

# BULLETIN

of the



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(formerly known as Asian Pacific Pediatric Association)

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(a newly created post)  
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## “Zika No Longer Global Health Emergency,” WHO Says

Zika, the mosquito-borne virus that can cause severe birth defects in the infants of infected mothers, is no longer a "global health emergency," the United Nation's World Health Organization (WHO) declared Friday (Nov. 19, 2016).

A WHO advisory panel said that while the spread of Zika remains of great importance, it should now be classed with other mosquito-borne maladies such as malaria or yellow fever, The New York Times reported.

"We are not downgrading the importance of Zika," Dr. Peter Salama, executive director of the WHO's emergencies program, told the newspaper. "We are sending the message that Zika is here to stay and the WHO response is here to stay."

Not everyone agreed with the agency's decision, however.

Dr. Anthony Fauci is a renowned virologist and director of the U.S. National Institute of Allergy and Infectious Diseases (NIAID). He believes it's too early to lift the state of emergency, since Zika is a seasonal disease.

"Are we going to see a resurgence in Brazil, Colombia and elsewhere? If they pull back on the emergency, they'd better be able to reinstate it," he told the Times. "Why not wait a couple of months to see what happens?"

Fauci said that NIAID is continuing to fund research into a vaccine against Zika, which has so far been tied to thousands of cases of children being born with a birth defect known as microcephaly. The anomaly causes babies to have abnormally small skulls and underdeveloped brains.

The virus has also been linked to other issues, including fetal deaths, and babies born blind, deaf or with severely clubbed feet or permanent limb rigidity, the Times noted.

Earlier this year, mosquitoes carrying Zika virus made their first appearance in Florida, especially certain areas of Miami. The U.S. Centers for Disease Control and Prevention has advised that pregnant women should not travel to the affected areas, or should take measures to avoid mosquito bites.

- Nov. 18, 2016, HealthDay news



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

# Congratulations IJN!

## IJN, First To Perform 'Bio-Absorbable PV Conduit' Surgery in the Asia Pacific Region

The National Heart Institute (IJN) in Kuala Lumpur, Malaysia has become the first heart centre in the Asia Pacific Region to successfully perform surgeries to implant 'Bio-absorbable Pulmonary Valve (PV) Conduit' on three children with congenital heart defect.

IJN Chief Executive Officer Dr Mohd Azhari Yakub said the three children were operated within this week (October 17, 19 & 20, 2016 respectively) successfully. The first, a seven-year-old girl, second a six-year-old girl and a four-year-old boy.



Dr Mohd Azhari Yakub

Dr Mohd Azhari said this had created history for the institute as heart institute seldom performed such surgeries.

"The three children are considered the fifth, sixth and the seventh patients in the world who underwent this surgery. Besides Malaysia, there are only two heart centres in the world who have done the same surgery, one in Budapest, Hungary and the other in Krakow, Poland," he told reporters at IJN .

Dr Mohd Azhari said the surgeries on the three children which took four hours was led by Consultant Cardiothoracic Surgeon Dr S. Sivakumar and the institute will perform another 12 more surgeries by year-end.

He said the PV Conduit made of polymer based implant device was developed by a company from Switzerland 'Xeltis' and used to correct or reconstruct the Right Ventricular outflow in patients.

"The PV will gradually absorb the body naturally over a period of one to two years before helping the body to regenerate own tissues, thus enabling the heart to be restored to its normal function," he said.

He said the device with a size of between 16 to 18 millimeters in diameter is suitable for patients within the age of two to 22, to facilitate the flow of blood from the heart to their lungs.

"With the introduction of this new PV Conduit device and the successful clinical trial results, we hope within the next two to three years, the device would be available for commercial use, and it shall benefit many congenital heart patients," he said.

- **BERNAMA** (Malaysian National News Agency), Kuala Lumpur, Malaysia October 20, 2016



# PRESIDENT'S MESSAGE



Very warm greetings to all My APPA Colleagues!

