

APPA BULLETIN

ASIA PACIFIC PEDIATRIC ASSOCIATION

formerly known as Association of Pediatric Societies of the SouthEast Asian Region (APSSEAR)

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CONGRATULATIONS!

Warmest Congratulations to Dr. Naveen Thacker and Dr. Zulkifli Ismail on Their Achievements in Global Child Health!



Prof. Dr. Enver (with yellow tie) presenting the Honorary Memberships of Turkish National Pediatric Society (TNPS) and a Gold Medal each to Dr. Naveen Thacker & Dr. Zulkifli Ismail.

At the 63rd Turkish National Congress of Pediatrics (TNCP) 2019, International Pediatric Association (IPA) Executive Director, Dr. Naveen Thacker and Asia Pacific Pediatric Association (APPA) Secretary General, Dr. Zulkifli Ismail were awarded Honorary Memberships of Turkish National Pediatric Society (TNPS) and a Gold Medal each, for their contribution to Global Child Health.

The Honorary Memberships of TNPS and Gold Medal was presented by Prof. Dr. Enver Hasanoglu, Secretary General of the Turkish National Pediatric Society and IPA President-Elect, during the TNCP 2019 that was held from October 30 - November 3, 2019 in Vokolida, Turkey.

Warmest congratulations to both Dr. Naveen Thacker and Dr. Zulkifli Ismail on their achievements!

APPA PRESIDENT'S MESSAGE

Distinguished fellow pediatricians,

World Children's Day is celebrated every November 20 of each year, which began in 1954. Then on November 20, 1989, the United Nations General Assembly declared the Convention on the Rights of the Child. This year coincides with the 30th year Convention on the Rights of the Child. This convention regulates what

should be done by society so that each child can grow as healthy as possible, go to school, be protected, be heard, and be treated fairly. It is an important thing for us because it's one of the important points of advocating for children's health to ensure that children's rights are protected. Currently, children are faced with problems with the fulfillment of clean water, healthy air and security from violence and conflict.

Nowadays there are places where many children reside which are not conducive which eventually forced the children to separate from their families. In November 2019, the International Pediatric Association (IPA) in partnership with various government and academic institutions and organizations, including the Asia Pacific Pediatric Association (APPA), held a workshop on the current situation of children

PRESIDENT'S MESSAGE

and families who have been displaced globally and the potential responses we can give as a society. This is in line with SDGs no16 namely peace, justice, and strong institutions. It is our duty to ensure that any displaced children are handled properly. We all hope this meeting can produce solutions that we can apply to overcome the problems of children and families in conflict areas.

To reach wider pediatricians all over the Asia Pacific, APPA has been active in several media social. We aim to engage with younger pediatricians scattered all over Asia Pacific with Instagram, Twitter, and Facebook. Please do follow us on those platforms for easier communications. I believe our young pediatricians can be an influent advocator for our communities.

For the past year, we have done a lot at advocating immunization, preventing child marriage and doing collaborative activities between countries in Asia Pacific. At the end of this year I would like to congratulate all of us for having passed a productive year and hopefully being a benefit for children all over the world. Happy holiday!

Best regards,
Aman B Pulungan, MD, PhD, FAAP, FRCPI (Hon.)
President of APPA



MESSAGE FROM THE APPA SECRETARY GENERAL



To All National Paediatric Societies' leaders affiliated to APPA.

Greetings from the APPA Secretariat in Kuala Lumpur.

1. At the recent IPA Standing Committee meetings in Istanbul, Turkey, one of the decisions relate to the availability of resources from the IPA, eg humanitarian disasters, vaccine hesitancy, management of refugee needs, child rights & equity, helping babies survive, etc.

In order to make this available, we would also like to know what the needs of individual countries are in relation to Paediatric training and update.

2. We would appreciate it if you could inform us the immediate and medium-term needs of your local association.

Perhaps you may want to list the priorities in child health and paediatrics in your countries as a start and we can work from there.

3. I would also like to take this opportunity to thank the National Societies for updating your dues to IPA except for two countries. Emails have been sent and will continue to be sent as reminders to the two remaining countries.

For your information, dues collection from countries in the APPA Region is THE BEST among all the regions. Thank you and well done!

Thank you and warm regards to all.

Dr. Zulkifli Ismail APPA Secretary General



Malaysian Baby Infected by Tolio Virus from Thilippines



A view of the housing area in Tuaran in East Malaysian state of Sabah, where the three-year-old child who contracted the polio virus, was staying. - NSTP photo

The World Health Organization (WHO) and the United Nations Children's Fund (Unicef) have confirmed that the type of polio virus contracted by a 3-month-old Malaysian baby boy in the East Malaysian state of Sabah, is the same virus that is spreading in southern Philippines.

