

# APPA BULLETIN

#### ASIA PACIFIC PEDIATRIC ASSOCIATION

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

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SUHAKAM ///

# STATEMENT ON REPORTS OF CHEMICAL WEAPONS ATTACKS IN SYRIA - SUHAKAM

A Syrian child receives treatment at a small hospital in the town of Maaret al-Noman following a suspected toxic gas attack in Khan Sheikhun, a nearby rebel-held town in Syrias northwestern, Idlib province on April 4, 2017. (Getty)





The Human Rights Commission of Malaysia (Suhakam) condemns in the strongest terms the brutal chemical weapons attack in the Idlib Province in Syria on April 4, 2017, which has led to the deaths of at least 72 people, including infants, children and women, and injuries to many more.

Such atrocities in Syria continue with impunity and Suhakam regrets that the United Nations has been unsuccessful in adequately addressing the matter.

These atrocities do not sit well with our own values and Suhakam believes Malaysians are equally as troubled as we are about the critical humanitarian and human rights situation in Syria.

Suhakam wishes to remind the Government of its commitment to accept 3,000 Syrian refugees to help alleviate the refugee crisis in the Middle East. As difficult and complex as our challenges may be, the necessity to assist has never been greater in regard to the ongoing catastrophe, and Malaysia is morally compelled to provide humanitarian assistance to Syrian refugees and displaced persons.

Such assistance should be mobilised urgently and delivered without delay in view of the deteriorating situation in Syria. Suhakam reiterates that there is an inescapable need for Malaysia to accede to the United Nations 1951 Convention Relating to the Status of Refugees if we are to be serious in our efforts.

Razali Ismail Chairman, The Human Rights Commission of Malaysia (Suhakam) April 7, 2017

Editor: Dr. Zulkifli Ismail / Asst. Editor: Fairos Nazri THIS BULLETIN IS PUBLISHED BY THE APPA SECRETARIAT We invite articles and feedback from readers. - Editor

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# **CHEMICAL WEAPONS ATTACKS**



### Statement by UNICEF Executive Director Anthony Lake on reports of chemical weapons attacks on children and families in Syria

Abdel Hameed al Youssef cradles the bodies of his nine-month-old twins killed in the chemical weapons attack in Khan Sheikhoun in Idlib, Syria. - Alaa al-Youssef via AP

"The images of children choking and dying in the streets of Idlib, Syria, following alleged chemical weapons attacks, are as horrific as they are heartbreaking. Our thoughts and prayers are with the victims and their families.

"If confirmed, these attacks must do more than provoke our outrage; they must compel action by those with the power and the ability to bring an end to this devastating violence.

"The alleged use of such a horrific weapon must not obscure the violence taking place elsewhere in Syria, including in Aleppo, Damascus and Hama, nor should it distract from the daily suffering of the more than 280,000 children trapped under siege, cut off from humanitarian aid.

"The children of Syria have already suffered far too much, for far too long."

- UNICEF, New York, USA, April 4, 2017

#### Statement by Anthony Lake, UNICEF Executive Director, on reported child killings in Syria

"After six years of war and human carnage in Syria ... six years of heartbreak for so many Syrian families... there comes a new horror that must break the heart of anyone who has one.

More than 60 children reportedly killed in an attack on a bus convoy yesterday (April 15, 2017) outside Aleppo.

A convoy of families who for so long had already known so much suffering. Now the survivors must bear such a new and terrible loss. "We must draw from this not only anger, but renewed determination to reach all the innocent children throughout Syria with help and comfort. And draw from it also the hope that all those with the heart and the power to end this war will do so."

- UNICEF, New York, Damascus, Amman, April 16, 2017

#### Note:

- More than 80 people, including 30 children and 20 women were killed in the chemical attack in Khan Sheikhoun, in the northwestern province of Idlib, Syria, on Tuesday, April 4, 2017. - Associated Press, Beirut, April 5, 2017
- More than 250,000 people have been killed in Syria's civil war and after more than six years, no political solution to the fighting is in sight. - bbc.com, April 4, 2017
- At least 652 children were killed a 20 per cent increase from 2015 - making 2016 the worst year for Syria's children since the formal verification of child casualties began in 2014. Some 255 children were killed in or near a school. - Unicef, Damascus/Amman, March 13, 2017



### APPA PRESIDENT'S MESSAGE





Very warm greetings to all My APPA Colleagues!

