



### Message from the IPA President



Dear IPA Colleagues and Friends for International Child Health,

Greetings from the International Paediatric Association (IPA)! I am pleased to present this new version of the IPA Newsletter under the capable editorship of Dr. Swati Y Bhave, which will be published quarterly in electronic format via email-alerts and our IPA website. This is one of the attempts of your IPA to keep you personally posted and informed of the latest advances in global child health and updates on progress of IPA activities.

We are pleased to report to you that the IPA Standing Committee has met at Oxford in March 2009 whereby we have successfully consolidated our governance infrastructure (the IPA Committees) and confirmed our directions of activities including advocacy, health education and the IPA programmes under the guidance of our technical advisors who are top experts on the subjects with international acclaims. We shall focus on quality care and evidence-based practice in child health and paediatrics with emphasis on good ethical practice. We are committed to exclusive breastfeeding and in the promotion of the WHO Code for Marketing of Breast Milk Substitutes. With our strong family infrastructure of 144 national, 10 regional, 13 specialty societies as well as 1 committee for paediatric chairs (the International Paediatric Academic Leaders Association the IPALA), we are armed with a powerful professional working force for global child heath ready to work with our partners at the international child health arena including WHO, UNICEF, World Bank, FIGO and others for achievement of the Millennium Development Goals notably the MDG 4, 5 and 6 via the Partnership for Maternal, Newborn and Child Health (PMNCH), the Integrative Management of Childhood Illnesses (IMCI), the Countdown to 2015 and others. We shall strive to promote "child survival, child health and child development" and to enable our children to attain their highest potentials in life"!

Also in London after the Standing Committee, the Scientific Committee of the IPA 2010 Johannesburg Congress met and finalized the Scientific Programme for the Meeting. This Congress is important in the history of IPA because this is the first time it is being held in Sub-Sahara Africa, the first one being organized principally by IPA with our member society, the first time IPA having taken up the financial responsibility of the Congress, and IPA being keen to have this Congress serving as template for organization of a congress in the best ethical manner. The year 2010 is an important milestone for our beloved family because IPA was inaugurated in 1910 at Paris and we are going to have a series of celebration programmes at Johannesburg including a "Grand Celebration Banquet" and launching of the "Centenary Monograph" and "A Live History for the First Century of IPA"



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via a Video CD. You are cordially requested to mark the Congress date (4-8 August 2010) in your diary and earnestly invited to join us at this festive occasion for our IPA.

Your President and Executive Director visited the Headquarters of FIGO (the International Federation of Gynaecologists and Obstetricians) and had good discussion on our areas of collaboration and cooperation in the future, namely at the continuum of newborn care and in the domain of adolescent health. We also visited the head office of the Royal College of Paediatrics and Child Health and were warmly received by Professor Stephen Greene of the College. We had warm and fruitful discussions on areas of mutual interest and have identified the subjects of postgraduate education and quality training through accreditation as nidus for future joint developments. All these are the proactive endeavours of the IPA Standing Committee in response to the questions such as: What is IPA? What IPA is doing at global child health? What IPA can do for our members? and what members can do for IPA? We need support and input from our members and individual paediatricians to speak in one unified voice for global child health and to realize our vision of "Thinking globally and acting locally" because we are committed to achieve our motto of "Healthy Children for a Healthy World"

Thank you for your attention and your kind support.

Phan Clut Dan

Dr. Chok-wan CHAN IPA President





#### From the desk of the editor

#### **Dear IPA members**

I am really honoured to have been selected in 2008 to be the News letter editor for this prestigious organisation of the IPA. In this I have worked closely with the IPA Executive Director.

From this year of 2009 I plan to bring out a quarterly news letter to keep you abreast with the various activities of IPA and its member societies throughout the world. In this first issue of this year I thought we will start with a summary of the structure of IPA and the working of its subcommittees and program areas.

I have been working with IPA since 2001 and when I travel to various countries I realise that many member societies are not fully conversant with these aspects and I hope after reading this summary they will feel more enthusiastic about actively participating in IPA activities. In subsequent issues we will be publishing detail reports of various program areas and our collaboration with various international agencies.

