

An all too common sight for your editor in his hotel room in the past three days.

Conference highlights for today and thanks from the organizers

Outgoing CPS president Dr. Jack Holland joked on Wednesday that, when he wrote in the Final Program that the weather in Toronto this time of year is often spectacular, "that doesn't necessarily mean spectacularly *good.*" Those who understood will have been glad to have brought their umbrellas and Gore-Tex. Expect more of the same tomorrow. (But Thursday was nice, wasn't it?)

Today's agenda winds up this year's 79th Annual Meeting with Dr. Edward O'Rourke's breakfast symposium on whether to apply shortcourse antibiotic treatment for otitis **media.** Most of the day is set aside for concurrent workshops—there are ten different topics in the morning, and then the full set of ten repeats in the afternoon.

In between, the CPS Annual General **Meeting** takes place in the Pier 4 and 5 rooms. The Official Luncheon

follows at 12:30 in the Frontenac Ballroom. That event includes the presentation of the **Ross** Award to Dr. Judith Hall of UBC in Vancouver, and the Aventis Pasteur Research Award to Dr. Sylvain Chemtob of Ste-Justine Hospital Research Centre in Montréal—who joins Advocacy Award co-winners Gilles Fortin and Jean Labbé, also of Ste-Justine, to be the third major award recipient at this year's meeting from the same hospital.

Section business meetings for Neonatal and Perinatal Medicine, Residents, and Allergy specialists run in the late afternoon, following the

BBQ at the Docks

TONIGHT 6:00-10:30 p.m. tickets \$50 (kids \$25) at registration desk SHUTTLE LEAVES WESTIN HARBOUR CASTLE MAIN LOBBY AT 5:45 P.M. rain or shine! Dress casually for the BBQ!

second set of workshops. Finally, at 6:30 the (covered from the rain) **BBQ** at the Docks takes place—the shuttle leaves at 5:45, so don't be late. Dress casually (and for the weather).

A few more reminders: Turn in your conference evaluation to reception or the Pier 9 conference office to be eligible to win prizes. Recycle your badge holder while you're at it, so we can use it at the next event. Maybe buy a **CPS shirt** at the CPS booth. And get ready for next year's 80th annual meeting in Calgary.

The CPS board, annual meeting committee, and staff worked hard to put this event together. They thank you for coming. (Please thank them **for the effort.** They need sleep.) Don't forget anything in your hotel room, and have a pleasant trip back to your hometown, where you can return to taking care of all those kids.



Your editor Derek K. Miller first produced CPS Today last year in Vancouver, his hometown. His two daughters (ages two and four)—and especially his wife—are ready for him to come back now.

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Royal College of Physicians and Surgeons of Canada

"A new disease," childhood type 2 diabetes

healthy Hids

In remote northern Manitoba, a new epidemic emerged in the 1980s and 1990s: type 2 diabetes in children. It appeared in First Nations populations, and Dr. Heather Dean of the University of Manitoba has helped describe, understand, and treat it.

Diabetes in the adult population has had a huge impact among native populations throughout Canada, she said in her Royal College of Physicians and Surgeons of Canada lecture Friday morning. "There isn't a First Nations community in the country that doesn't understand the implications of this disease." But the emergence of type 2 diabetes in the young requires a different approach to prevention, diagnosis, and treatment.

"Now we visit ten communities twice a year," she said. "That not only educates people living there about diabetes, it educates us diabetes practitioners too."

The first identified case of a young, obese First Nations child with type 2 diabetes appeared in 1983. By 1992 case studies were published, and four years later the first community screening began. The condition has since been identified in several highrisk ethnic groups, including Pacific



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Saturday, June 15, 2002

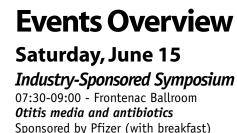
Dr. Heather Dean presented the Royal College lecture Friday morning.