It has been a great pleasure for me to serve as a President of APPA and I appreciate the great work and contribution of APPA members societies. Here is some progress on APPA Action Plan 2016-18.

## Technical Advisory Groups (TAGs) - Work So Far

As mentioned in my earlier report that Guidelines are issued to Technical Advisory Groups (TAGs) to provide a proper work plans. We have received work plans from most of the TAGs.

Our next step was to have a survey and baseline data collection for which Questionnaire were prepared by our respective TAG groups and has been shared with all APPA member societies. We are getting a very good response from all.

## APPA Task Force - Antimicrobial Resistance & Obesity

It had been proposed to form APPA Task Force on Antimicrobial Resistance & Obesity with definite terms of reference in time bound manner for one year. A mail had been sent to all the APPA members to know their willingness to join the task force.

## Asia Pacific text book of Pediatric Nutrition

As per one of the work plan activity of APPA TAG on Nutrition is to publish a book on Nutrition, Table of content has been shared

and we have requested to suggest names of contributors from their countries who can serve as editors/ section editors/ chapter authors of the book. So far few responses are received.

## Plan to launch APPA Journal

As discussed in the meeting at Vancouver to re-launch APPA journal titled as Asia Pacific Journal of Pediatrics and Child Health, I am pleased to inform that work has been started on it. I would like to thank Dr. Anupam Sachdev for taking the responsibility as Executive Editor and for all efforts put in for the launch of the APPA Journal.

Besides this we are working on constitution revision and history of APPA.

It was my great pleasure to attend and represent APPA at the Annual Conference of Chinese Pediatric Society in Zhuhai on 19 - 21 October and Summit on Childhood Obesity in Chinese Speaking Communities held on 22 - 23 October 2016 at Hong Kong Academy of Medicine, Hong Kong and the 8th Asian Congress of Pediatric Infectious Diseases (ACPID 2016) at Bangkok, Thailand held on November 8 - 10, 2016.

I look forward for all your support for taking APPA to newer heights.

**Dr. Naveen Thacker**  
**President- APPA**

Panama City, Panama in Central America - Photo by travel innate.com



# 29<sup>th</sup> International Pediatric Association (IPA) Congress

The 29<sup>th</sup> IPA Congress will be held in March 2019 in Panama city, Panama, Central America.

# CHILDREN & WAR

## CRIMES OF HISTORIC PROPORTIONS

### Aleppo, a Slaughterhouse," Says UN Rights Chief

UN Human Rights Chief Zaid Raad Al Hussein has described the Syrian City of Aleppo as a "slaughterhouse."

In a speech, he said the siege and bombardment of Aleppo's rebel-held east were among the "crimes of historic proportions," being committed in Syria.

Almost 500 people have been killed and 2,000 injured since government forces backed by Russian air strikes, launched an assault on the east a month ago (September 2016).  
- bbc.com, Aleppo, October 21, 2016

**Meanwhile**, UNICEF's field office head in Syria's battered Aleppo, Radoslav Rzehak estimates that half a million children in Aleppo need some kind of psychological and social support, including 100,000 who need specialised assistance.

He said that all children in Aleppo are suffering from trauma after enduring some of the worst violence in their country's war.

"All children in Aleppo are suffering. All are traumatised," Rzehak told AFP news agency inside the devastated city. "I have never seen in my life such a dramatic situation (as) what is happening to children in Aleppo," said Rzehak.

The city's east had been a rebel stronghold since mid-2012, but government forces in recent weeks have overrun more than 85 percent of that area. More than 300,000 people have been killed since Syria's conflict erupted in March 2011 and millions more have been forced to flee their homes.

- AFP, Aleppo, December 12, 2016



The devastating effect of war in Aleppo, Syria.  
-Photo by jceworldblogspot.com



The cruelty of war in Aleppo, Syria.  
- Photo by youtube.com

## UNICEF STATEMENT

**"The murder of the innocents in Aleppo must stop"**

**-UNICEF Executive Director Anthony Lake**

"In Aleppo, Syria, 96 children killed and 223 children injured in merciless attacks this week alone (September 29, 2016). Each one, a daughter or a son.

