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....a seedling for the future growth of NEPAS....



Official Newsletter of Nepal Paediatric Society

January, 2025

Editorial: NEPAS's Growth and Upcoming NEPCON 2025

As we reflect on the remarkable growth of the Nepal Paediatric Society (NEPAS) over the past few years, it is with immense pride and gratitude that we acknowledge the collective effort of our members, partners, and stakeholders. NEPAS has evolved into a vibrant platform for paediatric professionals, fostering a community of excellence in child healthcare. Our initiatives in medical education, research, and advocacy have made significant strides in addressing the unique health needs of Nepal's children. From conducting specialized workshops to collaborating with global health organizations, NEPAS continues to strengthen its role as a pillar of paediatric care in Nepal. Our work is a testament to the dedication and hard work of all who have contributed to our mission, and we are excited to carry this momentum forward in the coming years.

Looking ahead, we are excited to announce the upcoming NEPCON 2025, our flagship international conference,

which will be held in May 2025. This year's theme, "Climate Change and its impact in Children- Safeguarding Future Through Specialized Care," underscores the urgent need to address the impact of environmental changes on paediatric health. As climate change accelerates, it is crucial that we as healthcare providers equip ourselves with the knowledge and tools to protect the most vulnerable – our children. NEPCON 2025 will bring together renowned paediatric experts, researchers, and policymakers from across the globe to discuss innovative strategies for mitigating the effects of climate change on child health and well-being. This conference promises to be a significant milestone in our journey toward ensuring a healthier, more resilient future for Nepal's children. We invite all paediatric professionals to join us in this important conversation, as we work together to forge a path of hope and sustainable care for the next generation. Thank you.

- Editor in Chief

From General Secretary's Desk

It is with great pride that we share the remarkable progress and future plans of the Nepal Paediatric Society (NEPAS). A significant milestone achieved this year is the formal establishment of 14 subspecialty chapters, including two newly introduced chapters: the Paediatric Allergy, Immunology, and Rheumatology (PAIR) Chapter and the Paediatric Infectious Diseases Chapter. These chapters represent our collective dedication to advancing paediatric subspecialties in Nepal. Some of these chapters have already organized impactful workshops, seminars, and even international conferences, underscoring the excellence and commitment of paediatricians in the country. We extend our heartfelt gratitude to all members for their contributions and encourage active participation in these chapters to further enhance child health services.

NEPAS has also taken significant steps to decentralize its activities with the establishment of provincial branches in Bagmati and Lumbini provinces. These branches are

a testament to our commitment to bringing paediatric services closer to the communities we serve. While some official processes remain in progress, the establishment of these branches marks a new era of collaboration and outreach.

We are confident that their full operationalization will greatly benefit paediatric healthcare delivery across the provinces.

Looking ahead, we are thrilled to announce our flagship event, the upcoming international conference, NEPCON 2025, tentatively scheduled for the last week of May 2025. NEPCON has always been a platform to showcase our collective achievements, share knowledge, and foster collaborations with experts from around the globe. We believe your active involvement will once again be pivotal in making NEPCON 2025 a grand success, just as in previous years. Together, let us make this event a milestone in the journey of NEPAS. ♦



Dr. Prakash Joshi

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Inauguration Report: Neonatal Intensive Care Unit (NICU) at Civil Service Hospital

Introduction

The Civil Service Hospital took a significant stride towards enhancing its healthcare services with the inauguration of its Neonatal Intensive Care Unit (NICU). This report encapsulates the key highlights and proceedings of the inauguration event, underscoring its importance and impact on the hospital's healthcare delivery system.

Event Overview

The inauguration ceremony commenced at 9:30am with an invocation followed by welcoming remarks by the hospital's administration. Dignitaries, including minister of federal affairs and general administration Hon. Bhanubhakta Joshi, President of NEPAS Maj. Gen. Dr. Arun Kumar Neopane (Retd), Chair of Neonatology chapter Prof. Dr. Kalpana Subedi, doctors, nurses and community representatives, graced the occasion, reflecting the widespread support and significance of the initiative.

Inaugural Address

Dr. Prakash Jyoti Pokharel, Head of Department of Paediatrics, delivered the inaugural address, emphasizing the critical need for specialized care for newborns and the hospital's commitment to meeting this demand. The NICU's role in mitigating neonatal mortality rates and providing comprehensive care to premature and critically ill infants was underscored.

Unveiling Ceremony

A symbolic unveiling ceremony marked the official opening of the NICU, symbolizing a new chapter in the hospital's journey towards excellence in paediatric healthcare. The ribbon-cutting ceremony was accompanied by applause and expressions of anticipation for the NICU's impact on the community.

Facility Tour

Following the inauguration, attendees were given a guided tour of the NICU facility. The state-of-the-art infrastructure, equipped with advanced medical technology and amenities conducive to infant care, elicited admiration and commendation from visitors.

Acknowledgments and Appreciation:

The event provided an opportunity to express gratitude to the individuals and organizations [like NEPAS, ministry of federal affairs and general administration] whose support and contributions were instrumental in establishing the



NICU. Paediatric doctors team, nurses and administration members were recognized for their invaluable roles in realizing the project's vision.

Closing Remarks

The inauguration ceremony concluded with closing remarks by the director of civil service hospital, Prof. Dr. Bidhan Nidhi Poudel, reiterating the hospital's commitment to providing compassionate, high-quality care to newborns and their families. Attendees departed with a sense of optimism and pride in the hospital's expanded capabilities and dedication to serving the community.

Conclusion

The inauguration of the NICU at Civil Service Hospital represents a significant milestone in the hospital's quest for excellence in paediatric healthcare. With cutting-edge facilities and a dedicated team of professionals, the NICU stands poised to make a profound impact on the well-being of newborns and their families, reaffirming the hospital's commitment to serving its community.

This report serves as a testament to the collective efforts and unwavering support that have made the NICU a reality, underscoring the hospital's ongoing commitment to delivering superior healthcare services to those in need.

Special meeting with Dr. Barry

Meeting date: 03 OCT 2024

Venue: Nepal Paediatric Society Office, Baluwatar, Kathmandu

Attendees

NEPAS President: Dr. Arun Kumar Neopane,
Vice President: Dr. Ram Hari Chapagain and
Joint Treasurer: Dr. Deepak Shrestha

Discussion: President Dr. Arun Kumar Neopane highlighted the NEPAS activities and formation of different chapters including Paediatric hematooncology and NEPAS possible action points on the child health. Prof. Barry shared his experiences and observations on working in Nepal for last 30 years. He explained his observation regarding the resource tracking resource utilization, working togetherness for shared goals and data



management as well as research. Both parties agreed that the hematooncology chapter will be a common platform to bring all the paediatric hematooncologist in a common platform and progress towards childhood cancer and also agreed to work together in future.