Thank you for all your support in helping APPA to achieve its objectives and I expect the same support and cooperation in future endeavours undertaken by APPA. I am herewith sharing some progress done with regards to APPA Action Plan 2016-18.

As informed earlier we have shared Questionnaire with all APPA member societies prepared by our respective TAG groups and now I am pleased to inform you that, we had

received a good response and based on that as a next step we have shared the survey analysis of APPA TAG on Adolescent Health, Immunization and Non Communicable Diseases with APPA TAG members. We are waiting for their inputs and suggestion as well for next actions.

We have formed a new APPA Task Force for Antimicrobial Resistance and Obesity which has started working in a time bound manner.

It was a great pleasure for me to attend the 120<sup>th</sup> Annual Meeting of the Japan Pediatric Society held from April 14<sup>th</sup> - 16<sup>th</sup>, 2017 at Tokyo and to speak on Child Health Priorities and Need of Pediatric Training in APPA Region

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

Dr. Naveen Thacker President- APPA



## Malaysia Set To Be Malaria-Free By 2020-Expert



Malaysia is expected to be a malaria-free country by 2020 following continuous efforts by the Health Ministry to control the disease.

Medical Parasitology expert at University Malaya's Faculty of Medicine, Professor Dr Fong Mun Yik said efforts made by the ministry to gain the malaria-free status from the World Health Organisation (WHO) included providing vaccines as well as organising various awareness campaigns.

"Following this proactive efforts, we see the consistent downward trend in the number of malaria cases in Malaysia from 2001 to 2016. "The speed with which the ministry and relevant bodies responded to each report of Malaria infection also proves the government's seriousness in attaining the 'green nation' status, which is to be malaria-free," he told reporters after appearing as a panel speaker at the Malaysian Genetics Association Seminar 2017, at Universiti Putra Malaysia in Serdang, Selangor, near Kuala Lumpur on Wednesday, March 22, 2017.

Dr Fong said the malaria epidemic had two modes of infection, one from human to human and the other from animal to human.

"Infections between humans or 'urban malaria' usually happens in urban areas which are brought about by foreign workers and students who have not been vaccinated.

He said in rural areas, the disease could spread through monkeys who are carriers of the disease, before infecting humans near them through mosquito bites.

Among the species which are carriers of malaria are the long tail monkey, the pig tail monkey, and the silverleaf monkey.

- Malaysian National News Agency (BERNAMA), Malaysia, March 22, 2017



### PAKISTAN PEDIATRIC ASSOCIATION - CENTER



### Pakistan Pediatric Association - Center

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#### Dr. Zulkifli Ismail

Secretary General APPA Secretariat Kuala Lumpur



# PROF. ZULFIQAR ALI BHUTTA WON PRESIDENT'S AWARD FOR PRIDE OF PERFORMANCE

Dear Sir,

Greetings for Pakistan Pediatric Association, Karachi Pakistan.

It is indeed a great pleasure and pride for us to share with you that a well-known pediatrician of Pakistan and Life-Member of Pakistan Pediatric Association (PPA), Prof. Zulfiqar Ali Bhutta won President's Award for "Pride of Performance" by Honorable President of Islamic Republic of Pakistan, Mr. Mamnoon Hussain on 23rd March 2017 in Islamabad.

It is an honour for Pakistan Pediatric Association and the pediatric fraternity of Pakistan is proud of our senior member Prof. Zulfiqar Ali Bhutta on receiving this Award.

Regards

Jahamas

#### Dr. Mushtaq A. Memon

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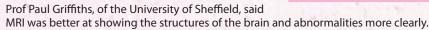
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# World's smallest MRI helps tiny babies

Doctors in Sheffield are pioneering the use of a compact MRI scanner for imaging the brains of premature babies.