"Doctors forced to let some children die while saving others with scarce medical supplies.

"Tens of thousands of children drinking dirty water because a pumping station was bombed and another switched off. "Brave aid and rescue workers killed. "Aid convoys destroyed.

"The world is watching these horrors unfold. Every day, they continue ... and get worse.

"The murder of the innocents in Aleppo must stop. "UNICEF and our partners have just delivered some supplies to the besieged areas of Madaya, Fouah, Kefraya and Zabadani. In addition to continuing operations in western Aleppo, we are doing what we can to provide trucked water supplies throughout the city. "But it is far from enough.

"The only real answer for Aleppo is an end to its descent into further horror."

- UNICEF, New York, September 29, 2016

## CHILDREN & TEACHERS MURDERED

**22 children and six teachers murdered on October 26, 2016 in Idlib, Syria**

"Twenty-two children and six teachers were reportedly murdered today (October 26, 2016) when their school compound was repeatedly attacked in Idlib, northwest Syria," said UNICEF Executive Director Anthony Lake.

"This is a tragedy. It is an outrage. And if deliberate, it is a war crime.

"This latest atrocity may be the deadliest attack on a school since the war began more than five years ago. "Children lost forever to their families ... teachers lost forever to their students ... one more scar on Syria's future.

"When will the world's revulsion at such barbarity be matched by insistence that this must stop?"

- UNICEF, New York/Amman, October 26, 2016



A boy, displaced from ongoing conflict in Syria.

**Note:** Throughout the war in Syria, schools have been targeted by both rebel and regime forces. According to UNICEF, there were 60 attacks on schools in Syria in 2015, killing a total of 591 children. This year (2016), the United Nations has documented 84 attacks on schools across the country, with at least 69 children losing their lives and many others injured.

- Al Jazeera, December 13, 2016

## A BIG THANK YOU FROM IPA

### IPA'S CAMPAIGN ON “#ProtectChildrenofWar”

Dear IPA Colleagues,  
Greetings from International Pediatric Association (IPA)!

The IPA team would like to convey a "BIG Thank You" to all its member societies, pediatricians and other medical professionals, who whole heartedly gave their support towards our campaign "#ProtectChildrenofWar" and for the IPA petition to the UN Secretary General. IPA had received huge support through email and social media.

About 10,000 people reached us on Facebook and Twitter while the IPA Petition was signed by almost 1400 healthcare providers from all over the world.

Once again, thank you and we hope to get the same support in future.

For regular updates, news and for more information on events happening on child health topics, please visit the IPA website or Join us/ Follow us on Facebook, Twitter and LinkedIn.

**Regards,  
Zulfiqar Bhutta  
President  
IPA**

**William Keenan  
Executive Director  
IPA**

**Naveen Thacker  
Coordinator of Development  
IPA**

IPA Website: <http://ipa-world.org/>  
IPA Facebook : <https://www.facebook.com/InternationalPediatricAssociation/>  
IPA Twitter: <https://twitter.com/IPAWorldorg>  
IPA LinkedIn: <https://www.linkedin.com/company/international-pediatric-association>

## The International Pediatric Association has submitted the Following Petition - “Protect Children of War”- to the UN Secretary General.

IPA would like to thank all healthcare providers who have signed the Petition (below) and extended their support in short span of time.