This News letter will cover various activities that are submitted by representatives of our Regional and Speciality societies who have been asked to collect news from various member societies. But if you feel that your National Society has done some activity that is unique or is benefiting a large number of children of your country we will be very happy to publish it. Please make a short report of not more than 10-20 lines with a photograph of the event. I will edit and put it in the subsequent issue. Please note that the news item should be of this current year. Please send your matter at swatiybhave@yahoo.com

We would welcome your comments for the contents of this news letter and also suggestions for any additions. A news letter is the mouth organ of each organisation and will become vibrant only if the members contribute and also read contents and respond with comments. We will put a Reader's view column from next issue for this.

The banner of the newsletter contains pictures of children from IPA website. The children of all countries in the world will be covered in subsequent issues.

#### Happy reading

Yours in IPA service

Syphen (Swati Y. Bhave)





#### ALL YOU WANT TO KNOW ABOUT IPA

Compiled by editor Dr Swati Y Bhave

**The IPA (international Pediatric Association)** is the apex body of Paediatricians' around the world. The International Pediatric Association (IPA) was formed in Paris in 1910 by a group of European pediatricians who assembled for the First International Congress of Pediatrics in 1912.

The original purpose of the IPA was to foster relationships among the pediatricians of the world, thus promoting education and sharing of information about child health. With the exception of periods of the two World Wars of the 20th Century, the IPA has held International Congresses of Pediatrics every three years.

**IPA has partnership** with other international child health organizations such as WHO, UNICEF, FIGO, World Bank; GAVI.

**IPA also works in cooperation** with NGO's and the Private Sectors.

IPA secretariat was previously based in Paris but now runs its office through a professional organization Kenes International which is located in Geneva The address is

The International Paediatric association

C/o Kenes International 1-3 rue de Chantepoulet

PO Box no 1726 CH -1211 Geneva Switzerland

Tel +41 22 908 0488 Fax +41 22 732 2850

Email: adminoffice@ipa-world.org website: www.lpa-world.org

#### **Membership of IPA**

IPA does not have individual membership. The Membership of IPA is through National Paediatric societies (e.g. IAP) or Regional societies (e.g. APPA- Asia Pacific Paediatric association) or Specialty societies (e.g. ISTP- International Society of Tropical Paediatric, IPNA, International Pediatric Nephrology Association"... Through its member societies IPA covers nearly 1,000,000 paediatricians globally.

#### The administrative structure of IPA

## The highest body of the IPA is the Council of delegates (CD)

The CD meets once in three years during the International Congress of Paediatrics held by IPA.

The council of delegates consists of the following members.

144 National Member Societies from
139 countries.
10 Regional Societies
(e.g. APPA, UNESPA etc)
13 International Pediatric Specialty Societies including the International Pediatric
Academic Leaders Association IPALA
(formerly the International Chairs
Association) and the World Federation of
Associations of Pediatric Surgeons.

New member societies can be added.

The constitution of IPA was amended in 2004 to give more regional representation in IPA. This was approved by the CD in 2004 and put into effect from 2007. The elections in Athens congress was held as per the new constitution.

Each member society has one vote provided they have paid their annual dues. The member society has to be represented at the CD by the President or a person who is designated by the President as a voting member from the society. The Council of delegates elects the President Elect, the standing committee members for the incoming term and the venue of the next congress 6 years in advance for good preparation.

#### **IPA Standing Committee -SC**

The standing committee is the highest Authority of IPA in between CD Meetings and has to report back to the CD. The functions of the SC are policy making, supervision, actions and evaluation of the working of IPA. The SC consists of members elected by the council of delegates and have a term of three years and can work for another term of three years if re-elected.

At present the SC consists of 2 members each from the 7 regional societies, one from the





Committee for Paediatric Chairs and five members to be elected from the 12 specialty societies i.e. a total of 20 members

The SC meets twice in a year

#### The Executive committee EC

The EC is the Executive arm for IPA SC

- It consists of The President and President Elect who are the office bearers elected by the CD.
- It also consists of three executive officers

   the ED Executive Director, 2) the treasurer
   and 3) the co-coordinator for development
   (previously designated as Deputy Executive
   Director)

These are elected from the members of the standing committee by the standing committee, for one term of three years and can work for another term of three years if re-elected.

- Two members of the standing committee are elected to the EC by the SC
- The President of the next IPC is an ex officio member of the SC

#### Thus the EC consists of 8 members

The EC meets twice a year or more if required

The Present EC for 2007-10 consists of

• President Chok wan Chan, Hongkong.

