

BULLETIN

of the



ASIAN PACIFIC PEDIATRIC ASSOCIATION

(formerly known as Association of Pediatric Societies of the South-East Asian Region)

Volume 48

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No. 20 & 21

WELCOME TO SRI LANKA

12th APCP in Sri Lanka

The 12th Asia Pacific Congress of Pediatrics (12th APCP) and 2nd Asia Pacific Congress of Paediatric Nursing from 12-15 March 2007 in Sri Lanka started with the arrival of delegates from as early as Saturday 10th March. The 12th APCP was held in conjunction with the 10th Annual Congress of the Sri Lanka College of Paediatricians. Despite being postponed due to security reasons, the Congress attracted about 600 delegates, mainly from the Indian sub-continent.

Being rich in culture and tradition, it was no surprise that the opening ceremony

was full of both. A parade led by the College Council members and ending with APPA Executive Committee, IPA President Adenike Grange and Executive Director Jane Schaller, and the guests of honour indicated the start of the ceremony. Starting with the Sri Lankan national anthem and the lighting of the oil lamp to signify life, a song and dance by a choir of 30 children followed. This continued with six speeches starting with Prof Sanath Lamabadusuriya, the Chairman of the Organising Committee, Dr Pushpa Punchihewa, the Sri Lanka College of Paediatrics President and

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APPA Excos & Advisory Board Members with IPA President, Dr. Adenike Grange & Executive Director Dr. Jane Schaller (seated second and third from left respectively) posing for a group photo at the 12th APCP in Sri Lanka.

HONORARY PRESIDENT:

- Prof. Dr. Perla D. Santos Ocampo - Philippines
- Dr. Chok-wan Chan - Hong Kong

EXECUTIVE COMMITTEE:

- **President:** Prof. Sanath P. Lamabadusuriya - Sri Lanka
- **Immediate Past President:** Prof. Pongsakdi Visudhiphan - Thailand
- **President-Elect:** Prof. Xiaohu He - China
- **Secretary-General:** Prof. Mohd Sham Kasim - Malaysia
- **Deputy Secretary-General:** Prof. Zulkifli Ismail - Malaysia
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- **South Korea** - Prof. Chang Hwi Kim
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- **Thailand** - Prof. Dr. Usa Thisyakorn
- **Chinese Taipei** - Prof. Dr. Tzou-Yien Lin
- **Vietnam** - Prof. Dr Nguyen Cong Khanh

EXECUTIVE SECRETARY

Fairos Nazri - Malaysia

SECRETARIAT ADDRESS:

Asian Pacific Pediatric Association (APPA),
3rd Floor,
National Cancer Society Building
66, Jalan Raja Muda Abdul Aziz,
50300 Kuala Lumpur, Malaysia
Tel: 603-2691 4575
Fax: 603-2691 4773
E-mail: appa@myjaring.net
Website: www.appassoc.org

Editor: Prof. Dr. Mohd Sham Kasim
Asst. Editor: Fairos Nazri

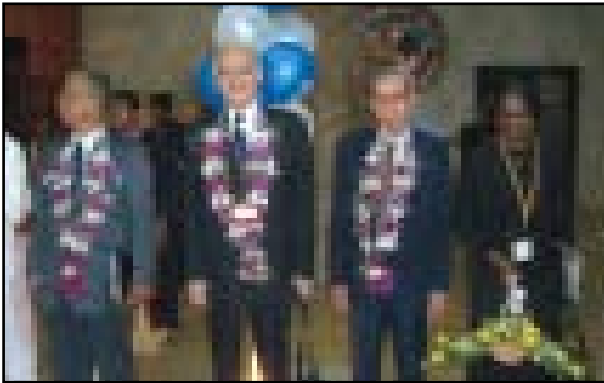
THIS BULLETIN IS PUBLISHED BY THE APPA SECRETARIAT

We invite articles and feedback from readers. – Editor

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APPA President Prof Pongsakdi Visudhipan. The speech by the Minister of Healthcare and Nutrition, Honourable Nimal Siripala deSilva was eloquent, inspiring and encouraging. He stressed on the commendable Sri Lanka child health status despite being a third world country. The Prime Minister subsequently reported that Sri Lanka's infant mortality rate of 12 per thousand live births was the result of combined efforts of all concerned.

The speeches were followed by vibrant traditional Sri Lankan dances. It was a promising start to the next few days of presentations on all aspects of paediatrics and child health.



From left, Prof. Mohd Sham Kasim, Dr. Chok-wan Chan, Prof. Pongsakdi Visudhipan & Dr. Adenike Grange arriving at the inaugural ceremony of the 12th APCP.

Venue & Social Programme

The venue, Bandaranaike Memorial International Convention Centre (BMICC) was most impressive. Security prior to the opening ceremony was at its maximum with three levels of security checks, body searches and walking through metal detectors. Fortunately everything was relaxed after the ceremony. There was a slight uneasiness about the temperature in the conference halls as the thermostat must have been put at a slightly high level for most delegates to tolerate.

The social programme was exquisitely executed from the banquet to the informal dinner. Different cultural dances from diverse regions of the island showcased the country's best dancing talents. From graceful movements to the vibrant head-spinning dances, everything was entertaining and mesmerising. The ambience was also just right, not too formal but elegant enough to have a certain 'class'.

Scientific Programme

The wide-ranging scientific programme appealed to all areas of subspecialties in paediatrics. With the increasing number of new vaccines, there were a number of talks on vaccines.

An innovative software installed into the computers used by the presenters ensured that all speakers stuck to time. It switched their powerpoint presentation off at the stipulated time allocated for a particular speaker! Hailed as a breakthrough in conference time management and efficiency, some people thought it was cruel to the speakers. Whatever the arguments, many other national societies wished they had similar software to use during their national congresses!



One of the main attractions during the Sri Lankan Night held in conjunction with the 12th APCP.

Overall Sri Lanka Experience

Despite the ongoing civil war and obvious security on the streets, there was absolutely no fear among the 600 delegates who came mainly from neighbouring India and Pakistan. There was also a smattering of others from South-East Asia (6 Filipinos, 8 Thais, 5 Malaysians, 3 Indonesians, 5 Singaporeans, 14 Vietnamese) in addition to other Asian nations and some European ones.