### PETITION

As health care providers, we believe that all children deserve hope in a safe environment. The petition asks governments to:

- a) The UN convention on the Rights of the Child, which all countries of the world have signed, must be fully implemented everywhere, especially in conflict zones.
- b) We call upon the UN Secretary General to take the strongest action possible for protecting children and families in conflict zones and for ensuring that the at-risk families and children of Aleppo be evacuated to save them from becoming innocent victims of war. We call upon the UN to fully enforce the laws protecting civilians, women and children and health care workers in such settings.
- c) We urge the UN agencies and global community to recognize the risk of a lost generation in the war zones of the world, especially Syria and Iraq, and in addition to the immediate measures listed above, to ensure that adequate facilities and support for mental health and long-term psychosocial support are provided to all families at-risk.
- d) We condemn the deliberate targeting. - [ipa-world.org](http://ipa-world.org)



# BEWARE OF MOSQUITOES **ZIKAVIRUS**

Mosquitoes are one of the deadliest animals in the world. Their ability to carry and spread disease to humans causes millions of deaths every year. Zika, dengue, chikungunya, yellow fever, malaria, and West Nile virus are just some of these diseases.

- World Health Organization (WHO)



# BRAIN DAMAGE BY ZIKA



A report released on Tuesday shows in graphic detail the kind of damage Zika infections can do to the developing brain - damage that goes well beyond the devastating birth defect known as microcephaly, in which the baby's head is smaller than normal.

The current Zika outbreak was first detected last year in Brazil, where the virus has been linked to more than 1,800 cases of microcephaly, which can cause severe developmental problems.

Prior research has shown the Zika virus attacks neural progenitor cells - a type of stem cell that develops into different types of nerve or brain cells.

The latest research, published in the journal *Radiology*, draws from imaging and autopsy findings linked with confirmed Zika infections done on 17 infants and fetuses cared for at the Instituto de Pesquisa, in Campina Grande in the state of Paraiba in northeastern Brazil, where the infection has been especially severe.

The study also included reports on 28 fetuses or newborns with brain anomalies whose mothers were suspected of having Zika during pregnancy.

Nearly all babies in each group had ventriculomegaly, a condition in which the ventricles, or fluid-filled spaces in the brain, are enlarged.

While most of the fetuses had at least one exam showing abnormally small head circumference, suggesting they had microcephaly, three of the fetuses with ventriculomegaly had normal head circumference, but severe ventriculomegaly.

Nearly all of the fetuses or babies in the confirmed Zika group and nearly 80 percent of those in the presumed Zika group also had abnormalities of the corpus callosum - a large bundle of nerves that facilitates communication between the left and right hemispheres of the brain.

**Aedes aegypti mosquitoes are seen inside Oxitec laboratory in Campinas, Brazil, February 2, 2016. REUTERS/Paulo Whitaker/File Photo**

In all but one of the cases studied, the researchers found instances in which developing neurons did not travel to their proper destination in the brain.

In many cases, the babies' skulls seemed to have collapsed on themselves, with overlapping tissues and abnormal skin folds suggestive of a brain that had stopped growing.

"From an imaging standpoint, the abnormalities in the brain are very severe when compared to other congenital infections," said study co-author Dr. Deborah Levine of Beth Israel Deaconess Medical Center and a radiology professor at Harvard Medical School in USA.

As with other reports, the paper suggests that Zika does the most harm in the first trimester of pregnancy. The researchers plan to keep following the cases to see what impact prenatal Zika infections have on future brain development.

There is no vaccine or treatment for Zika, which is a close cousin of dengue and chikungunya and causes mild fever, rash and red eyes. An estimated 80 percent of people infected have no symptoms, making it difficult for pregnant women to know whether they have been infected.

Zika is carried by mosquitoes, which transmit the virus to humans. A small number of cases of sexual transmission have been reported in the United States and elsewhere.

**- Reuters, Chicago, USA, August 23, 2016**



**RACP**  
**Specialists. Together**  
EDUCATE ADVOCATE INNOVATE

## **RACP Paediatrics International Grant - Asia Pacific Region**

The Paediatrics & Child Health Division (PCHD) of The Royal Australasian College of Physicians (RACP) is pleased to advise of a grant to support paediatric specialists from the Asia-Pacific region to enhance their knowledge in Australia or New Zealand. It is envisaged that a key effect of the grant will be a direct impact on health outcomes in the country of the proposed recipient.

