%20issue4.pdf>).

The hard copy edition is made available once in 3 years. But the Web Updates are available every 3 months. The 20th Web Update is due in December 2010. From 2010, the Online Desktop and PDA/mobile was introduced so that all the data can now be browsed by the user from any Desktop (even those in which his formulary is not installed) or any model of mobile phones/PDAs with internet connection from anywhere in the world. As a service to the children all over the country and the world, the IAP Executive Board decided to make all Web Updates free of cost for all users, lifelong. Further details are available at our website www.iapdrugformulary.com

Additional publications - 'IAP Drug Formulary - Drug treatment of Infectious Disease - 2011 Update' and the 'Pocket Dose Book of Medicines for Children and Adolescents' are to be released at the next National Conference of Indian Academy of Pediatrics – Pedicon 2011 – at Jaipur in Jan 2011.

This year, as part of IAP Action Plan 2010 of our National President, Dr Deepak Ugra – 'IAP Drug Formulary – Going International' - the IAP Drug Formulary 2009 and the CD are being sent as complementary copies to the Executive Committee members and Standing Committee members of the International Pediatric Association (IPA) and Presidents of all member societies of the IPA. The CD needs to be installed, registration at our website is recommended and using the CD Key (given at the back of CD cover) as User name and entering the password selected, avail of the recent Web Update. The User would receive an e mail as soon as new Web Updates become available.

We hope that our initiative will help improve the health and well-being of children and their families the world over.

Dr Jeeson C Unni, Editor-in-chief, IAP Drug Formulary



27th International Pediatric Association (IPA) Congress of Pediatrics: Bridging the Gaps in Child & Adolescent Health



Official Congress handover from Keith Bolton Chairman 26th IPA Congress to Neil Wigg, Chairman 27th IPA congress

As many IPA members will be aware, the Paediatrics & Child Health Division of the Royal Australasian College of Physicians (RACP) will host, on behalf of the IPA, its 27th IPA Congress of Pediatrics in Melbourne from 24-29 August 2013. I am honoured to be the President of this congress.

A number of the members of the Division's Organising and Scientific Program Committees for the 2013 Congress attended the recent congress in Johannesburg. As mentioned in an earlier IPA Newsletter, this congress was a huge success. The Division would like to congratulate the organisers of the congress, particularly Keith Bolton and Peter Cooper. This is a hard act to follow, however the Division is confident that it can build on this success and provide delegates at the 2013 congress with an exciting program set in the very cosmopolitan city of Melbourne. The RACP's allocated booth in the exhibition area in Johannesburg was inundated with paediatricians from all around the world expressing their interest in

Melbourne and the congress that is to be held in 2013.

The overarching theme for the 27th IPA Congress of Pediatrics is Bridging the Gaps between Child & Adolescent Health. The committees are planning, within the congress program, to have themes relating to the Millennium Development Goals (MDGs) and a plan for post-2015; the gaps between research and practice; transition care; beyond survival gaps in education and opportunity; therapeutic gaps (better medicines); workforce gaps in education and training; bridging gaps in professional partnerships, and humanitarian emergencies.

The Division looks forward to seeing you in Melbourne in August 2013 and, in the meantime, the IPA and its members will be kept abreast of developments relating to program development via the official IPA congress website.

Professor Neil Wigg Chairperson 27th IPA Congress

President
27th IPA Congress of Pediatrics



Representatives from the 2013 Congress Organising Committee with the members of the IPA Executive in Johannesburg. Left to Right: William Keenan, Colin Borg, Neil Wigg, Sergio Cabral, Chokwan Chan, Zulfiqar Bhutta, Jenny Proimos, Gervase Chaney, Jill Sewell and Elizabeth Elliott. (IPA EC Members not in the photo President Elect Andreas and Swati Bhave IPA co-ordinator)



Events for Oct-December 2010

Xth Turkish World Congress of Pediatrics

16-17 September 2010
Astana-Kazakhstan

49th Annual Meeting of the European Society for Paediatric Endocrinology (ESPE)

September 22-25, 2010
Prague, Czech Republic
<http://www.espe2010.org/>

5th Asian Congress for Paediatric Infectious Diseases

September 23-26, 2010
Taipei, Taiwan
<http://www.pediatr.org.tw/>

XVIII ISPCAN International Congress

September 26-29, 2010
Honolulu, Hawai'i, USA
<http://www.ispcan.org/congress2010/>

India Vaccinology Course

September 20-30, 2010
Vallore, India
<http://www.pedsurgery.in/>

3rd World Congress of Pediatric Surgery

October 21-24, 2010
New Delhi, India

The 3rd Congress of the European Academy of Paediatric Societies (EAPS)

October 23-26, 2010
Copenhagen, Denmark

XVIII International Society for Prevention of Child Abuse and Neglect (ISPCAN) Congress

September 26-29,
Honolulu, Hawaii, USA
<http://www.ispcan.org/congress2010/index.html>

2010 American Academy of Pediatrics National Conference and Exhibition

October 2-5, 2010
San Francisco, USA
<http://www.aapexperience.org/>

International Society for Paediatric & Adolescent Diabetes, ISPAD 2010

October 27-30, 2010
Buenos Aires, Argentina
<http://2010.ispad.org/>

2nd International Congress of UENPS

(Neonatology/Perinatology)
November 15-17, 2010
Istanbul, Turkey
<http://www.uenps2010.org/>

Congreso de la Sociedad Latina de

CardiologiaPediatica
November 21-24, 2010
Punta de Este, Uruguay

Excellence in Paediatrics 2010

2-4 December, 2010
London, United kingdom
<http://www.excellence-in-paediatrics.org/>