The overall experience was really good, and pre- and post-congress tours to Kandi and other places gave more appreciation to this proud island nation.

Congratulations to Prof Sanath Lamabadusuriya and his committees who had worked tirelessly facing the prospect of cancellation of the Congress, national political upheavals and security problems to come up with the excellent scientific programme and entertaining social events. There was hardly any notice of the political tension in the rest of the country during the Congress.

Zulkifli Ismail
Malaysia

NEW OFFICE-BEARERS OF APPA

ASIAN PACIFIC PEDIATRIC ASSOCIATION (APPA) NEW OFFICE-BEARERS (as of March 2007)

HONORARY PRESIDENT:

Prof. Dr. Perla D. Santos Ocampo - **Philippines**
Dr. Chok-wan Chan - **Hong Kong**

EXECUTIVE COMMITTEE:

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APPA SECRETARIAT ADDRESS:

Asian Pacific Pediatric Association (APPA), 3rd Floor, National Cancer Society Building
66, Jalan Raja Muda Abdul Aziz, 50300 Kuala Lumpur, Malaysia
Tel: 603-2691 4575 Fax: 603-2691 4773
E-mail: appa@myjaring.net Website: www.appassoc.org

ANNOUNCEMENT

**12th ASIA PACIFIC CONGRESS OF PAEDIARICS (12th APCP)
COLOMBO, SRI LANKA, MARCH 12-15, 2007
OUTSTANDING ASIAN PAEDIATRICIAN AWARD 2006**

Eleven recipients received the prestigious Outstanding Asian Paediatrician Award 2006 during the 12th Asia Pacific Congress of Paediatrics (12th APCP) and 2nd Asian Pacific Congress on Paediatric Nursing opening ceremony, which was held at the Bandaranaike Memorial International Conference Hall (BMICH) in Colombo, Sri Lanka on March 12, 2007.

Listed below are the names of the 11 Outstanding Asian Paediatricians:



Prof. Pongsakdi Visudhiphan (Thailand)

Prof. Pongsakdi is Immediate Past President of the Asian Pacific Pediatric Association (APPA) from 2003-2007 and Standing Committee member of the International Pediatric Association from 2004-2007. He is currently a lecturer in Pediatric Neurology at the

Ramathibodi Hospital at Mahidol University and nationwide lecturer / principal Co-coordinator of Parental Support Group for Epilepsy in Thailand. To date, Prof. Pongsakdi has published over 60 English articles.



Prof. Xiaohu He (China)

Prof. He, is currently the Honorary President of the Chinese Pediatric Society (CPS). Formerly President of CPS, Prof. He is a prominent paediatrician at the Beijing Children's Hospital in China and has devoted much of her time and energy to

developmental paediatrics and issues concerning child health. She is author of more than 80 papers and monographs, which focused mainly on paediatric rheumatology. She is also the Advisory Board Member of the Asian Pacific Pediatric Association (APPA) from China.



Prof. Zulfiqar Ahmed Bhutta (Pakistan)

Dr. Zulfiqar is currently The Husein Laljee Dewraj Professor & Chairman at the Department of Paediatrics & Child Health, Aga Khan University, Karachi, Pakistan. He holds several national and international Society

responsibilities and is extremely active in international child health and issues of global child survival. Prof. Zulfiqar has also played a key role in developing neonatal paediatrics and training programs in Pakistan.



Prof. Patrick, Man Pan Yuen (Hong Kong)

Prof. Yuen is a Professor in the Department of Paediatrics, The Chinese University of Hong Kong. He is a haematologist and oncologist and is also the founder of the Paediatric

Tumour Study Group in Hong Kong. He pioneered the bone marrow transplantation for children in Hong Kong and is the world expert in coagulation, in particular, his involvement in fibrinolysis, Protein C and Protein S.



Prof. Wu Xi-Ru (China)

Prof. Wu is a Professor at the Department of Pediatrics at the First Teaching Hospital, Peking University in Beijing, China. She was President of the Chinese Pediatric Society from 1997-2002 and was President, Asian & Oceanian

Child Neurology Association from 1998-2002. Prof. Wu has so far published seven Pediatrics or Pediatric Neurology text books in China and published 160 papers as corresponding authors in domestic or international Journals.

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**Prof. Mei-Hwei Chang
(Taiwan @ Chinese Taipei)**

Prof. Chang is Professor at the Department of Pediatrics, College of Medicine, National Taiwan University in Taipei, Taiwan @ Chinese Taipei. She has contributed tremendously towards the improvement

of child health in the world, particularly in the Asia Pacific Region, where hepatitis B virus infection is highly endemic. She was also the pioneer in the world to demonstrate the remarkable reduction of chronic hepatitis B virus infection to one-tenth and fulminant hepatitis B to one third after the universal hepatitis B vaccination. To date, more than 260 Peer Reviewed Papers have been written by Prof. Chang.



Dr. B.J.C. Perera (Sri Lanka)

Dr. Perera is consultant paediatrician at the Lady Ridgeway Hospital for Children (teaching) in Colombo, Sri Lanka. He was first President, Sri Lanka College of Paediatricians from 1996-1997 and from

2003 is member of the Country Coordinating Mechanism of the Global Fund to fight AIDS, Tuberculosis and Malaria. Dr. Perera's current research interests include childhood asthma, breast feeding and paediatric HIV infection. He has also presented and written numerous scientific papers in Sri Lanka & abroad.



**Dr. Ramesh. D. Potdar
(India)**

Dr. Potdar is currently honorary paediatrician and Professor at the Mumbai Port Trust Hospital in Mumbai, India. He was President of the Association of Pediatric Societies of South East Asian Region (APSSEAR) from

1994-1998 and Standing Committee member, International Pediatric Association from 1992-1998. His fields of activity range from child health status of Indian Children, Child Adoption and Pre-Primary school admission rules and curriculum from Health Education for masses.