The Paediatrics International Grant - Asia Pacific Region provides up to AUD\$10,000 to further specialists' knowledge in paediatric medical education or research - for example to learn specific skills at one or multiple centres, or to attend workshops or training courses. The grant is provided to cover fares, accommodation, and project or study costs.

It is important to note that to be eligible the specialist must:

- Have support (including financial support) from their home institution or medical network.
- Be sponsored by a Paediatrician of the PCHD (a Fellow of the RACP) who has a proven relationship, including philanthropic or pro bono, with that institution or medical network.

Applications close 30 June 2017. For further information including terms and conditions and the application form please visit the website:

[www.racp.edu.au/about/racp-foundation-awards/international-awards](http://www.racp.edu.au/about/racp-foundation-awards/international-awards)

The RACP Foundation manages this award and enquiries are to be directed to [Foundation@racp.edu.au](mailto:Foundation@racp.edu.au).

*Please note that The RACP also provides an International Grant - Asia Pacific Region (Developing Countries). The terms and conditions are similar to the above grant - see the information on the website per the link above.*

Prof Paul Colditz  
Chair, PCHD Research Committee  
President-Elect, PCHD

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For all our latest insights see [www.racp.edu.au](http://www.racp.edu.au)

# Why doctors say babies should sleep in their parents' room for the first year



**Babies should sleep in their parent's room for the first year.**  
- Photo by [blogs.babycenter.com](http://blogs.babycenter.com)

To reduce the risk of sudden death, babies should sleep in the same room as their parents but in their own crib or bassinet for the first year of life, US doctors said today (October 24, 2016).

The new policy statement by the American Academy of Pediatrics (AAP) still says babies should sleep on their backs, on a clean surface free of toys and blankets, a guideline that has been in place since the 1990s and has reduced sudden infant deaths by about 50 per cent.

Still, some 3,500 infants die each year in the United States from sleep-related deaths, including sudden infant death syndrome (SIDS) and accidental suffocation and strangulation.

The main change to the AAP guidelines, which were last issued in 2011, is the specific call for infants to stay in their parents' room for six months to a year if possible - but not sleep in the same bed.

"Parents should never place the baby on a sofa, couch, or cushioned chair, either alone or sleeping with another person," said lead author Rachel Moon. "We know that these surfaces are extremely hazardous."

## 'One never forgets'

Experts say that urging parents to put babies to sleep on their backs instead of their bellies helped drive down the rate of sudden infant death from 120 deaths per 100,000 live births in 1992 to 56 deaths per 100,000 in 2001 - a 53 per cent reduction in one decade. That advice still stands.

Deaths from SIDS have plateaued in recent years, but it is still the leading killer of babies aged one month to one year. Children may become entangled in bedding, or suffocate under bumpers or toys, get squeezed in the corner of a couch or armchair, get overheated, or simply stop breathing for no apparent reason.

"It is nothing but tragic," said Peter Richel, chief of the department of paediatrics at Northern Westchester Hospital, who remembers losing two patients in the past 26 years to sudden infant death - a four-month-old boy and a two-week-old girl.

"Often there is nothing special to point to, other than they are just kind of taken away," he said. "It is something that one never forgets."

Other risk factors for SIDS include smoking in the home, and exposing babies to drugs or alcohol.

Richel said that the new policy means doctors will have to change some of their long-held advice.

"Many paediatricians will suggest that by two months of age, infants go to their own room, and with the use of a monitor so that you can hear them cry out for a feeding," said Richel. "This really goes against that kind of usual advice, which is fine, because if it saves lives we are all for it."

## Latest data

The new policy is described in a paper called, "SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment," and will be presented today at the AAP National Conference and Exhibition in San Francisco.

"The most important thing to remember is that the crib should be free of all loose objects that could lead to strangulation or suffocation," said Robert Glatter, an emergency physician at Lenox Hill Hospital, who was not involved in the research. "This means that a bare environment is ultimately safest."

The AAP policy also suggests placing newborn infants skin-to-skin with the mother "immediately following birth for at least an hour as soon as the mother is medically stable and awake."