The machine, at the Royal Hallamshire Hospital, in Sheffield, United Kingdom is one of only two purpose-built neonatal MRI scanners in the world. At present, ultrasound is normally used to scan the brains of newborns.





This is one of only two purpose-built neonatal MRI machines in the world

#### **Clearer images**

So far about 40 babies have been imaged in the MRI scanner, which was built by GE Healthcare with funding by the Wellcome Trust.

One of them, Alice-Rose, was born at 24 weeks and had two bleeds in the brain. Her parents, Shaun and Rachael Westbrook, said the MRI scan was very helpful. Shaun said: "It's a much crisper image and a lot easier to understand than the ultrasound."

Rachael added: "It's been a rollercoaster since Alice-Rose was born on 6 November: not everything was fully formed, and she still weighs only 2lb 13oz (1.28kg). "The MRI was reassuring as it meant you got a better look at her brain."

Ultrasound of the brain is possible in newborn babies only because the bones in their skull are not yet fused.

#### **Ultrasound v MRI**

The sound waves can travel through the two fontanelles - the soft spots between the bones.

Prof Griffiths said: "Ultrasound is cheap, portable and convenient, but the position of the fontanelles means there are some parts of the brain which cannot be viewed.

"MRI is able to show all of the brain and the surrounding anatomy, making the images easier to explain to parents. "From a diagnostic point, the big advantage is that MRI is able to show a wider range of brain abnormalities, in particular those which result from a lack of oxygen or blood supply."

Image copyright UNIVERSITY OF SHEFFIELD

Ultrasound image (left) of Alice-Rose with MR image (right). The MRI shows the structures of the brain with greater clarity

MRI scans are rarely performed on severely premature babies because the risks involved in transferring and handling a sick infant can outweigh the benefits.

Prof Griffiths said: "MRI machines are huge, heavy objects which are sited in the basement or ground floor of hospitals, whereas maternity units are usually higher up, or in a completely different building, so it can mean a complicated journey to get a baby to and from the scanner."

Evelina Children's Hospital in London has a full-size MRI scanner within the neonatal intensive care unit.

The compact baby MRI machine at the Royal Hallamshire is not much bigger than a washing machine and just metres away from the neonatal intensive care unit, meaning that specialist staff are on hand in case of problems.

The concept for a dedicated neonatal scanner was originally developed more than a decade ago by Prof Griffiths and Prof Martin Paley, of the University of Sheffield.

Two prototype 3 Tesla neonatal MRIs were eventually built - the other is in Boston Children's Hospital in Massachusetts - although it is no longer in use.

Neither machine has regulatory approval for clinical use, and both remain purely for research.

Prof Griffiths said the next step would be to do a trial in premature babies to show definitively that MRI produces a better diagnosis and whether it altered the clinical management of children.

It is not known how much a neonatal MRI machine would cost, should the system eventually get commercialised, but full-size scanners are typically priced at several hundred thousand pounds.

Cincinnati Children's Hospital has a 1.5 Tesla neonatal MRI scanner that was adapted from adult orthopaedic use.

- bbc.com/health, United Kingdom, January 23, 2017



# Study: Too much time with handheld devices causing speech delays in children

The American Academy of Paediatrics discourages any type of screen media in children younger than 18 months. -AFP pic



llowing children to use hand-held devices such as smartphones, tablets, electronic games may put them at a higher risk of speech delay, according to a new study set to be presented at the 2017 Paediatric Academic Societies Meeting today, (May 6).

The Canadian research looked at 894 children between the ages of 6 months and 2 years who were participating in TARGet Kids!, a practice-based research network in Toronto.

Parents were asked to report on how much time their child spent with a handheld device, with the team finding that by their 18-month check-ups, 20 per cent of the children were using a handheld device for an average of 28 minutes per day.

After looking at language delay, the findings showed that the more time a child spent with a handheld device, the more likely the child was to have delays in speech, with each 30-minute increase in handheld screen time resulting in a 49 per cent increased risk of speech delay.

However, the team found no association between handheld device screen time and other delays in other forms of

communications, such as social interactions, body language or gestures.