**Prof. Dr. Nguyen Thu Nhan
(Vietnam)**

Prof. Dr. Nguyen Thu Nhan who is President of Vietnam Pediatrics Association (1995-2008) and Head of Program, National Neonatal screening of Vietnam from 2000-2008, is actually fluent in four languages, Chinese, Russian,

English and French. Currently, she is Professor of Paediatrics at the Central Children Hospital in Hanoi, Vietnam. Prof. Dr. Nguyen was former Director, at the National Institute of Pediatrics in Hanoi (1985-1997). She is also Vice President of Vietnam Medical and Pharmaceutical Association from 1995-2010.



**Prof. Dr. Md Abdul Manan
Miah (Bangladesh)**

Prof. Dr. Md Abdul Manan, is the Pro-Vice Chancellor, Professor & Chairman, Department of Pediatrics at the Bangabandhu Sheikh Mujib Medical University in Dhaka, Bangladesh. He is also President of Bangladesh Paediatric Association (BPA)

and Advisory Board Member of APPA from Bangladesh. Among his achievement are: establishing the department of Paediatric Haematology & Oncology for the first time in Bangladesh with a most modern laboratory, a DNA laboratory in the department for antenatal diagnosis of thalassaemia and launched the Children Cancer Campaign in Bangladesh.



**Prof. Choo Keng Ee
(Malaysia)**

Prof. Choo is Consultant Paediatrician and Professor of Paediatrics at the Department of Paediatrics at Universiti Sains Malaysia, Kelantan state, Malaysia. He was also Malaysian Paediatric

Association (MPA) President from 1996-1997 and Advisory Board Member of APSSEAR from 1997-2003. His major field of interest are paediatric infectious diseases and tropical paediatrics. Prof. Choo has also presented papers in Malaysia and abroad as well as publishes his papers in various national and international journals.

IPA MEETING

Pediatric Department
 Ramathibodi Hospital
 Mahidol University
 Bangkok

13th April 2007

Dear Members of APPA,

As a Standing Committee of the International Pediatric Association, representing Asia Pacific Pediatric Association (APPA), I wish to report to you on the IPA Meeting in Geneva, April 1-2, 2007.

1. 12th Asia Pacific Congress of Paediatrics and the 2nd Asia Pacific Congress of Paediatric Nursing

I informed IPA members that despite the rescheduled programme, the participants were very pleased with the turnout, the scientific agenda and social event arrangement at this congress. A special compliment was given to Prof Lamabadusuriya and the Organising Committee for their resolute effort and wonderful success.

The main themes of the congress included perinatal mortality and improved equality in child health care in Asia-Pacific Region.

At the opening ceremony, both the Prime Minister and Minister of Health of Sri Lanka reiterated the government intention to work alongside Sri Lanka College of Paediatricians, for the better of Child Health in their country. This commitment set an unprecedented example of effective services for children.

In addition, the organizers were also very pleased that both Prof Adenike Grange and Dr Jane G Schaller, President and Executive Director of IPA respectively, were able to attend.

2. APPA Business Meetings (during 12th Asia Pacific Congress of Paediatrics and the 2nd Asia Pacific Congress of Paediatric Nursing)

I reported to IPA Members on the consensus of APPA delegates, which include SAARC and Asean Pediatric Federation and whose child population represents over 52% of the global number, that APPA Region should be represented by more than the existing two positions allocated at present as IPA Standing Committee. This current disproportionate representation leads to an ineffective co-ordination of child health care in the region, where diverse cultural and socioeconomic situations are so apparent.

I, therefore insisted to IPA members that a review of this representation is urgently needed. To this effect, Prof Zulfiqar A Bhutta, newly elected IPA Treasurer, Dr Swati Bhave, newly elected IPA Co-ordinator and Dr Chok-wan Chan, IPA President-elect, all endorsed APPA request and pledged to ensure that the objective is met.

3. State of Asian-Pacific Children

The President of IPA complimented on the efforts put in to publish the State of Asian-Pacific Children, 4th edition 2006. The information crucially high-lighted the improvement in nutrition state and child survival of children in this region.

4. IPA election result

New members to work for the triennium 2007-2010:

Treasurer : Zulfiqar Bhutta
 Coordinator : Swati Bhave
 Executive Director : Jane Schaller

With two representatives from Asia and their

5. APPA programmes on IPA interest

Both Dr Chok-wan Chan and myself informed IPA members at Geneva of the various work of paediatric societies in APPA region, including a number of courses co-hosted with UNICEF and WHO. APPA has accomplished the many tasks set out, resulting in an improved nutrition and child survival, and decreased obesity. The principle areas are mentioned as follow:

Children's Environmental Health - workshop, organized by Indian Academy of Pediatrics, WHO and IPA in Delhi, 23-25 February 2007.

Immunization - APPA members met on at least two occasions to discuss current burden of Hib, rotavirus and polio. Opinions were offered on the cost-effectiveness of existing or implementing immunization programme, appropriate to each country.

HIV/AIDS -

I informed IPA Members that commendable efforts have been made by APPA to try to reduce the number affected by HIV/AIDS. Some of the examples are as follow:

- * Prof Ito notified the meeting that in November 2006, Japanese Pediatric Society held a conference in cooperation with UNICEF Japan.
- * Dr Swati Bhave said also that the Indian Academy of Pediatrics has held workshop on this important issue.
- * Thailand: Thai Pediatric Society, the Ministry of Public Health, Non-governmental organizations and the Royal Family have all participated in establishing programmes to reduce the number of HIV incidences and

Newborn and Child Survival - APPA has made great stride on this issue and that Dr Zulfiqar Bhutta co-ordinated the effort in compiling the figures, which is also published in the Lancet.

Nutrition, particularly on obesity - Global Alliance for the Prevention of Obesity and Related Chronic Disease have met on several occasions with members in APPA Region.

Adolescent Health - Dr S Bhave reported that programmes tackling this topic are being made.

Childhood Tuberculosis - many countries in APPA have an established care plan and that good work is in progress.

Better Medicine for Children - IPA stresses on the need for appropriate use of medicine and investigations of diseases. APPA countries will continue to work together to ensure that the situation is maintained within control.

Other issues

IPA continues to urge member countries to send in information that would be of use to others involved in child health care.

IPA maintain external relations with WHO, UNICEF, FIGO, PMNCH, GAVI etc. A special mention was made from Dr Chok-wan Chan, Prof Adenike Grange and Dr J Schaller, congratulating APPA on their endeavor to improve the well being of children.