Island, Asian, Caribbean African, and Hispanic populations. As the demographics of Canada's cities change to include more non-Caucasians, the incidence of type 2 diabetes in children has grown.

"The disease is changing too," Dr. Dean said. "It's a witch's brew. There are new drug treatments, new gadgets, changing social demographics, and changing demographics for type 2 diabetes itself." Where initial cases, like adult type 2 diabetes, were mostly in females, girls and boys now seem to develop the disease in roughly equal proportion.

Studies have shown that the disease is becoming more common. "This is a critical health issue," said Dr. Dean, because end-stage complications often develop before age 30. But we know primary prevention is possible in adults with intensive lifestyle intervention.

"The community has a critical role. We're all learning as we go."



Concurrent Workshops ALL MORNING SESSIONS REPEAT IN THE SAME ROOMS IN THE AFTERNOON

09:00-10:30 morning sessions 15:00-16:30 afternoon sessions Dockside, Queen's Quay, Pier, Bay & Harbour

- Injury prevention (Dockside 1)
- Performance supplements (Dockside 2)
- Telemedicine (Queen's Quay 1) Paediatric obesity control (Dockside 4)
- Promoting healthy living (Pier 7)
- Cultural competency (Harbour B)
- Food allergies (Queen's Quay 2)
- Youth mental health (Bay)
- **Bullying** (Dockside 3)
- Infant plagiocephaly (Dockside 5)

CPS Annual General Meeting 10:30-12:15 - Piers 4 & 5

CPS Official Luncheon

12:30-14:30 - Frontenac Ballroom Ross and Aventis Pasteur awards

Section Business Meetings 16:30-18:00 - Piers 2, 3, 7 & 8

BBQ at the Docks

18:30-22:30 - see p. 4 for details

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Fog and rain make photography difficult, so this issue we get more abstract—as with these struts on a wall at Ryerson University.

Real lives lived with retinopathy of

prematurity

Sara Hillis was born at 27 weeks' gestation in 1978, and, like many early preterm infants, developed retinopathy or prematurity (ROP). Twenty-four years ago, there were few treatments, and Sara has been blind since she was a few weeks old. But she recently completed her B.A. in English and is an accomplished musician and singer.

Daniel Wolak was born only four and a half years ago, also highly premature. He too developed



Dr. Dale Phelps

ROP, but was able to receive the latest cryotherapy. It failed, and he too is now blind. But, as his mother Susan told the audience at a

Friday afternoon concurrent session, "he's a healthy, happy, wonderful, and sometimes very naughty four year old."

To prove the point, Daniel came up onstage. Like any other four year old, he told the audience, "Hello. I'm four."

Dr. Dale Phelps had begun the session by describing what ROP is and what seems to cause it—a fragility in the vascularization of the premature retina that makes it very susceptible to injury, and to retinal damage and detachment as the blood vessels grow back too densely and tortuously. While half of all cases of ROP heal on their own, the rest yield various degrees of vision loss, including, as with Sara and Daniel, complete blindness.

What Sara and Daniel's mother



Dr. Saroj Saigal, Sara Hillis, and Susan Wolak field questions following the session.

Susan came to tell the audience is that, while ROP is a great shock and blindness a big challenge, and while the childhood, adolescence, and adulthood of those blinded by ROP is not typical, neither is it unhappy or grievously flawed. Sara described how, when she discovered braille, "I'd heard of this stuff called reading but I didn't know how to do it. It was slow and tedious, but I came to like it."

Susan Wolak and her husband, both police officers, have founded a Burlington-based support group for parents of blind and visually imparied children because of the shocking lack of support and understanding they received after Daniel's birth. She encouraged parents and paediatricians to contact them at swolak@cogeco.ca for more information.

Danger lurks in minor head injuries

PAEDIATRIC UPDATE

Dr. Martin Osmond's portion of Friday afternoon's Paediatric Update session discussed the identification and treatment of common minor head injuries in childhood.