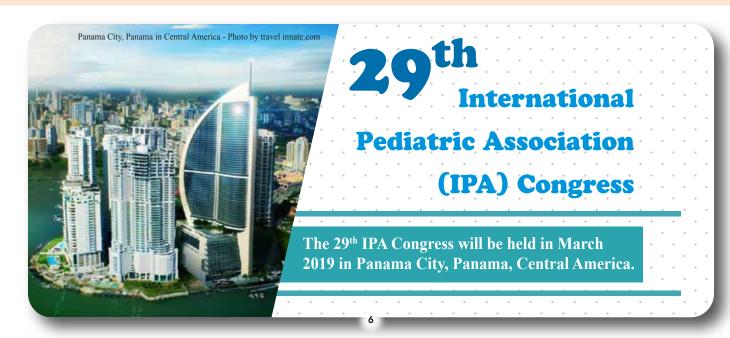
The study is the first to report an association between handheld screen time and increased risk of speech delay, and with the number of handheld screens in US homes on the rise, the findings could be particularly important.

The results also support a recent policy recommendation by the American Academy of Paediatrics to discourage any type of screen media in children younger than 18 months.

More research is now needed to better understand the link between handheld screen time and speech delay, and to look at the longer term effect, commented the researchers.

- AFP-Relaxnews, New York, USA, May 6, 2017
- See more at:

http://www.themalaymailonline.com/features/article/study-too-much-time-with-handheld-devices-causing-speech-delays-in-children#sthash.XUmrDapa.dpuf





# 大发文大学

# Swift childhood cancer death; more common than thought: Study

Childhood cancer often strikes its youngest victims the hardest, and the death rate for infants may be up to four times higher than previously thought, US researchers said.

The study in the Journal of Clinical Oncology examined deaths within a month of diagnosis, those young lives which usually end before the patients can be enrolled in a clinical trial that might save them

"During my pediatric residency a teenager came in with leukemia, but had so much cancer when he presented that he had multi-organ failure and died within about 24 hours of coming to our attention, before we could even start treatment," said lead author Adam Green, investigator at the University of Colorado Cancer Center and pediatric oncologist at Children's Hospital Colorado in the United States.



AFP/File / Loic Venance Researchers in Colorado found that early cancer death rates were at least two to three times higher than reported in clinical trial data

"I wanted to find out who these kids are in hopes that as a system we could learn to spot them earlier, when treatment still has a chance of success."

So researchers based their study on a US database known as Surveillance, Epidemiology and End Results (SEER), which showed more than 36,000 cases of pediatric cancer between 1992 and 2011. Most of the research on childhood cancers comes from clinical trials involving treatments that might save lives.

But Green and colleagues found that the SEER database showed that 6.2 percent of children with acute myeloid leukemia died early, compared with 1.6 percent in clinical trial data.

When researchers looked at early deaths from all kinds of pediatric cancer in the SEER database, which encompasses a broad section of the United States as a whole, they found that early cancer death rates were at least two to three times higher than reported in clinical trial data.

"Most of what we know about outcomes for cancer patients come from clinical trials, which have much more thorough reporting rules than cancer treated outside trials," said Green.

"However, these kids in our study aren't surviving long enough to join clinical trials."

Previous research has shown that treatments for childhood cancer have vastly improved the five-year survival rate. Today, more than 80 percent of kids diagnosed with cancer survive for five years.

A total of 555 -- or 1.5 percent of the child patients in the SEER database -- died within one month of cancer diagnosis. Those who died so quickly tended to be under age one.

"Babies tend to get aggressive cancers, it's hard to tell when they're getting sick, and some are even born with cancers that have already progressed," said Green.

"These factors combine to make very young age the strongest predictor of early death in our study."

Knowing more about those who die swiftly could lead to improved diagnostics, and better care so that more children can have a chance at survival, he said. "This is a population that deserves our attention."



# Report of PEDICON 2017

Greetings from the Organizing Committee of PEDICON 2017!

As the curtains come down on a mega annual celebration of Pediatrics, it is time for me to present to you the report of this grand event.

As promised, PEDICON 2017 has been an extraordinary and a memorable one.