Lastly, I wish to thank the Pediatric Societal Presidents and Advisory Board of APPA for their continuing support and cooperation.

Pongsakdi Visudhiphan
Immediate Past President, APPA

SURVEY FINDINGS

Largest-ever survey on situation of children and women in Thailand shows progress and challenges

Thailand has made significant progress in improving the situation of children and women in recent years, however remaining challenges and sub-national disparities need to be addressed, according to the results of a nationwide survey.

The survey carried out by the National Statistical Office (NSO) with support from the United Nations Children's Fund (UNICEF) confirmed that Thailand's rapid economic and social development policies have resulted in significant social benefits for its people, including improvements in children's nutritional status, school attendance, access to safe water and sanitation, and coverage of essential health services.

"These are very impressive achievements that Thailand can be proud of," said Tomoo Hozumi, the UNICEF Thailand Representative, at the survey's launch. "At the same time, the results show that there are some remaining challenges in reaching international goals, and that the country can definitely make further progress towards them given its capacity, resources and wonderful track record so far."

The survey, formally titled the Multiple Indicator Cluster Survey (MICS), covered some 43,000 households across the country and is the largest and most in-depth assessment of the situation of children and women ever undertaken in Thailand.

According to the survey at the national level, the percentage of underweight children in Thailand fell from 19% in 1990 to 9% in 2006; 98% of children of primary school age were attending school; the number of one-year-old children fully immunized against the six preventable childhood diseases was 83%; and the percentage of the population with access to safe water and sanitation was 94% and 99%, respectively.

Hozumi said one challenge clearly highlighted by the survey was the country's low rate of exclusive breastfeeding. In Thailand, the percentage of infants being exclusively breastfed during the first six months of life was only 5.4%, one of the lowest exclusive breastfeeding rates in the world. The UNICEF Representative noted that exclusive breastfeeding is the best way to guarantee that infants get all the nutrients they need during this critical

early period of their development, and he urged steps to ensure that the marketing of breast milk substitutes to mothers in Thailand follow internationally agreed standards and guidelines.

Hozumi also pointed out that Thailand trails many other countries in regard to iodized salt consumption, the best and most economical way to ensure an adequate amount of this essential nutrient in the daily diet. Severe deficiencies of iodine can result in mental retardation, while even mild deficiencies can restrict children's mental capacity and negatively affect their performance in school. At the national level, only 58% of households consume iodized salt, with coverage falling to as low as 35% for households in the Northeast region of the country.

"This is an area where more effort is needed," Hozumi said. "It requires the introduction of legislation that would make it legally compulsory to add iodine to all edible salt for human and animal consumption in Thailand. Many countries around the world have already done this in order to increase the production and consumption of iodized salt."

The survey also showed that much more needs to be done to educate the public about HIV/AIDS. The survey also highlighted substantial disparities in the status of children and women and their access to essential knowledge, services and commodities depending on where they live, their ethnicity and socio-economic status.

For example, children from the poorest households were almost four times as likely to be underweight as children from the richest (15% versus 4%), while children with uneducated mothers were more than twice as likely to be underweight as compared to the children of mothers with some secondary education (13% versus 6%).

Children from the poorest households were also more than twice as likely to be stunted - meaning shorter than average for their age - than children from the richest households (16% versus 7%).

In regard to iodized salt consumption, very rich households were nearly twice as likely to consume iodized salt than very poor households (75% versus 42%). - **UNICEF, March 9, 2007.**

NEWS FROM THE HONG KONG PAEDIATRIC SOCIETY

Council of the Hong Kong Paediatric Society

At the 45th Annual General Meeting of the Hong Kong Paediatric Society held on March 19, 2007 at the Langham Hotel Hong Kong, in Tsimshatsui, Kowloon, the following Office-Bearers and Council Members for the year 2007-2008 were elected:

President:	TSOI Nai Shun
Vice President:	YU Chak Man
Hon. Secretary:	LI Albert Martin
Hon. Deputy Secretary:	WU Shun Ping
Hon. Treasurer:	KONG Yim Fai
Social Convenor:	CHAN Chi Fung
Council Members:	CHAN Chok Wan
	CHENG Man Yung
	CHIU Cheung Shing
	KO Po Wan
	LEUNG Chik Wa
	LIU Kam Wing
	IP Patrick
	NG Pak Cheung
	NG Yin Ming
	POON Grace
	WONG Lilian
	WONG William
	YAM Ka Ling

Activities:

* Hong Kong Childhood Immunisation Programme

The Centre for Health Protection (CHP) in Hong Kong has recently announced the replacement of oral poliovirus vaccine (OPV) and whole-cell pertussis (wP) vaccine by inactivated poliovirus vaccine (IPV) and acellular pertussis (aP) vaccine respectively in the childhood immunization programme. The main advantage of using IPV as stated by CHP is to eliminate the risk of vaccine-associated paralytic poliomyelitis. Acellular pertussis vaccine is associated with lower incidence of vaccination reactions compared with the whole-cell pertussis vaccine. The updated programme will commence on 1 February 2007.

* Children's Hospital in Hong Kong

The Children's Cancer Foundation in Hong Kong has recently taken up the task of materializing the idea of having a Children's Hospital in Hong Kong. The consultation phase has been completed and the proposal discussed

with the current Secretary in Health Care. There are certain barriers that one faces with such a proposal. The current paediatric service is rather fragmented and almost every general hospital in Hong Kong has its own paediatric department. The issue of centralization of services and manpower deployment is another major obstacle.

In fact, such a proposal of having a Children's Hospital goes back a long way. In 1970, the late civic leader Wilfred S.B. Wong was the first to initiate the idea of establishing a "Government Children's Hospital" for Hong Kong. In the subsequent few years, various Legislative Council members have supported his idea and called for the building of a modern paediatric hospital. One famous quote by Dr. Henrietta Ip, Legislative Council member in the year 1982 was "Where else in the world would there be a city with so many children yet without a children's hospital?"

Only time will tell whether the dreams of many of us will become reality

* Children's Commission for Hong Kong

The Hong Kong Committee on Children's Rights is an active group of dedicated personnel pushing for the establishment of a Children's Commission for Hong Kong. They have recently carried out an independent study looking into the logistics of such a commission and their report has just been released. For those who are interested, you can contact the committee directly for a copy of the report, their email address: hkccr@childrenrights.org.hk.