Meeting with Regional Environment, Science, Technology and Health Office (RESTHO) for South Asia, U.S. Embassy Kathmandu.

The RESTHO is one of the 12 environmental hubs set up by the Department of State around the globe to promote and advance regional cooperation in areas of environment, science, technology and health affairs.

Mr. Oliver Haugland and Sulakchana Rai from RESTHO visited NEPAS Central Office today.

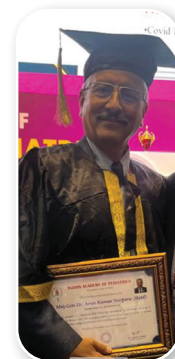
Mr. Haugland is working as Embassy Science Fellow (ESF) for Lead Pollution in South Asia and is working to conduct literature review, interview government and civil society stakeholders, and conduct additional research to assess major sources of lead exposure in South Asia; conduct a gap analysis of existing policies to recommend evidence-based reforms and identify potential interventions that governments and civil society can implement to reduce lead exposure in South Asia. We had a fruitful discussion regarding possible collaboration in research & mitigating the lead exposure in Nepalese children.



Dr. Arun Kumar Neopane
President, NEPAS

Heartfelt Congratulations on your outstanding achievement –
Fellowship of the Indian Academy of Pediatrics!

Your unwavering dedication, expertise, and commitment to paediatric care have been rightfully recognized.



Cardiology Chapter events



- * Cardiology chapter of NEPAS organized a CME on Critical Congenital Heart Disease in Newborns on 21st September 2024 at Manmohan Cardiothoracic Centre, Maharajgunj.
- * It was presented by Dr. Samir Shakya, Paediatric Cardiologist from IOM and moderated by Dr Urmila Shakya (Chair, Cardiology Chapter). The CME was attended by around 50 participants in person as well as by several attendees via Zoom.
- * Dr. Narayan Bahadur Basnet also handed over his collection of Paediatric Cardiology books to NEPAS General Secretary in the same event.



Paediatric Oncology Chapter Activities



There are various activities are going around in paediatric oncology. Some of the significant milestone are as follows.

1. Last month wilms tumor guideline was finalised and submitted for endorsement.
2. GAPCCM medicine is coming soon around end of this year/ and yearly thereafter.
3. Government declared free treatment of childhood cancer patients below 14 years.
4. All major hospitals treating childhood cancer are part of St Jude alliance's (recently BCH joined).

5. Paediatric palliative care training module is towards final stage of endorsement and is on discussion in TWG at NHTC.
6. All 4 major hospital children and parents are getting support from family support officer with some getting monetary support too.
7. Most of institute primary delegate are going to participate in St. Jude Global convention in Memphis.

Let's spread it, use it and empowered self as well as children with cancer.

Vaccinology and Immunology Chapter



The vaccinology chapter has had 2 meetings in November and December 2024.

This chapter is working towards revising the immunization book last revised and published in 2018. The authors have been finalised and shall be completing the book soon.

Here are few glimpses of previous CMEs.



Pulmonology Chapter

Paediatric Pulmonology is the most dynamic and fastest growing sub-chapter of Paediatric medicine. The chapter is actively involved in enriching and expanding the knowledge by conducting regular meetings, CME, workshops and

conferences. The chapter in collaboration with Dhulikhel Hospital has successfully organized the first International Paediatric Pulmonology Conference PEDIPULMOCON in October 2024.



Paediatric Gastroenterology Chapter



1. Mini NEPCON 22nd June 2024, 2 panel discussions
2. First PDP (Professional Development Programme) and workshop on 21st December 2024 (In collaboration with Pulmonology Chapter and Dermatology Speciality)
3. Chat Lounge Sessions...6 online sessions done so far.



CHAT LOUNGE

PGH CHAPTER

Sugar, Fat and More and The Young Liver NAFLD connection (Non Alcoholic Fatty Liver Disease)

Narrator: Dr. Nirjala Aryal, *Senior Resident Hospital, Member PGH Chapter*
 Host: Dr. Binitta Gurubacharya, *Senior International Medical Officer, PGH Chapter*
 Lead: Executive Committee Plus
 Date: 20th November 2024, Wednesday
 Time: 8:30pm Sharp

Join us from the comfort of your home, using your phone or laptop. Bring your favourite cup of coffee, sit back, relax and enjoy an open discussion. No stress of a formal meeting—just an opportunity to listen, chat, learn and connect. Looking forward to having you with us!

CHAT LOUNGE

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Nepal Paediatric Society
Dedicated to the health of all children

1st International conference in growth development and behavior



This international conference was hosted by growth development and behavior sub-specialty chapter of NEPAS (GDBP) at Hotel Shanker, Kathmandu on 21st December 2024. This was done in collaboration of south Asian neurodevelopment environment and behavior Paediatric association (SANBEP). It was a huge success as more than 150 delegates both national and international attended the event. Esteemed developmental paediatricians, neurologist and Paediatricians from India,

Pakistan, Bangladesh, Srilanka, Nepal and Maldives did their presentations. The event was inaugurated by Prof. Ramesh Kanta Adhikari.

During the event, SANBEP was established for the first time. Dr. Anil Raj Ojha was the organizing chairman of the event and the conference was preceded by a workshop on autism and high risk newborns on 20th December at Patan Academy of Health Sciences (PAHS).



Neurology Chapter Report

First physical EEG workshop was held in Yellow pagoda hotel, Kathmandu on 30th Nov 2024. Total 59 paediatricians from and outside Kathmandu attended the program. It was quite an interactive program and included various basic EEG topics discussed by Dr. Bina, Dr. Asim, Dr. Prithuja and

Dr. Santosh. After the closure of the session, EEG practical zoom web sessions were conducted in successive weeks, December 11, 26 and one more session is scheduled for Jan 7 2025.



Nephrology Chapter



Recently, five members of the Paediatric Nephrology Chapter of NEPAS, led by Dr. Devendra, Chairman of the chapter, participated in the 36th Indian Society of Paediatric Nephrology (ISPN) Conference held in Delhi from December 6 to 8, 2024. Dr. Vivek presented a paper on the "Challenges in Management of Chronic Kidney Disease in Nepal" during the forum. Dr. Devendra chaired the "South Asian" session, while Dr. Bimala actively participated in one of the panel discussions.

The chapter is planning to organize a virtual Continuing Medical Education (CME) session shortly, followed by a hybrid CME-cum-workshop around March 2025, with plans to invite international faculty.

Additionally, Dr. Daman, Secretary of the chapter, has been invited to attend the upcoming 20th International Paediatric Nephrology Association (IPNA) Congress, scheduled to be held in South Africa from February 20 to 23, 2025. He will be presenting a paper at this prestigious international forum.



