

CPS Today

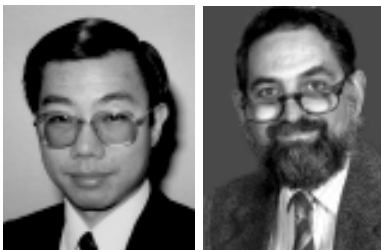
Drs. Pless and Lee receive awards today

Today's CPS Official Luncheon honours two pioneers in their fields, as well as those with the best poster presentations at this year's annual meeting.

Dr. Shoo K. Lee receives the Aventis Pasteur Research Award for his paper, "Variations in practice and outcomes in the Canadian NICU network: 1996-97" (*Paediatrics* 2000;106(5):1070-79). Dr. Lee is a neonatologist with B.C. Women's and Children's Hospital and founded the Canadian Neonatal Network in 1995. The Award was established in 1999.

Dr. Barry Pless receives the Ross Award, given annually since 1976 for excellence in paediatric research, education, child health care, and child advocacy. He is a world leader in child injury prevention and has been at McGill University since 1978.

Also presented at the luncheon will be this year's conference Awards for Excellence (see p. 3).



Dr. Shoo K. Lee (left) and Dr. Barry Pless (right) receive today's awards.



CPS meeting delegates in the main foyer of the Bayshore Convention Centre.

Plan to attend the AGM and President's Reception

We need your comments about the CPS Five-Year Strategic Plan. It will be presented at the CPS annual general meeting, held at 10:30 a.m. today in the Oak Room.

At the President's Reception at 4:00 p.m., we will give away a Palm IIIc and the prize in the Baby Photo Contest. See page 3 for details.

MMR-autism statements to be available online

Yesterday's official CPS statement on the lack of any evidence for an MMR vaccine-autism link garnered significant media attention nationwide.

Copies of comments at the press conference by Drs. Embree, Bigham, Zwaigenbaum, and Issenman will be available for download in Adobe Acrobat format at the CPS website (www.cps.ca) shortly.

Events Overview

Saturday, June 16

Breakfast Satellite Symposium

07:30-09:00 - Bayshore Salon A
Streptococcus and rheumatic disease
(*Whitehall-Robins*)

Concurrent Sessions 09:30-10:30,
14:30-15:30/16:30 - Stanley Park Salons 1, 2
& 3, Cypress Room 1

CPS Annual General Meeting

10:30-12:30 - Oak Room

CPS Official Luncheon and Awards Ceremony

12:30-14:30 - Bayshore Salons A & B
Ross Award (Dr. B. Pless), Aventis
Pasteur Research Award (Dr. S.K. Lee)

Section Business Meetings

16:00-17:30 - Stanley Park Salon 2,
Seymour Room, Cypress Room 1

President's Reception

17:30-18:30 - Pool Garden

Dinner Boat Cruise

18:30-23:00 - *M.V. Harbour Princess*
Cruise up Indian Arm, with dinner and
live music - tickets required

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Dr. Aurore Côté, researcher on SIDS.

After being introduced as an internationally renowned expert on sudden infant death syndrome (SIDS), Dr. Aurore Côté said, "I'm internationally renowned on ignorance, because we don't know what SIDS is."

As part of the Friday morning series of oral abstracts, Dr. Côté analyzed data on the dying position of SIDS victims in Québec, especially following the intensive publicity campaign since the early '90s to have infants

"Back to sleep" remains an important message

placed to sleep supine (on their backs) instead of prone (on their stomachs).

"Sleeping in the prone position is the most significant risk factor for SIDS," she said. Also, infants who usually sleep supine or on their sides, and thus unaccustomed to sleeping prone, seem especially at risk if they are placed prone for the first time.

Since 1991, when the risk of prone sleeping was discovered and physicians began to encourage parents to put their babies on their backs to sleep, SIDS rates have declined 50 to 70 percent in Québec, which now has one of the lowest rates in the world.

Of 266 SIDS deaths studied in the last

decade, only 12 infants were found on their backs. A significant number were placed prone or rolled into the prone position for the first time before they died.