#### The Committees:

The organizing team had a core committee that was constituted by Dec 2015. The complete organizing team was built up in early 2016, with **over 30 committees that consisted of almost 130 members**. The committees met on a regular month-on-month basis and had quarterly review meetings with the Chief Organizing Chairman and Chief Organizing Secretary. This ensured that there was a constant review of the ongoing work. Besides the regular committees, there were some added committees like the innovation Committee, Associate delegates committee , Security Committee, to name a few. The work was divided and allotted to each committee chairperson and all functioned autonomously.

#### The Theme & Innovations:

Nurture the girl child, Nurture Nature - was the theme of the PEDICON 2017. By selecting this theme, we were able to address two major issues. The conservation of the environment is a matter of much concern and needs to be urgently tackled. We reiterated our commitment to conserve nature by planting 1,00,000 saplings free of cost at various places in and around Bangalore. With this one gesture, we have ensured that PEDICON 2017 will be remembered for several generations in the future. The "beti bachao, beti padhao" andolan of our Honorable Prime Minister gave us a fillip to raise the awareness of the health and well being of the girl child. Our conference souvenir carried one section which was entirely dedicated to the girl child. Sheru the Hulimari was the mascot of the PEDICON 2017. This was a national first, as, until now, none of the Pedicons has had a mascot. Sheru was present at all places throughout the venue, and gave an identity to the PEDICON 2017, which was easily recognizable by all. Sheru was also present at the venue and was seen interacting with and cheering the multitude of delegates.

#### The delegates:

With a record number of 10000+ delegates, PEDICON 2017 has emerged as the frontrunner of all Pedicons held to date. All the delegates had ample space to freely move around and kiosks serving tea and coffee were available round the clock. Elaborate arrangements were made to handle the numbers and there was no crowding at any of the registration counters. There was almost no waiting time and the entire process of registration was carried on smoothly. Multiple comfort zones and lounge areas were available for the delegates to relax and unwind in between sessions. This was the first time we had a large international delegation. Representatives from various countries including USA, Australia, Nepal, Sri Lanka and Dubai participated in this conference as faculty as well as delegates.



Dr. Anupam Sachdev, President IAP inaugurating PEDICON 2017



**Releasing of PEDICON 2017 Souvenier** 



Secretary General's Speech..

# PEDICON 2017

#### The Venue:

Bangalore Palace is an iconic landmark and one of the few existing lung spaces in the garden city. With an open terrain of almost 40 acres, we were able to provide an expansive venue for the deliberations to be conducted. The delegates had ample space to freely move around and relax. With hundreds of volunteers available to assist, all the events went through extremely smoothly. No stone was left unturned to ensure the security of the complete conference. The entire venue was covered with almost 200 CCTV cameras, metal detectors and over 200 security personnel were deployed at various points in the venue. The banquet area was also covered with CCTV cameras and drones, to ensure that the entire proceedings were conducted in a secure environment.

Hundreds of police personnel were present on the ground, to coordinate the safety and to ensure the free flow of traffic at the venue as well as around it. The dining area was spread out with multiple food counters that served a mouthwatering array of delicacies. There was a designated area for the senior citizens and the faculty which helped in ensuring that all delegates were comfortable and well cared for.

The banquets were arranged in a way to provide an out of the world experience. All those who attended the banquets experienced a superlative and relaxing end to the gruelling academic feast of the day.

#### **Scientific deliberations:**

In the run up to PEDICON 2017, almost **38 workshops** were conducted. This is the highest number of workshops that have been conducted on a single day at various venues across the city. We ensured the maximum number of delegates could attend and get a hand- on experience in their chosen area of interest. Besides this, there **were 3 TOT's** that were also conducted in various sub—specialities. With 14 halls to cater to the diverse scientific interests and needs of the delegates, the PEDICON 2017 provided a literal academic feast. Over 1300 faculty members, both from India and overseas, provided myriad flavors to the scientific deliberations. A record number of talented youngsters were also given opportunities to become speakers at this conference.