This was announced in a joint statement on December 11, 2019 after a lab test showed that the polio virus was traced to the Acute Flaccid Paralysis (AFP) syndrome that was similar to polio outbreak cases in the Philippines.

Malaysia's WHO representative, Dr. Ying-Ru Lo, said the polio case in Sabah was a cause for concern.

"WHO is ready to support the Malaysian Health Ministry in responding to this outbreak and in ensuring children in Malaysia receive the full protection of polio vaccines."

Malaysia's Unicef representative, Marriane Clark-Hattingh, said priority must be shifted to stop the virus transmission before the outbreak became worse.

"Every child, regardless of their economic status or origin, should be protected against this terrible disease," she said, adding that the only effective way to protect them was through vaccination.

The joint statement said: "The Sabah polio case is genetically linked to the ongoing poliovirus circulation in the southern Philippines, which declared an outbreak of polio on September 19, 2019. "WHO and Unicef have been providing technical advice on the outbreak response, on-the-ground monitoring and support for risk communication."

The agencies urged parents and caregivers to ensure children under age 5 were vaccinated as children were most at risk of the deadly disease.

"Polio vaccines are extremely safe and effective, and have resulted in reducing cases of polio globally by over 99 per cent. Polio vaccines must be administered multiple times to stop the outbreaks," the statement said.

On October 26, the 3-month-old baby developed fever and paralysis, which was later confirmed to be due to poliovirus following lab tests conducted by WHO's Regional Polio Reference Laboratory in Melbourne, Australia, on December 6.

Malaysia's last polio case was in 1992 before it was declared polio-free in 2000 together with other Western Pacific region countries

- nst.com.my, Kuala Lumpur, December 11, 2019



Report on Children's Day Celebration at SK Bukit Lanjan Damansara by MPA

Malaysian Paediatric Association (MPA) celebrated 2019 Children's Day modestly at a primary school, SK Bukit Lanjan Damansara in west coast Selangor state yet with fun and enthusiasm on November 20, 2019. MPA and the Parents Teachers Association (PTA) of the school jointly organised it.

MPA Vice President & APPA Treasurer, Dr. Selva Kumar Sivapunniam, a member of MPA, Dr. Nur Khatijah and the MPA secretariat were at the school representing MPA. SK Bukit Lanjan is a very unique school because of its student population consisting almost 90% of the Orang Asli (indigenous) population in the area.

The school is right in a busy business area that has crept into the Orang Asli settlement. SK Bukit Lanjan teachers planned a colourful programme full of activities for the primary school children aged from six years old until 12 years. Celebrations began with a prayer service conducted by teachers. Outdoor activities followed until 9am when Dr. Selva Kumar on behalf of the President officially launched the formal part of the celebration.

He gave a brief opening speech on the importance of Children's Day. Three paediatric dentists from the Malaysian Association of Paediatric Dentistry (MAPD) educated the students on oral hygiene and proper brushing technique. They also informed them on choices of healthy food and fruits to keep their teeth healthy. This lecture was filled with fun and laughter as the dentist made it simple yet informative for the students. There were quizzes on dental hygiene with prizes, and the kids were enthralled.

Towards mid morning, kids from each class, totalling eight teams entertained teachers and guests with their performances. Mostly were dances and some sang popular songs. The teams were creative with their props and moves.



Dr. Selva Kumar is third from right with others involved in the celebration.

The class teachers themselves were also busy coordinating the young ones as there were attractive prizes. Breakfast and later, a simple lunch was prepared for everyone. The event was made possible by MPA and the active participation of the school teachers and PTA. Dr. Juanna Bahadun (President), Dr. V. Annapurny (Vice President) and Dr. Rohaida Abdul Halim represented MAPD and they were looking for future collaboration with MPA on similar activities.

SK Bukit Lanjan Assistant Headmaster, Suhaidi bin Sapuan concluded the event with a word of thanks to MPA, MAPD and all involved in making this morning event a success. Both students and teachers alike were looking forward to more such events.

 Report prepared by Dr. Selva Kumar Sivapunniam, MPA Vice President & APPA Treasurer



The indigenous primary school children posing happily during the celebration.



National Pediatric Society Asia Regional Learning Collaborative



Discussions between societies, led by AAP. Standing left is Prof. Dr Mohd Zahid Hussain from BPA.