### **IPA Program Areas**

#### IPA at present has the following Program Areas

- President Elect Sergio Cabral, Brazil.
- Executive Director Jane Schaller, Canada.
- Treasurer Zulfiqar Bhutta. Pakistan.
- Coordinator for development Swati Bhave, India.
- 26<sup>th</sup> ICP Congress President Keith Bolton, *South Africa.*
- Two SC members elected for EC Hussein Bahaaeldin, *Egypt.*
- Judy Hall, Canada.

## The IPA holds the International Congress of Paediatrics every three years (triennium).

- The 2007 Congress was recently held in Athens, Greece from 25-30 August.
- The 2010 ICP will be held in Johannesburg Aug 4-10.
- The 2013 ICP will be held in Melbourne Australia in Aug.

(IPA will be celebrating its centenary year in 2010)

From 2010 IPA will run its own congresses through the professional conference organizers Kenes which will take also the financial responsibility. The host country will have only to do local organization.

These conferences are not only excellent in academics but also a good forum for establishing international relationships.

Program Area	Technical Advisor	Co-Chairs from standing committee
Adolescent Health	Swati Bhave	Eva Olah
Better Medicines for Children	Kalle Hoppu	Mohamad Mikati
Children's Environmental Health	Ruth Etzel	Jie Ding
Child Health in Humanitarian	Karen Olness	Sanath Lamabadusuriya
Emergency		
Immunization	Ciro DeQuadros	Najwa Khuri Bulos
HIV-AIDS / TB	H. M. (Jerry) Coovadia	Keith Bolton
MDG Project	Sverre O. Lie	Geoff Cleghorn
Newborn and Child Survival	Zulfiqar Bhutta	Bill Keenan (Newborn) Cherif Rahimy
		(Child Survival)
Nutrition	Ricardo Uauy	Michael Krawinkel
Quality of Care	Giorgio Tamburlini	Armido Rubino





#### **IPA** Committees\*

The Standing Committee of the IPA has a number of working committees. The Terms of Reference, Chairs, and membership have been recently, updated.

These committees intend to work throughout the year 2009 and have set themselves specific goals for the next 18 months prior to the International Congress in Aug 2010.

The aim is to increase the awareness of child health issues and to develop a voice for paediatricians in community and national child health policy.

- 1 Advocacy and Governmental Affairs Committee, The Chair is SC member, Bill Keenan, USA. They have planned regional workshops and sessions at the International Congress and are developing materials for this.
- 2 Archives & Alumni Committee: The Chair is EC member Hussein Bahaaeldin, Egypt. They are reviewing the history of paediatrics and of the IPA, and intend to develop a list of IPA Alumni and engage them in the 100<sup>th</sup> year (next year) IPA celebrations.

Communications Committee: The Chair is 3 SC member Naveen Thacker. This committee has three subcommittees.

The IPA website has been activated and will contain IPA documents and communications as well as information about the Congress. The Website Editor is Naveen Thacker, India.

The IPA Newsletter will start to be sent to all member societies on a regular basis starting as a quarterly issue this year. The Newsletter Editor is EC member and IPA coordinator Swati Y Bhave. India.

The IPA journal on Global Health is being planned by the President Chok Wan Chan Hongkong.

Education Committee The Chair is EC 4 member Hussein Bahaaeldin, Egypt. They have planned a number of short term projects that develop curriculum related to child health. They have also planned regional workshops and sessions at the International Congress and are developing materials for this.



- Ethics Committee; The chair is President 5 Chok Wan Chan, Hongkong. The committee is now in its third term and has been very actively working and has developed a number of papers on ethical issues related to child health and has set clear ethical standards of conduct for the Congress and IPA business. They have also has planned regional workshops and sessions at the International Congress and are developing materials for this.
- Finance and Fundraising Committee The 6 Chair is Treasurer Zulfigar Bhutta, Pakistan. They are responsible for the financial activities of IPA.
- 7 Governance and Constitution Committee: The Chair is President Elect Sergio Cabral, Brazil. They is responsible for reviewing and updating IPA governance issues.

(\*Complied by Judith G. Hall. Edited by Swati Bhave)

#### IPA Administrative meetings

#### March 17-22, 2009

The SC (Standing committee and the EC (Executive committee) meetings were held at St Anne's college Oxford this year from 17-22<sup>nd</sup> March 2009.