Nutritional Chapter : Reports



Summary Report on Field Visit of Balaka Municipality ,Udayapur

Date of visit: 17-19 Dec 2024

Team Member:

ACF

1. NEPAS: Dr. Ram Hari Chapagain, Vice President Nepal Paediatric Society (NEPAS)
2. Dr. Pawana Kayastha, Chair, Nutrition Chapter, Nepal Paediatric Society (NEPAS)

Introduction of Activity

The Moderate Wasting Initiative (MWI) is a research activated being carried out in Belaka Municipality with leadership of ACF. It aims to address nutrition stakeholders' challenges in accessing and utilizing feasible, effective, and innovative solutions in respond to moderate wasting in children under five years at scale. It will seek to support the development of programmatic solutions for managing moderate wasting through a range of contextualized options, including the current standard of traditional Supplementary Feeding Program (SFP) with the provision

of specialized nutritious foods for children in need. This approach aligns with new WHO guidelines (2023) which clarify that not all children require a specially formulated food to recover from moderate wasting.

This visit was to observe the " implementing a comprehensive package of interventions targeting children with Moderate Acute Malnutrition (MAM) and their families" in which the demonstration of cooking the energy dense food and WASH awareness workshop along with distribution of WASH related materials.



Involvement in regional meeting on Nourishing South Asia

Nutritional Chapter Co-chair Dr. Pawana Kayastha represented NEPAS and NEPAS NUTRITION CHAPTER at Regional Meeting on “NOURISHING SOUTH ASIA |

Scaling up Nutritional Care and Support for Infants at Risk of Poor Growth and Development in South Asia.





MOU: Initiated by Nutrition Chapter

MOU with the prestigious organisation Action Against Hunger (ACF) and NEPAS was made. It was initiated and assisted by Dr. Pawana Kayastha co chair of paediatric nutrition chapter as the focal person.

Webinar Discussions on IMAM Guideline

Webinar series were jointly organized to discuss updates to the Integrated Management of Acute Malnutrition (IMAM) guidelines.

These discussions were crucial for aligning the guidelines with the unique needs of our country while incorporating evidence-based global practices. The expertise and contributions will be invaluable in shaping these updates for the betterment of child health and nutrition in Nepal.

The webinar details are as follows:

Webinar I

Topic: Management of Acute Malnutrition in Children 6–59 Months

Date: 29 November

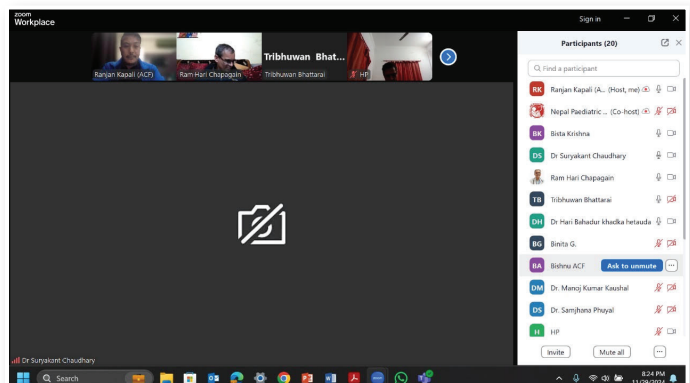
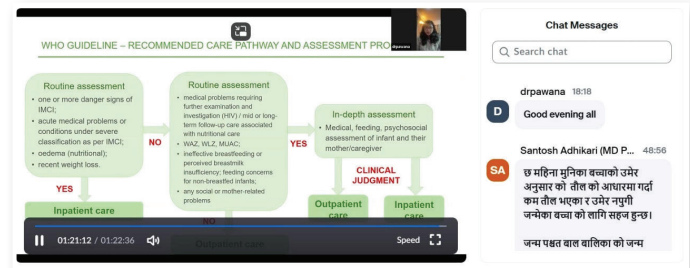
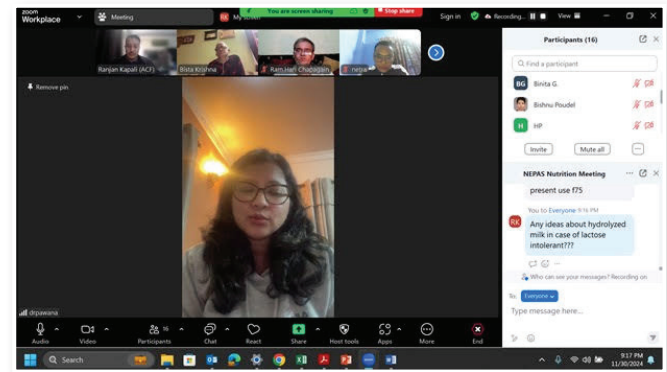
Webinar II

Topic: Infants < 6 Months at Risk of Poor Growth and Development – Classification, Assessment, and Care Pathway

Date: 30 November

We had previously shared relevant preparatory documents for review and to ensure focused and productive discussions.

Now, we can ensure that the IMAM guidelines reflect the best strategies for managing acute malnutrition supporting the healthy growth and development of children in our country.



Madhesh Pradesh Branch Activities

Regular CME was done as PAEDIATRIC-ENT meet speaker were Dr. Yogesh Neupane (ENT) from IOM Kathmandu and Dr. Vikash Sah (paediatric) from MIHS Janakpur organized by NEPAS Madesh pradesh branch on 26/07/081.

Another CME activity was conducted on 28th of November 2024 on the topic "Cough in paediatric" Speaker Dr Baidhnath Thakur. Organised by NEPAS MADESH PRADESH branch.



बालबालिकाहरूमा इलेक्ट्रोनिक उपकरणहरूको प्रयोगका सकारात्मक र नकारात्मक प्रभावहरू

प्रा.डा. रामचन्द्र वास्तोला

विभागीय प्रमुख, बाल रोग विभाग
पोखरा स्वास्थ्य विज्ञान प्रतिष्ठान, पोखरा

इलेक्ट्रोनिक उपकरणहरूको प्रयोग हाम्रो जीवनको अपरिहार्यता भइसकेको छ । जब हामीहरू नै यसबाट वञ्चित हुन सक्दैनौं भने केटाकेटीहरूको लागि त यो भन्नु अम्मल बनिसकेको छ । अतः यसको सहि मानेमा सदुपयोग भयेमा यसका राम्रा साथै नराम्ररी प्रयोग भएपछिका नराम्रा प्रभावहरू पनि हाम्रो जीवनमा परिरहेका छन् ।

सकारात्मक प्रभावहरू

१. शैक्षिक फाइदाहरू:

- अनलाइन सिकाइ उपकरणहरू, शैक्षिक खेलहरू, र भिडियोहरूको पहुँचले सिक्ने र संज्ञानात्मक (कग्निटिभ) सीपहरूमा सुधार ल्याउँछ ।
- डिजिटल सीपहरू (डिजिटल लिटरेसी) मा सुधार, जुन आधुनिक संसारका लागि महत्वपूर्ण छ ।

२. सीप विकास:

- समस्याको समाधान गर्ने क्षमता, सिर्जनशीलता, र हात-आँखा समन्वय (ट्यान्ड-आइ कोर्डिनेसन) मा सुधार गर्छ ।
- चासो बढाएर नयाँ विषयहरूको अन्वेषण गर्न उत्प्रेरणा दिन्छ ।

३. सामाजिक सम्पर्क:

- टाढा रहेका साथीभाइ र परिवारसँग सम्पर्कमा रहन सहयोग गर्दछ ।
- समूहगत गतिविधिहरूबाट सहकार्यात्मक सिकाइलाई प्रोत्साहन गर्दछ ।



नकारात्मक प्रभावहरू

१. स्वास्थ्य सम्बन्धी समस्या:

- शारीरिक स्वास्थ्य: अत्यधिक स्क्रिन समयले आँखा दुख्ने, टाउको दुख्ने, नराम्रो आसन (पोश्चर), ढाडदुखाई र शारीरिक गतिविधिको अभावका कारण मोटोपन जस्ता समस्याहरू ल्याउन सक्छ।
- मानसिक स्वास्थ्य: मोबाईलको अत्यधिक प्रयोगले चिन्ता, तनाव, र निद्रा सम्बन्धी समस्याहरू बढाउन सक्छ।
- अति उत्तेजनाको कारण ध्यान केन्द्रित गर्न गाह्रो हुने वा ध्यान अवधि घट्न सक्छ।
- अनुपयुक्त सामग्री हेरेमा आक्रोश वा चिडचिडापन बढ्न सक्छ।

३. विकासमा ढिलाइ

- बाल्यकालमा अत्यधिक प्रयोगले भाषा, सामाजिक, र भावनात्मक सीपहरूमा ढिलाइ गराउन सक्छ।

४. लत र निर्भरता

- उपकरणहरूमा निर्भरता बढेर समय र प्राथमिकताहरू व्यवस्थापन गर्न गाह्रो हुन सक्छ।

५. अनुपयुक्त सामग्रीको सामना

- उचित निगरानीबिना, बालबालिकाले हानिकारक वा उमेर-अनुसार नभएका सामग्रीहरू भेट्न सक्छन्।

बालबालिकाले इलेक्ट्रोनिक उपकरण प्रयोग गर्न पालना गर्नुपर्ने नियमहरू :

- समयको सीमा निर्धारण गर्नुहोस्: उमेरअनुसार स्क्रिन समयलाई सीमित गर्नुहोस्। अमेरिकन एकेडेमी अफ पेडियाट्रिक्सले ५ वर्ष माथिकालाई २ घन्टासम्म प्रतिदिन, २-५ वर्षका बालबालिकाका लागि प्रतिदिन १ घण्टा मात्र सिफारिस गरेको छ, भने २ वर्ष अगाडिका बाबु नानीहरूलाई बिल्कुल बर्जित गर्नु भनेको छ। लगातार

स्क्रिन हेर्दा आँखा थाक्न सक्छ, त्यसैले प्रत्येक २० मिनेटमा विश्राम गर्न प्रेरित गर्ने।

- बाहिरी गतिविधिलाई प्रोत्साहन दिनुहोस्: शारीरिक खेल र स्क्रिनबाहिरका रुचिहरूलाई प्रोत्साहन गर्नुहोस्। मनोरञ्जनका लागि पनि सन्तुलित समय दिन सकिन्छ, तर अत्यधिक नहुने।
- सामग्रीको निगरानी गर्नुहोस्: अनुपयुक्त सामग्री र एपहरू छान्न अभिभावकीय नियन्त्रण (प्यारेन्टल कन्ट्रोल) प्रयोग गर्नुहोस्। उपकरणहरू सार्वजनिक कोठा वा अभिभावकको उपस्थितिमा मात्र प्रयोग गर्ने। उपकरणको पासवर्ड अभिभावकले मात्र थाहा पाउने व्यवस्था गर्ने। अनलाइन सुरक्षित रहने बानी बसाल्ने, जस्तै: अनजान व्यक्तिसँग कुरा नगर्ने।
- आफू पनि उदारणिय बन्नुहोस्: आफ्नै उपकरणको प्रयोगलाई पनि अभिभावकले सन्तुलित गरेर उदाहरण प्रस्तुत गर्नुहोस्।
- प्रविधि-रहित (Tech-free Zone) क्षेत्र बनाउनुहोस्: भोजन, शयनकक्ष, र परिवारसँगको समयलाई प्रविधि-रहित बनाउन प्रयास गर्नुहोस्। विशेषगरी निद्राको १ घण्टा अघि स्क्रिन प्रयोग नगर्ने।
- शिक्षामूलक प्रयोगमा जोड: उपकरणको प्रयोग मुख्य रूपमा अध्ययन, शैक्षिक खेल, र सिर्जनात्मक कामका लागि गर्ने।
- आफ्नो दायित्व पुरा गरेपछि मात्र प्रयोग गर्न पाउने व्यवस्था मिलाउने: होमवर्क, व्यक्तिगत सरसफाइ, र अन्य जिम्मेवारीहरू पुरा गरेपछि मात्र उपकरण चलाउन अनुमति दिने।
- अभिभावकसँग संवाद र निगरानी: बालबालिकाले उपकरणमा के गरिरहेका छन् भन्नेबारे अभिभावकसँग संवाद गर्ने। उपकरण प्रयोग गर्दा आउने समस्या वा प्रश्नका लागि अभिभावकसँग सल्लाह गर्न प्रेरित गर्ने।

यी नियमले बालबालिकालाई डिजिटल संसारको सुरक्षित र सन्तुलित उपयोग गर्न सहयोग गर्दछ।

धन्यवाद !

NEPAS Paediatric Allergy Immunology & Rheumatology (PAIR) Chapter: A Milestone and Beacon of Hope!



Chairman: Dr Dharmagat Bhattarai
MBBS, MD, DM (PGI), FESID (USA)

It is with immense pride and enthusiasm that I announce the establishment of the NEPAS Paediatric Allergy Immunology & Rheumatology (PAIR) chapter, a groundbreaking initiative and a pivotal milestone for our society and, in a larger perspective, for our country. In a paediatric clinical landscape often hindered by challenges such as limited awareness, a lack of superspecialists, insufficient logistical and therapeutic resources, institutional fragmentation, and a lack of governmental support for emerging scientific disciplines, this chapter represents a beacon of progress and hope. Officially inaugurated on September 14, 2024 (2081-05-29 BS), the chapter's formation marks a new era in advancing paediatric allergy, immunology, and rheumatology in Nepal.