The American Association of Pediatrics (AAP) has been one of the biggest collaborative partners of the Asia regional pediatric society, especially in the immunization sector. Currently AAP are hoping to establish a Learning Collaborative to help promote the cross-sharing of information around best practices for pediatric society engagement in immunization advocacy and systems strengthening. The main purpose is to strengthen individual pediatric societies by working together and sharing best practices and challenges to improve immunization education and advocacy.

The Indonesian Pediatric Society (IPS) hosted the Launch of the National Pediatric Society Asia Regional Learning Collaborative, on Sunday, November 10, 2019 at the IPS Office in Jakarta, Indonesia.

Meeting objectives

Meeting objectives were to identify shared goals and challenges of National Pediatric Societies (NPS) around immunization and NPS activities and to develop a scope of reference; including goals and agreed upon structure and potential results. To strengthen individual pediatric societies by working together and sharing best practices and challenges to improve immunization education and advocacy.

Participants were: Prof. Dr. Mohd Zahid Hussain & Dr. Mohammad Abu Tayab from the Bangladesh Pediatric Association (BPA), APPA & IPS President, Dr. Aman Pulungan, Dr. Hartono Gunardi, Dr. Nina Dwi Putri & Dr. Catharine Mayung Sambo representing IPS, Dr. Binod Lal Bajracharya & Dr. Smriti Mathema from the Nepal Pediatric Society (NEPAS), Dr. Gohar Rehman & Prof. Dr. Ejaz A. Khan from the Pakistan Pediatric Association (PPA) and Dr. Sally R. Gatchalian & Dr. Fatima Gimenez from the Philippine Pediatric Society (PPS).

- Dr. Ayu Utami, Assistant to the APPA & IPS President, Dr. Aman Pulungan



Participants of the Launch of the National Pediatric Society Asia Regional Learning Collaborative together with the American Association of Pediatric.



APAPARI 2019

The Asia Pacific Academy of Paediatric Allergy, Respirology & Immunology (APAPARI) is the professional medical specialty organization representing paediatrician, allied health professionals and other physicians in Asia-Pacific region who have special interest in Allergy, Clinical Immunology and Respirology.







Balinese kids' dancers posing with top representives from APAPARI, IPS, World Allegy Organization and Pediatric Allergy Immunology Journal.

The event was held on October 9 - 12, 2019 at The Stones Hotel, Bali, Indonesia. Preceded by the pre-congress workshop on October 9, 2019 with 157 participants, the event was opened with an opening ceremony and welcoming dinner on 10, 2019 with remarks from October representative of Indonesian Pediatric Society (IPS) Dr. Piprim B. Yanuarso. The congress officially began with the opening speech from President of Indonesian Pediatric Society, Dr. Aman B. Pulungan, followed by report speech from President of APAPARI Professor Gary Wong and Chairman of APAPARI Congress 2019 Professor Dr. Budi Setiabudiawan. The event was attended by 867 participants.

- Dr. Ayu Utami, Assistant to APPA & IPS President, Dr. Aman Pulungan



REPORT ON 19TH NATIONAL CONFERENCE OF PAKISTAN PEDIATRIC ASSOCIATION (PPA)



PPA President, Prof. Gohar Rehman in his presidential address.

The 19th National Conference of Pakistan Pediatric Association (PPA) was held from October 18 - 20, 2019 in Pearl Continental Hotel Lahore. Pakistan Pediatric Association Punjab was the host and Lahore got the opportunity to host of this prestigious event. This Conference had an enriched Scientific Programme, which was decorated by many new concepts & academic activities.

The theme of the meeting this year was "Achieving Sustainable Development

Goals in Child Health" and the very theme was selected, keeping in mind the present situation of 'Indicators in Child Health' and the whole 'Scientific Programme' was focused on the awareness & implementation strategies regarding fulfilling the targets of Sustainable Development Goals by 2030.

The conference was attended by a large number of pediatricians, pediatric super-specialists, nurses and allied health professionals from all over the country. This was the highest number of delegates ever in any national Pediatric Conference organised by PPA (more than 2100 registered delegates). In addition to the registered delegates there were a significant number of post-graduate residents and students who were allowed to attend different workshops free of cost.

Pre & Post Conference Regional Workshops

These regional workshops and 'Hands on' trainings were another salient feature of the congress and its Organising Committee, as being arranged for the first time in such large number, and in many remote cities. They were conducted by 'Subject Experts' in different cities all over Punjab, including Sahiwal, Sialkot, Rahim Yar Khan, Bahawalpur, Sargodha and Faisalabad, and of course in Lahore at Children's Hospital and King Edward Medical University. Local delegates heavily attended all regional and local workshops and the very concept was highly appreciated by pediatric academia all over the province. Workshop on 'Nutrition in 1st 1000 Days of life' in collaboration with Nutrition International Pakistan was one of the key workshops focused on the theme on Day 1 of the congress at PC Lahore.