#### IPA EC 2007-10



The Executive Committee (EC) of IPA (L\_R) Zulfiqar Bhutto ( Treasurer) ,Sergio Cabral (President elect) Judith Hall (Member) Jane Schaller (Executive Director) Chok Wan Chan (President), Hussein Bahaaeldin (member) Swati Bhave (coordinator) (not in Photo - Keith Bolton (IPA Congress President , Niki

Grange (Immediate Past president)

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#### IPA SC 2007-10



Two guests from RCPCH joined the IPA SC/EC for lunch in London-Len Tyler Chief Executive of the Royal College and Stephen Green, the David Baum Fellow in International Health for the Royal College. Len Tyler gave a brief history of the Medical Royal Colleges in the UK and elsewhere. The first Royal College was inaugurated in 1505.

### The scientific committee of the IPA congress 2010 Johannesburg - Meetings

The South African component met on the 7<sup>th</sup> and 8<sup>th</sup>

L-R First row Jie Ding, Swati Bhave, Judith Hall, Najwa Khuri Bulos, Chok Wan Chan, Jane Schaller, Hussein Bahaaeldin, Fernando Domìnguez-Dieppa, Eva Olah Armido Rubino, Jose Boix-Ochoa, Ahmaduddin Maarij.

**L-R Second row** Sergio Cabral, Peter Cooper, Naveen Thacker, Zulfiqar Bhutto, Jane Schaller, Enver Hasanoglu, Mohamad Mikati, Keith Bolton, Yu-Lung Lau, Bill Kennan.

March 2009 at Birchwood Conference Centre, South Africa while the International component met in Oxford, UK on 22<sup>nd</sup> March 2009. Members had serious discussion on the contents of the Scientific Programme and committed to organize this Congress in the best ethical manner with plenary talks covering cutting edge topics on child health and paediatrics. It is going to be one of the best Congresses in the history of IPA meetings.



### Scientific committee of 2010 IPA congress (International Members)

**L-R** Jane Schaller, Antonio Alves de Cunha, David Schonfeld, Chok-wan Chan, Gary Pekeles, Francois Tall, Keith Bolton, David Speert, Yoshikato Eto, Sverreo Lie, Jose Ignacias Santos, Peter Cooper

### **IPA collaborations**

## 1 IPA and the PMNCH (Partnership for Maternal Newborn and Child Health)

The Partnership for Maternal, Newborn and Child Health (PMNCH) board has 3 seats and 3 alternates for Healthcare Organizations: IPA, FIGO and ICM. For this IPA has nominated Zulfiqar Bhutta with Jane Schaller as an alternate. Through the PMNCH, IPA has participated in a series of country level workshops involving 3 Regional workshops from 10 African and 7 Asian countries with similar workshops planned for Latin America and the Middle East. The ultimate goal of these





activities is to strengthen country level MNCH care, to strengthen professional societies, and to promote country level HCP collaborations across the spectrum of MNCH.

**2** IPA and WHO Geneva IPA has 3 collaborative programs with WHO CAH: a) Adolescent Health,
b) Quality of Care and c) Preservice Training.

Swati Y Bhave is working on Adolescent Health, Geoff Cleghorn is working on Pre service Training. Evidence Based Medicine and, Quality of Care are with Giorgio Tamburlini. The latter two areas are just getting underway.

IPA is represented in the World Health assembly regularly. At the last WHA IPA presented 2 statements. This Year at the WHA in May 2009, IPA will be represented by President Dr. Chon Wan Chan and Executive Director Dr. Jane Schaller. Attending Regional WHO meetings is important and IPA tries to have an IPA representative from each region attend. The President elect Dr. Sergio Cabral participated in the regional WHO meeting for the Americas, and the President Chok-wan Chan participated in the regional WHO Asian meetings. IPA encourages SC members to attend their regional WHO meetings when possible. IPA offices assist in preparing statements.

IPA was asked to work on the WHO ICD12 section on child health. SC member Mohamad Mikati is already on the ICD12 committee as are the Japanese Paediatric Society and the AAP.

## 3 IPA and GAVI (Global Alliance for Vaccines and Immunization)

IPA was honoured to get a seat on the GAVI board at the 2004 election. President Adenike Grange and Executive Director Jane Schaller shared the seat. The IPA did a good job and stayed for 4 years. Adenike Grange and Jane Schaller and their civil society colleagues convinced the GAVI board to fund a civil society office within GAVI, and to provide some funds for country level civil society immunization projects. A notice was sent to IPA countries to let them know to apply for funds from the GAVI grant (Ethiopia got some funding from

IPA

this). The new GAVI CS representative is from BRAC. A meeting in Geneva at the GAVI headquarters for civil society representatives in summer 2007 included Amha Mekasha from Ethiopia who gave an excellence presentation. IPA has gained recognition on the international stage by participating on the GAVI Board.