I extend my heartfelt gratitude to the NEPAS board for entrusting me with the honor and responsibility of serving as the chair of this chapter. Additionally, I am delighted to share that the executive team has been selected unanimously, comprising a co-chair (Dr Satish Yadav), a member secretary (Dr Deepak Kumar Gupta), and an executive member (Dr Anjali Bagariya) who has brought an invaluable expertise and commitment to the chapter. I am thankful to all members for their enthusiasm and promise for the revolutionary advancement in academics. Following the team's commencement, we held a comprehensive meeting to chart the roadmap for the chapter's future endeavors.

The chapter's focus spans several key domains:

- Immunology, with an emphasis on immunodeficiencies, immune dysregulation, and inborn errors of immunity (IEIs)
- Paediatric rheumatology
- Paediatric Allergy
- Angioedema
- Asthma

We are pleased to announce that the chapter has already initiated academic e-meetings. Furthermore, we plan to launch a series of Continuing Medical Education (CME) programs on topics such as allergies, inborn errors of immunity (primary immunodeficiencies), and paediatric

rheumatology starting in January 2025. These efforts aim to build capacity, foster awareness, and enhance clinical outcomes in these critical areas.

Clinical immunology remains a largely overlooked field in resource-constrained settings like ours. Paediatric allergic, immunological, and rheumatological diseases (PAIRDs) often go undiagnosed or misdiagnosed, leading to delayed interventions and poor outcomes. Factors such as limited awareness among clinicians and the public, resource constraints, and a narrow diagnostic approach contribute to this significant gap. Misconceptions, such as treating all symptoms as infections requiring antibiotics, attributing joint pain to vitamin D deficiency, or relying exclusively on long-term steroids for rheumatic diseases, painfully persist to-date. It is imperative to dispel the notion that "we cannot do anything for immunodeficiencies" and instead work towards systemic change. The PAIR chapter is dedicated to spearheading this movement.

Paediatric immunology encompasses a wide spectrum of conditions, including:

- Inborn errors of immunity (IEIs), such as primary immunodeficiencies and immune dysregulation disorders
- Allergies and angioedema
- Immune lymphoproliferative diseases
- Secondary immunodeficiencies

Similarly, paediatric rheumatological disorders include:

- Chronic childhood arthritis
- Connective tissue disorders
- Autoimmune diseases
- Vasculitides
- Autoinflammatory syndromes
- Reactive conditions
- Noninflammatory arthropathy

Contrary to common perception, infections and arthritic presentations account for only a small proportion of paediatric immunological and rheumatological disorders, respectively. So, immunodeficiencies do not only mean repeated infections. It means a lot more. Despite being

diagnosable and treatable, PAIRDs remain frequently overlooked. While the emergence of subspecialists and advances in diagnostics have improved the situation, the overall awareness remains alarmingly low—found at 17% among physicians and 2% among the public on a survey. PAIRDs are far from rare, and their increasing recognition underscores the urgent need for a paradigm shift in clinical practice. Paediatricians and clinicians must adopt a more vigilant and innovative approach to unearth these hidden conditions, moving beyond conventional diagnostics and treatments.

To achieve this, we must challenge ourselves to “think lateral” and “think zebra,” embracing the broader picture rather than focusing narrowly on individual symptoms. Let’s not forget the jungle for the excitement of the diagnosed tree. Our tree can just be a part of a forest. As we step forward together as the PAIR chapter of NEPAS, let us embody our name—PAIR—and work collectively to transform the landscape of paediatric allergy, immunology, and rheumatology in Nepal. Let’s pair with ‘PAIR’ to redefine possibilities and reshape outcomes!

Diabetic Camp Report

Dr. Archana Nepal

Assistant Professor of Paediatrics
Patan Academy of Health sciences

Event Summary

The Diabetic Camp, held on April 20, 2024, at Patale Ban Resort in Thankot, was a successful one-day event. Sponsored by Life for a Child in association with Patan Hospital and Elite Health Clinic, the camp provided an opportunity for children with diabetes and their guardians to learn about managing the condition while enjoying various activities. A total of 36 children and their guardians attended.

Transportation and Arrival

Participants gathered at Patan Hospital and traveled to the venue via the hospital bus, arriving at 9 AM.

Program Activities

- 1. Introductory Session and Hypoglycemia Management Discussion:**
 - The camp began with an introductory session, followed by an informative discussion on managing hypoglycemia.
- 2. Breakfast and Games:**
 - After breakfast, children engaged in games such as Tug of War and Pass the Parcel, while younger children enjoyed golf, football, and badminton.
- 3. Nutrition Session:**
 - A nutritionist led a session on different food types and how to substitute one food for another. This session was well-received by both children and parents.



- 4. Peer Group Therapy:**
 - A therapist conducted a peer group therapy session, encouraging children to share their experiences and challenges. This open discussion was highly effective and led to the idea of starting regular monthly peer group sessions.
 - Simultaneously, a session for parents allowed guardians to share their concerns and information, which was also beneficial.
- 5. Lunch and Entertainment:**
 - Lunch was served around 4 PM, followed by a dance and singing session, and poetry recitation. Two children showcased exceptional dancing skills, while another demonstrated impressive literary talent.
 - Interaction among participants enabled the sharing of lived experiences, enhancing the effectiveness and impact of the camp.



Important Information Gathered During Camp

- **Issues in School:**
 - Some schools did not want children with diabetes to continue the studies in their school
 - Some children were mistakenly thought to be drug addicts due to hypoglycemic episodes during school hours.
 - Teenagers were hesitant to reveal their diabetes, fearing they would be seen as different or diseased.
 - Recurrent ICU admissions disrupted their studies and daily life.
- **Social Concerns:**
 - Meeting children with similar problems during the waiting period outside the OPD was considered fruitful.
 - Concerns about marriage and the ability to conceive were common.
 - Parents worried about planning for another child after having one with diabetes.
 - Some children and parents believed that diabetes might lead to an early death.
 - Some children mentioned having suicidal tendencies, anxiety, and severe depression.
 - Some children were even on antidepressants.
 - Children mentioned parental reluctance to allow them to go abroad or lead independent lives.
- **Adjustments and Coping Mechanisms:**
 - Meeting each other provided opportunities to learn from others' journeys and success stories.
 - Families made adjustments such as changing the whole family's food habits, learning to deal with the child's anger and outrage, and moving to areas with better facilities.



Incident and Response

During the camp, one child experienced a hypoglycemic episode with blood sugar dropping to 34 mg/dL. The nursing staff effectively managed the situation, providing a practical learning experience on handling hypoglycemia. This incident highlighted the need for a standardized hypoglycemia protocol, which the organizers decided to develop for future use.

Feedback and Outcomes

- Participants expressed a strong desire for more frequent camps and greater involvement in planning future events.
- The sessions on nutrition and psychology were particularly appreciated, providing valuable knowledge and support to both children and parents.

Conclusion

The Diabetic Camp was a fruitful event that combined educational sessions with enjoyable activities, fostering a supportive community for children with diabetes and their guardians. The positive feedback and suggestions for regular meetings underscore the camp's success and the ongoing need for such initiatives.