Inaugural Ceremony

The inaugural ceremony was attended by a large number of august academia, including deans, vice chancellors, principals, in-service & retired professors, district pediatricians, family physicians, senior administrative officers and guests from all over Pakistan. Prof. Masood Sadiq Chairman Organising committee and President PPA Punjab formally welcomed the guests and highlighted salient features of the congress. He also highlighted the various plans of Punjab government in the field of child health. Dr. Mumtaz Lakhani Secretary General PPA center read the annual report of the activities of the PPA all over the country including all 5 branches. Prof. Gohar Rehman President PPA center gave the presidential address and highlighted issues pertaining to child health in this country with recommendations.

The chief guest of the inaugural session was the honorable Governor of Punjab, Chaudhry Muhammad Sarwar. The Chief Guest in his thought provoking address endorsed and emphasized on the grave importance of 'Preventive Aspects in Child Healthcare' as the key to improve the indicators of child health for the achievement of Sustainable Development Goals. He highlighted the vital importance of 'Clean Drinking Water Supply' to each citizen in order to prevent a large number of water borne diseases, especially hepatitis A & E, and typhoid. The worthy governor showed his keen interest and offered his logistic support to the project of University of Child Health Sciences, Lahore. He also inaugurated the pharmaceutical exhibition.



Honourable Governor of Punjab, Chaudhry Muhammad Sarwar (left) presenting a plaque to PPA Secretary General, Dr. Mumtaz Lakhani. Looking on is PPA President, Prof. Gohar Rehman.

International & National Faculty

The scientific programme of the conference had a significant contribution by a large number of international & national faculties. Around 20 international & more than 80 national faculty members contributed their experience, expertise and academic excellence in their field of interest to the scientific programme of the conference. Of note was the president APPA Dr. Aman Pulungan who gave a plenary talk on "Present State of Children Health in Asia Pacific & Challenges to meet".



Participants who attended he 19th National Conference of PPA.

Research Presentations

The scientific programme of the conference ran parallel in 3 halls and was very heavily attended. A salient feature was that after state of art lectures in the relevant field, an equal time was given in each session to 'Free Papers', where junior consultants, senior registrars and postgraduate residents were encouraged to present their research in the form of oral and poster presentations on this august forum. Two research recognition awards were introduced for the first time in this conference for best research papers as follows:

- Professor Sajid Maqbool Award for first 3 'Best Oral Presentation'
- Professor Tahir Masood Ahmad Award for first 3 'Best Poster Presentation'

Tribute to Living Legends

This new tradition was a gesture of honoring and recognising the services of great Pediatric academic legends that served the ailing children for decades and were pioneers in many initiatives related to child health. The PPA Punjab took this initiative of a new tradition, and one unanimous nomination from each province was requested from all PPA provincial chapters. The respectable icons and legendary personalities were invited in-person (or a family member) on a dinner to receive their award in presence of the all the national & international faculty. The recipients were Prof. SM Hanif (Punjab), Prof. AG Billoo (Sindh), Prof. Ashfaq A Khan (KPK), Prof. Mushtaq Khan (Federal) and Prof. Abdul Malik Kansi (Baluchistan).



Group photo of organising committee during concluding session.

Theme-based Sessions followed by recommendations

Another new induction in the already rich scientific programme was the placement of 'Theme-based' discussions on pediatric health problems with valuable input by the relevant experts. These discussions were concluded in the form of 'Concrete Recommendations' to be submitted to the Government of the Punjab. This is for the first time that organising head of any Pediatric National or Biennial Conference will submit some fundamental goals, recommendations & suggestions to the establishment as an expert input. A full Session on Medical Education was included for the first time in the scientific programme.

Concluding Ceremony

The concluding ceremony took place on the last day of the conference and was attended by a large number of participants who stayed till the end. President PPA Punjab and Chairman Organising Committee formally thanked everyone and Prof. Sajid Maqbool and Prof. Tahir Masood Ahmed gave three best awards for the best oral and best poster presentations. Platinum sponsors of the meeting Sami Pharmaceutical and Genetics were given shields of appreciation and so were the conference official organisers Soulvers. General Secretary PPA center Dr. Mumtaz Lakhani from Karachi and other senior organising committee members were also present at the occasion.

- Pakistan Pediatric Association, Lahore, Pakistan

Panic in Pakistani City After 900 Children Test Positive for H.I.V.