#### News from the regions

#### UNEPSA

UNEPSA has a new constitution. An official online journal will be published soon, the official journal of UNEPSA and an Evidence Based Child Health Journal.

Reported by Armido Rubino, Italy

#### UAP

UAP encompassing the Middle East and North Africa has had regional meetings: Tunisia and Egypt. There have also been other paediatric society meetings. May 2009 will include a full day meeting on vaccines in Amman, Jordan attended by Ciro De Quadros, IPATA on immunisation.

Najwa Khuri-Bulos is working to develop whole day meetings on vaccines and to advocate for vaccines in the parliaments so that funds for immunization will be allocated.

The Jordan Paediatric Society and other paediatric societies plan to conduct the IPA courses for child in complex humanitarian emergencies to help their countries.

Reported by Najwa Khuri-Bulos, Jordan

#### North America:

The Canadian Paediatric society CPS and American Academy of Paediatrics AAP held conference on Native Americans. A third meeting on Indigenous Child Health was held in March 2009 in New Mexico. CPS is developing curriculum for trainees on the Aboriginal Health to be part of the Canadian residency training programs.

CPS has also advocated on the federal level for a National Early Childhood Strategy, a National Injury Prevention program, and proposed for a commissioner for Canada's Children and Youth.



CPS is specifically advocating to the federal government for efforts to raise children, youth, and their families out of poverty. There is also a strong movement toward better medications for children and youth since most prescription medications used by children in Canada have not been approved for use in children. Canadian Paediatric Society has strongly advocated at the federal level against the use of over the counter medications for children and as well as for discontinuation of plastic bottles for infants and children.

The Canadian Paediatric Society annual meeting will be in Ottawa June 23-27<sup>th</sup> 2009. A Continuing Medical Education program will be part of that conference.

Reported by Judith Hall, Vancouver

#### AAP

The AAP has travel grants available for some meetings in North America; information and specific contact names are available on their website. The APS membership is growing and there is a grant for support of young scientists; more information is available on the website.

The AAP has a number of activities including:

Placement of volunteers around the world with partial assistance of Health Volunteers Overseas.

Grant program, iCATCH, directed to projects and project leaders in low resource areas of the world.

Education of AAP members about medical and social challenges of children throughout the world at each annual meeting.

Travel grants for international attendees at AAP meeting.

Developing teaching modules for the preparation of paediatric residents and medical students to work in a paediatric milieu abroad

The AAP Office of International Affairs is a three person office which facilitates communication and interaction with paediatric societies in other countries including:

Joint educational programs between the AAP and other paediatric societies.

A trinational meeting in Mexico City each year.

An exchange of faculty between annual meetings of the AAP and other paediatric societies. (2008-2009 IAP and AAP, 2009-2010 IAP and AAP and EAP and AAP).

Facilitates a paediatric focused disaster preparedness/response program in Latin America and courses in China and Vietnam, and sponsorship of paediatric scholars from India.

Works with other paediatric societies to support NRP, APPLS and Pad Fax train the trainer programs. Current programs in Latin America, Asia and Africa.

The Academic Paediatric Association (APA recent name change from the Ambulatory Paediatric Association) works with other countries to create resident curricula.

American Paediatric Society (APS) works with the Society for Paediatric Research (SPR) making visiting scholars programs available for research experience in US laboratories.

The AAP, APA, APS and SPR are the cosponsors of The Paediatric Academic Societies (PAS) meeting each spring, and work together to:

Expand research: presentations specific to children in resource limited environments. They also cosponsored meetings with the Asian Society of Paediatric Research (ASPR). (Next cosponsored meeting in Vancouver, spring of 2010), and continue speaker exchange programs with the European Society for Paediatric Research (ESPR).

#### Submitted by Bill Keenan USA

#### IPNA

The International Paediatric nephrology Association Council Meeting was held from August 26 to 27, 2008 in Bangkok, Thailand.

IPNA now has 1589 members and has recently





welcomed the Pan-Arabic Paediatric Nephrology Association. 90 applications were received for the IPNA Fellowship program this year with 71 approved. 50 trainees have graduated from 29 countries, with 30% from India/Pakistan, and 30% Africa.

IPNA teaching courses: Over the past year, IPNA supported teaching courses in Asia (Beijing, Vietnam, APNA), Africa (Lagos), Europe (Russia), Latin America (Panama City) and the US (Miami meeting).