Breastfeeding is recommended, but mothers are urged to move the baby to a separate sleeping space afterward.

"If you are feeding your baby and think that there's even the slightest possibility that you may fall asleep, feed your baby on your bed, rather than a sofa or cushioned chair," said co-author Lori Feldman-Winter, a member of the Task Force on SIDS. "If you do fall asleep, as soon as you wake up be sure to move the baby to his or her own bed," she said.

The highest risk period for SIDS comes between the ages one to four months. SIDS is rare in babies older than eight months. Other strategies include offering a pacifier at nap time and bedtime, and making sure infants get all their recommended vaccines.

Parents are warned against using expensive home monitoring systems, as well as wedges or positioners that may be marketed as reducing the risk of SIDS.

"We know that we can keep a baby safer without spending a lot of money on home monitoring gadgets but through simple precautionary measures," Moon said. - **AFP, October 24, 2016**

# INTERNATIONAL PAEDIATRIC EVENTS

## INDIA

2017

### 54<sup>th</sup> National Conference of Indian Academy of Pediatrics (PEDICON2017)

**Venue:** Bangalore, India

**Dates:** January 18-22, 2016

**Enquiries** to Dr. Karunakara B.P., Chief Organizing Secretary

**E-mail:** pedicon2017@gmail.com **Website:** www.pedicon2017.in

## INDONESIA

2017

### The 11<sup>th</sup> International Congress of Tropical Paediatrics (ICTP)

**Theme:** "Global Challenges Interventions (Preventions, Control, Elimination and Eradication) to Reduce Neglected Tropical Diseases: Improving Quality of New Generation".

**Dates:** August 5-7, 2017

**Venue:** Mataram City International Convention Center, Mataram, Indonesia

**Website:** www.ictp2017.com E-mail: sekretariat@ictp2017.com

## INDONESIA

2017

### The 13<sup>th</sup> International Course on Pediatric Pulmonology (ICPP)

**Dates:** April 21-23, 2017

**Venue:** Mercure Hotel, Nusa Dua, Bali, Indonesia

**Website:** iccp-thecourse.org **E-mail:** infor@icp-thecourse.org

## MYANMAR

2017

### 16<sup>th</sup> ASEAN Pediatrics Federation Congress (APFC) 2017

**Dates:** September 21-24, 2017

**Venue:** Novotel Hotel Max Hotel, Yangon, Myanmar

**Theme:** Ensuring healthy lives and promoting well-being of ASEAN children

**E-mail:** linnkyaw.neuro@gmail.com **Website:** apfc2017myanmar.org

## SINGAPORE

2017

### 6<sup>th</sup> Asian Vaccine Conference (ASVAC 2017)

**Dates:** April 27-29, 2017

**Venue:** Singapore city, Singapore **Website:** asvac2017.com

## MALAYSIA

2017

### 13<sup>th</sup> Asian Congress of Pediatric Nephrology (ACPN 2017) in conjunction with the 39<sup>th</sup> Malaysian Paediatric Association (MPA) Annual Congress