Annual Scientific Meeting:

Our society holds an annual scientific meeting in the last quarter of each year. The theme is to encourage local young paediatricians and paediatric nurses to present their research work. Each year we receive over 30 abstracts for review and an independent panel of adjudicators will decide the abstracts for either oral or poster presentation. Two prizes for each category will be presented at the meeting for the best presentation.

Address:

The Hong Kong Paediatric Society
C/o Department of Paediatrics and Adolescent Medicine,
Queen Mary Hospital, Pokfulam, Hong Kong. Tel: 852-2855-3485 Fax: 852-2818-4290

AFFILIATE ACTIVITIES

Annual Report of Pediatric Society, Myanmar Medical Association (2006)

The Pediatric Society, Myanmar Medical Association (PSMMA) has 276 members. The executive committee is composed of 40 members. Committee meetings were held in February & September 2006 and January 2007 respectively.

Various activities have been held throughout last year. Among them:

***Academic activities:**

- i. Monthly clinical meetings were held regularly in Yangon Children Hospital and other teaching hospitals of Yangon and Mandalay Children Hospital.
- ii. Special CME were also held in Yangon and Mandalay on the following topics:
 - Bone marrow transplant
 - Experience of medical education in UK
 - Hodgkin's lymphoma in South East Asian countries
 - Autism - what we know and what we don't know
 - Hepatitis B nephropathy
 - Childhood tuberculosis
- iii. Refresher courses:
 - 24/06/06 - "Current trends in the management of childhood disorders" in Yangon (topics include cholera in children, transport of critically ill children, pediatric palliative care, management of chronic cough)
 - 02/12/06 - "Refresher course on pediatric update" in Mandalay
- iv. The Myanmar Pediatric Journal Vol: 4 was successfully published in 2006. Pediatricians also contributed articles to Myanmar Medical Association Bulletin.

***Social activities:**

- Paying respects to elderly pediatricians.
- Organizing farewell parties for pediatricians who retired.
- Organizing social events for members.
- Participation in religious activities.
- Sending condolences on bereavements of members and their immediate family members.

***National activities:**

Pediatricians are also involved and cooperated in other national health activities like immunization programs and other health programs organized by Non-Governmental Organizations (NGOs.)

***Collaborations with international organizations:**

The Myanmar Pediatric Society is the member of International Pediatric Association (IPA) as well as Asian Pacific Pediatric Association (APPA). Therefore, Myanmar Pediatric Society collaborates closely with these organizations and also attended regional and scientific conferences.

Besides that, members of the Myanmar Pediatric Society also attended conferences and short term trainings sponsored by the following organizations:

- Royal College of Pediatrics and Child Health
- Japan Pediatric Society (JPS)
- St Jude Asia Forum in Pediatric Oncology
- Asian Pacific Pediatric Association (APPA)
- Asia Pacific Association of Pediatric Allergy, Respiriology, and Immunology
- International Pediatric Nephrology Association
- International League Against Epilepsy

*** Paediatric Society of Myanmar Medical Association
Executive Committee:**

- | | |
|---------------------------|-------------------------------------|
| President | - Prof S Kyaw Hla |
| Vice President -1 | - Prof Aye Maung Han |
| Vice President -2 | - Prof Daw Khin Htwe |
| Secretary | - Prof Aung Myint (Mandalay branch) |
| | - Dr Kyaw Zin Wai (Yangon branch) |
| Treasurer | - Associate Prof Yuzana Saw Myint |
| Auditor | - Prof Mya Mya Ohn |
| Academic Secretary | - Prof Kyu Kyu Khin |

Address 1: Prof. S. Kyaw Hla, Head of Department of Child Health, University of Medicine (2), Yangon, Myanmar.

Address 2: C/o 249, Theinbyu Road, Yangon, Myanmar.

E-mail: skhla@mptmail.net.mm / yeh@yangon.net.

FEATURE

IAP Vision 2007

Prelude:

The Indian Academy of Pediatrics (IAP), the sole representative professional body of pediatricians in the country, came into existence in 1963. It has more than 26 state branches, 222 Regional/District/City level branches, 16 super-specialty chapters, more than 20 National Task Forces/ Committees and many interest groups. It has close to 16000 members from all the states of the country. IAP also has influence on approximately 16000 other pediatricians and a large number of medical practitioners who are not its members but who follow the policies of the IAP. IAP is now an important partner in planning of child health policies and is playing a decisive role in public health projects concerning child survival and development.

IAP Vision 2007 has Programs for:

- A : **Child Survival**
- B : **Quality of child life and development**
- C : **Advancing academic pursuits**
- D : **Special issues**
- E : **Innovative Programs**
- F : **Organizational matters**

A: Child Survival programs

Technology, low cost Interventions and Innovation
- Keys to the child survival revolution.

CHILD SURVIVAL: THE FIRST PRIORITY!

The main emphasis in IAP Action Plan will be on child survival and development activities with a focus on states having high IMR. As far as child health is concerned, there is no uniformity within the country. It has green areas and red areas. The green areas are the ones having a lower than average IMR and the red areas are those having higher than average IMR and poor other child health facilities. IAP vision 2007 focuses on child survival activities in the states having a high IMR or poor infrastructure of health services. We have selected 309 districts in 16 states for child survival activities. We all know that low-cost interventions like ORS, Breast Feeding, Immunization, Zinc Supplementation, Correction of Anemia and Malnutrition, Newborn Resuscitation, Antibiotics for Sepsis and Pneumonia; when scaled up can significantly reduce childhood mortality. IAP vision 2007 focuses on up-scaling the implementation of these low-cost interventions by involving pediatricians and other medical practitioners of these 309 districts.

1. Capacity-Building initiatives: The newborn's health is the key to child survival, especially for India. In India in general, half of the under-5 child deaths occur in the neonatal period. IAP vision 2007 envisages a series of state and sub-divisional level capacity-building initiatives for pediatricians on "Comprehensive Newborn Care" and child survival interventions including management of diarrhea, malnutrition, anemia, ARI, role of zinc and improvement

cooperation and support for IMNCI approach for child survival and IAP vision 2007 aims to create District Resource Persons for training of IMNCI.

