Editorial

Dear Friends and Colleagues,

I wish to provide a short update and enlist your help as WFPICCS members as we continue
the journey to fulfill the mission of the Federation. Much has happened since we last met in Sydney but a lot more needs to be done. I implore your enthusiastic participation as we move forward. Some information and areas of progress are outlined below.

1) World Congress
World Federation Conference in Sydney, Australia was very successful. By all accounts most participants were very pleased with the social as well as educational programs. The next meeting will be held in Istanbul, Turkey in 2014. The planning committee is now getting together to start the proceedings.

2) New Secretariat and PCO
WFPICCS has just hired Kenes as PCO and Secretariat. Kenes has a very good reputation in hosting international societies and is based out of Geneva. The WFPICCS team has visited the Geneva headquarters and has finalized the contract.

3) WFPICCS International Sepsis Initiative has just completed its first evaluation of outcomes for sepsis depending on resources available. The evaluation was limited to the areas of the world in which there are resources, i.e., industrialized nations. This was done because there were very few patients enrolled in resource-limited areas. We will need to work with our colleagues in these areas to further understand the burden of sepsis. This project is ongoing. I would encourage AAP members to visit the website www.wfpiccs.org for further news pertaining to some exciting developments and to participate in this endeavour.

4) In addition, WFPICCS has been a founding member of the Global Sepsis Alliance (www.globalsepsisalliance.org) which now includes many of the sepsis societies across the globe.

5) The World Federation would like complete its Strategic Plan for the next few years and invite all members to provide input into where we should focus our interests. Some have already suggested that we launch a series of programs as follows:

1. An educational platform: this is intended to be web based and provide information and resources for those who work in resource limited as well as resource dense parts of the world. This educational platform is intended to bring leaders and clinicians worldwide such that they can have fruitful interactions and hopefully assist each other.

2. Work with major agencies worldwide in assisting in acute disaster situations. There are many agencies that are already working in these areas and it is not the intent of WFPICCS to reinvent the wheel, but rather link with these agencies and provide the resources of its members such that we can lend our expertise in disaster situations.

3. One of WFPICCS major roles is also in advocacy. As such, one suggestion is to develop an advocacy group to link with major organizations and interact with policy makers across the world to improve the outcomes of children.

I would hope that we can create a groundswell, raise the enthusiasm level, participate in all these projects and also create a sense of excitement and common purpose to work with colleagues worldwide to improve the lot for children.

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As we enter the holiday season, on behalf of the executive, I would like to wish you and your families a happy, healthy and joyous season.

I look forward to working with you in the coming years.

Niranjan "Tex" Kissoon, President, WFPICCS

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LATEST NEWS

We are developing a knowledge sharing platform to serve pediatric critical care colleagues worldwide and we need your help! The Division of Critical Care Medicine at Children’s Hospital Boston, in collaboration with the World Federation of Pediatric Intensive and Critical Care Societies (WFPICCS) and IBM, is developing a web-based educational platform, entitled Pediatric Intensive Care Unit Without Walls. This website is being designed to deliver high-quality, relevant education from local experts to health care providers caring for critically ill children around the world, free-of-charge. The website will include videos, a question and answer component, a medical calculator, downloadable protocols and references, a social networking feature, best-practice webinars, and case-based simulations. This platform will be able to function in a wide variety of environments with diverse Internet capabilities, including no Internet capability.

We are interested in better understanding your perspectives and needs. The following survey will help us to understand the environments in which critically ill children are cared for around the world. It will also allow us to understand your educational needs to inform us of components for the website. Please take a few minutes to answer the following questions about the hospital that you are currently working in. The results of this survey will help us understand the pediatric critical care facilities and educational needs globally, and will be used to develop the educational platform to best suit your needs.

This survey should take approximately 10 minutes to complete.

Please click on the link below or paste it into your browser: https://www.surveymonkey.com/s/YS6Q6CK
If you have any questions about the survey or the Pediatric Intensive Care Without Walls Project, please contact us at the address or e-mail listed below.

Thank you in advance for your time and consideration.

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Jeffrey Burns, MD MPH Chief of Division of Critical Care Medicine, Children’s Hospital Boston Associate Professor of Anaesthesia, Harvard Medical School

Niranjan Kissoon, MD Vice President of Medical Affairs, British Columbia’s Children’s Hospital Associate Head and Professor of Pediatrics, University of British Columbia

NEWS FROM EUROPE

Dear colleagues,

We would like to invite you to participate in the:


These Courses were started in 1993 and have been very successful so far. They are characterized...
by a highly professional but also familiar and interactive atmosphere. If you are interested in both Neonatal and Pediatric Intensive Care Medicine, then this Course will offer you carefully selected hot topics and controversial issues presented by experts from around the world. Interaction between the audience and speakers will be guaranteed by round table sessions.

For preliminary program, registration and hotel booking see our website:

We are looking forward to welcoming you to Berne next March.

Bendicht Wagner, Chairman of the Scientific Programme Committee

Secretary: Daniela Gruetter, Pediatric Intensive Care, University Children’s Hospital of Berne, Switzerland, daniela.gruetter@insel.ch
Administrative secretariat: BBS Congress GmbH, Berne, Peter Salchli, peter.salchli@bbscongress.ch

NEWS FROM LATIN AMERICA

Symposium "Nutrition in the critically ill child"
20-21 of April 2012
University of Chile Aula Magna
Faculty of Medicine University of Chile

Director Dr Bettina von Dessauer
From epidemiology, the bioethic point of view, up to nutrition in special medical and surgical conditions in ICU.

Invited professors:
Dr Nilesh Mehta, Children’s Hospital of Boston
Dr Jorge Coss Bu, Baylor College of Medicine, Texas Children’s Hospital

12º Congresso Brasileiro de Terapia Intensiva Pediatrica & 11º Congresso da Sociedad Latino-Americana de Cuidados Intensivos Pediatricos
Hotel Gran Hyatt, 06-09 June 2012, Sao Paulo, Brazil.

Inspite of the known important role of nutrition in critically ill infants and children, trying to control metabolic stress response, oxidative stress and the consequence of MODS, malnutrition in hospitalized patients is still a problem. In ICU this influences the outcome and cost-effectiveness of our care. Consciencness about this has been proven to improve medical behavior. An international, multicenter, multidisciplinary event to talk about.

Contact persons edith.pereda@redsalud.gov.cl, fnmiranda.uchile@gmail.com Hospital Roberto del Río

NEW TOPIC TO DISCUSS

Airway papillomatosis: an emerging problem in PICU, to be considered in the differential diagnosis of infants presenting with upper airway obstruction. In spite of the categorization as benign viral tumors, high recurrence rate is observed and repetitive procedures are necessary.

General prognosis is uncertain.

Increasing literature is available and different treatment strategies are discussed worldwide. Immunization of a broader spectrum of people than female adolescents may be necessary soon. Your opinion?

Dr Bettina von Dessauer

If you have any suggestions please contact:

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