**Dates:** October 5-7, 2017

**Venue:** Kuala Lumpur, Malaysia

**Website:** www.acpn2017.com.my

**Secretariat e-mail:** info@acpn2017.com.my

**Tel:** 603-2162 0566 **Fax:** 603-2161 6560

## AUSTRALIA

2017

### RACP Congress 2017

**Dates:** May 8-10, 2017

**Venue:** Melbourne Convention and Exhibition Centre, Melbourne, Australia

**Host:** RACP (Royal Australasian College of Physicians)

**Theme:** 'Bringing Specialists Together, Sharing Knowledge, Building Skills'

**Website:** racp.edu.au

## INDIA

2017

### 11<sup>th</sup> World Congress on Adolescent Health

**Theme:** "Investing in Adolescent Health – the Future is Now"

**Dates:** October 26-28, 2017

**Venue:** New Delhi, India

**Website:** www.planit-india.com

**Tel:** 91 11 268 72256 **Fax:** 91 11 2688 5886

## JAPAN

2017

### 14<sup>th</sup> Asian and Oceanian Congress of Child Neurology

**Dates:** May 11-14, 2017

**Venue:** Hilton Fukuoka Sea Hawk, Fukuoka, Japan

**Secretariat E-mail:** aoccn2017@kys.jtb.jp

**Website:** www.aoccn2017.org

## INDONESIA

2018

### 16<sup>th</sup> Asia Pacific Congress of Pediatrics (APCP 2018)

**Theme:** "SDGs and Reducing Inequalities: How Far Have We Come?"

**Dates:** Pre Congress Workshop: August 22-23, 2018

**Congress:** August 24-26, 2018

**Exhibition:** August 24-26, 2018

**Venue:** Bali Nusa Dua Convention Center (BNDCC), Nusa Dua Bali, Indonesia

**Secretariat:** Indonesian Pediatric Society (IPS), Jl Salemba 1 No. 5 Jakarta Pusat 10430, Indonesia

**Website:** apcp2018.org **Email:** sekretariat@apcp2018.org

**Tel:** 6221 31 48610 **Fax:** 6221 391 3982

## MALAYSIA

2017

### 11<sup>th</sup> International Symposium on Paediatric Pain (ISPP 2017)

**Theme:** "Understanding Pain in Children- Take the First Step"

**Dates:** July 6-9, 2017

**Venue:** G-1 Medical Academies of Malaysia

210 Jalan Tun Razak, 50400 Kuala Lumpur, Malaysia

**Website:** www.ispp2017.org **E-mail:** admin@ispp2017.org

**Tel:** 603- 4023 4700 **Fax:** 603- 4023 8100

## FRANCE

2017

### 3<sup>rd</sup> International Neonatology Association Conference

**Dates:** July 7-9, 2017

**Venue:** Lyon, France

**E-mail:** sekretariat@worldneonatology.com

**Website:** 2017.worldneonatology.com

## PANAMA

2019

### The 29<sup>th</sup> International Pediatric Association (IPA) Congress 2019

**Dates:** March 2019

**Venue:** Panama City, Panama, Central America

# 8<sup>th</sup> Asian Congress of Pediatric Infectious Diseases



**His Excellency Ambassador Kulkumut Singhara Na Ayudhaya (second from left) and Professor Usa Thisyakorn, the 8<sup>th</sup> ACPID President at the 8<sup>th</sup> ACPID Opening Ceremony on 8<sup>th</sup> November 2016 in Bangkok, Thailand**

The 8<sup>th</sup> Asian Congress of Pediatric Infectious Diseases (8<sup>th</sup> ACPID) was successfully held at Queen Sirikit National Convention Center, Bangkok, Thailand during 8-10 November, 2016 with the Pre-Congress Training Course on “Severe Dengue” during 7-8 November, 2016.

The theme of the Congress is “Working together to safeguard children”. The Congress was attended by more than 1,000 participants from over 40 countries with 158 abstracts eligible for presentation out of 212 submitted abstracts.

The major changes from the past 7 ACPID congresses are: a mobile application through both IOS and Android systems were installed where all scientific programs, congress abstracts as well as E-posters are shown.

For those who are familiar to the traditional program and abstract books, we also provide the program book and USB card with the same information. Poster presentation was displayed electronically with some selected E-posters for discussion.

The scientific program included 1 keynote lecture entitled “Prevention and treatment of malaria in children” by Professor Nicholas J White, 12 plenary lectures with the first plenary lecture on “Elimination of mother-to-child transmission of HIV:

Lessons learnt from success in Thailand” by Professor Usa Thisyakorn, the 8<sup>th</sup> ACPID President.

There were 15 symposia, 8 meet the experts, 5 educational sessions and 6 sponsored symposia, all scientific program highlights important pediatric infectious diseases issues occurring around the world, mainly focus on Asia and mostly relevant to prevention of pediatric infectious diseases. The pre-congress short course on “Severe dengue” was also held during 7-8 November, 2016.