IPNA donated 15,000 USD for medical support of children affected by the May 12th 2008, Sichuan earthquake.

The IPNA Congress in 2010 will be in New York, and the IPNA Congress 2013 will be in Shanghai.

IPNA Journal: Submissions increased from 576 in 2006 to 605 in 2007; most submitted papers came from Europe and Asia, followed by the Americas. The acceptance rate for original articles was 50%.

A self assembled group of individuals concerned with renal transplantation met in Istanbul in the spring of 2008 to discuss transplant tourism and trafficking in organs with a consensus that these practices are unethical. A declaration of Istanbul on Organ Trafficking and Transplant Tourism has been approved by IPNA.

Reported by Jie Ding

#### Egyptian Pediatric Association (EPA)

The EPA advisory board met in Elsokhna resort on 9<sup>th</sup> January 2009 for 2 days to develop an "Egyptian paediatric guidelines for management of neonatal RDS.

Executive committee of EPA, the IPA President Dr. Chon Wan Chan and AAP members met the Egyptian Minister of health on 4<sup>th</sup> February 2009 to revise protocol of agreement with EPA and AAP to train Ministry of Health young pediatrician and nurses in neonatal resuscitation and infection control in Upper Egypt rural areas.



Egyptian MINISTER of HEALTH Dr. Gabaly meeting with IPA President CHOK WAN CHAN, IPA EC member Hussein Bahaaeldin and AAP PRESIDENT Dr. David Tayloe

The National congress of Egyptian paediatric association was held at Ras Sedr resort in February 4-7 2009. Three training courses were implemented 1) infection control with Ministry of Health by Margaret Fisher AAP 2) Child Injury Prevention by Marilyn Bull from AAP 3) Neonatal Ventilation with George town university, Martin Keszler and Abubaker Kabir



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IPA President CHOKWAN, IPA EC member Bahaaeldin and AAP President Dr. David Tayloe and Mr. Forbes



Engrossed audience for Safety of children training course

#### EGYPTIAN TURKISH COLLABORATION in Ankara





The collaboration protocol between Egyptian and Turkish Paediatric Associations is signed by Prof. Dr. Hussein Kamel Bahaaeldin from Egypt and Prof. Dr. Enver Hasanoglu from Turkey. Ihsan Dogramaci Honorary President of IPA was present

Report submitted by Hussein Bahaaeldin





#### **NEWS from Program Areas**

# IPA AAP Global Tobacco Prevention program

This program is being jointly done by the IPA Adolescent Program TA - Swati Bhave, IPA Environment and child health - TA Ruth Etzel and Jonathan Klein from AAP. This is a multi-year international effort to raise awareness and promote involvement of child health clinicians worldwide in calling attention to children's exposure to tobacco and second-hand smoke.

Tobacco use, exposure, and cultivation result in global paediatric diseases. Multiple exposures and the initiation of use long before adulthood make tobacco a threat to children's health. Children are harmed by their own tobacco use at very early ages, through exposures to smoke in their homes and in other settings, through malnutrition as parents in poor households spend money on tobacco rather than on adequate food supplies, and through their own labour and that of family members on tobacco farms. The WHO Global Youth Tobacco Survey found that nearly half of never smokers were exposed to second-hand tobacco smoke. The impact and harms of secondhand smoke exposure range from low birth weight, exacerbation of asthma, increased incidence of Sudden Infant Death Syndrome and cancer.

The program plans to increase awareness about environmental health implications of tobacco and second-hand smoke, interventions to effectively influence lifestyle and behaviours, the effect of media on tobacco use, and promotion of public health policies to protect children from tobacco.

The AAP Julius B. Richmond Centre is a National centre of excellence dedicated to the elimination of children's exposure to tobacco and second hand tobacco smoke. The Centre, and the AAP's Tobacco Consortium are working to create a healthy environment for children and families by: Making all child health clinicians aware of the consequences of childhood tobacco exposure; Giving child health clinicians the skills and tools to help parents, families, and communities protect children from tobacco; and Encouraging public education and the promotion of public health policies to eliminate tobacco exposure As part of

the AAP Julius B. Richmond Centre's work to disseminate best practices to reduce second-hand smoke and tobacco exposure of children, paediatric clinicians are being trained in effective ways to counsel parents to change behaviours so that children are not exposed to smoke.