2. Reaching the un-reached: India is a huge country having 26 million families and > 12 million children to be catered for by 16000 pediatricians and that too with disproportionate urban-rural distribution. It is an indomitable task to reach each family with simple messages of ORS and others. The IAP vision 2007 wishes to approach school-going adolescents as resource persons to reach the unreached.

3. Science of Vaccinology: An important component for child survival is achieving high coverage of routine immunization. IAP vision 2007 strives to create a network of District Immunization Resource Persons by Science of Vaccinology program.

4. IAP Telemedicine and Tele-education Network: CMEs at doorstep: We plan to use IT achievements of our country effectively at the grass-root level to improve child health and survival. The present unacceptably-high mortality and morbidity among the deprived rural and urban slum children would not improve until each and every pediatrician in India has access to the latest advances in the field of pediatrics. We have a vision to develop "IAP Tele-medicine and Tele-education Network" so that paediatricians in remote areas can get expert advice to save the lives of poor patients who otherwise cannot afford to go to higher centres for treatment. Through this network our members will be able to update their knowledge right in their own clinics.

5. Child Survival Communication: Electronic and print media can play a very big role in communicating messages of child survival. This year we plan to invest in strategic communication for child survival by roping in the services of the electronic and print media.

6. Every Child counts: Child survival activities will also be planned in urban slums/focal areas where survival crisis is present even in green states having low IMR.

B: VISION FOR QUALITY OF CHILD LIFE AND DEVELOPMENT

In the green states where the survival crisis has been tackled to a major extent, IAP vision 2007 is focused on quality of child life and development.

1. Child Rights and Protection Program (CRPP): This program envisages a step ahead to protect the children from abuse and labor. IAP was first to raise its voice against child labor which has culminated into legislation against child labor. A step has already been taken in this direction; a ToT (Training of Trainers) workshop was conducted successfully by faculty from UK and India. This will be followed by a series of regional workshops.

2. Poor Scholastic performance Program: Scholastic backwardness affects 5-15% of school children. Today, it involves over 2.8 million school-children in India. Pediatricians need to be aware of the problem, identify it

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early and help these children cope with their invisible handicap. We have initiated Poor Scholastic Performance Program of the IAP.

3. Adolescent-Friendly Health Services (AFHS) & Adolescent-Friendly Schools (AFSI) Initiative: The objective of AFHS is to cater to special and specific-needs adolescents by capacity-building of pediatricians to provide better adolescent care in their hospital. AFSI is to make schools adolescent-friendly to achieve their optimum developmental potential. Prevention of diseases by immunization does not end in childhood. Adolescent immunization is to be actively propagated.

4. Health Promotion and Prevention of Lifestyle diseases Program: The non-communicable diseases (NCD) are now recognized as major causes of morbidity and mortality. World Health Report 2001 has indicated that non-communicable diseases accounted for nearly 60% of deaths and 46% of the global burden of diseases. The rapidly growing epidemic of non-communicable diseases is clearly related to changes in life styles. This program aims to frame and implement the interventional education program for preventing lifestyle diseases. Plan of Action -To develop training material, orientation workshops, establish partnership and develop material for media campaign

5. Ready Reckoner on Autism.

6. Program for Thalassemia prevention: Almost 40 million people in India are carriers of the thalassemia traits (heterozygous for beta-thalassemia) and over 10,000 children with thalassemia major are born every year in our country alone. This Program aims to 1. Prepare Guidelines for model Thalassemia Prevention Program and treatment protocols 2. Organize advocacy meetings involving all stakeholders in areas where incidence of disease is higher.

7. Program for Rabies prevention: In WHO-sponsored National Multicentric Rabies Survey Report which was published in May 2004, annual incidence of human rabies deaths was reported as 20,566 human rabies deaths from India. This program aims at preparing guidelines for Rabies Prevention Program and organizing advocacy meetings involving all stakeholders.

C: ADVANCING ACADEMIC PURSUITS

For Practitioners: The majority of our members are catering child health as practitioners and we strongly believe that capacity building and empowering them will improve the health of the children of our country. Thus, we need to focus on private practitioners also. We need to empower them with the latest knowledge on Paediatrics and Child Health. A few steps have been initiated in this direction in IAP Vision 2007.

I. Art and Science of Pediatric Practice (ASPP): This program aims at enhancing quality of patient care by incorporating the principles of scientific medical practice with principles of sound management. The ultimate aim is confidence building, which translates into rational therapy. Program is based on a holistic approach to 4 main aspects of our practice-Issues related to Patients, Self

II. Standardization and Computerization of Office Pediatric Practice (SCOPP 2007):

The Standardization of Office Pediatric Practice (SPOP) which was part of IAP Action Plan 2005 was very well appreciated all over the country by IAP members, hence it was thought to continue this and further adding computerization to it - to make it a comprehensive -office automation and ethical practicing project for the IAP members. Plan of action: Training material, workshops.

III. IAP Program on Science of Vaccinology: This program aims to train IAP members in Science of vaccinology and create a pool of resource persons across country and develop a mechanism by which IAP members are enabled to get any information related to immunization without any difficulty. This is also aimed at improving coverage of routine immunization particularly in states with high rates of infant mortality and develops a reporting system for "Adverse Events Following Immunization". It is proposed to conduct a 3-day intensive training program in Science of vaccinology by Indian and foreign faculty for 50 national trainers who will in turn train about 600 District Immunization Resource Persons (one pediatrician from each district of India) in 15 regional training programs.

IV. Golden-Hour Emergency Management Course (GEM Course): The PALS module is running successfully all over the country and is very popular. The most frequent question after a PALS course asked by the participants is: What Next? The GEM Course is the logical next step. The PALS course deals with identification of a sick child and initial stabilization IRRESPECTIVE of the cause of illness. The GEM Course deals with management of emergencies based on the diagnosis in the emergency department after initial stabilization till the child is shifted to the ICU for further care. We are planning to develop our own course material and module.

V. Desk-Top Reference books for distribution to all members: Behavior disorders, Medico-legal problems, Manual of Computerization, Rational use of Antibiotics, Immunization, Child Protection, Dengue Fever, Poliomyelitis and Influenza.