Such injuries occur most often in sports and outdoor activities, including soccer, hockey, playground activities, bicycling, and skateboarding. Such activities have great benefits—that's the theme of this year's annual meeting, after all—so Dr. Osmond emphasized safety, prevention, and effective recognition and treatment of minor head injuries when they do occur.

Concussions are particular worthy of concern, especially repeated ones. The rare but well documented second impact syndrome (SIS), in which severe brain swelling occurs when a second head trauma follows even a relatively minor initial one—sometimes by several weeks—has a mortality rate of 50%, for instance.

Dr. Osmond outlined the different types of minor childhood head injury, recommended how long children should refrain from activities that would risk another impact ("When in doubt, sit it out"), and described a stepwise procedure for returning to play—particularly appropriate for organized sports. He also emphasized the importance of properly fitted and maintained protective equipment.



A brick footpath, well worn by footfalls, changing temperatures, and road salt.

Agents of bioterrorism

PAEDIATRIC UPDATE

Following the terrorist attacks on the United States last September, fears of other kinds of terrorism—specifi-

cally bioterrorism—gained ground, especially after anthrax-laced letters were sent to public figures in that country.

Dr. Michael Rieder finished the Paediatric Update session topically, by introducing the audience to the concepts of biowarfare and bioterrorism, and then detailing the infectious agents currently identified as possible bioterror weapons. Intelligence authorities divide such agents into three classes: A, B, and C, in order of potency and danger.

Anthrax is one of the class A weapon agents, along with botulism, plague, smallpox, tularemia, and haemorrhagic fevers. Class B products have lower mortality rates and are sometimes less infectious or contagious, while class C agents are "emerging"—possibly highly potent, but not yet a serious threat. They include hantavirus and others.

"Canada has the dubious distinction of having produced the world's first weapons-grade anthrax," Dr. Rieder noted. He described in some detail how anthrax and smallpox operate, and how they might be used in a bioterrorist attack. He then discussed the paediatric issues in identifying and treating symptoms of those agents.

Awards and prizes all around

EXCELLENCE AWARDS 2002

CATEGORY 1: the winner is **Dr. M.G.K. Ward,** for abstract #15 (child protection issues), with an honourable mention to **Dr. J. Maguire** for abstract #46 (medical care for otitis media).

CATEGORY 2: the winner is Dr. P. Shah for abstract #74 (PPD-CLD in preterm infants), with an honourable mention to Dr. R. Sherlock for abstract #20 (parenchymal lesions and ventricular enlargement).

TRADE SHOW DRAW PRIZES

The winners of the draw prizes from

the scientific trade show are: **Dr. Gary Smith** – first-class VIA Rail tickets anywhere in the Québec-Windsor Corridor

Dr. Peter Thornsack – a flight anywhere in North America (excluding Mexico). He will have a particularly long journey when he decides to claim his prize—he currently lives in the United Arab Emirates.

REMEMBER

YOUR CERTIFICATE OF ATTENDANCE

for the 2002 Annual Meeting in Toronto is on PAGE 25 of your Final Program. Don't throw it out!

YOUR CONFERENCE EVALUATION FORM

is in your delegate package, within the speakers handout. Turn it in (at reception or the office in Pier 9) to enter our prize draw!

PLEASE NOTE Room Change

SATURDAY, JUNE 16:

"Achieving cultural competency in paediatric care," Dr. Glenn Flores's workshop W6 on Saturday at 9:00 a.m., has proven extremely popular. It has been moved to the larger Harbour Salon B.

REMINDERS



CPS/AAP Joint Symposium Québec City, QC Aug. 30-Sept. 1, 2002

Continuing Medical Education Banff Springs, AB February 5–8, 2003

80th Annual Meeting Calgary, AB June 18-22, 2003



Yesterday's photo of the Wednesday June 12 National Post feature on childhood obesity printed poorly. Here is a slightly better version. Copies of the newspaper have been passed around the conference—talk to your colleagues if you have not yet read it.