Relevant materials and best practices developed by groups such as the CDC Guide to Community Preventive Service www.thecommunityguide.org/tobacco/), the WHO Tobacco Free Initiative (www.who.int/tobacco/mpower/en/) and the Global Dialogue for Effective Stop Smoking Campaigns (www.stopsmokingcampaigns.org) have been adopted as part of these collaborative efforts. The WHO MPOWER policies address: monitoring tobacco use and prevention policies, protecting people from tobacco smoke, offering help to quit tobacco use, warning about the dangers of tobacco, enforcing bans on tobacco advertising, promotion and sponsorship, and raising taxes on tobacco.

Additionally, self-study curriculum modules have been developed by the AAP Richmond Centre in collaboration with the Johns Hopkins Centre for International Tobacco Control. These will be available online by the end of 2009, in the six UN languages. Additional partnerships with the tobacco control community and cancer prevention community are planned to ensure that children's health priorities remain a top priority in tobacco control efforts worldwide.

WHO has identified 11 countries in the world that has the most adverse impact of tobacco. This program will be done in 3 of these countries China, Brazil and India in collbororation with the National Paediatric societies of these countries. President Chok Wan Chan and President Elect Sergio Cabrol will be actively involved.

Submitted by Jonathan Klein and Swati Bhave

#### The 14<sup>th</sup> WCTOH (World Conference on Tobacco or Health) was held on March, 2009, at the (WCTOH) in Mumbai, India,

There was a one session by AAP on March 9. The speakers were - Professor Harry Lando, the Vice President of the Conference, Swati Bhave and Ruth Etzel.





Dr Harry Lando .Swati Bhave and Ruth Etzel; at the AAP session at 14<sup>th</sup> WCTOH Mumbai India March 2009

It was decided to use this opportunity to launch the IPA AAP tobacco control program in India in collaboration with the IAP (Indian Academy of Paediatrics) With help of AAP we plan to have the program launch in China and Brazil in the coming months.

#### IPA AAP Global Tobacco program launch with two events

#### 1 Focus group Meeting on awareness of Tobacco'

Dr Ruth Etzel held a focus group discussion with Mumbai Paediatricians on March 8 2009. This was hosted by IAP



Focus group discussion in IAP office Mumbai L-R Drs Dhanshree , Paula Goel Deepak Ugra (*President Elect of IAP*) Archana Kher, Vinoo Tiberewala, PG Samdani, Swati Bhave



L-R Gonsalves\* , Ruth Etzel ,Swati Bhave, Rohit Agarwal (General secretary IAP) Ajay \*

\* IAP office staff



#### 2 Community awareness program

This was held in collaboration with IAP Mumbai Branch & K J Somaiya Medical College. The speakers and panelists were Dr. Ruth Etzel and Swati Bhave. A poster competition for students was held by a NGO AACCI (Association of Adolescent and Child Care in India) and the prizes were shared by AAP and AACCI



Tanmaya Amaldi, Sujata Kanhere, Swati Bhave, Ruth Etzel Dean KJ Somaiya Medical college with the Prize winners of the poster Competition In the community program.

Report Submitted by Ruth Etzel and Swati Bhave

## NEWS FROM THE IPA CONGRESS 2010 Johannesburg

The countdown to the 2010 International Pediatric Association Congress is on! In just over a year from now, between the 4<sup>th</sup>-9<sup>th</sup> August 2010, the South African Paediatric Association will welcome paediatricians from all over the world to the warm hospitality of Sandton, Johannesburg.

The Scientific Programme Committee consists of representative members from South Africa and Sub-Saharan Africa, matched by a group of their International counterparts. They all met in March in a series of meetings in Johannesburg and London, to finalize a programme to address the major issues faced by children globally and to



Dr Tanamya Amaldi President of IAP Mumbai Branch welcomes participants



meet the needs of practitioners with an interest in updating their knowledge of clinical paediatrics. In these tough economic times it is essential that the delegates who travel across the world get the best "bang for the buck" with regard to the priorities and practice of caring for children as well as a wonderful and relaxing break in a safe and beautiful environment. We promise you both!

The programme consists of a number of tracks weaving their way through parallel sessions; plenaries, symposia and workshops that are addressed by more than 100 invited international and local speakers; all experts in the field. The motto of the Congress is "Simunye we are one" and this unification of our common purpose finds its way into all the sessions. The topics of the five plenary sessions have been carefully chosen to stimulate and challenge: the opening plenary is an overview of the state of the world's children with an analysis of those countries that are on track to achieve the MDGs as well as those countries which remain challenged. The plenary on Nutrition includes discussion on the effects of early nutrition on long-term health, the "second epidemic obesity" and the continuing medical and social problems of malnutrition.