VI. Development of subspecialties: Fellowships & Short Training/Refresher Courses.

VII. National Consensus Meetings: We will continue with our process of national consensus meetings and development of national guidelines on important issues. Topics targeted for 2007 are: Management of Tuberculosis (Re-Look), Obesity and Metabolic Syndrome, Aplastic Anemia, Lymphoma, Acute Pyogenic Meningitis & Rheumatic Heart Disease.

For Teaching Faculty and medical students:

1. Workshops for faculty on research methodology and teaching and evaluation methods.
2. Publications for medical students such as: Revised 3rd edition of 'Principles of Medical education' and manual on Research Methodology for PG students.
3. Review of undergraduate and postgraduate pediatric curriculum.

D: SPECIAL ISSUES

Polio Eradication: In 2006, we have witnessed a resurgence of polio. IAP, reaffirm its commitment for polio eradication and improvement of routine immunization.

NEWS NOTE

UNICEF completes construction of first health and development center in Aceh

The United Nations Children's Fund (UNICEF), had completed construction of the first of the 227 mother-and-child health centers in Indonesia's tsunami-devastated Aceh province and earthquake-hit Nias Island.

The Tanjung Polindes, a 190-square metre midwifery center and residence on the edge of the capital Banda Aceh, will be handed over to the provincial government on January 26, 2007. Three more health centers are under construction, 40 are under tender, and another 80 are under design with sites already identified.

UNICEF has committed to build a total of 227 health centers across Aceh and the North Sumatran island of Nias under its "Posyandu Plus" programme, a cornerstone of its \$335 million tsunami recovery effort.

"Posyandu Plus" is designed to restore and upgrade the Indonesian Government's 30-year-old "posyandu" system, under which mobile health teams visited villages once a month to deliver family health services.

The permanent Posyandu-plus centers built by UNICEF combine community midwifery and basic preventive and curative services for women by providing a blend of essential services, such as antenatal and neonatal care, breastfeeding support, growth monitoring, regular immunization, parental education, micronutrient provision, basic health information and behavioural change promotion.

To ensure quality of service, UNICEF in collaboration with Aceh provincial health authorities and partners will roll out an inclusive training programme for healthcare providers. Systems for supervising and monitoring the quality of services will be designed to help maintain and improve the services of the Posyandu-plus centers.

Most health centers will also have an Early Childhood Development Centre offering learning and stimulation activities for pre-school children aged three to six. Fifteen of them will also be equipped with a Child Protection Centre.

"Through these family health and development centers, mothers, children and babies will have immediate and full-time access to professional midwives, specialized infant health care and learning and development activities," said Edouard Beigbender, UNICEF's Chief of Field Office in Aceh.

"This is a brand new facility for the community. It's not replacing something, it's giving the community something they didn't have before. Strengthening community-based health systems will have a long-lasting impact on child survival and development and will help facilitate Aceh and Nias' recovery, rehabilitation and development."

UNICEF has set aside \$11 million for the construction of the health and development centers, in addition to \$90 million for the construction of more than 300 permanent schools - the first time UNICEF has taken on a construction role.

- UNICEF, January 16, 2007

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HIV: IAP will continue to work on Pediatric HIV/AIDS. In the highly endemic states, IAP proposes to work at the district level. We shall also expand our activities to cover the non-endemic states.

E: INNOVATIVE PROGRAMS

- I. IAP Telemedicine and Tele-education Network.
- II. Dialogue sessions on various sub-specialties subjects through IAP Website.
- III. Promotion and support of research in private practice.
- IV. Development of CDs/DVDs on health education, selected topics.

F. ORGANIZATIONAL MATTERS

- * Digitalization of old issues and Online Submission of manuscript for Indian Pediatrics.
- * Publication of IAP Administrative Manual.
- * Strengthening and support to ongoing projects of IAP.
- * Publication of IAP Directory.
- * Making IAP Website a tool for seamless communication.
- * Ensuring more support to IAP branches at both district and state level.
- * Felicitations, awards and recognition to branches at doing exceptional work especially in states with high IMR.

Prepared by the Indian Academy of Pediatrics - April 2007.

International Congresses of Pediatrics (ICP)

ATHENS 2007

**25th INTERNATIONAL
CONGRESS
OF PEDIATRICS (ICP)
AUGUST 25-30, 2007,
ATHENS, GREECE**

Greece is often associated in our minds as the birthplace of the father of Medicine, Hippocrates. But what many may not know is that the first writer of pediatric articles lived in Greece in 200 BC and his name was Dimitrios Apamefs. However, Greece is not only about history. It is also about children, as Athens, the capital of Greece will play host to the 25th International Congress of Pediatrics (ICP) to be held from August 25-30, 2007. The congress of 2007 in Athens will designate the quarter of a century Centennial of the International Pediatric Community.

* The Local Organizing Committee of the 25th ICP:

Greek Pediatric Society, Mihalakopoulou 92,
115 28 Athens, Greece.

Tel: 30 210 77 71 140

E-mail: info@e-child.gr

* International Organizing Committee:

International Pediatric Association

IPA Administrative Office

17 rue du Cendrier, P.O. Box 1726

CH-1211 Geneva 1, Switzerland

* Congress Organizer:

C & C International S.A.

Conventions & Congresses

16, Paradisou Street, 151 25 Athens -
Greece

Tel: (+30) 210 6889 100

Fax: (+30) 210 6844 777

E-mail: icp2007@cnc.gr

Website: www.cnc.gr

SOUTH AFRICA 2010

26th INTERNATIONAL CONGRESS OF PEDIATRICS (ICP)

Past Congresses:

- 24th ICP, Cancun, Mexico, 2004
- 23rd ICP, Beijing, China, 2001
- 22nd ICP, Amsterdam, The Netherlands, 1998
- 21st ICP, Cairo, Egypt, 1995
- 20th ICP, Rio de Janeiro, Brazil, 1992
- 19th ICP, Paris, France, 1989
- 18th ICP, Honolulu, Hawaii, 1986
- 17th ICP, Manila, Philippines, 1983
- 16th ICP, Barcelona, Spain, 1980
- 15th ICP, Delhi, India, 1977

ICPN

**The 3rd International Congress on
Pediatric Nursing (ICPN),
Athens, Greece, August 24-25, 2007**

Dear Sir/Madam,

We would like to inform you that on the occasion of the 25th International Congress of Pediatrics, the 3rd International Congress on Pediatric Nursing (ICPN) "Children and Young People's Nursing: Looking Forward" will take place in Athens, Greece on August 24-25, 2007, at the Athens Concert Hall.