Change of Guard! Dr. Pramod Jog, President CIAP 2016 exchanging medal to with Dr. Anupam Sachdev, the President CIAP 2017



Dr. Karunakara BP, Chief Organizing Secretary, giving PEDIOCN 2017, giving his report



PEDICON 2017 Organizing Committee with CAIP team at valedictory function

# CHILDHOOD OBESITY

### STUDY FINDS CHILD **OBESITY PARTLY** INHERITED FROM PARENTS

Child obesity could be 35-40 per cent inherited from parents - irrespective of the child's country of residence - according to a new international study of 100,000 children in six different countries worldwide.

Research carried out by the University of Sussex in the UK - studying children in the UK, the US, China, Indonesia, Spain and Mexico - found that the more obese the child, the more their BMI was dependent on genetic inheritance from their parents. Obesity is defined as a body mass index of over 35.

A BMI of between 18.5 and 25 is considered healthy. BMI is calculated by dividing a person's weight in kilograms by their height squared in meters.

For the 100,000 children studied, around 35-40 per cent of their BMI (defining how fat or thin they are) was found to be inherited from their parents, with 20 per cent from the mother and 20 per cent from the father. For the most obese children, the proportion of parental effect rose to 55-60 per cent.

The researchers discovered a lower parental effect on BMI in the thinnest children, with 10 per cent inherited from the mother and 10 per cent from the father. This was closer to 30 per cent from each parent for the fattest children. What's more, the pattern proved consistent across the countries studied, irrespective of their economic development, industrialisation or type of economy.

In China, less than 1 per cent of children and adolescents were obese in 1985. However, obesity levels reached 17 per cent for boys and 9 per cent for girls in 2014, echoing obesity levels in American children aged two to 18 years old (17.4 per cent).



For the most obese children, BMI was found to be 50-60 per cent inherited from their parents. - IStock.com pic via

Beyond healthy eating and lifestyle factors - which are essential in the fight against obesity - the study gives important insight into how obesity can be transmitted from generation to generation.

"We found that the process of intergenerational transmission is the same across all the different countries," explains lead author Professor Peter Dolton of the University of Sussex.

Global obesity levels are rising rapidly, with around 650 million adults, or approximately 13 per cent of the world's adult population, currently considered obese. This could rise to 20 per cent by 2025 if the current rate of progression is maintained, according to a study published in The Lancet in April 2016. According to figures published in October 2016 by Eurostat, the statistical office of the European Union, 15.9 per cent of Europeans are obese.

In the US, approximately one in five pregnant women is thought to be overweight or obese.

- See more at:

http://www.themalaymailonline.com/features/article/study-finds-child-o besity-partly-inherited-from-parents#sthash.8jsTxe7S.dpuf

- AFPrelaxnews, London, UK, February 21, 2017

#### **INTERNATIONAL PAEDIATRIC EVENTS**

#### **MALAYSIA**

11th 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**

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

**Dates:** July 7-9, 2017 Venue: Lyon, France

**E-mail:** secretariat@worldneonatology.com Website: 2017.worldneonatology.com

#### **INDONESIA**

The 11th 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: secretariat@ictp2017.com



#### **SINGAPORE**

The 6th Wong Hock Boon Paediatric Masterclass & Pre-Masterclass workshop, 'Practical Pulmonology For

The Community Practitioner' Dates: Pre-Masterclass workshop:

August 25, 2017 / Masterclass: August 26-27, 2017

Venue: NUHS Tower Block, 1E Kent Ridge Road Singapore 119228 Organised by: Department of Paediatrics, Khoo Teck Puat-National University Children's Medical Institute,

National University Hospital

Secretariat contact: paev15@nus.edu.sg Register online: https://goo.gl/gUejAN Website: www.nuhkids.com.sg (under 'Events') Contact: 65 6772 4420 Fax: 65 6779 7486

#### **MYANMAR**

16th 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

#### **MALAYSIA**

13th Asian Congress of Pediatric Nephrology (ACPN 2017) in conjunction with the 39th 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

#### **HONG KONG**

13<sup>th</sup> Congress of the Asian Society for Pediatric Research (ASPR)