Super Sized World: The Global Obesity Epidemic

9 December, 2010
NewYork City



Events for 2011

Egyptian Pediatric Association Annual Congress

2-4 February, 2011

Ras Sudr, Egypt

XVI Congreso Nacional de Neonatología y VII Congreso de Enfermería Neonatal

February 2-5, 2011

Cancun, Mexico

http://www.cintermex.com.mx/index.php?option=com_content&task=view&id=293&lang=en&lang=es

Child Health Tuesday

15th February 2011

Central London

XI Congreso Internacional de Medicina Urgencias y Trauma

February 14-18, 2011

Monterrey, Mexico

The 15th Congress of pediatricians of Russia "Actual problems of pediatrics"

February, 14-17, 2011

Russia, Moscow

Organizing Committee : tel/fax +7 499 134 13 08

e-mail: orgkomitet@nczd.ru

<http://www.pediatr-russia.ru/eng/node/162>

1st Global Congress for Consensus in Pediatrics (CIP) and Child Health

February 17-20, 2011

Paris, France

<http://www.cipeditrics.org/>

Puerto Rican Pediatric Society Meeting

February 19-21, 2011

San Juan PR, USA

<http://www.pediatraspr.org/>

6th World Congress on Pediatric Critical Care

March 13-17, 2011

Sydney, Australia

Email: pcc2011@arinex.com.au

<http://www.pcc2011.com/>

International Childhood Tuberculosis Meeting

17-18 March, 2011

Stockholm, Sweden

email: andreas.sandgren@ecdc.europa.eu

ALAPE Updates in Pediatrics Conference 2011

April 7-10, 2011

Hotel Riu Plaza, Panama

<http://www.alape-upconference.org/>

14th ASEAN Paediatric Congress 2011

3rd Asian Paediatric Otolaryngology Meeting

April 14-17, 2011

Suntec City, Singapore

<http://www.apc2011.com.sg/>

5th Annual Update in Paediatric Emergencies

April 16-18, 2011

Outrigger Resort & Spa, Little Hastings Street, Noosa, Queensland

<http://www.colloquium.com.au/>

Global Health Summit

April 29, 2011

University of Colorado Anschutz Medical Campus in Aurora, Colorado

<http://ucdenver.edu/academics/colleges/PublicHealth/research/centers/globalhealth/about/events/Pages/GlobalHealthSummit.aspx>

Healthy Children for a Healthy World



INTERNATIONAL PEDIATRIC ASSOCIATION

www.ipa-world.org

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Pediatric Academic Societies and Asian Society for Pediatric Research

April 30 - May 3, 2011

Denver, USA

<http://www.pas-meeting.org/2011Denver/default.asp>

29th Annual Meeting of the European Society for Pediatric Infectious Diseases

June 7-11, 2011

The Hague, The Netherlands

<http://www2.kenes.com/espid2011/Pages/Home.aspx>

CIPP 10th International Congress on pediatric Pulmonology

25-27 June, 2011

Versailles, France

http://www.cipp-meeting.org/online_services.htm?service=eAbstract/

5th Europeadiatrics 2011

23-26 June, 2011

Vienna, Austria

<http://www.europaediatrics2011.org/>

The Second International Signa Vitae® Conference in Pediatric / Neonatal Intensive Care and

Anaesthesiology

02 September, 2011

Split, Croatia

<http://www.signavitae.com/>

5th International Conference on Birth Defects And Disabilities in the Developing World

24th - 27th September, 2011

Lodz, Poland

<http://www.icbd2011.com/>

50th Annual Meeting of the European Society for Paediatric Endocrinology (ESPE)

25-28 September, 2011

Glasgow, Scotland

<http://www.espe2011.org/>

The 9th International Congress of Tropical Pediatric

September 29- October 3, 2011

Bangkok, Thailand

<http://www.tropped.org/>

55th Turkish National Pediatric Society Congress 1

2-16 October

Rixos Sungate Hotel in Antalya

10th World Congress of Perinatal Medicine

08-11 November, 2011

Punta de Este, Uruguay

<http://www.10wcpm.info/>

WSPID 2011 Congress

November 16-19, 2011

Melbourne, Australia

<http://www2.kenes.com/wspid/pages/home.aspx>

Events for 2012

Puerto Rican Pediatric Society Meeting

February 18-20, 2012

San Juan PR, USA

<http://www.pediatraspr.org/>

Pediatric Academic Societies and Asian Society for Pediatric Research

April 28 - May 1, 2012

Boston, USA

<http://www.pas-meeting.org/2011Denver/default.asp>

4th WCPGHAN: World Congress of Pediatric Gastroenterology, Hepatology & Nutrition

November 14-18, 2012

Taipei, Taiwan

<http://www.wcpghan2012.com/>



Readers responses'

I am so pleased I'm still on the direct IPA Newsletter. The newsletter is really terrific. I think you have done a fantastic job and it is the kind of news that people do want to read.

Judith Hall, Canada Former IPA Executive Committee member

Thank you for an exceptional Newsletter. I am glad that you are able to sustain the standard. Keep it up.

Adenike Grange, Nigeria, former President of IPA

It was such a great pleasure looking at the IPA Newsletter. It is excellent. Hats off to you. I specially thank you for giving such good coverage to the Floods in Pakistan and the relief efforts of PPA. The photos were also very good. I would certainly like to save this issue for record. Also very good coverage of the International Congress. Congratulations.

Prof Arif, Pakistan IPA SC member from Pakistan Pediatric Association

Congratulations. The newsletter is fantastic. I keep it for my memory.

Éva Olah Hungary former IPA SC member

Thank you Swati for your leadership in this most important activity that is the face and forefront of our organization.

Mohamd Mikati, IPA SC member and TA for IPA program area on Early Childhood Development