Health workers say the reuse of syringes drove the outbreak in the city of Ratodero



Four of Imtiaz Jalbani's six children contracted H.I.V. His two youngest, 14-month-old Rida and 3-year-old Sameena, have died. Credit-Mustafa Hussain for The New York Times

Nearly 900 children in the small Pakistani city of Ratodero, located in Sindh province were bedridden early this year (2019) with raging fevers that resisted treatment. Parents were frantic, with everyone seeming to know a family with a sick child.

In April 2019, the disease was pinned down, and the diagnosis was devastating: The city was the epicenter of an H.I.V. outbreak that overwhelmingly affected children. Health officials initially blamed the outbreak on a single pediatrician, saying he was reusing syringes.

Since then, about 1,100 citizens have tested positive for the virus, or one in every 200 residents. Almost 900 are younger than 12. Health officials believe the real numbers are probably much higher, as only a fraction of the population has been tested so far.

Gulbahar Shaikh, the local journalist who broke the news of the epidemic to residents of his city and the nation in April 2019, watched as his neighbors and relatives rushed to clinics to line up and test for the virus. When officials descended on Ratodero to investigate, they discovered that many of the infected children had gone to the same pediatrician, Muzaffar Ghanghro, who served the city's poorest families and appeared to be at the center of the outbreak.

Mr. Shaikh panicked - that was his children's pediatrician. He rushed his family to be tested, and his 2-year-old daughter was confirmed to have the virus, which is the cause of AIDS. "It was devastating," said Mr. Shaikh, a 44-year-old television journalist in Ratodero, a city of 200,000 whose residents are some of Pakistan's poorest, with high illiteracy rates.

Cheapest option

Dr. Ghanghro was the cheapest option in this city, charging 20 cents a visit for the many parents here who earn less than \$60 a month. The pediatrician also treated all six of Imtiaz Jalbani's children, four of whom contracted HIV. His two youngest, 14-month-old Rida and 3-year-old Sameena, have died.

Mr. Jalbani, a laborer, said he first grew alarmed when he saw Mr. Ghanghro rummage through the trash for a syringe to use on Ali, his 6-year-old son, who is also infected. When Mr. Jalbani protested, he said, Mr. Ghanghro snapped at him and told him he was using an old syringe because Mr. Jalbani was too poor to pay for a new one. "He said, 'If you don't want my treatment, go to another doctor." Mr. Jalbani said. "My wife and I had to starve ourselves to pay for the medicine."

Dr. Ghanghro was arrested and charged by the police with negligence, manslaughter and causing unintentional harm. But he has not yet been convicted, and in an interview with The New York Times, he insisted he is innocent and has never reused syringes.

The doctor recently renewed his medical certificate and now works as a general practitioner at a government hospital on the outskirts of Ratodero, despite laws that make the reuse of syringes an offense that is not eligible for bail.

Doctors reusing syringes

Health officials now say that Dr. Ghanghro is unlikely to be the sole cause of the outbreak. Visiting health workers saw many cases of doctors reusing syringes and I.V. needles. Barbers take the same razor to the faces of multiple customers, they said, and roadside dentists crack away at patients' teeth on sidewalks with unsterilized tools.

Such unhygienic practices are prevalent across Pakistan and probably the leading cause of the country's surging rates of H.I.V. infection, according to health officials. But Ratodero is so poor that such practices are likely to be much more common, as residents struggle to make ends meet and scrimp wherever they can.

At first, the government was slow to respond to Ratodero's outbreak and barely had the resources to test residents and treat the sick. Teams of international health workers from various countries came to the city to help, and the World Health Organization (WHO) donated hundreds of testing kits.

Number of infected is much higher

Testing centers were set up in government buildings, while dozens of yellow tents sprouted up across the city to deal with the influx of terrified residents eager to be tested. Still, with not even a quarter of the city's population yet tested for the virus, officials are dreading that the real number of infected is much higher than the 1,112 confirmed cases so far.

The real number is likely higher; much of the population goes untested, while only about 10 percent of people thought to be HIV-positive are being treated.

The country spends very little on its efforts to counter H.I.V. and AIDS and is nearly entirely dependent on support from other countries for its programs, whether for funding to staff testing centers or to provide retroviral drugs to counter the virus

"With competing priorities, H.I.V. and AIDS is at the back seat of the government's agenda," said Maria Elena Filio-Borromeo, the UNAIDS director for Pakistan and Afghanistan.

First time, children the most frequent victims

This year's outbreak in Ratodero is the first time that children have been the most frequent victims on such a large scale, Ms. Filio-Borromeo said.