"We need to emphasize the unaccustomed prone position as a risk factor," Dr. Côté warned. Infants who usually sleep supine may be placed prone in daycare or with babysitters, for instance.

Discussion after the presentation covered other risk factors for SIDS, such as maternal smoking; training about prone infant sleeping for paediatric nurses and other medical staff; and co-sleeping, which for non-smoking parents does not increase the risk of SIDS, Dr. Côté said.

Munchausen by proxy diagnosis often "like a circus"

"These people thrive on the attention of being seen as the devoted parent of a sick child." Dr. Jean Hlady of B.C.'s Children's Hospital spoke Friday of parents – more than 90% of them mothers – who fabricate or induce illness in their young children, a form of child maltreatment or abuse known as Munchausen by proxy (MBP) or paediatric condition falsification.

It is a bizarre condition that is both rare and extremely serious: the children have 10-30% mortality rates, 100% morbidity rates, and up to 10% long-term morbidity.



Dr. Jean Hlady.

Dr. Hlady and her co-presenters, Dr. David Riddell and Dr. Tim Oberlander, showed case studies (some on video) and highlighted risk factors, presenting features, red flags for diagnosis, variants, and case management scenarios. They stated that MBP mothers, as apparently devoted parents, usually form strong

bonds with hospital staff, causing much anxiety upon diagnosis.

Dr. Oberlander summarized potential diagnosis of Munchausen by proxy for apparent severe childhood illnesses that are "persistent, puzzling, and paradoxical." These children are often admitted to hospital dozens of times in a year, do not respond to normal treatments for apparently standard conditions, and manifest strange symptoms that are often inconsistent with test results.

MBP diagnosis takes an average of fifteen months, because all other possible legitimate medical conditions must be ruled out first. The team emphasized that once family history (sometimes mysterious deaths of siblings) and other events outside the hospital (such as unex-



Dr. David Riddell discusses case studies of Munchausen by proxy.

plained damage, fires, or injured pets at home) are important elements in diagnosis.

Dr. Hlady concluded with a discussion of the controversies of MBP diagnosis and treatment, including the use of hidden video surveillance, which she recommended be done by police. Audience members noted that diagnosing paediatricians are sometimes vilified in public and require the support of their peers.

Dr. Hlady agreed. "It can be a circus, with lawyers, media, politicians, and others involved. Once you have one or two of these," she said, "you don't want to deal with any more."

"The softer the outcome, the harder the science needs to be," says Kramer



Dr. Michael S. Kramer in his RCPC talk.

Dr. Michael Kramer may have ruffled some feathers during his Royal College of Physicians and Surgeons of Canada Lecture on Friday afternoon. His talk, "Evaluation of public health vs. clinical interventions: a double scientific standard," described how many studies of public health initiatives and other community-based interventions are not statistically rigorous, and can sometimes lead to the wrong conclusions.

He distinguished the experimental approach of randomized control trials (RCT) typically used in clinical studies from the observational techniques used in many other circumstances, then showed how analyzing the very same data using the two methods can lead to completely opposite conclusions.

"Randomization is required when non-compliance is common in your study," Dr. Kramer said, "when compliance is associated with the

outcome, or when the outcome is psychological or affected by psychology."

Only randomization can filter out unknown effects on the data, especially in studies of behaviour, he said. "So the softer the outcome, the harder the science needs to be."

He cited two studies of whether infant pacifier use or in-hospital formula supplementation led to weaning before three months of age. Many other studies, done observationally, had clearly established that both pacifiers and formula led to early weaning.

But Dr. Kramer's team tried a clinical approach with separate, randomized groups of mothers in two different neonatal wards. Even though compliance was far from complete in either group in both studies, the randomization allowed more rigorous statistical analysis of the data. Then the team analyzed the data using observational methods as well, as if the data had not come from a randomized source.

The observational data matched the earlier studies, showing a causal link: both pacifiers and formula seemed to lead to early weaning. However, the experimental-style analysis clearly showed that the link was illusory.

In truth, the numbers showed, it is mothers who are *a priori* more likely to wean their children early who are also more likely to use pacifiers and supplement their breast milk with formula. But the latter behaviours do not lead to the former one.