Dates: October 6-8, 2017

Venue: Hong Kong Academy of Medicine Jockey

Club Building, Hong Kong

Website: Please go to www.aspr.jp and be a member first to get the 50% discount registration fee. Then register

and submit your abstract at www.aspr2017.com Abstract submission deadline: June 30, 2017 Deadline of Early Bird Registration: August 5, 2017 Registration fee: Non-locals: HK\$ 1,000 after 50% discount

and Locals-HK\$ 600 after 50% discount

#### **MALAYSIA**

International Symposium on Autism 2017

Date: October 14, 2017

Venue: Monash University Malaysia, Plenary Theatre,

Petaling Jaya, Selangor state, Malaysia

Email: Nicola.ng@monash.edu or call 603 5514 6372 Website: www.med.monash.edu.my/research/

platforms/brims/events

#### **INDIA**

11th 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

#### **PAKISTAN**

The 18th National Pediatric Conference 2017

**Dates:** November 24-26, 2017

Venue: Department of Pediatric Ghulam Mohammad Medical College, Sukkur, Sindh Province, Pakistan

E-mail: pedconsukkur@ppa.org.pk

Tel: 021-35387 473

#### **THAILAND**

1<sup>st</sup> Bangkok International Pediatric Updates

Dates: Nov. 29-Dec.1, 2017

Venue: Grand Hyatt Erawan, Bangkok, Thailand

Website: www.bipu2017.com

Organised by: The Royal College of Pediatricians of

Thailand & The Pediatric Society of Thailand

#### **SRI LANKA**

The 6th Global Congress for Consensus in Paediatrics and

Child Health (CIP 2017), in Colombo, Sri Lanka

Hosted by: The Sri Lanka College of Paediatricians (SLCP)

Dates: November 12-15th, 2017

Venue: The Hilton Colombo, Colombo, Sri Lanka

Website: www.cipediatrics.org

#### INTERNATIONAL PAEDIATRIC **EVENTS 2018 & 2019**

#### **INDONESIA**

16th Asia Pacific Congress of Pediatrics (APCP 2018)

Theme: "SDGs and Reducing Inequalities:

How Far Have We Come?" **Dates:** August 25-29, 2018

Day 1- August 25, 2018: Registration / Pre Congress Workshop.

Day 2- August 26, 2018: Pre Congress Workshop.

Day 3- August 27, 2018: Breakfast meeting, Keynote lectures,

Pro-cons, Plenary session, Meet the Expert, Symposia,

Oral Presentations and Welcome Reception.

Day 4- August 28, 2018: Breakfast meeting, Keynote lectures, Pro-cons, Plenary session, Meet the Expert, Symposia, Oral Presentations, Gala Dinner and Posters & Exhibitions.

Day 5- August 29, 2018: Breakfast meeting, Keynote lectures, Pro-cons, Plenary session, Meet the Expert, Symposia and Closing Ceremony.

Venue: Bali Nusa Dua Convention Center (BNDCC), Nusa Dua Bali, Indonesia Secretariat: Indonesian Pediatric Society (IPS), JI Salemba 1 No. 5 Jakarta Pusat 10430, Indonesia

Website: www.apcp2018.org Email: secretariat@apcp2018.org Tel: 6221 31 48610 Fax: 6221 391 3982

Congress Organiser (Pacto Convex): CP Tresna Setiawan

E-mail: tresna.setlawan@pactoconvex.com

#### **PANAMA**

The 29th International Pediatric Association (IPA)

Congress 2019 Dates: March 2019

Venue: Panama City, Panama, Central America



#### **PROGRAM AT A GLANCE**

	<b>ay 1</b> ug 2018	<b>Day</b> 2 26 Aug 2018	<b>Day 3</b> 27 Aug 2018	<b>Day 4</b> 28 Aug 2018	<b>Day 5</b> 29 Aug 2018
Pre C	stration, ongress rkshop	Pre Congress Workshop	Breakfast meeting, Keynote lectures, Pro-cons, Plenary session, Meet the Expert, Symposia, Oral Presentations	Breakfast meeting, Keynote lectures, Pro-cons, Plenary session, Meet the Expert, Symposia, Oral Presentations	Breakfast meeting, Keynote lectures, Pro-cons, Plenary session, Meet the Expert, Symposia
			Welcome Reception	Gala Dinner	Closing Ceremony
			Posters & Exhibition		