The daughter of Mr. Shaikh, the journalist, has become an outcast in the community, he said. Education about the virus is sparse, and many fear contracting it by touch. Relatives won't hug the girl, and other children will not play with her. At school, the sick children are segregated from the healthy, forced to sit on one side of the classroom.

"My wife and I, fortunately, we are literate. We hug and love our daughter. But our relatives stopped touching her and are now reluctant to visit us," said Mr. Shaikh, whose daughter is now responding well to treatment.

Five months on

Five months on, the panic of the outbreak still hangs over Ratodero. Doctors and paramedics are struggling to cope with the number of HIV-positive patients, while residents are still lining up to be tested.

The outbreak in Ratodero reflects a nationwide uptick in H.I.V. cases, despite a global decline of new infections. From 2010 to 2018, the number of H.I.V.-positive people in Pakistan nearly doubled, to about 160,000, according to estimates by UNAIDS, the United Nations task force that specialises in H.I.V. and AIDS. During that time, the number of new infections jumped 38 percent in those 15 to 24.

To counter the outbreak, the Pakistani authorities in May 2019 began shutting down the clinics of unqualified doctors and illegal blood banks - many of which were found to be reusing syringes. Months later, however, some of those clinics had since reopened, locals say.

"Unless these quack doctors, barbers and dentists are not checked, the number of incidents of H.I.V. infection will continue going up," said Dr. Imran Akbar Arbani, a local doctor, who had tipped off Mr. Shaikh about the outbreak as he also alerted government authorities.

In February 2019, Dr. Arbani started noticing dozens of children coming to his office with persistent fevers, from newborns to 8-year-olds. At least 35 children have died in the area since April 25, according to Dr. Arbani.

Mr. Shaikh said he had sold all his wife's jewelry and borrowed money in order to afford the treatment his daughter needs. "But how will the children from very poor families live?" he asked. "At the beginning, there was attention and an outcry, the patients were in the spotlight. Now, they are nearly forgotten."

- The New York Times, Ratodero, Pakistan, October 30, 2019



2020

INDIA

57th Annual Conference of the Indian Academy of Pediatrics.

[PEDICON 2020]

Dates: January 09-12, 2020

Venue: Brilliant Convention Center, Indore, Madhya Pradesh, India E-mail: info@pedicon2020.com Website: pedicon2020.com

Tel: 9193722 75650

TAIWAN

MasterClass in Vaccinology

Dates: March 7-8, 2020

Venue: Taipei International Convention Center

Website: mcv2020.com.tw

MALAYSIA

Asia Pacific Alliance for the Control of Influenza (APACI)

APACI Influenza Workshop 2020

Theme: "Control of Influenza"

Dates: March 13, 2020 Venue: ParkRoyal Hotel, Kuala Lumpur, Malaysia

E-mail: admin@apaci.asia Website: www.apaci.asoa

SINGAPORE

7th SG-ANZICS Asia Pacific Intensive Care Forum

Dates: April 2-6, 2020

Venue: Suntec Singapore Convention & Exhibition Centre

E-mail: sg-anzics@kenes.com Website: www.sg-anzics.com

TAIWAN

The 8th Congress of the Asia-Pacific Pediatric Cardiac Society (APPCS 2020)

Dates: April 2-5, 2020

Venue: Taipei, Taiwan

E-mail: reg@appcs2020.org Website: www.appcs2020.org

Congress Secretariat: Chloe Hung Tel: 886-2-2798-8329 Ext 25

JAPAN

The 123rd Annual Meeting of the Japan Pediatric Society

Date: April 10-12, 2020

Venue: Kobe Convention Center (https://kobe-cc.jp/en/)

Website: https://site2.convention.co.jp/123jps/ (Japanese only)

PHILIPPINE

The 57th Annual Philippine Pediatric Society (PPS) Convention

Theme: "Glocalizing Pediatric Health Care".

Dates: April 21-24, 2020

Venue: Philippine International Convention Centre, Pasay, Metro Manila, Philippines

Website: pps.org.ph

Pre-Regiatration Deadline: December 16, 2019

THAILAND

Thai Congress of Pediatrics

Dates: April 23-25, 2020

Venue: Dusit Thani Hotel Pattaya, Cholburi, Thailand

AUSTRALIA

The Royal Australasian College of Physicians (RACP) Congress 2020

Dates: May 4-6, 2020

Venue: Melbourne Convention & Exhibition Centre, Malbourne, Australia

Website: www.racpcongress.com.au

THAILAND

International Training Course on Tropical Diseases

Dates: September 7-11, 2020

Venue: Tropical Medicine Cluster, Chulalongkorn University

Bangkok, Thailand

For more information please contact: Ms Kamolnate Musicsawat

E-mail: TropMed.CV@gmail.com Tel: 662564575 Ext 24

MYANMAR

Myanmar Pediatric Conference Dates: Sept 19-20, 2020 Venue: Yangon, Myanmar E-mail: Prof. Kyaw Linn- linnkyaw.neuro@gmail.com