Approach to a child with chronic diarrhoea

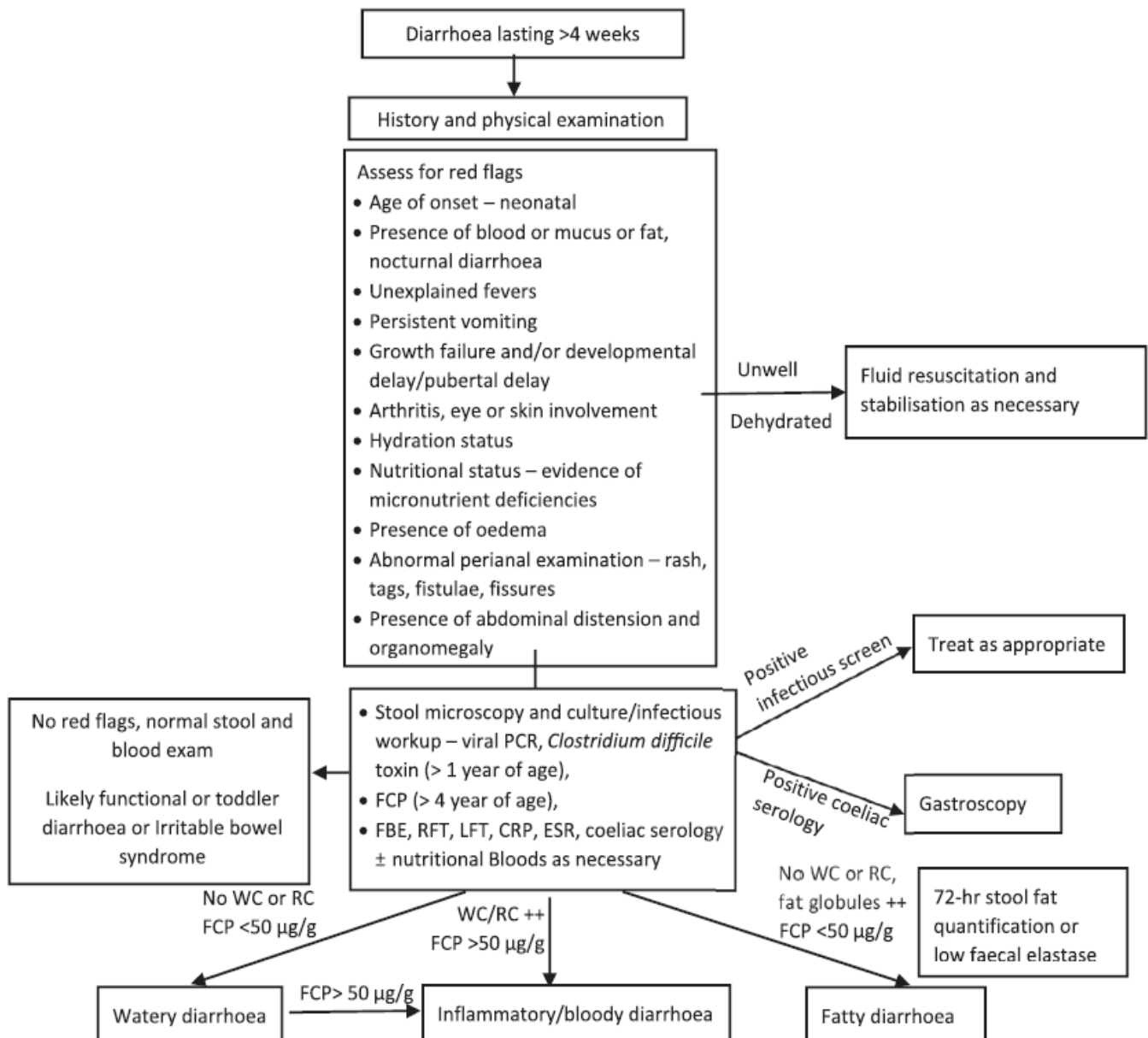


Fig 1: Approach to a child with chronic diarrhoea.

(CRP, C-reactive protein; ESR, erythrocyte sedimentation rate; FBE, full blood examination; FCP, faecal calprotectin; LFT, liver function test; PCR, polymerase chain reaction; RC, red cells; RFT, renal function test; WC, white cells)