Dr. Kramer went on to explain how RCT techniques could be applied more widely to public health evaluations.

"We study cause and effect," Dr. Kramer said, "and in many situations, you just get the wrong answer when you don't use randomization."

Excellence Awards

WINNERS FOR THE 2001 CONFERENCE
PRESENTED AT TODAY'S LUNCHEON

CATEGORY 1:

Dr. Elise Couture (resident) of Sherbrooke: "Clinical challenge: urinary tract infection in young children." (#108)

CATEGORY 2:

Dr. Constadina Panagiotopoulos (fellow) of Vancouver: "Weekly telephone contact with a diabetes nurse educator improves HbA1c in adolescents with poorly controlled Type 1 diabetes." (#105)

HONOURABLE MENTION:

Dr. Kelly Millar of London: "Utility of developmental screening in the pediatric emergency department." (#38)

REMINDERS

Boat Cruise

6:30 p.m. - 11:00 p.m.

M.V. Harbour Princess departs from Coal Harbour to visit Indian Arm. Dinner and music aboard. Tickets required.

Baby Photo Contest

Win free registration for 2002's annual meeting in Toronto. Ballots at the registration desk. Prize given at the President's Reception today at 5:30.

Palm IIIc Contest

Complete your conference evaluation form today by 5:00 p.m. to enter to win a Palm IIIc colour-screen digital organizer. Prize given at the President's Reception at 5:30 – and you must be there to win.

REMINDER

CANADIAN
PAEDIATRIC
SOCIETY



79th Annual Meeting

June 12-16, 2002

Toronto, Ontario

Westin Harbour Castle

Visit www.cps.ca for details



Sights and signs from the Bayshore east side seawall early Friday afternoon.

Today's highlights - Saturday, June 16

Good weather comes for the weekend: despite some morning cloud both days, the sun will break through for the afternoon, and temperatures will reach a pleasant 18 degrees, with lows a balmy 11 between Saturday and Sunday. If you're going on the boat cruise tonight, do **bring a jacket for the outside decks**, since you return well after sunset and it may be windy.

Our last conference day starts early (7:30 a.m.) with the final satellite symposium. Whitehall-Robins sponsors a **breakfast session** in the Bayshore Salon. Drs. Ronald Laxer and Rayfel Schneider will discuss post-infectious rheumatologic disorders associated with Group A β -hemolytic streptococcal infections – just the thing to get you rolling on a Saturday morning.

A number of **concurrent sessions** run from 9:30 to 10:30, then again in the afternoon from 2:30 to 3:30. Dr. Michael Myers presents two workshops about paediatricians' own health: morning on **stress in paediatric practice**, afternoon on **physician suicide**. Other topics include childhood illness in less developed countries, paediatrics in China, developmental disabilities, more detail on the non-relationship between MMR vaccine and autism, cerebral palsy, cochlear implants for deaf children, and alternative therapies.

The **CPS annual general meeting**, from 10:30 to 12:30 in the Oak Room, is an important one be-

cause members will talk about the CPS Strategic Plan – see the article on page 1.

The **Official Luncheon** at 12:30 in the Bayshore Salons includes the presentation of the **Ross Award** to Dr. Barry Pless and the **Aventis Pasteur Research Award** to Dr. Shoo K. Lee, as well as this year's conference Awards for Excellence. See the lead story on page 1 for more.

Worth noting is the series of talks hosted by the Neonatal-Perinatal Medicine Section, from 2:30 on, about **extremely low birthweight infants**. Chaired by Dr. Saroj Saigal, the sessions cover borderline viability issues, economics and evidence-based ethics, and decision making using ethical, legal, and social principles.

After some **section business meetings** in the mid-afternoon, you can finally relax. The President's Reception at 5:30 includes **two prize giveaways** (see page 3), and the **dinner boat cruise** at 6:30 takes you deep into the glacial fjord closest to downtown Vancouver, with the comfort of dinner and live music aboard the *M.V. Harbour Princess*.

If you aren't returning home early tomorrow, **spend a beautiful day exploring some of Vancouver**. (If you get a chance, eat some sushi.) It's been a pleasure having you in our green seaside city.

– Derek K. Miller, Editor

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