It is important to note that registration to ICPN also includes attendance to the 25th International Congress of Pediatrics.

Thank you for your help and we look forward to seeing you in Athens!!

On behalf of the Professional Congress Organizer,
Iris Gavriilidi

**3rd International Congress on Pediatric
Nursing
"Children and Young People's Nursing: Looking
Forward"**

August 24-25, 2007

International Conference Center of the Athens
Concert Hall

T. +30 210 6889100, F. +30 210 6844777

Email: pediatricnursing2007@acnc.gr

Web: www.pediatricnursing2007.com

**25th International Congress of Pediatrics
August 25-30, 2007**

International Conference Center of the Athens
Concert Hall

T. +30 210 6889100, F. +30 210 6844777

Email: icp2007@acnc.gr

Web: www.icp2007.com

WORLD CONGRESS

**5th WORLD CONGRESS OF THE
WORLD SOCIETY FOR PEDIATRIC
INFECTIOUS DISEASES
BANGKOK, THAILAND,
NOVEMBER 15-18, 2007**

Pediatric Infectious Diseases are a worldwide medical problem. Thousands of physicians seek to prevent and treat these diseases the best possible way, using the best information.

To discuss this worldwide medical problem, the World Society of Pediatric Infectious Diseases is organizing the 5th World Congress of the World Society for Pediatric Infectious Diseases (WSPID) to be held in Bangkok, Thailand, from November 15-18, 2007.

The Congress Venue will be held at the Queen Sirikit National Convention Center, 60, New Rachadapisek Road, Klongtoey 10110, Bangkok, Thailand.

Among the main topics that will be discussed are: Antibiotics and drug resistance, Bacterial infections, Bone, joint & soft tissue infections, Central nervous system infections, Diagnosis & monitoring of ID's, Epidemiology, HIV/AIDS, Fungal infections, Immunology, Viral infections, Surgical infections, Influenza including avian flu, Urinary tract infections and Parasitic infections.

WSPID 2007 is held in collaboration with the:

- * Asian Society for Pediatric Infectious Diseases (ASPID)
- * Australasian Society for Pediatric Infectious Diseases
- * European Society for Paediatric Infectious Diseases (ESPID)
- * Paediatric Infectious Diseases Society of Nigeria
- * Pediatric Infectious Diseases Society of USA (PIDS)
- * Pediatric Infectious Diseases Society of the Philippines (PIDSP)
- * Pediatric Infectious Diseases Society of Thailand
- * Singapore Paediatric Society, and
- * Sociedad Latinoamericana de Infectologia Pediatrica

For more information, please contact:

Congress Secretariat:

Kenes International/WSPID 2007

17, Rue du Cendrier, PO Box 1726, CH-1211, Geneva 1,
Switzerland

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

E-mail: wspid@kenes.com

WSPID Secretariat:

Prof. Mieke Hoogkamp-Korstanje

Heyenseweg 48, 6591, HD Gennep, The Netherlands

Tel: 31 4 85 51 9146 Fax: 31 485 51 4040

6th APRM

**6th Asia Pacific Regional Meeting
of the International Society of Neonatal
Screening
Improving Child Health Through Universal
Newborn Screening
29th August – 1st September 2007**

Come to Singapore to Discover and Gain Further Insights in Neonatal Screening

Welcome to the 6th Asia Pacific Regional Meeting (APRM) of the International Society of Neonatal Screening

Theme: Improving Child health through Universal Newborn Screening

Venue: Furama Riverfront, Singapore

Date: 29th August to 1st September 2007

Who should attend:

1. Paediatricians, Neonatologists, Biochemists, Chemical Pathologists
2. Laboratorial Scientific Officers
3. ENT specialist/Audiologists involved in hearing screen
4. Nurses
5. Companies providing screening support.

This conference will bring together leaders and key stakeholders in the newborn screening field from the Asia Pacific region. They will update and stimulate you with an exciting scientific programme and answer your questions in newborn screening.

The programme will consist of plenaries, symposia, debates and workshops where leading experts will share their experience and expertise. Complementing this there will be an interactive trade exhibition of the latest technologies and equipment used in newborn screening.

The conference is held in a centrally located hotel in the safe, beautiful and vibrant city of Singapore, where you can experience our multi-cultural society and its diverse beauty.

Do not miss this wonderful opportunity and visit the website at www.6thaprm.com for details, and you can register online now to take advantage of the discounted early registration fee.

Yours truly

**Secretariat
6th APRM**

10th APPSPGHAN

**10th Congress of The Asia
Pan-Pacific of Paediatric,
Gastroenterology, Hepatology &
Nutrition (APPSPGHAN),
November 15-18, 2007,
Aga Khan University,
Karachi, Pakistan**

The above Congress is organised by The Asia Pan-Pacific Society of Paediatric, Gastroenterology, Hepatology & Nutrition (APPSPGHAN) in collaboration with Aga Khan University and Pakistan Pediatric Association GI Group.

Among the topics that will be highlighted are:

- * Emerging Issues in GI Inflammation
- * Obesity & Nutrition Transitions
- * Advances in bowel & liver transplantation
- * Preventive strategies for childhood diarrhea
- * Modern management of childhood diarrhea
- * Inflammatory bowel disease
- * Inherited metabolic liver disease
- * Micronutrient deficiencies in childhood
- * Nutrition issues in emergencies
- * Childhood obesity
- * Enteric fever
- * Preventive liver disease
- * Cystic Fibrosis
- * Coeliac disease

For further information, please contact:

Conference Secretariat, Aga Khan University,
Stadium Road, Karachi, Pakistan.

Tel: 92-21-486-4578 / 486-45-84 Fax: 92-21-493-2095

E-mail: appspghan2007@aku.edu

Website: www.aku.edu/appspghan

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