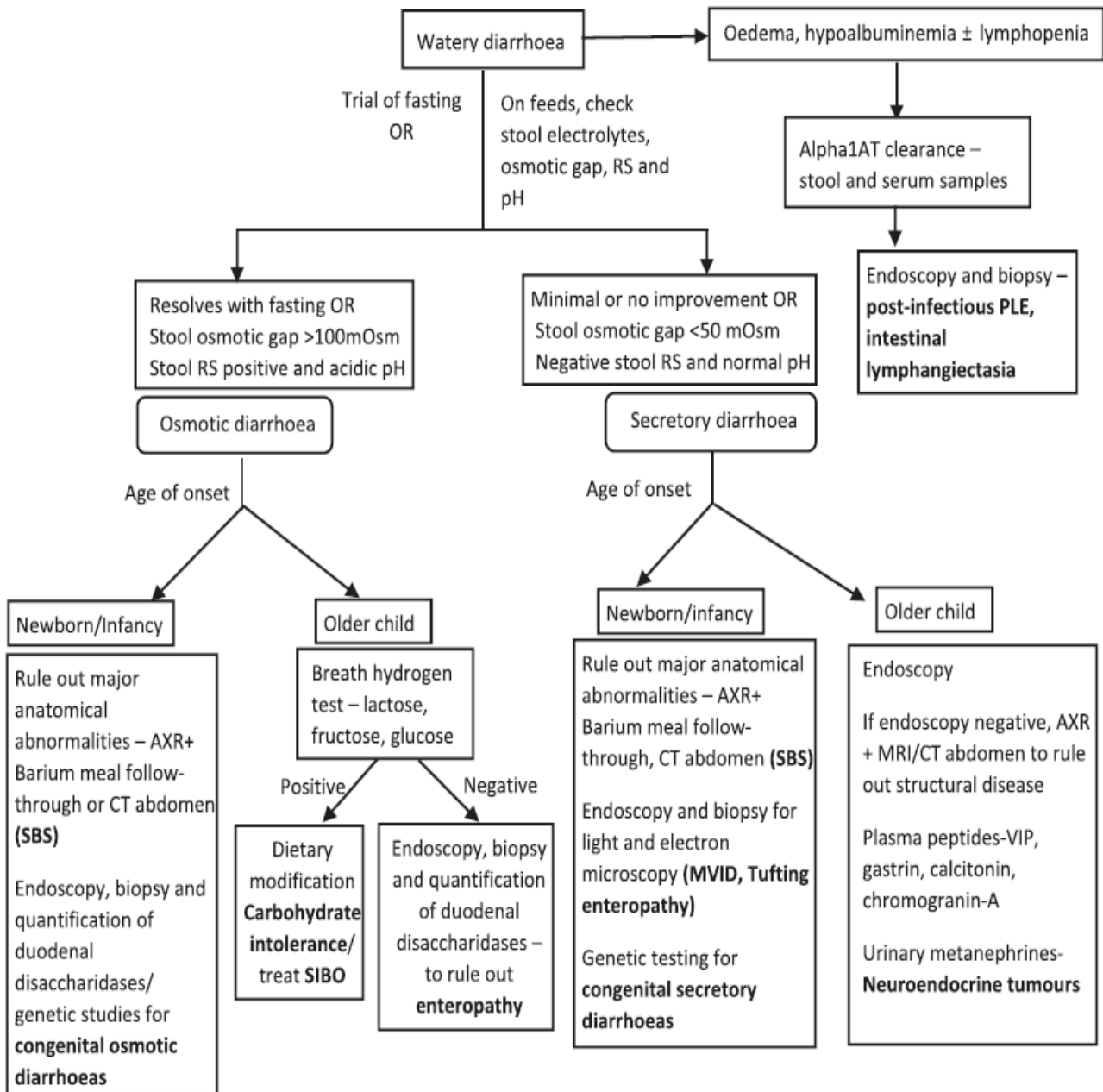


Fig 2: Approach to watery diarrhoea.

(SBS, short bowel syndrome; RS, reducing substances; AT, antitrypsin; PLE, protein losing enteropathy; SIBO, small intestinal bacterial overgrowth; MVID, microvillous inclusion disease; VIP, vasoactive intestinal peptide immunodeficiency; VEO-IBD, very early onset IBD)

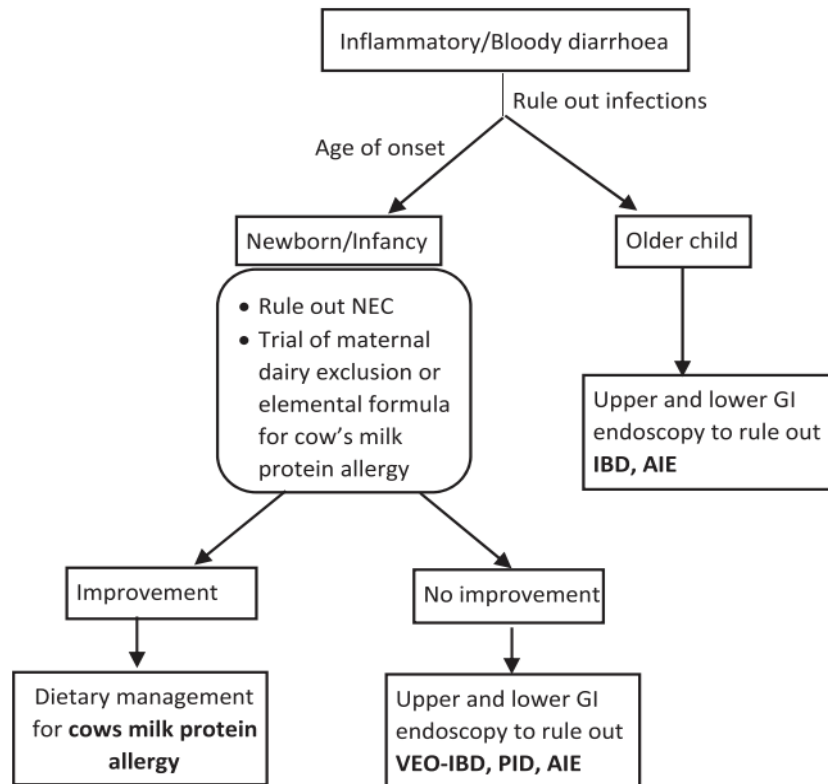


Fig 3: Approach to inflammatory/bloody diarrhoea.

(AIE, autoimmune enteropathy; IBD, inflammatory bowel disease; NEC, necrotising enterocolitis; PID, primary immunodeficiency; VEO-IBD, very early onset IBD)

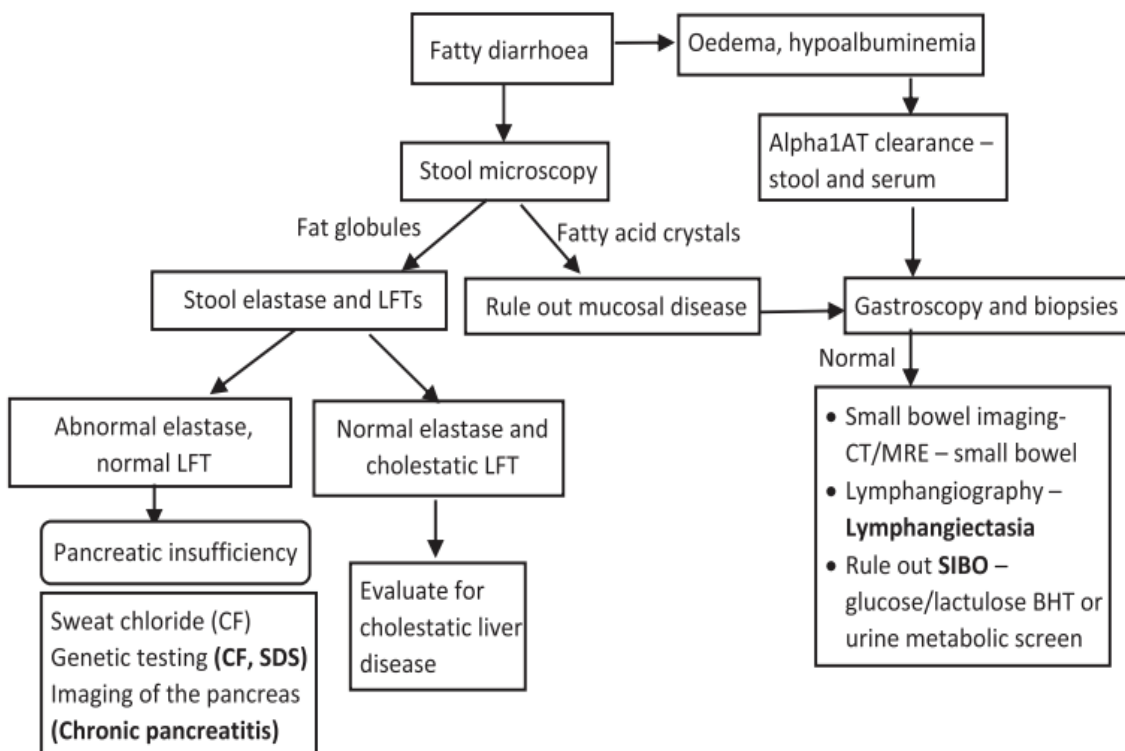


Fig 4: Approach to fatty diarrhoea.