INDONESIA

National Congress of Child Health of Indonesian Pediatric Society Dates: September 25-30, 2020 Venue: Medan, Indonesia

E-mail: idaisci@idai.or.id

VIETNAM

The 17th ASEAN Pediatric Federation Congress (APFC) 2020 & The 23rd Annual Congress of Vietnam Pediatric Association (VPA)

Theme: 'Assuring equal access to quality healthcare services for all children'

Hosted by the: Vietnam Pediatric Association (VPA) Dates: October 14-17, 2020

Venue: Hanoi, Vietnam

E-mail: secretariats.apfc2020@gmail.com

SOUTH KOREA

10th Asian Congress of Pedatric Infectious Diseases (ACPID)

Dates: October 28-30, 2020 Venue: Seoul, South Korea Website: www.acpid2020.org

NEW ZEALAND

72nd Annual Scientific Meeting of the Paediatric Society of New Zealand Dates: November 11-13, 2020

Venue: Rotarua, New Zealand Website: www.paediatrics.org.nz

MALAYSIA

11th Asia Pacific Paediatric Endocrine Society (APPES) Biennial Scientific Meeting in conjunction with the 42nd Annual Congress of the Malaysian Paediatric Association

Dates: November 18-21, 2020

E-mail: secretariat@appes2020.org

Website: jspe.umin.jp/kanren/files/APPES2020.pdf

2021

JAPAN

The 124th Annual Meeting of the Japan Pediatric Society Dates: April 16-18, 2021 Venue: Kyoto International Conference Center Website: https://www.icckyoto.or.jp/en/

SCOTLAND

The International Pediatric Association (IPA) 2021 Congress Theme: "Ensuring a brighter future for all children" Dates: August 22-26, 2021

Venue: Glasgow, Scotland, United Kingdom

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PAKISTAN

The 17th Asia Pacific Congress of Pediatrics (APCP) organised and hosted by the Pakistan Pediatric Association (PPA) Dates: October 15-17, 2021 Venue: Lahore, Pakistan

MALAYSIA

MALAYSIA 8th Asian Vaccine Conference (ASVAC) 2021 (Details of the Conference will be announced on a later date)

- Compiled by Fairos Nazri, Executive Secretary, APPA





may improve patient's allergic rhinitis treatment adherence and outcomes as it provides better sensory attributes¹



ABBREVIATED PRESCRIBING INFORMATION FOR Avamys Nasal Spray. Product Name and Active Ingredient: Avamys Nasal Spray. AVAMYS Nasal Spray is a white, uniform suspension contained in an amber glass bottle, fitted with a metering (50 microlitres) atomising spray pump. Each spray of the suspension delivers approximately 27.5 micrograms of micronised fluticasone furoate as an ex-device dose. Indications: Adults and Adolescents (12 years and older): Treatment of the nasal symptoms (rhinorrhea, nasal congestion, nasal itching and sneezing) and ocular symptoms (itching/burning, tearing/watering, and redness of the eye) of seasonal allergic rhinitis. Treatment of the nasal symptoms (rhinorrhea, nasal congestion, nasal itching and sneezing) of perennial allergic rhinitis. Children (2 to 11 years): Treatment of the nasal symptoms (rhinorrhea, nasal congestion, nasal itching and sneezing) of seasonal and perennial allergic rhinitis. Dosage and Administration: AVAMYS Nasal Spray is for administration by the intranasal route only. For full therapeutic benefit regular scheduled usage is recommended. Onset of action has been observed as early as 8 hours after initial administration. It may take several days of treatment to achieve maximum benefit. An absence of an immediate effect should be explained to the patient (see Clinical Studies). Populations: For the treatment of seasonal allergic rhinitis and perennial allergic rhinitis: Adults and Adolescents (12 years and older): The recommended starting dosage is 2 sprays (27.5 micrograms per spray) in each nostril once daily (total daily dose, 110 micrograms). Once adequate control of symptoms is achieved, dose reduction to 1 spray in each nostril once daily (total daily dose, 55 micrograms) may be effective for maintenance. Children (2 to 11 years): The recommended starting dosage is 1 spray (27.5 micrograms per spray) in each nostril once daily (total daily dose, 55 micrograms). Patients not adequately responding to one spray in each nostril once daily (total daily dose, 55 micrograms) may use 2 sprays in each nostril once daily (total daily dose, 110 micrograms). Once adequate control of symptoms is achieved, dose reduction to 1 spray in each nostril once daily (total daily dose, 55 micrograms) is recommended. **Children (under 2 years of age)**: There are no data to recommend use of *AVAMYS* Nasal Spray for the treatment of seasonal or perennial allergic rhinitis in children under 2 years of age. Elderly: No dosage adjustment required. Renal impairment: No dosage adjustment required. Hepatic impairment: No dosage adjustment is required in patients with hepatic impairment. Pregnancy: Following intranasal administration of AVAMYS Nasal Spray at the maximum recommended human dose (110 micrograms/day), plasma fluticasone furoate concentrations were typically non-quantifiable and therefore potential for reproductive toxicity is expected to be very low. Lactation: The excretion of fluticasone furoate into human breast milk has not been investigated. Contraindications: AVAMYS Nasal Spray is contra-indicated in patients with hypersensitivity to any of the ingredients, Warnings and Precautions: Based on data with another glucocorticoid metabolised by CYP3A4, co-administration with ritonavir is not recommended because of the potential risk of increased systemic exposure to fluticasone furoate (see Interactions and Pharmacokinetics). Systemic effects with nasal corticosteroids have been reported, particularly at high doses prescribed for prolonged periods. These effects are much less likely to occur than with oral corticosteroids and may vary in individual patients and between different corticosteroid preparations. A reduction in growth velocity has been observed in children treated with fluticasone furoate 110 micrograms daily for one year (see Adverse Reactions and Clinical Studies). Therefore, children should be maintained on the lowest dose which delivers adequate symptom control (see Dosage and Administration). As with other intranasal corticosteroids, physicians should be alert to potential systemic steroid effects including ocular changes (see Clinical Studies). **Adverse Reactions**: Data from large clinical trials were used