At the closing, awards were given to 6 best oral presentation and 5 best E-poster discussion presentation. Photos taken during the congress have been uploaded on <https://www.youtube.com> under the name of 8thACPID photos.

The 9<sup>th</sup> ACPID will be held in Fukuoka, Japan during 10-12, November 2018 and the 10<sup>th</sup> ACPID will be held in Korea in 2020.

**Professor Usa Thisyakorn, M.D.**  
**President, Asian Society for Pediatric Infectious Disease**  
**Standing Committee Members, International Pediatric Association**



**APCP 2018**

# 16<sup>th</sup> Asia Pacific Congress of Pediatrics (APCP) 2018

22-26 August 2018

Bali Nusa Dua Convention Center (BNDCC)  
Nusa Dua - Bali, Indonesia



## SDGs and Reducing Inequalities: How Far Have We Come?

### PROGRAM AT A GLANCE

Day 1 22 Aug 2018	Day 2 23 Aug 2018	Day 3 24 Aug 2018	Day 4 25 Aug 2018	Day 5 26 Aug 2018
Registration, Pre-Congress Workshop	Pre-Congress Workshop	Breakfast meeting, Keynote lectures, Pre-cong, Plenary session, Meet the Expert, Symposia, Oral Presentations	Breakfast meeting, Keynote lectures, Pre-cong, Plenary session, Meet the Expert, Symposia, Oral Presentations	Breakfast meeting, Keynote lectures, Pre-cong, Plenary session, Meet the Expert, Symposia
		Welcome Reception	Gala Dinner	Closing Ceremony
Posters & Exhibition				

### SCIENTIFIC TOPICS

- First 1000 days
- Stunting
- Breastfeeding
- Adolescent health
- Immunization
- Hematology-oncology
- Endocrinology
- Allergy-immunology
- Nutrition and metabolic diseases
- Cardiology
- Pediatric radiology
- Gastroenterology and hepatology
- Infection and tropical diseases
- Neurology
- Nephrology
- Social pediatrics
- Pediatric critical care
- Respiriology
- Nematology
- Pediatric pharmacy
- Child protection
- Newborn screening
- Disaster medicine and crisis management

### REGISTRATION

#### CONGRESS FEE FOR INTERNATIONAL DELEGATES

(REGISTRATION FEE IN US DOLLAR USD)

Category	EARLY BIRD 1 Nov 2016 - 31 Dec 2017	REGULAR RATE 1 Jan 2018 - 31 Apr 2018	LATE RATE 1 May 2018 - 31 Aug 2018	ONSITE RATE 1 Sep - 26 Aug 2018
APPA Delegate	325	350	400	475
Accompanying Person of APPA Delegate	275	300	325	350
Foreign Delegate (Non APPA Member)	600	700	800	900
Accompanying Person of Foreign Delegate (Non APPA Member)	275	300	325	350
Trade/Corporate Delegate	650	750	850	950

#### WORKSHOP FEE FOR INTERNATIONAL DELEGATES

USD 125 for 1 (one) day workshop

[www.apcp2018.org](http://www.apcp2018.org)

### SOCIAL PROGRAMS



**Welcome Reception**  
24 August 2018, Taman Jepun, BNDCC



**Gala Dinner**  
25 August 2018, Garuda Wisnu Kencana (GWK)

### Tours

Accompanying Person Program (Leisure, Eat and Pray)

#### Bali Tour 1 (Optional)

Full Day Ubud Monkey Forest, Mengwi, Bedugul, & Tanah Lot Temple (by Bus)

#### Bali Tour 2 (Optional)

Full Day Barong Dance & Kintamani (by Bus)

#### Explore Beyond Bali (Optional)

Toraja Package | Komodo & Rinca Trails Package | Jogja Stopover



### Nusa Dua Map



### SECRETARIAT

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