#### **SCIENTIFIC TOPICS**

- First 1000 days

- First 1000 days
   Stunting
   Breastfeeding
   Adolescent health
   Immunization
   Hematology-oncology
   Endocrinology
   Allergy-immunology
   Nutrition and metabolic diseases
   Cardiology

- Cardiology
   Pediatric radiology
   Gastroenterology and hepatology
- Infection and tropical diseases

- NephrologySocial pediatricsPediatric critical care
- Respirology
   Neonatology
   Pediatric pharmacy
   Child protection

- Newborn screeningDisaster medicine and crisis management

#### **ACCOMMODATION**

No	Hotel	Room	Rate	Distance
1	Bali Nusa Dua Hotel and Convention (5 Star)	Deluxe Room Premiere Room	IDR 1,800,000 IDR 1,900,000	Venue
2	Nusa Dua Beach Hotel (5 Star)	Deluxe Room	IDR 2,500,000	Walking Distance or 5 minutes by shuttle
3	Sofitel (5 Star)	Luxury Room	IDR 3,700,000	5 Minutes by Shuttle
4	Novotel (4 Star)	Deluxe	IDR 1,800,000	5 Minutes by Shuttle
5	Grand Whiz (4 Star)	Superior	IDR 1,100,000	Walking Distance or 3 Minutes by Shuttle

price subject to change, please visit **www.apcp2018.org** for more choices of hotel

#### **SOCIAL PROGRAMS**



Welcome Reception 27 August 2018, Taman Jepun, BNDCC

**Gala Dinner** 28 August 2018, Garuda Wisnu Kencana (GWK)



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





#### **REGISTRATION**

Category	EARLY BIRD 1 Nov 2016 - 31 Dec 2017	REGULAR RATE 1 Jan 2018 - 31 Apr 2018	LATE RATE 1 May 2018 - 24 Aug 2018	ONSITE RATE 25 - 29 Aug 2018				
INTERNATIONAL PARTICIPANT								
APPA Delegate	IDR 4,500,000	IDR 4,750,000	IDR 5,500,000	IDR 6,500,000				
Foreign Delegate (Non APPA Member)	IDR 8,250,000	IDR 9,500,000	IDR 11,000,000	IDR 12,150,000				
Trade/Corporate Delegate	IDR 9,000,000	IDR 10,500,000	IDR 11,500,000	IDR 13,000,000				
INDONESIAN PARTICIPANT								
IPS Member	IDR 3,750,000	IDR 4,250,000	IDR 4,750,000	IDR 5,500,000				
Non IPS Member								
General Practitioner	IDR 4,500,000	IDR 5,000,000	IDR 5,500,000	IDR 6,000,000				
Pediatrician/Specialist	IDR 5,000,000	IDR 5,500,000	IDR 6,000,000	IDR 7,000,000				
Trade/Corporate Delegate	IDR 5,500,000	IDR 6,000,000	IDR 6,500,000	IDR 7,500,000				
Sr. Citizen (above 70 yrs and for IPS member only)	FREE	FREE	FREE	FREE				
WORKSHOP								
International Participant	IDR 1,750,000 for 1(one) day workshop							
Indonesian Participant IDR 1,500,000 for 1(one) day workshop								
ACCOMPANYING PERSON								
Accompanying Person of APPA Delegate	IDR 4,100,000	IDR 4,500,000	IDR 5,100,000	IDR 5,750,000				
Accompanying Person of Foreign Delegate (Non APPA Member)	IDR 7,500,000	IDR 8,800,000	IDR 10,250,000	IDR 11,500,000				
Accompanying Person of Indonesian Participant	IDR 3,750,000	IDR 4,250,000	IDR 4,750,000	IDR 5,500,000				

#### **SECRETARIAT**

Indonesian Pediatric Society (IPS) Jl. Salemba I No. 5 Jakarta Pusat 10430, Indonesia Tel: +62-21 314 8610 Email: secretariat@apcp2018.org



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