Infectious diseases remain a major public health and clinical problem despite the advances in vaccines and antimicrobials. These issues are addressed by another plenary entitled "Are the bugs winning?" This is followed by a number of sessions on major infectious challenges and recent advances in vaccinology.

The vulnerable neonate remains a major challenge world-wide. This will be addressed in a plenary and sessions which look at global challenges such as the limits of viability, the essentials in resuscitation, outcomes of the very low birth weight baby, community care, necrotising enterocolitis and a host of other general and specific issues. At the other end of the spectrum of the paediatrician is the adolescent. The programme includes specific problems such as sexuality as well as the challenges imposed by adolescence on the management of chronic childhood diseases such as epilepsy, diabetes and HIV infection.

The continuing explosion of knowledge in the area of the human genome has often resulted in the general paediatrician being confused rather than enlightened. Experts will review, for the generalist, the essentials in the area as well as guidelines for genetic investigation. There will be an interactive workshop on the diagnosis of the dysmorphic child.

To complement the genetic aspects of illness, there are sessions on the effect of the environment on child health. This includes specific issues such as the deleterious effects of tobacco as well as the effect of disasters on children and the global trauma epidemic.

There are three areas in the programme that are being dealt with as broadly "cross-cutting"; ethics, training & education and surgical management. All speakers will be asked to, therefore, address these in the body of the talks. Notwithstanding this, there will be specific sessions on academic matters and ethical issues.

International congresses are not only about the scientific programme. We promise you a lot of fun with a variety of activities for the delegate and their families. Sandton is a safe, modern, vibrant city suburb with facilities to match any in the world. Before or after the Congress we would strongly advise all delegates to take some time off and spend a few days relaxing in South Africa. August is the end of winter and offers an ideal time to go on Safari to one of our renowned game parks.

See you soon.

Keith Bolton, President, 26th IPA Congress





### Chinese Pediatric society action on the melamine disaster

Since the announcement of Ministry of Health in China on childhood urinary stones induced by melaminecontaminated formula, the Chinese Society of Pediatric Nephrology called on our colleagues nationalwide to join the vast task on diagnosing and treatment of children with urinary stones induced by melaminecontaminated formula.

Some of the pediatric nephrologists were assigned by the Ministry of Health as the national experts, whom attended many consultant and difficult cases treatment. In the meanwhile, Chinese pediatricians put a lot effort on the relevant studies on the epidemiology as well as the mechanism of melamine related urinary stones.

Chinese pediatricians also distributed their experiences of diagnosing and treating children with melamine related urinary stones to the doctors from Hong Kong and Macau.

Prof Jie Ding's group from Peking University First Hospital published an original paper in NEJM recently. Melamine contaminated powdered formula and urolithiasis in young children NEJM 2009,360:11,1067-1074

#### Submitted by Jie Ding,

#### **UPCOMING EVENTS**

Pan Arab pediatricians Congress & Jordanian Pediatric society Annual meeting May 2009 Amman, Jordan

#### First congress of Egyptian Turkish collaboration

October 21-25, 2009 Marmaris Turkey

#### Events with websites:

Pediatric Academy Societies Annual Meeting May 2-5, 2009, Baltimore, USA http://www.pas-meeting.org

<u>Update in Pediatric Respiratory Diseases 2009</u> May 23-24, 2009, Hong Kong http://www.pae.cuhk.edu.hk/PRD2009

<u>14th Mediterranean meeting of child Neurology</u> May 28-30, 2009, Marsala, Italy http://www.ptsroma.it/mmcn2009/de

<u>8th International Symposium on Pediatric pain</u> June 7-11, 2009, Acapulco, Mexico http://www.ispp2009mexico.com/

The 27th Annual Meeting of the European Society for Paediatric Infectious DiseasesJune 9-13, 2009,Brussels, Belgiumhttp://www2.kenes.com/espid/pages

6th Congress of the Paediatrics Association of South Asian Countries June 17-20, 2009, Colombo, Sri Lanka, http://www.srilankacollegeofpaediatricians.com/conference/index.htm

#### 4th Europaediatric Congress

July 3-6, 2009, Moscow, Russia http://www.europaediatrics2009.org/