(AT, antitrypsin; BHT, breath hydrogen test; CF, cystic fibrosis; SDS, Shwachman Diamond syndrome; SIBO, small intestinal bacterial overgrowth)

Compiled by: **Dr. Anoop Singh Ranahotra**

Nepal Neonatal and Emergency Paediatric Care Programme (NNEPCP)

Working together to improve the future of neonatal and paediatric care

RCPCH Global has partnered with NEPAS for the creation of the Nepal Neonatal and Emergency Paediatric Care Programme (NNEPCP). With the support of UNICEF, this programme focuses on quality improvement and system development in Madhesh Pradesh government hospitals. We aim to develop clinical knowledge and skills through mentoring and training, support the development of clinical networks and encourage sustainable improvements in these hospitals.



Our approach

Emergency Triage and Treatment Course (ETAT+) – Endorsed by WHO. Currently ongoing in every hospital

External mentorship – Quality support teams composed of a primarily Nepali faculty to offer support, training and guidance during visits to other province hospitals on a quarterly basis. In addition, the use of Global Links Mentors (RCPCH Member Paediatricians and Specialist Nurses from the UK and Canada) enables programme objectives to be delivered effectively by supporting the hospitals in person every week.

Development of networks- Quarterly cluster meetings and the development of a formal neonatal network has enabled better communication, support and collaboration across the province, resulting in better outcomes for paediatric and neonatal patients.

Hospital Improvement Plans (HIPs)- utilised to set achievable goals tailored to each hospital.

Nominated Hospital Champions- To help us implement sustainable change in all hospitals.

Our focus

We use audits to track the impact of our programme, focusing on:

- Triage
- Documentation of vital signs

- Referral systems
- Infection control
- Communication around Handover
- Neonatal resuscitation and first hour of care
- Neonatal sepsis

We empower staff with a solid base of knowledge using:

- ETAT classes
- Medical Officer training for neonatal care
- Nurse shadowing programme in neonatal care



Neonatal sepsis training at Narayani

Our achievements

NEPAS Clinical Standards in Paediatric care – first collaboration of this type undertaken by RCPCH with an international partner, to ensure consistent clinical care

Launching of a mobile application- and revamped NEPAS website with the development of clinical skills videos to support clinical learning.

Implementation of paediatric triage – Enabling the prioritisation of sick children in the emergency and outpatient departments

Implementation of NEWS/PEWS charts- supporting clinical staff in recognising clinical deteriorations and escalating care appropriately.

Improvement in WASH facilities

Opening of SNCU – in most hospitals enabling the provision of level 2 care and reducing the amount of referrals to tertiary centers



SNCU at Gaur Hospital

Successful ETAT training- Occurring in all hospitals

Implementation of newborn examinations- with an aim to roll this out to the rest of the province

Creation of a Neonatal Network- To improve communication and collaboration across the province which will improve neonatal outcomes.

Nurse shadowing programme – Empowering nurses to provide neonatal care in smaller hospitals

Medical Officer training – to support to opening of SNCUs and improve care delivery

Hospitals involved in the programme

- MIHS Janakpur Hospital
- Narayani Hospital Birgunj
- Bardibas Hospital
- Malangwa Hospital
- Gaur Hospital
- Kalaiya Hospital
- Pokhariya Hospital
- Jaleswor Hospital
- Chandranigahapur Hospital
- Gajendra Narayan Singh Hospital
- Lahan Hospital
- Siraha Hospital



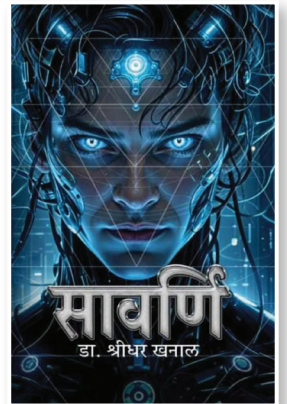
बालरोग विशेषज्ञ डा. श्रीधर खनालको AI युगमा आधारित उपन्यास: सावर्णि

उपन्यासमा सावर्णि, देरिक, देरिका, वासु जस्ता पात्रहरू छन्, तर यी मानव पात्रहरू होइनन्। यी कृत्रिम प्रज्ञा अर्थात् आर्टिफिसियल एन्टेलिजेन्स (एआई) पात्रहरू हुन्। दुटैघनामा सेलिना, मार्टिन, किन्कनी खौचमा खसेर मर्छन्। यी मर्नेहरू पनि मानिस होइनन्। यी सबै एआई पात्र हुन्। उनीहरूले ज्यानमा लगाइएको 'पिए' रोबर्ट अफ हुँदा उनीहरूको प्राण अफ भएको हुन्छ।

कथामा युद्ध पनि छ। युद्ध अहिले भइरहेको जस्तो पृथ्वीका मान्छेहरूको बीच हुँदैन। पृथ्वीका देशहरूबीच हुँदैन। युद्धमा पृथ्वीको उपलपुथलपछि ल्याबबाट एआईले जोगाएका मान्छे र मंगल गृहमा पुगेर बसेका मान्छेहरूको हुन्छ। युद्धमा हतियार प्रयोग हुन्छ। हतियारभन्दा माथिको कुरा प्रयोग हुन्छ। त्यो के हतियार हो भन्ने बुझ्न चै यहाँभन्दा किताब पढ्दै मज्जा आउँछ।



बुकहिल प्रकाशनले ल्याएको डा. श्रीधर खनालको पुस्तक धेरै आकर्षक छ। फिक्सनहरूमा सुन्दै, देख्दै र भोग्दै वा कल्पना गर्दै आएका कथा, पात्र र घटनाहरूमा तलमाथि, सस्पेन्स, थ्रिलर बनाएर लेखिएका समसामयिक उपन्यासहरूको भीडमा 'सावर्णि' फरक छ। साँच्चिकै कल्पनिक प्रचुरता र आख्यानिक मिठास पुस्तकमा छ। पुस्तकको कथा र पात्रहरू केलाउँदा स्क्रिनमा अभ्यस्त नयाँ पुस्ता पनि पल्किने खालको छ। यस्तो लाग्छ, उपन्यासलाई कार्टुन बनाएमा यो बालबालिकामाभ हिट हुन्छ। फिल्म बनाए पनि हल भरिने नयाँ पुस्ताका दर्शक पुग्छन्।



पाल्पा ऋद्धिकोटमा जन्मनु भएका डा. श्रीधर खनाल बालरोग विशेषज्ञ हुनुहुन्छ। अस्तित्व फाउण्डेसनका संस्थापक समेत रहेका उहाँले पुस्तक बिक्रिबाट आउने केही रकम क्यान्सर रोग लागेका बालबालिकाको उपचारका लागि सहयोग गर्नुहुनेछ।