to determine the frequency of adverse reactions. The following convention has been used for the classification of frequency: Very common (\geq 1/10); common (\geq 1/100 to <1/10); uncommon (\geq 1/1,000 to <1/100); rare (≥1/10,000 to <1/1,000); very rare (<1/10,000). **Clinical Trial Data:**

Respiratory, thoracic and mediastinal disorders

Very	Epistaxis			
common:	common:			
6 weeks) that	n adults and adolescents, the incidence of epistaxis was higher in longer-term use (more t i weeks) than in short-term use (up to 6 weeks). In paediatric clinical studies of up to 12 we uration the incidence of epistaxis was similar between AVAMYS Nasal Spray and placebo.			
Common:	Common: Nasal ulceration			

Children: Musculoskeletal and connective tissue disorders

Not known: Growth retardation				
In a one-year clinical study assessing growth in pre-pubescent children receiving 110 micrograms				
of fluticasone furoate once daily, an average treatment difference of -0.27 cm per year in grow				
uplosity was absorved compared to placebo (see Clinical Ctudies)				

Post Marketing Data: Immune system disorders

Rare:

Nervous system disorders							
Common:	Headache.						
Respiratory, thoracic and mediastinal disorders							

Hypersensitivity reactions including anaphylaxis, angioedema, rash, and urticaria

Uncommon:	Rhinalgia, nasal discomfort (including nasal burning, nasal irritation and nasal soreness), nasal dryness.	
Very rare:	Nasal septum perforation	

Please read the full prescribing information prior to administration, available from: GlaxoSmithKline Pharmaceutical Sdn Bhd (3277-U), Level 6, Quill 9, 112 Jalan Semangat, 46300 Petaling Jaya, Selangor Darul Ehsan, Malaysia. Abbreviated Prescribing Information Version 02 based on GDS10/ IPI09. Date of revision: 24th January 2018

References: 1. Yonezaki M, et al. Preference evaluation and perceived sensory comparison of fluticasone furoate and mometasone furoate intranasal sprays in allergic rhinitis. Auris Nasus Larynx. 2016;(43);292-297. 2. Yanez A, et al. Allergy Rhinol. 2006; 7:1-6. 3. Berger WE, Godfrey JW, Slater AL, Expert Opin Drug Deliv. 2007;4(6):689–701. 4. Berger WE, Godfrey JW, Grant AC, et al. J Allergy Clin Immunol. 2007;119(1):S231. **5.** Godfrey JW, Grant AC, Slater AL, J Allergy Clin Immunol. 2007;119(1)



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For Medical/Healthcare Professionals Only

Adverse events should be reported to drugsafetyinfo.my@gsk.com

Before prescribing, please refer to the full prescribing information, which is available upon request.



